

Trends in service delivery: Examples from rural and small town Canada, 1998 to 2005

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Abstract

During the past two decades, social and economic restructuring in rural and small town places across Canada has been accompanied by changes in the availability of local services. From retail to social, health, and government services, changes in local availability are occurring at the same time as such services are increasingly needed to support local economic revitalization in response to economic change. Drawing upon a seven year study of service availability in 19 rural and small town places, this paper explores two key questions. The first concerns trends in service availability over time. The second concerns patterns with respect to the location of those services. The findings highlight general trends towards service reductions and regionalization. The implications from these findings may be significant as both outcomes have the potential to erode crucial local supports necessary for economic renewal and transition in rural and small town Canada.

Key words: services, rural and small town Canada, 1998-2005

1.0 Introduction

During the past two decades, social and economic restructuring in rural and small town places across Canada has been accompanied by changes in the availability of local services. From retail to social, health, and government services, changes in local availability are occurring at the same time as such services are increasingly needed to support local economic revitalization in response to economic change. Drawing upon a seven year study of service availability in rural and small town places, this paper explores two topics: trends in service availability over time, and patterns with respect to the local/regional location of those services.

The paper begins with a brief outline of the role of services in local communities and the challenges of rural service provision. This is followed by a brief introduction to the methodology used for the study. We then explore our topics of service availability and location in a sample of 19 communities from across Canada. The findings highlight general trends towards service reductions and regionalization. The implications from these findings may be significant as both

outcomes have the potential to erode crucial local supports necessary for rural and small town community economic renewal and transition.

1.1 Rural and Small Town Services

In rural and small town places, the provision of basic retail, social, health, education, and infrastructure services provides a crucial foundation for day-to-day activities and maintaining local quality of life and the local economic base. As a result, services are crucial in the new economy where they provide a foundation for the creation of social cohesion and social capital; which in turn play an increasingly large role in the creation of flexible and innovative bottom-up economic activity (Fitchen 1991; Everitt and Gill 1993; Desjardins *et al.* 2002). Social cohesion is achieved through social interaction; interactions that provide the basis for bonds among individuals, and are produced and re-produced through interactions in daily life (Gill and Smith 1985; Beckley and Sprenger 1995; Potapchuk *et al.* 1997; Marshall 1999; Preston *et al.* 2000). Social capital is related in that it refers to the social trust and relationships found between individuals or within a particular group or community. This foundation of trust and prior relationships is a resource drawn upon to accomplish things to meet local needs (Wall *et al.* 1998; Wallis 1998; Bruce and Halseth 2004). Services not only provide these opportunities for the development of relationships and trust, they also provide an information base and ready access to support activities to assist with local quality of life and local economic transition.

However, the provision of rural and small town services has experienced considerable change over time. As described by Halseth *et al.* (2003), Canada has moved through three clear eras of rural service provision. Historically, rural places were isolated and few services were provided by the state. Private sector services were also typically limited. Most rural and small town residents and communities had to look after their own service needs, with the result that there was tremendous variability from place to place. In the post World War II economic boom, both the state and the private sector expanded their service provision roles in rural and small town places. In particular, the state expanded its role into most facets of Canadian life. Principles such as universality meant that a range of public sector services became more readily available. The net result was a tremendous expansion of rural and small town services. Through the past two decades however, there has been a dramatic retrenchment of both public and private sector services.

Since the economic crises of the 1980s, urban based models of efficiency and market parameters have been increasingly extended into the rural services arena (Pinch 1985; Hanlon and Rosenberg 1998). A repeated result has been the closure of many types of services in rural and small town places (Carter 1990; Reed 1999). However, the application of such urban and market based models is often unsuited to the needs and realities of rural places and rural geographies. As such, the consequences of service closures can have significant effects upon community social and economic sustainability (Troughton 1999).

In addition to recent challenges, the provision of rural and small town services has long faced the problem of geography (Blacksell *et al.* 1988; Northern and Rural Health Task Force 1995; Carrier 1999). As Furuseth (1998, 236) argues:

Even under ideal circumstances there are economic barriers to providing adequate community services in rural locales. The demographic reality of

rurality means dispersed populations and low relative population density. The consequence is that the potential demand for services delivered from discreet facilities is dispersed and the per capita costs of providing services are higher than in urban or suburban settings.

Regardless of the service provision era, rural and small town places have struggled to deal with adequate service supports (Joseph and Bantock 1984; Halseth and Rosenberg 1991; Gesler and Ricketts 1992).

This problem of geography also covers the inter-relationships between distances and the size of settlements. Since it is not logistically or financially feasible to offer every type of service in every location, there is the question of why certain services are offered in some locations as opposed to others. Christaller's central place theory (Conkling and Yeates 1976; de Souza 1990) provides a rationale for the location of services within a hierarchy of different sized settlements. Generally, the total number of establishments or services increases as the population of a settlement increases. Lower-order services or functions are provided in the smaller central places that are often located closer together. These places offer functions demanded more frequently such as gas stations or restaurants, and they serve a relatively small and local hinterland. Larger central places are located further apart and provide higher-order specialized services or functions that are less frequently demanded (Knox and Agnew 1994). Because the cost of providing higher-order services is great, these centres must serve a large hinterland region.

Within a hierarchy of central places, Pinch (1985) notes that access to services will vary as a consequence of the distance one is from the centre where services are offered. This is because cost, time, and effort tend to increase with distance traveled. However, in an increasingly mobile society, if people question the availability or quality of rural services, they are more likely to choose to travel to urban locations to access those services. As Stabler and Offert (1992) point out in Saskatchewan, such substitution places even greater pressure on the organization of rural services by drawing off their local customer base. This has added a new dimension to the organization of rural services delivery (Carrier 1999; Reimer 2002). As a result, the analysis described below will pay attention to issues of proximity to larger urban or metropolitan centres.

