LOCAL AREA PLANNING:
A PROCESS OF CONFLICT RESOLUTION IN
PROVINCIAL/MUNICIPAL LAND USE DISPUTES

by

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B.A., UNIVERSITY OF ALBERTA, 1972

A Thesis Submitted In Partial Fulfilment Of The
Requirements For The Degree Of
Master Of Arts

in the School of
Community and Regional Planning

We accept this thesis as conforming
to the required standard

THE UNIVERSITY OF BRITISH COLUMBIA
April, 1976

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Conflicts between the Province and municipalities over the development of Provincial land holdings are a common occurrence in Provincial-municipal relations. It is inevitable that a municipality and the Province will come into conflict because of the differing communities of interest that they serve. This is especially true when, to be effective, one jurisdiction must depend on the cooperation of another.

Conflict is often the result of the unexpected impact of a government project. The Provincial Government holds large amounts of land and is a very major developer. Its projects are often large. The municipality is expected to exercise land use controls and must absorb the immediate impacts created by the Provincial project. Yet the success of any government depends, in large part, on its sensitivity to the validity of other concerns which may exist. For example, traffic congestion, increased parking, noise, decreased property values, pressure to change land use are the types of concerns which may arise.

In addition to the concerns expressed by government, citizens have been playing a more explicit role in the decision-making process. This has increased the spectrum of concerns which decision-makers must account for thereby heightening the potential for conflict.

The resolution of land use conflict then, is a common situation for a planner. The potential for conflict is increasing due to pressures of urbanization. It is these pressures which have increased the need for greater cooperation between the Province and municipalities in order for them to carry out effectively their respective mandates. The mechanisms for
resolving conflict then become very important if the different levels of
government are to be effective in optimizing the public interest.

This thesis examines the potential of citizen participation as a mech­
anism for resolving Provincial-municipal land use conflict. There are
many possible forms of citizen participation and their effectiveness varies
with numerous factors.

To determine whether citizen participation aggravates or alleviates
Provincial-municipal conflict the author constructed a hypothetical citizen
participation model and tested it against a case study. The case study
was the proposed expansion of the Shaughnessy Hospital by the British Col­
ymbia Medical Centre. The author chose local area planning, a current
means of citizen participation practised in Vancouver, as a potentially
resolving influence in land development disputes between the Province and
the City of Vancouver. It was hypothesized that:

The resolution of Provincial-municipal land
development conflicts would be improved by
the establishment of a local area planning
process in affected parts of a municipality.

The study method included a survey of pertinent literature and anal­
ysis of documentary evidence of a relevant case study. It established the
sequence of events and the various communities of interest in the case
study. The main source of data was a series of ten structured interviews.
These interviews were with representative people with different degrees of
involvement in the case project and varying perspectives on citizen partic­
ipation.

To the author's knowledge, so far no attempt has been made to monitor
the area planning process with respect to its ability to alleviate Provin­
cial-municipal land use conflict. This thesis served as a first attempt. Consequently generalizations on its effectiveness in resolving conflict cannot be made. However, the findings supported the contention that a consensus building force should exist if the process of conflict resolution is to be improved. In this case the consensus force was the citizen group. The research showed that the effectiveness of citizen involvement, as a conflict resolving influence, was enhanced by organization and access to information and technical expertise. This would enable the citizen groups to present a better prepared case. It was the organizational ability and access to technical expertise which implied that an area planning process would improve the effectiveness of the citizen position in the decision-making process. On the basis of this evidence it was concluded that local area planning, in this case, would have aided the process of conflict resolution.

There is a lack of data and experience comparing existing area planning processes with each other and with other forms of citizen participation. This indicates that before effective generalizations can be made of the ability of area planning to alleviate Provincial-municipal conflict that further comparative case studies be undertaken. It is recommended that the current area planning process be monitored and that structural analysis be undertaken of who makes decisions and how they are made. This is distinct from participation where groups are involved in the process and present their case. However, after their presentation it is up to the decision-makers to make the decision.
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ACKNOWLEDGEMENTS

I would like to thank my wife Betty, for her understanding, patience and encouragement. Her love and support made these past two years a more rewarding experience than would otherwise have been possible. I would also like to extend my thanks to my advisors, Dr. H.P. Oberlander and Mr. G. Stead. I consider myself very fortunate to have been able to work with these two men.
CHAPTER 1

1.0 Introduction

1.1 Problem Statement

Canada has a federal system of government. Two senior governments (Federal and Provincial) share power each having its own area of jurisdiction. Within their jurisdictions they are able to delegate their authority as they wish. Municipalities are created by the province to exercise specific local functions on its behalf. The delegation of municipal authority to cities, represents acceptance by the province that certain types of issues, such as local land use regulation, are best handled at the local level.

Section 92 of the British North America Act contains the matters of exclusive Provincial jurisdiction. Subsections 8, 13 and 16 of Section 92 relate to the authority of the province to create and delegate constrained legislative authority to municipalities.

92. In each Province the Legislature may exclusively make Laws in relation to matters coming within the Classes of Subject next herein-after enumerated; that is to say -

8. Municipal institutions in the Province.
13. Property and Civil Rights in the Province.
16. Generally all matters of a merely local or private nature in the Province.

The municipal level of government serves a community of interest vastly different from that of the Province. Its scope is limited to local issues. However, in exercising their respective authority, provincial and municipal governments often come into conflict. This is a natural consequence when two governments, in exercising their authority, impinge on one
another's jurisdiction.

This thesis examines the conflict which arises between the Province and a municipality over the development of provincially owned land within municipal boundaries. The communities of interest are the Province and the municipality. The Province owns and manages large amounts of land on behalf of all British Columbians. Several government departments manage land for specific purposes in the name of the Province. The municipality is responsible for regulating land use within its boundaries on behalf of its citizens. However, Provincial land is not subject to municipal regulations.

R. Simmons (1970) estimates that twenty percent of all land in Canadian urban centres exclusive of streets, is owned by the three levels of government.

For example, the Federal Government is the largest single land owner in Vancouver. The Provincial Government owns at least 600 acres of land and water in Vancouver. The City of Vancouver owns 117 properties throughout the City. This land makes government at all three levels the largest single land owner and a very major developer.

Provincial government undertakings often have considerable local impacts. The municipality, with its responsibility for local transportation and infrastructure must bear the impacts. Thus the potential for Provincial-municipal conflict over land development exists in every municipality in Canada.

Conflict is further heightened by the involvement of local citizens. Because there is little undeveloped land remaining in most urban municipalities, development often occurs in or near established residential areas. The immediate local impact is felt in these areas and so often the Province must contend not only with the municipal council but also groups of concerned
citizens.

Citizen groups are demanding, and getting, opportunities to play a greater role in making decisions which affect the future of their neighbourhoods. Vancouver now has certain neighbourhoods with their own local planning advisory committees (Vancouver City Planning Department, Shaping the Future, 1974). As a result more groups and agencies are involved in the actual process of making a land use decision.

It is this writer's intention to determine if the local area planning program of the City of Vancouver can be used as an effective vehicle to help resolve Provincial-municipal conflict over the development of Provincial owned land.

1.2 Objectives

1. To determine the acceptability and applicability of a decentralized decision-making system on the process of intergovernmental conflict resolution of land development issues.

2. To examine the nature of Provincial-municipal conflict over land development.

3. To outline a process which accounts for decentralization which would alleviate intergovernmental land development conflict.

Definitions

A vast amount of material exists on the concept of decentralization. Ferry (1974) in his Master's thesis "Conditioning of a Planning Team" has an extensive literature survey of the term. Quoting from the U.S. Advisory Commission, 1972, Ferry defines decentralization as:

a public policy issue, a means of increasing bureaucratic responsiveness, improving service
delivery, reducing citizen alienation and restoring grass roots government

Perry (1974) defines three types of decentralization. Territorial decentralization refers to the distribution of field offices away from the central authority. This is a physical and not power decentralization. Administrative decentralization is the partial transfer of policy formulating ability to sub units of the same system. Political decentralization refers to the complete delegation of policy and program authority. In this type of decentralization responsibility lies with the constituent units of the central administration. The central agency acts in an advisory capacity.

The Concise Oxford Dictionary defines decentralization as "to confer local government upon". It implies the creation of delegated authority, to be exercised by subordinate bodies within constraints imposed by the senior level of government. It is not synonymous with participation.

1.3 Significance of Research

Resolution of land development conflicts is a common situation confronting planners. Citizens are becoming more vocal in their demands for greater participation. On the other hand, problems created by urbanization have increased the need for greater cooperation between the Province and municipalities. Each must be able to carry out their mandates effectively and yet be sensitive to the validity of other concerns which arise in the course of their work.

Conflict is a natural occurrence when two levels of government attempt to carry out their respective functions in situations where the success of one depends on the cooperation of the other. However, the growth of citizen participation in land development decisions adds another level of concern which must be incorporated into intergovernmental negotiations.
What has been the impact of this citizen involvement? Has it proven to be a useful tool in alleviating Provincial-municipal land use conflict? Vancouver's Area Planning program has not been monitored to determine if it is an alleviating or aggravating influence on conflict resolution. Would other forms of citizen participation be more conducive to resolving intergovernmental conflict over land development.

For the purpose of this thesis it is hypothesized that:

The resolution of Provincial-municipal land development conflicts would be improved by the establishment of a local area planning process in affected parts of a municipality.

1.4 Scope of the Thesis

The research focuses on the case of the dispute between the Government of British Columbia and the City of Vancouver over the construction of a major new referral hospital on the site of the Shaughnessy Veteran's Hospital. Local area planning, as it is practised in Vancouver, is the subject of the case.

The research will examine the range of opinion regarding decentralized decision-making and neighbourhood political authority. The differing communities of interest will also be studied.

An examination of the nature of Provincial-municipal land development conflict will be made. The factors influencing the conflict, the size and scale of the development and the characteristics of the participants and their jurisdiction will be investigated to determine the course of events and the impact of the citizen participation.
1.5 Thesis Outline

Chapter two presents the literature review on the theory and experience with neighbourhood participation in Canada and the United States. It discusses trends towards centralization and decentralization and outlines a model of a decentralized system to be tested in this thesis.

Chapter three is the methodology. It uses the case of the British Columbia Medical Centre's plans to build a new Provincial referral centre on the site of the Shaughnessy Veteran's Hospital. This example is chosen because it is a current event and applicable to the topic of Provincial-municipal conflict resolution. In addition a local area planning process was proposed but not carried out. Therefore, it is possible to speculate on what its impact might have been had it been implemented.

Chapter four reports the findings from the literature review, documentary evidence and personal interviews. The hypothesis is tested in this chapter using the results of the findings.

The conclusions are presented in Chapter five. The impact of citizen involvement and the applicability of area planning to the process of conflict resolution is assessed. Following the summary of the research some recommendations for further study are made.
CHAPTER 2

2.0 Towards a Decentralized Decision-Making Process

2.1 Literature Review

Kornhauser (1959) noted the increasing tendency of government to centralize decision-making authority. In land use control such centralization is a more recent phenomenon according to Bosselman and Callies (1972) who demonstrate an increasing willingness on the part of American states to take over certain functions of land use control normally exercised by local administrations. The passage of the British Columbia Land Commission Act is a Canadian example of similar legislation. Formerly control of land use in British Columbia rested with the municipalities. Now land which has been designated as agricultural land reserve is directly controlled by the Land Commission.

Kornhauser (1959) feels that this tendency of senior levels of government to centralize functions is due to the pressures of urbanization. The complexity and costs of the urbanization process are seriously taxing the powers of local governments to deal with them. By removing authority from the lowest levels of government (those which are the closes to the individual citizen) the effectiveness of input from the both the local jurisdiction and the citizen is reduced. The following quotations explain why:

It is much more difficult, even for people who are attached to community groups, let alone for people without such attachments, to acquire information and understanding concerning larger society. (Kornhauser, 1959, in Walton, 1973)

... Members of self governing groups are more and more removed from effective participation and control in their own organization. (Kornhauser, 1959, in Walton, 1973)
Their access to decision-makers is reduced and their influence is lowered because of the competing claims for attention by other local interests.

Developing concurrently with this tendency towards centralization, Kornhauser (1959) identifies three aspects which will necessitate new types of participation. The growth of suburbanism which allows people to function at a neighbourhood level; the growth of leisure time which provides a new resource for participation and finally the growth of professionalism in all types of organizations which provides special competence for groups and increases their influence.

Walton (1973) concurs with Kornhauser's observations on centralization. However, he notes an increasing trend that shows local communities becoming more oriented to outside systems. For example, he cites the example of the local labour union amalgamating with a national body. The result is that local autonomy is decreased, local cohesion reduced and the local area is left with a narrower scope of action.

2.1.1 The Case for Decentralization

The trend towards centralization has not gone unopposed. Friesema (1971) and Lindblom (1965) both argue that central control is not always in the best interest and that other means are available.

Friesema states that it is

implicit that central coordination is not always the best answer and that some form of mutual adjustment among groups is sometimes more efficient. (Friesema, 1971)

Lindblom feels that

people can coordinate with each other without anyone's coordinating them, without a common purpose and without the rules that fully prescribe their relations with each other. (Lindblom, 1965)
Agger (1964) attempts to answer the question of why people want to participate.

For some participants political demands may represent narrowly defined, institutionally related preferences: for others, political demands may stand for broadly defined cross institutional preferences. (Agger, 1964)

A wide range of opinion exists as to the scope of participation. (Maass, 1957; Arnstein, 1969; Van Til, 1970; and Friesema, 1971). In effect a continuum of participation exists with increasing amounts of power diffused downwards as the continuum proceeds closer to complete devolution of power to local groups.

Zimmerman (1971) writing on American urban problem states

from the perspectives of the ghetto resident, city government appears distant and unconcerned, the possibility of effective change remote. (Zimmerman, 1971)

He concludes that the feelings of many people are that the possibility of influencing the decision-making process is remote. They have a feeling of alienation and powerlessness partly brought about by a ponderous administrative structure and remote decision processes.

On the other hand we live in a democracy and as Van Til (1970) says the most important function of a democracy is to promote the intelligence of the individual. There are many forms of participation such as voting, but Van Til feels that citizen participation is a variation on the theme of political representation. Arnstein (1969) goes farther by saying that there can be no participation without power.

Agger (1964) joins the list of authors seeking to find a suitable definition of participation.

We shall assume that political participation is an ever present, necessary, intervening variable between such economic or social variables and
the scope of government. The scope of
government cannot change unless and until
more people participate that is, act in
political decision-making. (Agger, 1964)

According to Agger the purpose of participation is to pressure govern-
ment and to promote change in government scope.

