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HCCA Submission on the Draft ACT Planning Strategy

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The **Health Care Consumers' Association (HCCA) of the ACT** was formed over 30 years ago to provide a voice for consumers on local health issues and now provides opportunities for health care consumers in the ACT to participate in all levels of health service planning, policy development and decision making.

HCCA involves consumers through:

- Consumer representation
- Consultations
- Training in health rights and navigating the health system
- Community forums
- Information sessions about health services
- Advocating for issues of concern to consumers

HCCA welcomes the opportunity to respond to the *Draft ACT Planning Strategy*. Our comments are informed by the principles of the *Health in All Policies* approach as represented by the *Adelaide Statement on Health in All Policies (2010)*, the *Ottawa Charter for Health Promotion* "social determinants of health" framework and the World Health Organisation's *Healthy Cities* principles. We believe consideration of these documents will enhance the existing sound basis of the *Draft ACT Planning Strategy*. We have included both the *Adelaide Statement* and the *Ottawa Charter* as attachments to this submission in order to provide the necessary background to advance such these approaches.

Overall, HCCA is pleased with the commitment to community engagement and consultation embodied in the Draft ACT Planning Strategy. In terms of the strategies outlined by the document, HCCA supports – in principle – the idea of urban infill in order to create a more compact city and to contain urban sprawl. HCCA also supports the Strategy's dedication to wise and responsible use of the Territory's natural resources.

However, HCCA is concerned that the Draft ACT Planning Strategy fails to incorporate both the *Ottawa Charter's* "social determinants of health" approach and the site selection principles of urban planning. This submission will focus on the necessity of including the above approaches in any consideration of the ACT's future infrastructural planning, for, as the *Ottawa Charter* states,

*"health is created and lived by people within the settings of their everyday life; where they learn, work, play, and love."*¹

¹ "Ottawa Charter for Health Promotion", *World Health Organisation*
<http://www.who.int/hpr/NPH/docs/ottawa_charter_hp.pdf> (21 November 1986) accessed 6 December 2011.

HCCA welcomes the Draft ACT Planning Strategy's acknowledgement of the growing population and the changing demographics of the Territory. As outlined in the Strategy, such changes will result in heightened demand for health and aged care services. As such, any future development, and in particular plans to increase infrastructural density, must take into account the health needs of the ACT population. In addition to the natural change in the composition of the population, the proposed strategy of urban infill will also impact on the ability of consumers to access a variety of health and other community services.

HCCA recommends an approach that incorporates the factors that we have noted are currently absent from the ACT Draft Planning process. It must be recognised that health is not just determined by biological and genetic factors, but also by a range of economic, environmental and social factors. Socioeconomic status, housing quality, educational attainment and access to transport significantly affect both the health of the population and the ability of citizens to take advantage of timely, efficient and appropriate health interventions.² Citizens also have a right to be able to maintain a healthy lifestyle with access to safe public space for cycling, walking and other activities.

People of low socioeconomic status are far more likely to experience increased mortality and morbidity than those of higher socioeconomic status. In addition, those people who are living with chronic conditions are more likely to have lower incomes due to their inability to work and the costs they incur due to expensive medications and co-payments to see health professionals. Laurann Yen, a Research Fellow from the Australian Primary Health Care Institute at the Australian National University, has recently conducted some research around people living with chronic conditions, demonstrating that health needs are often neglected for financial reasons. As a result, the planning process must consider where those with low incomes will live, how they will access transport, community services and health services.

Currently, the Draft ACT Planning Strategy does not reflect the centrality of social factors in influencing population health, and it does not reference the WHO *Healthy Cities* strategy. As social factors clearly affect the health of the population, it is imperative that the principles embodied in the *Ottawa Charter* are incorporated into the ACT Planning Strategy, a policy which will govern the future of Canberra's infrastructural development. The ACT Planning Strategy provides an opportunity for the ACT Government to adopt a leadership role in this area by recognising the importance of the social determinants of health and incorporating them across policy planning and implementation in all sectors.

