



HEALTHY BUILT ENVIRONMENTS

## Reflections a decade on!

**Susan Thompson MPIA (Fellow)**, Professor in Planning and Associate Director (City Wellbeing), City Futures Research Centre, UNSW Sydney. 2015 Sidney Luker Medallist

This is the eve of a decade of 'Healthy Built Environments' columns. I started writing regularly in 'New Planner' back in 2010, together with health colleagues – initially Tony Capon and more recently, Peter McCue. Given this looming anniversary, I thought it would be opportune to reflect on where we've come from, major achievements, and future challenges and opportunities for the planning profession's take-up of healthy built environments in NSW.

I asked colleagues for their help. Out of 34 requests, I received 14 responses from health and ten from built environment professionals working in both urban and rural localities, across a variety of public, private and NGO settings. I posed three questions and below, summarise the themes that consistently emerged, while acknowledging that this inadequately portrays colleagues' generous and detailed replies.

### **Inspiring, innovative, exciting achievements in healthy planning in NSW over the past decade?**

Specific programs and initiatives – notably, Premier's Council for Active Living (2004-2016); the Healthy Built Environments Program at UNSW (2010-2014); Active Living NSW.

Design and implementation guidelines – Healthy Urban Development Checklist; Healthy Active by Design; NSW Government Architect's suite of documents; Heart Foundation's guidelines; and numerous others in local councils and regional areas.

Education – a wealth of professional development opportunities. Healthy planning is part of the town planning curriculum at universities and features as a mainstream topic in planning text books.

Attitudinal shifts – planners increasingly acknowledge that they have a legitimate role in supporting people's health into the 21st Century. Successful breaking-down of silo-ed thinking across health and the built environment – an interesting example is the rise of 'place-making'.

Legislative initiatives – inclusion of a health object in the 2013 Planning Bill – acknowledged as a defining achievement even though, ultimately, the health object did not survive the demise of the Bill. Other

legislative related initiatives include the recognition of health in strategic planning for Sydney; Inclusion of health supportive provisions in Community Strategic Plans; the increasing use of health impact assessments for proposed policies and developments.

Partnerships – building strong relationships between built environment and health stakeholders to advocate for change. The Healthy Planning Expert Working Group was highlighted as an important alliance initially forged to get health into the EPA Act revisions.

Recognition – healthy built environments are increasingly recognised as a selling point by developers and a valued and desired aspect of daily living by the community.

### **Significant challenges in embedding healthy planning into NSW planning policy and practice?**

Politics and priorities – vested interests confounding healthy planning implementation.

Contradictory behaviour – changing and opposing priorities across public agencies and government. Consequently, programs are often short lived, conflictual and inconsistent.



*Education has, and will continue to advance healthy planning*

Decision making practices – problematic focus on short term economic gain; failure to fully cost chronic disease impacts; over-privileging of clinical interventions as opposed to broader health promotion.

Resourcing – often a barrier for local councils keen to implement health supportive infrastructure.

### **Greatest opportunities and challenges for healthy planning heading into the next decade?**

Connecting human and environmental health – sustainability, low carbon, resilience – all are strongly linked to healthy planning and firmly on the built environment agenda.

Addressing inequality – at the heart of planning; associated with addressing unintended consequences of implementing healthy planning in the face of urban densification and challenges in rural and regional localities.

Mandating healthy planning – ensuring that policy and practice are supported by legislation across all levels of government.

Measuring impact – appropriately assessing interventions, including longer term health improvements, so that good practice can be repeated (in a contextually sensitive manner), and necessary adjustments made.

Greening – vigilant nature preservation in the face of densification pressures; championing innovative and community led opportunities to green buildings, public spaces and streets.

### **So, all in all, a strong legacy as we look back on the decade. Still greater commitment and consistency required, but with enthusiastic and dedicated stakeholders, the next decade looks promising for healthy built environments!**

Acknowledgements – my thanks to colleagues for generously sharing their reflections: Jillian Adams; Vanessa Burow; Nick Chapman; Stephen Corbett; Michelle Daley; Julie Dixon; Jan Fallding; Martin Fallding; Emily Fletcher; Suzanne Gleeson; Juliet Grant; Adam Guise; Patrick Harris; Jennifer Kent; Paul Klarenaar; Milly Licata; Peter McCue; Julie-Anne Mitchell; Greg Paine; Brendan Pearson; Jason Prior; Peter Sainsbury; Norma Shankie-Williams; Jane Threlfall ■