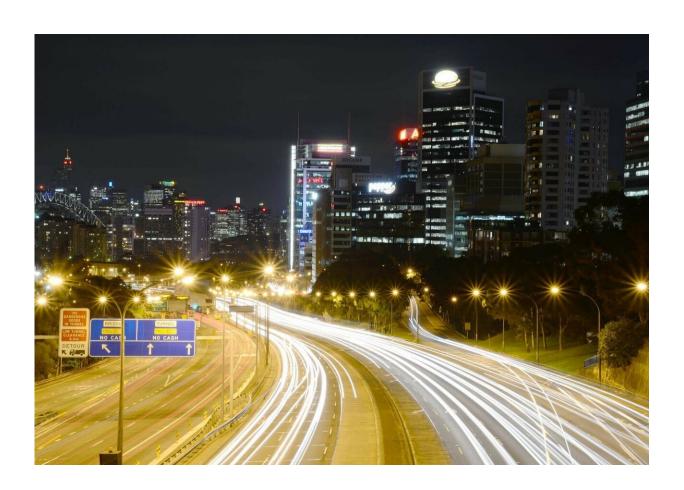


Fault lines appear in 'livable city' urban plans

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Researchers analysed what the New South Wales Long Term Transport Master Plan 2012 has delivered for improving the social determinants of health. Credit: Pixabay

Two of Australia's leading strategic urban plans could be used or



expanded to do much more to promote better places to live for all residents, according to a new report.

In-depth assessments of the Thirty Year Plan for Greater Adelaide 2017 (TYPGA) found it is not doing enough to address social and health issues due to a bias towards economic progress, while New South Wales Long Term Transport Master Plan 2012 (NSWLTMP) has a narrow focus on improving transport rather than raising social determinants of health.

"The new urban form and livability ambitions of the Adelaide plan have the potential to support a range of important socio-<u>economic factors</u>," says Professor Fran Baum, director of the Southgate Institute for Health, Society and Equity at Flinders University.

"However, the emphasis on increasing livability as a means of enhancing global image can see public infrastructure investments diverted away from outer suburbs towards more affluent suburbs with the best global connections—of where demand for property is high within a 10km radius of the CBD.

"This trend will increase health inequities in the long term," she says.

The social determinants of health are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life, according to the World Health Organisation.

The two plans were selected as good practice in urban planning policy after researchers from Flinders and the University of Sydney analyzed 108 urban planning policy documents and selected legislation from all Australian state and territory jurisdictions for their ability to progress social determinants of health and health equity.



Co-lead author Dr. Michael McGreevy, who has an urban planning background, says the NSW plan's goal of creating a polycentric city connected by a networked public transport system also has the potential to improve health, healthy equity and social inclusion.

"However, an emphasis on transport investments to reduce congestion may see infrastructure funds diverted away from those that facilitate equitable access to those which reduce travel times," Dr. McGreevy warns.

"The priority of tackling congestion and reducing average <u>travel times</u> has the potential to undermine these benefits as it tends to direct investments into infrastructure to facilitate car travel over other modes.

"In particular, investing in roads, particularly urban freeways, reduces walking, cycling and public transport use and increases average vehicle kilometers traveled which leads to more pollution, more road trauma, more time spent in cars, less physical activity and poorer population health.

"It tends to favor public transport investments that are best able to clear traffic in specific areas at specific times of day by encouraging people with cars to take alternative means not improve metropolitan access for residents without cars."

Professor Baum urged policy-makers to take a fresh look at urban planning.

"In the right political climate, livability can provide an avenue for the advancement of policies to support the social determinants of health," she says.

"Outer suburbs, which are disproportionally populated by people who



are less well-off, have worse health status and would benefit most from more 'livable' suburbs, but are not often afforded the same attention or potential resources investments into livability.

"The findings also found planning for the future transport needs of Sydney prioritized reducing road congestion over and above livability, and with the often-explicit goal of facilitating the global competitiveness of the city."

The researchers examined the documents in light of leading social factors such as health and welfare systems, employment, income, education, housing, food, culture, natural and built environment, climate change, open space, transport, social relationships, land or country connection, social exclusion, gender and safety.

The paper, "Can health and health equity be advanced by urban planning strategies designed to advance global competitiveness: Lessons from two Australian case studies" has been published in *Social Science & Medicine*

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