

Delivering Healthy Communities

RTPI Good Practice Note 5

About these Guidelines

Delivering safe, healthy and attractive places to live are key objectives of spatial planning. It is important to ensure that planning decisions contribute to opportunities to improve health for communities by promoting the public health agenda.

One way to ensure this is by integrating public health and spatial planning processes, enabling the two professions to promote health through the delivery of neighbourhoods that promote and provide opportunities for active lifestyles. This in turn will assist in the management of health service demands and budgets by promoting healthier communities. The planning system must also engage with health service providers in order to deliver appropriate facilities in the communities in which they are needed. In order to deliver sustainable development that effectively meets the needs of all sections of the community, the health of a community must be considered at all stages of the planning process

Planning, and the provision of health care, are now very similar in being part of the remit of the devolved administrations. Rather than describing in detail the different systems of delivering health care for England, Wales, Scotland and Northern Ireland, this document will outline the basic structures, provide signposting to the relevant sources of information, and then outline key recommendations on how and when to work together.

This Good Practice Note (GPN) is one of a series prepared by the Royal Town Planning Institute (RTPI) primarily intended for planning practitioners in the UK. However, this GPN is also intended to provide assistance for other stakeholders involved in planning and health delivery processes. Some of the generic advice may also benefit professionals outside the UK.

The GPN provides advice under four headings:

- Setting the Context (Part A)
- Joint Working between Planning and Health (Part B)
- Planning Principles For Healthy Communities (Part C)
- Sources of Further Information (Part D)

This guidance has been led by the RTPI Environmental Planning and Protection Network (EPP). It is available to download, along with supporting online resources and case studies at www.rtpi.org.uk/item/1795/23/5/3. Additional resources are also available to EPP Network Members at www.rtpi.org.uk/environment_planning_and_protection_network/



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mediation of space · making of place

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Part A Setting the Context

Relevance to Spatial Planning

Planning professionals have long worked collaboratively with environmental health professionals to reduce and mitigate the impacts of activities that negatively affect human health. Whilst in the past this has focused on avoidance of pollution or danger, more recently attention has turned to the provision of infrastructure and services which have a positive impact on human health, such as quality open space. This has become more significant in light of the Wanless report¹, which concluded that there is likely to be an increasing funding gap between the demand for health services and the sector's ability to meet those demands. Addressing this gap requires long term and strategic action, reducing the demand for health services by promoting a healthier population.

Spatial planning has a key role to play in shaping environments which make it possible for people to make healthier choices about exercise, local services, travel, food, nature and leisure.

Determinants of Health

Health is defined by the World Health Organisation as more than the absence of disease, but as a state of complete physical and mental wellbeing². Whilst access to health care is often prioritised in the debate around health and planning, it is arguably more important to plan to enable people to live healthier lifestyles in order to reduce the need for such care.

The built environment can have a significant impact on the determinants of health, as well as ensuring the provision of health infrastructure and services. For example, the ways in which buildings and places are configured influence people's living, working and travel patterns; the shape of the local economy; people's opportunities to access local food; and their propensity to be physically active. At the same time, patterns of pollution will affect the local environment and in turn affect human health.

Health Inequalities

The relationship between socio-economic status and health is complex. Some inequalities are generated at, or even before birth, whilst others relate to risks and behaviours experienced throughout life. Recent research has demonstrated that it is possible for individuals to alleviate some of the risks that they have accumulated in the past, for example, by giving up smoking or by taking up exercise.

However, the social conditions in which people live powerfully influence their health. Poverty, social exclusion, poor housing, unhealthy living conditions during childhood and low educational and occupational status all contribute to health deprivation. This suggests that one of the best ways to reduce health inequalities is to tackle the gap between rich and poor. Area-based approaches are an attractive means of doing this, as they allow for local involvement and targeting of limited resources, e.g. improving schools, housing, transport links, green space and access to services. However, as deprivation is not wholly area-based, these approaches need to be complemented with strategies that target individuals. While some area-based initiatives have had beneficial effects on educational attainment, employment and housing quality, in cases where housing costs have been increased by such interventions, this can exacerbate poverty and work against long term health improvements.

It is important to note at the outset that low socio-economic status as outlined above does not always relate to the health of an individual, family or a community. Those who are wealthier may also be at risk of poor health. It is for this reason that the planning system distributes options for improving health across the entire community.

