



# TOI TE ORA PUBLIC HEALTH

Bay of Plenty + Lakes Districts

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Toi Te Ora Public Health  
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Secretariat  
Health Committee  
Select Committee Services  
Parliament Buildings  
WELLINGTON 6160

## **Submission to the Inquiry on the Natural and Built Environments Bill: Parliamentary Paper**

### **Introduction**

Thank you for the opportunity to submit on the Natural and Built Environments Bill, Parliamentary Paper.

This submission has been endorsed by the Medical Officers of Health at Toi Te Ora Public Health (Toi Te Ora) which is the Public Health Unit for Bay of Plenty and Lakes District Health Boards.

The environment has a critical role in determining the health and wellbeing of the present and future populations. This submission supports the objectives of the Resource Management Act (1991) review. It provides our objective and independent advice on the exposure draft of the Natural and Built Environments Bill in keeping with delivering on the review objectives.

I do not wish to appear before the Committee to speak to this submission.

I may be contacted at the address provided at the top of this submission or at [enquiries@toiteora.govt.nz](mailto:enquiries@toiteora.govt.nz)

**Dr Lynne Lane**  
Medical Officer of Health

## **Toi Te Ora Public Health**

Toi Te Ora's purpose is to improve and protect the health of the population in the Lakes and Bay of Plenty District Health Board districts with a focus on the achievement of health equity, particularly for Māori. Toi Te Ora provides public health services to an estimated population of more than 350,000 people<sup>1</sup> across seven territorial authorities (Tauranga City and the district councils of Western Bay of Plenty, Whakatane, Opotiki, Kawerau, Rotorua and Taupo.)

Medical Officers of Health have responsibilities to identify and reduce environmental and social risks within our locality that are associated with disease. The scope of our roles includes:

- a) Preventing acute diseases, for example waterborne infection or toxic poisoning from contaminated water supplies
- b) Preventing chronic long-term disease and promoting health, for example ensuring air quality standards are met to prevent asthma and other respiratory conditions, and by leading programs to reduce obesity that include creating physical and social environments that support increased levels of physical activity.

Population health and wellbeing is determined by the collective health status of the individuals in a community or population. The term Health "*means a state of complete physical, mental and social wellbeing and not merely the absence of disease and injury.*"<sup>2</sup> Health *is the enjoyment of the highest attainable standard of health and is considered one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition*<sup>3</sup>.

Many of the factors that determine health are beyond the control of individuals and determined by Government. It is therefore essential that New Zealand has a fit for purpose resource management system that supports the health and wellbeing of communities now and for future generations.

This submission is framed in terms of our position on the extent to which the exposure draft of the Bill will support the reform objectives, the rationale for that position, followed by the recommendations we wish the Committee to make.

## **Recommendations**

### **Preliminary provisions (e.g. definitions)**

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<sup>1</sup> Ministry of Health population projections for DHBs in 2019 (Bay of Plenty DHB 240,000 and Lakes DHB 111,000)

<sup>2</sup> Constitution of The World Health Organization – WHO website, [couv arabe.indd \(who.int\)](#)

<sup>3</sup> Constitution of The World Health Organization – WHO website, [couv arabe.indd \(who.int\)](#)

**1. That the rationale for the resource management system review explicitly include the need to improve impact on human health**

The rationale for the resource management system review needs to explicitly recognise that the health of the public is being adversely and inequitably impacted by the current system.

There is a wider Government agenda to improve and address inequalities in population health outcomes that include reform of the public health system. Changes in the resource management system are an important part of this wider agenda to improve population health and equity.

**2. That the new resource management system objectives explicitly include equitable population health improvement**

- **To promote, and where necessary restore the built environment to protect and improve the population health and wellbeing of present and future generations**
- **To encompass a “Health in All Policies” approach including the following five key elements: promoting health equity and sustainability, supporting intersectoral collaboration, creating co-benefits for multiple partners, engaging stakeholders, and creating structural and process change.**

These explicit population and community health issues have not been given sufficient weight as an objective of the reform. While the definition of wellbeing includes health, the exposure draft subsequently refers only to ‘people and community wellbeing’. The health of the population is not referred to explicitly throughout the entire draft and it needs to be.

The impact of the natural and built environments on population health and inequity of outcomes is well accepted and based on a body of extensive scientific research. To achieve healthy communities, and health equity across population groups requires improved access to the social determinants of health, including the natural and built environment. For instance, access is needed to affordable quality housing; public transport; safe air, water, and food; education; a sustainable food supply; and economic opportunities. It also requires collective action to protect and enhance natural resources and species, and to preserve and enhance environmentally sensitive areas to maximise opportunities for everyone to access natural environments.