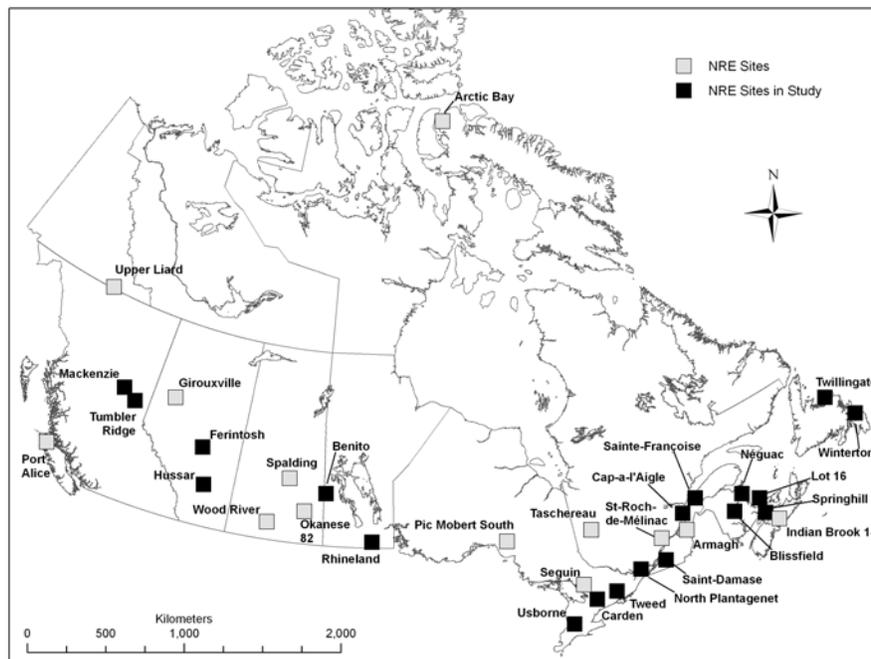
Against the context of retrenchment and closure, we find that services are increasingly important for community and economic renewal (Desjardins *et al.* 2002). With rural and small town Canada experiencing accelerated social and economic change, access to services is a fundamental part of providing the necessary information and support for economic transition (Bruce *et al.* 1999; Sullivan 2002). The availability of basic services is, thus, a key building block for economic diversification. Footloose economic activities will not locate into communities without basic public and private sector services (Furusest 1998).

In summary, services provision in rural and small town Canada is under stress and is rapidly changing. The loss of services, on even an incremental basis, can have a significant impact on local quality of life and the availability of places to hold or attract economic development. As a result, services are crucial in the new rural economy where they also provide a foundation for the creation of social capital to support flexible and innovative bottom up approaches to community and economic renewal (Fitchen 1991; Furusest 1998).

2.0 Methodology

The Canadian Rural Revitalization Foundation (CRRF) has been conducting research in 32 rural and small town sites across Canada (Figure 1). These sites form a type of ‘rural observatory’ in which aspects of community and economic change can be tracked. This research is part of CRRF’s New Rural Economy project (NRE). The sites participating in the NRE project reflect the diversity of the Canadian landscape and include forestry and mining towns, fishing and farming communities, and manufacturing and tourism towns. Furthermore, some of these sites are located adjacent to metropolitan areas while others are more isolated. In selecting the sites, a number of factors within the NRE sampling framework were considered (Reimer, 2002; 2004).

Figure 1



Sites participating in the rural observatory are defined by their legal administrative boundaries. Such boundaries correspond with Statistics Canada’s Census Subdivision (CSD) category. Not all of the 32 NRE sites participated in the tracking of rural and small town services. Participation was limited by research costs as well as the availability of a ‘site coordinator’ to assist with training and data collection. The site coordinators were university based faculty members participating in the NRE project who have assisted by developing a working relationship with the research sites and by training summer students to collect service inventory data.

For this analysis, one of the key sampling variables is proximity to larger urban or metropolitan centres. Proximity to an urban centre can provide opportunities and pressures for rural and small town places as those larger centres have the population base to support a wider range of commercial, retail, employment, and services opportunities (Reimer 2002). The ‘metro-adjacent’ versus ‘non-metro adjacent’ variable explores the proximity of selected sites to metropolitan areas. As

this variable explores regional characteristics, it is based on census divisions from Statistics Canada in which the census subdivisions are located as a measure of adjacency (Reimer 2002).

The question of service availability was dealt with first by identifying the location of the service. In some cases this would correspond to an office location to which people would go in order to access the service. In cases where services are delivered to clients, the location of service delivery and the coordinating office for that service delivery were recorded. Availability was tracked simply by whether or not a service was located within the site boundary. Service location was recorded using three categories: within the boundaries of the study site, within 30 minutes typical driving time from the site boundary, and more than 30 minutes typical driving time from the site boundary.

In the summers of 1998 and 2005, researchers visited 19 sites within the NRE rural observatory in order to record the availability of a range of services. These sites were categorized as either metro-adjacent or non-metro adjacent (Table 1). Data were collected to examine the availability of a range of services within 15 general categories. For the purposes of this paper, seven broad categories of services are explored including health professionals, health services, education, protection services, government services, business services, and recreational services.

Table 1: Study Sites

Site	Metro-adjacency status
Tumbler Ridge, BC	Non-metro adjacent
Mackenzie, BC	Metro-adjacent
Hussar, AB	Metro-adjacent
Ferintosh, AB	Metro-adjacent
Benito, MB	Non-metro adjacent
Rhineland, MB	Metro-adjacent
Tweed, ON	Metro-adjacent
North Plantagenet, ON	Metro-adjacent
Carden, ON	Metro-adjacent
Usborne, ON	Metro-adjacent
Cap-à-l'aigle, QC	Metro-adjacent
Ste. Françoise, QC	Metro-adjacent
St. Damase, QC	Metro-adjacent
Néguac, NB	Non-metro adjacent
Blissfield, NB	Non-metro adjacent
Springhill, NS	Non-metro adjacent
Lot 16, PEI	Non-metro adjacent
Winterton, NL	Metro-adjacent
Twillingate, NL	Non-metro adjacent

Source: Reimer, 2002

3.0 Results

For each of the broad service clusters identified above, this section of the paper reports on the analysis of our two research topics. The first is the changing availability of services between 1998 and 2005, and between sites that are adjacent, compared to those not adjacent, to a metropolitan or urban centre. The second reports on whether or not the services are available within the site or within a 30 minute driving distance.

