



Heart Foundation (Victoria)

**Submission to the Victorian Parliamentary Inquiry into
Environmental Design and Public Health**

July 2011

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ATTACHMENTS:

1. *Healthy by Design: a planner's guide to environments for active living*
2. *Healthy Spaces and Places: A national guide to designing places for healthy living*
3. *Position statement: The built environment and walking*
4. *Safe speed: promoting safe walking and cycling by reducing traffic speed*
5. *Food-sensitive planning and urban design: A conceptual framework for achieving a sustainable and healthy food system (Summary Report)*
6. *Food-sensitive planning and urban design: A conceptual framework for achieving a sustainable and healthy food system (Full Report)*
7. *Implementing Health In All Policies*
8. *An Australian Vision For Active Transport*

The Heart Foundation is a not-for-profit organisation committed to improving cardiovascular health for all Australians. Our vision is for people in this country to have the best cardiovascular health in the world.

Cardiovascular disease refers to a group of diseases including heart disease, stroke and blood vessel disease. It affects more than 3.7 million Australians and is this country's leading cause of death.

1.0 Opening Comments

The Heart Foundation is pleased to respond to the Environment and Planning Reference Committee's *Inquiry into Environmental Design and Public Health*.

This inquiry provides a genuine opportunity for the Victorian Parliament and the Victorian Government to increase its understanding of the contribution healthy built environments can make to public health.

By international standards, Victorians enjoy good health. However, for too many, good health - and life chances - are compromised by virtue of their social position, cultural background or geographical location. In Victoria, more than 900,000 people have a long-term cardiovascular condition, with over 11,000 losing their lives to the disease each year¹.

Achieving healthy environmental design for our towns and cities is an investment in prevention that will save lives and public money.

Population health is largely affected by factors outside the health system. These include childhood development, education, employment, housing, built and natural environments, transport, socio-economic status and cultural influences. All government departments – not only the Departments of Health, Planning and Community Development and Transport – are responsible for these determinants.

Adoption of the 'Health in All Policies' approach by the Victorian Government will make people's health a shared goal of all State Government Departments and provide an additional level of legitimacy for policy-makers working to improve population health.

While this submission addresses the inquiry's Terms of Reference, the Heart Foundation believes the parameters of the inquiry could have been broader to challenge the status quo and current thinking about the relationship between prevention, public health and the built environment.

The task of reforming urban environments is more than merely amending health, planning or transport legislation and relevant policy frameworks. Rather, the inclusion of health considerations in all policies will result in better health, social, environmental and economic outcomes across all government portfolios. This synergy will help the Victorian Government to work towards better health for all Victorians.

2.0 Summary of recommendations

TOR (1) - Review the evidence of the contribution of the natural and built environments to the promotion of health and well being.

Recommendation 1

Invest in healthy environmental planning and design for our towns and cities as a prevention measure that will improve quality of life, reduce levels of chronic disease and save public money.

TOR(2): Identify and report on those elements of environmental planning and design which provide the most promising opportunities for improving health outcomes in Victoria;

Over-arching Recommendation 2

The above design elements be incorporated into government legislation, policy, strategy and guidelines across planning, health and transport portfolios.

Recommendation 3

Improve infrastructure to support active transport options (walking and cycling) and public transport.

Ensure significant investment in public transport infrastructure and service provision, in particular mass transit and adjoining 'feeder' services to improve access to active transport options and public transport.

Recommendations 4

Provide statutory guidance for new developments to achieve more compact, mixed land-use; locating residential housing close within easy walking distance of local activity centres, employment and public transport.

Amend the Victoria Planning Provisions (VPP) to specify medium density levels (30 dwellings or more per hectare) to support viable catchments for public transport, amenities and services.

Recommendation 5

Acknowledge international recommendations for 30km/h being the human tolerance threshold for surviving vehicle impact. Review speed limits in residential, strip shopping and around major trip generators, and following review introduce lower speed limits in these areas.

Recommendation 6

Amend the Planning and Environment Act 1987 and the Health and Wellbeing Act 2008 to articulate that equitable and sustainable food provision and access is central to net community benefit and sustainable development.

Embed Food-sensitive Planning and Urban Design objectives in the Victorian Planning Provisions, in particular clause 56.

Legislate to protect high quality peri-urban agricultural land, Green Wedge areas and natural environments.

Recommendation 7

Provide for a range of structured and unstructured activities by creating a range of open space options, all with suitable active transport access.

Design the open space network as an integral part of the urban structure and offer a variety of safe and attractive spaces. Ensure that these are well distributed throughout a neighbourhood and are accessible, connected and cater to the sporting and recreation needs of the community.

TOR (3): Assess the extent to which these factors are currently taken into account in environmental planning and design in both the public and private sectors, and their effectiveness, with particular reference to new growth areas;

Recommendation 8

The Heart Foundation believes these examples (amending MSS and policy integration; developer guidelines; providing local activity centres; and incorporating edible landscapes) should be replicated across all councils in Victoria.

Recommendation 9

That Clause 56.01-1 be amended so that the requirements to map the context information for 60 lot + subdivisions also apply to the Class 2 (16-59 lots) subdivisions.

That the 56.01-1 and 56.01-2 requirements in relation to the provision of context information be upgraded to ensure that a properly detailed plan of the context, extending at least 500m beyond the site, is provided.

Recommendation 10

A major review of Clause 56.03 be undertaken to draft a better overall framework to facilitate delivery of liveable and sustainable subdivisions. This is particularly important not just in relation to subdivision, but more importantly to Development Plans produced under the Development Plan Overlays

(DPOs), which are required to be consistent with Clause 56. Therefore this clause should become the key directive on urban structure.

It is recommended that after revision of the clause, all provisions of the clause be made to apply to Class 2 subdivisionsⁱⁱ.

Recommendation 11

The PSP be amended to address the need for medium density developments that will provide walkable neighbourhoods. Also include objectives around open space provision and food production as important foci of all new developments in growth corridors.

TOR (4): Determine opportunities to influence environmental planning and design for health, including consideration of the role of legislation, guidelines, and public-private partnerships, and the costs and benefits of various options;

Recommendation 12

The Victorian Government review the Planning and Environment Act and incorporate elements that strongly support the public health and wellbeing of all Victorians.

Recommendation 13

Amend Section 12A(4) of the Planning Act to ensure Municipal Strategic Statements are consistent with Municipal Public Health and Wellbeing Plans and Council Plans.

Recommendation 14

The Pedestrian Access Strategy be recognised as a priority transport strategy for Victoria. It should be fully implemented with appropriate investment.

Recommendation 15

Develop a new operational policy for the creation of liveable neighbourhoods, articulating the various healthy design elements required of urban developments, and residential neighbourhoods in particular. This would provide a detailed code for planners and urban designers, following the lead of the WA government.

Recommendation 16

Amend the *Urban Design Charter for Victoria – Charter Objectives* to include the need to provide urban environments that support the health and wellbeing of Victorians; and consider varying the principles based on the Heart Foundation's *Healthy Spaces and Places* design principles for healthy communities, including the provision for a healthy and sustainable food system.

Mandate for the strengthened application of the elements contained in the Urban Design Charter. This can further guide decision making through State Planning Policy (SPP) and the VPP.

TOR (5) Provide recommendations for future planning and investment**TOR 5(a) the effectiveness of the Environments for Health Municipal Public Health Planning Framework****Recommendation 17**

Amend the current framework to incorporate consideration of a healthy and sustainable food system and how it could be incorporated into the MPHWP.

TOR 5(b) the *State Public Health and Wellbeing Act 2008*, the *Transport Integration Act 2010* and the *Planning and Environment Act 1987***Recommendation 18**

Align the *Planning and Environment Act 1987* with the *Public Health and Wellbeing Act 2008* and the *Transport Integration Act 2010*, to strengthen cross-sectoral collaboration for improved health outcomes.

TOR 5(c) international experience such as the World Health Organisation's (WHO) Healthy Cities initiative**Recommendation 19**

A similar council to the Vancouver Food Policy Council could be formed for Melbourne, to address food issues in an integrated, multi-sector way.

Recommendation 20

Prioritise the preservation of agricultural land with:

- a commitment to no further extension of the Urban Growth Boundary
- no expansion of development in Melbourne's Green Wedge Zones

strengthen Victoria's commitment to preserve healthy and sustainable agricultural production

- ensure legislation and policy governing natural resource inputs necessary for sustainable and resilient food production is integrated with planning, health and transport legislation and policy

Recommendation 21

Develop a planning mechanism that can be used in Victoria to limit the clustering of fast food outlets in particular suburbs. This could draw on the learnings of the Liquor Licensing law with regard to specifying saturation levels.