Healthy Urban Planning and Sustainable Development

The social definition of health as physical, mental and social wellbeing directly corresponds to the concept of sustainable communities synonymous with spatial planning. Even without formal public health training, planners increasingly recognise the public health impacts of development. These

impacts contribute to environmental issues such as climate change and biodiversity. There are strong synergies between the measures used to mitigate and adapt to climate change and those associated with addressing health issues. The common themes focus upon:

- Promoting walking and cycling to reduce car use and carbon emissions;
- Building energy efficient homes to reduce carbon emissions and fuel poverty and protect against temperatures from extreme winter lows and summer highs;
- Delivering mixed use development and multi-use community buildings that reduce the need to travel by providing services close to where people live, thereby reducing carbon emissions and providing opportunities for social interaction;
- Providing parks and open spaces that provide a “green lung” for towns and cities, whilst providing a safe and quality space for leisure and exercise;
- Enhancing employment opportunities for all by providing the structure for a diverse, strong economy that reduces inequalities.

The synergies between planning, sustainable development and health mean that, in essence, delivering a sustainable community is delivering a healthy community.

Policy Framework

There is a strong policy basis for spatial planners and health professionals to work together to deliver healthy communities. The focus on local partnership working and the improved co-ordination of services has provided an impetus to improve health and reduce inequalities.

Different planning systems operate across the UK and these will require different approaches to how health planning is addressed. There are, however, common themes among the nations, including the need to identify health issues at the start of the planning process, and supporting the promotion of health by making provision for physical activity.

The RTPi website provides more information on the policy frameworks relevant to the UK nations: www.rtpi.org.uk/item/1795/23/5/3

Part B Joint Working Between Planning and Health

Working Together

Despite the obvious synergies, there is still a lack of real understanding between planning and health professionals. In order to help bridge the gap between the professions, the Department of Health has published two complementary guides aimed at planners and health professionals respectively, outlining the way in which the health and planning systems in England operate³.

The structures and responsibilities of health and planning authorities vary across the UK, and are subject to occasional change. The following gives a broad summary of the responsibilities of different organisations at the time of going to press.

Planning policies can be developed around a health theme, or as a cross cutting issue. This is because many of the policy themes in development plans - for example housing, transport and employment - will have a real impact on health. The aim should be to promote health through positive planning and development outcomes, and to prevent negative effects on health from development. Guidance is available⁴ and tools such as health impact assessment can be drawn upon.

Providing for Health Care Services

There is an emerging agenda to reduce reliance on acute services by improving the health of the community in the wider sense. The task for spatial planning in helping to meet this challenge is to collaborate with the health sector in making and shaping places that prioritise physical and mental wellbeing. Spatial and health planners need to identify and plan for an accessible distribution of modern facilities which meet the needs of the anticipated, often rapidly changing population. This process requires:

- Spatial alignment of plans: requiring the full engagement of planning and health authorities (strategic or local) to share evidence, trends and objectives to ensure the right services are available in the right place at the right time;
- Flexibility: facilitating the necessary change in the health estate, which in large part still stems from the 19th Century, to allow reorganisation; and
- Agreed and funded infrastructure delivery plans: using planning obligations, infrastructure levies or similar, to assist in meeting the needs generated by new development – this may require longer-term planning by health authorities than is currently the case.

This process of reprioritisation also needs to link to other services, so that opportunities for co-location of services and facilities can be optimised. These plans will constitute a key component of plans for infrastructure delivery that form part of a development plan.

The key message for engaging with the health sector is the need to establish effective, ongoing dialogue between health and planning authorities. The Healthy Urban Planning Toolkit⁵ produced by NHS London's Healthy Urban Development Unit (HUDU) is a useful guide on how to develop such a dialogue.

Health services and infrastructure developed without regard to its location, siting, catchment population, or access to transport, leaves a legacy of poorly planned and inaccessible health services. On the other hand, positive outcomes of more recent spatial planning processes have stemmed from proper integration of health and spatial planning which strategically link siting, transport and the needs of the community with other services and facilities.

