

30 October 2020

Upper Hutt City Council
838 – 842 Fergusson Drive
Upper Hutt 5018
PC50@uhcc.govt.nz

Re: Shaping Urban Growth and Rural Development (PC50)

Tēnā koe,

Thank you for the opportunity to provide a written submission on this consultation.

Regional Public Health (RPH) is the public health unit for the greater Wellington region (Wairarapa, Hutt Valley and Capital & Coast District Health Boards). Our purpose is to improve and protect the health of the population in the greater Wellington region with a focus on achieving equity. We work with our community to make it a healthier and safer place to live. We promote good health, prevent disease, and improve the quality of life for our population.

The reason for this submission is to ensure that considerations of public health and equity are included in the planning for Upper Hutt City's future. The Ministry of Health requires us to reduce potential health risks and promote good health by various means, which includes making submissions on matters of importance to the communities we serve.

We would be happy to arrange a meeting to further discuss and clarify any points raised in this submission. The contact point for this submission is:

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Ngā mihi

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OVERVIEW

Regional Public Health (RPH) **congratulates Upper Hutt City Council (UHCC) on progressing Plan change 50**. The district plan allows for appropriate housing growth which is important to ensure affordable and accessible high quality housing for all residents of Upper Hutt. Supporting housing with integrated planning allows housing to be developed alongside public and active transport options, community amenities, and communal and accessible open and green space, all of which contribute to building healthy communities and neighbourhoods.

Housing is of particular importance in the light of the public health challenges we have recently faced, and that will continue to be part of the future for UHCC and other areas. The COVID-19 pandemic has highlighted the importance of warm, dry, safe and affordable housing, particularly during lockdown when whānau spent more time in their homes than ever before. Whānau living in damp, cold and overcrowded houses are at a greater risk of contracting respiratory illnesses, including COVID-19. Regional Public Health has also noted an increase in notified Rheumatic fever cases in 2020 with new cases reported across the region. This has directly impacted Māori and Pacific whānau and tamariki who are disproportionately represented due to poverty and poor housing conditions.

The COVID-19 pandemic has positioned cities at the forefront of both the response and the recovery. Urban centres have seen the exodus of people from commercial facilities, as businesses close during lockdowns and more people work from home. They have also been challenged to optimise the movement and congregation of people using public transport and navigating public spaces in ways that minimise disease transmission. COVID-19 has raised questions of how we foster community cohesion and resilience, when traditional places and spaces where the community gathers may be unavailable for sustained periods of time or need to be used for other purposes. Also, the economic consequences of the pandemic in urban centres increase the challenge of providing vulnerable persons with access to health and public health resources, and the safe and secure accommodation that fosters wellbeing and protection

These health and social concerns intersect with how we manage land use and development in cities and rural areas, a key function of district plans. Key questions include how does the cities' built form and open spaces support healthy and resilient communities? And how are our natural resources and biodiversity protected? The WHO defines the Social Determinants of Health¹ as "the conditions in which people are born, grow, live, work and age". This holistic definition recognises that the environment of cities directly influences health and wellbeing because urban settings are where, for the majority of the population, we spend most of our time. It is essential, both for our community at present, and for our community in the future that we think about how we can grow Upper Hutt City in a way that promotes health and wellbeing for residents. Promoting health and wellbeing should be considered as fundamentals, alongside other objectives identified in the district plan.

¹ World Health Organisation. Available at: https://www.who.int/social_determinants/sdh_definition/en/#:~:text=The%20social%20determinants%20of%20health,global%2C%20national%20and%20local%20levels.

KEY THEMES FOR PC50

A number of themes identified in PC50 align with Regional Public Health's focus on improving health outcomes by addressing the Social Determinants of Health.

Please note that RPH has focused its attention on the "residential" component of PC50, however many of the key issues identified may be translatable to a rural area, for example the importance of climate change mitigation strategies.

RPH commends UHCC on their focus on the following areas and makes further recommendations as to how PC50 can further support community health and wellbeing:

Management of Growth Areas

RPH commends that in Objective 1 and the associated policies there is a focus on ensuring access to public and active transport, building in climate change resilience into new developments, reducing greenhouse gas emission and encouraging renewable energy sources, alongside ensuring urban design best practices are followed and ensuring adequate infrastructure to support three waters and other requirements.

Specific recommendation for Objective 1 and associated policies:

RPH recommends that UHCC introduce inclusionary zoning for a specific time period in appropriately identified development zones.