Political participation is action intended
to affect the attitude of others in pursuing
preferences for a certain scope of govern-
ment. (Agger, 1964)

Agger feels that participation concurs with a pluralistic approach in
government. A pluralist approach recognizes numerous holders of power and
that power is not static but changeable with respect to the access groups
and individuals have to influence power. If the scope of authority changes
it is because certain groups have access to authority and are able to influ-
ence it (Agger, 1964). This point stresses the difference between partic-
ipating in the decision-making process and actually sharing the authority to
make a decision. In the former case citizens may have varying degrees of in-
volvement but the authority to make decision lies with another group. They
must rely on influence and persuasion. Where power is shared, the component
groups must accommodate one another in order to attain a satisfactory result.

As mentioned earlier, Arnstein's (1969) premise is that citizen part-
icipation involves a redistribution of power so that those formerly excluded
from the decision-making process are involved in sharing data, setting goals
and policy, allocating resources and operating programs (Arnstein, 1969).

Arnstein's typology of participation consists of eight basic levels.
The lowest levels are manipulation and therapy. She maintains that these
are not participation but merely education of the population by the power
holders. The next three levels (informing, consultation and appeasement)
she terms tokenism. In these cases people are allowed to be heard but there
is no guarantee that they will be heeded. Participation becomes more effective in her last three levels, partnership, delegated power, and citizen control. Partnership allows people to negotiate and engage in trade offs, Delegation and citizen control result when citizens are given power, or attain majority influence or full power.

In 1957, A. Maass observed a growing tendency for interest group participation in decision-making. He felt that this trend was beneficial because it equalized the opportunity for protecting and furthering group interests. These groups provided extended sources of information and served as a means of building support for a project.

Later Maass (1959) wrote about a correlation which he believes to exist between area and power. Essentially his argument is that to govern effectively a government's power must be exercised in proportion to the size of the area. Thus a metropolitan area would need wider powers than an individual municipality. The government must be able to govern generally.

In terms of our analysis such a general power to govern must include a wide range of governmental functions, a capacity to use all processes of government, and a constituency largely autonomous of other government or units of government. (Maass, 1959)

Maass terms the exercise of dispersed power as an "areal division of power" (Maass, 1959). If the amount of power of a local jurisdiction is to be expanded it must be accompanied by a corresponding reduction of power at higher levels. But in order to be more effective the area of jurisdiction of the municipality, for example, would have to be expanded to cover a broader area because of the relationship Maass believes exists between area and power. While quantification of this relationship is difficult Maass believes that it is possible to order the levels of government.
In most cases the higher level will be stronger if its government is selected and controlled by a unique constituency rather than by organs of constituencies of lower levels. (Maass, 1954)

Maass supposes that the effective exercise of government functions is enhanced if the government is not dependent or responsible to other governing bodies within its jurisdiction.

The significance of an areal division of power over a more centralized system is that it is "always associated intimately with the basic values of the community; areal division of power is an instrument for realizing these values". (Maass, 1959)

Ylvisaker built on Maass's ideas of an areal division of power. He states that it "helps realize the basic instrumental values of society, but we have no proof." (Ylvisaker, 1959). He concurs with Maass that the general power to govern helps ensure the survival and effectiveness of an areal division of power. He further states that the area in question must have diversity "to transcend communities of interest among several components". (Ylvisaker, 1959).

In his studies of urban ghettos Altshuler sensed that control at the local level is seen as a means of improving conditions and allowing these minority groups to experience a feeling of majority. Earlier Eldredge (1967) and Arnstein (1969) came to a similar conclusion.

The activist leaders of the rebelling inhabitants from our urban ghettos vociferously claim that nothing can be done for them only by them and most certainly with them. (Eldredge, 1967)

People are simply demanding that the degree of power (or control) which guarantees that participants or residents can govern a program or an institution, be in full charge of policy and managerial aspects. (Arnstein, 1969)
Altshuler (1970, in Feagin, 1973) notes some additional reasons why decentralized power is desirable. Firstly he feels that decentralized power is a conservatizing force because it gives people responsibility. This means that people must begin to grapple with problems instead of criticizing them from the sidelines. He feels that "distributing responsibility widely would spread competence throughout society" (1970). Also, he feels that widespread participation in government is a value in itself, noting its utility as an instrument of democratic education and socialization. Participation can build confidence in the existing political system by showing that it is fair and aids in reconciliation and amelioration of conflict. (Altshuler, 1970; in Feagin, 1973).

The case for centralization covers a broad spectrum of what it is and what forms it may take. Authors are not agreed on the degree of authority which should be devolved downwards. However, those who support the concepts of decentralization and participation believe that these aspects improve the decision-making process by making the opportunity to protect and further group interests more equal.

2.1.2 The Case against Decentralization

The comments expressed by authors such as Agger, 1964; Arnstein, 1969; Friesema, 1971 etc. are arguments in favour of participation and not necessarily decentralizing power. Decentralization may be a dispersal of administrative capacity. It more commonly refers to the dispersal of power.

American planning experience is very much concerned with social problems. Some opponents to decentralization of power feel that this step would increase separatism. (Arnstein, 1969; Zimmerman, 1971; Friesema, 1969; Altshuler, 1970 and Eldredge, 1967). Respecting land use control the power to exclude
people is also inferred. Opposition is also engendered by those who claim that decentralized control fragments provision of public goods and services and makes them more costly and less efficient. Further opposition is created by feelings that radicals will take over and be equally as unacceptable as the situation which was replaced. Another reason for opposition is that it is incompatible with the merit system and professionalism. This means that the most professionally competent persons should run the program. (Van Til (1970; in Walton, 1973) notes that the active participation of the poor in poverty programs has not worked out well. They conclude this is because the poor do not have adequate time to participate fully because their personal problems are too great to be burdened with additional responsibility. Also they feel that existing institutional arrangements militate against their effective participation.

One of the main objections to participation is that it is inefficient in terms of monetary resources and in attaining desired results. Burns (1973) and Beecroft (1971) recognize the need for improved participation of municipalities in policy formulation commensurate with their importance. Beecroft feels that the trend for municipal participation is towards some form of consolidation such as to a metropolitan or regional form. Burns states:

... any effective progress in municipal rationalization must come from the senior level of government. If left to local initiative, too many local pressures work to the detriment of any logical development. (Burns, 1973)

There are a wide range of reasons opposing decentralization. The most common are that it is inefficient in decision-making and encourages parochialism at the expense of the public interest.
2.1.3 Discussion

Arnstein (1969) and Zimmerman (1971) concede that these criticisms are valid but are not sufficient to limit active control by citizens. Instead they feel that these objections signal the location of trouble spots which are solvable. For example, Zimmerman feels that the question of parochialism is solvable through a federated structure. The charge that local citizen boards are not responsible and are open to corruption is not a function of size. The observation that citizens are not competent may be countered by arguing that most new governments require experience before they become acquainted with the problems of governing. (Zimmerman, 1971).

Zimmerman (1971) also notes an objection to citizen control that it does not revitalize democracy. Earlier it was shown (Van Til, 1970) that a function of democracy was to promote the virtue and intelligence of the citizen and that this was possible through effective participation. However, the low voter turnout normally associated with local elections leads opponents of participation to conclude that the process of democracy is not enhanced by increasing the opportunity of participation.

Altshuler counters the argument about greater inefficiency of decentral power by evaluating community control on a basis other than efficiency.

Would community control be conducive to the development of skills, incomes and improvements of conditions? (Altshuler, 1970; in Feagin, 1973)

If efficiency is the sole criteria it can produce equally negative results. (Altshuler, 1970; in Feagin, 1973). He does not question that community control is inefficient.

Would community control increase efficiency? The issue, it seems, is less clear cut than it sounds. The answer will largely depend on whose conception of problem and purpose one adopts. From a somewhat different per-
spective it is likely to depend on whether one interprets the question to be about efficiency in the small or in the large. (Altshuler, 1970; in Feagin, 1973)

In the Canadian context Plunkett (1955) writes:

What we really desire is efficient local government in the sense that it responds to the community's needs and aspirations, that it permits maximum participation of local citizens in the direction and control of local affairs and that, within this framework local undertakings are administered economically and efficiently. (Plunkett, 1955)

Despite the opposition to decentralization and participation there seems to be a general willingness to experiment. The "Model Cities Program" in the United States is an example of an attempt to encourage greater participation of citizens in decisions which affect their neighbourhoods.

The Model Cities Program was implemented under the Demonstration Cities and Metropolitan Development Act of 1966. The basic concept of this program was that the "improvement of the quality of life in the participating neighbourhoods can only be accomplished through personal involvement of neighbourhood residents in the program." (Hruza, 1972). The program was an attempt by the Federal government to develop a problem solving mechanism that could aid those urban areas of the United States which were experiencing particularly severe stress conditions.

The program made Federal funds available to designated cities to undertake a Model Cities project. The approach allowed the city a high degree of control over setting of the objectives of the program in its area and in the implementation of the program. In return for Federal funds the city had to demonstrate:

1. that the resources of other departments, with programs designed to alleviate urban problems,
are coordinated in that neighbourhood;
2. coordination of Federal, State, Local, Public
   and Private initiative was encouraged and
   supported;
3. there was special funding for innovative projects;
4. technical assistance was made available to the
   residents;
5. local citizens were involved throughout the process.

The approach of each project was to be comprehensive in order to co-
ordinate the full array of existing programs designed to alleviate urban
problems.

Cason (1970) states that citizen participation, in the Model Cities
program, in order to be effective, would involve:
- representativeness
- technical assistance and finance
- independence from the establishment
- no dominance by one community faction
- exposure to positive educational and training
  experiences to increase their confidence
- develop a decision-making mechanism to enable
  the citizens to respond to situations effectively
  and rapidly. (Cason, 1970)

Kaplan, Gans, and Kahn (1970) have stated that the Model Cities program
had to illustrate an increased capacity of local residents "to respond to
the range of model neighbourhood area problems in a coordinated and innov-
ative way - a way that is consistent with residential needs and priorities". Much reliance was placed on local initiative and commitment.
The Neighbourhood Improvement Program * is an example of a Canadian effort to improve local conditions through local involvement. The scope of NIP is less than that of the Model Cities Program. It deals primarily with improving the physical qualities of a neighbourhood (housing, infrastructure, daycare, recreation) whereas the Model Cities Program is also concerned with employment, education, and promoting racial equality. The major similarity of the two programs is the importance placed on the involvement and participation of area residents in planning and implementation of local programs.

In Vancouver, area planning is included as a component in designated Neighbourhood Improvement Projects. This enables area residents to have access to planning expertise and advice. However, an area planning process can and does function separately from neighbourhoods which are designated under the Neighbourhood Improvement Program.

Administrative aspects have been decentralized to allow greater participation in some types of decisions on a localized basis. The Vancouver Local Area Advisory Planning Committees are an example. In these neighbourhoods representatives are chosen and have the responsibility of advising City Council on land use matters within the neighbourhood. They also have control over their own budgets subject to Council veto.

Walton (1973) feels that the trend is towards dispersion of power due to recognition of pluralism in society and the forces of change. For example, Altshuler states;

No society adopts fundamental change because the dominant groups have suddenly acquired virtue or become horrified by waste. (Altshuler, 1970; in Walton, 1973)

* The Neighbourhood Improvement Program is contained in Section 27.1 and 27.2 of the National Housing Act.
2.1.4 **Canadian Situation**

American and British experiences in local administration provide Canada with an attitude regarding citizen involvement different from that of the United States where ethnic factors have led to a demand for participation far more insistent than in Canada.

The focus of power decentralization for this thesis is the municipal level of government. Canada has inherited the Council-Committee form of local government from Great Britain. (Plunkett, 1955). Essentially this is a system where Council delegates its administrative responsibility to various committees whose function is to give detailed review to matters under their concern and to make recommendations to Council. The Council retains approving authority.

In exercising supervision over the administrative function assigned to it, a committee initiates policy in the form of reports and recommendations... but it cannot usually do more than initiate. (Plunkett, 1955)

The Council remain accountable to the electorate for exercising power because of the concept of responsible government inherent in the British and Canadian system. Power is exercised by the consent of the governed and once elected a municipal government may only be removed from office by the Provincial Government without a local election. Thus, at the municipal level, bearing in mind the fact that municipalities only have delegated power, Council is supreme in exercising its power. This is their responsibility and has been conferred on them by the provincial government. In exercising their power, Councils require good advice and the committee system improves the quality of advice available to Council. An important function of the committee system is to reduce the work load of Council by undertaking the substantive work of many different facets of local administration. This frees
Council to concentrate on policy matters and enables the business of running a municipality to be efficiently carried out.

The power to govern municipalities may not be redelegated. This accounts for Councils' unwillingness to disperse their legislative authority.

A problem faced by municipalities is whether policy formulation and municipal administration should be separate. The Committee system accepts that the two are interdependent.

The task of formulating policy cannot be completely divorced from administration, for the knowledge of problems involved in administration frequently influence the course of policy. (Plunkett, 1968)

In the United States, policy formulation and municipal administration is separate. Administration is controlled by a City Manager. Some Canadian cities have evolved a form of city manager to coordinate the activities of the numerous committees.

Vancouver is an example of the Council-Committee system of municipal government (Bernard et al, 1975) but does have a City Manager responsible for coordinating committee activities. There are six standing committees of Council, each with its own mandate. These committees exercise some power in their area of jurisdiction. The Committees of Civic Development and Community Development are responsible for planning matters. It is through these committees that the citizen advisory committees report to Council.

In addition, three special committees exist. They have specific terms of reference but no power. Local area citizen's advisory committees or committees like the Shaughnessy Hospital Citizens Advisory Committee exist outside of Council. No Council members sit on them. The following diagram illustrates the relationship of the Standing Committees to the Civic Administration and City Council in Vancouver.
The powers of Vancouver City Council are enumerated in Part three of the Vancouver Charter, a piece of Provincial legislation. These powers are to be exercised by Council through by-laws or resolutions. This is the legislative authority which may not be delegated.

It would appear on the basis of the preceding literature that a situation exists which demands that centralization occur to make policy formulation and implementation practical and efficient. On the other hand, considerable pressure exists to provide greater decentralization of legislative and administrative functions to improve bureaucratic response and grassroots democracy. This dichotomy is an obvious source of conflict.
2.2 Nature of Community Decision-Making

In *Urban Political Systems*, Kaplan (1967) lists a number of characteristics of local decision making units. Bodine's (1967) contribution to *Taming Megalopolis* also characterizes decision making at the local level. In general, they conclude that:

1. there is a weaker commitment by members of the system to the local level.
2. the local system is weakly integrated.
3. apathy is more pronounced.

Bodine (1967) concurs with some of Kaplan's observations.

The inadequacy of suburban governments to deal with expanding urbanism is all too familiar. With few exceptions they are too small, too numerous, too weak, too poor to formulate effective policies to carry them out. (Bodine, 1967; in Eldredge, 1967)

Kaplan feels that there are several factors which cause local decision units to exhibit the above features. The first factor is the specificity of local issues. Because they are so specific (eg. traffic lights) it is difficult to fit these into an idealogical framework which would enable them to be considered as higher level issues. Secondly, most municipalities in North America were created by senior governments and rely on them for considerable financial support. Local groups lack resources and organizational skills.