Table 2 reports on the availability of a range of health care professionals in the selected sites. The delivery of specialized, rather than general, health services is not well suited for rural health delivery frameworks where lower population levels cannot sustain these services (Northern and Rural Health Task Force 1995). In addition, health professional availability has experienced new pressures and demands as a result of economic and demographic pressure (Everitt and Gfellner 1996; James 1999). One consequence of these pressures is that services and professionals are being concentrated into larger centres (Liu *et al.* 2001).

When examined over time, the availability of health care professional services in all of the sampled sites is being reduced over time. In some cases, such as doctors, dentists, and dental surgeons, the decline is relatively small as only one or two fewer sites have these services in 2005 compared to 1998. For some other services, such as nurses and social workers, the reduction in availability across the selected sites is more dramatic. Interestingly, for both optometrists and home care visits, availability of services is higher in 2005 compared to 1998.

Table 2: Health Professionals in NRE Sites

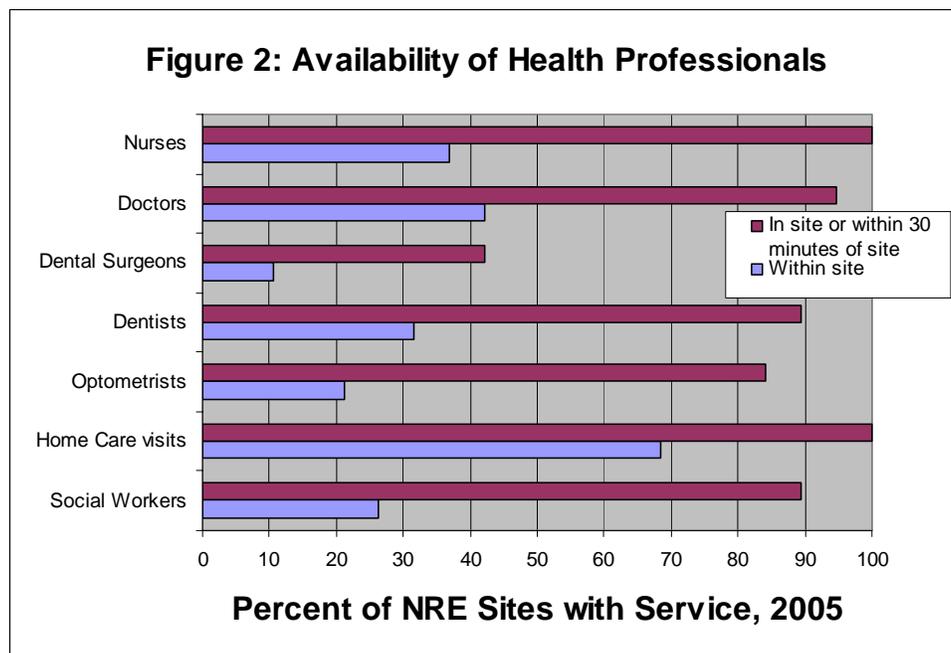
Service – All Sites	1998 % yes	2005 % yes
Doctors	47.4	42.1
Nurses	52.6	36.8
Dentists	36.8	31.6
Optometrists	15.8	21.1
Dental surgeons	15.8	10.5
Home care visits	47.4	68.4
Social workers	42.1	26.3
N=	19	19

Source: CRRF NRE Site Profiles 1998 and 2005

When we compare the availability of this range of health professionals across the selected sites, there is a clear trend towards services being more available in those sites that are not adjacent to metropolitan or urban centres. Doctors, nurses, dentists, optometrists, and social workers are all reported as being more available in non-adjacent sites. Only home care visits are identified as being more available in sites adjacent to metropolitan or urban centres. The availability which adjacent sites have to alternative service providers may be playing a role in this pattern in the availability of health care professionals. Another research topic worth pursuing from these findings concerns whether the various provincial schemes to encourage

health care professionals to locate into rural and remote locations has had any impact upon this pattern of differences between adjacent and non-adjacent sites.

Figure 2 compares the availability of health care professional services in a local and regional context. Less than half of all sites have local access to nurses, doctors, dental surgeons, dentists, optometrists, or social workers. In the case of highly specialized practices such as dental surgeons, only about 10% of all sites have local access. Only in the case of home care visits are services more generally available within the site. When the scale of analysis is changed to accessibility within the site or to within 30 minutes of the site, nearly all of the sampled sites have access to nurses, doctors, dentists, home care visits, and social workers. Only dental surgeons are again less available (less than 50% of sites have access within 30 minutes).



Following from the analysis of the availability of health care professionals, Table 3 provides information on the availability of a small number of health care services. These services were selected as they cover a range of general to specialized activities and address some of the immediate and diagnostic services commonly required. As shown, none of these services are available in more than half of the sites in 2005. In all cases, there has been a small decrease since 1998 in the number of sites where each of these services is locally available. Of note, ambulance service is available in approximately 40% of the sites while blood or urine testing services are available in approximately one-third of sites. Within an aging rural population, the lack of nursing home services identifies a clear challenge for care delivery over the coming two decades. One of the core areas of health care service retrenchment has been with hospital support services. One of the targeted areas in this case is maternity care. As shown, services for the delivery of babies have been low for some time. In our sample of sites, only one still has the capacity in 2005 to routinely deliver babies locally.