There is a risk, with housing and urban development, of creating a city of two-halves, with clear delineations between those with wealth and those without. The proposed development zones will allow for a diverse range of housing types and densities but the plan must also ensure affordable and quality housing. UHCC cannot rely on private enterprise alone, to provide affordable and quality housing to whānau with low-incomes and low-wealth. Home ownership in the Wellington region is one of the most expensive in the country. Upper Hutt City set a record median house price in September 2020 of \$710,000 up from \$566,000 the year previously². Through the new housing development zones identified, UHCC has a prime opportunity to take an active role in integrating housing by ensuring that developers include affordable and quality housing for low-income and low-wealth households, Māori, Pacific peoples, refugees and youth. Housing need is particularly high among this group.

RPH notes that housing development alone is insufficient to guarantee access to affordable housing. The number of applicants for social housing as recorded on the social housing register has grown nationally by more than 50% compared to June 2019. In Upper Hutt City there are currently 164 applicants registered (as of June 2020) compared to 118 the year before. The majority of these, 147

² REINZ September 2020 report. Available at: <https://www.reinz.co.nz/Media/Default/Statistic%20Documents/2020/September/REINZ%20Monthly%20Property%20Report%20-%20September%202020.pdf>

applicants, are assessed as priority A, indicating the applicants are considered “at risk” and in need of “immediate” access to suitable housing.³ This data only captures those who have registered with the Ministry of Social Development (MSD) and are eligible for social housing. It does not include whānau who are ineligible for social housing and cannot afford private rentals, those who have dropped off the MSD list, and those who are in transient accommodation or are staying with extended whānau in overcrowded housing.

RPH also notes there is insufficient housing stock for the current population in Upper Hutt. This has a direct impact on low-income families with specific impacts on Māori, Pacific peoples, refugees and youth who are unable to find appropriate or affordable housing to meet their basic needs.

Inclusionary zoning can be a short-term solution where there is population growth, a shortage of affordable housing and where the housing supply is slow to respond. Evidence from Queenstown, as well as internationally, has found that inclusionary zoning has a very minor impact on neighbouring properties. The use of inclusionary zoning is beneficial when introduced for a limited time.

A type of inclusionary zoning was trialled during the re-development of Pomare, Lower Hutt City. Below is one example where a community housing provider was able to support a low-income family into home ownership which resulted in secure housing and educational opportunities for a young boy.

Shared-ownership model of home buying: “I’m living in my forever home!”

(Dwell Housing Trust)

Mary, a single mother, with her son Sam now live in their own home in Riverside Garden, Pomare. Prior to moving into what Sam describes as his “forever home”, Mary and Sam, who was 8 at the time, lived in seven different places over a period of 20-months. Unable to afford to buy their own place and through a series of bad luck with the private rental market, Mary and Sam moved from friend to family member. In 2014, Dwell Housing Trust put out a call for low-income families who were interested in buying a new affordable home. Dwell Housing Trust trialed a shared-ownership model of providing affordable housing with six properties in Riverside Gardens. How this model of ownership works is that the whānau buy into a percentage of the market price (this is between 70-90% based on what they can afford) and Dwell owns the remaining share of the home (e.g. 30%) and acts as a silent co-partner. The whanau is then expected to buy-out Dwell’s share over a period of 10 years. Mary with support from her wider family was able to pay off her other debts and make the required deposit for the shared-ownership purchase model and has had safe and secure housing for her son.*

**Names changed to protect privacy.*

³ Ministry of Social Development. The Social Housing Register June 2020 data. Available at: <https://www.msd.govt.nz/about-msd-and-our-work/publications-resources/statistics/housing/index.html>

RPH recommends that the healthy streets design indicators⁴ be considered and incorporated into the design of road types in new developments. The Healthy Streets Approach was an initiative by the city of London that aims to put people and their health at the centre of decisions about how public spaces are designed, managed and used with the intent of making streets healthy, safe and welcoming for everyone. New development allows UHCC to explore the opportunities of designing an area that places health and wellbeing at the centre, creates a community where people, young and old, interact with each other and the environment, choose to travel by active and public transport and enjoy living in the area. The healthy streets design indicators include:

