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## **Feedback on the Future Development Strategy and the Tauranga Urban Strategy**

The Bay of Plenty District Health Board (the DHB) welcomes this opportunity to comment on the Future Development Strategy (FDS) and the Tauranga Urban Strategy (TUS). The DHB is required by the Public Health and Disability Act 2000 to improve, promote, and protect the health of people and communities; to promote the inclusion and participation in society and independence of people with disabilities; and to reduce health disparities by improving health outcomes for Māori and other population groups. Whilst health care services are important health interventions, their primary purpose is to manage disease, ill-health and trauma at an individual level. The health and wellbeing of a community is strongly influenced by a wide range of influences beyond the health sector, including urban design. An overview of the linkages between urban planning and health is in the appendix. Of note, mental illness and chronic diseases such as heart disease and diabetes are health outcomes which are modifiable through good urban design.

The DHB acknowledges the considerable amount of work that has gone into the development of the draft TUS and FDS. Population growth in the Western Bay of Plenty sub region is an opportunity to protect and enhance the wellbeing of residents and the local environment. The needs of our progressively ageing population for different housing, transport and community support structures must be factored into the detailed design of future developments. Reducing our carbon footprint is also imperative. Our future must not be based on more of the same car-centric urban sprawl.

It is great to see many of these issues cited throughout the two strategies. SmartGrowth partners must now commit to making the necessary changes. Urgent action is needed to fundamentally change the way we plan for the anticipated population growth. It is essential that population growth is used as an opportunity to enhance everyday liveability and the quality of the physical environment throughout the Western Bay.

Bearing the above in mind, the DHB makes the following recommendations:

### **1. Build and prioritise compact development**

- 1.1. Prioritise intensification over greenfield development. Commit to the 'high level urban infill scenario' (outlined on page 47 of the FDS) as a *minimum* target for intensification. The low level urban infill scenario is not a viable scenario and needs to be removed from consideration.

## **2. Prioritise health and the environment**

- 2.1. Avoid detrimental effects to the community, environment and equity when trade-offs are being considered.
- 2.2. Set bold targets for the role of [councils in climate change adaptation](#) and mitigation.
- 2.3. Adopt a biophilic approach to planning and land use and incorporate biophilic strategies into the City Plan and related policies and strategies.

## **3. Plan for the future**

- 3.1. The design of our future communities must anticipate the changing demographic patterns within the population. For instance most of our population growth will be in the number of people aged over 65 years old. In terms household size the most dramatic increase will be in one and two person households.

## **4. Create a healthy built environment**

- 4.1. Embed healthy built environment principles within Council policies, strategies and the City Plan. The DHB recommends that Councils adopt the principles within the [Healthy Built Environment Linkages Toolkit](#) (or other relevant evidence based principles) and ensure alignment with the outcomes in the FDS/TUS.

## **5. Strengthen Council leadership**

- 5.1. Raise community awareness of the pros and cons of intensification vs greenfield development in terms of community and environmental wellbeing as well as affordability over the long term.
- 5.2. Ensure councils have sufficient resources to operationalise the strategies in a timely manner.
- 5.3. Ensure all council policies and strategies align with the outcomes set in these strategies e.g. transport strategy, environmental strategy.
- 5.4. Develop a comprehensive implementation plan that ensures development associated with population growth improves health and equity outcomes.
- 5.5. Set clear targets and bottom lines that each and every development must at least meet, and preferably exceed.
- 5.6. Bring forward the City Plan Review.

## **6. Reframe key messages**

- 6.1. Reframe strategies to highlight the health and environmental benefits. For example, acknowledge that increasing housing density will enhance the health of our environment and communities, and is not just in response to changing demographics and housing preferences.
- 6.2. Use words and lingo everyone understands. Inject some levity into your communications. Be bold, be humorous, be creative, use pictures, and make sure people aren't just hearing you, but that they are actually listening.

## **7. Set bold and measureable targets**

- 7.1. Set bold targets and measureable commitments e.g. a minimum percentage of all population growth will be catered for by intensification, minimum targets for carbon reduction, tree canopy cover, and a minimum proportion of one and two bedroom dwellings.

7.2. Ensure that all indicators and outcomes reflect the challenges facing our region.

**8. Learn from other regions. If others can do it, so can we. Here's some examples:**

- 8.1. Commit to creating an urban ngahere (forest) and set targets for tree canopy cover (Auckland).
- 8.2. Sign up to become a [Biophilic City](#) (Wellington)
- 8.3. Sign up to the UNICEF Child Friendly City initiative (Wellington, Auckland, and Whangarei).
- 8.4. Utilise this as an opportunity to encourage healthy behaviours such as introducing a comprehensive Smokefree outdoor spaces policy, like Auckland.
- 8.5. Commit to changing our car centric city. [Perth](#) has recently built a new stadium without a car park in sight.

