



# A Plan for a Healthier Victoria

Submission on “Developing a new plan for Victoria”

**Australian Health Promotion Association (Vic/Tas)**

**August 2024**

## **A Plan for a Healthy Victoria**

The Australian Health Promotion Association Ltd (AHPA®) is the peak body for health promotion in Australia. AHPA advocates for the development of healthy living, working, and recreational environments for all people. Through our work, we support the participation of communities and groups in decisions that affect their health.

Australia is one of the healthiest countries in the world. This is largely because of effective public health and its core services – protection, prevention, and health promotion which includes action to create and support the social and environmental conditions that enable Australians to enjoy a healthy and happy life. We are now more aware than ever of just how complex the circumstances are by which human health is influenced – policies and actions shaped by the unfair distribution of wealth, power, and resources, both locally and internationally. We are also more cognisant of the range of skills and practices required to enhance individual and community capacity and act to address those forces that lead to health inequities - the unfair and avoidable differences in health status seen within and between countries. **Health promotion's role has never been so significant.**

### **ABOUT US**

Incorporated in 1990, AHPA is the only professional association specifically for people interested or involved in the practice, policy, research, and study of health promotion. Our member-driven national Association represents over 1000 members and subscribers and is governed by a Board at the national level with operational branches representing all states and territories. Membership of AHPA is diverse, and includes designated health promotion practitioners, researchers, and students, as well as others involved in promoting physical, mental, social, cultural, and environmental health, whose primary profession or area of study may be something different, but whose responsibilities include promoting health. Members represent a broad range of sectors including health, education, welfare, environment, transport, law enforcement, town planning, housing, and politics. They are drawn from government departments and agencies, universities, non-government organisations, community-based organisations and groups, private companies, and students.

Our activities include: national registration of health promotion practitioners for the International Union for Health Promotion and Education (IUHPE) in Australia; national health promotion university learning and teaching network; early career support; national and local conferences and events; a tri-yearly Population Health Congress (with partners: Public Health Association of Australia, Australasian Epidemiological Association and Australasian Faculty of Public Health Medicine); a website providing professional and membership information; a national listserv providing members with sector news, employment, advocacy, and events information; stakeholder and member communication across a range of platforms; advocacy action; strong partnership working with a range of organisations; awards; traineeships; mentoring; scholarships and bursaries; and the Health Promotion Journal of Australia.

### **Our Vision**

A healthy, equitable Australia.

### **Our Purpose**

Leadership, advocacy, and workforce development for health promotion practice, research, evaluation, and policy.

### **Our Principles**

**Ethical practice** - Supporting culturally informed, participatory, respectful, and safe practice.

**Health equity** - Addressing the sociocultural, economic, political, commercial, and ecological determinants of health in order to build health equity.

**Innovative and evidence informed approaches** - Promoting and supporting evidence informed research, policy, and practice.

**Collaboration** - Working in partnership with other organisations to improve health and wellbeing.

More about our vision for a healthy, equitable Australia can be found in AHPA's [Health Promotion and Illness Prevention Policy](#).

In this submission, we focus on the value and importance of health promotion and the health promotion workforce in shaping a future where all Victorians live, work, play and move within environments that are healthy, sustainable, fair, resilient and safe.

The Australian Health Promotion Association Victoria Tasmania Branch calls on the Victorian government to:

- Develop and implement a plan for Victoria that prioritises equitable health and wellbeing outcomes.
- Engage and collaborate with the Victorian health promotion workforce to inform and deliver a plan for Victoria that incorporates innovative and evidence based health promotion research, knowledge and practice.

This submission also includes additional information and considerations across each of the pillars of the plan, and four key recommendations. These recommendations have been developed through consultation and engagement with a broad range of AHPA members and stakeholders across Victoria.

Please do not hesitate to contact us with further questions.



David Towl

President | Australian Health Promotion Association (Victoria/Tasmania Branch)

[vic-tasbranch@healthpromotion.org.au](mailto:vic-tasbranch@healthpromotion.org.au)

## **Introduction**

The Australian Health Promotion Association (Victoria/Tasmania) supports a comprehensive plan for Victoria that centres health and wellbeing for current and future generations.