1. **People choose to walk, cycle and use public transport** – shared pathways and cycleway provided;
2. **Pedestrians from all walks of life** – clearly marked and smooth walkways;
3. **Easy to cross** – safe, easy, clearly marked and accessible crossings. It is important that it is easy for people of all ages and abilities to find a safe place to cross without having to go out of their way;
4. **People feel safe** – measures such as appropriate lighting, hand rails and traffic calming measures around key destinations (retirement village, childcare facilities, schools, commercial areas) all ensure that people feel safe from crime and injury;
5. **Things to see and do** – visually appealing streets encourage active transport;
6. **Places to stop and rest** – resting places encourage mobility for people who maybe ill, injured, older or very young;
7. **People feel relaxed** – people are more likely to walk or cycle when they feel relaxed and find it enjoyable;
8. **Not too noisy** – noise barriers from main arterial roads;
9. **Clean air** – consideration for any air pollution from main arterial roads;
10. **Shade and shelter** -- public areas that have shade and shelter encourage people to gather and spend time together despite the varied weather.

Medium and High Density Residential Areas

People choosing to live in Upper Hutt City come from diverse backgrounds and have diverse needs. Providing a range of housing densities and typologies within the proposed development zones will support and contribute to the richness of the diversity of Upper Hutt City. In the interests of equity, and meeting the needs of Upper Hutt City's most vulnerable residents, it is essential that growth areas contribute not only to an increase in residential housing, but that this is affordable and accessible to those most in need. This can be partially achieved by ensuring a mix of housing density.

RPH supports the strategies identified to ensure high density housing is well designed to maintain and enhance community amenity and improve urban character, including through assessment of building dominance and effect on street scene, use of landscaping, use of recession planes to ensure

⁴ Guide to the Healthy Streets Indicators: Delivering the Healthy Streets Approach, Transport for London. Retrieved 25/06/2020 from: <https://healthystreetscom.files.wordpress.com/2017/11/guide-to-the-healthy-streets-indicators.pdf>

sunlight access; ensuring sufficient accessibility to greenspace and communal greenspace areas; and integration of community facilities and amenities.

Siting higher density housing near to transport routes and suburban centres encourages the use of public transport, and especially active transport (walking, jogging, cycling) to navigate the city and daily activities. This confers advantages on multiple levels. Reducing dependency on cars and motorised transport reduces congestion and removes impedances to public transport flow around the city. It is good for the environment as it reduces carbon emissions and it is good for health as it encourages the individual to be physically active in their community. Non-communicable diseases, such as heart disease and cancers, drive most of the ill-health and premature loss of life experienced by New Zealanders.⁵ Promoting physical activity is one way we can reduce the impact of these diseases.

Review of evidence has shown that living in proximity to green spaces in an urban environment is generally associated with “increased physical activity, positive health behaviours and improved health outcomes”⁶ This effect is present across the life course and appears to be particularly important in early life. Specific features of green space design such as condition, coverage/shade, and openness/visibility can be associated with green space usage. For parks this can include specific features such as safety, maintenance, sports facilities and other facilities such as walkways and paths. In adulthood, access to green space and engaging with nature is associated with behaviours, such as walking and with reduced risk of stress and psychological distress. In later life facilities such as seating, toilets and drinking water facilitate ongoing engagement with a green space and its associated health benefits.³ This suggests that overall “greenness” of urban landscapes and distribution of accessible parks and green space facilities can improve health and well-being of children and adolescents, and contribute to maintaining this across a lifetime.

Housing Diversity and Choice

The development of new housing will have benefits in terms of growing the UHCC population but may not address the existing housing need for low income and Māori and Pacific whānau.

We tautoko the support to enable papakainga housing in Upper Hutt City. This activity, alongside working more closely with Iwi in the region, may help the council to further identify opportunities to improve equity in access to housing for Māori whānau in the city. It is important that we also look to support affordable housing across the city that will facilitate more Māori, Pacific and low income families into housing. It is important that these areas of housing also include access to the same community amenities - public transport, green space and parks, community facilities – as we would experience in other neighbourhoods in the region.

Specific recommendation for Objective 4 and associated policies:

⁵ Ministry of Health. 2020. Health and Independence Report 2018. Wellington: Ministry of Health. Available at: <https://www.health.govt.nz/publication/health-and-independence-report-2018>

⁶ Douglas O, Lennon M, Scott M. Green space benefits for health and well-being: A life-course approach for urban planning, design and management. *Cities*. 2017 Jun 1;66:53-62.

RPH recommends the specific inclusion of universal accessibility standards as a priority area of activity under PC50. Currently many people living with a disability in the greater Wellington region face challenges in finding suitable housing and accessing community facilities and locations. It is essential that we address this in the new building and planning that is undertaken as a result of new developments.