Recommendation 22

Introduce the requirement for a Health and Wellbeing Impact Assessment into planning application requirements and planning assessment processes for larger and State significant planning proposals in urban environments.

TOR 5(d) the consistency of policy approaches across the Victorian Government to promote health through evidence based environmental planning and design measures

Recommendation 23

Adopt a *Health in All Policies* (HiAP) approach. Coordinate legislation, policies, processes and actions across multiple disciplines to articulate and implement healthy urban planning and design objectives to support increased liveability options for residents in outer suburban Melbourne and the improved health and wellbeing of all Victorians.

This can be done by:

- identifying health and wellbeing as a shared goal of all government departments;
- providing coordination and leadership through the Department of Premier and Cabinet;
- establishing and measuring key performance indicators for health, education, housing, planning and transportⁱⁱⁱ.

TOR 5(e) The role of public open space in promoting health

Recommendation 7 (as above)

Provide for a range of structured and unstructured activities by creating a range of open space options, all with suitable active transport access.

Design the open space network as an integral part of the urban structure and offer a variety of safe and attractive spaces. Ensure that these are well distributed throughout a neighbourhood and are accessible, connected and cater to the sporting and recreation needs of the community.

3.0 Response to Terms of Reference

3.1 TOR (1) - Review the evidence of the contribution of the natural and built environments to the promotion of health and well being.

Australia faces enormous health, economic and social costs as a result of rising rates of chronic disease.^{iv} The Victorian population is growing and ageing, leading to more chronic conditions and greater demand for hospital care. The planning system needs to respond to these challenges.

In 2008, obesity alone was estimated to cost Australia \$58 billion, including nearly \$3.6 billion in lost productivity.^v The total economic cost of physical inactivity was estimated to be \$13.8 billion.^{vi}

Focussing efforts on prevention not only saves lives but it is highly cost effective. This point was made by the Preventative Health Taskforce, which argued

“Tackling the growing burden of chronic illness is imperative, especially in a country with an aging population. Prevention is increasingly being seen as a crucial means of reducing this burden”.^{vii}

3.1.1 The link between planning and health

Urban planning and health are drawn together by close historical ties. The origins of town planning began with a concern for health. A 1999 World Health Organization (WHO) report noted that

“the planners of mid-nineteenth century cities were both public health workers and what we today call urban planners.”^{viii}

According to Thompson,

“concerns for the health of city inhabitants ... stimulated the development of two principles that have dominated planning ever since: the concept of zoning and that of the suburb.”^{ix}

Improvements in housing and living conditions and the development of infrastructure for water sanitation, sewerage systems and other public hygiene works were driven in some part by the industrial revolution’s need for a healthy workforce.^x

Throughout the twentieth century the combined efforts of public health professionals, civil engineers and environmental scientists were at the forefront of achieving better public health. Access to clean water, garbage and waste removal, and the regulation of industrial waste, effluent and emissions became increasingly common for more people.^{xi}

Today, there is renewed interest in re-establishing the once close ties between planning and public health, which drifted, in part due to public health’s gravitation towards a biomedical model.^{xii} The World Health Organization’s ‘Healthy Cities’ project is a practical example of this interest. The 1998 ‘Athens Declaration for Healthy Cities’ proclaimed that

health is promoted most effectively when agencies from many sectors work together and learn from each other... health is everyone's business.^{xiii}

The spread of communicable disease remains the major focus of public health in many parts of the underdeveloped world. However, in affluent countries such as Australia, attention has turned towards the link between non-communicable chronic diseases, such as cardiovascular disease and diabetes; and broader factors that affect health, including work, education, housing, transport and the urban environment.^{xiv, xv}

The contemporary focus on chronic disease is supported by a strong and growing evidence-base that shows health is socially determined.^{xvi} How we live, work, travel and spend our leisure time affects our health.^{xvii} It is for this reason that in 2004 *The Lancet*^{xviii} called for “*the discipline of urban planning for health ... to be strengthened*”. Today, such concerns are increasingly becoming important for public health.^{viii, xi, xix}

3.1.2 A healthy approach to planning

Modern environments have been described as ‘obesogenic’, in part because they limit opportunities for physical activity to be easily incorporated into daily routines, leading to sedentary lifestyles.^{xx,xxi} This prompted *The Lancet* to editorialise:

“Now at the beginning of the 21st century, hardly a week goes by without further evidence that developed countries are at the dawn of an exploding new threat to population health ... People are getting fatter and less physically active, and are therefore more prone to killer chronic illnesses, such as cardiovascular disease, stroke, cancer and diabetes.”^{xxii}

Planning can make a significant contribution to the creation of obesogenic environments by creating barriers to physical activity in the built environment. The design of many cities and towns limit opportunities for incidental physical activity (activity that can be built into daily routine such as walking for transport to work or local shops) and has contributed to an over reliance on cars as a primary mode of transport, even for very short trips.^{xxiii,xxiv}

While the Heart Foundation supports the role played by individuals in maintaining good health, we also recommend that policy and legislation across all sectors must be orientated to support health. This concept, described by the World Health Organization as ‘healthy public policy’, recognises that many of the factors that influence health are situated outside the health sector. Education, transport and planning impact significantly on the health status of the community, often without realising that they do.^{xxv}

The notion of healthy public policy is applicable to urban planning and design. This Inquiry presents an opportunity for Victoria’s environmental design to reflect National Preventative Health Taskforce’s recommendation^{xxvi} that urban environments should be reshaped towards healthier options. Healthy and liveable environments provide opportunities for citizens, irrespective of

where they live, to enjoy equal access to local community facilities, employment, transport, housing and public spaces.^{xxvii}

3.1.3 Modifiable risk factors for cardiovascular disease

Cardiovascular disease has a number of causes, some of which are not modifiable (genetic, hereditary, accident and injury) and some of which are modifiable (diet, exercise, smoking, alcohol consumption).

For the past 15 years, the Heart Foundation has argued for change to the way Victoria's urban environment is planned. Our cities and towns should be planned to enhance people's health and wellbeing. This submission focuses on two modifiable risk factors – physical activity and food and nutrition – that if addressed could significantly reduce the amount of illness and suffering caused by chronic diseases, including cardiovascular disease.

Physical activity implications

The built environment can either facilitate or discourage physical activity, particularly walking. Physical inactivity is a modifiable risk factor for a range of chronic diseases including cardiovascular disease, type 2 diabetes, kidney disease and cancer^{xxviii}.

Two-in-three Australian adults^{xxix} and one-in-four Australian children^{xxx} are overweight or obese. Prevalence is even higher in disadvantaged groups^{xxxi}. In Victoria, the 2008 Victorian Population Health Survey found that the proportion of overweight or obese Victorians has increased from 45.1% in 2002 to 48.6% in 2008^{xxxii}.

The Built Environment and Walking evidence paper states that

“The built environment can either facilitate or discourage walking: land use systems, transportation systems, and urban design coalesce to create a pedestrian environment that impacts upon people's decisions to walk. There are two key conduits for increasing walking: encouraging more walking for transport, and/or encouraging more walking for recreation”.

These two types of walking require different environmental design responses^{xxxiii}.

The amount of daily physical activity recommended by the Commonwealth government and the Heart Foundation is 30 minutes for adults and a minimum of 1 hour and up to several hours for children. However in Victoria only 60.3% of adults achieve the recommended level of physical activity to maintain good health^{xxxiv}. If more Australians were physically active for just 30 minutes a day, the Australian healthcare system would save \$1.5 billion per year.^{xxxv}

Increasing Victorians' physical activity levels is an essential component of better health. One way this can be achieved is to engage planners and urban designers to provide better quality built environments to encourage and support people to use active transport modes and participate in outdoor activities.