Good health outcomes begin with healthy policies that protect and enhance the natural environment and create healthy built environments which support people to adopt healthy behaviours.



Figure 1: Policies to People Continuum

The resource management system reform needs to recognise its relationship with the current health sector reforms. Improving the resource management system is part of the solution to the increasing burden of disease and rising costs of healthcare amongst other social issues and government spending.

Health in All Policies<sup>45</sup> is a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across all sectors and policy areas.

Health is not the only sector to benefit from a Health in All Policies approach as healthy people and communities are also an important prerequisite of achieving many other societal goals, such as building a more competitive and productive economy.

This reform requires innovative solutions, and structures that build channels for dialogue and decision-making that work across traditional resource management system and policy silos. Until a Health in All Policies approach is taken, the unintended impacts of policies on public health will continue, not be measured and addressed.

### 3. That the Exposure Draft Objectives include to protect and improve public health

We support all the objectives in the Exposure Draft Bill. The proposed objectives, however, do not go far enough for the protection and improvement of public health.

“Health for all” is about the health of people as well as the health of other species and their ecosystems. For people to thrive we need the natural world around us to be flourishing and healthy.

Protection of the environment from contamination and unsustainable natural resource use is central to safeguarding human health.

“Ko ahau te taiao, ko te taiao, ko ahau” the ecosystem defines our quality of life.

A healthy environment is integral to tāngata whenua. It is a tāonga (treasure) under Article II of Te Tiriti o Waitangi and needs to be protected as part of Treaty obligations. Iwi, hapū and

<sup>4</sup> Bay of Plenty District Health Board Position Statement, Health in All Policies, [150923 Health in All Policies-Board Statement of Intent \(bopdhb.health.nz\)](https://www.bopdhb.health.nz/150923-Health-in-All-Policies-Board-Statement-of-Intent)

<sup>5</sup> Lakes District Health Board, Position Statement, Health in All Policies, [Resource.aspx \(lakesdhb.govt.nz\)](https://www.lakesdhb.govt.nz/Resource.aspx)

whānau provide guidance to act as kaitiaki (guardians) to preserve the mauri (life force) of Papatūānuku.

We recognise that people have an innate human affinity (or inborn 'love, awe and respect') for nature and that for our physical and mental health and wellbeing we need the natural world to be thriving and healthy, and we need to interact with and experience healthy thriving nature in our daily lives.

Any degradation of the natural environment, especially the health of the environment, or our relationship with the environment, can weaken this connection and have consequences for Toi Ora (flourishing health and wellbeing for all).<sup>67</sup>

An individual cannot avoid breathing, consuming water or the need for shelter. Exposure to environmental contamination is largely beyond the control of individuals, particularly air pollution which means the public relies on government agencies developing and regulatory authorities implementing the provisions intended to protect the environment and human health.

Both the natural and built environment can either diminish or enhance the health of all those within them. If planned and developed in a way that preserve the wellbeing of the natural environment that people have access to, create built environments that enable healthy behaviours, communities and the natural environment thrive and support Toi Ora.

The current resource management framework is insufficiently protective of public health and has failed to include mechanisms to deliver healthy public policy planning and resource management decisions. An example in the Bay of Plenty is two airsheds are now deemed polluted and are harming human health, to the extent that one airshed pollution is contributing to additional deaths, an increase in hospital admissions and about 2500 restricted activity days per year.<sup>89</sup> The current resource management regulatory framework has not prevented contamination of the environment and inadequately protects the public health. Current efforts to now improve air quality are thwart with problems.

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<sup>6</sup> Lakes District Health Board, Built Environment position statement 13 March 2020

<http://www.lakesdhb.govt.nz/Resource.aspx?ID=50193> and Bay of Plenty District Health Board, Built Environment position statement, 18 March 2020

[https://www.bopdhb.govt.nz/media/63307/20191105\\_bopdhb\\_builtenvironmentspositionstatement\\_final.pdf](https://www.bopdhb.govt.nz/media/63307/20191105_bopdhb_builtenvironmentspositionstatement_final.pdf)

<sup>7</sup> Ministry for the Environment (2015) Māori relationship with the environment.

<https://www.mfe.govt.nz/publications/environmental-reporting/environment-aotearoa-2015-ournew-reporting-approach/m%C4%81ori>

<sup>8</sup> A restricted activity day is a day that occurs when symptoms are sufficient to limit usual activities for individuals, such as work and study, because of the quality of the air.

