

The Environment and Children's Physical Activity

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University of Bristol

Does the environment influence youth physical activity?

- The physical (built) environment may encourage or inhibit children's physical activity
- Guidelines are to acquire 60 minutes per day of moderate to vigorous physical activity (MVPA)
- Environment can support opportunities for play, recreational activity in parks & greenspaces, or "utilitarian" activity such as walking or cycling to school

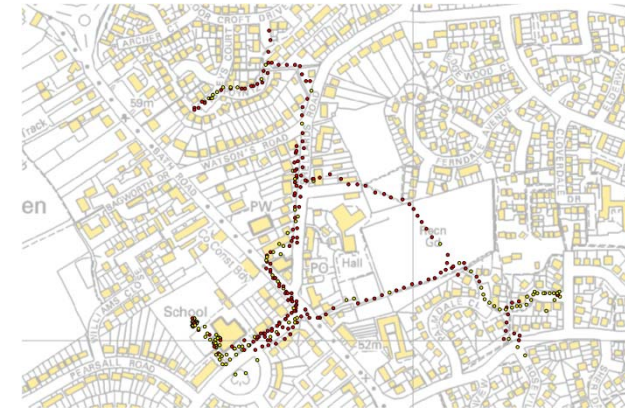
Greenspace and health

- Greenspace is proposed to promote health by mechanisms including use of space for physical and social activities, and mental health benefits of viewing nature
- Playgrounds and public green spaces provide many opportunities for recreational physical activity in children. Additionally sports facilities can contribute to physical activity levels in children
- However the relationship is inconsistent – of 14 studies only six found a positive association between greenspace and physical activity in children

Objective measurement of how children use their environment



Time
match
→



Accelerometer

**How active
children are**

GPS

Where they are

GIS

**What type of space
they are in**

Time spent active inside or outside – the home, school

Time spent active in different locations – the park, the playground

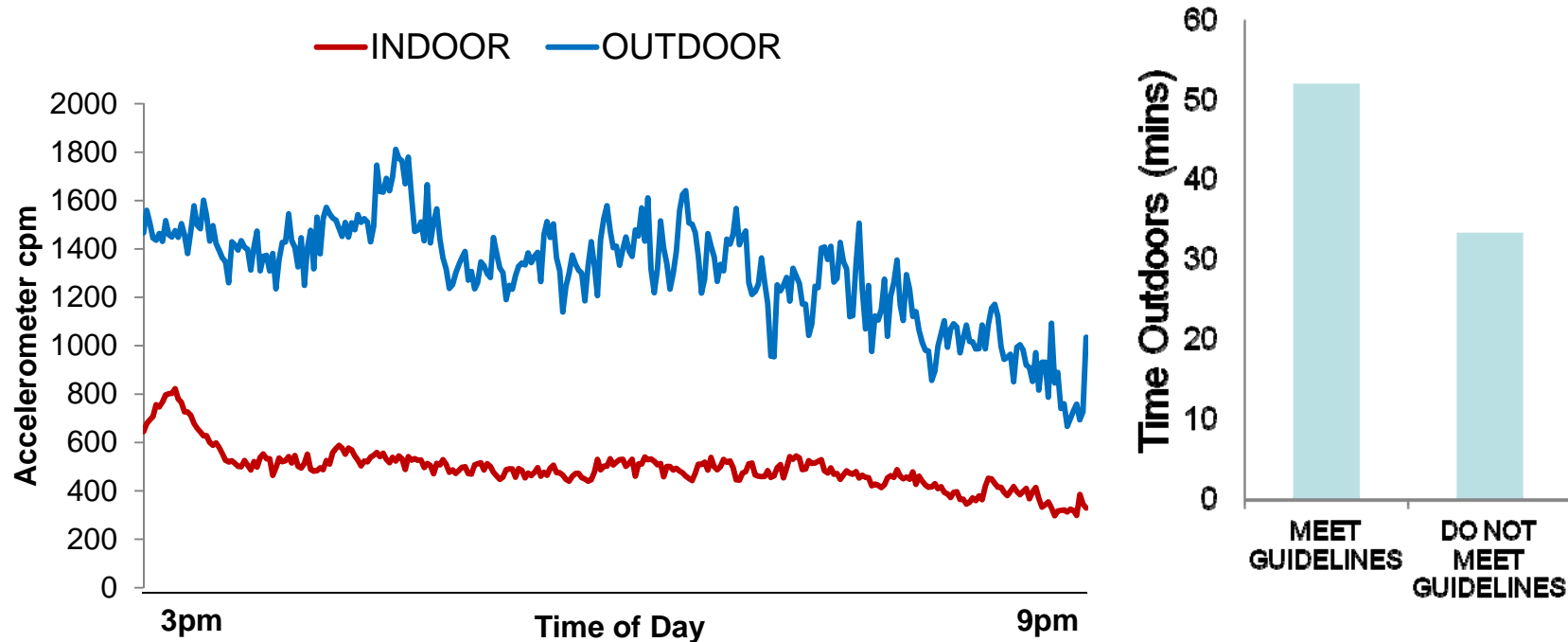
Time spent active in the street

PEACH: Personal and Environmental Associations with Children's Health

- Longitudinal study from last year of primary to first (and fourth) year of secondary school
- n=1307 children from 23 primary schools across Bristol (11yrs)
- n=953 followed up in first year of secondary school (12yrs)
- n=590 followed up in fourth year of secondary school (15yrs)



Time spent outdoors vs indoors & physical activity



Physical activity during GPS measured time outdoors is approximately 3-5 times higher than indoors

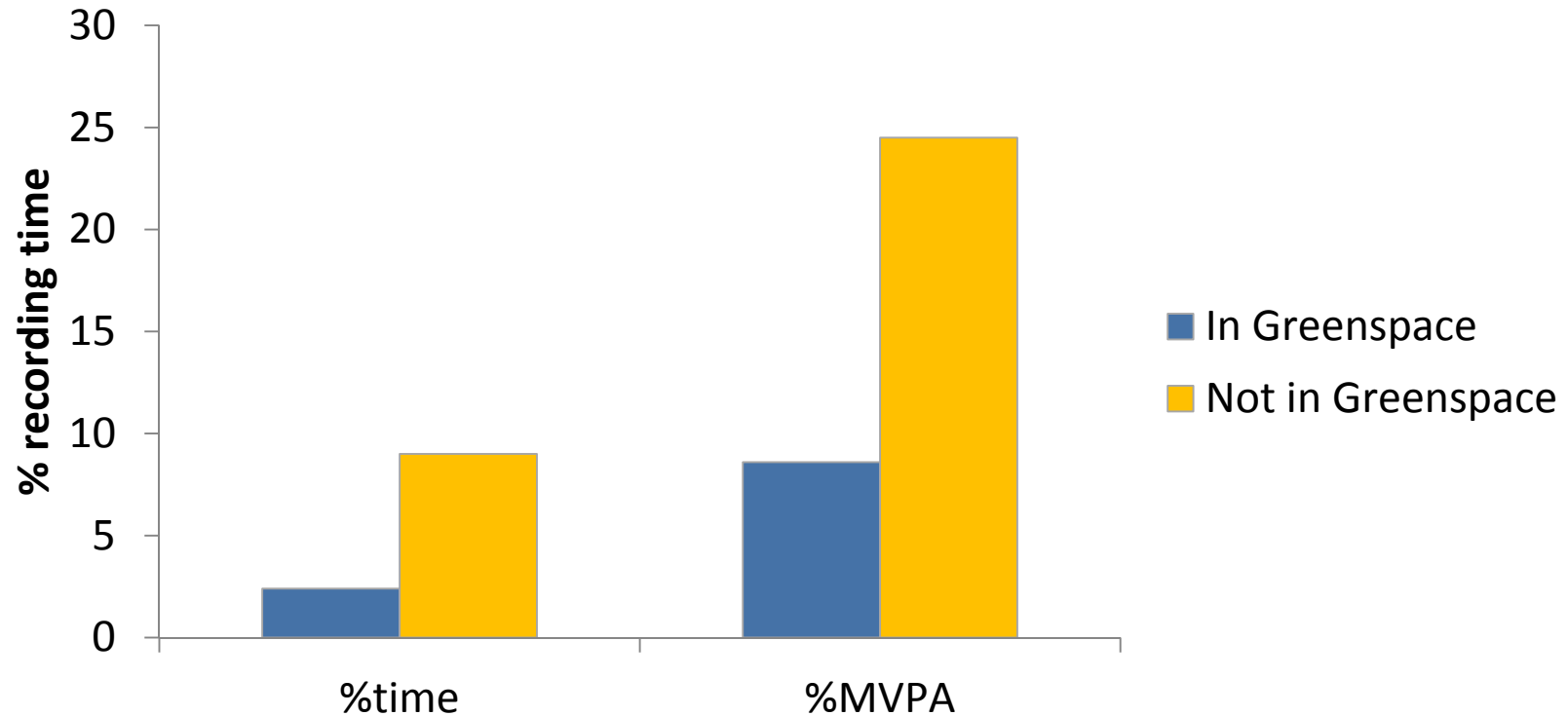
Time and activity in greenspace

- Generalised land use data base and Ordnance Survey Mastermap topography layer used to determine greenspace
- Spatial queries assigned each 10s datapoint to a land-use type
- Cut points used to determine activity level for each point
- Sample – primary school pupils (11yrs)
 - n=1053 (2483 person days); 58% male



An example of data collected from **one child** during one hour on a weekday evening, showing GPS locations and intensity of physical activity

Time and activity in greenspace

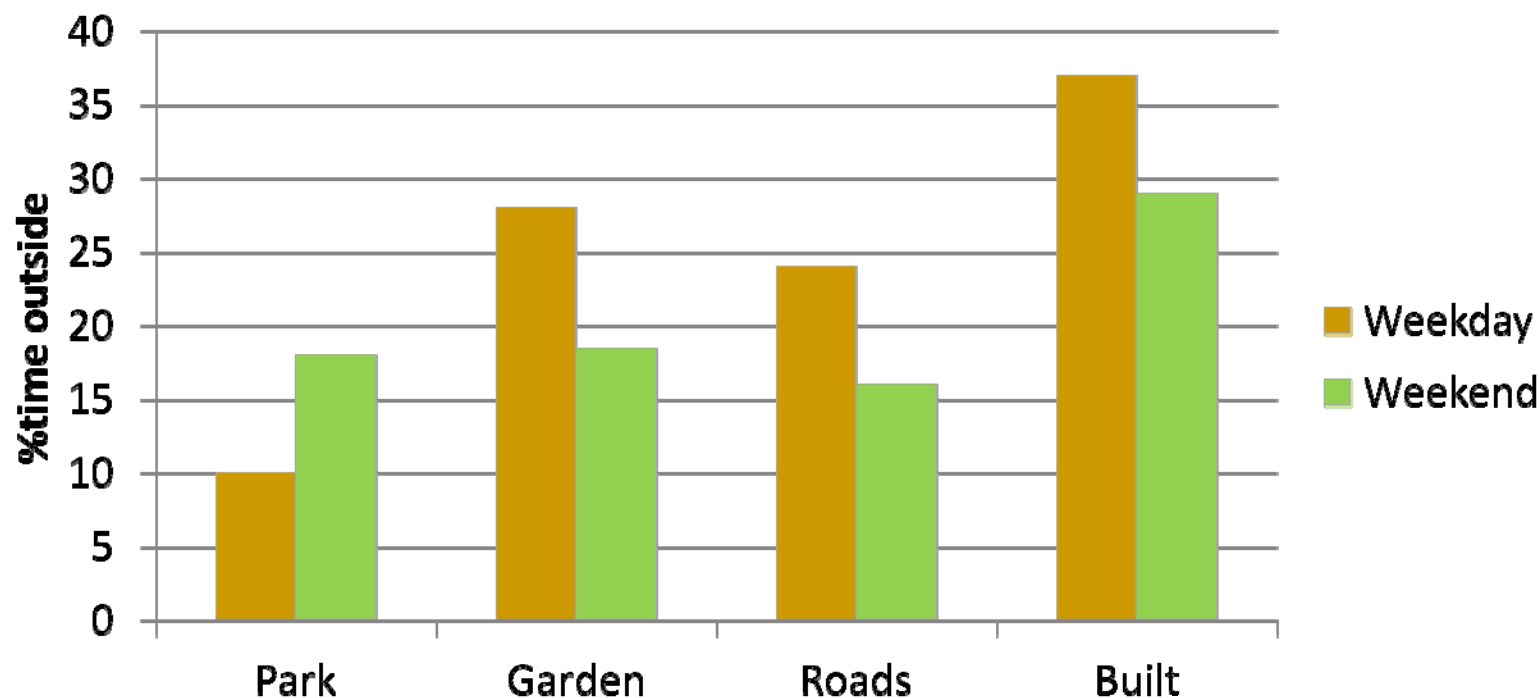


2.4% of time is spent in greenspace but 8.6% of daily MVPA is there

Time and activity in other spaces

- Ordnance Survey Mastermap topography layer
 - Buildings, roads & pavements, private gardens, parks, farmland, grassland, woodland, built surfaces
- Spatial queries assigned each 10s datapoint to a land-use type
- Cut points used to determine activity level for each point
- Sample - secondary school pupils (12yrs)
 - Weekday: n=614 (5,765 person hours); 46.7% male
 - Weekend: n=301 (3,833 person hours); 39.9% male

