



18 May 2015

Draft Long Term Plan
Masterton District Council
Masterton 5840

Thank you for the opportunity to provide a submission on the Masterton District Council Draft Long Term Plan 2015 -2025.

Council and Regional Public Health have a common agenda – working with communities where they live, work and play to improve and protect their quality of life. Regional Public Health (RPH) wants to work with Council to make our common goal achievable and easier for our communities. By finding mutual points of interest and working together we can be more efficient, reduce the burden of engagement on our communities and be more effective in our policy implementation. A collaborative approach will also facilitate smarter use of each agencies finite resources.

This submission provides a public health perspective and information for Council to consider in their planning decisions. Masterton District Council's (MDC) policy and planning are an integral part to the health and wellbeing of our communities.

We recognize that this is the first round of the new LTP consultation documents and congratulate you on summarizing a large amount of important information into a short document. We hope to reflect this process with a concise submission. To achieve this we have selected two priority areas RPH would like to progress with Council during 2015-2025: Smokefree NZ 2025 and reducing obesity through healthy food policies.

We would appreciate the opportunity to make an oral submission and we will be pleased to provide further information or clarification on any of the points raised in our submission. The contact point is:

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Yours Sincerely

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How this document is structured:

- A. An overview of Regional Public Health.
- B. General comments on the Long Term Plan (LTP).
- C. Responses to your specific questions.
- D. RPH priorities on improving the wellbeing of our shared communities by working towards a Smokefree NZ 2025 and reducing and preventing obesity.

A. WHO WE ARE – Regional Public Health

Regional Public Health (RPH) is a regional service based at Hutt Valley District Health Board and serving the greater Wellington region. Our business is public health action - working to improve the health and wellbeing of our population and to reduce health disparities. We aim to work with others to promote and protect good health, prevent disease, and improve quality of life across the population. We are funded mainly by the Ministry of Health but also have contracts with District Health Boards and other agencies to deliver specific services.

We have a particular focus on children, Māori and Pacific populations. Our staff include a range of occupations comprising: medical officers of health, public health advisors, public health analysts, health protection officers, vision and hearing technicians and public health nurses.

B. GENERAL COMMENTS ON YOUR LONG TERM PLAN

RPH respects and acknowledges that MDC decisions have a significant impact on health. We see this through appropriate management of infrastructure (e.g. water and sewage) and creating environments that support wellbeing through reducing the exposure to tobacco, facilitating access to healthy food and promoting urban design that encourages physical activity. This is the basis for making a submission on your Long Term Plan (LTP).

RPH congratulates MDC on your focused and inclusive plan to enhance the future growth of Masterton. We see partnership as an integral part of achieving the shared outcomes of the community and the region. We commend the display of shared stewardship of the Masterton region between Council and the iwi governance committee. We support Council's plan to create roles and initiatives to foster iwi and community empowerment, this is a great move to ensure greater partnership and co-governance.

RPH commends Council for incorporating pre-consultation feedback on the LTP. The focus areas of caring for the community, the environment and improving infrastructure and economic conditions for the future are important outcomes. RPH suggests that improvements in infrastructure, the natural environment and resilience to disasters all incorporate avenues for community and iwi involvement.

Community outcomes are difficult and complex to measure, RPH commends Council for noting the uncertainties and challenges that Masterton faces in the long term; specifically New Zealand's changing demographic trends of increases in the number of older people, single member households

and two person houses with no children. We recommend that MDC focus their development on demographic and socioeconomic factors that reflect these current trends. RPH continues to work with communities to ensure sustainable, warm and energy efficient housing.

We strongly support the flood risk prediction work being done with GWRC, particularly in light of the flooding last week in other parts of the region and likely increase in severe weather events globally.

We think that a way to work towards improving quality of life for residents is for councils to incorporate a 'Health in All Policies' approach. This doesn't mean 'doing health policy'; rather, it means looking at the impact of policies, planning and decisions across-the-board on the health and wellbeing of our shared communities. An example of a 'Health in All Policies' (HiAP) approach has been undertaken by Christchurch City Council, with a focus on improved quality of life and how this can be achieved via actions from policy decisions. The HiAP approach incorporates problem solving by integrating health, wellbeing and equity into the planning, implementation and evaluation cycle. It seeks to maximise conversations between Council and community, and problem solving with evidence to support action. Furthermore, it has an evaluation framework to assess the effectiveness of projects.

RPH has been learning from our public health colleagues in Christchurch about this approach. We are willing to explore such an approach if it is of interest to the Council.

RPH can assist MDC with public health policy advice on request. We have skilled staff who can participate in or provide advice on policy/planning development and implementation processes.

Fluoride

Community Water Fluoridation

It is likely that there will be submitters to the LTP who are opposed to community water fluoridation. RPH supports the continuation of community water fluoridation, based on national and international scientific research.

Wairarapa District Health Board (WDHB) covers the MDC geographic area and therefore, for consistency in advice, we have included WDHB's position on community water fluoridation.