<sup>9</sup> TTO Report on The Bay of Plenty Regional Air Plan: Mt Maunganui Airshed. Expert advice submitted to the Environment Court of Appeal 2019.

The letter by the Hon Julie Anne Genter, Associate Minister of Health, to Hon David Parker provides a health perspective on the resource management system review<sup>10</sup>. The letter recognises the resource management system has a critical role in supporting health and wellbeing. The letter states that it is essential for the new system to include a legislative mechanism giving effect to the consideration of the impacts on health and wellbeing of resource management decisions. It also states that a wellbeing approach promoting human health and wellbeing outcomes in decision making needs to be included. Consideration to effects should not be limited to adverse health effects and should also include its positive impact on health outcomes.

In summary, the resource management system regulation needs provisions to remedy past unhealthy planning and resource use decisions and to deliver a future healthy environment that supports equity, where the health of people, land, water, air and living species are at the forefront of decisions.

#### **4. That a definition for ‘rural form’ be included in the Draft Bill**

The definition of environment refers to the natural environment and the built environment that people create. In both rural and urban communities, healthy built environments are places that are designed to support Toi Ora (flourishing health and wellbeing for all.) Urban and rural planning decisions such as zoning, transportation systems and community design significantly influence health and wellbeing.

Health can be influenced by the physical characteristics that make up an urban area, and by the rural form including the shape, size, density, and configuration that make up a rural area. Including definitions for urban areas and forms is supported however, rural environments also need to be included to highlight that planning and resource use influence health regardless of location in the built environment.

#### **5. That a definition for Health be included in the Draft Bill**

- **That the definition ‘Wellbeing’ be deleted and replaced with the following definition for ‘Health’. Health; means the physical, mental, and social wellbeing of people and communities.**

The exposure draft definition does not reflect the World Health Organizations (WHO) definition of health; “A state of complete physical, mental and social well-being and not merely the absence of disease<sup>11</sup>. The WHO definition is internationally recognised and underpinned by evidence on what determines healthy people and communities.

It also aligns with our aspirations to support a healthy natural and built environment that provides for the physical, mental, and social wellbeing of people and includes cultural and environmental wellbeing and the absence of disease or injury.

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<sup>10</sup> [Hon Associate Minister of Health letter dated 2 September 2019](#)

<sup>11</sup> 1948 World Health Organisation, Europe.

Given that population health cannot be achieved through the health sector alone, incorporating the WHO definition will support the collective efforts of the central and local government sectors and the wider community.

To include the WHO definition of Health will also support the United Nations Sustainable Development Goals (improving climate and preventing environmental degradation.)

**6. Definitions for ‘infrastructure’ and ‘infrastructure services’ are required for clarity of scope.**

The term infrastructure is used in the resource management framework to describe a wide range of systems, facilities, and services. For example, critical, public health, council, subdivisions. To clarify this term would remove ambiguity and improve consistency among the parties involved in planning and development.

**7. That the definition of ‘integrated management of resources’ recognises and provides for the impact on public health.**

Integrated management promotes an integrated, collaborative, and holistic approach to resource management that looks beyond organisation or administrative boundaries<sup>12</sup>.

Toi Te Ora represents many aspects of public interest. The Medical Officers of Health have an interest that is greater than the interest of the general public as they have responsibilities to reduce conditions within their communities that are likely to cause disease. They regularly advise councils to take steps to address the improvement, protection, and promotion of public health. Public health, however, has no mandate under the current resource management system. Locally, they develop relationships with local authority staff and decision makers and provide advice. For the most part this advice is not taken on board.

There are a number of planning and resource use policies, methods and outcomes that cut across several public health work programmes. Providing for an integrated approach to planning and resource use that is inclusive of health would provide for objective and public health perspectives that benefit everyone.

**Purpose and related provisions (Including the concept of Te Oranga o te Taiao)**

**8. That purpose 1(b) of the Act be amended to recognise that the environment is used in a way that promotes, protects, and improves the present and future health of people and communities.**

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<sup>12</sup> Taken from Waikato Regional Council website.

9. That to achieve of the purpose of the Act, the use of the environment must comply with environmental limits; avoid, remedy, or mitigate adverse effects; and promote beneficial health outcomes.

We support the purpose and the methods to achieve the purpose of the Act, in principle. However, the exposure draft does not go far enough for the health of people and communities.

The purpose of this Act should strive to improve the health of the natural and built environments for the protection and improvement of public health. To use the environment in a way that sustains health by complying with minimum or bottom-line environmental limits, and managing adverse effects does not promote, or improve the protection of, the public health.