Local groups are less likely to understand the issues, to relate the issues to group interests, or to draft alternative policies that would protect and enhance group-interests. (Kaplan, 1967)

Consequently, local groups are at a disadvantage compared to the national or provincial government.

Kaplan (1967) observes that local politicians, because of their depen-
dence on senior governments are less assertive than their federal or provincial counterparts. A local politician is often less articulate than a senior level politician and devotes only part of his energies to politics. According to Kaplan a local politician is

... unwilling to devote full energies to politics not yet committed to a career as a professional politician and sometimes using politics primarily to promote their private interests. (Kaplan, 1967)

Kaplan feels that the chronic low voter turnout at local elections indicates a lower level of commitment by the citizen to local government.

The local community is a social system whose membership changes freely and frequently. Most of the members seem unconcerned with the future of the system. (Kaplan, 1967)

Conversely, it may also be said that the low voter turnout indicates a degree of satisfaction with what is happening.

Local government is often said to be the closest to the citizen in terms of access (Beecroft, 1970). For Kaplan this means that greater reliance is placed on "personal contact" when determining the outcome of an issue.

Kaplan's last specific feature about community decision making is that the local unit is more homogenous than the entity of which is it a part. The neighbourhood's internal structure is less differentiated which provides less opportunity for internal competitive politics. Instead "consensual politics" (Kaplan, 1967) are used in internal decisions.

Superimposed on the characteristics of community decision making is the prevailing "political culture" (Kaplan, 1967). The political culture in Canada varies from city to city but is salient features are noted below. Kaplan describes the political culture of Canada as "deferential". That is a general willingness among the population to let our leaders settle things. (Kaplan,
Attempts to define the Canadian political culture and to distinguish it from the American have emphasized the greater respect in Canada for law and order; the lesser importance in Canada of individualism, experimentation and a spirit of revolt, and the greater strength in Canada of an aristocratic or class tradition as opposed to an egalitarian tradition. These aspects of culture may produce in Canada as they do in Britain a willingness to let public policy matters be handled by the official's greater understanding of the issues and to rely on the official's self restraint for the protection of one's rights. (Kaplan, 1967)

Canadians, it seems, hold a unitary rather than a pluralist view of the public interest. In the unitary view, informed persons in positions of authority, proceeding in camera and free from political pressures, search out the public interest. Canadians seem less willing than Americans to accept the notion that the public interest will emerge through the open agitation of issues and the open clash of opposing groups in a free political marketplace. (Kaplan, 1967)

It is Kaplan's belief that these values are held by individuals prior to the creation of the system. Once the system is formed, these values become a part of it since they are imputed to it by its components.

Agger (1964) shows the difference between local politics between Canada and the United States. The most prevalent political ideology he noted in 1964 valued harmony, wanted broad based participation, united leadership and prior consultation. As Kaplan has noted, Canadians seem more willing to allow their leaders to settle matters.

Bolan (1969) would agree with Kaplan's views on local government. His feelings were that the "ideals and procedures effective for the national or state (provincial) level bear little relation to governance of cities". (Bolan, 1969). The issues, scope and time frame are different and it is the
varying political, social and economic environment which influences decision making.

... the time horizons and issues that have preoccupied planners are largely irrelevant and local governments are so disorganized, fragmented, dispersed and incompetent that no injection of rational planning (even when relevant) can survive such a political culture. (Bolan, 1969)

Local governments are the first level of government to experience directly the impacts of urbanization. Writing on British traffic problems, Buchanan (1961) states that "the problems of traffic are crowding in on us with desperate urgency". Due to this crisis atmosphere decisions at all three levels of government tend to be made quickly in order to ameliorate the situation (Bolan, 1969). Continuous participation is not always possible but the lack of involvement in the formative stages has potentially serious consequences.

... people who do not participate ... are less likely to understand what is going on, and this lack has had particularly serious consequences. (Kornhauser, 1959; in Walton, 1973)

2.3 Towards a Decentralized Decision Making Model

In 1969, M. Kaplan characterized citizen participation organization as shifting and varied communities of interest which change with the issue in question. Member responsiveness is low and the degree of involvement depends on the stakes the individual perceives to be involved. Due to alienation and lack of experience local groups are suspicious of senior levels of government. Their own lack of resources and limited strategies available to them contribute to their feeling of powerlessness.

Friesema (1969) observed of American minority groups who have or are
about to acquire control of major cities through their numerical superiority, still will not achieve the gains political power should bring them. This is because the federal system leaves municipalities dependent on senior levels of government which are controlled by the suburban population. Some real gains are made but unless they have lasting value and are what was expected Friesema (1969) is concerned that the feeling of alienation will increase.

A decentralized system must attain positive visible results (Friesema, 1969). It must recognize the inherent diversity and complexity of local government. (Ostrum, 1971; Bodine, 1967; Bolan, 1969). Local commitment must be improved (Kaplan, 1967; Bodine, 1967) and leadership and resources made available.

Bodine (1967) feels that the prime obstacle to be overcome is the present nature of the system. For this thesis the system is the relationship between municipalities and the province in the area of land use control. Bodine does not expect overnight changes but emphasizes patience and hardwork.

"... the fuel for that first indispensable step must come not from pressure, but from patience; not from prominence, but from humility; not from wealth, but from vision; not from power, but from dedication. (Bodine, 1967; in Eldredge, 1967)"

Bolan (1969) outlines four basic ingredients required by decision making systems; an ability to evaluate community circumstances; to determine goals, objectives and implementation strategies; an integration mechanism to accommodate other interests; and ability to select alternatives.

In addition, Bolan outlines four additional variables:

1. roles of participants

2. prevailing "organizational arrangements ... and their influence in structuring the roles of actors and in determining complexity of problem solving arrangements (Bolan, 1969)."
These arrangements are the decision-field which is affected by leadership and social differentiation in the community.


4. Character and origin of issues.

Bolan's conception of setting up a decision-making process follows five steps.

1. Definition and structure of proposals
2. Identify alternatives
3. Identify decision field
4. Carry out social transactions
5. React to consequences

Bolan (1969) specifies that the persons playing roles must have skill, motivation and opportunity. The decision field is affected by two features. The first is the "decision environment" which is the formal legal structure. If the decision environment is highly focussed and centralized there is a greater propensity for action than if power is widely dispersed. Informal elements of the decision environment are the real and imagined stakes a person feels he has in a decision. A further influence on the decision environment is the homogeneity of the decision unit. If this group has numerous goals time will be lost determining priorities.

The "decision-unit" is the second feature influencing the decision environment. These are the groups which make decisions. Bolan feels that they must have a source of power which increases their stability and confidence. Decision units must be accountable and disciplined in order to achieve their goals. The roles of the unit members and the groups itself must be clearly articulated. Operation will be improved if people know what is expected of
them. The area of responsibility should be as narrowly defined as possible to effect action. If the decision unit is broadly comprehensive it is less likely to effect action because of uncertainty as to its ability and knowledge.

The variable of intervention and planning strategy is affected by two factors: "planning strategy and action strategy" (Bolan, 1969). Planning strategy involves: planning position, method of intervention, content, characteristics of public issues and specificity of means (Bolan, 1969). Planning position is affected by the degree of power assigned to it. An advisory group may have less influence than a group exercising legislative powers. The method of planning intervention may be more successful at the local level if it is opportunistic and incremental. This approach is consistent with the fact that many local planning issues are closely related to the citizen's daily lives. Kaplan (1967) would maintain that the Canadian point of view would be more tolerant of the broader public interest. Consequently the individual citizen would be more likely to let his leaders deal with the issue.

Planning content should relate to the immediate needs of the citizens. If plans specify the means to an end these plans will tend to be more successful than those dealing in generalities.

The method of intervention variable is related to the allocation of resources, the degree of change sought in social behaviour and institutional structure. Generally the less the status quo is disturbed the more likely that a proposal will be adopted. (Bolan, 1969).

For the fourth variable, (Characteristics of public issues), Bolan hypothesises that positive action is more likely when the consequences of the action are easily predictable, easily accomplished (cost and effort) and lie within the present preferences which are held by the decision unit. The distribution of costs and benefits influences the decision makers. If an unaccept-
able amount of uncertainty exists, action may be deferred. The amount of coordination to achieve a desired result can influence the action taken. A small unit is more manageable than a large unit and thus more conducive to action. Finally, public issues are influenced by the ease with which they may be communicated. People understand concrete proposals better than abstractions.

Basic to the preceding summary of Bolan's work is the idea that more informal means of exercising leadership must be worked out, (Bolan, 1969). He does not question the need for comprehensiveness and coordination but feels that people must be motivated to adopt coordination of their own volition. In this way consensus may be built. This idea is in accord with Lindblom's (1965) and Friesema's (1971) ideas of mutual adjustment.

The decentralized decision making model proposed to be examined in this thesis is the exercise of delegated power outlined by Arnstein (1969). In this model citizen groups become the dominant decision making authority. They would not only have the ability to start the bargaining process but also enter into contracts. In addition to having their own budget they would have the capacity to acquire staff.

The role of such groups would be specified by an Act of the Legislature allowing municipalities to delegate power to the neighbourhood level. The decision-field is land use regulation within neighbourhood boundaries. The decision-unit would be elected local area councils. Being an elected group they would be responsible to their electorate, the local neighbourhood. Citizens, resident in the area, would be eligible to run for seats on the neighbourhood council. Area residents, over eighteen years old, would be permitted to vote for these candidates.

The role of the decision unit is limited in scope because this has been
the tradition when one level of government delegates power to another level. The powers and responsibilities are fully circumscribed by provincial statute.

Planning strategy places these groups in a position to exercise a legislative function. Land use plans, binding on all land may be prepared. Development approval also lies within the jurisdiction of these groups because it is a day to day matter the results of which are readily visible. Consequently, the area council may take advantage of opportunities presented by individual developments to attain neighbourhood objectives. Those developments which have a major impact can be focussed upon in order to optimize community benefit.

In *Time Present - Time Past*, (Seelig, 1973) showed that neighbourhoods tend to be conservative with respect to change. Thus it is likely that these local area groups will not wish to radically alter the land use status quo in their neighbourhood. Slower incremental change may be expected.

In summary, the literature shows little unanimity of the desirability of decentralization and citizen participation or on what forms they should take. None of the authors indicate that public participation is representative of neighbourhood opinion. However, most agree that participation expands the scope of decision-making by providing for the injection of points of view which otherwise may not be raised.
CHAPTER 3

3.0 The Method

3.1 Basis of the Case Method

The case method of study has its origins in the case-law of Common Law countries. Case-law originated in England under the early Norman kings. During the Medieval ages, in England, very few statutes of importance existed to guide judicial decisions. Thus judges were left the task of creating the bulk of law using past experience and common sense.

the basic principles of private law were left to be laid down by the courts in light of common sense and experience under the prevailing feudal conditions. (Kiralfy, 1973)

Thus as Kiralfy (1973) points out, "Case-law is a product of necessity rather than choice". It is the thousands of individual cases, going back to 1066 AD, on which is based our fundamental legal concepts.

Case-law is often said to be the result of inductive reasoning, in the sense that broad principles of law emerge as a result of the collation and study of a large number of separate instances. (Kiralfy, 1973)

Thus, case-law consists of:

. . . rules laid down by judges. In a system based on case law, judges in subsequent cases must have regard to these rules. (Cross, 1968)

A case exists where one entity is seeking legal redress from wrongs inflicted by another entity. A judge must rule on each case regardless of the lack of applicable statutory guidance. In the absence of such guidance judges can only rely on precedents.
It is a basic principle of the administration of justice that like cases should be decided alike. This is enough to account for the fact that in almost every jurisdiction, a judge tends to decide a case in the same way as that in which a similar case has been decided by another judge. (Cross, 1968)

When a judge makes a decision on a case before him he rules on what is to happen to the litigants and gives reasons for his findings of fact and his legal ruling. The case are precedents which bind lower courts and which must at least be considered by a judge of a higher court.

The fact that English law is largely a system of case-law means that the judge's decision in a particular case constitutes a precedent. (Cross, 1968)

There are at least three advantages of the case approach in law and as a social science research tool. Firstly, it enables basic principles to be established by building on known experience.

A precedent never loses its authority through the passage of time. Provided it is still relevant in principle, it remains authoritative. (Kiralfy, 1973)

Secondly, it allows past mistakes to be recognized and avoided. Finally the case approach encourages consistency by reflecting the "fundamental uniformity of custom". (Kiralfy, 1973)

In addition to the legal profession, authors in a wide range of fields have recognized the case approach to be a useful tool for informative research and education (Doby, 1967; Madge, 1965; Willings, 1968; Selitz et al, 1959).

The study of cases is an essential aspect of inquiry and is preliminary to the formulation of types and generalizations. (Doby, 1967)
... the most widely used, and indeed widely misused, method of practical training in management is the case method. (Willings, 1968)

The case approach in research may apply for a range of objectives. Its purpose may be to describe "the case in terms of particularities that are observable" (Doby, 1968). In some social research the case study analyzes only written records. Sellitz et al (1959) proposes a broader definition of the use of the case method.

... The intensive study of selected instances of the phenomenon in which one is interested. The focus may be on individuals, on situations, on groups, or on communities. The method of study may be the examination of existing records. It may also be unstructured interviewing or participant observation or some other approach. (Sellitz et al, 1959)

By adapting this definition the exploratory nature of the case method is heightened and greater insight is fostered by using additional data sources. Sellitz et al substitute the term "exploratory" or "formulative" for case study. They see this type of research as an initial step in the study of human relations because it aids identification of problem definition, influencing variables and the settings in which the variables function. Consequently a broader base of knowledge develops upon which experimental research can be performed. (Sellitz et al, 1959). These authors outline six purposes which are relevant to the use of the case study method of research.

1. formulate a problem for more specific information
2. development of a hypothesis
3. increase familiarity with phenomenon to enable further, more highly structured, study
4. clarifying concepts
5. establish priority for further research
6. provide consensus of problems for people working in specific areas (Sellitz et al, 1959)

3.1 Applicability of Case Method to Thesis

The focus of this thesis is facilitating resolution of intergovernmental conflict by local area planning. Satisfactory resolution of these conflicts is an important issue in a society where many valid demands exist.

The case of the proposed expansion of the Shaughnessy Hospital illustrated a common situation of inter-governmental conflict where the participants were trying to advance their own interests. Thus this approach allowed the author to determine what factors were involved in this particular conflict and how they interacted in a situation of current interest to planners.