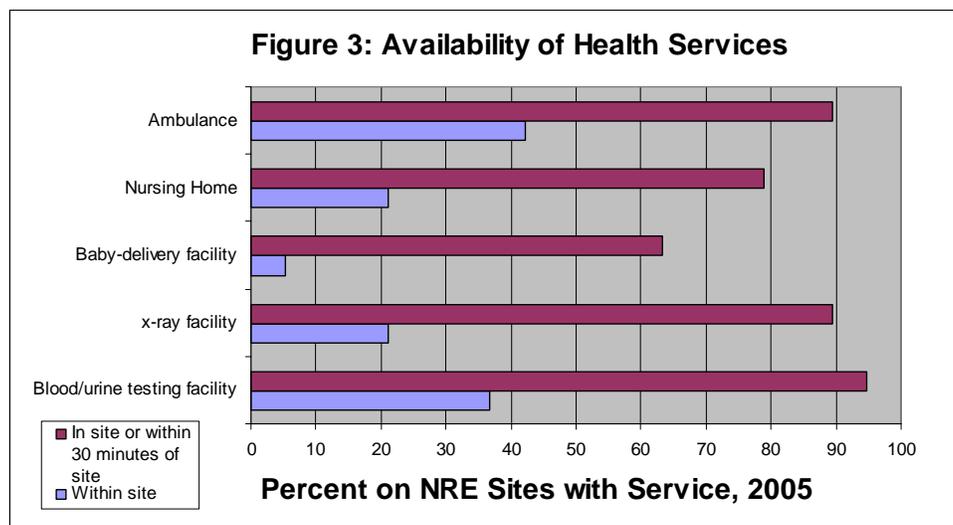
Table 3: Health Services in NRE Sites

Service – All Sites	1998 % yes	2005 % yes
Blood/Urine testing	42.1	36.8
X-ray machine	36.8	21.1
Baby-delivery	10.5	5.3
Nursing home	26.3	21.1
Ambulance	52.6	42.1
N=	19	19

Source: *CRRF NRE Site Profiles 1998 and 2005*

Following from the discussions above regarding the availability of health care services in sites located either adjacent to, or not adjacent to, metropolitan or urban centres, the results highlight that non-adjacent sites generally have greater access to this range of health care services. This holds for blood/urine testing, x-ray facilities, nursing home availability, and local ambulance services. The one site which still has baby delivery capacities is located in a metro-adjacent site.

Figure 3 compares the availability of this set of health care services in a local and regional context. In this case, none of the services are available in more than approximately 40% of the sites. When the scale of analysis is changed to in-site, or within 30 minutes of the site, access to ambulance, x-ray, and blood/urine testing services increases to approximately 90%. Interestingly, even at a regional level, access to baby delivery facilities is still relatively limited as only half of sites have access to this service within 30 minutes of the site. With respect to nursing home services, while only approximately 20% of sites have local access, nearly 80% have access within 30 minutes.



Educational facilities not only provide a foundation for attracting and retaining young families (Everitt and Gill 1993; Porteous 1976; Jackson and Poushinsky 1971), but they can also provide meeting spaces for community groups in the absence of other facilities (Carter 1990; Robinson 1990). Schools have provided additional amenities through their libraries, theatres, and art galleries in places that would otherwise not have access to these services (Rosenfeld and Sheaff 2002).

Educational facilities in rural and small town places, however, are usually limited to pre-schools, elementary schools, and high schools. The limited availability of higher education and training institutions can lead to out-migration, particularly for youth (Bunce 1991). Rural and small town places with community colleges can benefit from the presence of these skilled and professional workers, as well as a range of programs and services designed to respond to changing local market conditions (Rosenfeld and Sheaff 2002). Colleges also act as a repository of local information and expertise.

Across the sampled sites, access to basic education services has generally decreased from 1998 to 2005 (Table 4). While more than three-quarters of sites had a local elementary school in 1998, by 2005 only about two-thirds of sites still had an elementary school. There was also a small reduction in the availability of a local high school or access to a continuing education office. In both of these two cases, less than one half of our sampled sites had access even in 1998. The only increase in educational services was that one additional site now provides local access to a CEGEP/community college. This last increase may be a reflection of a broader movement by the Canadian Council on Community Colleges to use innovative techniques to bring post-secondary educational offerings, as well as vocational and trades offerings, to a larger market.

Table 4: Education Services in NRE Sites

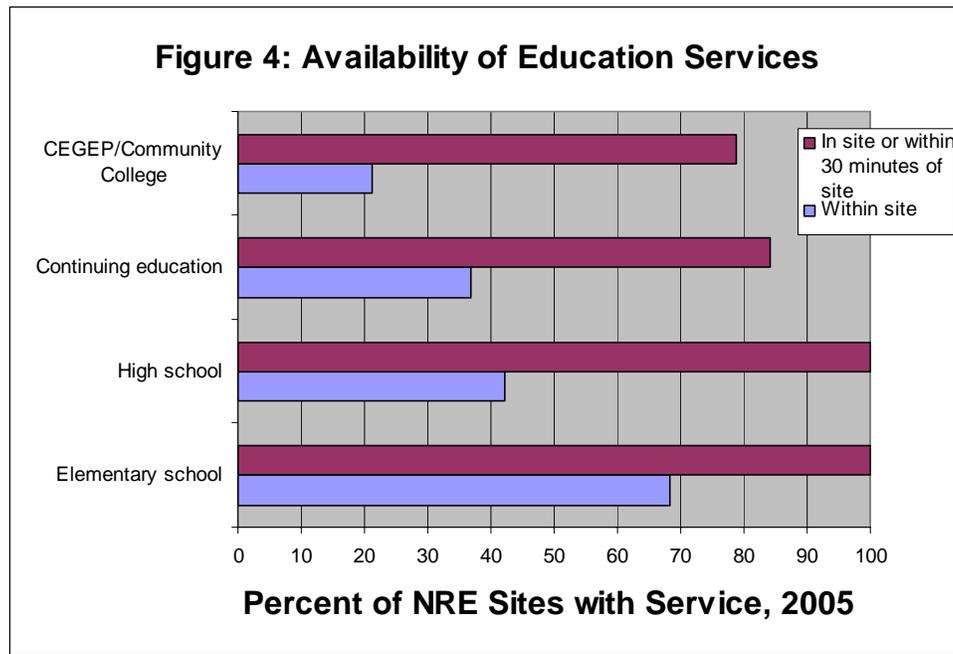
Service – All Sites	1998 % yes	2005 % yes
Elementary school	78.9	68.4
High school	47.4	42.1
CEGEP/community college	15.8	21.1
Continuing Education	47.4	36.8
N=	19	19

