PLANNING FOR HEALTHY COMMUNITIES
POSITION STATEMENT
11 May 2016

PIA POSITION

RATIONALE

The Planning Institute of Australia knows that planners play a key role in shaping the built environment. Given the evidence that clearly links the built environment to wellbeing, planners are in a position to positively influence the health of our communities.

The planning profession evolved from the need to improve the health and wellbeing of urban populations. At the turn of the 20th century, contagious disease was a major concern in overcrowded and unsanitary housing. Authorities installed sewerage systems, provided uncontaminated water supplies and collected rubbish. Concurrently with improved transport systems, town planners advocated for city design that separated housing from highly polluting industrial land uses. Together with the increasing availability of the motor car, this design philosophy has fundamentally shaped our cities. Suburban growth and long distances from home to the places we need to access everyday (work, school, shops, recreation and services), have ensured our reliance on the automobile.

Today our lives are largely sedentary which is a major risk factor for chronic disease. The World Health Organization (WHO) has advised that physical inactivity is the fourth leading risk factor for global mortality (6% of deaths globally) and is also a major contributor to the epidemic of overweight and obesity.1

Planners and urban designers need to creatively and collectively address the sedentary lifestyle of our communities. This is critical if we are to curb increasing rates of chronic health problems such as cardiovascular disease, diabetes and cancer. Planners and urban designers also need to consider measures to address social isolation that can contribute to depression and related mental ill-health.

ABOUT THE ISSUE

There is a growing body of evidence that clearly demonstrates the link between healthy communities and the planning, design and management of the built environment.

Through advocacy, legislation, policy, strategy, design, review and approval, planners can assist in creating health supportive places. These will reduce sedentary behaviours by supporting physical activity, improve access to healthy food, and create safe environments that prevent injury and encourage social activity, improving community belonging and integration.

1 In 2011-12, 10.8 million Australian adults were either overweight or obese, and of these 4.7 million were obese: National Health Performance Authority, 2013
Design changes to the built environment can result in increased levels of physical activity. Connected movement networks; efficient, convenient and safe public transport, cycling and walking opportunities; greater land use diversity; and access to a variety of quality public open spaces: all can have a measurable impact on activity levels which improve health.

Eating healthy food also has a significant impact on the health and wellbeing of individuals, society and the natural environment. Growing healthy food, in private or community gardens for local consumption has the potential to improve individual and public health outcomes and decrease health care costs.

Healthy communities enjoy a ‘virtuous circle’ marked by good nutrition, regular and enjoyable exercise, the use of active transport, health-conscious work places, affordable access to health care services and recreational opportunities in appropriate places, including easy-to-access green open space, and regular community interaction.

PIA members are keen to raise the bar in both new developments and redevelopment projects that create the physical spaces and opportunities that enable healthy communities to thrive.

PLANNING PRINCIPLES

In addition to PIA’s Planning System principles, the following principles should guide planning for healthy communities in new settlements and suburbs, and through the redesign and renewal of established communities:

- Provide long term leadership in advocating for the planning, design and adaptation of built environments that encourage and support active living;
- Adopt multi-disciplinary and collaborative practices working alongside other built environment and health professionals;
- Aim to reduce sedentary lifestyles to combat obesity by providing a variety of accessible, high quality and diverse open space including green natural areas;
- Facilitate an increased proportion of journeys by active transport (such as cycling and walking) to improve both physical activity levels and create a more sustainable environment;
- Better connect communities to ensure accessibility to health care and other community services, community groups and social networks;
- Improve the community’s sense of belonging and reduce social isolation by designing spaces that enable day-to-day interaction with people and natural environments.
- Create shared places on local streets and in public spaces that are safe, accessible to all, respond to the local cultural and demographic context, and are aesthetically pleasing.

See: www.planning.org.au/documents/item/5859
PIA’S PREFERRED APPROACH

PIA SUPPORTS:

Leadership

- Planners contributing to improving community health and wellbeing by encouraging and supporting built and natural environments that promote physical activity, healthy eating, and social and mental wellbeing.
- Consideration of health perspectives throughout all phases of the planning process including policy and strategy formation, initial design, permit assessment, and approval.
- State and Territory Government planning legislation and policy frameworks including the health and wellbeing of the community as integral objectives and outcomes of the planning process.
- Planning Ministers across Australia being encouraged to take on a leadership role within government to advocate the economic, social and environmental benefits of planning for healthy communities.

Education

- Review university planning and urban design curricula to ensure students are being taught the benefits of shaping healthy communities via interdisciplinary planning and design processes informed by the health sector.
- Champion change in the development industry by educating the private sector on the benefits of healthy communities via National, State and locally based, PIA run or endorsed, professional development programs.
- Take a proactive role in the preparation of planning documentation that educates and informs planners, urban designers, state and local government agencies, political decision makers, and the community about the benefits of planning for healthy communities.

Collaboration and partnership

- Collaborations with health professionals (including burden-of-disease epidemiologists and health promotion officers), economists, community leaders, engineers, architects, landscape architects, property developers, and approval agencies to study, understand and promote the co-benefits of planning for healthy communities across multiple sectors. This collaboration should acknowledge the economic, environmental and social co-benefits of planning for health and wellbeing.
- Collaborations with state governments, service agencies, and aligned organisations, such as the National Heart Foundation, to educate the community about the importance of healthy community outcomes in planning processes and decisions.
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Evidence-Based
- Evidence based research that enables planners and urban designers to effectively demonstrate the value of healthy communities to a wide audience.

Community engagement
- Include community engagement in the planning and design process to ensure that planning initiatives and solutions are locally responsive, effective, and relevant to the end users.

REFERENCES AND RESOURCES

Links to other PIA policies
Planning System principles (07/13)

What is good planning? (09/13)

Other References

Blue Print for an Active Australia –


Healthy Active by Design (WA)


New York City Active Design Guidelines – http://www1.nyc.gov/site/ddc/about/active-design.page


Healthy Built Environment Indicators –
https://cityfutures.be.unsw.edu.au/research/city-wellbeing/