Environmental Controls and Climate Change

RPH supports the strategies identified in both Objectives 1 and 7 to ensure new developments consider climate change resilience, reduce greenhouse gas emissions and encourage renewable energy sources. Likewise, ensuring urban design best practices are followed and ensuring adequate infrastructure to support three waters and other requirements.

Climate change, natural disasters, pandemics and other hazards can significantly impact communities in terms of infrastructure and building damage, loss of access to essential services such as power and water. Threats to health and wellbeing are both from the acute effects of the hazard, and the stress and trauma of the recovery. It is important that our communities are well prepared to meet these threats, through well designed buildings and infrastructure that is resistant to damage, and through places and spaces that support communities to develop networks of collaboration and support, both during and outside of an emergency.

Specific recommendation for Objective 7 and associated policies:

RPH recommends including explicitly the protection of indigenous biodiversity in natural and open spaces alongside other climate change mitigation practices.

The Draft National Policy Statement on Indigenous Biodiversity recognises that the peoples of Aotearoa are both part of and dependent on the natural environment for our survival. Promoting indigenous biodiversity through preservation of habitats and protection of animal, aquatic, bird and insect life, is crucial for the wellbeing of us all. The policy statement also identifies that whilst some of the most important ecosystems and habitats are located within Aotearoa's large area of public conservation land, other important indigenous biodiversity is on privately owned and Māori land. Identifying these areas in the district plan and recognising the priority of protecting these ecosystems is important for the health and wellbeing of our community.⁷

INTEGRATING HEALTH INTO PLANNING

There is a huge opportunity for the health contributing potential of cities to be better recognised in the district plan. Many of the themes that emerge from the PC50 about improving access in new developments to public transport, increasing walkability and bike use, developing greener and carbon neutral cities, and providing healthy and affordable homes, are all related to positive health

⁷ Ministry for the Environment. 2019. Draft National Policy Statement for Indigenous Biodiversity. Available at: <https://www.mfe.govt.nz/sites/default/files/media/Biodiversity/draft-npsib.pdf>

outcomes for whānau in the community. In its present form, PC50 is silent on how proposals on planning relate to health outcomes and how these changes could improve measures of health and wellbeing for communities. **RPH recommends that health is integrated into any district plan to ensure that health and well-being of the community is prioritised.**

RPH would like to offer our support to ensure that health is incorporated into UHCC's final district plan.

There are a range of practical tools that can be used during the planning process to ensure health and wellbeing is a core part of the final outcomes. These tools are all flexible, and can be used in their entirety or used as the basis for discussion and appraisal of spatial planning work. Tools and approaches include:

- **Health Equity Assessment Tool⁸:** a tool that aims to improve equity in health in New Zealand. It consists of a set of ten questions that assess the current and future impact of policies on health equity.
- **Health Impact Assessment or Whānau Ora Health Impact Assessment:** systematic way of assessing the positive and negative health impacts of a policy, with particular attention to inequities.
- **Health Promotion and Sustainability through Environmental Design⁹:** a planning guide developed by Christchurch City Council and Community and Public Health (Christchurch's Public Health Unit). Divided into 14 themes that identify the links between environmental design and community health and wellbeing.
- **Integrated Planning Guide¹⁰:** also developed in Christchurch, originally focused on earthquake recovery, but updated in 2018 to focus on city planning more broadly. Presents targeted questions to encourage critical thinking and innovation. Presents a way of ensuring sustainability, resilience and health are integrated into planning, alongside social, environmental and economic outcomes.
- **Identify opportunities to have dedicated public health expertise as part of the council workforce:** given the significant impact of spatial planning on wellbeing and health, UHCC could consider funding dedicated public health expertise to work alongside planners for the duration of the project.

For further information on these tools please do not hesitate to contact us. We welcome the opportunity to remain involved as PC50 evolves, and to meet with planners to discuss how we can best support them in this work.

⁸ Available at: <https://www.health.govt.nz/system/files/documents/publications/health-equity-assessment-tool-guide.pdf>

⁹ Available at: <https://www.ccc.govt.nz/assets/Documents/The-Rebuild/Strategic-Plans/hpstedqualitativeview110519.pdf>

¹⁰ Available at: <https://www.cph.co.nz/wp-content/uploads/IntegratedPlanningGuideV3.pdf>