Source: *CRRF NRE Site Profiles 1998 and 2005*

When local accessibility to this range of educational services is compared by whether the sites are adjacent to, or not adjacent to, a metropolitan or urban centre, there are few differences within this sample. Elementary schools and high schools are similarly available in both adjacent and non-adjacent sites. Community college/CEGEP services are more available in non-adjacent sites, while access to continuing education services is slightly more available in metro-adjacent sites.

Figure 4 shows the importance of a regional context for the availability of educational services for residents of this selection of rural and small town Canadian sites. While most sites have local access to an elementary school, and

only approximately 40% have access to a local high school, all sites have access within 30 minutes to both elementary and high school facilities. There are similar large increases in accessibility for continuing education and CEGEP/community colleges when the sites are considered within a regional context of 30 minutes driving time from the site boundaries.



Protection services contribute to community capacity in many ways. Volunteer fire departments and various ‘crime watch’ programs can provide opportunities for community involvement and interaction, both of which can build trust and leadership. At a more mechanical level, they can have important implications for the availability of home and business insurance.

Table 5 contains information on three basic types of protection services. For both police and fire department services, there was a decline in local availability from 1998 to 2005 (although for fire services, this change was only by one site). This does not necessarily mean that local sites would not be serviced by a police detachment or by a fire department; rather it means that there is no local office for either service. In contrast, there has been a more dramatic rise in the availability of 911 emergency telephone services in these sites. While many fire departments in rural and small town Canada are volunteer-based, problems of population aging or population decline, combined with increasing regulations around fire training standards, may mean that smaller community departments are consolidating. In the case of police services, restructuring to save costs is driving regional consolidation in many locations. The increase in 911 services is a reflection of some of the cost efficiencies of service consolidation which makes highly trained call technicians available in larger centres to handle in-bound emergency calls from smaller communities.

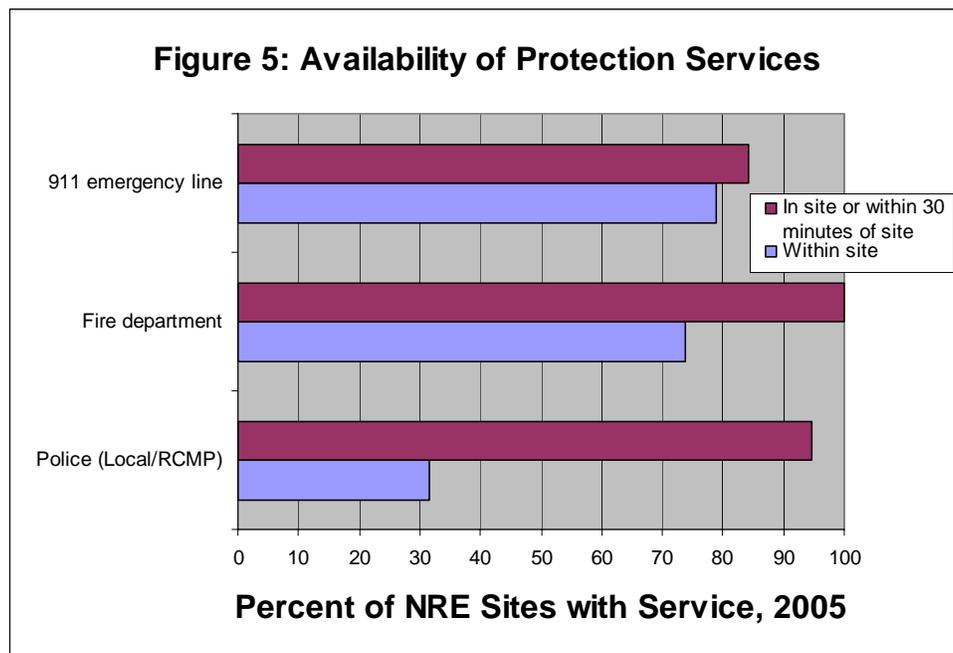
Table 5: Protection Services in NRE Sites

Service – All Sites	1998 % yes	2005 % yes
Police	57.9	31.6
Fire Department	78.9	73.7
911 emergency line	47.4	78.9
N=	19	19

Source: CRRF NRE Site Profiles 1998 and 2005

Whether the sites are located adjacent, or not adjacent, to a metropolitan or urban centre has some clear implications for the local availability of protection services. In the case of police services, non-adjacent sites are twice as likely to have a local detachment office compared to metro-adjacent sites. In contrast, local fire department services are nearly twice as likely to be present in metro-adjacent sites compared to non-adjacent sites. Finally, 911 emergency telephone services are more likely to be available within metro-adjacent sites.

When examining the availability of protection services within a local or regional context, the findings are most dramatic for police services (Figure 5). While 911 emergency services do not differ very much between whether they would be available within the site or within 30 minutes, all of the sampled sites are serviced by a fire department located within 30 minutes. For police services, most are now serviced by a regional detachment within 30 minutes of the site.



Government services play an important community capacity role by providing a local source of expertise and knowledge upon which the community can draw. The

closure of local offices also has a practical implication in that it means a reduction in the number of well-paid jobs in the community. When these professionals leave, it represents a loss of revenue, community skills, capacity, and leadership (Lawrence *et al.* 2001). Furthermore, government services provide important programs to help households cope with the stresses associated with economic or social restructuring.