For people to be healthy they require regulations and policy that creates healthy environments (both natural and built) which support them to adopt healthy behaviours. (Refer to Figure 2: The Determinants of Health.)

To provide for the health of current and future generations, this Act needs to enable people and communities to enjoy the highest attainable standard of health. This is considered one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.

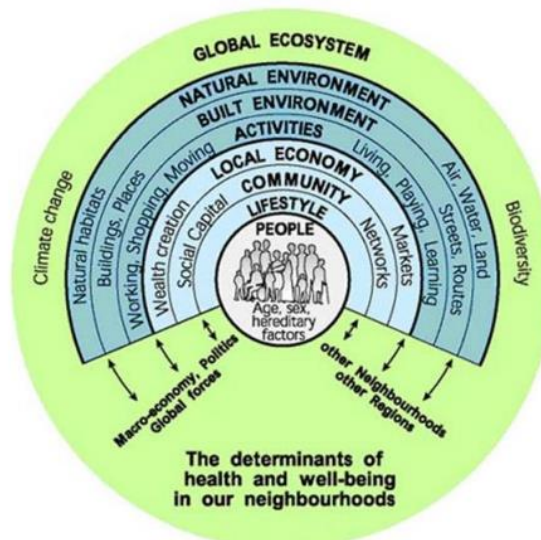


Figure 2: The Determinants of Health

10. That to achieve of the purpose of the Act, the use of the environment must give effect to the United Nation Sustainable Development Goals (SDGs)



The 17 United Nations Sustainable Development Goals (SDGs) <sup>13</sup> are a collection of 17 interlinked global goals designed to be a blueprint to achieve a better more sustainable future for all.



Figure 3: Sustainable Development Goals

**11. That this resource management system reform recognises and gives effect to the 17 SDG goals to achieve a better and more sustainable future for all.**

The 17 United Nation Sustainable Development Goals (SDGs) are the blueprint to achieve a better and more sustainable future for all. The SDGs address poverty, inequality, climate, environmental degradation, prosperity, and peace and justice. Achieving the SDGs will require cross-government effort and the alignment of government priorities.

The health sector has a central role in leading SDG 3 which is to ensure healthy lives and wellbeing for all at all ages, which is essential to sustainable development, however the reform to manage resource use and development also has key role because healthy lives and wellbeing cannot be achieved by the health sector alone.

All of the other 16 goals are directly or indirectly related to the health of the natural and built environments and the populations connection to them. SDG 11 is particularly relevant as it seeks to make cities and human settlements inclusive, safe, resilient, and sustainable. There needs to be a future in which cities provide opportunities for all, with access to basic services, energy, housing, transportation and more.

Other SDGs include:

- clean, accessible water for all is an essential part of the world we want to live in

<sup>13</sup> <https://www.un.org/sustainabledevelopment/sustainable-development-goals/>

- ensuring access to affordable, reliable, sustainable, and modern energy for all
- taking urgent action to combat climate change and its impacts
- investments in infrastructure are crucial to achieving sustainable development
- ensuring sustainable consumption and production patterns
- economic growth must be inclusive to provide sustainable jobs and promote equality.
- food and agriculture sector offer key solutions for development and is central for hunger and poverty eradication
- sustainably manage forests, combat desertification, halt and reverse land degradation, halt biodiversity loss
- careful management of the ocean, an essential global resource, is a key feature of a sustainable future
- strengthening the means of implementation and revitalise the global partnership for sustainable development
- reducing inequalities policies should be universal in principle, paying attention to the needs of disadvantaged and marginalized populations.

### **Te Tiriti o Waitangi clause**

We support clause six which requires all persons exercising powers and performing functions and duties under this Act must give effect to the principles of te Tiriti o Waitangi.

Toi Te Ora aims to achieve Māori health equity and supports Wai Ora and the core kaupapa of Māori understanding that the health of nature and of people is entwined and interconnected. As a Te Tiriti based public health service<sup>14</sup>, we support and advocate for the application of matauranga Māori (Māori wisdom) and evidence based healthy environment principles throughout all stages of resource use planning and development. We are therefore committed to giving effect to Te Tiriti o Waitangi through this reform.

### **12. That the exposure draft clarifies who sets environmental limits**

Environmental limits need to be consistent throughout New Zealand and not vary depending where a person or community is located. Regional variation promotes inequities in health. Everyone has the right to the same level of protection from environmental harm. National guidance for regions needs to be provided to ensure that natural resources have minimum acceptable limits for the protection of human health and preferred limits for the improvement of human health.

