

Planning, Health, Liveability



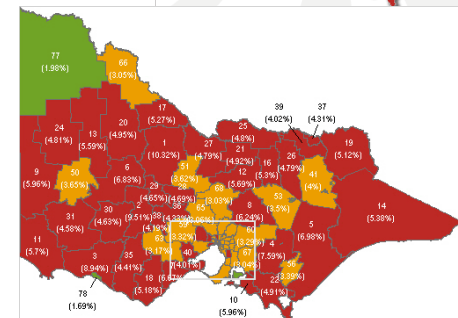
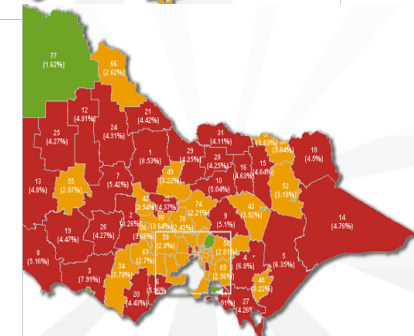
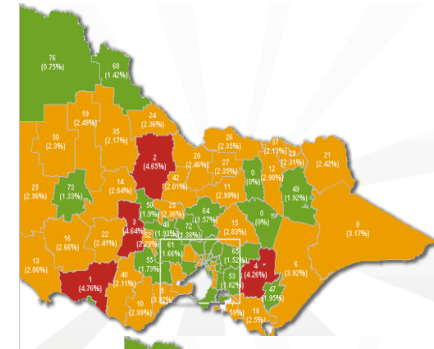
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Health and Wellbeing Concerns (Diabetes)

Australia 2011)

- Rates of adult onset diabetes more than doubled in Victoria 2001-08: cost of over \$1billion/annum to Victoria(Diabetes Australia 2008)
- Heart disease continues to be the most costly in terms of deaths and health costs: over \$1.5 billion/annum to Victoria (AIHW 2011)
- Rates of overweight and obesity have more than doubled in Victoria – if trends continue to 2025, 1/3 of children, 4/5 of adult males and 3/4 of adult females will be overweight (Victorian Government 2008)
- Depression is not only a severe health cost in itself, but is related to diabetes and heart disease (Australian Department of Health and Aging 2011)



Planning Policies⇒built environment⇒behaviours⇒**health/wellbeing outcomes**

Health-Promoting Behaviours (Malone 2007,



- We know that ^{Perkovic 2008)} physical activity, healthy eating and not smoking are top 3 ‘resilience’ factors for chronic disease (Oxford Health Alliance 2006)
- Yet over half of all Australian adults, and 2/3 of children, are not sufficiently physically active to gain health benefits (Department of Health and Aging 2008)
- Children who walk or cycle to school are more likely to get enough physical activity and to explore other places – but 2/3 are driven to school in Victoria, even when the trip is short (Garrard 2009)
- Half of the 50 children in Bendigo aged 4-8 who were asked to take photographs of a ‘typical week’, included a photo of the back seat of their car (Malone 2007)

Planning Policies ⇒ built environment ⇒ **behaviours** ⇒ health/wellbeing outcomes

The Built Environment (Dodson and Sipe 2006)

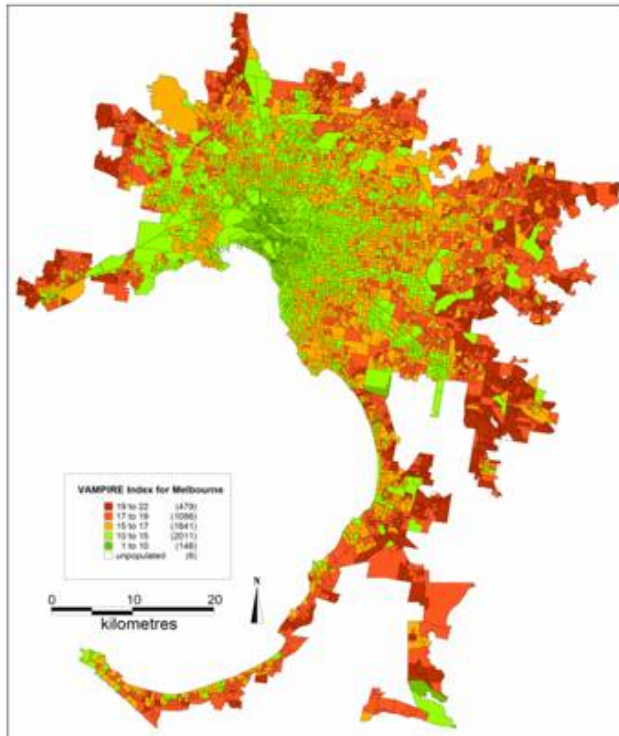


Figure 7: Mortgage and oil vulnerability in Melbourne

- There is a direct relationship between urban sprawl and physical inactivity, overweight, and morbidity through chronic disease (Ewing et al 2003a) – as well as urban sprawl and road accidents (Ewing et al 2003b)
- Australia now has the largest houses in the world – bigger than the US (ABS 2006)
- 23% of low income households in outer suburbs (less than \$500/week) are running 2 or more cars a week (Currie and Senbergs 2007)– even when they are in housing affordability stress (Dodson and Sipe 2006) – vicious circle of car dependence increasing safety concerns!