Table 6 contains information on the changing availability of a small number of government services. The range of services includes federal (employment insurance), provincial (automobile licensing), and local (town hall) services. In addition, the availability of a local social assistance office is included even though the supplier (provincial, regional, or local government) varies across the provinces. For all four of the identified services there is a notable decline in local availability from 1998 to 2005. For employment insurance, automobile licensing, and social assistance, approximately two fewer sites offer these services in 2005 compared to seven years earlier. One product of the move in several provinces to consolidate municipal jurisdictions is that between 1998 and 2005 the number of sites with a local 'town hall' had declined. In all of these cases, access to government services is an important element of local capacity and provides a pool of expertise during periods of social and economic uncertainty. This pattern of decline thus has consequences for local resiliency. In particular, the decline in availability of a local civic administrative office reduces the opportunity for a legitimate local 'voice' in public and private sector debates on community and economic development issues.

Table 6: Government Services in NRE Sites

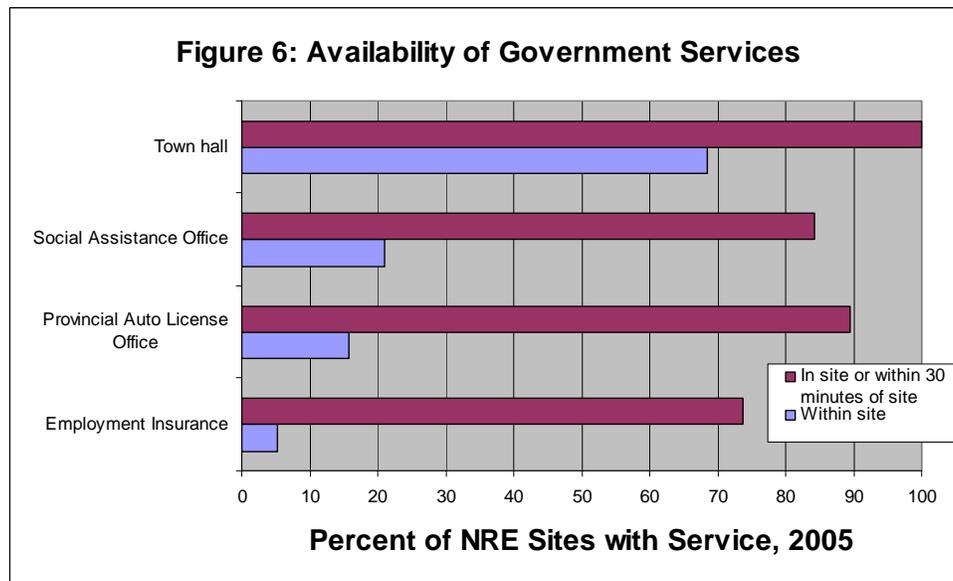
Service – All Sites	1998 % yes	2005 % yes
Employment Insurance	15.8	5.3
Prov Auto License Office	31.6	15.8
Social Assistance Office	31.6	21.1
Town Hall	84.2	68.4
N=	19	19

Source: CRRF NRE Site Profiles 1998 and 2005

There were relatively few differences in the availability of government services based on whether our sites were adjacent, or not adjacent, to a metropolitan or urban centre. The only remaining employment insurance office found within the sites was in a non-adjacent community. Automobile licensing and social assistance offices were more likely to be found in non-adjacent sites. There was no adjacency impact on whether or not sites had a civic town hall.

As shown in Figure 6, there are some dramatic regional implications respecting the availability of government services. With respect to automobile licensing and social assistance, while only a few sites have local availability, most have access to these services within 30 minutes of the site boundary. There is a similar dramatic effect for the regional availability of employment insurance offices. These results follow from a research literature that talks about the regional consolidation of public sector services as part of an ongoing fiscal and organizational restructuring.

The implications, however, are significant for rural and small town residents in that they must now bear the costs of traveling to regional centres in order to access these needed services. In the case of employment insurance and social assistance, these costs are relatively more important since the reason for accessing such services arises from an economic challenge. In terms of a civic town hall, all of the sampled sites have access within 30 minutes. This regional accessibility follows directly from the geographic foundations of local government consolidation in various provinces.



Businesses play a role in providing a range of activities that enhance the quality of life of a place, as well as the economic viability and stability of the place (Bowles 2000; Bruce 2001). Business members also play an important role in community development as they can provide leadership across a range of community groups (Bruce and Halseth 2004). Small local businesses are also an important source for fundraising, and many businesses sponsor specific local organizations or events (McDaniel 2001).

Table 7 includes local service availability information with respect to a small number of financial and insurance services. For insurance offices, in 2005 one site less had a local insurance office compared to 1998. Given that the information on bank services in 1998 also included the local availability of a credit union or *caisse populaire*, it is difficult to identify whether there have been any trends over time for the credit union/*caisse populaire* segment of the banking industry. When the detailed site reports for 1998 were compared with the banking data, it does become evident that there was a decline in local bank availability from 1998 to 2005. The only increase in business services is noted for automated teller machines.