In giving its support for a plan for Victoria, the Australian Health Promotion Association recommends that a plan for Victoria includes:

1. Embedding the voices of First Nations people in planning and design decision making processes
2. A Planning Framework that prioritises health outcomes
3. Regionalised implementation with resourced support from the health promotion workforce
4. Reviewing and reforming the Planning & Environment Act 1987 to promote health and wellbeing

## **The link between planning and health**

Research has consistently shown that the planning and design of the built, natural, social, and economic environments have a notable impact on the health and wellbeing of individuals and communities (Barton, 2009; Prior et al., 2023; Zhong et al., 2022). This is crucial as most Australians reside in highly urbanised metropolitan areas (Australian Institute of Health Welfare, 2024). Therefore, achieving and maintaining good health is not only the responsibility of the health sector alone. It requires an intersectoral approach with urban planners playing a key role (Prior et al., 2023).

Economic factors such as housing affordability significantly influences health and wellbeing. Unaffordable housing exacerbates feelings of anxiety, depression and stress. Families may forfeit food, healthcare, and education to afford housing prices. Relocation to socioeconomically disadvantaged neighbourhoods affects the accessibility and quality of essential healthcare and social services (Fisher et al., 2014; Villanueva et al., 2019).

Land use can also impact health by mitigating the risks of environmental pollution. Rapid urbanisation, traffic congestion, excessive reliance on cars that release carbon emissions, and the absence of green spaces contribute to the prevalence of respiratory and cardiovascular diseases (Barton, 2009; Zhong et al., 2022). This underscores the need to reduce car usage by transitioning to affordable and accessible public transportation, and design spaces with high walkability. Further, the implementation of more greenspaces reduces the 'heat island effect' while simultaneously improving air quality by absorbing air pollutants (Barton, 2009; Zhong et al., 2022).

Urban planners must consider the needs of marginalised communities such as older residents, LGBTIQ+ individuals, First Nations people and children as these groups experience poorer health and wellbeing outcomes compared to the general population (Prior et al., 2023). Effective and health promoting planning systems can address the uneven distribution of social determinants, including access to affordable housing, public transport, local facilities and greenspaces, within these communities to decrease social and health inequities (Barton, 2009).

First Nations people have lower life expectancies, higher disease, co-morbidities and mortality rates and increased vulnerability to climate change (Mamun et al., 2024). Substandard housing, water and sanitation, inadequate healthcare services and poorer education and employment rates contribute to the health inequities in this population (Mamun et al., 2024). Effective policies that adopt health considerations and strong intersectoral oversight across urban planning, transportation, healthcare, economic development, housing, social services, and education are needed to improve health and wellbeing outcomes for vulnerable populations (Giles-Corti et al., 2022).

## **Pillars of a plan for Victoria**

The Australian Health Promotion Association (Victoria/Tasmania) supports the overarching four pillars outlined in the plan for Victoria. In this section, we outline areas for improvement to enhance the positive outcomes the pillars would have for population health and wellbeing.

### **Affordable Housing and Choice**

AHPA supports the Plan's focus on providing affordable housing and choice. This provides an opportunity to ensure that plans for housing consider not only the provision of shelter, which is a human right, but how housing can be designed to further promote good health. Shelter is a critical pre-requisite to health as stated in the Ottawa Charter for Health Promotion (World Health Organization, 1986). The right to housing has also been codified in the Universal Declaration of Human Rights (United Nations, 1948) and the International Convention on Economic, Social and Cultural Rights (United Nations, 1966).

Any commitment to planning in Victoria needs to enable housing access, diversity and security. Access to safe and secure housing is a human right as part of the right to an adequate standard of living. As such, poor quality, unaffordable housing and homelessness have adverse effects on physical and mental health.

Sufficient affordable and appropriate housing to meet need will provide significant positive impacts that extend beyond good health and wellbeing. The intersection between housing diversity and place needs to be carefully managed ensuring that diversity in housing and equity of access to services is not mediated by proximity to urban centres.

#### **Case Study - The Commons Brunswick**

The Commons is an urban development that was designed with the intention of it being replicable which prioritises community, sustainability and affordability. The design strategy for the Commons was to build more with less to give space and height, light and air.

The building was designed to prioritise social and emotional wellbeing, as well as environmental sustainability, and as such the development involved omitting car parks,

air conditioning, second bathrooms, individual laundries, plasterboard ceilings, bathroom tiling and chrome plating.