Local area planning is currently practised in several parts of Vancouver. Some proponents argue that more power should be transferred to the neighbourhood level while others feel that broader civic interests would be prejudiced by such actions (Stott, 1971). The case method permitted the author to become familiar with the problems of neighbourhood government and the ramifications these would have for the hypothesis. Generalizations were made about the applicability of conferring land use approval authority upon neighbourhoods. Conclusions were drawn on the role of the neighbourhood, its impact on conflict resolution and how its role could be made more effective in this context.

This particular case was well documented and many of the people involved were readily accessible. The case method permitted the integration of these sources of information.
The literature review revealed little unanimity about the desirability of decentralized neighbourhood power either in general or specific instances. An approach which examined a specific case demonstrated the applicability of neighbourhood involvement in that instance. Thus, some conclusions were drawn, which when considered with the subject literature permitted consensus to be formed about the use and desirability of neighbourhood power in the process of inter-governmental conflict resolution.

3.2 Research Procedure

Sellitz et al (1959) indicate that a case study should include three basic elements: literature review, analysis of documentation, substantive interviews. The following procedure was carried out.

Pertinent literature was reviewed. Next a number of personal interviews were held with people who were involved in the proposed Shaughnessy Hospital expansion. Finally, the Shaughnessy case was analysed in detail which involved a search of existing documentation and integration of that research with the personal interviews.

3.2.1 Literature Review

The literature review which was documented in Chapter two, served as the foundation for the remainder of the thesis. It outlined the type of work which existed in the field of neighbourhood government and illustrated the conclusions made by various authors. It showed what aspects of the issue of neighbourhood power have been studied and thus aided in the formulation of my own hypothesis. The literature revealed that little work has been done on inter-governmental conflict resolution. This discovery prompted exploratory research by the author in this field in the Vancouver setting.
3.2.2 Documentation

Considerable documentation of the Shaughnessy Hospital expansion existed at Vancouver City Hall. Public documents were defined by Gottschaulk (1945) in (Madge, 1965) as documents "intended to convey instructions regarding a transaction or to aid the memory of persons involved". Madge (1965) considers records as the most credible form of documentation because they are instructions of command and the people who frame them are anxious to ensure that their instructions are understood.

Madge does not consider reports as accurate as records because they are written after the event and are thus second hand information. Also they represent the bias of the author. Nevertheless, they are useful for the diversity of opinion which they express and thus are of value in identifying particular viewpoints.

The value of documentation is that it reveals the sequence of events and provides insight into the structure of the problem. However, documents are not sufficient in themselves "to determine if a feature is of common occurrence" (Madge, 1965) nor is it necessarily representative of the opinion of all those involved.

3.2.2.1 Purpose of Documentary Analysis

Documentary analysis provided background facts and figures related to the case study and formed the basis of the interview questions. The following documentary evidence was collected.

1. Description of the Shaughnessy Hospital expansion
   - the need for expansion
   - function of the British Columbia Medical Centre
2. Neighbourhood analysis
   - land use
   - demographic data
   - income and occupation
   - neighbourhood stability
   - neighbourhood viewpoint

3. City of Vancouver viewpoint

4. Sequence of events

5. Relationship which developed between the province, city and the neighbourhood

3.3 Interviews

There were three reasons for undertaking personal interviews. Firstly, they were used to verify conclusions drawn from the analysis of the documentation. Secondly, they provided insight into the opinion of those involved as to how the citizen participation process worked in this case and whether the role of the citizen would be enhanced by conferring more power to the neighbourhood level. Finally, they furnished perception of the relationship between the three principal participants (Province, City and Neighbourhood) which helped determine whether the conflict resolution process would be improved if citizens were better organized and more powerful.

The type of interview used may be termed a focussed, formative interview. According to Madge (1965) the formative nature of the interview allows the informant a wide range of freedom in his answers. This permitted the interviewer to deepen his own understanding of the informant's perception and to formulate conclusions on this basis. However, the author wished to gain a better idea of the informant's views on local area planning and decentralization. Consequently, the questions were aimed in this direction which permitted comparison of responses. The questions themselves were focussed but the respondent was not limited in his replies. The questions were related to
the Shaughnessy Hospital expansion and informants were selected from groups and agencies having varying degrees of involvement in this issue.

Other questions reflected the salient features of local area planning in Vancouver because not all informants were cognizant of this process. A description of this process is presented in Chapter four.

It was hoped that the interviews would either confirm or clarify the hypothesis. This is because the importance of citizen involvement varies for each individual. Madge pointed out that every interviewer must realize that "not every topic operates at the same psychological level". (Madge, 1965).

3.3.1 Informants

Ten people were interviewed. They possessed a wide range of backgrounds and represented differing perspectives and degrees of involvement in the proposed hospital expansion. Regardless of their involvement in the case study each informant had an opinion on the concept of effective citizen participation.

The selection of informants was representative of public agencies, the medical profession, three levels of political involvement, and the Social Credit and New Democratic political parties. It was not the purpose of the research to compare responses based on a preconceived notion of whether an informant represented the provincial, municipal or neighbourhood perspective. Rather, the questions were designed to probe the group's perception of increased citizen participation and power. Comparison of individual responses was made to see what opinions and perspectives emerged regardless of the informant's affiliation. These results were then related to the viewpoints identified in the documentary analysis. This determined which point of view
predominated and what it meant to the degree of influence citizens should possess at the neighbourhood level.

The questions asked were as follows:

1. Are you satisfied with the citizen participation which was carried out for the proposed Shaughnessy Hospital expansion in Vancouver?

2. For the proposed expansion of the Shaughnessy Hospital please indicate:
   a) favourable aspects of citizen involvement
   b) unfavourable aspects of citizen involvement

3. Do you feel that the citizens on the Shaughnessy Hospital Citizens Advisory Committee are representative of the neighbourhood? Please explain.

4. Would your organization have been aided by the establishment by City Council of a committee of local citizens from the neighbourhood to advise on the local impact of the proposed hospital? Please explain.

5. Should the citizens committee be elected? What significance do you feel an elected committee would have?

6. From what area should the committee be chosen?
   a) area of immediate impact
   b) existing defined neighbourhood

7. Should the land use approval and rezoning authority for its respective area be vested in the local committee? Please explain.

8. What operational factors would be necessary to make the citizens committee effective regardless of its power? Please explain.

9. Would the establishment of a locally elected citizens committee have aggravated or alleviated the conflict which developed between
the Province and the City over the proposed Shaughnessy Hospital expansion:

a) if the citizen committee exercised land use regulatory power,
b) if the citizen committee acted in an advisory capacity.

The preceding questions were directed to the following people:

Mr. D. Cocke. Former Minister of Health and Hospital Insurance. NDP MLA for New Westminster.

Mr. R. Cummings. Former NDP MLA - Vancouver Little Mountain.

Dr. W. Gibson. Head of the Department of the History of Science and Medicine, UBC; former Alderman, City of Vancouver; present elected member, Vancouver Parks Board.

Mrs. G. McCarthy. Provincial Secretary. Social Credit MLA - Vancouver Little Mountain.

Mr. D. McGougan. Member, Shaughnessy Hospital Citizens Advisory Committee; President, Central Cambie Rate Payers Association.

Mr. R. Spaxman. Director of Planning, City of Vancouver.

Mr. J. Volrich. Alderman, City of Vancouver.

Mr. D. Weaver. President, British Columbia Medical Centre.

Mr. E. Wolfe. Minister of Finance. Social Credit MLA - Vancouver Little Mountain.

Miss P. Young. Former Minister of Consumer Affairs; former NDP MLA - Vancouver Little Mountain.

3.4 Limitations

The problems encountered while carrying out this research lay with the personal interviews. All the individuals noted above contributed to the results outlined in the next chapter. However, two of the respondents are now Cabinet Ministers in the Provincial Government. It simply was not possible to interview them personally or by telephone because of their schedules. Questionnaires were mailed to which they replied. However, they responded
to the questionnaire in general and not to specific questions. Thus, their views on some of the questions can only be inferred. This situation greatly reduces the effectiveness of their replies. However, it is not judged to reduce the overall validity of the total questionnaire results.
CHAPTER 4

4.0 Findings

This chapter describes the Local Area Planning process of the City of Vancouver, which forms the basis of the hypothesis, namely that the resolution of provincial-municipal land development conflicts would be improved through the establishment of local area planning programs. The findings of the documentary analysis are presented followed by a discussion of the results of the personal interviews.

4.1 Vancouver City Area Planning Process

The Local Area Planning process for the City of Vancouver is reflected in the Planning Department document, Shaping the Future, 1974. The purpose of area planning in Vancouver is:

... to develop planning and implementation policies for specific areas of the city and to provide day to day planning service for every part of the city.

(Shaping the Future, 1974)

The objects of the process are to:

... continue detailed studies of local areas within the city; to be responsive to local needs, and to assess public opinion in those areas; to recommend policy and co-ordinate development compatible with the overall policy structure.

(Shaping the Future, 1974)

Local Area Planning is a level of detailed planning to ensure that the needs of neighbourhoods are reflected in the city-wide perspective. Shaping the Future (1974) indicates that citizen participation policy is not explicitly stated but finds expression in one of the planks of The Electors Action
Movement (TEAM) platform. TEAM is one of the four local political groups involved in civic elections in Vancouver. The intent of the platform is to encourage citizen involvement during the formative stages of any planning proposals and to make available to citizens any information which would have a bearing on their neighbourhood.

The primary characteristics of a local area planning process include a site office with planning staff, located in a neighbourhood. Citizens in the local area are chosen to sit on a representative advisory committee. This structure gives the neighbourhood access to Council from duly recognized committee and to the civic bureaucracy through planning staff in the site office.

The choice of citizens to sit on the local advisory committee varies between participating neighbourhoods in Vancouver. The committee structure and selection process is geared to the particular situation in the neighbourhood. For example, the advisory committee in Kitsilano is made up of individuals selected from a number of local community groups. Cedar-Cottage has open membership. The committee in Grandview-Woodlands was elected on a mini-ward basis. City Council insists that these committees be representative of the neighbourhood, and much work, in the neighbourhood, is undertaken to ensure representative groups are selected. To date City Council has accepted the diversity of neighbourhood committee structure. (Interview with W. Buholzer, Area Planner, Vancouver Planning Department, March 10, 1976.)

The emphasis of the local area process is concerned with area conservation, development, and local zoning but details may differ between neighbourhoods. Citizens play a major role in establishing development guidelines for their neighbourhoods. They also advise Council on daily development
matters, such as rezoning or development permit applications within the local area. City Council retains the development approval function and has veto power over proposed neighbourhood plans. Thus, neighbourhood goals are kept in city-wide perspective. Individual aldermen act as the political liason between City Council and the Citizen's Advisory Committee.

The difference between local area planning and city-wide planning is that the former assumes that the initiative for planning lies with the component neighbourhoods of the city while in the latter case the initiative lies with City Council followed by consultation with the neighbourhood and adjustment of city and local objectives.

Neighbourhoods are designated as local areas on the basis of local needs, development pressures and local initiative. At this time the local area planning process is operating in Kitsilano, Grandview-Woodlands, Fairview Slopes, Downtown East Side, and Cedar Cottage-Kensington. In addition, extensive public contact is maintained in those areas of the city where major developments are taking place. Examples are the Burrard Inlet Waterfront, False Creek, Champlain Heights and the North Arm of the Fraser River. The emphasis in these latter areas relates specifically to the project underway as opposed to the numerous issues faced in a local area.

The remainder of the city does not have local area status primarily because of the financial limitation which necessitate that priorities be established for selection of neighbourhoods. This is because the issues in one neighbourhood may be more pressing than in another. The Area Planning Division does provide staff assistance to these other local residential areas. This planning staff works with community groups and provides a contact for public enquiries related to local matters. They also review and advise on all planning and development projects throughout the city to ensure that the
local and city goals may be as compatible as possible.

1.2 Documentary Analysis

1.2.1 Shaughnessy Hospital Expansion

The initiating force behind the proposed expansion of the Shaughnessy Hospital was the British Columbia Medical Centre. The Centre was created because the Province perceived a need for upgrading and expanding medical services and educational facilities.

British Columbia tertiary services at the Vancouver General Hospital are out of date; facilities for children and high risk infants are particularly unsatisfactory; facilities for teaching professionals, physicians, nurses, dentists etc. are far from adequate; emergency wards are overloaded and not satisfactory, lacking especially provision of proper treatment of acute psychiatric patients.

(Extract from British Columbia Medical Centre's presentation to Vancouver City Council, February 25, 1975.)

The terms of reference of the Medical Centre are contained in the Medical Centre of British Columbia Act, 1973. Section 6, 7, 16 and 18 specify its powers and responsibilities. Essentially it is a corporation responsible for co-ordinating the activities of its member institutions to avoid duplication of services.

The British Columbia Medical Centre (see Map 1) is a complex of hospitals and related health facilities organized to provide the best possible patient care services, health sciences, teaching and related research for the entire province. It is composed of the following medical institutions: Vancouver General Hospital, Shaughnessy Hospital, St. Paul's Hospital, British Columbia Cancer Institute, G.F. Strong Rehabilitation Centre, Children's Hospital and the University of British Columbia Health Services Psychiatry Unit, all loc-
Legend
1. St. Pauls
2. BC Cancer Institute
3. Vancouver General
4. GF Strong Rehabilitation Centre
5. Shaughnessy Veteran's Hospital
6. BC Children's Hospital
7. UBC Health Services Psychiatry Unit

Map 1
Location of Member Institutions of the British Columbia Medical Centre

Scale
1 0 1 2 3 4 miles

ated in the Vancouver area. The services provided are highly sophisticated and require that the services of the member institutions be integrated under on Board of Directors for coordination.

The enormous needs, as well as, public expectations for advanced services provided by British Columbia Medical Centre Hospitals, represent a significant funding requirement from all levels of government. The Centre has a responsibility to ensure that the public funds are allocated in the best interest of the total community. The establishment of the British Columbia Medical Centre, under one Board of Directors, provides the mechanism for achieving this through cooperative planning and by avoiding duplication of costly facilities and services within a decentralized framework.

(Extract from the British Columbia Medical Centre's presentation to Vancouver City Council, February 25, 1975)

The initial plans of the Medical Centre called for the construction of a new hospital of 1.5 million square feet, containing 1120 acute care beds on the Shaughnessy site. Shaughnessy is presently a 920 bed chronic hospital. (Hayes, 1974). The new facility would emphasize pediatrics, obstetrics, gynaecology cancer research and education.

The plans have since been reduced to 950 acute care beds. Roughly 500 beds will be in the present structure and the remainder in a new 350-400 bed facility located on the same site. (Shaughnessy Hospital Citizen's Advisory Committee, "Interim Report to Council", June 13, 1975; mimeograph).