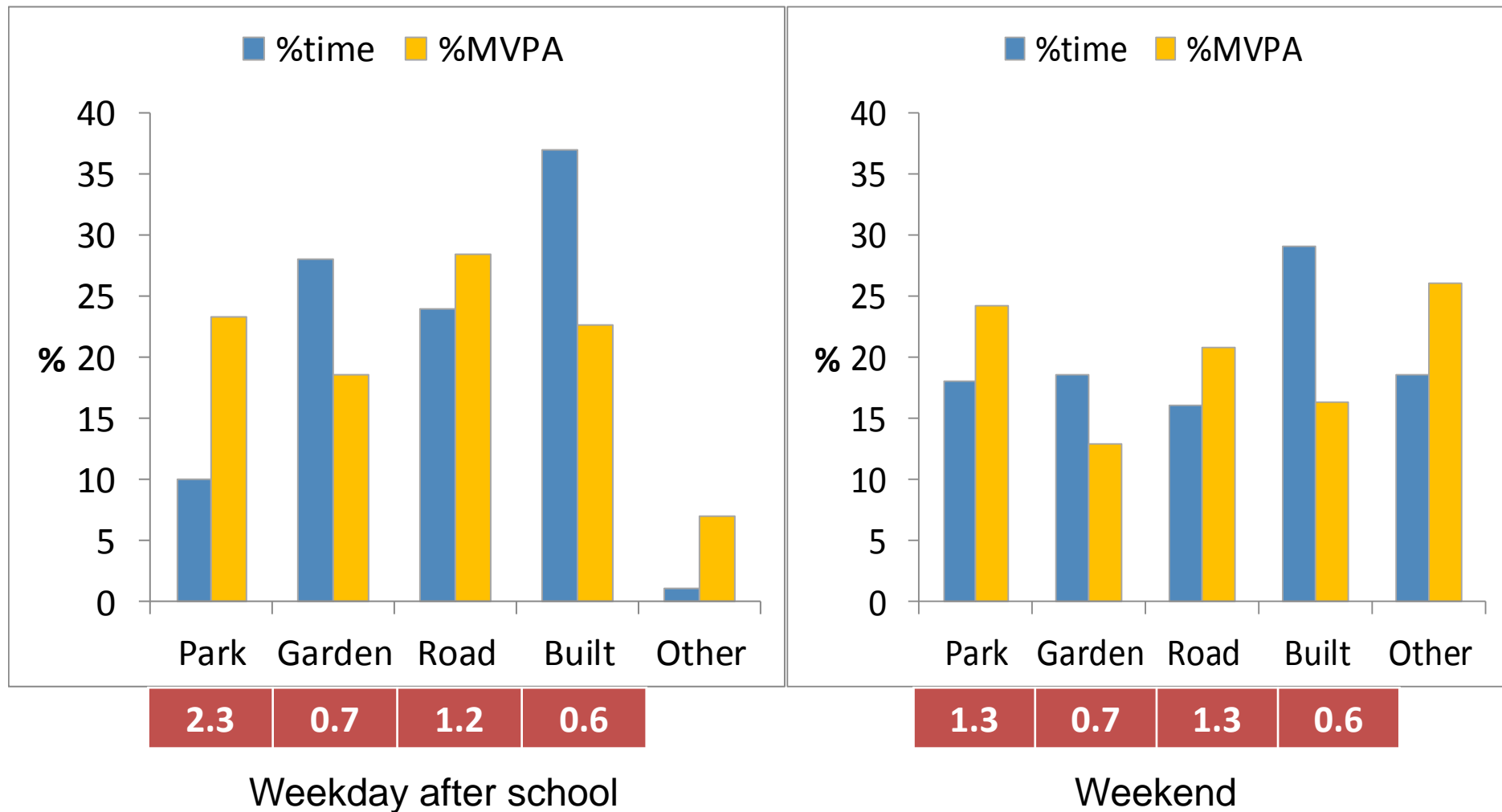
Where do secondary school children spend time outdoors?



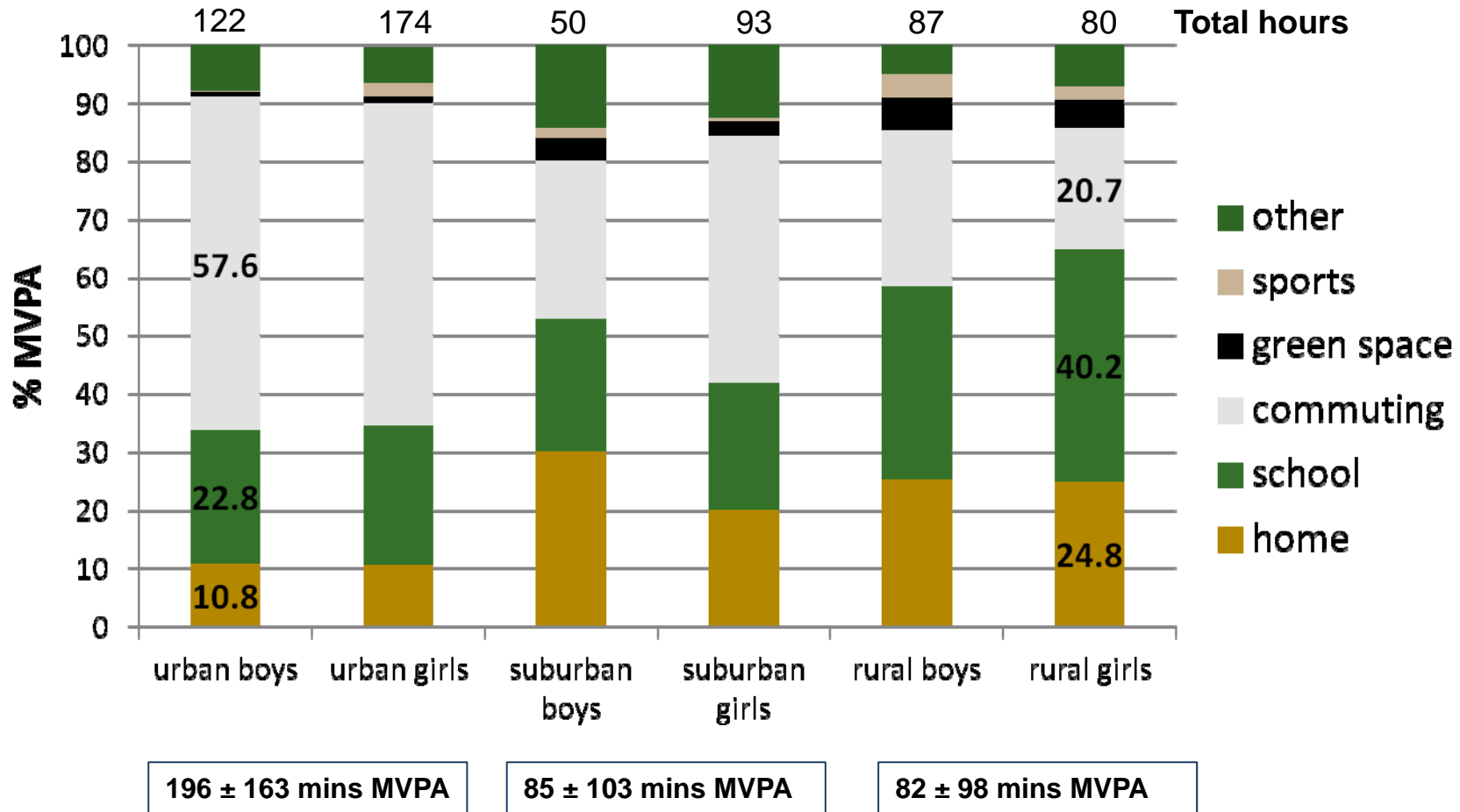
Weekday: 31minutes outdoors each day (3pm-10pm)

Weekend: 52 minutes outdoors each day (8am-10pm)

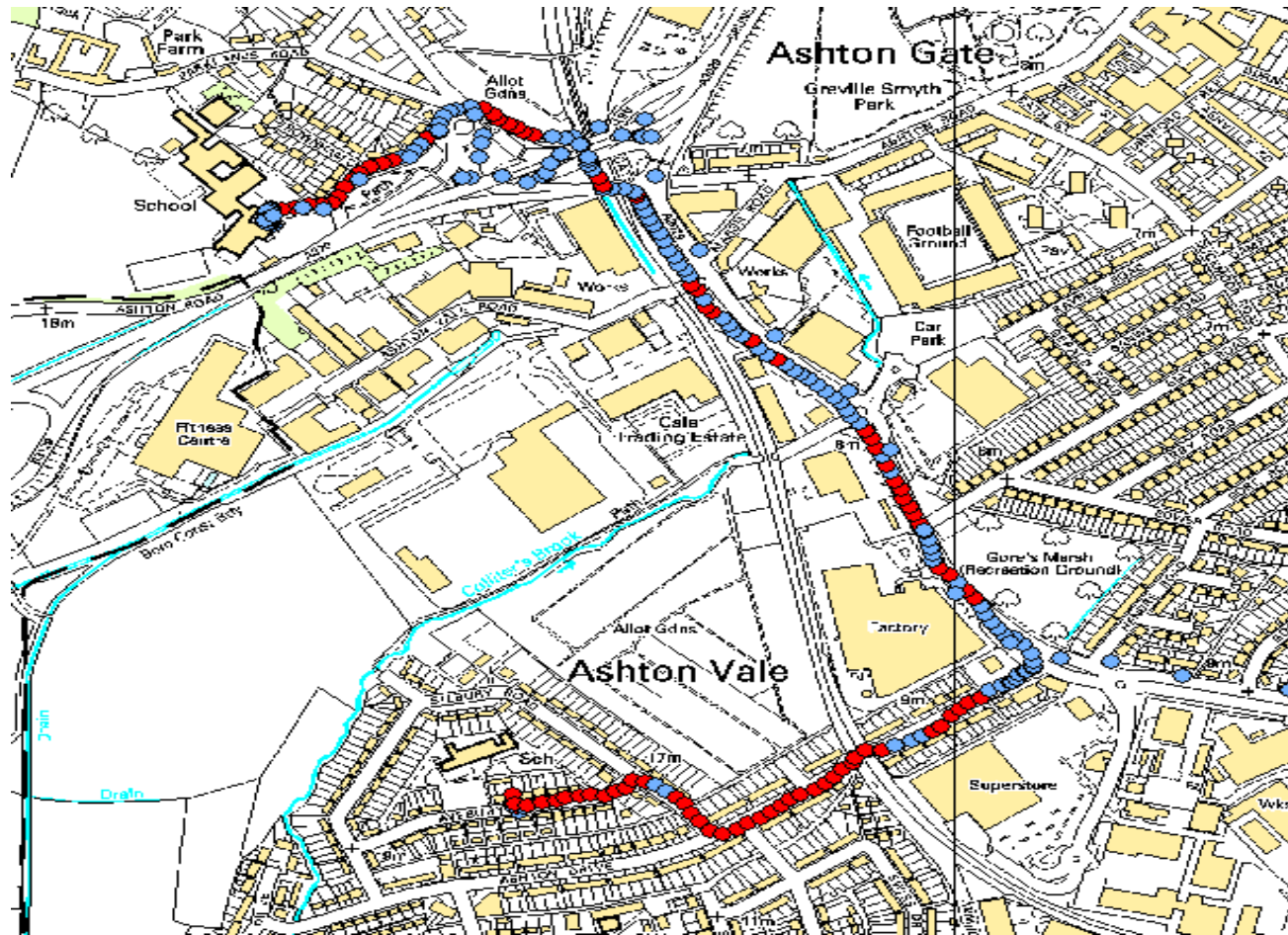
MVPA in different locations



Where is MVPA acquired?