Food and nutrition implications

Risk factors for chronic conditions such as cardiovascular disease, including obesity, high cholesterol and hypertension (high blood pressure) are increased by high intakes of total kilojoules (energy), saturated fat and salt and low fruit and vegetable intake. Only 10% of Victorians meet the healthy eating guidelines for fruit and vegetables and this figure is trending down.^{xxxvi}

The built environment has a significant impact on Victorian's access to healthy and sustainable food and the quality of the food provided locally often dictates the food choices within a given neighbourhood. For instance Victorians in low and middle socioeconomic areas are two and a half times more likely to be exposed to fast food outlets than those in high socioeconomic areas.^{xxxvii}

Food insecurity (i.e. lack of access to safe, nutritionally adequate, culturally acceptable food from non-emergency sources) is growing in Victoria. In 2008, 53 out of 79 Victorian local government areas reported that one in 20 of their residents ran out of food in the previous 12 months and could not afford to buy more.^{xxxviii}

The case for prioritising food in the planning and design of our cities revolves around the need to respond to:

- the burden of chronic disease on economies, health systems and communities
- the inequitable distribution of healthy food outlets (retail and foodservice)
- high quality agricultural land on the edge of Melbourne being lost to low density residential development to accommodate growing urban populations
- food production and the cost of food negatively affected by extreme weather events as a result of climate change
- vulnerability to Peak Oil - the cost and availability of fossil fuels is critical to the food system and is unsustainable in the long term.^{xxxix}
- resource depletion

Healthy built environments therefore contribute to the availability of healthy and sustainable food.^{xl}

Recommendation 1

Invest in healthy environmental planning and design for our towns and cities as a prevention measure that will improve quality of life, reduce levels of chronic disease and save public money.

3.2 TOR(2): Identify and report on those elements of environmental planning and design which provide the most promising opportunities for improving health outcomes in Victoria;

Key design considerations

The Heart Foundation has developed a range of resources that guide how the built environment can be better designed to improve health. (A list of key resources is provided in Appendix A.)

These evidence based documents provide a range of design considerations that would, if implemented, enhance the public health outcomes of the built environment.

The key design considerations that reflect a people focussed built environment include:

- Active transport*
- Aesthetics
- Environments for ALL people
- Mixed density*
- Mixed land use and local destinations*
- Parks and open spaces*
- Safety
- Social Inclusion
- Streets and connectivity*
- Supporting infrastructure
- Healthy and sustainable food system*

Those elements above which are highlighted with an asterisk are discussed below. They draw heavily on the guidance and recommendations the Heart Foundation has included in the documents attached.

Active transport

Boosting 'incidental activity' has population wide application. 'Incidental activity' takes place as a side effect of another purpose – for example, travel is required to access a destination and the mode of travel can be active transport, such as walking and cycling.

Designing the built environment to support more walking, cycling and public transport use is imperative if the current low levels of daily physical activity are to improve. This view is shared by Infrastructure Australia, which recently said the time had come for an unprecedented commitment and investment by governments in public transport and community infrastructure to increase cycling and walking.^{xii}

A more supportive environment for walking and cycling can be provided by:

- Guiding the structure planning process around the needs of active transport at the regional and local level to ensure active transport is the base from which the access and movement strategy is built;
- Providing a movement network with a highly-interconnected cycling/walking path network and a coordinated network of streets with bike lanes, pedestrian priority at intersections;
- Ensuring pathway networks connect with arterial networks to provide opportunities to travel longer distances (particularly relevant for cycle use);
- Creating safe places for people to walk and cycle. Special attention must be given to the design of major roads and intersections to ensure active transport paths are safe;
- Providing safe, accessible footpaths;
- Designing stimulating and attractive walking and cycling routes;
- Designing shared paths that provide legibility, clarity for users, and a division between cycling and walking modes.

The difference in access to trains, trams and buses for residents in the outer suburbs of Melbourne compared to residents in middle and inner suburbs has been described as “*not so much a tale of two cities as an encounter between different planets*”.^{xlii} It is generally accepted that urban sprawl has the potential to create unsustainable and unhealthy suburbs.^{xliii} Car dependency and poor access to infrastructure and services are characteristics of many new growth area suburbs where housing estates have been developed and public transport has not followed.^{xliv} Vehicle accident rates are much higher than in the inner and middle suburbs and bus services – usually the only public transport option – are poor or non-existent.^{xlv}

Research by the Bus Association Victoria found that residents who lived in Melbourne suburbs with a good public transport system (inner suburbs) undertook 41 minutes of walking a day; this more than fulfils the daily physical activity quota recommended for adults. By contrast, people who lived in suburbs with poor public transport (outer suburbs) only undertook eight minutes of walking per day.^{xlvi}

Environmental design can enhance public transport by:

- Integrating public transport with the transport planning process to develop a sustainable transport framework that caters to all users.
- Ensuring the public transport system connects people with places they want to travel to.
- Locating major public transport nodes or interchanges within activity centres. Activity centres should be ‘on the way’ to somewhere else, rather than just off the trunk route.
- Enabling users to cycle and then connect with public transport by ensuring bicycle storage facilities are located at stations
- Developing and extending rapid transit options, which are in turn supported by road-based public transport
- Designing public transport stops that:
 - link easily and directly with the pedestrian and cycling network

- are located conveniently for the walkable catchment to provide a hub for the surrounding community (with postal boxes, milk bar, etc) based on the passenger service requirements for each public transport route
- are supplemented with safe crossing points to improve accessibility. Their access routes should have natural surveillance from surrounding development
- have enough space to provide for shelter, seating, signage, information and lighting
- are safe and visible

Providing local destinations by increasing density levels

Frumkin, Frank and Jackson state that *‘Being overweight or obese is associated with living in areas with low population densities, curvilinear street networks, limited pedestrian access to commercial facilities and high dependence on cars to travel from place to place’*^{xlvii}

Local destinations can only survive if they have an available population base in close proximity to ensure viability. Medium-density, mixed-use, walkable neighbourhoods provide a sufficient population base to support local services, activities and employment. At the same time they provide a reduction in travel demand through co-location of jobs, people and facilities.

According to the *Healthy by Design* guidelines, *‘Destinations such as food stores, schools, chemists, neighbourhood centres, senior citizens centres and cafés provide local focal points for people to walk or cycle to within their neighbourhood. Local destinations support mixed use, walkable neighbourhoods and reduce dependence on the car for local short journeys. These destinations also naturally attract a range of people of all ages into the community’*^{xlviii}.

Ensuring that pedestrians have easy access to local destinations requires a number of design elements including:

- A variety of local destinations (such as schools and shops) within easy walking distance (400 metres is a comfortable walking distance for most people), and higher residential densities (over 30 dwellings per hectare) to support these;
- Public areas within walking distance (up to 800 metres), including open space and a variety of places for social interaction;
- Connected pathways, walking and cycling routes lead to local destinations;
- Routes along predictable paths of travel, such as to schools, recreation facilities and shops;
- Public transport provision, through density, mixed land use, building up to front allotment boundaries, providing weather protection, and maximising pedestrian amenity.

Streets and connectivity

The layout of the street and path network dictates how easy it is to get around. The more dense the level of connections in a transport network, the more permeable it is. A highly connected street and path network allows many options for navigation and provides active transport users with legible, direct means to connect to where they want to go.

Healthy by Design states that

'A legible street network with attractive frontages encourages people to be out and about. Having more people on streets contributes to more active and lively communities where people meet and interact. Grid street design integrates people with surrounding streets and supports convenient foot or bike travel. Design streets to provide both direct and leisurely paths to neighbourhood destinations and safe and easy access across streets^{xlix}.

Design considerations that enable better use of the street environment for physical activity are:

- Planning new subdivisions based on pedestrian and cyclist movement in the first instance before “fitting” the road network into the plan.
- Retrofitting existing subdivisions by closing road space (particularly one leg of cross intersections) while retaining cyclist/pedestrian paths (this makes pedestrian movement safer and more attractive while also improving vehicle safety at these intersections).
- Providing a grid path network. A grid street layout with spacing of 80-100m provides an optimum network for pedestrian and vehicular needs in most circumstances.
- Limiting speed limits in residential, strip shopping and around major trip generators to a maximum of 30km/h to create safe streets.
- Reallocating road space to cyclists and pedestrians;
- Introduce traffic calming measures.
- Creating attractive, well-lit streetscapes with shade trees.
- Providing safe places for people to cross streets.
- Ensuring connectivity of the street network, and also with walking and cycling paths. Keeping routes clear, direct & legible.
- Spacing of pathways to optimise pedestrian movement and discourage car movement.
- Providing infrastructure and markings that support on-road cyclists.
- Creating attractive and welcoming streets: providing transparent fencing along street frontages and facing buildings into the street to provide natural surveillance.
- Providing durable, clear, consistent signage.