Public health and urban planning are interrelated and interdependent fields, sharing a range of common values and perspectives. Both public health and urban planning focus on the needs of the vulnerable within society and aim to

² C Bamba et. al. "Tackling the wider social determinants of health and health inequalities: evidence from systematic reviews", *Journal of Epidemiology & Community Health* 64 (2010) 284.

*“improve human well-being, emphasize needs assessment and service delivery, manage complex social systems, focus at the population level, and rely on community-based participatory methods”.*³

The design of our communities impacts on the physical and mental health of citizens, not least in determining people’s ability to access health services. In light of this, the ACT Planning Strategy must include a focus on health care services in the changing urban environment, and make provision for assuring the accessibility and the adequacy of health care facilities for Canberra’s population into the future.

As developed in detail in HCCA’s separate submission on the ACT Draft Transport Strategy, transport is essential to maintaining the health and wellbeing of our community. Research demonstrates that as an individual’s distance to health facilities increases, the utilisation of such services decreases, resulting in delays in treatment; higher incidences of death; and increases in emergency department presentations and hospital admissions. Public transport needs to be designed to enable access to appropriate services. The socially determined access needs of the population must also be considered when assessing the siting of services and the zoning of land. As expounded in the HCCA Submission on the ACT Draft Transport Strategy, the Village Creek facility in Kambah is a prime example of how poor site selection has adversely impacted on the users of the service, inhibiting access to treatment in a number of ways, including the insufficiency of public transport arrangements and the inappropriateness of the surrounding environment.

In addition to a “social determinants of health” framework, HCCA supports the *Health in all Policies* (HiAP) approach to governance which the South Australian Government has adopted. *Health in All Policies* is a governance structure wherein all sectors of government work together to advance human development and equity through joined-up leadership and integration.⁴ HiAP recognises that health is not an isolated issue: its causes are socially and economically based, and thus the focus of all policy must be equally broad in its consideration of the population’s well-being. Governance is at its most effective when all sectors within government include health and well-being as key factors in the development of policy.

As part of a joined-up approach to the governance of the ACT, it will be necessary to facilitate integration between policy planning and implementation between different governmental sectors – a characteristic which appears to be absent from the current system. The Draft ACT Planning Strategy fails to both recognise the extensive infrastructural development being undertaken by the ACT Health Directorate and to incorporate this development into the Strategy. The Capital Asset Development Program (CADP), a comprehensive response to the changing health needs of the population of the ACT and surrounding region, is directing a range of health-service

³ Chris S. Kochtitzky et. al. “Urban Planning and Public Health at CDC”, *Centre for Disease Control: Morbidity and Mortality Weekly Report* 55 (2006) 34.

⁴ “Adelaide Statement on Health in All Policies: Moving towards a shared governance for health and well-being”, *World Health Organisation & the Government of South Australia* <http://www.who.int/social_determinants/hiap_statement_who_sa_final.pdf> (2010) accessed 13 November 2011.

development and reformulation over the next decade. CADP will oversee the development of major health service sites, including the creation of enhanced community health centres and the redevelopment of the Canberra Hospital. Clearly, CADP is a massive undertaking, not least in terms of financial outlay. As such, it is imperative that any planning for Canberra's future is considered in concert with this current development in order to prove an efficient use of taxpayer funds, and to provide the best health outcomes for the ACT population.

HCCA is also to see how the ACT Government's commitment to human services is reflected in the finalised ACT Planning Strategy. The ACT Health Directorate is currently reviewing the Clinical Services Plan – a key document in the planning of health services in the Territory – to ensure that the needs of the community are met. HCCA feels strongly the need for all Government frameworks to be consistent and complementary.

It is crucial that the health needs of the Territory's population inform the ACT Planning Strategy. HCCA encourages the ACT Government to adopt a *Health in All Policies* approach to policy development and a "social determinants of health" lens, as represented by the *Ottawa Charter*, in order to effectively address the health needs of the most vulnerable sections of the population. HCCA hopes that the finalised Planning Strategy will reflect the incorporation of these frameworks.

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