The Shaughnessy site was chose because of its large size (46 acres), and its accessibility within the Greater Vancouver area with respect to the other members of the Medical Centre and indeed the Province, due to the nearness of the site to the International Airport. (Extract from the British Columbia Medical Centre presentation to Vancouver City Council, February 26, 1975).
Map #1 illustrates the location of the Shaughnessy Hospital.

It was the policy of the Provincial Government and the Medical Centre to cooperate with the City. This decision is confirmed in correspondence with the President of the Centre to Mayor A. Phillips.

We have indicated to your technical staff, that we will cooperate in every way possible in order to obtain development and zoning permits.
(K. Weaver, President to British Columbia Medical Centre to Mayor A. Phillips, July 10, 1974).

A meeting held on May 8, 1974, between officials of the City and the Medical Centre also indicated willingness of the Province to cooperate with the city.

Mr Christensen assured Dr. Bryson that it is the British Columbia Medical Centre's policy to cooperate with the City of Vancouver in all respects and the Medical Centre Shaughnessy site development and other member institution developments would follow normal City Hall procedures.
(Minutes of a meeting between the Medical Centre and City Hall officials, May 8, 1974).

4.2.2 Neighbourhood Analysis

Map #2 illustrates the existing defined neighbourhoods in the vicinity of Shaughnessy Hospital. The outlined area is the extent over which the major local impact of the initial Shaughnessy proposal would be felt. Impact is not confined to one particular area but rather parts of a number of neighbourhoods. This means that the actual community of interest transcends real and perceived neighbourhood boundaries.

4.2.2.1 Land Use

The size of the area which would be impacted upon is roughly one square
mile (640 acres). Table #1 illustrates some of the salient features of this area.

Table 1 Neighbourhood Analysis

<table>
<thead>
<tr>
<th></th>
<th>Riley Park</th>
<th>Shaughnessy</th>
<th>S. Cambie</th>
<th>Vancouver</th>
</tr>
</thead>
<tbody>
<tr>
<td>POPULATION DENSITY/ACRE</td>
<td>16.6</td>
<td>9.0</td>
<td>12.9</td>
<td>15.3</td>
</tr>
<tr>
<td>HOUSING TYPE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(% of total single</td>
<td>69.0</td>
<td>75.0</td>
<td>65.0</td>
<td>49.0</td>
</tr>
<tr>
<td>family, multiple</td>
<td>31.0</td>
<td>25.0</td>
<td>35.0</td>
<td>51.0</td>
</tr>
<tr>
<td>family)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TENURE (% of total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>owned</td>
<td>63.0</td>
<td>72.0</td>
<td>62.0</td>
<td>47.0</td>
</tr>
<tr>
<td>rented</td>
<td>37.0</td>
<td>28.0</td>
<td>38.0</td>
<td>53.0</td>
</tr>
<tr>
<td>LENGTH OF RESIDENCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 years (% of total</td>
<td>31.5</td>
<td>28.0</td>
<td>22.5</td>
<td>40.2</td>
</tr>
<tr>
<td>population)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INCOME</td>
<td>low-medium</td>
<td>high</td>
<td>medium-high</td>
<td></td>
</tr>
</tbody>
</table>

Source: City of Vancouver Planning Department, Vancouver Local Areas, 1975

The figures in this table relate to the individual neighbourhoods and not to the area of community of interest. However, they do provide some insight of the character of the impacted area.

Housing type, tenure and income vary throughout the study area. The highest density and lowest income area corresponds to eastern sections of the study area. The remainder is primarily single family residential with higher income. Rental accommodation is located mostly in South Cambie and Riley Park where 37 and 38 percent of the housing is rented. West of Oak only 25 percent is rental accommodation.

Residential stability is roughly equal throughout the study area. Between 22 and 32 percent of the population have lived here two years or less.
Map 2. Area of Impact and Component Neighbourhoods

**Scale**

<table>
<thead>
<tr>
<th>500</th>
<th>0</th>
<th>500</th>
<th>1000</th>
<th>1500</th>
</tr>
</thead>
</table>

\[1" = 1000'\]

**Legend**

- ¼ mile radius
- ½ mile radius
- Institutional land use
- Neighbourhood boundaries
Land use in the study area is predominantly residential. Small pockets of commercial areas are found around the edges of the neighbourhood. A most significant feature is the amount of government owned land in the area. Institutions make up nearly 27 percent of all developable land in the area.* The Shaughnessy site is the second largest parcel in the area comprising 46 acres.

The study area contains a range but not a mix of land uses. Zoning in this area is quite restrictive and thus the land uses are made internally homogenous.

The presence of major institutions in this area indicate that governmental agencies recognize the strategic importance of this location with respect to Vancouver, the Regional District, and the Province as a site for the provision of various health services. (Stone, 1975. Unpublished term paper. Planning 510a).

h.2.2.2 Population

Table # 2 illustrates the breakdown of age groups living in the three neighbourhoods which comprise the study area.

<table>
<thead>
<tr>
<th>Age</th>
<th>Shaughnessy</th>
<th>South Cambie</th>
<th>Riley Park</th>
<th>Vancouver</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 14</td>
<td>21.6</td>
<td>16.8</td>
<td>23.3</td>
<td>19.6</td>
</tr>
<tr>
<td>15 - 19</td>
<td>10.8</td>
<td>7.7</td>
<td>8.9</td>
<td>7.8</td>
</tr>
<tr>
<td>20 - 34</td>
<td>17.7</td>
<td>20.5</td>
<td>21.9</td>
<td>24.3</td>
</tr>
<tr>
<td>35 - 54</td>
<td>24.7</td>
<td>22.2</td>
<td>23.0</td>
<td>23.5</td>
</tr>
<tr>
<td>55 - 64</td>
<td>11.3</td>
<td>12.3</td>
<td>11.1</td>
<td>11.3</td>
</tr>
<tr>
<td>65+</td>
<td>13.9</td>
<td>20.5</td>
<td>11.8</td>
<td>13.5</td>
</tr>
</tbody>
</table>

Source: Vancouver Planning Department. Vancouver Local Areas, 1975

* Compiled from a 1" to 1000' map.
All three areas have a well balanced age distribution similar to that of Vancouver. The large proportion of children in the study area means that there is a large family component. When compared with the length of residence less than two years (Table 1) it appears that these areas are, for the present, quite stable from a demographic standpoint.

4.2.3 Sequence of Events

City Council was concerned that congestion at the Vancouver General Hospital had reached unacceptable levels. On May 15, 1973 Council resolved:

... to express to the Greater Vancouver Regional Hospital District the desire of the Vancouver City Council that the concentration of medical facilities at the Vancouver General Hospital not be increased above present and that needed facilities be placed elsewhere.


At this same meeting it was further resolved that Council seek discussions with the Minister of Health about the future use of the Shaughnessy Military Hospital.

On July 20, 1973, the Minister of Health Services and Hospital Insurance announced the formation of the British Columbia Medical Centre. It was incorporated under the Medical Centre of British Columbia Act on November 7, 1973. On April 23, 1974, the Shaughnessy Hospital site was transferred from the Federal Government to the Province and in July 1974, the Medical Centre assumed proprietorship of the site under section 18 (1) of the Medical Centre of British Columbia Act.

Under the Federal-Provincial agreement transferring the Shaughnessy Hospital to the Provincial government, British Columbia agreed to assume full responsibility for the veterans living at the hospital.
When City Council learned that the Shaughnessy site was to be used by the Medical Centre, it resolved on August 14, 1973:

that the Council extend instructions given to the Planning Department respecting future Vancouver General Hospital expansion plans, to include study of the area extending from West Broadway to 33rd Avenue between Oak and Cambie Streets and including the Shaughnessy site.

At the same meeting Council also asked that an Area Planning program proposal be drawn up. This point indicated Council's concern that expansion of the Shaughnessy site would have adverse local impacts. It also demonstrated Council's desire that a mechanism be established so that local citizens could be involved in the formative stages of planning for the proposed hospital.

The first meeting between the City of Vancouver and the Medical Centre occurred on May 8, 1974 at which time the Centre assured the City of its willingness to cooperate. On May 17, 1974 the Director of Planning reported to the Standing Committee on Civic and Community Development:

The local area planning program proposed for the Shaughnessy Hospital area is put forward on the basis that the development of this massive centre will bring with it a whole series of consequences for the immediate neighbourhood. The Medical Centre has agreed to bear the costs of a local area planning operation in this area.

The President of the Medical Centre also informed the Mayor of the Centre's willingness to bear the costs of a local area planning program.

As you know we are prepared to allocate funds to provide staff in or out of City Hall, to help City Hall co-operate to the best extent to meet the very stringent timetable we have for construction.
In light of the difficulty the Medical Centre had in hiring qualified staff the Planning Department felt that it should undertake an impact study of the proposed hospital. This study began on September, 1974. The Planning Department also acquired its own staff to work with the community groups in the area, raise awareness of the Shaughnessy proposal and to organize a public hearing for November 27, 1974.

A public hearing was necessary because the Shaughnessy Hospital was zoned RT-2 (two family dwelling district). This Hospital predated the present zoning designation. To build the proposed density CD-1 (Comprehensive Development) designation was required.

Prior to the public hearing the planner working in the area advised that citizen interest was very high and that they wanted answers to questions of Medical Centre policy. For example, why was the Shaughnessy site chosen? Why weren't existing buildings being retained? (Interdepartmental memorandum. W. Buholzer to R. Youngberg, Director Area Planning Division. Vancouver, November 14, 1974).

On November 26, 1974, 350 people turned out at the public hearing for the rezoning of the Shaughnessy Hospital site. Reaction from the meeting showed that citizens were very much opposed to the initial proposals of the Medical Centre. As a result of this meeting a committee of volunteers was struck to work with the Medical Centre to ensure that the neighbourhood concerns were considered.

The first few meetings of the Shaughnessy Hospital Citizen's Advisory Committee and the British Columbia Medical Centre were not very productive. The Medical Centre showed little inclination to compromise and as late as February 25, 1975 was still trying to advance its original concept.

From its inception the Shaughnessy Hospital Citizen's Advisory Committee
held several meetings on its own and with the Medical Centre to try and achieve a compromise solution. Its function was to examine and offer alternate proposals for discussion with the Medical Centre.

The Committee toured the existing Shaughnessy Hospital to determine if it needed to be demolished. It was an ongoing structure composed of individuals who were pragmatic, positive and dedicated to the responsibility they had undertaken. This is an impression which is borne out in the documentation and in the interviews which are reported later.

On February 25, 1975, a special Council meeting was held with the Minister of Health and officials of the British Columbia Medical Centre. This meeting culminated in a report of the Vancouver Sun on March 6, 1975 that the initial proposal of the Medical Centre was unacceptable to City Council and the Minister and would be scaled down.

Following the February 26, 1975 special meeting a series of meetings were held between the Medical Centre and the Shaughnessy Hospital Citizen's Advisory Committee. On June 18, 1975 the Citizen's Advisory Committee reported to City Council that they had reached agreement with the Medical Centre, on some terms of reference for future Medical planning with respect to the Shaughnessy site. These are summarized below:

1. Existing buildings would not be demolished.
2. Present facilities would be upgraded to provide acute care.
3. Teaching facilities would be spread amongst other Medical Centre institutions.
4. The Vancouver General would remain the main referral centre for the Province but the number of beds would be reduced.
A new 350 – 400 bed hospital for mother and child care would be built on the Shaughnessy site.

With the defeat of the New Democratic Party on December 12, 1975, the Medical Centre was put under study by the new government. On March 3, 1976 the new Minister of Health and Hospital Insurance announced that the British Columbia Medical Centre had been phased out. The 'demise' of the Medical Centre may be attributed to at least two features. Firstly, it infringed on the Universities Act. This Act had made the University of British Columbia solely responsible for medical education in the Province. Secondly, it violated the Regional Districts Act which makes the regional districts responsible for building and maintaining hospitals. (Personal interview with Dr. W. Gibson, UBC School of Medicine). In the former case the Medical Centre would have assumed responsibility for medical education in the Province. In the second case, it centralized authority for all expenditure for hospital planning and construction within the Province. The result of this trend to centralization of medical facilities and education alone created considerable opposition to the concept of the Medical Centre. (Dr. W. Gibson, UBC School of Medicine).

4.2.4 Neighbourhood Viewpoint

An interim report to City Council by the Shaughnessy Hospital Citizen's Advisory Committee on January 28, 1975 expressed neighbourhood opinion. Initial local reaction to the proposed plans of the Medical Centre was negative. At the public hearing (November 27, 1975) citizens were angry that they had not been involved earlier.
This was the first time, after over a year of preparation by BCMC, that the general public became aware of the tremendous scope of the proposed development. (Shaughnessy Hospital Citizen's Advisory Committee. 'Interim Report to Council'. Vancouver, January 28, 1975. Mimeograph)

The local concerns expressed in the above report were about the likelihood of increased traffic and parking in the adjacent residential streets. The citizens also expected pressure for higher density housing plus increased demand for commercial and office space. This would substantially alter the present character of the area. Hayes (1974) bears out this concern in his impact statement, The Proposed Shaughnessy Hospital Expansion: An Assessment of Potential Impacts. Chapters three, four and five deal with the foregoing concerns.

Citizens also criticized the Medical Centre's intent to demolish the existing hospital which they believed to be structurally sound. They felt too many activities were included in one location and insufficient thought given to possibilities which may be afforded by other member institutions.

In addition, the present hospital has a great deal of importance to the local community. (Personal interview with Dr. W. Gibson, UBC School of Medicine, March 5, 1976). For example, various ladies' groups in the area go to the hospital regularly to visit with the veterans. Volunteer work such as this is common in the area, according to Dr. Gibson, and considered very important by those who participate.

The Citizen's Committee did recognize the need for new medical facilities and that the Shaughnessy site afforded scope to provide them.

Most residents recognize that there should be proper utilization of the Shaughnessy site for hospital purposes. (Mr. D. McGougan, President, Central Cambie Ratepayers Association to Alderman J. Volrich, December, 1974).
After the negotiations with the Medical Centre, the Citizen's Advisory Committee reported their satisfaction with the outcome to City Council.

It is the opinion of this Committee that the formation of this committee of interested citizens, and the work done by the Committee over the months along with other interested organizations was a significant factor in the decision of the Minister of Health to re-direct the efforts of the British Columbia Medical Centre towards a more realistic approach to the solution of providing workable teaching hospital facilities with the ongoing health care requirements of the general public.

(Shaughnessy Hospital Citizen's Advisory Committee, "Interim Report to Council". Vancouver, June 18, 1975. Mimeograph).

4.2.5 City of Vancouver Viewpoint

It will be remembered that the Vancouver City Council instructed that an area planning process proposal be drawn up by the Planning Department. An interdepartmental memo outlined the goals of the proposed process.

relate the goals of the affected communities and overall City policies with hospital expansion plans.

(T. Geach to R. Spaxman, Planning Director, Vancouver, April 29, 1974).