Tools and Techniques

There is clear scope for the employment of environmental assessment tools both to protect and improve human health. Effective spatial planning requires not only that health is explicitly considered in planning policy and major development proposals, but that the assessment of health is fully integrated into other assessment tools such as Environmental Impact Assessment (EIA). Consideration of 'Human Health' is also a legal requirement in Strategic Environmental Assessment (SEA).

Health Impact Assessment (HIA) is increasingly being used to inform spatial planning decisions. Evidence suggests⁶ that planning authorities are more frequently requesting HIAs as part of the documentation for outline planning applications, particularly for large, mixed-use developments, either as a stand alone exercise or as part of the EIA.

Part C outlines recommendations for achieving healthy communities.

Part C Planning Principles for Healthy Communities

This section identifies the main issues which underpin the development of a healthy, sustainable community and makes recommendations on how planners can integrate them into their policies, plans and projects.

The purpose of these principles is to assist planners, as well as those working in public and environmental health, the health service and the management sector, to contribute to the development of healthy communities through the planning, design and development process. They are not a detailed blueprint, but rather a set of recommendations to guide decision-making. The RTPI urges planners to use and implement these principles in plan making and place shaping, and when evaluating plans, schemes or proposals.

Partnership and Inclusion

Society and Culture

The Issues

A sense of community identity and belonging is important for health. Planning policies and development cannot create 'communities' by themselves, but they can encourage or discourage the formation of social cohesion and social capital, which are important determinants of longevity and quality of life.

The opportunity for communities to help shape their surroundings is central to sustaining a sense of place and ownership. This also has a positive influence on health.

High incidences and fear of crime can reduce social solidarity leading to adverse psychological consequences which can contribute to isolation and vulnerability, particularly for those groups most at risk such as the elderly, disabled, children and lower socio-economic groups. In addition, it has been suggested that residential exposure to crime and violence has been linked to health outcomes such as the prevalence of asthma.⁷ There is an overlap here with general community safety advice, including initiatives like 'Secured by Design'.⁸

Specifically, providing for adequate opportunities for children to play is extremely important and is intrinsic for children's health. Research also suggests that when children play outdoors, establishing relationships with other children in the area, it has a positive effect on community cohesion, encouraging relationships between adults and confidence in the safety of the area. Establishing positive patterns of physical activity throughout childhood is also likely to carry through to adulthood which can increase health.

The RTPI Recommends

- Communities should be planned with a range of employment, services, infrastructure, and tenures to meet the needs of the community.
- Developments should be designed to ensure areas are permeable and accessible by all parts of society.
- Provision of facilities either on- or off-site should be made for communities or groups whose activities are displaced by development.
- Neighbourhoods should include well-designed places where all sectors of the community can gather, interact, and be physically active: for example shared places of worship, community centres, sports facilities and community spaces. The community should be involved in their design and management.
- Consider the designation of home zones or similar environments in suitable residential areas which may benefit from enhanced pedestrian priority, providing opportunities for community contact and play.
- Work collaboratively with other organisations and government departments to provide services for children, and support the provision of well-located play areas. Ensure local caregivers and children are involved in the design process.

Governance

The Issues

Governance requires effective and inclusive participation, representation and leadership from a range of government and non-government organisations, as well as community and focus groups. The Wanless Report 'Securing our Future Health' demonstrated that where public engagement in relation to health is high, the health of the population is dramatically improved and there is relatively less demand on healthcare resources.

Participation in itself can promote health, as people are more likely to take control of their health if they feel they can influence other aspects of their lives. People who are isolated and live in less cohesive communities are more likely to experience poor health than those from more cohesive neighbourhoods. Community involvement fosters the development of community feeling and social capital, which itself can be beneficial for health.

Health Impact Assessment is defined by the World Health Organisation as:

"A combination of procedures or methods by which a policy, programme or project may be judged as to the effects it may have on the health of a population."

The RTPI Recommends

- Spatial and health planning should be integrated in the early stages of developing plans and programmes. This will require joined-up working between practitioners.
- Plans should be developed with the active involvement of all of those likely to be affected, both existing residents and potential incomers. It is important to involve 'hard to reach' groups, who may be most vulnerable. This needs to be properly resourced. See the RTPI Good Practice Note 1: Effective Community Involvement and Consultation⁹ for specific tools for achieving this.
- The impact of proposed developments on human health should be explicitly considered when strategies or schemes are being put forward. This is best done by HIA as part of the wider environmental assessments that are required for schemes or policies.