Healthy and sustainable food system

Enhancing the food system to ensure that it provides Victorians with healthy and sustainable food into the future is an important aspect of environmental design. The food system covers a number of elements: producing food; processing and transporting food; consumer access and utilisation; and waste, recycling and post-use management. There are opportunities within each element for planning and urban design to influence the food system in a positive way.

When planning and designing for new residential development or retrofitting existing neighbourhoods, these design elements provide the optimal circumstances for communities to access food and contribute to a sustainable and resilient food system:

- Control urban growth and minimise the loss and fragmentation of agricultural land;
- Where Greenfield development on agricultural land must occur, ensure land or open space is available to maintain local food production;
- Provide for mixed land uses that provide opportunities for healthy and sustainable food production, distribution and sale of food;
- Link land uses for healthy and sustainable food production, distribution and sale of food with accessible transport options;
- Design for residential development and supporting mixed land uses to be proximate to activity centres;
- Ensure residential density and walkable catchment areas support the viability of healthy and sustainable food outlets, active transport infrastructure and public transport;
- Avoid large format retail outlets and island shopping centres that are largely car-dependant destinations;
- Provide a diverse range of public-realm shopping areas including markets, activity centres and strip shops with active frontages that are accessible by active or public transport;
- Develop the public realm to provide food opportunities and visibility, incorporating food production, food preparation and food contact;
- Integrate productive landscapes such as fruit and nut trees in public and open space. Incorporate community gardens, city farms, farmer's markets and healthy food cafes;
- Utilise clean stormwater for food production in the public realm;
- Design for urban stormwater, wastewater and nutrient management to improve the viability of agricultural production;
- Design subdivisions to:
 - Incorporate water-sensitive design characteristics
 - Provide for private and shared garden space for food production
 - Provide for food access, exchange and interaction in neighbourhoods via roads and pathways.

Parks and open space

There is a strong need for planners to provide a variety of open space solutions that appeal to and engage people from a range of ages, interests and abilities.

Currently in Victoria there is a tension regarding provision of open space dedicated to sport and structured activity and open space dedicated to unstructured activity. Victoria has relatively low participation in field sports (e.g. football 3.5%) compared with unstructured activities (walking 35.8%)ⁱ, and yet there is a disproportionate amount of open space dedicated to sports use. At the same time the population is aging, and recreation surveys constantly cite walking as Victorian's most favoured leisure activityⁱⁱ. Providing suitable recreation areas for unstructured activity is imperative.

Children have an essential need to play. However their original places to play in the streetscape have been eroded with increasing traffic volume and fear of stranger danger. As a result open space planning for unstructured play is increasingly important.

It is critical that open space planners provide a variety of solutions that provide broad appeal and engage the diversity of ages, interests and abilities present in the community.

Open space can take many forms – linear parks, ovals, enhanced streetscapes and pocket parks. These spaces allow for a variety of uses all of which provide health enhancing benefits: contemplation, active recreation, sport, unstructured activity, play, walking and through-travel. The design of open space, its location within an area and the variety of spaces provided all influence public health outcomes and go beyond physical activity and healthy food associations to include social and mental health effectsⁱⁱⁱ.

Some of these elements are:

- Encouraging active recreation including both structured and unstructured recreation;
- Enhancing access to cultural, sporting, recreational and incidental activity;ⁱⁱⁱⁱ
- Providing accessibility by ensuring that open space is:
 - distributed throughout an area providing equitable access to all users
 - easily accessible via public transport where appropriate
 - easily accessible via the walking and cycling network
 - connected with the broader open space network;
- Ensuring usage by ensuring that open space:
 - promotes safety and amenity and create pleasing places to be of a sufficient size and shape to cater for the intended use of the site
 - is adaptable and maximises the range of possible uses available and provides equitable opportunities for all users

- is shared with a number of user groups, e.g. school ovals form a part of the open space network and are available out of school hours for community use, allowing for the efficient use of land.
- provides pleasant and welcoming spaces, through landscaping, park furniture (seats, drinking fountains) and lighting.

Over-arching Recommendation 2

The above design elements be incorporated into government legislation, policy, strategy and guidelines across planning, health and transport portfolios.

Recommendation 3

Improve infrastructure to support active transport options (walking and cycling) and public transport.

Ensure significant investment in public transport infrastructure and service provision, in particular mass transit and adjoining 'feeder' services to improve access to active transport options and public transport.

Recommendations 4

Provide statutory guidance for new developments to achieve more compact, mixed land-use; locating residential housing close within easy walking distance of local activity centres, employment and public transport.

Amend the Victoria Planning Provisions (VPP) to specify medium density levels (30 dwellings or more per hectare) to support viable catchments for public transport, amenities and services.

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Embed Food-sensitive Planning and Urban Design objectives in the Victorian Planning Provisions, in particular clause 56.

Legislate to protect high quality peri-urban agricultural land, Green Wedge areas and natural environments.

Recommendation 7

Provide for a range of structured and unstructured activities by creating a range of open space options, all with suitable active transport access.

Design the open space network as an integral part of the urban structure and offer a variety of safe and attractive spaces. Ensure that these are well distributed throughout a neighbourhood and are accessible, connected and cater to the sporting and recreation needs of the community.

3.3 TOR (3): Assess the extent to which these factors are currently taken into account in environmental planning and design in both the public and private sectors, and their effectiveness, with particular reference to new growth areas;

In Victoria efforts have been made to incorporate healthy urban planning and design concepts into built environment development. Some examples of recent activity are summarised below. However it should be noted that these are efforts on behalf of individual councils and do not reflect mandated state-wide activity. The Environment and Planning Reference Committee should focus on how such measures could be 'mainstreamed' across the planning and design sectors to ensure all Victorians benefit from the improved health and wellbeing outcomes they will provide.

3.3.1 Local Government Activity

Amending Municipal Strategic Statements and policy integration

A number of councils have reviewed their Municipal Strategic Statements (MSS) and a variety of council policies and strategies as one way to plan for better health and wellbeing. Councils that have done this have taken a long term view of the policy context they are working in. They have sought to embed healthy planning and design into the mechanisms that their statutory planners and local developers are obliged to adhere to.

For example by *Healthy by Design* to guide their work, Wellington Shire Council amended their MSS to include reference to active living, with a focus on increasing physical activity.^{iv} Maribyrnong City Council has also considered walkability and fresh food access in its MSS, with a view to achieving walkable neighbourhoods and creating new opportunities for easy access to fresh food.^{iv}

A number of other policies lend themselves to adopting active living and healthy and sustainable food system principles and considerations. For example:

- Local Planning Policy Frameworks
- Structure plans and growth strategies
- Retail planning policies
- Housing strategies
- Urban design, urban landscape guidelines
- Subdivision guidelines
- Integrated transport plans
- Open space/recreational strategies
- Municipal Public Health and Wellbeing Plans
- Rural land strategies

Developer guidelines

Some councils in Victoria have realised the importance of engaging developers to support the provision of a healthy built environment. Councils to achieve this have sought to develop guidelines to articulate their support for a healthy built environment and to outline what is expected of planning applications to fulfil this desire. For instance Latrobe City Council has produced a customised set of developer guidelines called '*Healthy Urban Design, good practice guideline*'.^{lvi} This creates a clear set of guidance based on *Healthy by Design* recommendations, to alert developers to the standard of design expected within their municipality. Similarly Baw Baw Shire developed their '*Active by Design guidelines*'^{lvii} to ensure that new developments reflected active living principles. While this activity is to be congratulated there is a need to move this activity from the fringe to mainstream.

Providing local activity centres

The idea of decentralising activity and providing neighbourhood hubs that provide fresh food options within a walkable catchment provides active transport opportunities and fresh food access at the same time. Wodonga Council have attempted this by providing neighbourhood shopping centres which are accessible and walkable to a broader variety of people^{lviii}. Currently centralised rather than decentralised activity centres are common practise, but local neighbourhood level activity centre provision within walkable catchments is required.

Incorporating an edible landscape

The need to secure a healthy and sustainable food system has led to some innovative developers by incorporating food growing into their residential developments at the master-planning stage. For instance the Meridian development by VicUrban in Dandenong was planned to incorporate an urban orchard by way of both street and front garden food producing trees at the master planning stage, thus developing a culture of food production from the outset. Again this is the exception rather than the rule, and more policy directives and guidance is required to ensure that all councils engage in this approach to urban planning and design.

Recommendation 8

The Heart Foundation believes these examples (amending MSS and policy integration; developer guidelines; providing local activity centres; and incorporating edible landscapes) should be replicated across all councils in Victoria.

