

CORRECTED VERSION

STANDING COMMITTEE ON ENVIRONMENT AND PLANNING

REFERENCES COMMITTEE

Subcommittee

Inquiry into environmental design and public health

Melbourne — 7 September 2011

Members

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Mr C. Ondarchie

Ms S. Pennicuik

Mrs I. Peulich

Mr J. Scheffer

Mr B. Tee

Ms G. Tierney

Chair: Ms G. Tierney

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Staff

Secretary: Mr K. Delaney

Witnesses

Ms S. Pope, director, research and planning, and

Ms C. Nikoloski, policy and projects officer, beyondblue.

The CHAIR — Welcome, Suzanne and Carolyn. During your presentation you will be covered by what is known as parliamentary privilege. I am sure you have done this a few times already, but I am obliged to remind you that comments you make outside of this hearing will not be covered by parliamentary privilege. The transcript will be provided to you in the next 7 to 10 days. If you could please proof that, and if there are any issues, please liaise with the committee secretary. We will start with your names, the organisation you represent and your work address. Then if we could have a 5 to 10-minute presentation, that will allow us optimum time for questions.

Ms POPE — I am Suzanne Pope. I am the director for research and planning with beyondblue, the national depression initiative, which is based at 40 Burwood Road, Hawthorn West.

Ms NIKOLOSKI — I am Carolyn Nikoloski. I am the policy and project adviser at beyondblue.

Ms POPE — Beyondblue made a formal submission to this inquiry that was based on the research that we sponsored in the Beyond Blue to Green report. I have bought a full copy of that literature review, plus a number of the copies of the summary document, that I can leave behind.

The key findings of that literature review that looked at the national and international literature was that there is very strong evidence around the relationship between natural and built environments in terms of people's health and wellbeing. Certainly the contact with a living green environment was seen to be a great support for physical and mental health, and this relationship was very strong for people who had a diagnosable depression or anxiety condition.

Some of the psychological benefits for people who are able to access a safe green and open space are that it is a place to escape from school, university or workplace stressors or concerns; it provides a refreshing change of scenery; it helps to lift and improve the mood; it lowers levels of anxiety; it lowers levels of stress; there are improvements in the symptoms of depression; and it also promotes endorphins through increased physical activity. Also there is very strong evidence that accessing natural green environments supports key components of child development, and this includes a sense of identity and autonomy. It contributes to psychological resilience and learning of healthy behaviours. It also has been demonstrated to contribute to children developing a sense of empathy.

There is a very strong relationship between access to green spaces and health and wellbeing for people from lower socioeconomic income groups. These are the groups that are least likely to have ready access to safe and pleasant green spaces. The research within low-socioeconomic areas suggests that the health is much better for people from those low-income groups that do have access to green spaces than those that do not.

Given the relationship between the environment and health, incorporating planning strategies is a very ready and effective mechanism to achieve health benefits. It is essential that all neighbourhoods have green spaces and that there are ways of addressing any significant access barriers of time and distance. There should be a particular focus on low-income neighbourhoods and a review of their facilities, because they are most likely to have poor existing infrastructure, facilities and access.

Green spaces should be also planned for places and settings that are going to have high use, a lot of social interaction and physical activity. This includes schools, workplaces, aged-care settings and even detention centres. There are very strong links between being able to mitigate people's stressors and risks for mental health problems by clever use of urban space and design. While we did not include it in our formal submission, I noticed you used the example of Europe and New York City in terms of good use of quite small green spaces. I noticed from those areas that it was not just families and children using those spaces; there was also a high level of pet ownership. That is another thing that needs to be incorporated as we move to medium and high-density living, particularly in our major cities. How we balance the need for access to green spaces and pet ownership is going to become an increasing issue as there is also very strong evidence about the health benefits of pet ownership.

Mr SCHEFFER — I just wanted to ask you about the green space part. First of all, what do you mean by a green environment supporting physical and mental health? Are we talking about indoor plants in a restaurant or a small garden? Or are we talking about a view on to a verge?

Ms POPE — It can be aspects of all of those things. Primarily we were talking about access to open spaces such as parks and recreational areas, but there is also evidence that including greening of urban spaces does also contribute. In workplaces it has resulted in things like hiring plants in office areas. There is some evidence to demonstrate that that has a calming influence.

Mrs PEULICH — That our brain is wired to the colour green. I have no doubt about that whatsoever.

Mr ELSBURY — I have got plants in my office. Some have not survived, but the ones that have are green!