Planning Policies ⇒ **built environment** ⇒ behaviours ⇒ health/wellbeing outcomes

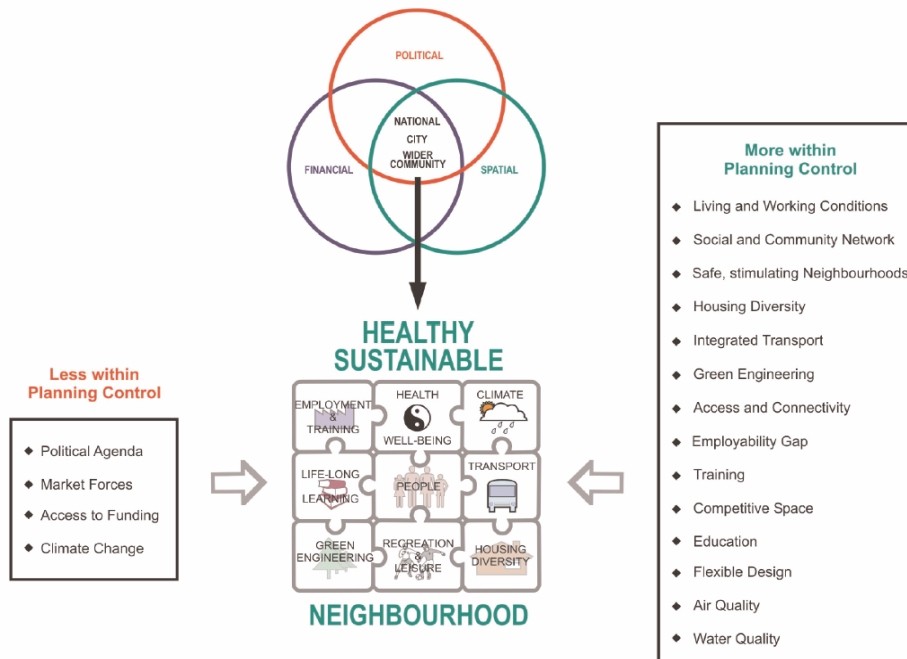
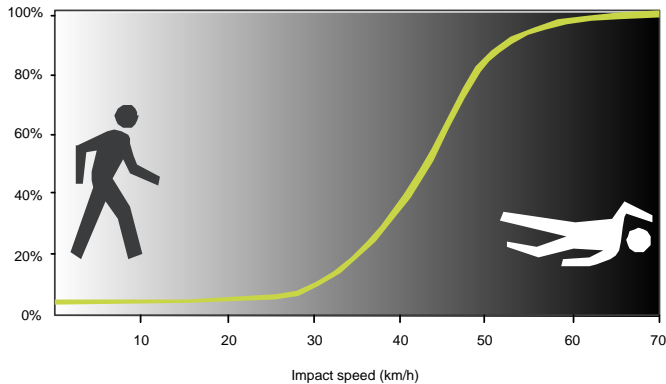
What Can Planning Do? (Heart Foundation 2010, Glasgow Centre for

Population Health 2008)

1. Traffic calming: reducing speeds to 30 k/hr, reducing volume of cars
2. Integrated transport and development, increasing land use mix and densities, access to destinations (fruit and vegetable shops, parks, work), especially in relation to affordable housing
3. Safe, stimulating neighbourhoods through design for public and open space

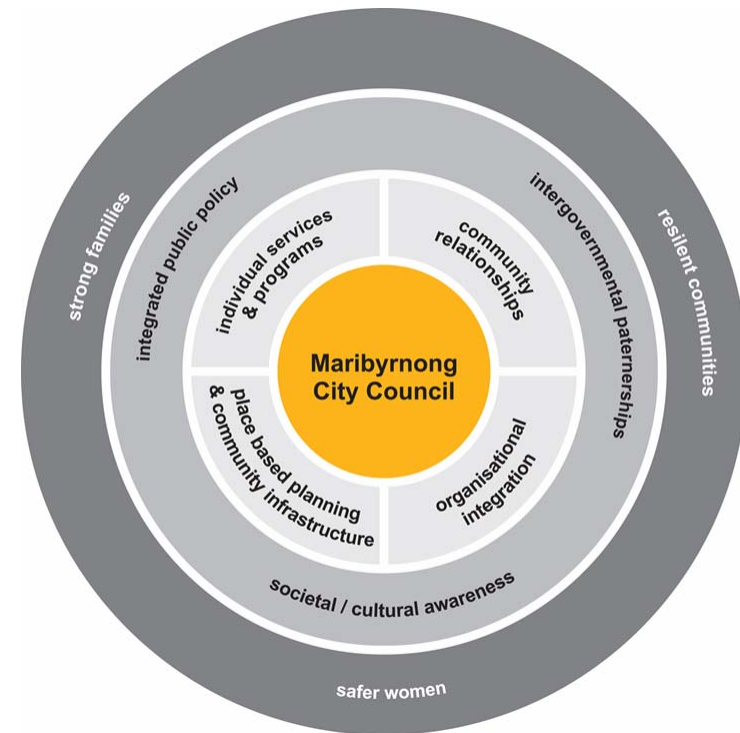
THE HEALTHY SUSTAINABLE NEIGHBOURHOODS MODEL