3.3.2 State Activity

Victorian Planning Provisions - Section 56 Residential subdivision

Section 56 was reviewed to incorporate a number of healthy urban design elements in 2001 and 2003. However there is an issue with the context description element of this section (Clause 56.01). This clause needs to apply to the major class of subdivisions submitted for approval, ie those that are in the 16-59 lots per hectare category. Currently this clause only applies to 60 lots or more. The requirement for context information should be extended to a properly detailed context plan applicable to all lot sizes above 16.

Recommendation 9

That Clause 56.01-1 be amended so that the requirements to map the context information for 60 lot + subdivisions also apply to the Class 2 (16-59 lots) subdivisions.

That the 56.01-1 and 56.01-2 requirements in relation to the provision of context information be upgraded to ensure that a properly detailed plan of the context, extending at least 500m beyond the site, is provided.

It is also the case that Clause 56.03 covers a number of significant environmental design elements: compact and walkable neighbourhoods, activity centres, planning for community facilities, built environment, and neighbourhood character. However due to the lack of applicability to Class 2 subdivisions and the generalised and limited nature of its content, it is unlikely to provide the outcome intended.

Recommendation 10

A major review of Clause 56.03 be undertaken to draft a better overall framework to facilitate delivery of liveable and sustainable subdivisions. This is particularly important not just in relation to subdivision, but more importantly to Development Plans produced under the Development Plan Overlays (DPOs), which are required to be consistent with Clause 56. Therefore this clause should become the key directive on urban structure.

It is recommended that after revision of the clause, all provisions of the clause be made to apply to Class 2 subdivisions^{lix}.

Growth Areas Authority Precinct Structure Plans

In 2009 the Growth Areas Authority (GAA) prepared a set of guidelines to advise on the development of Precinct Structure Plans (PSP). These guidelines provide a number of objectives that support the designing of a healthy urban environment, including:

- Objective 1 ‘Neighbourhoods are safe and compact, making it easy to walk and cycle to shops, local jobs, schools, community facilities and public transport stops.’^{ix}
- Objective 2: ‘Urban life is created through a culture of local food shops (such as fruit and vegetables, meat and fish and daily grocery items) and cafes that people can walk to.’^{xi}
- Objective 3: ‘Activity centres are designed to ensure that they are attractive, lively and convenient focuses for the communities they serve and include the provision of quality public spaces.’^{xii}
- Objective 5 ‘Streets and urban form are designed to cater for a peoples choice in movement – walking, cycling, public transport, car and other motorised vehicles.’^{xiii}

While these echo the design considerations recommended by the Heart Foundation in TOR2, an element in the PSP undermines the good intentions of the objectives – this pertains to density levels.

Medium density levels are required to provide a walkable neighbourhood. For example, *Healthy Spaces and Places*, recommends a minimum of 30 dwellings per hectare^{xiv}. The Growth Areas Authority PSP recommends ‘an average net density of 15 dwellings per development hectare or more’^{lxv}, which is in effect encouraging low density development. This undermines the GAA’s objectives to encourage active transport and therefore reduces the public health outcomes that such developments can achieve.

The PSP also provides little guidance regarding open space planning and design in new developments. This is a critical oversight that should be addressed, as per the open space design recommendations cited above.

Similarly a number of GAA objectives support healthy good access but there is little regard for local food production. This could have been included under Objective 6 which addresses environmental sustainability.

Recommendation 11

The PSP be amended to address the need for medium density developments that will provide walkable neighbourhoods. Also include objectives around open space provision and food production as important foci of all new developments in growth corridors.

3.4 TOR (4): Determine opportunities to influence environmental planning and design for health, including consideration of the role of legislation, guidelines, and public-private partnerships, and the costs and benefits of various options;

There are many ways to change current practise around environmental planning and design to help reorient it towards health and wellbeing outcomes. Embedding requirements in legislation will have the greatest effect, however to date the planning portfolio of the Victorian government has been the least active in exercising this option.

There are also a number of other mechanisms that local government, statutory bodies, designers and planners have used to provide health and wellbeing outcomes. While these are examined below it should be that a fundamental shift in priority is required within the planning legislation to genuinely incorporate healthy urban planning principles throughout the system. This would ensure healthy urban design becomes an integral part of Victoria's planning system.

3.4.1 Legislation

Objectives of Planning in Victoria, Planning and Environment Act 1987

The Planning and Environment Act had not been comprehensively reviewed since it was enacted in 1987. The recent announcement by the Minister for Planning to establish a committee to review the planning system provides a real opportunity to modernise the Planning Act and Victoria's planning system. The Heart Foundation recommends the Government review and build on the amendments proposed in the draft *Planning and Environment Amendment (General) Bill 2009* to ensure that necessary changes are incorporated in the Act.

In particular the Heart Foundation recommends the Victorian Government:

- Broaden the scope of planning legislation to reflect a greater emphasis on the link between planning and people;
- Expand the Objectives of Planning in Victoria to make explicit reference to health and wellbeing;
- Align the Planning Act with the *Public Health and Wellbeing Act 2008* and the *Transport Integration Act 2010*, to strengthen cross-sectoral collaboration for health outcomes;
- Build the consideration of health and social impacts into the assessment process;
- Create a separate system for assessing state-significant projects which considers health and social impacts;
- Introduce provisions for the protection of agricultural land and provision of food security and a healthy and sustainable food system for all Victorians^{lxvi}.

Recommendation 12

The Victorian Government review the Planning and Environment Act and incorporate elements that strongly support the public health and wellbeing of all Victorians.

Municipal Health and Wellbeing Plans

Municipal Health and Wellbeing plans are a requirement under Section 26 of the *Public Health and Wellbeing Act 2008* (Health Act). Every council must develop one, and they must be consistent with the Municipal Strategic Statement (MSS) prepared under section 12A of the Planning Act, as well as the Council Plan prepared under the *Local Government Act 1989*.

Section 12A of the *Planning and Environment Act 1987* requires Municipal Strategic Statements be consistent with the current council plan prepared under section 125 of the Local Government Act 1989, but there is no need for them to refer to the MPHWP.

Recommendation 13

Amend Section 12A(4) of the Planning Act to ensure Municipal Strategic Statements are consistent with Municipal Public Health and Wellbeing Plans and Council Plans.

Amendment VC71, Victorian State Planning Policy Framework (SPPF)

The gazettal of Amendment VC71 revised Victoria's State Planning Policy Framework (SPPF) to include: *Melbourne @ 5 Million*, *Victorian Integrated Housing Strategy* and the *Victorian Transport Plan*. This move enabled these policies to better integrate with Local Planning Policy Frameworks (LPPF)^{lxvii}. While this augmented the impact of these policies, it compounded the lack of awareness regarding the need to incorporate the objective of improved health and wellbeing for Victorian communities when planning for population growth.

The Victorian Transport Plan

The Victorian Transport Plan (VTP) represented \$38 billion+ government expenditure on transport for the State. The Heart Foundation supports the significant investment in public transport. In terms of making provision for active transport modes such as walking or cycling, the VTP outlined an investment of \$105 million to create new bike lanes in inner Melbourne, Central Activities Districts and regional areas plus the public bike hire scheme for Melbourne's CBD. There was no reference made to walking.

In 2010, the *Pedestrian Access Strategy: A strategy to increase walking for transport in Victoria*^{lxviii} (the Strategy), was developed by the Department of

Transport. The Heart Foundation, along with other stakeholders, provided input into the development of the Strategy.

The Heart Foundation believes the Strategy should be implemented and urges the Government to recognise the health, social, environmental and economic benefits of promoting 'a walkable Victoria'^{lxi}. This strategy is consistent with the Heart Foundation's position on *The built environment and walking*^{lxx} (attached), *Healthy by Design*^{lxxi} (attached), and *An Australian Vision For Active Transport*^{lxxii} (attached).

Recommendation 14

The Pedestrian Access Strategy be recognised as a priority transport strategy for Victoria. It should be fully implemented with appropriate investment.

Liveable neighbourhoods (WA)

Liveable neighbourhoods is an operational policy first adopted by the Western Australian Government in 1998. This policy '*applies to structure planning and subdivision for greenfield sites and for the redevelopment of large brownfield and urban infill sites.*'^{lxxiii} It aims to provide a code that covers various dimensions of planning and design: community design, movement network, lot layout, public parkland, urban water management, utilities, activity centres and employment, schools^{lxxiv}. It is based on new urbanism principles and puts active transport modes front and centre as essential design considerations^{lxxv}.