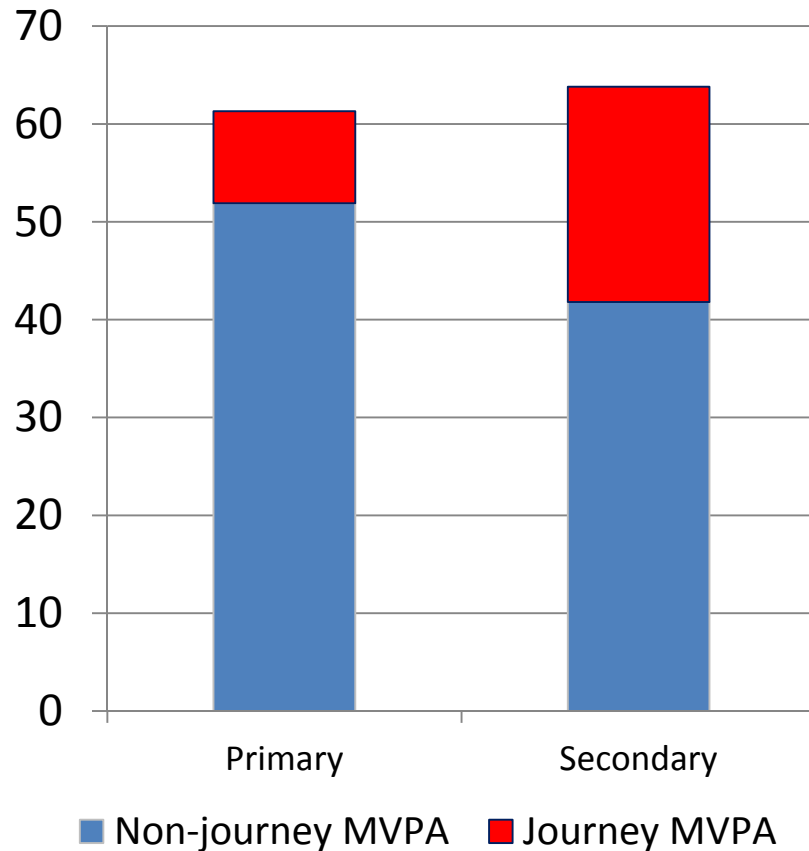


Quantifying MVPA due to the walk to and from school



Southward et al. (2012) AJPM 43(2): 201-204

Quantifying MVPA due to the walk to and from school



- The round journey contributes ~9.4 (15%) and ~22 (34.5%) minutes of MVPA each day in primary/secondary school
- This is the same for boys and girls, thus makes a greater contribution to total MVPA for girls

Influence of traffic

Is traffic density near homes associated with increase in BMI?

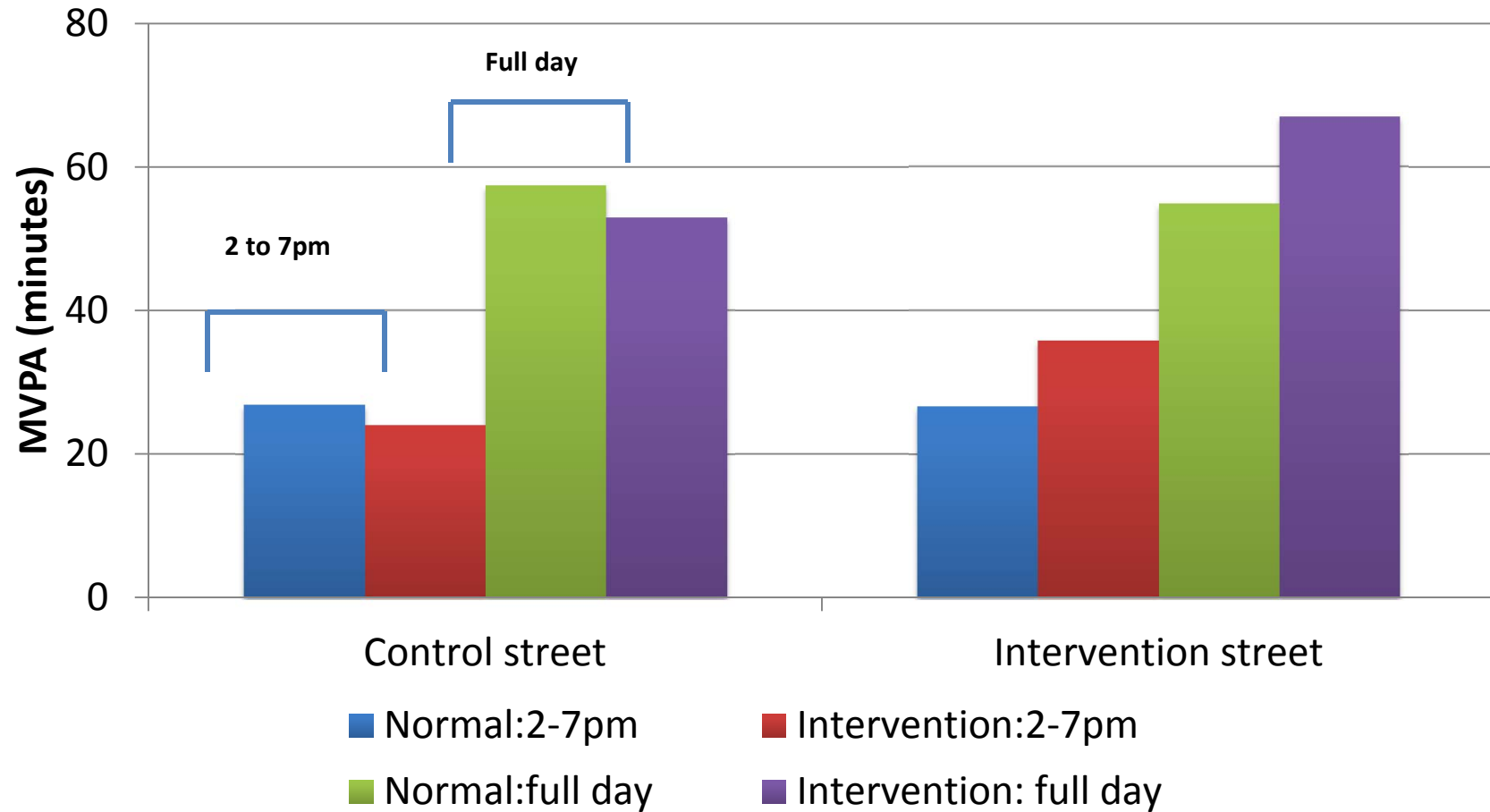
- 3318 recruited at 9-10 years, followed for 8 years
- Traffic density near the home related to gain in BMI



- ◆ Environment that inhibits physical activity
- ◆ Dominance of cars (moving and parked)
- ◆ Increased perceived & actual risk – increased anxiety
- ◆ Reduction in play/travel space
- ◆ Fewer children to play with
- ◆ Less time outdoors
- ◆ Lower physical activity

Jerrett et al., Prev Med 2010,50:S50-S58

Ghent Play Streets (237,000 people)



Summary

- Relatively little time was spent outside but children are substantially more active when outdoors than indoors
- Children are consistently more active in greenspaces than other outdoor locations
- Both hard and green spaces are locations for physical activity – relative usage varies by weekday/weekend, urban/rural
- Active travel is the major contributor to youth MVPA
- Temporary street play closures may be a way to encourage playing outside and to increase physical activity



The Place Standard Tool

Douglas White, Head of Advocacy

100 years focus on “Wellbeing”



“ Since its creation by Andrew Carnegie in 1913, the Trust has worked with many partners in the UK and Ireland to help build our modern society – promoting policy change, creating new organisations, and supporting innovative practice. The 21st century brings new technological, cultural, economic and social changes, but the underlying purpose of the Trust – to promote the wellbeing of the people of the UK and Ireland – continues to underpin all our work. ”

Carnegie UK Trust, health and public space



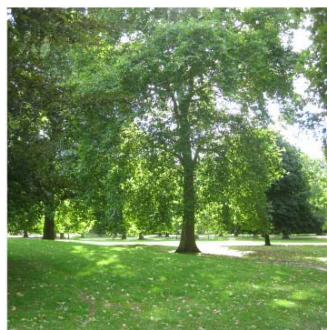
Tackling Incivilities: Pride in Place

2012

Carnegie Prize for Design and Wellbeing

2014

Carnegie UK Trust, health and public space



Finding and Protecting the Carnegie Playing Fields
2014 Pilot Project – 2015 Final Report

The Place Standard: place and health

- Scottish Government, NHS Health Scotland and Architecture and Design Scotland initiative

Aim: to support the delivery of high quality public spaces

Who it is for: communities, public sector, third sector and the private sector

Area: allows different sizes and types of places to be assessed

Piloting the Place Standard Tool



Content: whether the tool includes the correct topics and issues

Function: how easy the tool is to use

Use: the ideas and outcomes generated by participants while using the tool

Auchencairn Link-Park, Dumfries and Galloway



Feedback:

Improve rural prompts

Remove duplication

Zero on scale could
misrepresent non-
responses

Belville Community Garden, Greenock



Feedback:

Importance of reputation

More seats would improve social interaction among older people

Crossing would improve access to the garden for younger children

Helpful for future funding applications

Make Your Move Kirkcaldy, Pathhead Primary School, Kirkcaldy



Feedback:

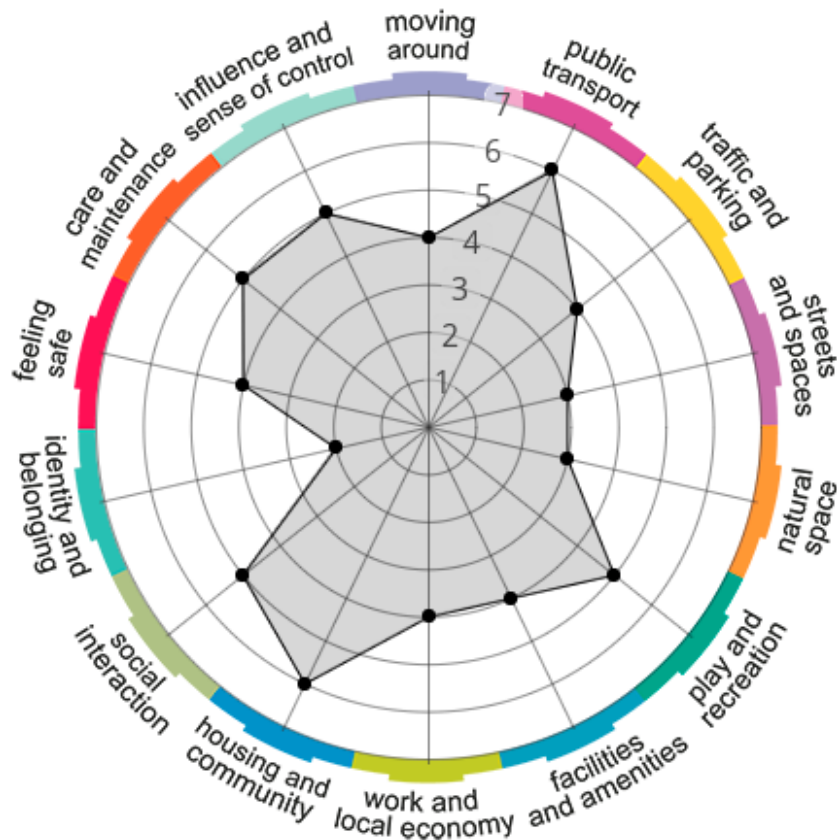
Noise pollution from traffic

Sufficiently aspirational?