Table 7: Business Services in NRE Sites

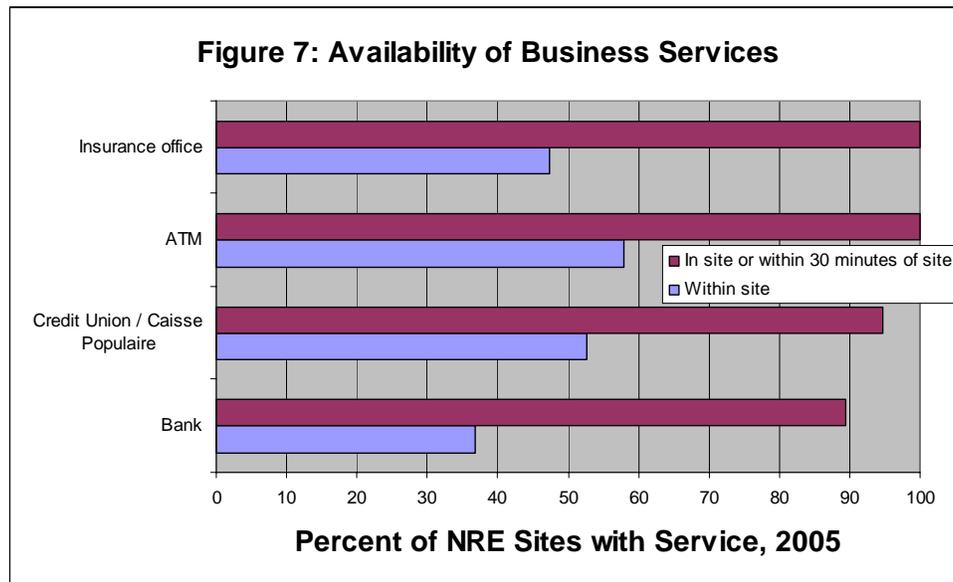
Service – All Sites	1998 % yes	2005 % yes
Banks *	68.4	36.8
Credit Union / C.P.	*	52.6
ATM	47.4	57.9
Insurance office	52.6	47.4
N=	19	19

Source: CRRF NRE Site Profiles 1998 and 2005

*In 1998, banks and credit unions were not separated, but were counted as the same service.

There were relatively few differences in the availability of business services in the 19 rural and small town sites based on whether those sites were adjacent, or not adjacent, to a metropolitan urban centre. The only notable difference is that a credit union or caisse populaire is more likely to be locally available within non-adjacent sites.

When the analysis moves to a regional level, business services are nearly always available across the selected rural and small town sites (Figure 7). All of the sampled sites have access within 30 minutes to an insurance office and an automated teller machine. More than 90% have access within 30 minutes to a credit union or a caisse populaire, and nearly 90% have access within 30 minutes to a bank.



Recreational amenities and programs are important to enhancing local quality of life, and play an important role in attracting and retaining residents and businesses (Michalos and Zumbo 1999; Jackson and Poushinsky 1971). For example,

businesses have been noted to choose a town location due to quality of life attributes such as winter-based recreation, summer-based recreation, and wildlife-based recreation (Johnson and Rasker 1995). For residents, feelings of isolation can occur in the absence of recreational and cultural amenities (Bergen 1977).

The final set of services described in this paper concerns those associated with recreation or entertainment (Table 8). In contrast to most of the services described above, the general pattern with respect to recreation/entertainment services is that they continue to be locally available. Between 1998 and 2005, there were increases in the local availability of live performance theatre and libraries. Over that same time period, one site less had local availability of a community centre or a curling rink. In the case of a local cinema, this went from being available in two sites in 1998 to not being available in any sites in 2005.

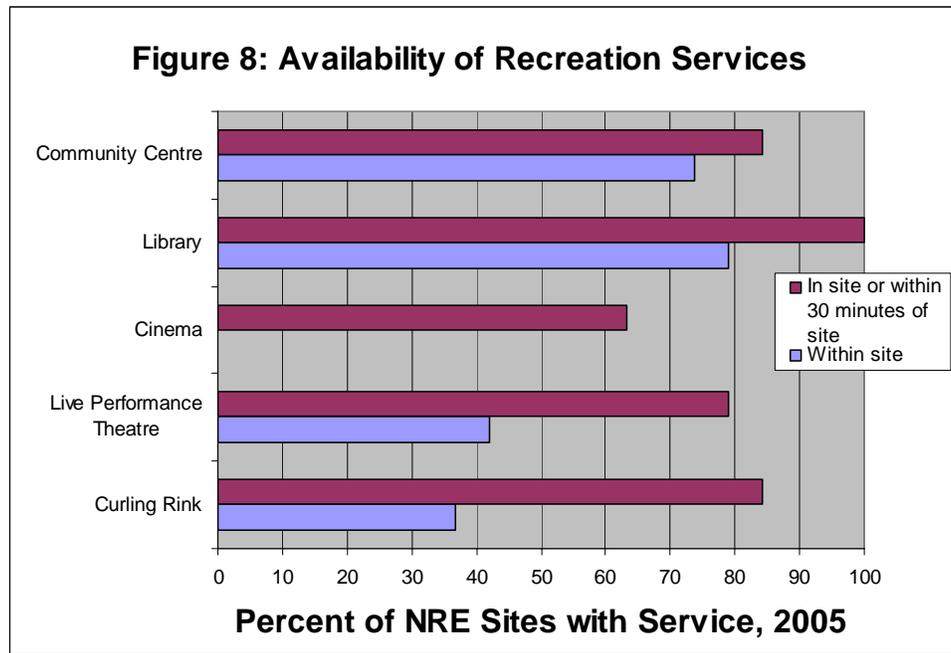
Table 8: Recreation Services in NRE Sites

Service – All Sites	1998 % yes	2005 % yes
Community Centre	78.9	73.7
Theatre (live performance)	26.3	42.1
Cinema	10.5	0.0
Library	73.7	78.9
Curling Rink	42.1	36.8
N=	19	19

Source: CRRF NRE Site Profiles 1998 and 2005

When the local availability of the selected recreation and entertainment services is compared by whether sites are adjacent, or not adjacent, to a metropolitan or urban centre, there were only a few differences among the sampled sites. Only in the cases of a local community centre or a local curling rink were there differences, with metro-adjacent sites nearly twice as likely to have both of these types of recreation facility.

As shown in Figure 8, there are small regional implications for the availability of community centres and libraries across the sampled sites. The regional effect becomes larger with respect to live performance theatre and curling rink facilities. In the case of access to a cinema, just over 60% of sites reported availability within 30 minutes.