Recommendation 15

Develop a new operational policy for the creation of liveable neighbourhoods, articulating the various healthy design elements required of urban developments, and residential neighbourhoods in particular. This would provide a detailed code for planners and urban designers, following the lead of the WA government.

3.4.2 Guidelines

Urban Design Charter for Victoria

The Urban Design Charter for Victoria is a Victorian Government policy that presents 12 principles of 'good' urban design^{lxxvi}. In defining what constitutes a 'good' public environment and providing reasons why this is important, no reference is made to health.

The Heart Foundation believes the Charter should be re-written to clearly articulate the need for provision of 'good' urban environments to support health and wellbeing and outline the design principles to realise this objective. This can be strengthened by including provision of a healthy and sustainable food system.

Recommendation 16

Amend the *Urban Design Charter for Victoria – Charter Objectives* to include the need to provide urban environments that support the health and wellbeing of Victorians; and consider varying the principles based on the Heart Foundation's *Healthy Spaces and Places* design principles for healthy communities, including the provision for a healthy and sustainable food system.

Mandate for the strengthened application of the elements contained in the Urban Design Charter. This can further guide decision making through State Planning Policy (SPP) and the VPP.

3.5 TOR (5) Provide recommendations for future planning and investment

TOR 5(a) the effectiveness of the Environments for Health Municipal Public Health Planning Framework

In 2001 the Victorian Government provided a guide to assist each local government to develop a Municipal Public Health Plan. The resulting framework had as its aim 'to enable local councils to become leaders in promoting community wellbeing using a cutting-edge approach to quality health planning.'^{lxxvii}

The framework took a determinants of health approach that covered four distinct areas: built/physical environment, natural environment, economic environment and social environment. The framework encouraged integrated planning across council to provide health and wellbeing outcomes, and involving landuse planners and transport planners as important players in improving the quality of the built environment.

The Victorian government has taken a serious step towards broadening the concept of health at a local government level and is to be commended for its vision and leadership in this area.

Encouraging more emphasis on provision of a healthy and sustainable food system would be a useful addition to the framework and guidance provided.

Recommendation 17

Amend the current framework to incorporate consideration of a healthy and sustainable food system and how it could be incorporated into the MPHWP.

TOR 5(b) the *State Public Health and Wellbeing Act 2008*, the *Transport Integration Act 2010* and the *Planning and Environment Act 1987*;

Victoria has in the past three years renewed two of its principal Acts of Parliament – the *State Public Health and Wellbeing Act* and the *Transport Integration Act*. These two Acts work in tandem to address health and wellbeing through their jurisdictions.

The *State Public Health and Wellbeing Act* has as a key objective 'to achieve the highest attainable standard of public health and wellbeing by...*(b) promoting conditions in which persons can be healthy;*'^{lxxviii}

It also requires the production of Municipal Health and Wellbeing Plans^{lxxix}, and enables the Minister to call for a Health Impact Assessment for major projects as s/he sees fit.^{lxxx}

The Transport Integration Act clearly takes a broad multi-modal view of transport, stating that the transport system includes all modes and covers environmental design components such as: “*crossings, cycling paths and footpaths*”^{lxxxix}

It has as an objective around safety and health and wellbeing, stating that: ‘*The transport system should....promote forms of transport and the use of forms of energy which have the greatest benefit for, and least negative impact on, health and wellbeing.*’^{lxxxii}

The Transport Integration Act clearly articulates the need for an integrated approach to transport and land use planning and contains a number of principles including: ‘*The principle of integrated decision making means seeking to achieve Government policy objectives through coordination between all levels of government and government agencies and with the private sector*’^{lxxxiii}.

The missing link in the current legislative context is the *Planning and Environment Act 1987*. As cited above in section 3.4.1 the Planning and Environment Act needs to be amended to reflect the new legislative paradigm that has been put in place by the Health and Transport portfolios. Victoria’s planning landscape would change markedly if this was achieved. It would also mean planning, health and transport would offer a consistent and contemporary approach to current challenges facing Victoria. The nexus between Planning and Transport lies in common policy around:

- land use and zoning
- development approval
- provision of public infrastructure
- development and implementation of urban renewal
- affordable housing and provision of social and community services
- development and protection of natural resources
- economic development.^{lxxxiv}

Recommendation 18

Align the *Planning and Environment Act 1987* with the *Public Health and Wellbeing Act 2008* and the *Transport Integration Act 2010*, to strengthen cross-sectoral collaboration for improved health outcomes.

TOR 5(c) international experience such as the World Health Organisation's (WHO) Healthy Cities initiative;

There are a number of international examples of legislation, policy and frameworks that underline the importance of a healthy built environment and the contribution that environmental design makes to public health outcomes.

A few of these are discussed below:

Healthy Cities initiative

Australia is part of the Alliance for Healthy Cities. The Healthy Cities initiative offers a framework for local government to improve residents health and wellbeing. It takes a social determinants of health approach to health and works across the social, physical and economic environments in order to improve health^{lxxxv}. A number of councils are engaged with the alliance including two Victorian councils – City of Casey and Corio Norlane Development Advisory Board^{lxxxvi}.

In Victoria the Environments for Health Framework has attempted successfully to expand local government thinking and activity around health and wellbeing, using a determinants of health approach. This framework was produced in order to support local government in developing their Municipal Health and Wellbeing Plans(MPHWP). The Healthy Cities framework would complement this work and could be an added support and motivation for councils to address the determinants of health model proposed through the Environments for Health Framework.

Similarly the Child Friendly Cities Framework as outlined by UNICEF^{lxxxvii} could provide added support and motivation for councils to focus on the determinants of health, in this case those which particularly affect children.

The learnings from the Healthy Cities and Child Friendly Cities initiatives could be further explored with a view to their integration into the Victorian context. They present additional impetus for local councils to adopt the broad approach to health required of MPHWP.

Linking place-making to economic development, Michigan

The Michigan Place-making State Wide Economic Development Strategy oriented that state's economic development strategy around the design of place, and changed governance models to incorporate community-based partnerships.^{lxxxviii}

On the 21 March 2011, the Governor of the State of Michigan, Rick Snyder, in an address to the Michigan Legislature said:

“Neighborhoods, cities and regions are awakening to the importance of ‘place’ in economic development. They are planning for a future that recognizes the critical importance of quality of life to attracting talent, entrepreneurship and encouraging local businesses. Economic development and community development are two sides of the same coin. A community without place amenities will have a difficult time attracting and retaining talented workers and entrepreneurs, or being attractive to business. Each community contributes to the overall success of its region. Being globally competitive as a region requires understanding, mapping and pooling regional resources and assets. Local governments, the

private sector, schools, higher education and nongovernmental and civic organizations must collaborate to make Michigan's economic regions, and ultimately the state, competitive.^{xviii}

The government of Michigan sees place-making as a catalyst to showcase built and natural assets that exist within every community in the region and strengthen partnerships between communities and government. Because a placemaking approach is holistic, barriers between government agencies, the public and private sector and communities are broken down. This example of integrated place-making across Michigan State is a progressive strategy for re-creating economies and communities in the 21st century.^{xc}

Vancouver Food Policy Council

The Vancouver Food Policy Council is an integrated approach to improving the food system in City of Vancouver. It brings together city officials, non-government representatives, community members, academics, and local business people to address key issues that influence the food system in Vancouver. It aims to *'build a food system that is ecologically sustainable and economically viable....'*^{xcii}

To this end it has successfully developed a number of resources which include:

- City of Vancouver By-laws, Policies, Guidelines and
- Decisions Related to the Food System
- The Vancouver Food System Assessment Report
- City of Vancouver's Urban Agriculture Design
- Guidelines for the Private Realm^{xcii}.

Recommendation 19

A similar council to the Vancouver Food Policy Council could be formed for Melbourne, to address food issues in an integrated, multi-sector way.

Oregon Agricultural Land preservation

As Melbourne's urban boundary expands, high quality agricultural land is lost to the development of new housing stock. By contrast, since 1973 Oregon has established a statewide policy to protect and preserve farmland (ORS 215.243). Under the Statewide Planning Goal 3, all agricultural land must be preserved with the use of an 'exclusive farm use' zone (ORS 215.203). This preserves the land in perpetuity^{xciii}. This is further strengthened with the implementation of a strong urban growth boundary.