Improve opportunities for social
interaction

*'We would probably have
eventually reached the same set
of actions but would have done
so in a more planned way'*

The final Place Standard Tool



Physical and online

Individual or group

14 questions covering physical and social structures

Scale of 1-7

Next Steps

Embedding in policy,
planning and
legislation

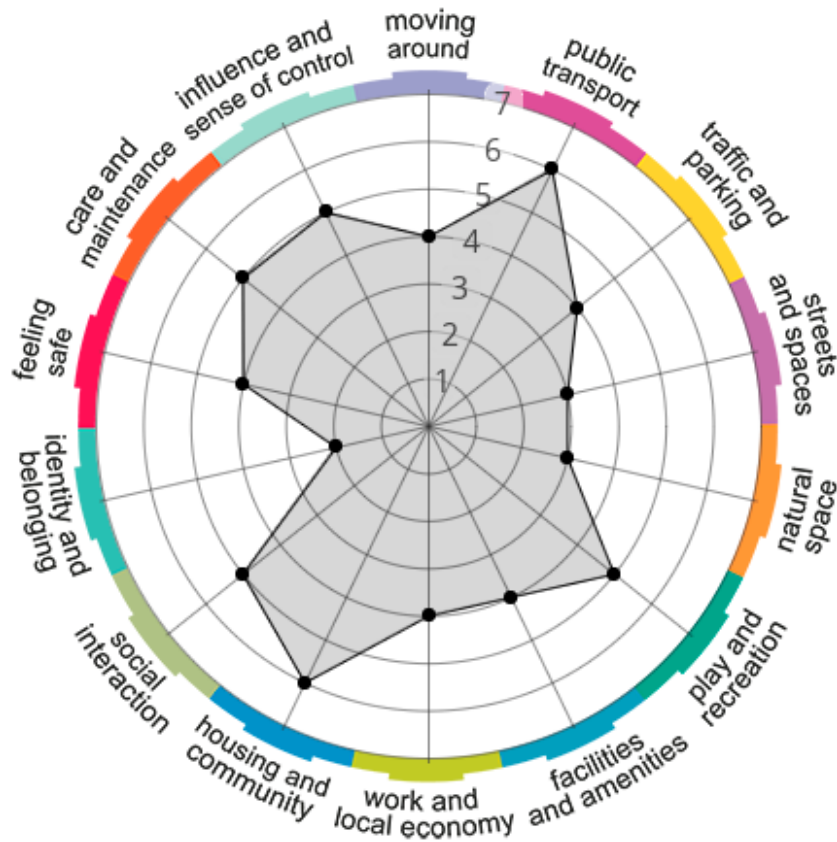
Awareness raising

Workforce
development

Evidence sharing



Try it!



<http://www.placestandard.scot/#/tool/start>

Discussion



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Web: <http://www.carnegieuktrust.org.uk>

FUSE – ESRC seminar “Reuniting Planning and Health”
7 April 2016, Newcastle-upon-Tyne

National and local initiatives for closer working between planning and health

Dr Laurence Carmichael

Head, WHO Collaborating Centre for Healthy Urban Environments
UWE, Bristol

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www.uwe.ac.uk/research/who



University of the
West of England

bettertogether

Health challenges ahead



"We're launching a campaign to get people to take up smoking again!"



Built environment, healthy environment and healthy behaviour

Reproduced by kind permission of Private Eye magazine/John



(Townshend, 2016)



SENSEable City Lab, MIT

Planning challenges ahead



Reproduced by kind permission of Private Eye magazine/Martin Honeysett



Incorporating health in land use plans and development decisions

National Planning Policy Framework (DCLG 2012):

- the planning system must create healthy communities
 - **local planning authorities must work with public health colleagues to develop robust evidence that addresses barriers to improving future health and well-being.**
 - Viability test: *Plan makers should consider the range of costs on development. This can include costs imposed through **national and local standards, local policies and the Community Infrastructure Levy. Their cumulative cost should not cause development types or strategic sites to be unviable.** Emerging policy requirements may need to be **adjusted** to ensure that the plan is able to deliver sustainable development (DCLG, 2014).*
-

Best practice in England to integrate health in planning (pre 2012 research)

Best practice in England depends not so much on the planning system per se, as on:

- leadership
- commitment
- knowledge of politicians and practitioners involved.

The barriers to health integration:

- organizational and professional silos, ignorance, resources
- reactive planning regime

(Carmichael et al., 2013)

Lessons for practice

1. **Planning agencies need to forge good partnerships with public health, transport, housing and economic development decision- makers, and develop proactive, healthy plans;**
2. **Design criteria** could offer more comprehensive guidance to plan healthy developments;
3. The **annual monitoring** of progress against a wide range of indicators in the English planning system has offered so far an important mechanism for promoting healthier environments.

(Carmichael et al., 2013)

What direction for healthy planning?

- Restrictive planning policies: e.g. fast food takeaways?
 - Finance: health cost of bad urban design, finance/viability of the land?
 - Design: innovation, learning from good practice, co-benefit?
 - Multi-level strategies: regional/local?
 - Assessing potential health effects of plans and projects: HIA?
 - Education of planners: shared knowledge base with public health?
 - **Partnerships: closer working between planning and health at all levels?**
-



How to promote closer working between planning and health? National policy examples

- ✓ NPPF/ Health and Social Care (England, 2012)
 - ✓ National Urban Policy (Commonwealth of Australia, 2011): liveable cities, healthy planning
 - ✓ Health in all policies (South Australia): safe communities, healthy neighbourhoods, HIA methods
 - ✓ Planning legislation: integrating health as a planning objective (NSW)
-

How to promote closer working between planning and health? Government agencies

- ✓ NHS England, Five Year Forward View (2014): improve population health within context of 200,000 new homes every year
 - ✓ Healthy New Towns programme: 10 demonstrator sites, strong health/planning partnerships with vision and priorities
 - ✓ Public Health England: developing place-based approaches to improve health outcomes and address wider determinants of health, tackle childhood obesity, promote integration of public health into planning strategies and teams.
-

How to promote closer working between planning and health ? Non government sector

- ✓ National Health Foundation of Australia: Healthy by Design Guidelines 2004
 - ✓ Planning Institute of Australia: Healthy Spaces and Places 2009
 - ✓ The Cancer Council of Australia (eg shade guidelines)
 - ✓ Faculty of Public Health and Royal Town Planning Institute (Joint statement on joint training)
 - ✓ Design Council, TCPA...
 - ✓ WHO Healthy Cities programme and WHO guidelines (eg HIA)
 - ✓ Wellcome Trust's Our Planet Our Health funding programme
-

How to promote closer working between planning and health ? Local level

- ✓ Healthy planning indicators in annual monitoring (England)
 - ✓ Joining WHO Healthy Cities (Belfast, Stoke-on-Trent): strategic partnerships, shared learning
 - ✓ Development of health action zones (housing transport and economic units as well as health and planning) (Belfast)
 - ✓ Preparation of best practice guidelines, policies (SPD design, hot food takeaway, HIA) (Bristol, South Glos, Stoke-on-Trent)
 - ✓ Embedding of public health expertise in planning units and of planning in public health units /joint appointment
-

How to promote closer working between planning and health? Local level

- Planning for wellbeing and quality of life, integration between transport and spatial planning (Kuopio)
 - Health integrated planning network(WMHPG): shared learning/issues
 - City influence/authority over land ownership, infrastructure provision and the detailed pattern of development (Freiburg)
 - Leadership/Community engagement
 - Diversity of private, community, market and social housing development (Freiburg)
-

How to promote closer working between planning and health? Local level

	Local (Spatial) Plan development	Development management
Role of local public health teams	<p>Work with planners to advise on drafting of Local Plans and policies on how to maximise health gain (for example promote active travel; access to green space; etc). Work with local NHS to ensure NHS infrastructure requirements are identified</p> <p>Ensure that appropriate references are made in plans from other statutory local (health) strategies – Joint Health and Wellbeing Strategy</p> <p>Undertake a Health Impact Assessment on the emerging policies and plan</p> <p>Support planners to prepare for/present evidence at an examination in public</p>	<p>Work with planners (and developers) – especially at pre-application stage to influence emerging masterplan designs to ensure key local health issues are addressed, and outline requirements for section 106/CIL to support health and health infrastructure requirements</p> <p>Assess or prepare a Health Impact Assessment</p> <p>Support local planners in any planning appeals which may arise</p>
Public Health England (PHE)	<p>Work with local public health teams to advise and support (usually at PHE Centre level and only if requested)</p> <p>Provide national guidance and support (for example Obesity and the Environment briefings)</p>	<p>Work with local public health teams to advise and support (usually at PHE Centre level and only if requested)</p>

Fig. 1 An overview of public health involvement in planning

Source: Public Health England's Healthy People, Healthy Places programme

References

- Carmichael, L., Barton, H., Gray, S. and Lease, H. (2013) Health-integrated planning at the local level in England: Impediments and opportunities. *Land Use Policy*, 31. pp. 259-266. ISSN 0264-8377 Available from: <http://eprints.uwe.ac.uk/17002>
 - Townshend, T. (2016): Toxic high streets, *Journal of Urban Design*, DOI: 10.1080/13574809.2015.1106916 available from: <http://dx.doi.org/10.1080/13574809.2015.1106916>
 - Barton, H., Thompson, S., Burgess, S. and Grant, M (2015). *The Routledge Handbook of Planning for Health and Well-Being*, London: Routledge.
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FUSE

Reuniting Planning and Health

7th April 2016



NW Bicester

Case Study for NHS Healthy New Towns prospectus

FARRELLS

Gary Young - RIBA

- Partner of Farrells - architects urban planners.
- 35 years contribution to urban design with Sir Terry Farrell
- Advising NHS for Healthy New Towns prospectus.
- Panel member with NHS at Innovate Expo October 2015.
- Leads NW Bicester - shortlisted for NHS Healthy New Towns.

FARRELLS

Why Healthy New Towns– a question?

- Why are new towns needed to make a difference to health when traditional towns have housing, close to shops, play areas sports fields etc?
- The reasons for obesity are known – how will new towns make a difference?
- The NHS are stretched and do not have time to get involved in planning homes?



Shelagh Fogarty & Gary Young



Healthy New Towns
01 March 2016



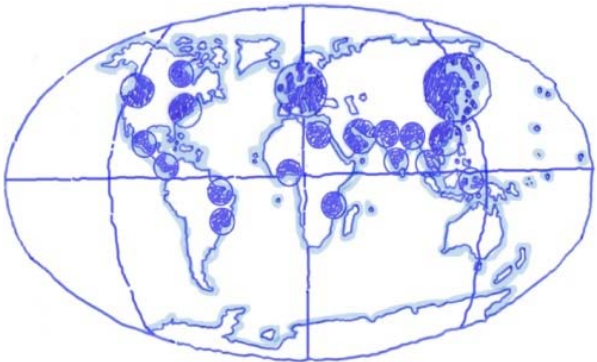
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BY 2050 THE UK COULD HAVE EUROPE'S LARGEST POPULATION

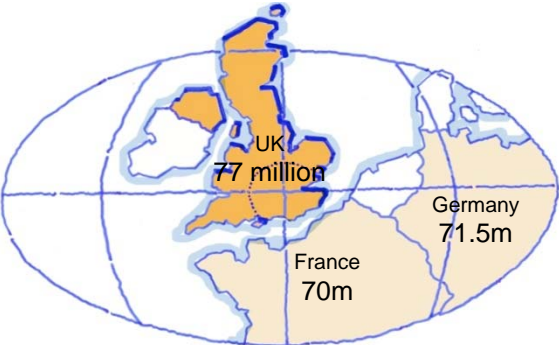
Needing 6,000,000 new homes!

By 2050...