4.0 Discussion

During the past two decades, social and economic restructuring across rural and small town Canada has been accompanied by local service changes. Many of these recent service changes have been driven by the application of urban-based and market-based models of efficiency, with the repeated result that many types of rural and small town services have closed. The application of such urban and market models are not only unsuited to rural realities, but can have significant effects upon community sustainability. Drawing upon a seven year study of service availability in 19 rural and small town sites, this paper has explored two questions. The first concerned trends in service availability over time. The second concerned patterns with respect to the location (local or regional) of those services. In general, the findings highlight trends towards service reductions and regionalization. The implications are significant as both outcomes can erode crucial local capacity and supports needed for transition and renewal.

When examined over time, the local availability of nearly all of the services tracked through this study was reduced over time. For health care services and professionals, there were some dramatic reductions, such as for nurses and social workers, while for others, such as maternity care, the level of local availability has clearly been low for some time. Local access to basic education services and three basic types of protection services has also generally decreased from 1998 to 2005. In the case of schools, the range of 'community building' and 'community supporting' roles they play beyond their educational function highlights a considerable local loss. In the case of protection services, the loss of a local policing detachment was particularly notable. However, the loss of local fire departments was perhaps more important from a community capacity standpoint due to the long standing role of volunteer firefighting groups in creating opportunities for building social cohesion, social capital, and in supporting a host of other community activities and events. The theme of potential reduced

community capacity was raised again in results describing the loss of government services, most especially the reduction in the number of sites represented by a local municipal town hall. As noted above, declines in the local availability of a civic administrative office reduces the opportunity for a legitimate local 'voice' in public and private sector debates on community and economic development issues and may have consequences for local resiliency. Similarly, reductions in the local availability of a range of business services also have the potential to negatively affect economic development resiliency. The only services that showed a general pattern of stability were those associated with recreation or entertainment; activities important for supporting local quality of life.

A second aspect of the local availability question flowed from concerns in the literature with the relationship between larger and smaller centres. These concerns focused upon the potential for larger centres to overwhelming small places by capturing much of the service provision activity and, thereby, reducing elements of local employment, economic diversification, and community capacity in those smaller places. To explore this, the paper compared service availability by whether sites were adjacent to, or not adjacent to, metropolitan or urban centres. In terms of health care professionals, there was a clear trend towards services being more available in sites not adjacent to metropolitan or urban centres. Following from this, the results also highlighted that non-adjacent sites generally had greater access to a range of health care services. In terms of education, elementary schools and high schools were similarly available in both adjacent and non-adjacent sites, while community college/CEGEP services were more available in non-adjacent sites. Non-adjacent sites were also twice as likely to have a local police detachment office while metro-adjacent sites were nearly twice as likely to have a local fire department. For business services, credit unions or *caisses populaires* were more likely to be locally available within non-adjacent sites. There were no notable differences in the metro/non-metro adjacent availability of government or recreation/entertainment services. The generally higher level of service availability in non-adjacent sites adds some complexity to the arguments from the literature that apply central place theory and simply allocate expected services based upon local population size. There is some geographic affect from proximity that is not currently accounted for by that model but is hinted at within the commuting and services literatures where people will by-pass a local supplier for a nearby larger centre if the service/price is perceived to be better in that larger centre. This is an area needing additional research under the changing circumstances of transportation and communications networks, and as delivery agencies explore alternative service delivery models.

The second research question explored local versus regional patterns with respect to the location services. The results across all categories followed the above noted trends of local reductions in service availability with current trends towards services being made available on a regional basis. For example, while access to health care professionals was reduced locally, when the scale of analysis is changed to accessibility within 30 minutes of the site nearly all sites have access to nurses, doctors, dentists, home care visits, and social workers. The same holds true for access to a range of health care services (with the notable exception of baby delivery facilities which are still limited even at a regional scale. For education and protection services, the regional scale is again important as all sites had access within 30 minutes to both elementary and high school facilities, and nearly all sites had service within 30 minutes by a fire department and a regional police

detachment. While there were no notable differences in the metro/non-metro adjacent availability of business or recreation/entertainment services, nearly all had access within 30 minutes to the sampled government services (and all sites had access within 30 minutes to a civic town hall).

In summary, services provision in rural and small town Canada is under stress and is rapidly changing. The loss of services, on even an incremental basis, can have a significant impact on local quality of life and the availability of places to hold or attract economic development. As a result, services are crucial in the new rural economy where they also provide a foundation for the creation of social capital to support flexible and innovative bottom up approaches to community and economic renewal. These findings with respect to local reductions and regional concentration will have an impact upon local resiliency.

5.0 Conclusion

Services provide stability and quality of life in rural and small town places, something which in return provides a strong base for attracting economic activity, retaining residents, and maintaining communities. Such services are especially critical during times of economic and social restructuring. If services close, there is increased local uncertainty and decreased ability to cope with stress and change. Increased out migration as a result of service closure reduces local resiliency and may lead to community closure. The results of this study identify that rural and small town services are becoming less locally available. While this is seen in both market and public sector services, it seems that local closures have been more aggressive in the public sector. At the same time, services continue to be available on a regional basis following longstanding principles of centrality and market area.

The closure of local services, and the shift towards regional availability, follows trends broadly identified in the services literature. However, these same trends can undermine some crucial rural and small town community capacity functions. First, the shift from local to regional service availability can have significant impacts on those less able to travel. This may include the elderly, those with limited economic means, those with mobility challenges, or any combination of these types of concerns. The overt policy decisions driving many of these changes also carry an implicit shifting of the burden of costs to service users that belies Canada's continuing commitment to accessibility and universality. As noted earlier in the paper, a range of literatures have highlighted the crucial role of services in supporting opportunities for local interaction and the generation of social cohesion. Local services can also deliver needed activities and generate local confidence and trust in the groups associated with such service provision. This in turn can form a foundation for creating and renewing both bonding and bridging social capital. Both social capital and social cohesion processes are disrupted and strained when services shift from local to regional availability. Finally, such closures and disruptions are occurring at the same time that social and economic restructuring is accelerating. Attention to service provision as a component to rural and small town community and economic renewal clearly needs more thought and policy attention in order to avoid unintended consequences which could truncate local renewal efforts.

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