The Oregon policy is based on the following principles:

- *Open land used for agriculture is a vital natural and economic asset for all the people of the state,*

- *Preservation of a maximum amount of agricultural land, in large blocks, is necessary to maintain the agricultural economy of the state and for the assurance of adequate, healthful and nutritious food,*
- *Expansion of urban development in rural areas is a public concern because of the conflicts between farm and urban activities, and*
- *Incentives and privileges are justified to owners of land in exclusive farm use zones because such zoning substantially limits alternatives to the use of rural lands^{xciV}.*

In Victoria 25.5% of the states agricultural production takes place within the urban growth boundary.^{xcv} When fertile land is scarce and the threats to its sustainability high, serious measures must be taken to ensure that agriculturally productive land close to our settlements is preserved to meet the needs of current and future generations.

Recommendation 20

Prioritise the preservation of agricultural land with:

- a commitment to no further extension of the Urban Growth Boundary
 - no expansion of development in Melbourne's Green Wedge Zones
- strengthen Victoria's commitment to preserve healthy and sustainable agricultural production
- ensure legislation and policy governing natural resource inputs necessary for sustainable and resilient food production is integrated with planning, health and transport legislation and policy

'Saturation point' planning instrument, England

A Supplementary Planning Document (SPD) titled '*Saturation Point*' was developed by the London Borough of Barking and Dagenham to provide planning limits on the number of fast food takeaway outlets that were granted planning permission in any given area. This measure was taken because there were high numbers of takeaway outlets and little access to fresh and healthy food in certain suburbs. This resulted in high levels of obesity, particularly amongst children.

The stated aims and objectives of *Saturation Point* were to:

- Reduce prevalence and clustering of hot food takeaways, especially those in close proximity to schools, parks, and local youth amenities such as leisure centres
- Seek contributions from developers of new hot food takeaways towards initiatives to tackle obesity
- Work with outlets to improve the nutritional value of the food they sell
- Improve opportunities to access healthy food in new developments^{xcvi}.

This initiative provides a precedent to restricting fast food outlets similar to restrictions currently in place for alcohol outlets in Victoria through the Liquor Licensing law.

'The SPD Saturation Point is an example of how spatial planning can be used to improve the health landscape of the built environment.'^{xcvii}

Recommendation 21

Develop a planning mechanism that can be used in Victoria to limit the clustering of fast food outlets in particular suburbs. This could draw on the learnings of the Liquor Licensing law with regard to specifying saturation levels.

Health impact assessments

Health Impact Assessments (HIA) provide an established means of informing strategic planning decisions and would be worthy of investigation in relation to land use planning. HIA has potential to measure both qualitative and quantitative impacts on society and to ensure that the long term effects of development decisions on the wider community are considered in the planning process.

There are numerous methodologies for conducting HIA and the Victorian Department of Health is well placed to provide advice in this regard. The Public Health and Wellbeing Act 2008 includes provisions which give the Minister power to require that a health impact assessment be carried out.

It may not be appropriate to require HIA in all instances. The renewed Planning Act could identify in what circumstances they would be required and the process for undertaking them. For example, HIA might be used for large scale developments or community projects, applications for subdivisions greater than a certain number of dwellings, large growth areas, or for certain uses deemed to have the potential for detrimental health impacts (e.g. liquor and fast food outlets). HIA could be used in both the permit application process and the planning scheme amendment process.

Recommendation 22

Introduce the requirement for a Health and Wellbeing Impact Assessment into planning application requirements and planning assessment processes for larger and State significant planning proposals in urban environments.

TOR 5(d) the consistency of policy approaches across the Victorian Government to promote health through evidence based environmental planning and design measures

As will be seen below there are a variety of policy approaches across different portfolios, some of which heavily endorse health and wellbeing, and others that completely ignore it. The challenge of the current Victorian government is to thoroughly review the policy context and insist upon health in all policies so that traction comes to bare in all portfolios on the essential issue of improving the health of Victorians.

National Preventive Health Strategy

In 2009 a National Preventive Health Strategy was released. This strategy covered various elements of public health and prevention including obesity and provides a federal agenda for prevention of ill health.

In order to address the current rising tide in the incidence of obesity the following were proposed:

- Drive environmental changes throughout the community to increase levels of physical activity and reduce sedentary behaviour;
- Drive change within the food supply to increase the availability and demand for healthier food products, and decrease the availability and demand for unhealthy food products;
- Embed physical activity and healthy eating in everyday life.

It outlined a number of actions to achieve these goals and these including:

- The development and implementation of 'a National Framework for Active Living encompassing local government, urban planning, building industry and developers, designers, health, transport, sport and active recreation' and
- Commissioning '*a review of economic policies and taxation systems, and develop methods for using taxation, grants, pricing, incentives and/or subsidies to promote production, access to and consumption of healthier foods*'.^{xcviii}

Cities, Our Future: A national urban policy for a productive, sustainable and liveable future^{xcix}

This is the recently released National Urban Policy detailing how healthy, liveable and sustainable outcomes can be implemented in Australian cities through direct investment and influencing cross-sectoral action. Through the policy, the Federal Government has formally recognised that residents of Australian cities are presently confronted by significant long-term challenges including population growth and demographic change, climate change, increasing fuel costs and resource limitations, and housing affordability^{cc}, that directly impact on their health and wellbeing.

Our Cities, Our Future was informed by a survey commissioned by the Property Council of Australia entitled *My City: The People's Verdict*. Over 4,000 people were surveyed in all Australian capital cities and asked to rank attributes that make a city liveable in order of importance.^{ci}

Nationally, Australian cities scored highly on recreational outdoor environments, natural environments, cultural entertainment, and school and education facilities. However, they rated poorly on roads and traffic congestion, public transport services, environmental sustainability and climate change, and the provision of quality affordable housing^{cii}.

In considering environmental design and public health the Heart Foundation recommends that the Committee consider how the key themes in *Our Cities, Our Future* apply to the Victorian context.

Melbourne 2030

A 2008 audit of *Melbourne 2030* found:

“...the fundamental principles of Melbourne 2030 are more relevant than ever. This is because of the challenges posed by climate change, traffic congestion, the faster than expected growth of Melbourne's population, and the fact that Melbourne is still an extremely spread out city. Compared to five years ago, there is now an even greater urgency to implement the many initiatives of Melbourne 2030 if Melbourne's development is to be sustainable and the city is to remain liveable”^{ciii}.

An *Analysis of Progress and Findings from the 2006 Census*^{civ} accompanied the *Melbourne 2030 Audit*. In this report, major trends identified during Stage 1 of the Audit included:

- The fastest growing municipalities in metropolitan Melbourne were located on the urban fringe;
- Households were declining in size;
- Economic growth was strong between 2001 – 2006;
- The number of metropolitan households with members in older age groups was increasing;
- Environmental issues including climate change and water management had evolved into central policy considerations though it was noted that the degree of urgency attached to addressing these had increased;
- Petrol and transport costs increased with the possibility of future petrol price rises making the implementation of activity centre policy more urgent;
- Housing affordability had declined although it was considered that *Melbourne 2030* policies had positioned Victoria well, particularly in the area of managing land supply^{cv}.

Notably, the analysis did not include mention of any population health trends.

In response to the *Audit of Melbourne 2030*, the Government released *Planning for All of Melbourne*. *Planning For All Of Melbourne* is informed by

research and analysis undertaken by the Department of Sustainability and Environment (DSE), and later, the Department of Planning and Community Development (DPCD); over 200 public submissions; and the Report of the Audit Expert Group.

The only mention of health considerations appeared on page 49 under the heading '*Building stronger, healthier and safer communities*'^{cvii}. The initiatives listed under this heading addressed:

- improved quantity and quality of open space in growth areas;
- co-location of multi-use community facilities (e.g. children's services, schools, community health centres) in growth areas;
- provision of aged care facilities in land use planning strategies;
- investigating how to better address health issues and gaps including services and infrastructure^{cvii}.

While the Heart Foundation supports initiatives such as these, the response fails to recognise that the health of Victorians is essential to the overall liveability, sustainability and prosperity of the State. The Heart Foundation recommends health considerations should be included in all government policies including areas that relate to community planning and development in Victoria. Planning, transport, environmental sustainability, resilient responses to climate change and the management of urban growth and change all have direct impacts on determinants for the health of Victorians.