"The Wairarapa District Health Board endorses community water fluoridation as an effective public health measure contributing to the maintenance of oral health, prevention of tooth decay and reduction in health inequalities. Community water fluoridation is a low cost measure that benefits people of all ages with natural teeth and has proven over the last 65 years to be very safe. Local drinking-water supplies that are already fluoridated should remain so. Where technically feasible, where local supplies are not fluoridated, local authorities are encouraged to implement water fluoridation programmes as soon as possible to improve the oral health of their communities."¹

¹ <http://www.huttvalleydhb.org.nz/content/64ba1cff-c2a3-4af5-b0cb-32fc215cee03.cmr>

RPH can continue to provide Council with the latest scientific research and work alongside Council staff to ensure clarification is provided to the community on water fluoridation issues.

C. IN RESPONSE TO YOUR SPECIFIC QUESTIONS

1. What is your position on the proposed overall rates increase of 2.9% in 2015/16

No comment.

2. Do you agree with the Council's proposal to keep rates increase under the rates increase limit over the next 10 years?

No comment.

3. Do you support the following provisions Council has made to improve standards and reduce our environmental impact.

We support the provisions Council has set forth for installing LED streetlights.

We commend Council on work to improve water treatment facilities in Masterton. We understand demand management is a key issue when rivers are running low and that water metering is a good resilience action to ensure water security. We suggest that Council account for cost barriers that will occur through water metering. We strongly recommend that the cost barriers are minimized for individual users, especially for the economically deprived. Furthermore, we suggest that Council look into policy mechanisms that allow for a certain threshold of usage to be met, before costs are incurred on the user.

We support the planning options being explored for improving effluent discharge.

4. Overall, do you support the general direction Council is proposing for the next 10 years?

We support Council's approach of Ahutahi Ki Mua. Inclusive growth alongside the community, iwi and key stakeholders will yield better wellbeing and health outcomes for Masterton.

5. Do you support the following proposed new projects?

- **Library Improvements**

No comment.

- **Sports Facility Improvement**

We support all activities that encourage physical activity. We suggest that to ensure the greatest benefit from activities that support physical activity that Council use a HiAP approach. RPH can provide support with implementing such an approach.

- **Expanded On-Road Cycling Routes**

See above comment.

- **Expanded Off-Road Recreation Trails for Cycling**

No comment.

- **Investment in Rural Cycling Networks that link to the National Trails**

We support the connection of the rural cycling network to the national trails. We suggest that this approach of network optimisation be used for other cycling infrastructure projects as well.

- **Neighborhood improvements**

We support Council's plan to improve neighborhoods. We suggest Council seek to maximize partnership opportunities in the community to achieve common outcomes for neighborhood improvement. An example of this would be shared costs and use of sports or performing art facilities between schools and the community. Another initiative Council could capitalize on would be to optimize cycleway route planning by encouraging the bikes in schools program. The combined effect of infrastructure planning and cycling promotion would result in children learning bicycle safety and then having the confidence to use cycle routes that have connections from their home to school. Cycling for children encourages physical activity and improved understanding of the benefits of physical activity that contributes to reducing obesity.

Greater Wellington Regional Council has experience at introducing bikes in school programmes in other regions, so there is potential to build this partnership also.

- **Establishing a Resource Recovery Centre**

No comment.

- **Opening the Nursery Road Transfer Station**

No comment.

- **Upgrading the CBD**

We support Council's plan to upgrade the CBD. We recommend that Council allow for transport choice and networks that allow for safe, comfortable street systems with

supportive social environments². Such an approach creates a socially diverse environment as everyone – affluent or poor, young or old – has equal access to amenities regardless of whether they own a car.

- **Investment in Economic Development Projects**

No comment.

D. RPH PRIORITIES

RPH wants to support MDC in planning for environments that reduce exposure to tobacco and facilitate access to healthy food and increased opportunities for physical activity.

SMOKEFREE 2025

RPH congratulates MDC for the progress you have made in this space already, for example through smokefree parks, and wants to continue to work with you to progress this important area. RPH also commends the Council on the Smokefree Recreation Space Policy the Council introduced in 2009, as a key regulatory move that will have a strong impact towards achieving the Smokefree 2025 goal.

What are the public health issues?

Tobacco smoking kills approximately 5000 New Zealanders every year. Smoking is the main cause of lung cancer and is a significant contributory cause to many other cancers and chronic diseases.

Our public health advisors (tobacco) work in many areas including enforcement of the Smokefree Environments Act, supporting smokefree policies and better help for smokers to quit - all of which support the Government's goal of a Smokefree New Zealand by 2025.

Our goals are:

- Creating environments that normalises being smokefree.
- More smokefree environments.
- Fewer young people and children start smoking.
- More smokers quit.

RPH can work with Council to demonstrate leadership in achieving Smokefree NZ 2025 by:

1. Helping Council in the development of a licence scheme for tobacco retailers (thus facilitating reducing the sales to young people and minors).
2. Encouraging Council and workplaces to provide smoking cessation workshops for staff.
3. Working with Council to develop smokefree policy and clauses for Council sponsored or affiliated events and all Council venues.