We're all in this together and let's face it; at the end of the day, we want the same thing; a healthy thriving community. It would be difficult for anyone to argue that this vision shouldn't be the premise underpinning our roles, both directly and indirectly as a DHB and as local government bodies.

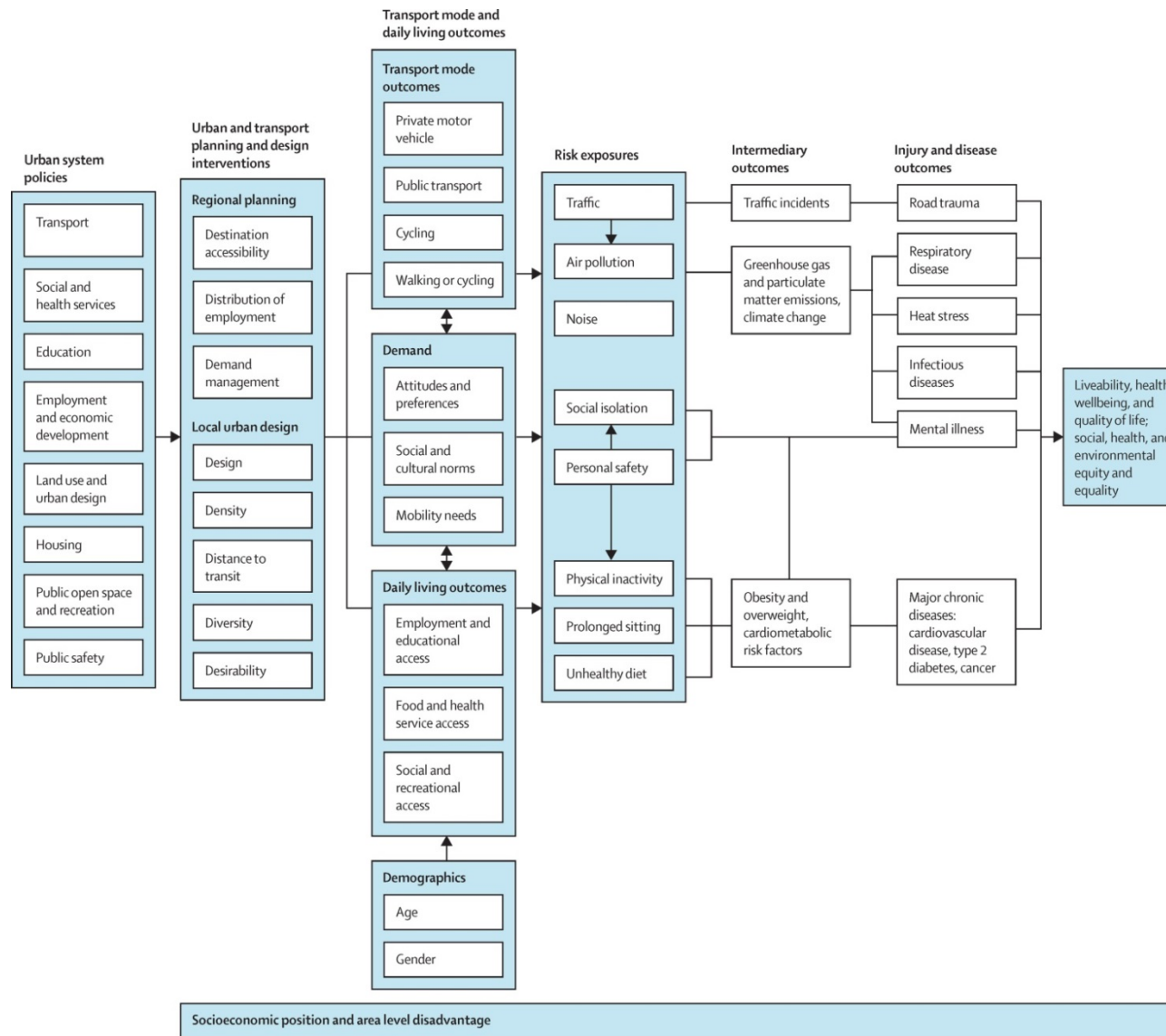
The DHB looks forward to seeing the TUS and FDS operationalised the mechanisms for accountability and the required strategic leadership from Council. The DHB would like to assist Council explain the health and wellbeing benefits to communities of compact development, and be a public supporter of any Council actions to promote and incentivise the development of a compact city. The DHB also welcome the opportunity to continue working with councils to ensure the successful implementation of these strategies. If you would like more rationale behind any of our recommendations, please let us know.

Yours sincerely



**SALLY WEBB**  
Board Chair

## Appendix: Pathways to better health through urban planning and design



**Source:** Giles-Corti et al (2016) City Planning and Population Health: a Global Challenge. *The Lancet*. 388(10062) p2912-2924. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/27671668>