



20 April 2015

Greater Wellington Regional Council
P O Box 11646
Wellington 6142

Draft Long Term Plan 2015-2025

Thank you for the opportunity to provide a written submission on the Greater Wellington Regional Council Draft Long Term Plan 2015-2025.

Greater Wellington Regional Council (GWRC) and Regional Public Health (RPH) have a common agenda – working with communities, where they live, work and play to improve and protect their quality of life. RPH wants to work with GWRC 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.

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

We recognise that this is the first round of the new Long Term Plan consultation documents and congratulate you on summarising 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 GWRC during 2015-2025:

- Smokefree NZ 2025
- Reducing obesity through healthy policies.

We would appreciate the opportunity to make an oral submission and we would 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

Dr Jill McKenzie
Medical Officer of Health

Peter Gush
Service Manager

How this document is structured.

- A. An overview of Regional Public Health service
- B. General comments on the Long Term Plan
- C. Responses to your specific questions
- D. RPH priorities around how we can improve the wellbeing of our shared communities by working towards a Smokefree NZ 2025 and reducing obesity through healthy food policies.

A. WHO WE ARE - Regional Public Health

Regional Public Health is a regional service, organisationally part of Hutt Valley District Health Board but 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 THE LONG TERM PLAN

RPH respects and acknowledges that GWRC 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.

RPH congratulates GWRC on publishing a Long Term Plan which has moved away from 'business as usual' planning, to a future needs focused plan, which aims to raise the resilience of the region.

We support GWRC's aim to "improve the quality of life for residents". We also commend the key outcomes of a strong economy, connected community, resilient community, healthy environment and engaged community. RPH suggests that improvements in infrastructure, the natural environment and resilience to disasters all incorporate avenues for community and iwi involvement.

RPH would be willing to contribute towards GWRC's aim of increasing the numbers of people walking, cycling, using public transport and carpooling. We see our work overlapping closely with this aim and we commend GWRC for having this as a focus point. RPH supports further exploration of innovative ways to ensure the appropriate drivers are in place to influence choice of transport mode and to manage the shortfall in central government funding.

RPH commends the plan for capped fares, with reduced fares for children and off peak hours. We see this as important in order to ensure that access to public transport remains equitable and an attractive low-cost option compared to private transport.

We think that a way to work towards improving quality of life for residents is 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, where the focus has been on the improvement on the quality of life and how this can be achieved with actionable 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 the council and community, problem solving with evidence to support action. Furthermore, it has an evaluative 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 GWRC with public health policy advice on request. We have skilled staff that can participate in or provide advice 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. Based on national and international scientific research, RPH supports the continuation of community water fluoridation: “Fluoridation remains the safest and most appropriate approach for promoting dental public health”¹.

RPH can provide GWRC with the latest scientific research on this matter and a comprehensive tailored workshop for elected members and/or council officers if it would be of interest, such as we have previously provided.

C. RESPONSE TO SPECIFIC QUESTIONS

Do you support our long-term strategy for regional infrastructure?

We support the long term regional infrastructure strategy. We recommend that improvements and resilience building be tied closely to people-centred built environments and increased access to natural environments which are a highlight of the region.

Do you support GWRC keeping doing our existing activities?

Yes.

Which packages would you give priority to? Indicate (by selecting the number) the priority you think is right for each of the six packages.

¹ Justice Collins page 4 <http://www.medsafe.govt.nz/consultations/medicine-regulations-fluoride-in-drinking-waterREPORTonAnalysisOfSubmissions.pdf> February 2015

RPH priorities

1. Getting out and about (walking, cycling, running, scootering)
2. Getting more people to use public transport
3. Public transport infrastructure
4. Environment and water quality
5. Protecting communities from flood risks
6. Keep the water flowing.

We understand that it is impossible to have a hierarchy for such packages, as they are all very important to keep the region safe and productive. In addition, the activities and outcomes for each package are not mutually exclusive. The listing is an indication of high priority projects because the impacts are more likely to be longer lasting for the communities.