Mr SCHEFFER — I guess what I am getting at is whether that is a reason for it; or is it because it is valued or it brings other things to it — for example, a green space often affords a person a bit of distance from other people. That may be the factor that is calming, rather than the fact that there are a few plants, or that there is a lawn or grass around. That is an important question because I am interested in the causality. A properly designed square, for example, which has no plants in it but has beautiful archways, nice spaces and the way light falls in it might be equally positive or as supportive of a person with a depressed condition. I just wanted to ask you to drill down a bit into what that research is really saying, because if people rush off and say, 'Let's have a whole lot of green stuff; let's just put the green in and that will do the trick', then that is not really using science, which is what this report purports to be presenting in a useful way.

Ms POPE — I do not think this current literature review really teases out those specific issues. There certainly is some science around access to good space in terms of art precincts that may not be green but they have a very interactive component. They have good use of light, space, water and sound, so that they fulfil a very similar kind of function to green space. I think some good examples of those are in the design of the children's hospital. They may not necessarily have access to green space, but they have really looked into how the space has been constructed and designed for sick children, so that there is lots of colour, lots of interactive components and really good use of sculptures that can be climbed on and touched. They are responding to that need for interaction and simulation and a way of being able to distract yourself from the other things that are happening for you. I still would maintain — and I think there is good neuroscience to say — that it is about natural environments and that, while good urban design is important, you do need access to green space. It is that connection to something that is living, growing, changing with the seasons that keeps you connected to your natural environment and not just to a built environment. I think you need both.

The CHAIR — How does that work in terms of green spaces and mental health in rural and regional Victoria?

Ms POPE — I think the research is saying that people in regional areas in the lower socioeconomic groups have better levels on some health indices because they still have that access to green space, as opposed to some in the more built environments where people have less opportunities for green space. Having said that, there are sometimes less opportunities for people in rural areas because there are no footpaths for people to walk on.

The CHAIR — There are greater distances and greater isolation.

Ms POPE — As a result you do not actually have good use of shared spaces, where people can walk to and come together as communities. It might be open space, but it is actually not communal, and it is not usable in terms of a social community function.

Mr TEE — I want to pick up on the point that Johan raised, because in your submission you talk about people who perceive their neighbourhoods as very green as being likely to have better physical and mental health outcomes than those who perceive their neighbourhoods as being lower in greenness. It is a case of perception rather than reality, but I would have thought it is there and you know it is there. I am just trying to understand what role perception plays, and does that go to access? It might be that you have got a park behind your backyard, but you have got an 8-foot fence and you cannot get there. Is that where the perception comes through?

Ms POPE — It is also about how the community views that space.

Mr TEE — Is it a safe space, for example?

Ms POPE — Is it a safe space, is it an area where people come together and is that promoted within that community? I think some of the really good examples are the community renewal projects that have gone into some of the public housing sites and which have worked with those communities to reclaim the spaces and to plant communal gardens, veggie patches and things like that. The space was always there, but people were not using it; it was not attractive or inviting. Some of these projects have really galvanised communities to come together, to work together, to take pride and a sense of ownership over those greens.

Mr SCHEFFER — My question probably sounds like hairsplitting, but I think it is important in terms of space. If a group of people got together in an environment where it was completely built and they had collectively designed and built a stone sculpture, would that not have had the same effect? Does it have to be plants, gardens and flowers; is that the catalyst to the feeling of greater wellbeing or is it the community activity, the sense of space, the way light falls, the way space is expressed and articulated through architecture? Is it really the plants?

Ms POPE — It is also what plants bring. They bring birds, insects and other life. It is that sense of we are natural beings. In our evolution, life in an industrial urban — —

Mr SCHEFFER — It is also true that we are cultural beings.

Ms POPE — Yes, but life in industrial urban centres has come very late in our evolution and has existed for a very short period of time. I do think we still have some of those primal urges to be part of the natural environment. Urban planning and the creative use of art is also really important and speaks to aspects of our inner self, but there is something about a natural environment and what it brings with it that is very elemental and quite essential to people's wellbeing.

Mrs PEULICH — I have a bit of a background in psychology as well. I am a great believer that there is some evidence that our brain is wired to the colour green. It is a de-stressor. I would be very interested to see any relatively recent research which might substantiate that which you can provide now or at a further point in time. I think there are beneficial neurological responses. I agree with you that we have an affinity with nature, that we are natural beings and that in many instances we feel at one. The benefits of open space and in particular the de-stressing benefits of open space are well established.