Healthy Neighbourhoods

The Issues

Poor quality neighbourhoods can have a negative impact on the health of those who live in them. It is important that housing and streetscape design are considered as part of a neighbourhood that go towards building social relationships as positive contributions toward health.

Mixed communities with a range of housing types and tenures, well-designed walkways, cycle routes and streets are most likely to reduce health inequalities and can help to avoid segregation within a community. Neighbourhoods with nearby parks and green space help to support opportunities for physical activity. Such areas are particularly helpful to children and their carers and older people by reducing the risk of social isolation. Good design of these spaces encourages greater community ownership of the environment and reduces negative effects such as vandalism and the under-use of facilities.

A major consideration in planning new communities is the UK's aging population, which will influence the future design of the built environment and housing provision. The opportunity to maintain independent living as people grow older strongly depends on the provision of the right sort of housing in the right places. However, the majority of new homes being built do not meet the changing needs of people as they get older. Some of the inadequacies in ordinary mainstream family housing could be improved by simple design modifications to ensure that changing needs are met.

The RTPI Recommends

- Neighbourhoods should be designed to promote walking and cycling, with easy access to well-managed formal and informal green spaces and play areas, and to shops, services, schools and employment areas.
- Design homes and neighbourhoods that are flexible and adaptable to meet the needs of the local community as well as people's changing needs. This should include considering the needs of the aging population¹⁰ recognising the contribution of older residents to communities.

- Provide adequate levels of purpose built, specialised extra care housing, in which varying amounts of care and support can be offered and where some services are shared.
- Design all homes to reduce environmental effects such as hazardous noise and the adverse reliance of heating/cooling leading to unsustainable and expensive energy use.
- Use existing plan making and development management processes to promote access to a diverse range of healthy foods.

Recognising Rural and Urban Differences

It is important to recognise that issues and solutions can be different for urban and rural communities.

While both urban and rural communities can experience poverty and deprivation, the causes, symptoms and impacts of these can be very different.

Rural communities, for example, have difficulty accessing services, due to distance and limited public transport provision. They may also encounter limited choice in the provision of convenience shopping potentially affecting the affordability of fresh food.

Urban communities, by contrast, can suffer from higher levels of pollution and disturbance, and a lack of access to natural or semi-natural green space.

There is a perception that mortality rates within rural, countryside communities are lower than within urban areas, thanks to clean air and 'healthier' lifestyles. However this is not always the case. It should be recognised that rural communities are not uniform; areas of deprivation can be hidden amongst favourable averages, with socio-economic characteristics and health outcomes varying greatly within small rural areas. Strategies for rural health are not evident, with the exception of the Welsh Assembly Government which is currently developing a rural health plan for Wales.

In both urban and rural communities, health issues are more problematic for certain groups, including those in poverty and the elderly.

Providing Services

The Issues

A full range of appropriate and accessible public, private, community and voluntary services are essential for sustaining healthy local communities.

Clustering services increases the options for multi-purpose trips and encourages the incorporation of exercise into everyday life, whilst facilitating informal meeting and social cohesion, and reducing isolation. Co-location and integration of services offers the possibility of new and more effective models of care. These objectives can best be met by health managers and planners working in partnership to link health property management and plan making, ensuring for example that appropriate sites for health facilities are identified in plans.

Communities most in need of treatment and preventive services have often had least access to them.

The RTPI recommends

- Local facilities should be clustered within centralised areas that are well located in relation to walking, cycling and public transport routes. This is often ideally located within town centres as they are usually highly accessible by public transport and road infrastructure.
- Co-location and integration of services including health, education, social services, arts and leisure should be considered. 'Healthy Living Centre'¹¹ approaches should be considered.
- Ensure that there are facilities for sports, including indoor and outdoor facilities for all ages that encourage social interaction and physical activity.
- Communities should be planned to include local markets to provide opportunities for buying local fresh produce.
- Communities should be planned to include space for allotments, market gardens and small scale food production.