The program would involve establishing community participation procedures. Data to be collected would include the type of proposed hospital facilities, land ownership, land use, redevelopment potential, population, employment, traffic and parking, and community facilities and services.

The information would then be analyzed to determine the impact of the development and to propose alternatives. Community problems and issues would be identified. From this point specific community objectives could be elucidated and ranked in order of priority.

The final component of the process would establish alternative development
proposals including statements of consequences, feasibility costs and benefits and possible implementation strategies. This stage leads into the drafting of proposals which would include statements on design standards, housing and possible social programs as well as traffic circulation.

The City's viewpoint pertained to the proposed expansion as it would affect the broad perspective of the city as well as its possible impact on the local area. For example, at a meeting on April 23, 1974 between officials of the City and the Medical Centre, the City Engineer indicated that the surrounding residential streets could not absorb the increased traffic and parking load which could be expected.

4.2.6 Relationship between the Province, City and Neighbourhood

The City of Vancouver contacted the Province over the future use of the Shaughnessy site (May 15, 1973) prior to the formation of the Medical Centre. From that point on a close technical relationship developed between the City and the Medical Centre. The Centre made available whatever information it could to help the City determine the impact of the Hospital so that the information exchange and cooperation would facilitate speedy approval of their plans.

The relationship which developed between the City and the Medical Centre was similar to that between the City and a private developer. This was because the City did not initially tell the Medical Centre the type of development it wanted in that neighbourhood. Instead the Medical Centre, like most developers, submitted its own plans of what it wanted to do on the Shaughnessy site. From that point it was matter of negotiation between the City and the Medical Centre, with the City trying to scale down the magnitude of the proposal. However, it took the opposition of local citizens and ult-
imately the intervention of the Minister of Health to make the Centre re-
think its proposals.

On a broader level the British Columbia Medical Centre and Vancouver
were in agreement that the development of the Shaughnessy Hospital would be
mutually beneficial. It would benefit the Centre by the newer and better
health facilities. The City would directly benefit due to the relief of
congestion at Vancouver General.

We agree with you that this allocation of
beds falls within the City's concept of
trying to decongest the larger hospital
areas and in particular the Vancouver General.
(K. Weaver, President, British Columbia
Medical Centre to Mayor A. Phillips, Vancouver,
July 10, 1974).

The relationship between the Medical Centre and the neighbourhood was
less cooperative. Prior to the November 27, 1974 public hearing, there had
been no citizen input into the process. The Medical Centre, as evidenced
by the quote on page 53 was not convinced that the local citizens had a major
role to play in making policy decisions.

Citizen interest and involvement in the proposed hospital was considerable.
Over 350 people attended the public hearing and forty volunteered to serve
on a committee to work with the Medical Centre. This committee served as an
ongoing body which proposed alternatives and reviewed the Medical Centre plans.
It was not a protest group which forms for a specific moment in time. Rather
its involvement meant that it worked closely with the Medical Centre until
they both arrived at a mutually satisfactory agreement. The interviews,
(Appendix), showed that this committee had worked hard and was basic to the
eventual agreement of June 18, 1975.

The documentary evidence from November 27, 1974 to June 18, 1975 demon-
strated that a rather stormy relationship existed at times between the Centre
and the Citizen's Advisory Committee. However, the revised Medical Centre plans had the enthusiastic backing of the Advisory Committee. This was because the result was arrived at as a result of the Committee's involvement and so was partially their own idea. Thus, the June 18, 1975 "Interim Report to Council" by the Citizen's Advisory Committee indicated that the outcome of their involvement with the Medical Centre was eventually productive.

4.3 Summary of Personal Interviews

The results of each interview may be found in the Appendix. These individuals were selected on the basis of the following criteria: variety of professional and social backgrounds, involvement in the hospital debate, representative public and private perspective (Provincial, City, neighbourhood).

Mr. J. Volrich represented the city-wide perspective. As an alderman he worked very closely with the Shaughnessy Hospital Citizen's Advisory Committee. Mr. K. Weaver was the President of the Medical Centre. Thus, he represented the provincial perspective as well as the viewpoint of a corporate executive.

Mrs. G. McCarthy and Mr. E. Wolfe are the Social Credit MLA's for the area in which the proposed hospital was to be located. As such they are intimately familiar with the area. They represent not only the provincial perspective but also a political ideology. The former New Democratic MLA's, Miss P. Young and Mr. R. Cummings provide a contrasting political viewpoint, plus familiarity with the neighbourhood.

Mr. D. Cocke was the former Minister of Health and was responsible for the Medical Centre. His perspective was provincially oriented but as a
politician and Cabinet Minister combined sensitivity to local and provincial concerns. Mr. D. McGougan lived in the area to be affected by the proposed hospital and served on the Citizen's Advisory Committee. Thus, he represented the local viewpoint.

Mr. R. Spaxman is the Director of the City of Vancouver Planning Department. He is also committed to the concept of organized citizen participation. As a planner and public servant he represents a comprehensive viewpoint of the planning process which recognizes the importance of both the local and city perspective.

Dr. W. Gibson, of the University of British Columbia Faculty of Medicine, represented a medical perspective as it applied to the University and its relationship to the Medical Centre. He was also a former alderman of the City of Vancouver when the hospital proposal was first made. He is now an elected member of Parks Board. Thus, he also represented the City viewpoint.

**Question 1**

This question sought to determine respondent satisfaction with the citizen's participation process for this issue. The results were: satisfied (5), not satisfied (1).

Satisfaction with the citizen participation process for this issue was fairly divided.

**Question 2**

Respondents were asked to identify both favourable and unfavourable aspects of citizen participation in this issue. The most commonly mentioned favourable aspects were that the process which worked was created, the people became well informed, the citizens were a pragmatic and positive force, the
citizens were enthusiastic and finally, that the Citizen's Advisory Committee was a representative group.

The most common unfavourable aspects mentioned were the political climate which was created, that the Medical Centre did not appreciate the validity of the role of the Citizen's Advisory Committee and that the process started too late. This led to a feeling of frustration on the part of the Committee. Finally, one informant felt that the Committee had to absorb much information with which it was unfamiliar. This aspect made their job difficult.

Question 3

This question sought to determine if the respondents felt that the Shaughnessy Hospital Citizen's Advisory Committee was representative of the neighbourhood. Generally, the informants believed the Citizen's Advisory Committee was representative.

representative (1) not representative (1) don't know (2)

Members of the Citizen's Advisory Committee were selected from the people who volunteered to work with the Medical Centre. Council selected the membership based on the characteristics of the neighbourhood. People from a wide range of economic, social and ethnic backgrounds, found in the neighbourhood were chosen. Existing community organizations were also represented and each of these selected one of their members to sit on the committee. The one dissenting view was that the group was not representative because City Council had selected most of the committee members in order to be sure that it reflected its own perspective. The selection of most committee members was by means of a sub-committee of Council working with the Medical Centre. The two people who did not know if the committee was representative had not
been closely involved in the debate. They did indicate that such a group should be representative.

Question 4

Question 4 asked respondents if a formally constituted committee would aid their respective organization. Seven informants said it would and one felt that it would not. Three of those who felt a formally constituted committee would be beneficial to their agency felt that it would if it existed as an ongoing general purpose group. This was because it would replace self-interest groups and groups which were formed for a specific purpose (ie. protest). Issues could be dealt with on a continuing basis. The ongoing nature and mandate from City Council to perform certain functions on behalf of the local area would give this type of group greater credibility.

Question 5

Question 5 asked if the citizen committee should be elected. Opinion was evenly divided. Yes (l) No (l). Those in favour felt that being elected would give the group greater influence since it would be speaking for a whole neighbourhood not just itself. Also, being elected made the group accountable to its electors which ensured that people who appeal to the neighbourhood point of view would be chosen.

Those who opposed an elected group mentioned that the low voter turnout normally associated with local elections would militate against a representative committee being chosen. They also felt that there were other means of choosing a committee such as objective selection, which would, according to them, ensure a representative committee. This last point is significant because even though opinion on the desirability of elected groups
was split, nearly all respondents felt that the committee which was formed was representative. This relationship means that the selection of committee members can have beneficial results.

Question 6

Question 6 sought to determine if the respondents felt that a local area citizen's committee concerned with land use should be chosen from an existing defined neighbourhood or from the area which expects to experience impact from a specific issue. Four replied that an existing defined area was best for the purposes of continuity. Such a committee could deal with a range of land use related issues from their initial occurrence. Two informants believed that the committee should be chosen from the area which expects to experience the impact because impact does not respect boundaries. Other people may be affected and deserve to be heard.

The two respondents in the 'other' category believed that for pragmatic purposes those involved in the issue must be prepared to listen to people from farther afield than the area immediately adjacent to the source of impact. This means that the area from which the citizen committee is chosen must be relevant to the issues affecting the area.

Question 7

Question 7 asked if the citizen committee should be allowed to exercise land use approval and rezoning authority within its respective area. All informants indicated that local areas should not exercise this function. In order to retain a broad perspective and avoid parochialism land use approval should continue to be vested with the City. However, one felt some decentralization was desirable if it related to the community's ability to
exercise delegated functions.

**Question 8**

Respondents were asked to list operational factors which would improve the functioning of a citizen's advisory committee regardless of its power. The most commonly noted factors are listed below:

<table>
<thead>
<tr>
<th>Access to:</th>
<th># of Times Mentioned</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Information</td>
<td>5</td>
</tr>
<tr>
<td>b) Technical expertise</td>
<td>3</td>
</tr>
<tr>
<td>- ability to collect and disseminate information</td>
<td>2</td>
</tr>
<tr>
<td>- ability to carry out investigations</td>
<td>1</td>
</tr>
</tbody>
</table>

**Meaningful Role**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Consultation and involvement</td>
<td>3</td>
</tr>
</tbody>
</table>

**Question 9**

Question 9 asked respondents to indicate if a local citizen's committee would aggravate or alleviate land use conflict between City and Province if it (a) exercised the land use approval function, or (b) had an advisory function.

<table>
<thead>
<tr>
<th></th>
<th>aggravate</th>
<th>alleviate</th>
<th>other</th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>5</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>b)</td>
<td>0</td>
<td>6</td>
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</tbody>
</table>

The feeling was that if a local citizen's committee were to exercise land use power it would aggravate Provincial-City relations with respect to land use. On the other hand an advisory role was considered as a positive force to alleviate such conflicts. This is because the latter situation is more conducive to compromise. It enables another group of people to present their case more effectively within the established framework. It does not
create another level of decision-making authority which must be co-ordinated. Those who responded in the 'other' category felt that the City-Provincial relations would be aggravated or alleviated depending on the particular situation and stance of the citizen group. They indicated that jurisdictional powers and hierarchies would be of considerable importance.
5.0 Conclusions

Chapter five presents the conclusions drawn from this research. Findings from the documentary evidence and personal interviews test the selected hypothesis:

- The resolution of Provincial-Municipal land development conflicts would be improved by the establishment of local area planning process in affected parts of the municipality.

The hypothesis assumes that the effectiveness of local area planning process in conflict resolution would be enhanced by the authority to regulate land use within the neighbourhood.

5.1 Testing the Hypothesis

5.1.1 Evidence from the Literature Review

The literature review revealed no unanimity on the effectiveness or desirability of community control of such things as land use, housing, anti-poverty programs etc. Disagreement centred on the role and responsibilities of the community. American planning experience has been very much concerned with the demands of Black Americans and the integration of their demands into a power structure which will give them more influence. (Van Til, 1970; Friesema, 1969, 1970; Zimmerman, 1971; Arnstein, 1969; Eldredge, 1967; Altshuler, 1970).

Altshuler (1970) summarizes the feelings of many American authors on the desirability and purpose of community control.
The hope of community control is that it might provide a base for long term reform. (Altshuler, 1970; in Feagin, 1973)

...it would give Blacks a tangible stake in the American political system. (Altshuler, 1970; in Feagin, 1973)

However, Friesema (1969) is not convinced that community control results in effective gain for American minority groups because of the way in which power is distributed in the American federal system. In this case he is referring to control of the central city areas by minority groups. These cities remain dependent for funds from State and Federal governments whose power base lies in suburbia. The residents of suburbia may not wish to provide funds for expensive aid to the central city. His feeling is that reorganizing urban centres within a metropolitan structure would be more beneficial to achieving minority objectives by increasing their importance at senior levels of government. He realizes that the cost for minority groups would be loss of control of central cities. This fact is likely to militate against reorganization to the metropolitan level because the gains minority groups have made in attaining control of central cities, while small in the total picture, are tangible and represent real gains. Friesema (1969) still feels that in the long run control of central cities will not be sufficient to attain minority objectives.

Canada does not possess the same ethnic problems as the United States. However, the same trend of the more affluent people moving to the suburbs does exist. As a result, the central cities in Canada have an increasing component of lower income people. Thus, the central cities in Canadian metropolitan areas also depend on funding from federal and provincial sources, which, as in the United States, are controlled by the more affluent residents of the suburbs. Examples of such programs would be the Neighbourhood Improve-
The American literature points to the conflicting desire to increase governmental efficiency through centralization or to decentralize power to retain greater control at the grass roots level. From the United States literature it would appear that people are more concerned with control rather than efficiency in a political sense.

For example, Altshuler (1970) writes:

White America . . . has quite regularly placed other values before efficiency in its politics . . . The efficiency experts who call for metropolitan government continue to be ignored . . . We purchase things (such as small scale suburban government) because they please us and their costs seem tolerable. We recognize that efficiency is a word with little meaning where values are problematic. (Altshuler, 1970, in Feagin, 1973)

Canadian authors (Kaplan, 1967; Plunkett, 1955, 1968) point to the fragmented nature of local government in Canada. They note that efficiency in government is related to the manner in which it carries out the wishes of the population. Thus, the situation parallels that of the United States.

In 1959, A. Maass indicated that a relationship existed between area (population) and the amount of power needed to be effective in governing a particular area or population. He further stipulated that power may be divided by area, function or by officials who exercise power. An areal division of power may be further divided by process (legislative versus administrative), function (where powers are assigned to different levels of government) and constituency (where power is assigned to different groups of voters). Maass maintains that the effectiveness of an areal division of power depends on the extent to which the "constituency is composed of or independent of lower

* These are joint Federal, Provincial and locally funded programs designed to improve the stability of neighbourhoods threatened by physical and social deterioration. The primary goal is to preserve existing housing stock and improve living conditions of residents in such neighbourhoods.
levels". (Maass, 1959).

the higher level will be stronger if its government is selected and controlled by a unique constituency rather than the organs of the constituencies of the lower levels. (Maass, 1959)

In other words, a provincial government whose representatives and officials are elected directly by the voters will be more independent and more effective than one whose delegates and officers are selected by the governing bodies of the counties and municipalities. (Maass, 1959)

Maass concludes by stating that an areal division of powers is always related to the values of the area and does not have to be limited in its function (Maass, 1959). Even in 1959, Maass noted that the trend in government had been towards the use of shared power. Due to the great spending power of the federal government and the jurisdiction of the state (province) sharing power has become a common feature of government in both Canada and the United States.