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<sup>14</sup> Bay of Plenty District Health Board, Position Statement, [te-tiriti-o-waitangi-health-equity-and-racism.pdf \(bopdhb.health.nz\)](https://www.bopdhb.health.nz/te-tiriti-o-waitangi-health-equity-and-racism.pdf)

## **Environmental outcomes**

### **13. That an environmental outcome is to promote the health of people and communities for present and future generations**

All plans must promote environmental outcomes. However, environments that support equity and the wellbeing of people needs to be at the forefront of decisions to create healthy built environments. To assist in achieving the purpose of the Act, the national planning framework and all plans need to promote the health and wellbeing of people and communities.

### **14. That the environmental outcome ‘well-functioning urban areas and urban form’ be amended to ‘healthy and well-functioning urban and rural areas and forms.’**

To seek an outcome that focuses only on the urban environment where the vast majority of New Zealander reside will not promote equity or provide for the health of all people and communities. For this reason, an environmental outcome needs to include urban and rural environments. In addition, the urban and rural environments need to provide for the health of people and communities, therefore it is appropriate that an environmental outcome includes health. The draft Bill uses the term ‘well-functioning’ which relates mainly to the physical mechanics or systems of an area and form. A healthy and well-functioning built environment would go a long way to achieving the desired outcome of this reform.

## **Natural and Built Environments Plans (NBA plans): key clauses**

### **15. That the Medical Officer of Health or their public health representative, be mandated as a Planning Committee member.**

The Panel’s proposal to develop one NBA plan per region is supported. It is noted that the Planning Committee will include local government, conservation, and mana whenua representation. Local Medical Officers of Health perspective and representation must be included when preparing regional and district NBA plans to ensure any impact on health is adequately considered and the purpose of the NBA is achieved.

Public health has a critical role to play to ensure the plan reflects both healthy built and natural environments and, to achieve best practice environmental outcomes that promote health and wellbeing. In order to improve the current resource management system, the planning process requires expert local Medical Officer of Health input into decisions that affect the health of people and communities.

Furthermore, including mandatory public health involvement in the planning process will support educating residents, and decision makers alike about the impact of planning decisions on public health. Actively including public health expertise in drafting policy will also support creating sustainable communities.

ChangeLab Solutions<sup>15</sup> has developed a road map for healthier general plans. The plan provides a suggested best practice process for health staff and government sector planners, and other parties with a role in managing resource use and development to work together to shape healthy environments for present and future generations. The resource can be found here: [A Roadmap for Healthier General Plans | ChangeLab Solutions](#)

**16. That a health impact assessment process be used to determine whether the local plans achieve the purpose of the Act to protect and improve the natural and built environment.**

The current resource management system does not assess the impacts on health of plans or policy. While monitoring the environment is included in the current system, contamination of the environment is often identified after the effect has occurred which means that health has been harmed. This approach is not protective of health. To include a requirement for all plans to undergo an assessment prior to implementation would prevent adverse effects, promote positive health outcomes and ensure desired environmental outcomes will be achieved from the outset.

**17. That considerations relevant to planning committee decisions (S.24) must have regard to the following issues:**

- Any effect and any cumulative effects of the use and development of the environment
- The extent to which the use and development of the environment promotes the health of people and their communities
- Whether the implementation of the plan could have effect on the natural environment and the built environment.

Currently the planning committee doesn't need to consider whether public health is affected. However, the planning committee needs to have regard to both the built environment (urban and rural) and natural environment to enable all the effects to be assessed to achieve the purpose of the NBA.

As the exposure draft highlights, it is important that the reformed resource management system supports environments where people can choose to live close to employment, education, health and recreation, and the opportunities they provide. Without the need for planning committees to consider how their plans allow communities to develop in ways that support the prosperity and well-being of their people, enable social and cultural connections, and minimise environmental impact, the changes are unlikely to achieve the objectives of the reform.

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<sup>15</sup> ChangeLab Solutions is a nonpartisan, nonprofit organization that uses the tools of law and policy to advance health equity.

**18. That the plans be required to include rules to manage land use activities that impact health of the community**

For the built environment to provide for the health of people and the community there needs to be rules that control the location, density, and operating hours of specific retail outlets and entertainment providers. For example, liquor outlets, tobacco outlets, fast food and gambling venues. There is a wealth of evidence that these parameters negatively impact health outcomes.

**Conclusion**

We fully support the review of the resource management system. The suggested changes made in this submission are intended to assist the Committee in its deliberations. The recommendations provide for improving the natural and built environment by promoting the health of individuals and the wider community from immediate and longterm environmental harm.