I am going to now ask a question coming from the other end. In terms of density of living and mental health, firstly, the incidence of mental health issues is rising or at least mental health issues are fairly commonplace; and, secondly, when we bring more people with mental health issues together, living at higher densities of urban development, the incidence of conflicts between people who may be more easily aggravated can cause very substantial problems, and there are problems, even in the current community. Are you able to comment on that? Is there any research which shows that? Are there some urban design tips that we ought to be looking at as to how to minimise those types of conflicts? Are there ways that buildings, especially social housing, can be built to minimise that?

Ms POPE — There is some really good research that has been done. The Michael Project — I am not sure if you are familiar with that — is a fairly good project that is demonstrating some creative ways of approaching social housing. I think what you will find the research demonstrates is that the mix is really important. You do not want to create ghettos of people with very high complex needs, and very little commonality between each other except for all having high complex needs, being lumped together and almost isolated in some of these communities.

Mrs PEULICH — I would agree with that, because in a sense those without mental health issues or challenges can keep them rooted or grounded in normal types of behaviours. However, that obviously has consequences for those people who live in close proximity to those with difficult behaviours. I am just thinking of one street where I have residents constantly complaining, and there is nothing that can be done, about a person who not only has mental health issues but also is a drug user. His neighbours surrounding him are literally driven into having mental health issues themselves because they cannot sleep, they are forced to take time off work and so forth. Are there buffers that can be created?

Ms POPE — There certainly are projects that have demonstrated some success with that in terms of models of case management, particularly using intra-agency models, where you have a whole-of-government approach. You have to mitigate the behaviours of some of the clients and also have a model of protecting other clients. As

I mentioned, the Michael Project is demonstrating some good effects under community renewal and regeneration. If you have people who are causing these sorts of problems, then it may be a service case management issue, and you need to work with the services. There are models of care that have addressed these issues.

Mrs PEULICH — Also in terms of social housing buildings, I have had people explain to me that by merely diffusing the number of entry points, so that not everyone is congregating around the same cluster of mailboxes, the lift or whatever, you can reduce the number of conflicts between the residents.

Ms POPE — I think we have learnt some very good lessons from the past in how we approach social housing. Hopefully we will not repeat those mistakes in the future. There are some testaments to past mistakes.

Mrs PEULICH — Just on another issue, and you may be able to help me, are there shapes in architecture that actually have the reverse effect — that are more stressful just by their very shape — such as irregular shapes? I do not know if you have come across any evidence of that. I was speaking to a friend of mine who is an architect, and he said he had heard of a piece of research where they showed that irregular shapes of buildings actually brought about illness rather than a sense of wellbeing.

Ms POPE — That is a very good question, but it is not something we have done any research on.

Mrs PEULICH — You have not come across anything?

Ms POPE — I do not recall coming across it in the literature. I know that some of the designs in the past of the tower blocks had very little in the way in terms of people having access to balconies or outdoor areas, and that has certainly not been conducive to good mental health.

Mr SCHEFFER — You could probably go and have a look at Villawood and see how that is architecturally shaped to create a sense of wellbeing.

Ms POPE — We certainly have learnt some of the things that do not work. Some of the creative approaches that have started and also the public-private partnerships around social housing — so that you do not have just social housing tenants but you have a mix of private and public tenants — are starting to demonstrate some benefits.

Mr ELSBURY — Just going back to the ideas you had about the children's hospital and the colours that are used within that structure, it appears that a lot of emphasis has also been placed on facing the windows towards the park area so the kids can see the trees, the birds and all sorts of things going on. Is there any associated data to back up the notion that that sort of architectural design assists with the mental health of people in general and not just people who are trying to get better or who are trying to overcome a physical illness? Is there any data that would support big buildings being built in green places that would allow people to feel not that they are in a concrete jungle but that they are in a real jungle?

Ms POPE — There has certainly been research done on how outlook, aspect and environment contributes to healing for sick people, particularly sick children. I do think there is some good environmental research around how you can mitigate some of the negative impacts of high-density living by having ready access to green spaces. People have been living in very high-density housing in other countries for quite some time with very good social cohesion and good use of space.

Mr ELSBURY — When you look out across Melbourne you see a lot of very blocky-type buildings. Even in the Flemington area where you have the housing commission's beautiful mission brown buildings, they are situated in a park — —

Ms POPE — Yes.