Shared power is also found at local levels. The regional district system in British Columbia illustrates how a number of municipalities collaborate in order to provide services on a regional level for their collective benefit. An individual municipality would not be able to afford such services, nor could it attempt to direct certain forms of development at the regional level (i.e., water and sewer) without the consent of other affected municipalities.

Maass hypothesizes that if community values are to be optimized through increased areal division of power then the central power must correspondingly reduce its authority. According to Ylvisaker an areal division of power must govern generally to be effective. That is, it should be able to make and im-
plement law within its boundaries. (Ylvisaker, 1959; in Maass, 1959). These areas must have diversity "to transcend communities of interest among several components". (Ylvisaker, 1959, in Maass, 1959). This last point is important to the thesis because neighbourhoods are often homogenous. Diversity stimulates consensus because other viewpoints are expressed thereby creating a wider perspective. Values may be optimized because they must adjust to other existing values. Thus, Maass and Ylvisaker believe that the amount of power to be exercised in an area should be related to its size and diversity. The smaller and less diverse areas need less power to optimize their objectives.

The Canadian literature which was reviewed indicates that Canadians are prepared to demand less authority in the decision-making process (Kaplan, 1967). Rather, they are involved in an advisory capacity.

Burns (1973) notes that municipal politicians are already under considerable political pressure because of their accessibility. Various pressure groups (developers, ratepayers associations etc.) can exert considerable influence over local politicians thereby affecting their decision-makers objectivity. A further devolution of power, according to Burns, would result in even less objectivity. Consequently in Canada, there is heavy reliance on the Council-Committee system of local government (Plunkett, 1955). City Council retains decision-making authority but sets up various advisory committees. The Local Area Planning committees are the Shaughnessy Hospital Citizen's Advisory Committee are examples of such committees.

Thus, the literature is divided on the effect, extent and desirability of neighbourhood power. Some authors feel that only through the exercise of legislative power can a neighbourhood achieve its objectives. Others believe that only the implementation and administration of applicable programs should
be delegated to this level. Still others believe that the neighbourhood is too small and homogeneous to act in other than an advisory capacity. None of the literature suggested that neighbourhoods are a vehicle for resolving Provincial-Municipal conflict.

The Council-Committee system of local government in Canada does provide opportunity for neighbourhoods to influence the decision-making process. The literature indicates that it is desirable that neighbourhoods be involved in the decision-making process and that an organized effort is more conducive to influencing the outcome of development issues. Thus, the organizational ability of a local area planning program would be beneficial to the neighbourhood by enabling it to present its own strong, well documented case to the decision-makers. In presenting a 'good' case, it would improve the data base of the decision-makers and thus facilitate a decision. In this sense, alleviating means the process of conflict resolution because all valid concerns would be before the decision-makers.

5.1.2. Documentary Evidence

Documentary evidence shows serious consideration was given to establishing a local area planning program in the area around the Shaughnessy Hospital. This program would ensure that local concerns were given serious consideration and incorporated into any development of the Shaughnessy site. Citizens would have been involved in the formative stages of planning. Evidence shows that the citizens were interested in policy matters and preferred to be a positive force.

The proposed area planning program was not initiated because the Medical Centre, which was to fund the program, failed to find qualified planning staff to undertake the proposal. Rather than wait, they wanted to proceed with their
own plans. The City felt an impact study should be carried out and a citizen's advisory committee set up. These recommendations were adopted and were the only aspects of the process which resembled the original area planning proposal.

Nevertheless, the author feels that the documentary evidence indicates that the process which was implemented was successful in alleviating provincial-municipal conflict. This is because the Citizen's Advisory Committee presented a strong case on their own behalf. Thus, the decision-makers (City Council and the Minister of Health) were able to consider two well documented alternatives. The discussions between the Medical Centre and the Citizen's Advisory Committee permitted the two sides to reach consensus on the medical needs of the province and the neighbourhood concerns. Once consensus was established a compromise solution was possible.

These findings do not indicate that an area planning process would have been more successful than the approach taken. The fact that it was proposed, but not adopted, means that the parties involved were making do with an alternative. Because an area planning program was proposed before the method eventually adopted was undertaken, it means that City Council and the neighbourhood, felt it to be the best approach.

The citizen committee and City Council were a compromising force by acknowledging that the site should be developed for medical purposes. Evidence showed that the new hospital would be mutually beneficial. However, the Medical Centre stood firmly by their original proposal until ordered by the Minister to scale down the size of their proposal. Thus, according to the Citizen's Committee it was the intransigence of the Medical Centre which aggravated the situation. The Medical Centre did not recognize the validity of their concerns and role they wished to play even though both the City Council and the Health
Minister did. The evidence does indicate that the presence of a consensus building force is essential to conflict resolution because it encourages a compromise solution.

There are many examples of citizen groups adopting the extreme position that the only alternative to a development proposal is no development at all. Many of the citizens groups involved in the discussions surrounding the runway expansion plans at the Vancouver International Airport are in this category. On this basis, the exercise of land use development power could be a negative force; one which would aggravate provincial-municipal conflict.

5.1.3 Conclusions from Personal Interviews

Interview responses support the hypothesis that local area planning would aid conflict resolutions between the City and Province in this case. Nearly all respondents felt that the establishment of a local committee would aid their own organization. For maintaining continuity most informants felt that an ongoing group would be more beneficial. This last point is a feature of a local area program in Vancouver.

It was observed earlier that there is already considerable institutional development in the study area. Thus, it is conceivable that these other institutions may also be expanded. An ongoing committee could deal with the potential development as it arises and not require the formation of a new committee with each proposed development.

There was no unanimity on satisfaction with the process which was undertaken. On this basis alone it cannot be argued that since participation did occur that an area planning process would not have achieved similar results. The most common complaint was the ad hoc nature of the committee and that the Medical Centre did not give credence to the role of this committee. Both a
local area planning advisory committee and the Shaughnessy Hospital Citizen's Advisory Committee were approved by City Council. Thus, from a legal point of view the citizens have a valid role to play which must be recognized.

Since respondents felt that continuity was a major positive factor it is presumed that the permanent nature of the local area planning process would be more beneficial to alleviating Municipal-Provincial land use conflict than separate committees established to deal with each new issue. Admittedly some catalyst must initiate the formation of the program. Consequently, it may be seen as a reactive measure in its inception. However, the ongoing nature of a local area program allows it greater flexibility in maintaining continuity in the future development of the neighbourhood.

The respondents nearly all agree that the Shaughnessy Hospital Citizen's Advisory Committee is representative. City Council insists that any neighbourhood committees reflect the components of the local area (interview with Mr. J. Volrich, City of Vancouver Alderman, Vancouver, January 23, 1976.) Consequently it is concluded that representativeness is not a feature of local area planning which favours it over the case study.

Most respondents indicated that the citizen's group should be elected. It should be remembered that this was one characteristic of the model developed in Chapter two. The literature was not unanimous on this issue and neither were the respondents. The fact that most preferred an elected group does not mean that an elected group would be more amenable to resolving Provincial-Municipal conflict.

The interviews suggested that election would make the community group a stronger force because it would electorally represent its area and be responsible to it. Thus it would be a group which could speak for the neighbourhood and not just on its own behalf. Those of the respondents who answered
that the committee should not be elected did so primarily because it could lead to an unrepresentative committee. The Shaughnessy Hospital Citizen's Advisory Committee was selected from a group of volunteers. As noted earlier all respondents were satisfied that the committee was representative even though they were divided on the issue of whether this committee should have been elected. It is concluded from this evidence that the effectiveness of local area committee in this case would not be limited if it was unelected. What is important to the success of the committee is that the committee be representative regardless of how it is chosen.

As an alleviator of conflict much would depend on the attitude of the committee members and their terms of reference as established by the municipal council. Reasons given which suggest that this committee was able to ameliorate the conflict between the City and Province in the case of the proposed hospital expansion were that the citizen's committee was a positive force and viewed the issue in a pragmatic manner. Thus it may be concluded that a formalized area planning process need not necessarily be more effective than what did occur so long as the committee was able to work with both the Province and the City.

It was not possible to determine from the interviews if the neighbourhood committee needed to have land use approving authority to be effective. The respondents indicated that such a devolution of power would be unacceptable to them because it would conflict with the constitutional use of power by City Council. The municipality regards land use regulation as its responsibility and dividing this responsibility among neighbourhoods would aggravate provincial-municipal relations. Relations would be aggravated because of the narrow perspective often held by the neighbourhood and in this case, which was apparent during the early phases of the citizen involvement.
The advisory function was seen as more conducive to alleviating Provincial-Municipal conflict because it lets the established decision-making structure make its decision from a better data base. If the local area had power to regulate land use it would mean that another level of decision-making would have to be coordinated.

5.2 Impact of Citizen Involvement in the Shaughnessy Hospital Case

The interviews were designed to reflect aspects of Vancouver's area planning process to see if it would be conducive to alleviating provincial-municipal conflict. The findings indicated that it has potential to do so based on the impact of the citizen participation.

The original concerns of the Shaughnessy Hospital Citizen's Advisory Committee are listed below:

1. Demolition of the existing Shaughnessy Hospital
2. Size of the initial proposal
3. Cost of the new proposal
4. Local impact on traffic and land use
5. Poor citizen involvement

With respect to number 5, once the Citizen's Advisory Committee was established it held frequent meetings with the Medical Centre. Citizen involvement was dramatically increased. The final Medical Centre proposal, prior to December 12, 1975 Provincial election, dealt with citizen concerns.

1. None of the existing buildings would be demolished.
2. The number of activities originally proposed for the site were reduced. This would have the effect of reducing the local impact with respect to traffic and land use change.
3. The size of the original hospital was scaled down from an 1100+ bed hospital to one new 350 - 400 bed hospital.

4. Other Medical Centre facilities would be upgraded to assume the proposed functions of the initial proposal.

5. Only one third of the Shaughnessy site will be built upon. The rest will remain landscaped.

On March 3, 1976, the new Social Credit government of British Columbia announced that the British Columbia Medical Centre was being abolished. The future development of the Shaughnessy site now seems uncertain, although it may still be used as a location for a new children's hospital. (Vancouver Sun, March 3, 1976).

Personal correspondence with the Social Credit MLA for Vancouver Little Mountain indicated that any development of the Shaughnessy site would be sensitive to municipal neighbourhood concerns.

that the area be considered so as not to alter the way of life for local residents, who could be adversely affected by traffic noise etc.

(Correspondence, G. McCarthy, Provincial Secretary, to R. L. Stone, Victoria, February 1976.)

5.2.1 Modification of Model

The authors stresses that only one case was studied and that the conclusions are based on this case. The reader must be aware of this limitation.

It is apparent from the results of the research that the model identified in Chapter two would not be acceptable in the Vancouver situation. The elected nature of the model committee and the exercise of power would require major adjustments to the existing constitutional structure which all informants felt
was unacceptable.

A new model is proposed based on advisory function which is in the mold of the area planning process as practised in Vancouver. The Vancouver Planning Director indicates that the structure of any area planning process would be tailored to the situation existing in the neighbourhood. Other major features of the model proposed in Chapter two is that the area to which the process is applied be determined by its relevancy to the issues affecting the area. Thus an area would be defined and would continue to function the duration of the process. The committee would be representative and its terms of reference would be jointly determined by City Council and neighbourhood residents.

The authors makes no recommendation on the desirability of an elected committee. Arguments in favour of an elected committee are that:

1. it would be more responsive to the neighbourhood
2. it would speak on behalf of the neighbourhood and be accountable to it
3. residents would have more faith in a committee which they chose rather than in one which was appointed.

Arguments opposing election of neighbourhood committees are:

1. it does not ensure a representative group will be chosen.
2. it would reflect a parochial view.

In order to make the citizen's committee as effective as possible it is proposed that staff be assigned to it in order to provide it with technical expertise. This has the effect of enabling the citizen's committee to provide better advice to Council since its own data base is improved. The duration of an area planning process is currently up to the discretion of Council. Most are established for a two or three year period but may be ex-
tended. This is considered by Council to be enough time to study the neigh-
bourhood in detail and propose plans for the area. The costs of maintaining
the site office and staff are also given consideration. However, on the
assumption that planning is an ongoing process the long-term effectiveness
of an area planning process should not be based entirely on the financial
costs of the process. The lasting benefit of an area planning process is
that it leaves behind greater organization in the community. Also the commu-
ity has become more intimately aware of the processes affecting it. The
citizen's committee would still be able to provide good advice to Council.
Its most last impact would be to establish its validity in the planning
process.

5.3 **Summary**

This case supports the view that effective citizen participation can
alleviate provincial-municipal conflict in the context of land development.
Local area planning increases the effectiveness of citizen participation
because it enables citizens to become better organized and more informed of
the processes at work in their neighbourhoods. It also enables the neigh-
bourhood to prepare its own well documented case. The research confirms the
need for consensus between the affected parties in order to arrive at comp-
romise.

This case supports area planning as an effective means of resolving
provincial-municipal land use conflict. It is the continuing nature of area
planning and the fact that it outlines desirable future development in the
neighbourhood that enhances its effectiveness.

This case does not support the contention that neighbourhoods should
exercise land use approval authority in order to effectively alleviate prov-
incidental-municipal conflict over land use. Evidence indicates that if the
neighbourhood possessed this authority conflict would be aggravated. This
is because land use regulation must be carried out on a perspective broader
than the neighbourhood possesses.

Finally, the research indicates that the local area chosen should be
related to the area of impact and that representatives for the citizen's
committee should be chosen from that area. However, if broader interests
were involved they should not necessarily be excluded from the committee.
Membership could be increased for issues with a wider impact.

This case dealt with a situation whose impact was primarily local. Desp­
ite its importance to British Columbia and the Lower Mainland, the impact
of the proposed Shaughnessy Hospital would primarily be felt at the local
level. Opponents did not question the need for improved medical facilities
which would have been an issue of broader concern. Thus, in this situation
local area planning was an applicable method of citizen participation. Since
the impact was essentially local, area planning could be afforded a more
influential role in the decision.

Had the issue been different or had the impact been more widespread the
use of local area planning would have been less applicable. It would have
been very difficult to define a local area suited to a broader or geographically
larger situation. Thus the issue itself tends to determine how much influence
a citizen group, organized or otherwise, should and could have on the decision­
makers and who the decision-makers should be.

In the case of the Shaughnessy Hospital nobody objected to the need for
better medical facilities. The issue affecting the neighbourhood was one of
reducing the impact of the proposed hospital on the surrounding area. Since
this type of issue directly affected the local residents the importance of
their role on the decision process was increased. Local area planning was applicable for this type of issue.