Figure 1



GLOVE: Gender, Local Governance and Violence Prevention (ARC 2006-09)

- Violence against women leading factor for death and disability amongst women 15-44
- Main finding: local partnerships can provide effective and coordinated programs, but need consistent state government support



Children's Independent Mobility research (2006-ongoing) (Perkovic 2008)



- Child-Friendly Cities polices are promising in increasing children's active travel and independent mobility outcomes, but land use planners need easy tools to consult children about public space
- Children living in high rises have as much or more mobility as kids in traditional suburbs, but family-friendly medium density housing targets and guidelines are needed

Planning for Health and Wellbeing Evaluation 2002-2006

- Despite successful professional education and some culture change, no increase in planners' everyday consideration of health (Whitzman 2007)
 - “Individual planners don't have much influence” “It needs to be in the legislation”, “What we need to do is give it the strength of legislation”; “It's not highlighted in the planning scheme”, “It's not in the policies”, “It must be legislated by the State”

	2002	2005
Planners have a role in creating a healthier community	89	98
Consider health in their day to day planning 'frequently'	26	26
Consider health in their day to day planning work 'infrequently' or 'never'	49	54

What Needs to Happen

- Legislation: new Planning and Environment Act needs to have health as a planning objective and mandate integration of local land use planning instruments (MSS, PSP, UDF) with health and wellbeing goals
- Political will:
 - Transport Integration Act (2010) is great, but needs major investment in active transport infrastructure, particularly rail
 - Sprawl needs to be halted, and affordable and social housing increased in inner and middle suburbs where the infrastructure and jobs are located

It is Happening Elsewhere: Design for Health Project, Minnesota

Part 2: Does the plan or proposal meet some initial thresholds for a healthy community? Answer the following in relation to the plan or project and adjacent uses.⁵

- Training, development of easy HIA tools for planners, and most importantly SUPPORTIVE LEGISLATION, has led to 7 cities developing comprehensive and integrated land use plans incorporating health (2006-) and numerous HIAs done by planners on new developments

Key Questions	No	Uncertain	Yes	
Accessibility: Does the plan involve residential components that are built at an average density greater than seven units per acre of buildable land available for residential use? ⁴	2	1	0	
Accessibility: Is there regularly scheduled transit service within three-quarter miles of all residential and employment areas? ⁶	2	1	0	
Physical activity/social capital: In order to provide options for physical activity and social interaction, particularly for children, are all residential areas located within 400 meters of either a neighborhood park, trail, or open space?	2	1	0	
Social capital: Does the plan or project include a mix of housing densities and/or tenures (e.g. at least 15-20% of the housing stock in a different use tenure or as apartments/condos)?	2	1	0	
Air quality: Are there any residential areas or schools within 200 meters of a major auto-related transportation corridor such as a freeway or road with six or more lanes?	0	1	2	
Air quality: Does the plan or project area include businesses that disproportionately contribute pollutants (e.g., dry cleaners, automotive paint, manufacturing)?	0	1	2	
Water quality: Is it developed on a site with existing water and sewer infrastructure?	2	1	0	
Food: Are there supermarkets or fruit and vegetable stores located within a mile of each home?	2	1	0	
Safety: Does the plan or project adequately account for safe circulation patterns for all modes such as employing traffic calming measures, using separate facilities for non-motorized modes, or ensuring adequate lighting and sight lines.	2	1	0	
Total		+	+	=
<p>If total score is 13 or greater, it is recommended that you conduct an HIA. If total score is 8-12, an HIA is potentially needed. If total score 7 or less, no HIA is required. You may wish to do a HIA on a targeted area or problem.</p>				

What similar policy-relevant research could be undertaken in Victoria?

What impact do current planning policies have on people in 'growth areas' in

- green field developments
- brown field developments
 - Inner Melbourne
 - Middle suburban Melbourne

Creation of a 'social determinants of health' or 'liveability' GIS index

What kinds of tools can improve evidence-based health and wellbeing/liveability decision-making from government and private sector?

