

Planning and Health: Building Sustainable Links - 12 November 2001 Seminar Notes

1. INTRODUCTION

VicHealth's 1999 – 2002 Strategic Directions identified the impact of planning and the built environment on the physical, social and mental health of Victorians as an emerging area of work. This interest has been built on information generated from projects funded over the years such as the Six Healthy Localities (1989-90); The Supportive Environments for Physical Activity: Mapping Exercise (1989-1990), the Social Determinants of Health for Local Government (2001) and the Local Government Arts and Environment Scheme (2001).

The purpose of this seminar was to work in partnership with the Department of Human Services and the Royal Australian Planning Institute (RAPI) to raise awareness of the links between people, the places we live in and our well-being. The program consisted of speakers providing a brief overview of key initiatives in Victoria and a short workshop to explore the challenges and opportunities for future collaboration across sectors, identifying gaps and existing mechanisms for incorporating health as an aspect of urban planning and design.

There was strong interest from government, non-government, private sector, developers, health agencies, private consultants and community planners.

Speakers

Ms Barbara Norman, National President, RAPI, welcomed everyone and provided the context of the Seminar as part of the 2001 RAPI Planning week and the RAPI Policy Liveable Communities: A National Agenda. Ms Norman chaired the Seminar.

Dr Rob Moodie, CEO of VicHealth provided the background and rationale for the Seminar from the context of the Victorian Health Promotion Foundation's 1999-2002 Strategic Directions and current VicHealth activities related to the built environment and health. He stressed the complexity of the issue, the need for more evidence, and the necessity, opportunities and advantages to collaborating in innovative ways across sectors to incorporate health as a key aspect of the planning, evaluation and research into the built environment.

Mr John Bruce, Project Officer, Department of Infrastructure, presented the Metropolitan Strategy-Linking Planning and Health. The key challenges for the Metropolitan Strategy include: Competitive economy, more people to house, increasing diversity of household types, spreading metropolitan urban area, widening social divide, increasing disparity of access to jobs, poor access to public transport, uneven regional development and the expanding environment footprint. 90% of

householders live within 6 km of transport. Messages from consultations indicated support for a cultural shift to more walking, cycling and a safe, more sustainable quality urban environment with an integrated transport strategy, reduced inequalities, a fairer city and sharing the benefits of Melbourne's growth with the region. The new direction will be underpinned by the triple bottom-line approach of Environmental Integrity, Economic Vitality and Social Well-being.

Professor John Catford, Director Public Health and Chief Health Officer, the Department of Human Services. The topic was *People, Place and Wellbeing*. The built environment provides the setting and backdrop by which we live our lives and impacts on our sense of place and belonging, sense of community, participation in physical activity, civic life, general health and wellbeing, senses and emotions. Several questions were posed for the planners including: what are the direct and indirect effect of planning decisions? Are the planning efforts addressing the symptoms of a problem or the root causes? Are planning efforts working on behalf of healthy urban policy? He considered that everyone has a role to play in creating supportive environments for health.

Ms Bernadette George – Past President of RAPI (Victoria). She reminded us of the legislative base for urban planning and presented historical comparisons and decision-making based on a growing body of knowledge from a wider range of intellectual disciplines, reviewing the social and mental health consequences of past planning practices. Strategies for a better future include better integration of a broader range of skills and greater recognition of the long term consequences of planning decisions for everyone, rather than just the short term and for the few.

Ms Emma Sutherland, Manager, Physical Activity, Heart Foundation, Victoria. Supportive Environments for Physical Activity (SEPA) was an initiative of the Heart Foundation that aimed to increase environmental support and opportunities for people to feel safe and be physically active in their daily lives. The Victorian pilot involved two local governments - City of Whittlesea and Maribyrnong City Council covering the themes of: *sharing the road for all; destinations that are accessible and feeling safe and being part of the community-community spirit*. The overall aim was to embed SEPA principles into policy and planning documents which direct the core council business. Key learnings from the project include the role of local government and how each authority operates and the need for customised as well as whole Council approaches in planning and policy areas. It is important for staff to be valued, own the project and that the project gained the CEO'S support. Inclusion in the Municipal Strategic Statement, Corporate Plan and state government policy/legislation are vital for action and sustainability. The Heart Foundation has produced SEPA guidelines for local government.

2. FEEDBACK ON THE OVERALL SEMINAR

Forty percent of participants returned their feedback sheets. Of these 95% rated the Seminar between good – excellent overall and 50% thought they may be able to incorporate the knowledge gained from this seminar into practice. A number of participants applauded the seminar as a collective learning opportunity across sectors and across different professional disciplines to share information and explore the potential to work together to achieve healthier, more liveable environments.

There was interest in having more concrete action to take away to start implementing!! Several participants would like to have regional seminars and to have presentation of case studies, ways to integrate health and planning related data and identifying potential links with current activities such as ResCode, Municipal Strategic Statements and the Municipal Health Plan. Several commented on the desirability for planning officers working in the local government to be involved in the planning stage of future activities.

3. OUTCOMES FROM THE DISCUSSION GROUPS.

There were two group discussions. Each group was asked to explore the following questions:

- (a) What strengths can we build on?
- (b) What are the key mechanisms in place that facilitate sustainable links between health, social and urban planning?

Issue raised by the groups are highlighted below:

The central role of local government featured prominently:

(1) Local government

- It is important for local governments to integrate within Council across programs- such as social plans and strategic plans.
- Health workers both within and outside the local government need to gain a better understanding of local government functions.
- Expectation that local government know their communities,
- Lack of accessible user friendly integrated statistical and quality data sets that can be used by different disciplines (e.g Burden of Disease data and GIS data)
- Local governments need to strive for meaningful community engagement.
- Strengthening local government's role in training.

(2) Systems – Existing systems such as:

- Transport- road and rail infrastructure is already in place, so can be improved and integrated.
- Geographic information system – needs integration
- Policy and planning frameworks exist such as the Municipal Strategic Plan, Municipal Public Health Planning Framework and Rescode. Integrated planning within local government is essential.
- Strengthen elements of Municipal Strategic statements to include consideration of the impact on health

(3) Collaborations and partnerships – Extend partnerships and collaborations

- Lack of skills/experience in forming partnerships
- Promote integration of planning through developed partnerships

(4) Dissemination of learnings/Information sharing –

- Use of case studies such as the “walking bus”.
- Need to increase information sharing.
- Running similar seminars in the regions
- To have references and websites indicating where to get further information.

4. INITIAL ACTIONS TO CONSIDER

- Building on existing regional mechanisms (e.g various regional plans).
- Working with tertiary institutions on curriculum improvement of relevant planning related courses to teach the impact of planning decisions on health and well being.
- Best practice grants?
- Better integrated and complementary data sources that are accessible, easily understood and shared across relevant disciplines.

5. SUMMARY AND FUTURE DIRECTIONS

VicHealth, the Department of Human Services and the Royal Australian Planning Institute will liaise with other key stakeholders and meet at the end of January to review the feedback from the Seminar and to consider future activities. These may include identifying and building on existing activities and mechanisms such as the Department of Human Services’s Municipal Public Health Planning Framework and the Community Health Plan as well as creating new opportunities for interested people to come together to further discuss and learn practical ways to build the links between planning and health.

Participants will be informed about future activities via the existing mailing list.