Do you think there are any other major issues GWRC should be focussing on for the next 10 years apart from those identified?

Yes. RPH's key message in this submission is that **we seek the support of elected members to work with council officers to progress Smokefree New Zealand 2025 and to reduce obesity through healthy food policies.**

D. RPH PRIORITIES

RPH wants to support Council in planning environments that reduce exposure to tobacco and facilitating access to healthy food and facilitate increased physical activity for our communities.

SMOKEFREE 2025

RPH congratulates GWRC for the progress they have made in this space already, for example through smokefree regional parks, and wants to continue to work with you to progress this important area.

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 Smoke-free 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 normalise being smokefree
- More smokefree environments
- Fewer young people and children start smoking

- More smokers quit

RPH can work with GWRC to demonstrate leadership in achieving Smokefree New Zealand 2025 by:

1. Extending smoke-free parks, including all GWRC properties, reserves etc.
2. Encouraging GWRC to provide smoking cessation workshops for staff.
3. Working with GWRC to develop smoke-free policy and implementation guidelines for events and venues.

RPH also 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 events.

REDUCING AND PREVENTING OBESITY

GWRC has a number of roles in creating opportunities for increased physical activity including: development of a robust public and active transport infrastructure; promoting utilisation of active and public transport; and maintenance and promotion of outdoor environments such as regional parks and reserves and recreational water sites.

RPH recognises and supports GWRC's previous work in prioritising cycleways and increased pedestrian walkways. RPH recommends GWRC 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. GWRC have an opportunity to show leadership in identifying and implementing strategies that support and promote healthy food provision in communities, GWRC-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 Organization 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.”².

² 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>

By 2016, it is projected that high body mass index will overtake tobacco use as the leading risk to health, making obesity a significant issue for New Zealand³. 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 jobs⁴.

What role does the Council have in reducing obesity?

As noted we acknowledge the role that GWRC has in creating environments that support and promote physical activity, but RPH would like to recommend an increased focus on supporting healthy eating environments.

We congratulate GWRC for the work you are doing with EnviroSchools. The EnviroSchool programme provides opportunities for children to learn where their food comes from through gardening and how to prepare it for a healthy meal. These skills align with the work we are promoting around increased nutrition literacy.

We would welcome GWRC's further support on the following activities to prevent and reduce obesity, as they contribute to healthy food access and increased physical activity:

- community gardens (through EnviroSchools)
- opportunities for cooking and nutrition literacy (through EnviroSchools)
- food policy for council owned facilities and events
- implementing urban design principles, that increase transport choice and opportunities for physical activity (bikes in schools, school cycle tracks)

Policy and environmental change have been identified as the foundation of obesity prevention in an environment that promotes eating too much and moving too little^{5,6,7,8}. Food policy is a cost effective and sustainable tool⁸ to support a healthy nutrition culture. An example of this this is provided within the Healthy Together Victoria's *Achievement Programme*⁹, 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 and physical activity can be implemented, utilising cross sector engagement with central government, local government and

³ Briefing to incoming health minister 2014

⁴ 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.

⁵ Egger G, Swinburn B. An "ecological" approach to the obesity pandemic. *BMJ* 1997;315: 477-80.

⁶ Harvard School of Public Health The Obesity Prevention Source www.hsph.harvard.edu/obesity-prevention-source/ (accessed 2 June 2012)

⁷ 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.

⁸ 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.

⁹ 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

DHBs. An example of GWRC activity could be to support local schools with the development of cycle tracks on site to promote road safety and physical activity, or to consider the food policy for the breakfast supplied at promotional activities such as Walk to Work Day.

RPH would like to work alongside GWRC to support and prioritise strategies that impact the food environment and the significant and unequal burden of nutrition related diseases in the Wellington region. Likewise we would like to continue to support GWRC with strategies to increase physical activity, such as supporting promotions of public and active transport utilisation.