

## **BOPDHB Position Statement**

### **Liveable Environments**

#### **Introduction**

The Bay of Plenty District Health Board (BOPDHB) is required under its enabling legislation, the New Zealand Public Health and Disability Act 2000, section 22:

- to improve, promote, and protect the health of people and communities;
- to promote the inclusion and participation in society and independence of people with disabilities;
- to reduce health disparities by improving health outcomes for Maori and other population groups;
- to exhibit a sense of social responsibility by having regard to the interests of the people to whom it provides, or for whom it arranges the provision of, services;
- to exhibit a sense of environmental responsibility by having regard to the environmental implications of its operations.

The BOPDHB has prepared a series of position statements which demonstrate its commitment to these objectives, and outlines its viewpoint on different health issues. This position statement on Liveable Environments also aligns to other position statements, including Health Inequalities and Physical Activity and Nutrition, and is implemented through the DHB's Annual Plan.

#### **1.0 The Bay of Plenty DHB affirms the following:**

- 1.1 Being able to live, work, learn and play in safe and healthy environments is one of the key social determinants of health. This is equally important across all phases of the life course. A safe and healthy living environment is a necessary base on which health services can be delivered by public and private agencies. The consequences of not having liveable environments are higher rates of respiratory disease, some cancers, cardiovascular conditions, obesity, and diabetes.
- 1.2 The DHB cannot achieve safe and healthy living environments alone. It will work in a collaborative manner with central, regional and local government agencies, both at governance and operational levels, with the aim of enhancing interior and exterior living environments. It will actively participate in inter-agency forums and planning groups including:
  - SmartGrowth;
  - Bay of Plenty Regional Council and the five local authorities in the BOPDHB district;
  - Bay of Plenty Regional Transport Committee;
  - WHO forums such as Healthy Communities, Safe Communities; Age-Friendly Communities;
  - Collaboration Bay of Plenty (CoBoP) and its work streams such as the Social Wellbeing Cluster and Bay of Connections.
  - Whanau Ora Regional Leadership Group
  - Settlement Support Network Group
- 1.3 The achievement of safe and healthy living environments begins with strong public health legislation and national policy settings. The BOPDHB-employed statutory officers (Medical Officers of Health, Health Protection Officers, Smokefree Officers) will administer public health legislation that leads to safe and healthy living environments e.g. Health Act 1956 and regulations, Smoke-free Environments Act 1990, Sale of Liquor Act 1989, Resource Management Act 1991.



- 1.4 The population expects to be protected from one-off disasters. The DHB will meet its statutory obligations under the Civil Defence Emergency Management Act 2002, and support other agencies in the health sector to plan for and mitigate the harms from natural and man-made disasters.
- 1.5 The public expect that their living environment is safe and healthy wherever they go about their daily activities. The DHB will support programmes such as Health Promoting Schools and pre-schools, workplace programmes such as WorkWell, healthy marae and home-based support care programmes to improve the living environments in education facilities, workplaces, cultural bases and homes.
- 1.6 The basis for wellbeing is a safe and healthy home. The DHB will work with other funders such as the Energy Efficiency and Conservation Authority (EECA), third party funders and approved insulation and heating providers to improve the indoor living environments for families living in cold, damp and mouldy homes. In addition, the BOPDHB will work with local authorities and the Building and Housing Group within the Ministry of Business, Innovation and Employment to reduce the numbers of unsafe and insanitary houses, and reduce over-crowding in homes, a major contributor to infectious disease spread such as acute rheumatic fever and skin infections.
- 1.7 Communities have the right to have a voice on how their neighbourhoods can be shaped to promote safe and healthy lifestyles. The DHB will support place-based community development initiatives to determine the safe and healthy neighbourhoods that residents wish to live, work, play and learn in.
- 1.8 1.8 The DHB will make submissions where relevant to central, regional and local government on legislation, bylaws, strategies, and plans that will promote the development of safe and healthy living environments.

## **2.0 The Bay of Plenty DHB notes that:**

- 2.1 The pursuit of safe and healthy living environments requires contributions from a number of government sectors and the community itself. Many health conditions arise from poor management and the unequal distribution of the social determinants of health and tangata whenua determinants of health. The BOPDHB is well-suited through its Planning and Funding teams and Toi Te Ora-Public Health Service to contribute itself through its own funded service delivery, and to support other sectors, to achieve population health goals in community settings.
- 2.2 The BOPDHB may play a leadership or supportive role, depending on different circumstances. The BOPDHB may be able to contribute through advocacy, funding, planning, health expertise, statutory roles, data/information or engagement skills. Which role the BOPDHB takes in each circumstance will depend on its immediate applicability in achieving DHB priorities and health outcomes.
- 2.3 The use of evaluation tools such as Health Impact Assessment and Whanau Ora Health Impact Assessment to review draft strategies, policies and plans in the wider government sector can improve the safety and health qualities of living environments.
- 2.4 Healthy living environments can be promoted through good urban planning, leading to increased uptake of physical activity, greater social connectedness, and improved access to services for people who have disabilities or do not have access to a private motor vehicle.

**Adopted by the BOPDHB Board at its meeting on 19 December 2012**

**Review** This position statement will be reviewed in three years, or as necessary.