- Facilities for primary medical care and dentistry should be identified and planned for when developing new neighbourhoods and funding sought from government, developers and other funding sources through the infrastructure plan. The impact of the development on secondary care and ambulance services should be explicitly addressed.
- Education facilities, with strong neighbourhood connections, should be planned into developments from the start. Schools should be accessible by safe cycling and walking. Schools should have good access to facilities for sport and exercise, such as playing fields and creative playing areas, and take account of differing needs of genders.
- Capital and revenue funding should be phased with developments so that service infrastructure is available and functioning at the same time as housing and other developments are brought forward.
- New development should contribute to facilities to support new residents without decreasing the provision for the existing community. Where the development is focused on aging citizens, on-site facilities or easy access to centralised facilities should be considered.

Economy

The Issues

Income can affect the health of an individual, family or community. Low income can increase a person's risk of accidents, infections and illnesses such as heart disease. Low income groups are also more likely to engage in some health-damaging behaviour such as smoking.

The location of employment sites can also have a negative impact on a person's health. Isolated employment developments can lead to the exclusion of vulnerable groups and the use of unsustainable methods to travel to work. Economic developments should reduce rather than increase health inequalities. Effective urban regeneration can help to resolve these issues; however, it can also lead to adverse health impacts, leaving existing residents poorer and less

healthy, but masked by the arrival of healthier and more affluent new residents. This emphasises the need for a strong evidence base that details the socio-economic factors of a community.

The RTPI recommends

- Employment, housing and social facilities (including health) should be located with good access between them, ideally clustered in and around town centres to provide good access to shopping, education and public transport opportunities.
- Employment should be accessible by sustainable means (walking, cycling, public transport), and sustainable transport plans should be required where new development is proposed.
- Employment profiles of the local community should be assembled and used to identify the needs of more vulnerable groups.
- Facilities for families such as child care should be available in close proximity to employment and residential areas to reduce or combine trips.
- Communities should have access to up-to-date technology together with the provision of space for home offices, local affordable office space, internet cafes, and new-start incubator units.
- Training routes should be developed to ensure that local people and marginal groups can compete for future employment opportunities, particularly for access to local employment.

Planning for Active Lifestyles

The Issues

Access to green space and natural areas has a positive influence on physical and mental health. Four mechanisms are thought to be evident:

- direct protection from environmental exposure (e.g. air pollution, flooding);
- promotion of restoration, relaxation and reduction in stress;
- promotion of physical activity; and
- promotion of social interaction and cohesion.

Living in a neighbourhood with greenery and good quality, accessible parks can contribute to a healthy and physically active life reducing stress, obesity and other cardio-diseases. Obesity is a significant social and health issue which has reached increasing levels of concern for government and health officials.

Predictions suggest that 60 percent of men and 50 percent of women will be obese by 2050¹², with extreme health and economic consequences. Childhood obesity is also a significant concern.

Recent policy developments from the National Institute of Clinical Excellence (NICE) and the Department of Health in England recognise the impact of the built environment on people's ability to make positive changes in their life to improve their health. 'Healthy Weight, Healthy Lives'¹³ recommends building physical activity into everyday lives.

The provision of open space has been a long-standing concern of the planning system. The quantity, quality, and variety of open spaces are important for health. In addition, the quality of the places where we live, work, learn and play is a major determinant of how active we are. Research has shown that lower quality open space is detrimental to people's wellbeing, often because it is compromised by graffiti, litter and vandalism. These issues can lead to under-use of spaces due to fear of crime. Not only does a good environment assist in promoting active lifestyles, but there is also evidence that aesthetics and other elements of design can promote health and encourage general wellbeing.

The RTPI Recommends

- Provide local open spaces: this means providing a variety of spaces for people to use and observe. Views from buildings can have a positive health benefit, so consideration needs to be given to the environment surrounding workplaces as well as homes.
- Promote local community interaction with their open spaces to improve and maintain their quality through partnerships (such as local authorities and local community groups) e.g. tree planting, cleaning of graffiti, etc.
- Design transport routes that include trees and greenery which are aesthetically pleasing, as well as contributing to health by providing shade and opportunity for wildlife. Simple design policies can establish street trees as an important feature in all new development (for example along transport routes).
- Plan strategically for overall greenness across the local authority area: the balance of land uses between hard and soft, brown and green will affect temperature, air quality and flooding, and is particularly important in the context of climate change. If the overall level of green cover is low, policies can be used to increase the proportion of accessible green space and soft surfaces.
- Where green space is limited, look for ways to improve the quality of existing spaces and implement creative ways to include green spaces such as converting disused railways, sustainable urban drainage, rooftop gardens etc.
- Promoting good design as green design: encourage developers and designers to incorporate plants, trees, open spaces and soft surfaces into new development wherever possible.