5.4 Recommendations for Further Study

The local area planning program has existed in Vancouver for only three to four years. To this writer's knowledge, no attempt has been made to systematically monitor its ongoing effectiveness in improving citizen participation. Several area planning programs are now operating in different parts of the city and afford considerable scope for comparative research. Each program suits the situation existing in the particular neighbourhood. For example, the committee structure in each of the designated neighbourhoods ranges from elected to selected. In each case, considerable discussion occurs between City Council and local citizens to determine the committee structure and its terms of reference.

Beyond the current thesis topic no attempt has been made to determine if local area planning is an aggravating or alleviating factor in resolving Provincial-municipal land use development issues. It is recommended that further research be undertaken in the following general fields.

1. Impact of local area planning on improving citizen participation.

2. Effectiveness of local area planning as a tool to alleviate inter-governmental land development disputes.

The case study method is recommended as an appropriate method of research because:

- of the existence of several local area planning processes in the City, and

- the potential for Provincial-municipal conflict over
land development is likely to remain because of the Province's extensive holdings within the city.

The author recommends comparative and specific case studies of programs and Provincial-municipal land use conflicts. The scope of the research should involve:

1. Comparative case studies of the effectiveness of:
   a) citizen participation between neighbourhoods with designated local area status,
   b) citizen participation between designated local areas and other residential neighbourhoods.
2. Monitoring of the local area planning process.
3. Comparative case studies of the effectiveness of the local area planning process in resolving Provincial-municipal land development conflicts between:
   a) designated local area neighbourhoods
   b) designated local area neighbourhoods and other non designated neighbourhoods.
6.0 Bibliography


Medical Centre of British Columbia, 1973, 21 Elizabeth 2, Chapter 12, Revised Statutes of British Columbia.


Shaping the Future. Vancouver: City of Vancouver Planning Department, 1974.


**Journal Articles**


Miscellaneous Unpublished Sources


Shaughnessy Hospital Citizen's Advisory Committee. "Interim Report To Vancouver City Council on the Proposed Shaughnessy Hospital Re-development", June 18, 1975. (Mimeographed)

"Shaughnessy Hospital Transfer Agreement", April 23, 1974. (mimeographed)


Vancouver City Planning Department. "Vancouver Local Areas". 1975.


K. Weaver, President, BCMC to Mayor A. Phillips, July 10, 1974. Letter.


W.A. Buholzer (Area Planner, Vancouver Planning Department), telephone interview held on March 1976.
Appendix. Results of Individual Interviews

Mr. J. Volrich. Alderman, City of Vancouver

Mr. Volrich was not satisfied with the citizen participation in the Shaughnessy Hospital expansion. His dissatisfaction was because the citizens were brought into the process at too late a date. The Medical Centre had already made important policy decisions which limited the effectiveness of local input.

He felt the most favourable aspect of the participation was that the structure which was adopted was appropriate and that the Committee was eager. However, he felt that the Medical Centre frustrated the Committee by not recognizing the importance of its role.

Volrich was closely associated with the Citizen's Advisory Committee and was among those interviewed who felt that the committee was representative. It was representative because its members were selected from a broad cross section of socio-economic background, ethnic origin, location and interest.

He felt that a citizen's committee duly established by City Council should have been established in the area because it was through citizen reaction that Council was made aware of the depth of opposition to the project. He was not convinced that this committee should be elected because it would not necessarily lead to a representative committee. He considered representativeness to be an important factor and an objective selection process would achieve this end. However, he felt that the role of the committee would really determine if it should be elected. If the issue was related to a specific development the selection process would be more appropriate since this type of committee could be directly related to the issue. If the mandate was to be more broadly based then perhaps local area elections would be better.
He mentioned that Council would want to maintain its control over the committee and be able to feel that it could work with it. Ideally the committee should contain elected and appointed members, the latter to ensure objectivity.

Volrich does not believe that the committee should be chosen from an existing defined neighbourhood. This is because the impact extends beyond specified boundaries. Nevertheless for practical purposes the area should be relatively close to the source of impact. He did not elaborate on this point.

He feels that a local committee should serve in an advisory capacity to City Council. It is the role of Council to exercise land development approval power. To delegate this authority would abdicate Council's responsibility. Council requires advice and in order for the citizen committee to be effective in this capacity it must be able to provide good advice. Thus its role must be meaningful. Both City Council and the Medical Centre must recognize its validity and it must have access to technical expertise. This would enable the citizen committee to prepare its own case.

Mr. Volrich felt that through an advisory capacity that a citizen committee would alleviate conflict between the City and Province.

Mr. K. Cummings. Former NDP MLA for Vancouver Little Mountain

Mr Cummings was not satisfied with the citizen participation in the Shaughnessy Hospital issue because he felt that people in the area were not conversant with either the plans of the Medical Centre or the concerns of the City. He also felt that the Committee was not representative but did not elaborate on this observation. He did not feel that a local citizen committee would be of aid to the Provincial Government because of local parochialism.
However, if such a committee was to be established it should be elected because it would then be accountable for its actions to its own electorate. It would also speak for all citizens within its area and not just on behalf of a group which represents no one but themselves.

Mr Cummings was among those who felt that a citizen committee should be chosen from a specified area. He felt that a specified area would maintain continuity of both the committee and in dealing with issues related to the neighbourhood.

The citizen's committee should only have an advisory capacity. To ensure its effectiveness, regardless of its capacity, this committee should have access to information and be able to create and disseminate information.

Finally, he felt that if the citizen's committee had advisory capacity it would be more conducive to alleviating conflict between the City and the Province over land use issues.

Miss P. Young, Former NDP MLA for Vancouver Little Mountain

Miss Young was satisfied with citizen involvement although she did recognize that there were initial problems. She felt the most favourable impact was that the citizen's committee had done a great deal of work and was a pragmatic and positive force. To support her reply she pointed out that the citizen's committee now supported the new Medical Centre plans. She also believed that the Citizen's Advisory Committee was a representative group.

The presence of a committee of citizens established by City Council in an area would be beneficial to the Provincial Government because it would serve as a point of contact. She cited the Community Resource Boards as an example of a contact utilized by the Province in carrying out its functions.

Despite the dangers of parochialism these local citizen's committees
should be elected. Her own experience has been that if radical elements take over more moderate forces eventually prevail.

Like the majority of respondents, Miss Young believed that the citizen's committees should be related to a specific area for the sake of continuity. However, they should only have an advisory function and the City should retain land use approval and rezoning power in the interests of the broader perspective.

To be effective the citizen's committee should have access to information and staff expertise. These features are important elements which allow a citizens group the ability to investigate a proposal and to determine impact, community feelings, and costs and benefits of a development. Finally, she felt that an advisory role was more conducive to alleviating conflict between City and Province on questions of land use. This was because she felt that another level of authority was not needed.

Mr D. McGougan. Member - Shaughnessy Hospital Citizen's Advisory Committee

Mr McGougan was unsatisfied with citizen involvement in the Shaughnessy Hospital issue mostly because the membership for the Citizen's Advisory committee was selected. He felt this was because Council wanted to feel that it could work with the Committee and keep control of it.

The favourable aspects of this participation process was that it brought people together and gave them access to information. As a result they were able to present their own case and have it backed up by relevant facts. The unfavourable aspect was that the citizen's committee was dealing with issues (land use, medical planning) with which they were totally unfamiliar. This does not mean that he thinks that citizen groups should not get involved in issues like the Shaughnessy Hospital expansion but that they need assistance
to help them understand the processes which are involved.

He felt that the citizen's committee was not a representative body because of City Council's manipulation in selecting the committee.

Mr McGougan was of the opinion that committee of local citizens established by City Council in the area would be beneficial to groups such as ratepayers associations. He felt that ratepayers groups generally form in response to particular issues. Having a formal structure in the area would replace the ad hoc group and be able to deal with numerous issues on a continuing basis. These groups should be elected because an elected groups would have more influence, in that it could speak on behalf of the area. Further, such a group should be chosen from a specified area for the sake of continuity.

The citizen's committee should not have land use or rezoning power. The City maintains the broader perspective and the concerns of the local group can be maintained through a meaningful advisory role. For example, he felt many of the problems which arose in this case could have been avoided if the Medical Centre had consulted with the citizens earlier. The effectiveness of the committee could be further strengthened by giving it access to information and staff. This would allow the citizens to better understand their own position and see how it relates to the overall perspective.

He did not answer whether the type of power exercised by the committee would aggravate or alleviate Provincial-City conflict. He did state that whatever capacity is given to the committee it must be given credence by the both the Province and the City if the committee is to be a positive force.
Mr K. Weaver, President, British Columbia Medical Centre

Mr Weaver was satisfied with the citizen involvement process once it was established. He felt that the most favourable aspect of the citizen participation was that the Citizen's Advisory Committee and the Medical Centre eventually came to accord on the scaled down version of the hospital proposal. The unfavourable aspect he mentioned was that some of the people who opposed the Hospital plans were doing so for their own political reasons.

Like the majority of the informants, Mr Weaver felt that the Citizen's Advisory Committee was a representative committee. He concurred with Mr Volrich's remarks that the committee represented a broad cross section of neighbourhood characteristics. He also felt that a duly constituted committee in a local area should exist in a specified area. However, he pointed out that any of the decisions of this committee as they relate to the Shaughnessy Hospital site would impact on the other six members of the Medical Centre because of the integrated nature of the Centre. The citizen's committee should not have land use approval power for its respective area. This is because perspective must be maintained of the whole city. The local area concerns should be considered and the committee representing the neighbourhood should be so constituted so that it is equally able to formulate and present its own case as well as other agencies or groups that are involved. The citizen's committee may be made more effective if it had access to information and technical expertise. These attributes would enable the local people to make their input more effective.

Mr Weaver felt that the advisory function would be more suitable for a local area committee to exercise than having the authority to regulate land use if land use conflicts between City and Province were to be resolved. Advisory capacity would be better because it would already be part of an existing
system and not a new decision-making body which would require additional coordination.

Mr Dennis Cocke, NDP MLA for New Westminster. Former Minister of Health Services and Hospital Insurance

Mr Cocke, although recognizing that the initial citizen participation was late getting started, was satisfied that the process, once established, led to positive results. He felt that the citizens demonstrated great enthusiasm for their task and approached the problem in a pragmatic and positive manner. He was aware that the issue was surrounded by a political climate which was created by some individuals seeking to further personal political interests.

He did not know if the Advisory Committee was representative because he was not closely involved at the level of setting up the Committee. He felt that the existence of a duly constituted local citizen's committee established by City Council in the community would have been of great benefit had it existed prior to the proposed plans of the British Columbia Medical Centre. He did not state if the local group should be elected or not. However, he did feel that organized groups should select their own representatives for such a committee.

Mr Cocke was one of the informants who felt that the citizen's committee should not be chosen from a specified area. His reason was that the area of impact often extends beyond defined neighbourhood boundaries and people living beyond the neighbourhood should not be excluded if they feel that they will be affected.

The citizen's committee should only have advisory capacity. In order to make the committee function well it should have access to information and be
able to prepare its own case. The citizen's committee would be in a position to help alleviate City-Provincial conflict over land use if it acted in an advisory capacity.

Mr R. Spaxman. Director, Vancouver City Planning Department

Mr Spaxman was very dissatisfied with the citizen involvement experienced for the proposed expansion of the Shaughnessy Hospital. It was initiated too late and he felt that the Medical Centre did not have a programme which was sufficiently well thought out to which the City could react. The favourable aspects of the participation was that citizens did eventually become involved and dialogue with the Centre occurred.

He does not know if the Citizen's Advisory Committee was a representative group because he was not that closely involved with the issue. He did feel that the creation of a duly constituted committee of citizens would be essential but cautioned that it must have something to do. In the case of the Shaughnessy Hospital, the Medical Centre's plans seemed to disappear and the result has been that since its "Interim Report to Council" on June 18, 1975, the Shaughnessy Hospital Citizen's Advisory Committee has not met either by itself or with the Medical Centre.

Mr Spaxman felt that an elected group was not the only possible alternative for a citizens group. Rather the type of structure should suit the merits of each case and the existing community structure. He felt that some local areas in Vancouver would not be ready for an elected group. Some do not understand the processes which are occurring in their area. The area from which a group should be chosen must be relevant to the area's needs. For example, city wide groups should not be excluded if they are relevant to the issue.
The local group should not have land use and rezoning authority because they would not be accountable to the city electorate. Rather he felt that power should be exercised at the level of government which exists. The city should encourage decentralization of the things which it can decentralize, but this delegation should only be the things which the local group can do themselves.

In order to be effective a local citizen's committee should have written authority to advise council. This would strengthen their credibility with other groups or agencies. Also they must be included in consultations. Whether a local group would alleviate or aggravate City-Provincial conflict would depend on the hierarchial structure and how the components in each structure interact within their own system and between systems.

Dr W. Gibson. University of British Columbia Medical School. Former Alderman, City of Vancouver

Dr Gibson was satisfied with the citizen involvement which took place with respect to the case study. The citizens calculated the impacts of the proposal and presented them convincingly. The Committee was a representative body and a positive force in the discussions with the City and Medical Centre.

Dr Gibson believed that a committee of local citizens, duly established by City Council in the neighbourhood would have been beneficial to City Council and the Medical Centre.

He felt that at the neighbourhood level, it was very difficult for elections to ensure that a representative committee would be chosen. He believes a wise course of action is for the mayor to exercise his responsibility for establishing advisory committees and invite known community groups to discuss the issue. It may then be decided, at this meeting, to go on and initiate a committee structure.
The area from which a committee is chosen should be related to the area of impact. The maxim for consideration by this committee should be, "What is the area sacrificing and what is it gaining?" It should not be given land use regulatory authority, but act in an advisory capacity to City Council. To improve its effectiveness of the citizen's committee, it should have a small budget to enable it to disseminate information. Temporary headquarters should be located in the neighbourhood with planning staff attached to it either in the office or at City Hall. Citizen's committees are volunteer groups and are an essential feature of local decision-making. To make their advisory role effective they must be assisted. City Hall must retain responsibility and openness in government.

Dr Gibson feels that a citizen's committee playing an effective advisory role would help alleviate confrontation between the Provincial government and the City. This is because it would supply better information and articulate area concerns on behalf of the neighbourhood and not on behalf of a group of people who are not necessarily representative of the neighbourhood.

The Honourable Grace McCarthy. Provincial Secretary

Mrs McCarthy believed that the entire concept of the British Columbia Medical Centre needed to be re-evaluated. Her major concerns were that priority be given to the patients now living in the Shaughnessy Hospital. Also any development of the Shaughnessy site should not alter the way of life of area residents.

The Honourable Evan Wolfe. Minister of Finance

Mr Wolfe feels that the degree of citizen participation has been excellent because as a result, the project was scaled down in size.