Instead, preference was given to features that maximise space, height, thermal efficiency and double-glazing. Close to Public Transport, the development additionally features generous decks, a shared laundry and rooftop gardens, solar hot water, solar P.V., hydronic heating, and modest utility bills.

More information is available on [Healthy Active by Design](#)

### **Equity and Jobs**

AHPA® supports the plan's commitment to supporting equitable access to employment but we note that improving access to employment through improved transport will not solve the underlying inequities that exist. We encourage government to consider models that put people at the forefront. Where the jobs are brought closer to the workforce, supporting businesses to establish and thrive across Victoria, rather than creating transport systems that make travel to employment easier for workers.

Widening income, wealth and employment inequalities are accompanied by increasing health inequalities (Flavel et. al., 2022). Current economic models that focus on profit and growth, over people and the planet, result in the unequal distribution of resources and assets.

We need to reshape our economy to one that is more equitable, inclusive and sustainable.

Moving beyond economic markers such as growth, wellbeing economies shift towards policy indicators and budgets that prioritise health, social and environmental outcomes, for the collective wellbeing of current, and future, generations (Australian Health Promotion Association, 2023; Flavel et. al., 2022; Jones & Hunnisett, 2022; Porcelli et. al., 2023; and Williams et. al., 2023.)

Employment, income equality, business performance and economic diversity should be monitored with respect, and in relation to, broader measures for wellbeing.

The ACT Government has commenced work in partnership with community to develop a Wellbeing Framework. This framework informs government priorities, policies and investment decisions. More information here: <https://www.act.gov.au/wellbeing/wellbeing-framework/domains-and-indicators>

### **Thriving and Liveable Suburbs and Towns**

AHPA supports the Plan's focus on building thriving and liveable suburbs and towns. Green spaces and walkable suburbs play a crucial role in promoting health equity. Access to well-maintained parks, recreational areas, and pedestrian-friendly environments ensures that all community members, regardless of socioeconomic status, have opportunities for physical activity and mental relaxation. This approach supports health promotion's principle of reducing

health inequalities by creating environments where everyone can benefit from the physical and psychological health benefits of nature and active living.

The built environment is an important determinant of health. Urban areas with well-designed infrastructure can influence the community's lifestyles and positively impact physical activity, food choices, mental health, and wellbeing (Barton, 2009; Zhong et al., 2022; Frank et al., 2022). This can be through the provision of nearby schools, workplaces, greenspaces, shopping centres, active transport options, recreational facilities and other essential services.

Neighbourhoods can be designed to foster social cohesion and active living, with recreational and green spaces, libraries and school easily accessible by walking, therefore promoting social interaction, enhancing mental wellbeing, offering stress relief, and protecting against sedentary lifestyles (Badland et al., 2023; Barton, 2009; Zhong et al., 2022). In addition, planning and designing neighbourhoods to allow for urban agriculture contributes to a range of positive health, climate and economic outcomes (Donati & Rose, 2022; Zutter & Stoltz, 2023).

#### Case Study - Bibra Lake Regional Playground

The Bibra Lake Regional Playground is located in Western Australia, this playground exemplifies the principles of Healthy Active by Design by incorporating diverse play areas, natural elements, and accessible pathways that cater to various age groups and abilities.

The playground was designed to promote physical activity and social interaction and encourage families and individuals to engage in outdoor recreation. Its integration of natural features, such as water play zones and shaded areas, not only enhances the playground's appeal but also provides a valuable space for relaxation and stress relief. Catering to the town's demographics, the design of the green space emphasises accessibility and inclusivity, with pathways and play areas that are easily navigable for children and adults with mobility challenges, and shaded structures and seating areas are strategically placed to ensure comfort for both children and caregivers.

More information is available on [Healthy Active by Design](#).

#### **Sustainable Environments and Climate Action**

AHPA<sup>®</sup> is highly supportive of the Plan's priority of protecting our environment, agricultural land and natural resources for a sustainable and healthy future. A healthy environment and thriving natural systems are fundamental to the health and wellbeing of every Victorian. The development of a plan for Victoria presents a significant opportunity to effectively and ambitiously respond to the challenges of the climate change, nature and pollution crises that are undermining human health and wellbeing, livelihoods and the economic and natural systems on which Victorians depend.