Protecting the Environment

Environment Issues

The Issues

Healthy environments contribute to good health and spatial planning is a significant contributor to this. It is important for planners and health professionals to work together in formulating plans and policy on a range of environmental considerations.

Waste (and its disposal/management) and transport are major generators of gas pollutants. Many chemicals are injurious to health. Air pollution has short- and long-term damaging effects on health and can worsen existing lung and heart diseases. Resource extraction and construction generates traffic, noise, vibration, fumes and dust, all of which if not properly managed can damage the health of the surrounding population.

People spend about 90 percent of their time indoors, and exposure to pollutants can be greater indoors than outdoors. Good ventilation and non-polluting construction methods can help to minimise these risks.

Children are particularly sensitive to the harmful effects of environmental hazards; they breathe more air, drink more water, and eat more food relative to their size than adults. Children in deprived areas are most exposed to harmful environmental conditions/factors.

The effects of flooding can also be detrimental to one's health through water borne infections and contributing to psychological problems.

The RTPI Recommends

- Ensure that contaminated land exposure assessment is carried out on brownfield development sites.
- Ensure waste management encourages the reduction, recycling and reuse of waste at household and development sites.
- Minimise exposure to air pollution through the separation of noisy and polluting industrial areas from residential and service areas, and promote 'good neighbour' policies.

- Promote clean and green industries and identify ways to better integrate employment uses with residential development to provide good access between uses.
- Design and construction methods should minimise the ingress of dust and fumes, provide good ventilation, and minimise the use of volatile organic compounds and allergenic materials. Ensure developers minimise the potential adverse impacts of construction through adherence to appropriate codes of construction practice.
- Ensure new development is designed to reduce the risk of flooding, including reducing the use of non-permeable hard surfaces.
- Minimise the use of non-renewable and maximise the use of renewable energy sources, materials and modes of transport.
- Reduce carbon emissions by location, siting and design of new developments. This can also be relevant for new or upgrading public transport routes. Opportunities to use micro-generation technology should also be pursued.
- Aim for 'carbon neutrality and on site renewable energy generation.

Design for Safety and Wellbeing

The Issues

Poor neighbourhood design can contribute to a negative experience of a place and limit the use of the public environment. The design of streets, buildings and public spaces can reduce crime such as vandalism and graffiti through passive surveillance. Research shows that parents are often reluctant to let their children play outside because of concerns about their safety.

It has been recognised that an integrated approach is required to designing good places to live in that are safe and healthy. Collaborative initiatives and guidance have been produced. These include the Secure by Design guidance and awards system developed by the UK Police; Safer Places guidance developed on behalf of the Home Office and Office of the Deputy Prime Minister (now CLG); Building Health produced by the National Heart Forum, Living Streets and CABI; and the Building for Life initiative developed and promoted by CABI and the Home Builders Federation in England.

The RTPI Recommends

- Design well defined and located routes, public spaces and parks that allow direct, convenient and safe movement and use.
- Provide an appropriate mix of land uses and environments that have a clear distinction between private space and public areas.
- Ensure that all publicly accessible spaces such as streets, paths, parks, car-parks and public squares provide opportunities for passive surveillance.
- Promote a sense of ownership, respect, territorial responsibility and community.
- Include well-designed security features where necessary and appropriate.
- Consider the long-term management and maintenance of public areas as part of the design process.

Transport and Road Safety

The Issues

Transport has a direct impact upon health through pollution, noise and traffic issues such as congestion and safety. These issues can result in the reluctance of the community, particularly children, to use spaces for passive exercise such as walking and cycling.

There is a link between reduced access to transport, access to essential services, and health. Women, the unemployed, the elderly, those in low income groups are more likely to experience transport related social exclusion.

Poorly designed transport solutions can have immediate negative effects on health, such as through air and noise pollution, as well as making a longer-term contribution to climate change. As urban areas tend to have a greater exposure to higher levels of noise and air pollution, the effects on health of the population can be negative.