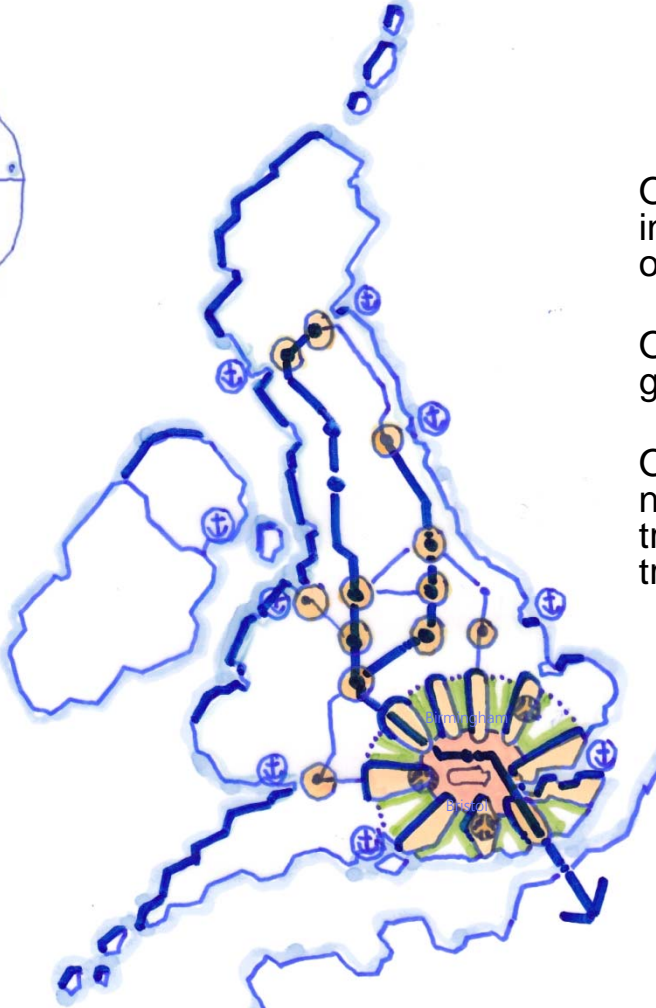
...we must capitalise on the success of our major cities



70% of the world's population will live in cities – about 6.75bn out of almost 10bn...



... and the UK's population will be Europe's largest



Our cities are becoming increasingly desirable places offering an urban way of life

Our cities are willing and able to grow

Our metropolitan, regional and national infrastructure is being transformed to support transformational growth

An ideal settlement size for healthy places?

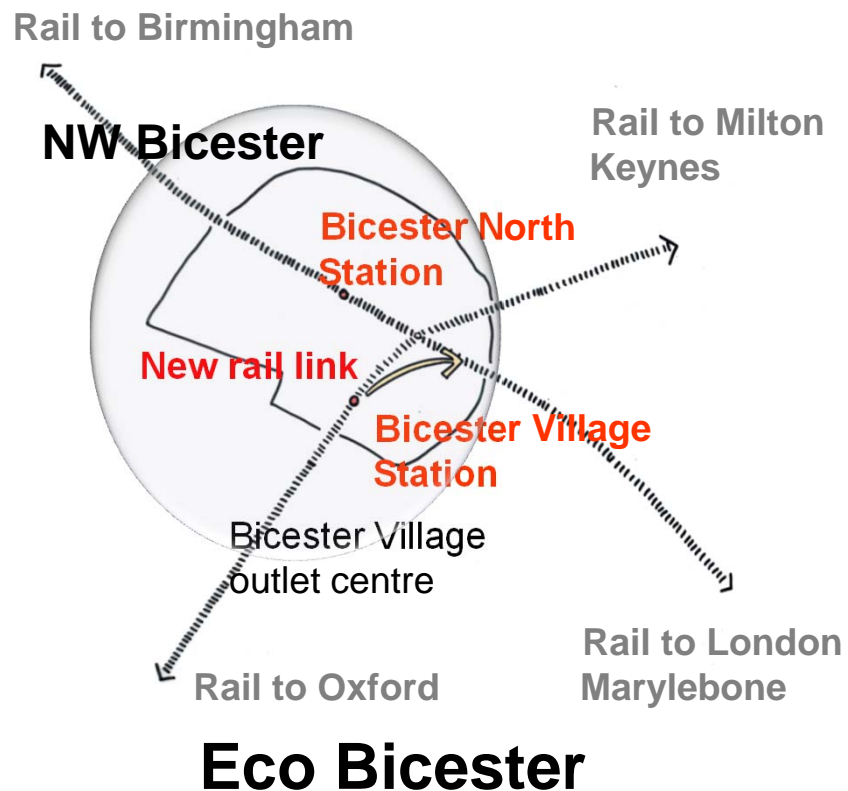
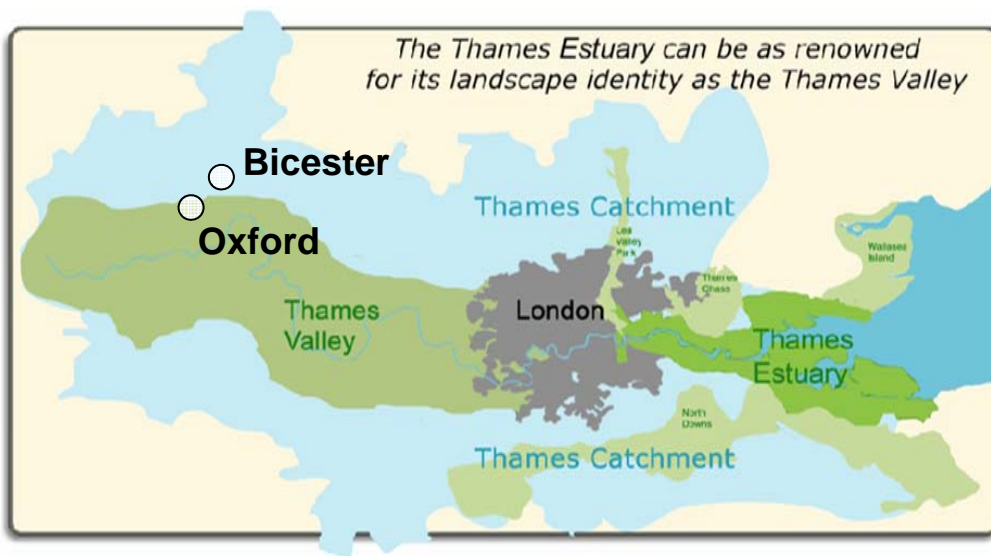
Many factors influence sustainable travel and healthy places:

- National Travel Survey analysis shows that settlements with a population of 25,000 have shorter annual travel distances and lower car mode shares than average: with more short trips, allow healthier travel options such as walking and cycling.
- http://www.plan4sustainabletravel.org/key_themes/settlement_size/
- Larger settlements provide opportunity for self-containment and mix of uses offering access to a range of shops, services and employment: reducing the need for inter-urban travel, increasing the likelihood of residents finding jobs and utilising facilities, of services drawing their employees and customers, from within the same urban area.

Bicester: A location for a sustainable and healthy place



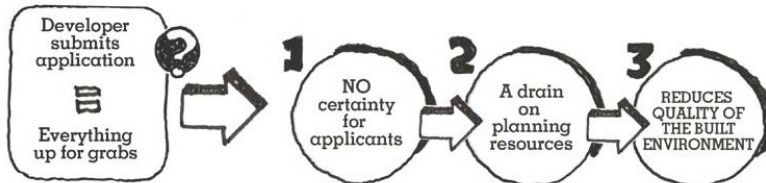
- Population of 30k will expand to 50k over 20 years
- Build on existing rail infrastructure and networks
- Design in choice to reduce reliance on the private car
- Create a network of paths and cycle routes
- Make Bicester the best place on 2 wheels



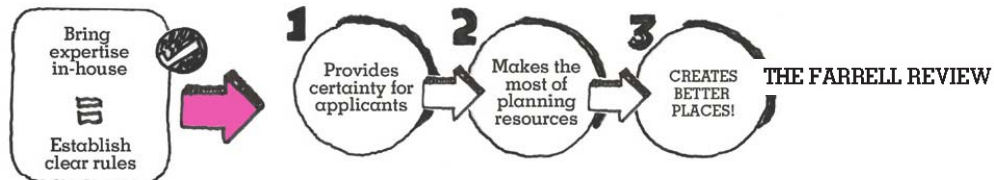
The Farrell Review – Proactive Planning

Free up resources by deciding more in advance

From the current system...



To a proactive system!!



THE FARRELL REVIEW

“Removing barriers at the national level, by coordinating between government departments and escalating problems to the right decision-makers”.

Source: NHS England

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NHS Healthy New Towns: Vision

Putting health at the heart of our new neighbourhoods and town. Future-proofing our new communities for the health and care challenges of this new century – obesity, dementia, new models of digital health, by designing in health and modern care from the outset.

Source: NHS England

NHS Healthy New Towns: Objectives

- Develop new and more effective ways of shaping new towns, neighbourhoods and strong communities that promote health and wellbeing, prevent illness and keep people independent;
- Show what is possible when we radically rethink how health and care services could be delivered, freed from the legacy constraints that operate in other areas.

Source: NHS England

NHS Healthy New Towns: Objectives

- Accomplish these objectives in a way that can be replicated elsewhere, making learning available to other national programmes as well as other local areas.
- Add to the learning about how health and care services could be integrated to provide better outcomes at the same or lower cost;

Source: NHS England

NHS Healthy New Towns: Aims

To shape the built environment for future population growth:

- Building healthier homes and environments that support independence at all stages of life
- Tackling unhealthy (and “obesogenic”) environments by creating walkable neighbourhoods
- Creating connected neighbourhoods, strong communities and inclusive public spaces that enable people of all ages and abilities from all backgrounds to mix.

Source: NHS England

NHS Healthy New Towns: Aims

To shape the built environment for future population growth:

- Designing healthy workplaces, schools and leisure facilities
- Digitally-enabled ‘smart’ towns and neighbourhoods
- “Triple integration” between primary and secondary care, mental and physical health, and health and social care.

Source: NHS England

NHS Healthy New Towns: Benefits

To be developed in partnership

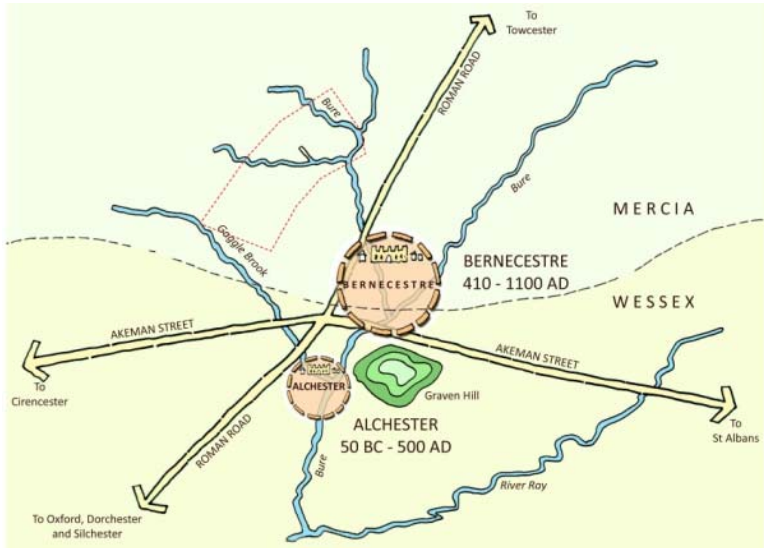
- Bringing delivery partners together,
- Creating strong local working relationships
- Facilitating access between designers and innovators,
- Providing sophisticated analysis and modelling of population characteristics,
- Helping local areas redesign their care model,
- Promoting peer networks,
- Supporting effective evaluation.

Source: NHS England

NW Bicester –case study for NHS Healthy New Towns

- NW Bicester was selected in March 2016 by the NHS for the Healthy New Town initiatives.
- The NW Bicester masterplan by developer A2 Dominion will deliver 6000 homes and key strategic infrastructure.
- Part of wider Eco Bicester and Garden Town delivering 13,000 homes in Cherwell District Council over the next 20 years.
- The completed exemplar phase will have residents in occupation this year, the only UK development built to True Zero Carbon.