AHPA recognises the interconnectedness of the built and natural environment and health, and has a history of advocating for policies and plans that fulfill individuals' and communities' right to health; including actions that ensure access to healthy environments and environmental conditions that promote optimum health and wellbeing, now and for future generations. Our full position, including the integral role of the health promotion workforce in supporting and

promoting planetary health, is detailed in our [Climate Change and Health Promotion Position Paper](#) (Australian Health Promotion Association, 2024).

While we support the inclusion of this priority and the ‘big ideas’ outlined, we recommend a plan for Victoria also considers:

- A greater focus beyond the sustainability of households and infrastructure, toward climate resilient communities and systems that address systemic vulnerabilities.
- The best available climate science and research to ensure effective decision making investment in a mix of transformative adaptation and mitigation strategies, with a particular focus on regions and communities that are most vulnerable to current and projected climate hazards.
- A holistic and integrated government approach to planning for sustainable environments and climate action in Victoria that aligns and reinforces actions from across a range of existing and future strategies, legislation and plans including Victoria’s Climate Change Strategy, Adaptation Action Plans, Victorian Health and Wellbeing Plan 2023-27, and Protecting Victoria’s Environment – Biodiversity 2037.
- An equity focus that ensures that planning and development does not increase vulnerability to climate change, pollution, and biodiversity loss.

The role of the Australian and state planning systems in driving sustainable environments and climate action is well evidenced in resources such as those from the Planning Institute of Australia. The PIA have a range of reports and discussion papers which detail the significance and potential for [climate conscious planning systems](#) (Planning Institute of Australia, 2024). C40 Cities have also developed [toolkits](#) and [resources](#) that include international case studies highlighting effective examples of planning for sustainable and just development in the context of climate change (C40 Cities, 2024).

## **Recommendations**

AHPA<sup>®</sup> is supportive of the proposed Plan for Victoria and its connection to evidence-informed planning. We believe a planning framework for Victoria would be further strengthened with the consideration of the following four recommendations.

### **1. Embedding the voices of First Nations people in planning and design decision making processes**

Participating with First Nations Australians in planning decisions not only acknowledges the historical and cultural significance of the land but also enriches urban spaces with diverse and valuable insights.

First Nations peoples have a profound understanding of local ecosystems and land management practices developed over thousands of years. Incorporating the perspectives of First Nations People can enhance urban and regional planning and design, ensuring that new developments respect sacred sites and traditional land uses, which can contribute to healthier, more culturally inclusive environments (Altman & Jordan, 2018).



Involving First Nations Australians in planning decisions supports reconciliation and social justice by addressing historical exclusions and fostering equitable representation. Active participation helps to bridge gaps between Indigenous and non-Indigenous communities, creating more inclusive and empathetic urban environments (Altman & Jordan, 2018).

## **2. A Planning Framework that prioritises health outcomes**

AHPA recommends the Plan for Victoria incorporates a Planning Framework which adopts a Health in All Policies (HiAP) approach and focuses on developing a wellbeing economy. This would ensure that planning decisions prioritise the government's responsibility to protect and promote the health and wellbeing of Victorians and over economic, political or commercial goals.

This approach would promote planning policies and decisions which recognise the range of social, environmental, economic, political, cultural and commercial factors that influence health and wellbeing (Porcelli et. al., 2023). It is a collaborative approach that prioritises co-design and co-benefits through partnerships. By adopting a HiAP approach, planning decisions would be made by working across departmental boundaries and enable the government to address the complex determinants of health within the built environment in a systematic and integrated manner (Williams et. al., 2023)

## **3. Regionalised implementation with resourced support from the Health Promotion workforce**

AHPA<sup>®</sup> is highly supportive of a state-wide approach to planning but we are concerned that the plan for Victoria lacks detail on implementation. We note the feedback from the Planning Institute of Australia and Municipal Association of Victoria which identifies the lack of structured implementation to both Plan Melbourne and Regional Growth Plan. Further, we recognise the diversity across Victoria and the importance of regionalised implementation supported by localised knowledge, networks and governance structures.

