SUMMARY & RESPONSE TO KEY THEMES RAISED AT WORKSHOPS

The consultation workshops for Healthy Spaces and Places ran between May and November 2008. They were based on the World Café format, meaning a collaborative ‘talk-fest’ approach where everyone listens to one another and gives their best thinking and ideas in response to questions.

The workshops were held as follows:
- Adelaide - 16 May 2008
- Brisbane - 23 July 2008
- Sydney - 1 August 2008
- Hobart - 18 September 2008
- Canberra - 23 September 2008
- Darwin - 10 October 2008
- Perth - 24 October 2008

About 400 people from a range of organisations were at the workshops.

The feedback and guidance was invaluable and will help decide the structure, content and nature of the national planning guide and accompanying materials.

YOUR FEEDBACK SUMMARISED AND OUR RESPONSES TO IT

The workshops included five groups of key questions to which specific responses were sought. Following are the questions, a summary of what you told us and how the project will respond to what you said.

**Question 1. What are the key messages and principles that need to be included in a national guide? What is the role for a national planning guide?**

**YOU SAID**

There is wide support for a national planning guide showing the association between people’s health and well-being and the built environment. You want the guide to clearly and succinctly state national principles for planning for health and active living. In particular, you want the guide to:

- highlight good practice
- provide leadership and vision of good practice
- be inspirational and challenging

*The ‘built environment’ – meaning the structures and places in which we live, work and play that are integral to improving the health, wellbeing and quality of life of our community.*

For more information about the project, please contact the Project Manager, Anne Moroney at healthyplaces@planning.org.au
Question 2. Who are our partners and how do we encourage them to use the guide? What are the roles of state and local governments, the development industry and the community in promoting planning and health?

YOU SAID

You named a broad range of partners (in addition to the project collaborators) including:

- governments (local, state/territory, national, including ministerial councils)
- the education sector, including research institutions
- professional groups
- industry peak bodies, and
- community.

Community in particular was named as a potential partner because communities can sway governments and government priorities, thereby influencing the demand for services and infrastructure supporting active living.

YOU SAID

You said that key to the guide becoming a tool for professionals across different streams was that it had to be tailored in its approaches: within the partnership, different stakeholder groups require different engagement processes to ensure their effective involvement.

OUR RESPONSE

The project knows there is a broad range of potential partners interested in or likely to use the guide, and that the community can influence the demand for healthy, active places. The primary
audience for Healthy Spaces and Places is planning professionals, however consultation with a broader range of groups interested in health and the built environment is being undertaken as part of the advocacy and content development processes.

Materials will be tailored for each target audience, such as planners, health professionals, elected representatives or interested community members. In addition, there will be links or additional information for secondary audiences. To help get the language and approaches right, focus groups will test the draft national planning guide between February and April 2009.

The core requirements for awareness raising and engagement programs will be included in the Healthy Spaces and Places principles. General information for community audiences may be prepared during the first stage of work.

Once the guide is completed, the next stage of Healthy Spaces and Places (subject to funding) will be education and training for professionals, together with community based education and awareness raising.

**Question 3** Which case studies and best practice examples at different levels can be used in the guide? What are the key success factors associated with these case studies that should be highlighted in the guide?

**YOU SAID**

You strongly supported case studies and examples of good practice, wanting to see a diverse range of case studies (with predominantly Australian examples).

Other comments you made included on:

> structure
  – case studies need a critical analytical component, including the quantitative analysis of the project (including money spent)

> content
  – case studies need visual illustrations with before, during and after visuals and examples of good and bad practice
  – include examples of both ‘big’ and ‘small’ initiatives

> champions
  – profile ‘champions’ and ‘heroes’.

**OUR RESPONSE**

There will be a diverse range of case studies representing different Australian jurisdictions, development types and sizes (scale). They will be linked to Healthy Spaces and Places principles to provide illustrative examples of concepts in practice.

**Question 4. What would make Healthy Spaces & Places an invaluable, useable document/resource for planners, developers and decision makers?**

**YOU SAID**

Much of what you said in response to this question reinforced earlier comments. For instance, that the guide should be based on examples (case studies that illustrate good and bad practice, successes, learnings and barriers) and be web-based (as well as summary hard copy). Further, it should:
be easily navigable
> contain different levels of information
> evidence-based – with the connection between principles and health outcomes explained
> visually illustrative including sketches, photos, plans, sections, technical drawings
> concise with a focus on key messages and principles
> accessible – different audiences should be able to understand the language, so avoid jargon
> current and reliable – with up-to-date links to evidence and information.

OUR RESPONSE

Content will be highly useable, visually illustrative, concise and understandable to key audiences, with tailoring as required for different language requirements. A communications specialist will review material to help meet these needs. There will also be peer review of materials by experts and focus group testing.

Question 5. In what form should Healthy Spaces and Places be presented? Can you describe examples of resources that you have found most helpful in the past? What did they look like? Why were they useful? What supporting tools, web-links, reports, charts, etc do you think might promote the use of the guide?

YOU SAID

You reiterated that you wanted to see products both web-based and printed (summary material only). You wanted to see sections developed (or navigation channels) for different audiences (eg 'how to for planners….'), with specialists (including public health and engineering professionals) helping to write/review targeted sections. You asked that existing sources be used, that is provide links, do not reinvent the wheel.

You saw the products being inspirational and challenging for national policy at the same time as being practical and providing technical advice. To ensure usefulness, Healthy Spaces and Places resources need to visually show principles and practice examples; have an interactive component or discussion forum and, again, you emphasised that credibility would come from the information continuing to be current and reliable.

OUR RESPONSE

Resources you named as useful in the workshops have been noted as examples of how to structure the guide. Ensuring that the material is presented in the most useful and accessible format is paramount and will be achieved through the advice and review by communications, urban design, graphic design experts together with industry experts.

The provision of an interactive area or discussion forum on the website is being considered in this first stage.