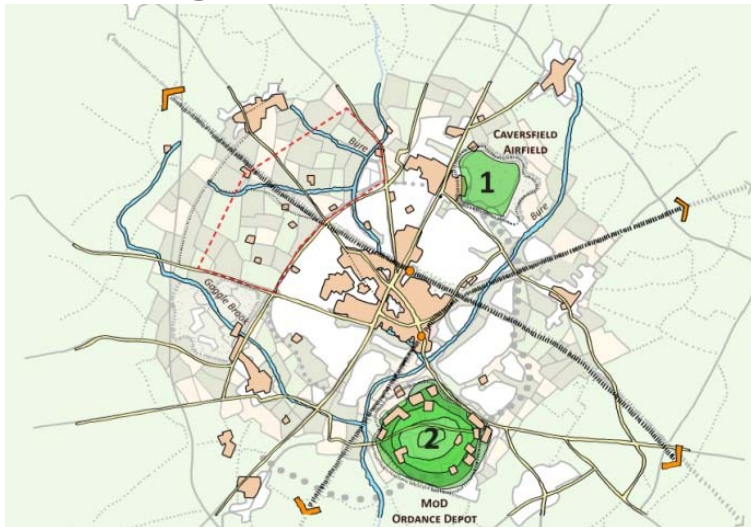
Bicester: a place shaped by history



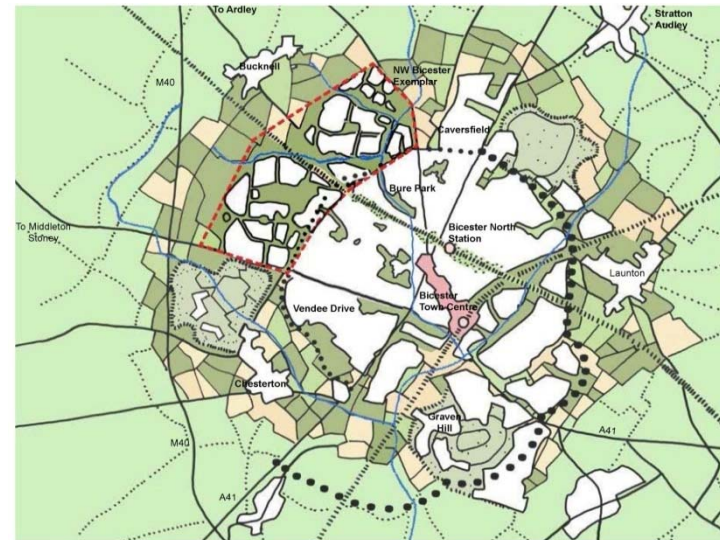
Two kingdoms & forts AD 50-1100



Two manors and traditions 900-1800



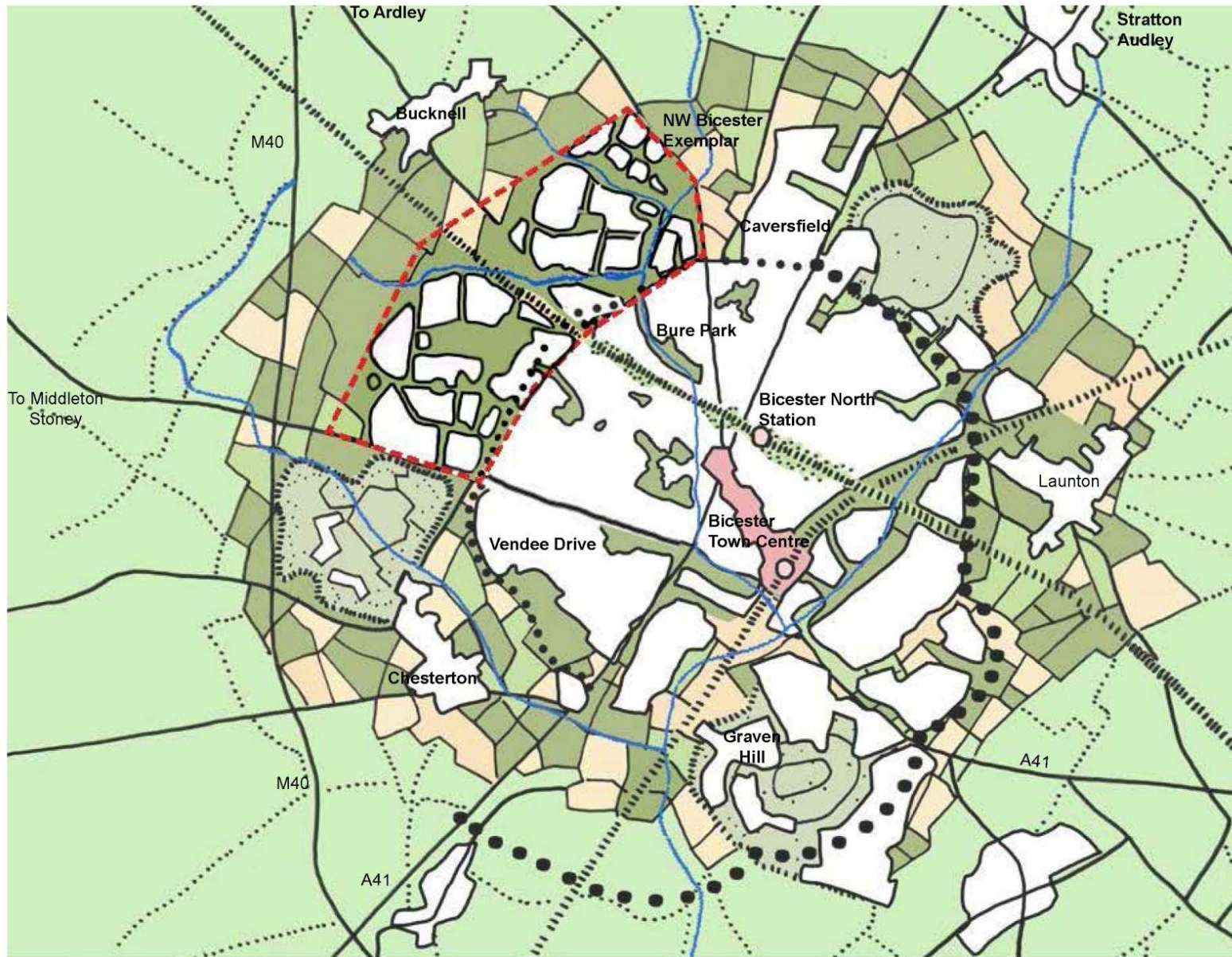
Two railways, military bases 1830-1960



Two places rural and urban

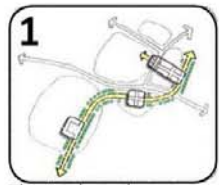
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NW Bicester and Eco Bicester make one place



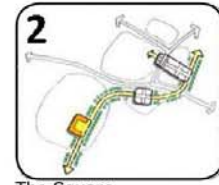
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NW Bicester place making concept - 4 urban & 4 green places



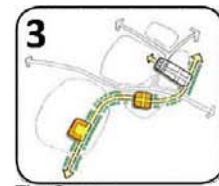
The Boulevard

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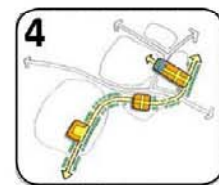
The Square

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The Square

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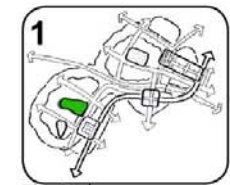


The High Street

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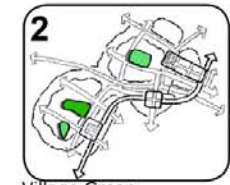


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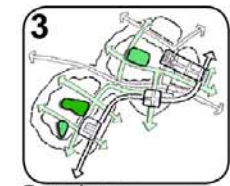
The Park

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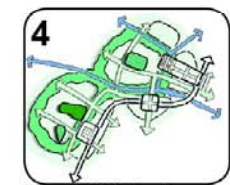
Village Green

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Green Lanes

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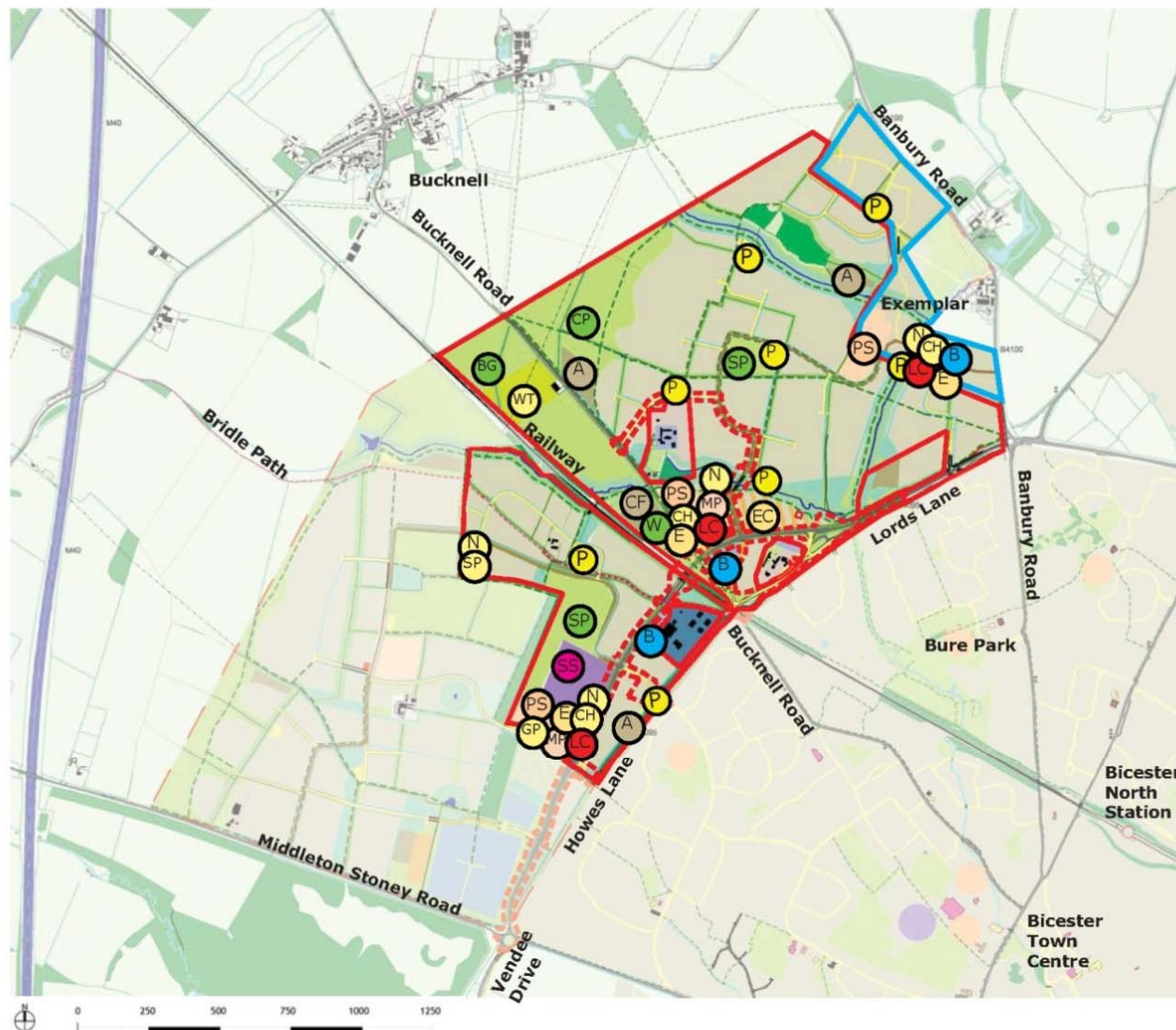


Nature & Water Loop

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NW Bicester masterplan - phased infrastructure delivery

- Exemplar
- Application 1 & 2
- - - Strategic Road
- Housing
- Green space
- EC Extra care apartments
- PS Primary schools
- EC Local centre
- MP Public square market place
- B Employment business
- E Energy Centre
- GP A GP practice
- N Nursery
- CH Community Hall
- P Play areas
- W Place of worship
- CP Country Park
- SP Sports Pitch
- BG Burial Ground
- CF Community Farm
- A Allotments
- WT Water treatment
- SP Sports pavilion



NW Bicester Exemplar, Applications 1 and 2 & Strategic Road

FARRELLS

FARRELLS

NW Bicester – exemplar first phase



FARRELLS

NW Bicester will provides choices, not one solution:

- NW Bicester has been designed to promote warm and comfortable homes, active lifestyles, social activity and internet connectivity.
- Residents are given the opportunity to learn how to participate in healthy living together.
- Monitoring is already required by planning consent from which the success of measures can be derived
- Alternative transport choices such as cycling, buses are made available and convenient for residents to choose.
- Education initiatives and events already promote sustainable lifestyles, build community spirit, skills transfer & volunteering.