Mr ELSBURY — There is green space around them, so you would think there could be an improvement in mental health. But perhaps because it is a chunk of concrete which has basically been slapped in the middle of a park, it does not help. Whether or not the form of buildings helps — —

Ms POPE — But it also might be around what programs are operating in that area that are helping people to connect with the green space around them and that encourages the active use of that space, which is about

engaging the children in sport and in other physical activity. It may not be around the design of the building so much as that you need to have some more things happening on the ground around community engagement and use of space.

I mentioned earlier some of the community renewal projects where there has been a purposeful engagement of people from low incomes in public housing with their local environment, to encourage them to take ownership and pride in it and to be part of its regeneration and use. Again, you need to look at all of the factors involved, not just at individual factors in isolation.

The CHAIR — I think that dovetails into your question, Brian.

Mr TEE — Yes, it does. I want to start by thanking you for your submission. I suppose it reinforces all the evidence we have had before, particularly the requirement to have walking space within 300 metres or a 5-minute walk from your home. I think what your submission does well is that it adds another dimension to the argument around that in relation to mental health. I think it is quite compelling in that regard.

I suppose it leads into the issue that Mrs Peulich raised. I would have thought the worst thing you can do for someone who is suffering mental health issues is to make them feel isolated, and having an open space within 5 minutes would suggest a much healthier community, particularly as prevention is better than cure. It just reinforces the importance not only of having that space but also of making sure the space is accessible in terms of walking and in terms of being friendly for all parts of the community. That is probably my take on all of that; is that a fair summary?

Ms POPE — Absolutely. It is not just about having green space there, but green space that is well utilised and that people have a real sense of access to and are able to interact and participate with. Melbourne is a city that has had a very good history of incorporating green space into urban design. It has one of the highest green space to urban density ratios of any of Australia's capital cities, and I think it has probably contributed to its recent standing as one of the most liveable cities. I think that part of the public concern at the moment is how important that is to people and the desire not to lose it in the equal pressure for urban development as more people seek to live here. Getting that balance right is going to be a very critical piece of public policy.

Mr ELSBURY — Just on the use of green space, not just having it for its own sake, but using the green space — —

Ms POPE — And that is one of the ways of making it safe.

Mr ELSBURY — It is. Having been involved in community groups in the past, every time we wanted to use a piece of green space it involved a mountain of paperwork from the local council. It was not the council's fault; it was public liability and being able to say what we were using it for — that we were not going to use it for commercial reasons and that it was going to be a community event that was open to everyone. To be quite honest, it was off-putting. We only ever ran two major events in a year, and part of the reason was that as soon as you started getting volunteers in to help get it organised, you would throw some paperwork at them and they would say, 'I'm not doing that again'. Is there any way that you can think of that we could streamline that system? There have even been cases in Albert Park of people wanting to kick a footy around, not an organised group, but the council has come down on top of them like a tonne of bricks because it does not have public liability insurance. If someone got hurt, it would be the council's public liability and it does not want to have to pay for it. All these wonderful litigious barriers are now put in our way for just having fun.

Ms POPE — I think that is one of the real tensions and sad aspects of it becoming a more litigious and safety-conscious culture.

Mr ELSBURY — It is also about people taking responsibility. If you are going to play full-contact football, there is the possibility that you are going to come off bruised or break something.

Ms POPE — And possibly that is something that the government can work on with the coalition of Victorian councils to get a common set of principles around the use of green space and how to encourage community participation rather than err too far on the safe — —

Mr ELSBURY — If it was just one form that said this group wants to use space for this period of time, I could understand that because the last thing you want is for the Christmas carols to be held at the same time as a football carnival or a cricket game or something like that, but when you are seriously talking about five separate forms to be filled in and then if food is being served — well, let us start again!

Ms POPE — That is something that could possibly be — —

Mrs PEULICH — Streamlined.

Ms POPE — It could possibly be negotiated with the coalition; I forget the proper name.

Mrs PEULICH — The MAV.

Ms POPE — Yes. If you could get some commonality across councils — —

Mr ELSBURY — High consistency would be beautiful as well.

Ms POPE — I think that would be a real step forward.

The CHAIR — We have come to the end of our time. I thank you very much, not just in terms of today but for all of the input that your organisation provides, the profile that it has in that people do know how to contact you and all of the great work you are doing to make sure that mental health does not continue to have the negative impacts that it has on a vast number of members of our community.

Ms POPE — Thank you for inviting us.

Witnesses withdrew.