In 2008, *Melbourne 2030* continued to be the Government's strategic plan for managing Melbourne's growth and development. To complement this, new population projections for the State were released in *Victoria in Future 2008* to identify new trends, and inform the re-evaluation of *Melbourne 2030* settlement projections^{cviii}. In addition, *Melbourne @ 5 million* was prepared in consultation with the Department of Transport in an attempt to improve integration between planning and transport. The initiatives and projects in the *Victorian Transport Plan* were based on the population projections contained in *Victoria in Future 2008*, and the planning analysis of Victorian settlements was contained in *Melbourne @ 5 million*.^{cix}

Victoria in Future 2008 and Melbourne @ 5 million

Victoria in Future 2008 was produced for the Department of Planning and Community Development and was described as the 'Victorian Government's official population and household projections'^{cx}. It included data on age, population growth, births and deaths, unemployment, fertility and migration.^{cx}

This data set was consistent with the traditional methodology for interpreting demographic composition and change. However, data on the type, quantity and movement of people can only provide a two-dimensional insight into population characteristics. In order to comprehensively plan for Victoria's future, data on health trends must be incorporated. Adopting a methodology that includes health data (e.g. levels of obesity, diabetes and chronic diseases such as cardiovascular disease and cancer; access to healthy food and

mapping of food deserts) with traditional population projection data will enhance the Victorian Government's ability to strategically plan for sustainable and healthy population growth.

Health data enables strategic assessment of people's needs and can inform a comprehensive range of policy interventions, including planning and urban design responses (land use, built form, transport and service provision to support the health and wellbeing of citizens). Useful health data that could inform urban growth, is currently provided in the *Metropolitan Health Plan Technical Paper 2011*.^{cxii}

Melbourne @ 5 million provided policy initiatives that complemented *Melbourne 2030*. These included:

- A more compact city (Central Activities Districts, employment corridors to improve accessibility to jobs and services and reduce road congestion);
- Management of growth (Growth areas to accommodate 47% of new dwellings, investigation of extensions to growth areas, density target of 15 dwellings per hectare, consideration of green wedge values);
- Enhancing links between Melbourne and regional centres in Victoria.^{cxiii}

These initiatives all have direct impact on determinants for the health and wellbeing of current and future Victorians. However, like *Melbourne 2030*, *Melbourne @ 5 million* does not mention the relationship between these interventions and health impacts (positive or otherwise) on people. Words and phrases such as 'vibrant', 'liveable', 'environmental consequences', 'sustainable options', 'landscape and economic values', 'resolution of biodiversity and settlement issues', 'social objectives', and 'lifestyle' must be framed in the context of their impact on people's health and wellbeing.

Health in All Policies (SA)

Achieving better environmental design to ensure good public health outcomes will require coordinated legislation, policies and actions across a range of government portfolios. The *Health in All Policies* approach adopted in South Australia is an example of one mechanism to achieve multi-disciplinary change and may inform a positive approach for Victoria.

In 2007, the Government of South Australia adopted the '*Health in All Policies*' (HiAP) approach. The HiAP approach is underpinned by ten principles that express the importance of a 'whole of government' approach to adequately address the determinants of health. (A full copy of the HiAP principles is attached)

In summary, the HiAP principles:

- '*Recognise the value of the health and wellbeing of all citizens for the social and economic development of the State;*
- *Recognise that health is an outcome of a wide range of factors including natural and built environments-many of which lie outside the*

health sector and require an integrated policy response across government;

- *Acknowledge that all Government policies can have positive or negative impacts on the determinants of health for current citizens and future generations;*
- *Recognise that the impacts of health determinants are not equally distributed and aim to close the health gap, particularly for Aboriginal and Torres Strait Islander peoples;*
- *Acknowledge that efforts to improve the health of citizens requires mechanisms to support collaboration between Government agencies for integrated solutions to current and future policy challenges;*
- *Recognise the potential of partnerships for policy implementation between Government levels, science and academia, business, professional organisations and non-governmental organisations to bring about sustained change^{cxiv}.*

Recommendation 23

Adopt a *Health in All Policies* (HiAP) approach. Coordinate legislation, policies, processes and actions across multiple disciplines to articulate and implement healthy urban planning and design objectives to support increased liveability options for residents in outer suburban Melbourne and the improved health and wellbeing of all Victorians.

This can be done by:

- identifying health and wellbeing as a shared goal of all government departments;
- providing coordination and leadership through the Department of Premier and Cabinet;
- establishing and measuring key performance indicators for health, education, housing, planning and transport^{cxv}.

TOR 5(e) The role of public open space in promoting health

See section 3.2.2 regarding open space, for Heart Foundation recommendations.

Appendix A: Relevant Heart Foundation Resources

Over the past 15 years, the Heart Foundation has developed a range of resources demonstrating best practice in healthy urban planning and design. Some of these are highlighted below:

Healthy by Design: a planner's guide to environments for active living^{xlviii}

These guidelines are used by local governments to embed healthy urban planning principles into Council policy and practice. *Healthy by Design* makes the following point:

“When ‘health’ is integrated into planning, the choice for people to be active becomes more convenient, easy, safe and enjoyable. Providing convenient, easy-to-access built environments that encourage people to be ‘out and about’ on a daily basis will contribute to a more active and vibrant society.”

The guide has a strong focus on creating environments that facilitate walking and cycling for transport purposes, either as the primary mode of travel, or in combination with public transport for longer journeys. It guides planners to consider the health impacts of their work and outlines seven key design considerations for the development of urban environments that support communities to lead active and healthy lives. These design considerations are: walking and cycling routes; streets; local destinations; open space; public transport; seating, signage, lighting, fencing and walls; and fostering community spirit.

Healthy by Design was developed in response to requests from the local government sector for practical guidance in designing walkable and more liveable communities. It has wide application and relevance for strategic planning, policy integration, urban renewal and new development (see attachments).

Healthy Spaces and Places: A national guide to designing places for healthy living

This resource represents a collaboration between the Australian Local Government Association, the National Heart Foundation of Australia and the Planning Institute of Australia^{cxvi} (see Attachments). Through practical tools, case studies and guidelines, *Healthy Spaces and Places* aims to:

- Encourage the development of built environments that provide opportunities for physical activity and other health-related activities;
- Improve health outcomes for Australians through better-designed built environments;
- Raise awareness of the relationship between health, physical activity and the built environment; and
- Contribute to a national policy setting agenda.

It is fundamentally about planning for more liveable and sustainable communities, with a particular emphasis on the benefits to people's physical and mental health. It is a guide for planners to better understand and respond to contemporary issues around planning and health, and highlights the importance of planning and designing communities for people^{cxvii}.

The built environment and walking^{xx}

The Heart Foundation has produced a review of current public health evidence that describes specific elements of the built environment that most significantly influence increased amounts of walking, both for transport and recreation. Three elements that are most significant for active transport are:

- Mixed use planning – providing a variety of and proximity to destinations;
- Density – higher residential densities support the viability of shops and services;
- Street connectivity – travel routes between homes, shops, workplaces and other destinations are direct and legible. Grid based patterns are more direct than curvilinear layouts.

However different conditions are required for walking for recreation purposes. Walking for recreation is more affected by levels of attractiveness/aesthetics of the surrounding environment and convenience to facilities (see attachments).

Safe speed: promoting safe walking and cycling by reducing traffic

speed^{cxviii}

This is an evidence based report commissioned by the Heart Foundation on behalf of the Safe Speed Interest Group in 2008. This report showed that lower speed limits are not just safer in terms of traffic impact on the human body, but also have the potential to encourage more walking and cycling due to modal shift resulting from a more attractive street environment.

Evidence in the report was taken from international examples and supports a move towards slower speeds, and in particular less than 30km/h in order to create street environments more conducive to active transport modes (see attachments).

Food-sensitive planning and urban design: A conceptual framework for achieving a sustainable and healthy food system^{iv} (FSPUD)

This resource examines the critical intersects between public health nutrition, planning, urban design, and environmental sustainability. FSPUD looks at how to create places that make it easy for people to access healthy and sustainable food in urban environments. A growing body of evidence identifies the impact planning decisions can have on the food system.

The case for prioritising food in the planning and design of our cities revolves around the need to address issues such as:

- The burden of chronic disease on economies, health systems and communities
- Inequality of access to healthy food.
- High quality agricultural land on the edge of cities being lost to low density urban development to accommodate growing populations
- Food production negatively affected through extreme weather events as a result of climate change
- Vulnerability to Peak Oil. The cost and availability of fossil fuels is critical to the food system and is unsustainable in the long term.
- Resource depletion

FSPUD helps develop a shared understanding of what food-sensitive planning and urban design is and the contribution it can make to the public health of our towns and cities. (see attachments).

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