By integrating public health perspectives into urban planning processes, health promotion practitioners can advocate for design features that promote physical activity, mental wellbeing, and social cohesion (Giles-Corti et al., 2012). Additionally, health promotion practitioners can assist in identifying the way planning and design decisions might impact health outcomes. This collaboration helps to embed health considerations into the early stages of planning and design, ensuring that public health benefits are central to urban development strategies.

Furthermore, health promotion practitioners can enhance community engagement and inclusivity in the planning process. By facilitating workshops, consultations, and participatory planning sessions, they can ensure that diverse community voices, including those of marginalized groups, are heard and considered in urban design decisions (Williams et al., 2016). This approach not only fosters greater community ownership and satisfaction with public spaces but also helps to address social determinants of health by creating environments that are equitable and accessible to all.

## **4. Review and reform the Planning & Environment Act 1987 to promote health and wellbeing**

AHPA® supports the opportunity to review and update the Planning & Environment Act 1987 to include an objective to protect and promote the health and wellbeing of current and future generations. This objective would ensure health and wellbeing impacts would be carefully considered in planning decisions around Victoria's built environment, enabling key objectives of both a plan for Victoria and the Victorian Health and Wellbeing Plan 2023-27.

Additional provisions that should be included in an update to the Act include the requirement for Planning Authorities and Responsible Authorities to have regard to the goals and objectives of the Public Health and Wellbeing Act 2008, Victorian Public Health and Wellbeing Plan 2023-27 and Municipal Public Health and Wellbeing Plans, and a requirement for Planning Authorities and Responsible Authorities to consider health impacts when preparing a planning scheme or amendment, and decisions around planning applications.

## References:

Australian Health Promotion Association (2024). Climate Change and Health Promotion Position Paper.

[https://www.healthpromotion.org.au/images/Advocay/Climate\\_Change\\_and\\_Health\\_Promotion\\_Position\\_Paper\\_2024.pdf](https://www.healthpromotion.org.au/images/Advocay/Climate_Change_and_Health_Promotion_Position_Paper_2024.pdf)

Australian Health Promotion Association (2023). A spotlight review on the Measuring What Matters Framework and the submission by the Australian Health Promotion Association.

[https://www.healthpromotion.org.au/images/Measuring\\_What\\_Matters\\_AHPA\\_Spotlight.pdf](https://www.healthpromotion.org.au/images/Measuring_What_Matters_AHPA_Spotlight.pdf)

Australian Institute of Health Welfare. (2024). *Profile of Australia's population*.

<https://www.aihw.gov.au/reports/australias-health/profile-of-australias-population>

Badland, H., Villanueva, K., Alderton, A., Davern, M., & Goldfeld, S. (2023). An urban neighbourhood framework for realising progress towards the New Urban Agenda for equitable early childhood development. *Children's Geographies*, 21(6), 1087-1105.

Barton, H. (2009). Land use planning and health and well-being. *Land Use Policy*, 26, S115-S123. <https://doi.org/https://doi.org/10.1016/j.landusepol.2009.09.008>

Cameron, R., MacMillan, S., & Schofield, R. (2016). "The influence of urban design on health and well-being." *Urban Design International*, 21(2), 131-148.

C40 Cities Climate Leadership Group (2024).

<https://www.c40.org/what-we-do/scaling-up-climate-action/urban-planning-design/>

Donati, K. and Rose, N. (2022). *Growing Edible Cities and Towns: A Survey of the Victorian Urban Agriculture Sector*. Sustain: The Australian Food Network.

<https://doi.org/10.57128/MIUD6079>

Fisher, M., Milos, D., Baum, F., & Friel, S. (2014). Social determinants in an Australian urban region: a 'complexity' lens. *Health Promotion International*, 31(1), 163-174.

<https://doi.org/10.1093/heapro/dau071>

Flavel, J., McKee, M., Tasfay, FH., Musolino, C., freeman, T., Van Eyk, H., & Baum, F. (2022). Explaining Health inequalities in Australia: the contribution of income, wealth & employment.

*Australian Journal of Primary Health*, 28(6):474-481. DOI: [10.1071/PY21285](https://doi.org/10.1071/PY21285)

Frank LD, Bigazzi A, Hong A, Minaker L, Fisher P, Raine KD. Built environment influences on healthy eating and active living: The NEWPATH study. *Obesity (Silver Spring)*. 2022; 30: 424–434. doi:[10.1002/oby.23352](https://doi.org/10.1002/oby.23352)

Giles-Corti, B., Knuiaman, M., & Timperio, A. (2005). "Environment, physical activity, and obesity: Results from a natural experiment." *International Journal of Obesity*, 29(8), 960-966.