Transport infrastructure systems can also contribute to the severance of local communities. They may be transverse, occurring only at certain times of the day and thus preventing people from accessing services which, although

located nearby, are on the other side of a major transport corridor during peak periods. Severance may also be longitudinal, where cyclists and pedestrians are dissuaded from travelling along a transport corridor. Certain groups are more likely to be affected by severance, such as the young, women and the elderly.

The RTPI Recommends

- Give the highest priority to pedestrians, cyclists and other 'active travel' modes when developing or maintaining streets and roads.
- Plan and provide a comprehensive network of routes for walking and cycling which offer convenient, safe and attractive access to employment, homes, schools and other public facilities.
- Ensure the integration of public transport and active travel networks (i.e. walking and cycling with buses, trams and rail).
- Promote 'active travel' for example ensuring new developments have adequate bicycle provision, including safe storage, or that new workplaces contain showers and clothes drying areas which will facilitate walking and cycling to work.
- Ensure transport systems are designed to guarantee access to essential services that reduce total car travel or create a more diverse transport system.
- Plan for the provision of park and ride schemes to provide access, particularly for people who live in more car dependent, rural locations.
- Identify and implement measures to reduce transport severance, noise levels and air pollution.
- Recognise the needs and responses of different social groups, particularly those experiencing health inequalities, to transport policies, projects and services.

Part D Sources of Further Information

A regularly updated and comprehensive list of further sources of information, including individual publications, useful websites, networks and case studies is available from the supporting webpage at: www.rtpi.org.uk/item/1795/23/5/3

- 1 D. Wanless, 2002, 'Securing our future health: taking a long-term view' HM Treasury: London.
www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4074426
- 2 www.who.int/en/
- 3 www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_078980 and
www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_078977
- 4 Cavill, N. Building Health: Creating and Enhancing Places for Healthy, Active Lives. What needs to be done? 2007, National Heart Forum. Available at www.heartforum.org.uk

Cave, B. and Molyneux, P. Healthy sustainable communities: spatial planning checklist. 2004 Milton Keynes and South Midlands Health and Social Care Group. Available at www.mksm.nhs.uk

NHS Healthy Urban Development Unit. Watch out for health. A Healthy Sustainable Communities spatial planning self appraisal checklist for London. 2005. Available at www.healthyurbandevlopment.nhs.uk

NHS Healthy Urban Development Unit. Health and urban planning toolkit. 2007. Available at www.healthyurbandevlopment.nhs.uk

Ballantyne, R. Building in health. Milton Keynes South Midlands Health and Social Care Group. 2006. Available at <http://www.mksm.nhs.uk/FileAccess.aspx?id=143>

Department of Health. Draft Guidance on Health in Strategic Environmental Assessment. For consultation, 2007. www.dh.gov.uk
- 5 www.healthyurbandevlopment.nhs.uk/pages/hudu_model/hudu_model.html
- 6 Quigley, R., L. den Broeder, P. Furu, A. Bond, B. Cave and R. Bos. (2006). "Health impact assessment: International best practice principles. Special publication series No. 5." www.iaia.org
- 7 Wright RJ and Fisher E B. "Putting asthma into context: community influences on risk, behavior, and intervention" in Neighborhoods and Health eds. Kawachi I and Berkman L F New York, Oxford University Press. 2003: pp.233-262.
- 8 www.securedbydesign.com
- 9 www.rtpi.org.uk/item/1007/23/5/3
- 10 Within the context of RTPI work on housing for an ageing population, undertaken in close liaison with the Department of Health, this practice note advises on the planning implications of this new housing form. (October 2007). www.rtpi.org.uk/item/1279/23/5/3 .
- 11 See examples such as: <http://www.eehlc.org.uk/home/index.php>.
- 12 Foresight: Tackling Obesities: Future Choices project, www.foresight.gov.uk published in October 2007
- 13 Healthy Weight, Healthy Lives; A Cross Government Strategy for England, 2008
www.dh.gov.uk/en/PublicHealth/Healthimprovement/Obesity/HealthyWeight/index.htm

The advice contained in this guidance is relevant for town planners and other stakeholders involved in planning and health delivery processes in the UK. Some of the generic advice may also benefit professionals outside the UK.

This guidance has been written by members of the Healthy Communities Task Group, part of the RTPI Environmental Planning and Protection Network. More information about the Network is available at:

www.rtpi.org.uk/environment_planning_and_protection_network/

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