² Ministry for the Environment. The Value of Urban Design: The economic, environmental and social benefits of urban design. 2010

4. Working with Council on providing smokefree rental accommodation.

RPH has a range of smokefree resources and health information available, including banners for loan free of charge. Please contact us if you would like support for your smokefree community event.

REDUCING AND PREVENTING OBESITY

RPH commends MDC on the cover of the LTP consultation document- “Ahutahi Ki Mua – Moving Forward Together”. This dynamic title and photo encapsulate our shared outcome of increased activity and obesity reduction.

RPH recognises and supports MDC’s previous work on supporting increased physical activity, for example, supporting the development of cycleways and pedestrian walkways. We would like to continue to support MDC with strategies to increase physical activity, such as supporting promotions of public and active transport utilisation.

RPH recommends MDC now gives focus to the next level of intervention, to create an environment that supports easy access to healthy, affordable food in communities where people live, learn, work and play. MDC has an opportunity to show leadership in identifying and implementing strategies that support and promote healthy food provision in communities, Council owned cafes, vending machines, catering and sponsored events.

What are the public health issues?

Childhood obesity is one of the most serious public health challenges of the 21st century. Having good food choices and opportunities for physical activity is imperative. The Prime Minister’s chief science advisor, Sir Peter Gluckman, recently stated in a World Health Organisation report on ending childhood obesity:

“There is an understandable tendency to see obesity as a problem for the health sector, but preventing childhood obesity demands the coordinated contributions of government ministries and institutions responsible for policies on education, food, agriculture, commerce and industry, finance/revenue, sport and recreation, media and communication, environmental and urban planning, transport and social affairs.”³

By next year, it is projected that excessive body weight will overtake tobacco use as the leading risk to health, making obesity a significant issue for New Zealand⁴. International research recognises the close relationship between healthier populations and economic prosperity, arguing that healthy populations stimulate economic growth, lower health care costs, lure new businesses and create jobs⁵.

³ WHO interim report of the commission on ending childhood obesity. World Health Organization 2015, p.23
<http://www.who.int/end-childhood-obesity/commission-ending-childhood-obesity-interim-report.pdf>

⁴ Briefing to incoming health minister 2014 <http://www.health.govt.nz/publication/briefing-incoming-minister-health-2014>

⁵ Reeve,B., Ashe,M., Farias, R., Gostin, L.. State and Municipal Innovations in Obesity Policy: Why Localities Remain a Necessary Laboratory for Innovation. American Journal of Public Health: 105.3 (March 2015): 442-450.

What role does the Council have in reducing and preventing obesity via healthy food policy?

A further range of opportunities are available to MDC to contribute to affordable, healthy food access, as well as the reduction and prevention of obesity. These opportunities could include further supporting:

- fruit and vegetable co-operatives
- community gardens and markets
- opportunities for cooking and nutrition literacy
- nutrition standards
- food policy for council owned facilities and events
- implementing good urban design principles
- reviewing food retail zoning conditions

Policy and environmental change have been identified as the foundation of obesity prevention in an environment that promotes eating too much and moving too little⁶⁷⁸⁹. Food policy is a cost effective and sustainable tool to support a healthy nutrition culture. An example of this this is provided within the Healthy Together Victoria's *Achievement Programme*¹⁰, and by an increasing number of District Health Boards and some councils. Within our region, Hutt City Council has been designated as a site for the Healthy Families NZ initiative, which is based on the Healthy Together Victoria model. This provides a local case for how healthy nutrition (in addition to focussing on other risk factors for poor health) can be implemented, utilising cross sector engagement with central government, local government and District Health Boards.

RPH would like to work alongside MDC to support and prioritise strategies that impact the food environment and the significant and unequal burden of nutrition related diseases in the Wairarapa region.

⁶ Egger G, Swinburn B. An "ecological" approach to the obesity pandemic. *BMJ* 1997;315: 477-80.

⁷ Harvard School of Public Health. The Obesity Prevention Source www.hsph.harvard.edu/obesity-prevention-source/ (accessed 2 June 2012)

⁸ Haby M, Vos T, Carter R et al. A new approach to assessing the health benefit from obesity interventions in children and adolescents: the assessing cost-effectiveness in obesity project. *Int J Obes* 2006;30:1463-75.

⁹ Vos T, Carter R, Barendregt J et al. Assessing Cost Effectiveness in Prevention (ACE Prevention): Final Report. Brisbane: University of Queensland and Melbourne: Deakin University; 2010.

¹⁰ Healthy Together Victoria, Achievement Programme. Healthy Eating Benchmarks. Accessed 03 March 2015 at http://www.achievementprogram.healthytogether.vic.gov.au/downloads/Accessible_PDFs/Workplace/Benchmarks/Healthy_Eating_Benchmarks_WP.pdf