Giles-Corti, B., Knuiman, M., & Timperio, A. (2012). "Creating healthy communities with the planning system." *Australian & New Zealand Journal of Public Health*, 36(3), 209-215.

Giles-Corti, B., Saghapour, T., Turrell, G., Gunn, L., Both, A., Lowe, M., Rozek, J., Roberts, R., Hooper, P., Butt, A., & Higgs, C. (2022). Spatial and socioeconomic inequities in liveability in Australia's 21 largest cities: Does city size matter? *Health & Place*, 78, 102899.

<https://doi.org/https://doi.org/10.1016/j.healthplace.2022.102899>

Jones, A. and Hunnisett, C. for VicHealth (2022). A toolkit to progress wellbeing economy approaches in Australia. <https://assets.vichealth.vic.gov.au/share/2E6DCA36-5064-4986-BDD9B8E4FD845643/?mediald=E3E58578-D270-4E39-B93546A7342AB769>

Mamun, A. A., Kanmiki, E. W., Leske, S., Stajic, J., & Ward, J. (2024). Research needed on urban Indigenous health inequalities. *Bull World Health Organ*, 102(2), 146-148.

<https://doi.org/10.2471/blt.23.290868>

Porcelli, A., D'Onise K., and Pontifex, K. (2023) Public health partner authorities – how a health in all policies approach could support the development of a wellbeing economy. *Health Promotion Journal of Australia*. 34:671–674. <https://doi.org/10.1002/hpja.738>

Prior, J., Liu, E., de Leeuw, E., Morrison, N., & Tsouros, A. (2023). Urban planning and development for health: key principles to guide action and change. *Public Health Research & Practice*, 33(4 DOI - <http://dx.doi.org/10.17061/phrp3342329>), e3342329.

<http://dx.doi.org/10.17061/phrp3342329>

United Nations (1948). Universal Declaration of Human Rights. Available at:

<https://www.un.org/en/about-us/universal-declaration-of-human-rights>

Villanueva, K., Badland, H., Tanton, R., Katz, I., Brinkman, S., Lee, J. L., Woolcock, G., Giles-Corti, B., & Goldfeld, S. (2019). Local Housing Characteristics Associated with Early Childhood Development Outcomes in Australian Disadvantaged Communities. *Int J Environ Res Public Health*, 16(10). <https://doi.org/10.3390/ijerph16101719>

World Health Organisation (1986). Ottawa Charter for Health Promotion. Available at:

<https://www.who.int/teams/health-promotion/enhanced-wellbeing/first-global-conference>

Williams, A., Stewart, R., & Williams, R. (2016). "Community engagement in urban planning: The role of health promotion." *Health Promotion Journal of Australia*, 27(2), 117-123.

Williams, C., Smith, J. A., Valentine, N., Baum, F., Friel, S., Williams, J., & Schmitt, D. (2023). The well-being economy and health in all policies: Fostering action for change. *Health Promotion Journal of Australia*, 34(3), 623-625. <https://doi.org/10.1002/hpja.768>

Villanueva, K., Badland, H., Tanton, R., Katz, I., Brinkman, S., Lee, J. L., Woolcock, G., Giles-Corti, B., & Goldfeld, S. (2019). Local Housing Characteristics Associated with Early Childhood

Development Outcomes in Australian Disadvantaged Communities. *Int J Environ Res Public Health*, 16(10). <https://doi.org/10.3390/ijerph16101719>

Zhong, J., Liu, W., Niu, B., Lin, X., & Deng, Y. (2022). Role of Built Environments on Physical Activity and Health Promotion: A Review and Policy Insights. *Front Public Health*, 10, 950348. <https://doi.org/10.3389/fpubh.2022.950348>

Zutter, C. & Stoltz, A. (2023) Community gardens and urban agriculture: Healthy environment/healthy citizens. *International Journal of Mental Health Nursing*, 32, 1452–1461. Available from: <https://doi.org/10.1111/inm.13149>