NW Bicester - awarded Bioregional One Planet Living status

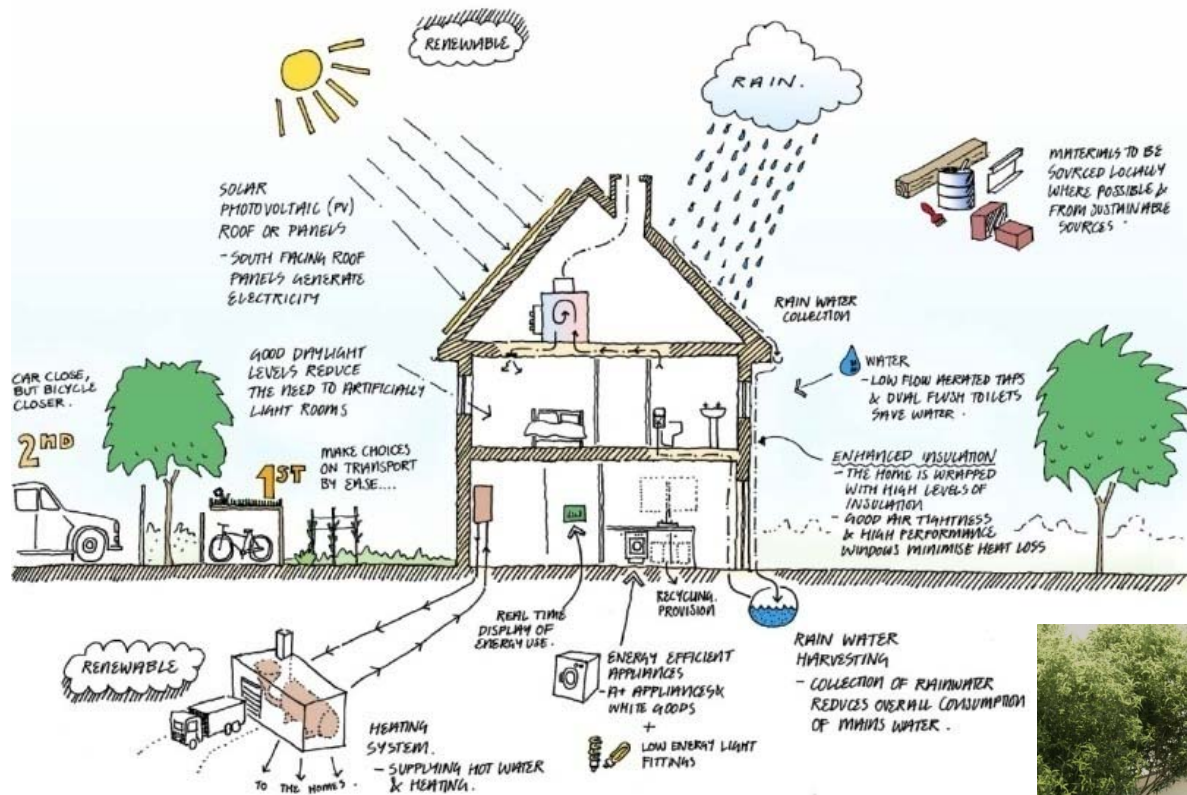


FARRELLS

NW Bicester has already planned for smart home technology:

- 100mbps fibre optic broadband connection is provided to all homes with a “Shimmy” home tablet information system to provide residents with:
 - real time energy use information,
 - videos explaining how to use the technologies within their home,
 - community-related information such as live bus status, car club availability, events and news.
 - Homes with separate office space or attic with trusses and permitted development rights to enable office conversions to facilitate home working.

NW Bicester: homes achieving true zero carbon....



- True zero carbon and energy efficient design will be achieved with:
- External appearance will be traditional and contextual familiar to the housing market
- The house designs will be the work of many hands.

- Lifetime Homes silver with high Speed broadband access to real time information & public transport
- Energy centres with CHP gas combined with PV solar to achieve true zero carbon code level 5



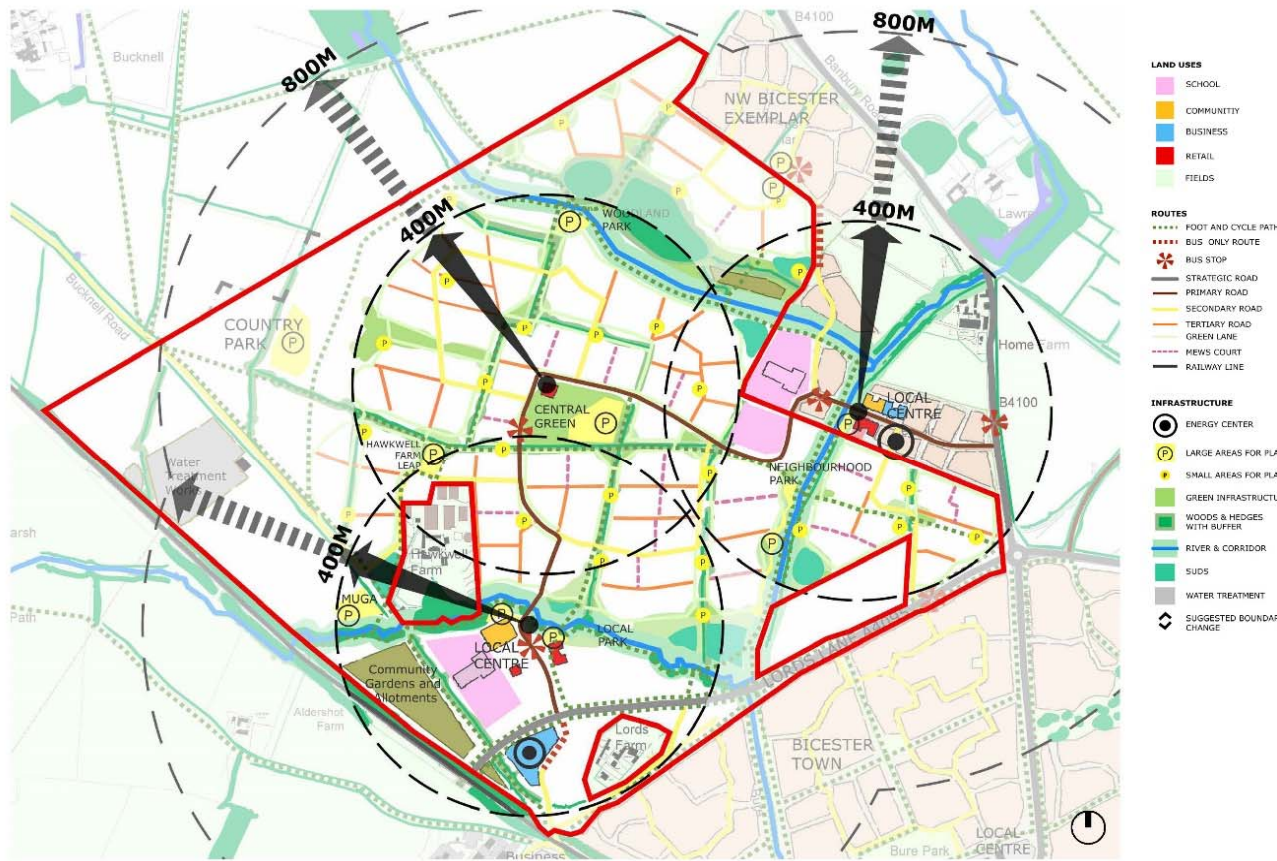
Roof design and orientation to maximises pv solar

FARRELLS

NW Bicester is planned to create housing in walkable neighbourhoods:

- Providing a healthy choice of lifestyle for residents.
- Locating services, shops close to homes.
- A network of good walking and cycling routes,
- Accessible to frequent public transport.
- Bus stops within 400m of all homes.
- Real time bus information accessible from homes.
- Automated external defibrillators at every bus stop combined with awareness raising, and training for residents.
- Networked homes enabling residents to participate in communal activities.

NW Bicester – homes in walkable neighbourhoods



NW Bicester Application 1, North of Lords Lane - Urban Design Framework
 App1 UDF 004 Neighbourhood Walkability 02-10-2015

- All homes within 800m 10 mins walk of community services
- All homes within 400m 5 mins walk to bus stops
- Creating communities with resilience & interdependency across all age groups
- Routes giving priority to cycling and walking over cars

NW Bicester will be planned for cycling as sustainable transport and promoting a healthy lifestyle:

- Segregated walking and cycling provision connecting into the existing towns network providing safe and direct routes.
- Secure cycle stores with every home.
- Bike loan schemes.
- Bike fixing workshops to educate residents around maintenance and safety checks etc.
- Bicester has a relatively flat topography with great potential for cycling.

NW Bicester – New urban boulevard with segregated cycling



The strategic link road improves on the standards for a local distributor road with generous segregated provision for pedestrians and cyclists on both sides, providing safe routes with signalled crossings of the route at each of the junctions along the new Link Road.



- provide an improved route under the railway
- make Bicester the best place on 2 wheels
- Reduce reliance on the private car
- Create a network of paths and cycle routes
- Build on existing infrastructure
- Make a pedestrian priority public realm
- Connect the town and surrounding communities together

FARRELLS

NW Bicester will be planned for outdoor healthy living

- 40% green space incorporating active leisure a mix of:
- Parks, play areas, ponds, swales, river corridors, village green, nature reserve, fitness trail etc.,
- Community allotments and orchards promoting 'grow your own' ethos and healthy eating.
- Design of community streets incorporating use of different material and colours in the public realm communal seating, decked areas, herb boxes and a community BBQ
- Children's play close to homes encourages play outdoors,
- Bringing neighbours together to build cohesion.

NW Bicester & Healthy lifestyle and green Infrastructure

- 40% green infrastructure
- 20% public open space
- Green infrastructure linked to the wider countryside.
- Retains existing hedgerows and stream corridor assets
- Enhanced with buffers to create new habitats.
- Streets are designed for people with extensive use of homezone edible planting.
- Soil resources are reused
- Allotments and community farm created for local food production.



..net biodiversity gain and community green space

FARRELLS

NW Bicester has already planned for climate change:

- Homes adaptable to climate change 2050 conditions with solutions to overheating such as:
- Homes and window orientated to minimise extremes of solar exposure.
- Increased room heights to aid natural ventilation.
- Windows enabled to retro fit solar shading.

NW Bicester – innovation and climate change adaptation

NW Bicester team with Oxford Brooks have produced a Technology Strategy Board Design for Future Climate adaption strategy considering:

❑ Higher summer temperature impacts on comfort levels and health risks:

- Using reflective external surfaces
- External shutters & opening windows
- Heavyweight external & internal build

❑ Changing rainfall patterns and higher intensity storm events:

- Developing outside flood risk areas including rainwater harvesting, SUDS and integrating significant quantities of trees and planting in landscape



Reflective & fixed horizontal shading



NW Bicester ideas for NHS Healthy New Towns

- A2 Dominion has a track record as social provider and Local management expertise to enable better community interaction and understanding with residents and service providers.
- Testing design and flexibility of healthier homes and ways to enable people to remain in their homes independently for longer and communicating the benefits and value of lifetime homes standards.
- Using devices such as the Shimmy to trail and test new ways of working and delivering health services with a digitally enabled community, e.g. post operation care.

- **NW Bicester ideas for NHS Healthy New Towns**
- Sharing information which will be tailored to suit NHS providers in an evolving living project with occupants moving in already this year.
- Evolving and adapting the home “Shimmy” will provide the data for understanding the beneficial effects of housing and the neighbourhood on the health of residents.
- Championing the importance of automated external defibrillators in public spaces encouraging policy makers to include ‘ heartsafe ’ as part of building regulations.
- Design of public buildings and spaces to promote mental health and well-being, e.g. use of colours for dementia, sensory, reflection herb gardens.

Eco Bicester Living lab

- An umbrella initiative for all projects in Bicester that:
 - introduce academic rigour and
 - contribute to delivery of the Eco Bicester Vision

Post occupancy performance

- Monitoring
 - Energy, water, waste, travel, biodiversity, jobs created, happiness etc
- PhD studentship co-sponsored by:
 - Oxford Brookes, Bioregional, Cherwell, A2Dominion

Bioregional One Planet Community



Activities of Eco Bicester Living Lab

- Dedicated website for knowledge-sharing
- Showcase publications, monitoring results and learning from the Living Lab case studies
- Annual dissemination event on cross-cutting themes
- Host Knowledge Transfer Partnerships
- Offer student research projects at a PhD level
- Act as launch pad for new research and innovation projects for which we welcome new partners.
- Secure external funding for future
- Host key study days of relevance to partners working in Bicester
- Facilitate cross fertilisation of knowledge and experience between business, academia, social enterprise and community action.



- Promote Bicester as a centre for excellence in research and innovation.
- Develop a test-bed of innovative solutions in sustainability at all scales.
- Provide rigorous academic evaluation of sustainability initiatives in Bicester.
- Capture learning for continuous feedback and improvement.
- Enable knowledge sharing with industry, policy-making and voluntary sectors.

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FARRELLS



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NHS
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Iechyd Cyhoeddus
Cymru
Public Health
Wales



WHIASU

Wales Health Impact
Assessment Support Unit

Uned Gymorth Asesu
Effaith ar Iechyd Cymru

ESRC Seminar Series

Seminar 4 – Reuniting Planning and Health

Examples of Health Impact Assessment Application in Wales

Presenter–

Lee Parry-Williams - Wales Health Impact Assessment
Support Unit, Public Health Wales

HIA Integration into Planning

- Welsh Context
- Approach taken to gain implementation
- Case studies

Welsh Context - Wales has a devolved Government which has placed emphasis on:

- Health & Wellbeing
 - Addressing inequalities within the population
 - Sustainable Development
 - Citizen centered public services
 - Partnership working
 - Integrated agenda
-
- Adoption of a Health in All Policies approach
 - WG places emphasis on best practice to consider H&WB specifically in non-health domains

Welsh Approach to gain implementation of HIA while still not statutory

- Maximising the leverage through National Policy
- Advocacy and influencing
- Research and resources
- Training and awareness raising
- Practical application

National Policy Level - Not Statutory but Levers

- **Planning Bill and Planning Policy Wales (PPW)**
– LDPs – LDP Guidance states that ‘the several impacts of plans upon health and its determinants should be considered’.
- **Active Travel Act and Welsh Transport Appraisal Guidance (WeITAG) (2008)** - extension Active Travel Plan 2016 – HIA is mandatory within WeITAG
- **Wales Waste Strategy** and Collections, Infrastructure and Markets Waste Sector Plan (2012) – recommends the use of HIA

Continued:

- **MTAN1:** Aggregates new developments
- **MTAN2:** Coal – open cast mining. EIAs require a broad HIA to be undertaken (2009)
- **Vibrant and Viable Places:** Welsh regeneration framework (2013) – funding bids required inclusion of HIA statement
- **NHS Wales Infrastructure Investment Guidance (2015)** – Requires HIA within all business cases

Case Studies-

- Local Development Plans
- Local Authority
- Environmental Health Officer – experiences



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NHS
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Cymru
Public Health
Wales

Local Development Plans

- Through leverage via Planning Policy Wales
- Training delivered within Local Public Health teams
- 'Champions'/advocacy

Swansea Local Authority

- 2011- HIA Methodology approved by Planning Committee
- 2012 – HIA Scoping Report
- 2012 – HIA Local Profile Report
- 2012 – HIA Visions, Objectives and strategic Objectives Report
- 2013 – HIA integrated with Sustainability Appraisal and Strategic Environmental Assessment

Outcomes

- Support engagement with and between health and non-health professionals
- Increase consideration for H&WB not possible with SEA (Strategic Environmental Assessment)
- Support greater understanding between professional groups.

City of Cardiff Council

- Included in LDP development process:
 - Preferred Strategy 2012
 - Deposit 2013
 - Adopted January 2016
- Led to the development of a **Planning Protocol between City of Cardiff Council and Local Health Board** which outlines the undertaking of HIA in agreed situations including–
 - Residential developments of 50+ dwellings
 - All major transport and infrastructure projects

Wrexham County Borough Council

- Original LDP called in by Welsh Government but HIA had been undertaken in 2008
- Current LDP process has included HIA at Preferred Strategy Stage March 2016
- Agreement that HIA will be incorporated into all Supplementary Planning Guidance Developments

Feedback from HIA workshop

- Brought together people with diverse roles to work together. Very informative. Hopefully we will meet again as a HIA group to HIA the preferred larger sites to get the best outcomes
- the facilitation helped explore a diversity of perspectives that will help make our plan sound
- Greater understanding of the impacts of the LDP and mitigations performed as well as the positives and negatives around the new plan

Local Authority

Conwy County Borough Council

Enabled by:

- Advocacy and influencing by Local Public Health team Principal Officer
- Championed by Council Chief Excec.
- Leadership from one of the portfolio Directors - asks the question on all developments /projects 'does this need HIA'

Outcomes:

- Consideration to undertake HIA across a diverse range of projects at the development stage
- Greater awareness across officers of their contribution to H&WB impacts

Application examples – varied projects

- Warm Water Modality Service
- Health Precinct- development of joint H&SC delivery from one site
- Local Housing Strategy
- Extra Care Housing Scheme
- Planning – Key Strategic Site
Supplementary Planning Guidance
– South East Abergele Development

Environmental Health/ CIEH

EHO's experience in Wales

- Delivered accredited **HIA** training in partnership with the Chartered Institute of Environmental Health
- Individual officers become advocates within their own local authorities
- Recommend HIA to developers when appropriate and not currently addressed within development applications
- Enables Quality Assurance of HIA's submitted within applications
- Has lead to increased collaboration between PHW Environmental Health and LA – EHO's

One officers experience

- Undertook in depth training in HIA
- Recognised it informed and added value to his work and expanded considerations in addition to EIA.
- Devised Local Authority version of HIA screening and assessment tool
- HIA is a low cost / low maintenance method of ensuring “health” is being considered in decisions.
- Fallen upon Environmental Health in recent years to promote its use
- Making the case for added value where non-statutory

Application

Planning

- Biomass Plant
- Car sharing car park.
- Project Brand – a regeneration project
- Holiday village complex
- Nuclear Power Station- member of HIA Steering Group
- National Grid - currently advocating HIA

Internal Policy.

- Additional licensing scheme for HMOs.

lee.parrywilliams@wales.nhs.uk

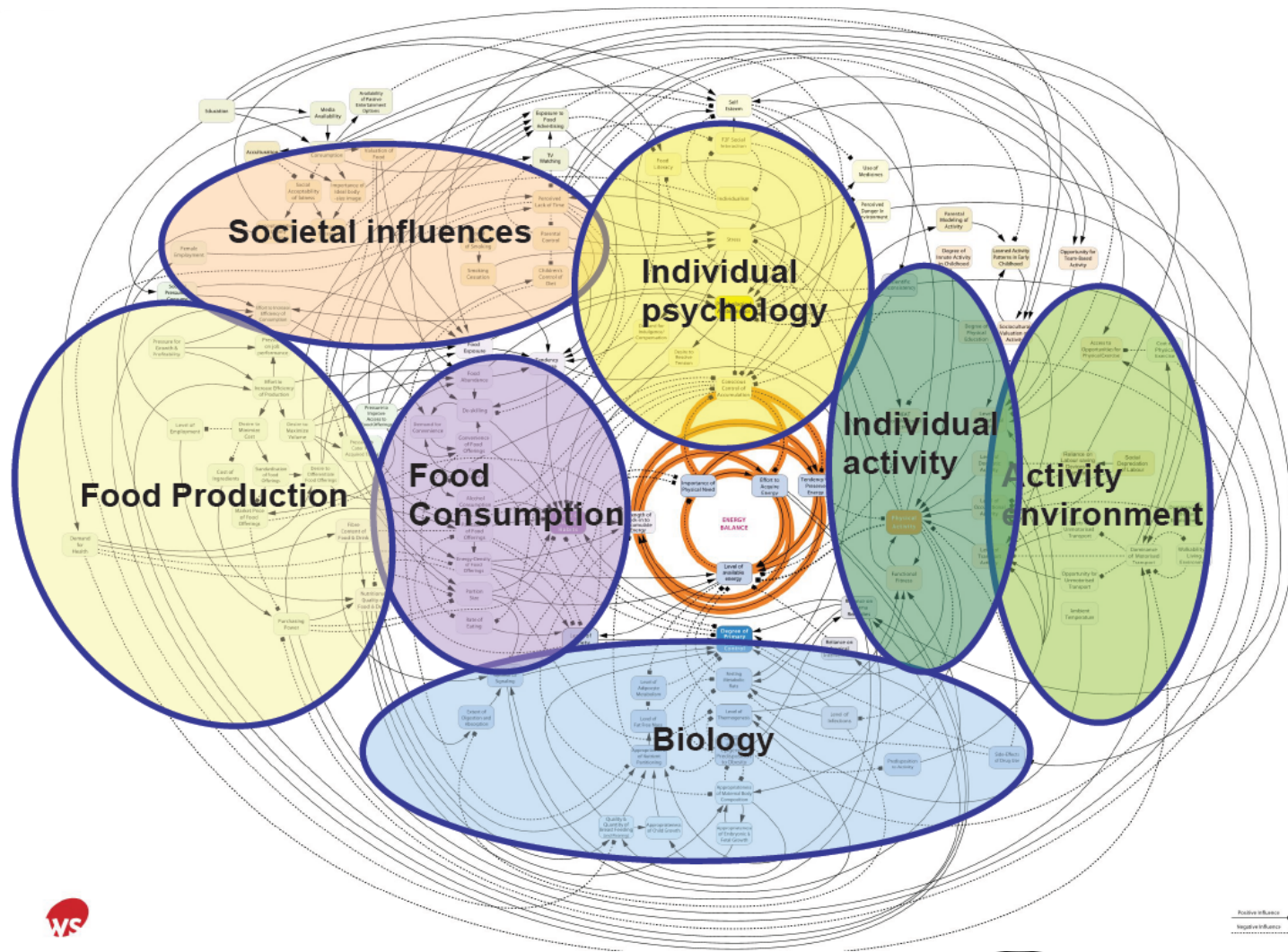
www.whiasu.wales.nhs.uk

Whole Systems Obesity

Joanna Saunders, Carol Weir and Jane Riley
Leeds Beckett University



Why a Whole Systems Approach?



PHE three-year Programme

- Network of moving and interacting drivers
- Tackling them in isolation cannot work
- Using Systems thinking
- Not just about health or public health
- Co-production with Local Authorities
- Seeking wider views and input



Aiming to answer:

- How can a LA use its levers, leadership, a logic model, evidence and relationships with stakeholders and communities to create a more effective, sustainable, system-wide approach to tackling obesity?



Next Steps

- Collate information on what might work
- Working with four LA Pilots
- Programme of engagement locally, nationally and internationally
- Community of Learning discuss/ test ideas
www.leedsbeckett.ac.uk/wholesystemsobesity



Discussion

- **Consequences** of obesity in your area
- **Causes** of obesity in your area?
- Take two to three of those causes – what could you do about it?
- Feedback: progress in tackling those causes? What more could we be doing?





Reuniting Planning and Health

9.30am-3.40pm April 7th

The Core, Science Central, Newcastle University

Dr Tim Townshend

School of
Architecture Planning & Landscape

