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PLAN-ED model: the view from Europe the case of health-integrated planning in a comparative perspective

Presentations for ACSP 52nd Annual Conference University of Utah, Salt Lake City 13-16th October 2011

Laurence Carmichael – Caroline Bird
WHO Collaborating Centre for Healthy Urban Environments University of the West of England, Bristol, UK
Question: added value of Atlantis for UWE and WHO?

1. Role for planning education in face of new challenges in EU/USA

2. Role for integrating health into the planning process?
   – Discourse should be mainstream but lost along the years
WHO CC: rebuilding the links at for the discipline, the practice and the profession

Research
- *Health map/Spectrum*
- *Evidence reviews/knowledge exchange/ EU research*

Market research and curriculum development
- *US/AU/NZ trends for cross-disciplinary health and planning*
- *CPD on-line course, MSc Healthy Cities*

Knowledge transfer to practice
- *Health audits,CAP workshops, survey WHO healthy cities, HIA workshops*
Rebuilding the links: where does PLAN-ED fit?

- Atlantis/PLAN-ED model:
  1. Post ERASMUS programme
  2. Importance of local contexts to develop good practice
     - Development process and power of different actors
     - Social and health outcomes
     - Case studies of good and bad practice
  3. Building evidence base and research projects
  4. Building relationships between related disciplines
  5. Delivery modes (under/postgrads, studio)
  6. Exchanges
Bristol seminar: challenges for integrating health into planning

• Common challenges:
  – Climate change and its implications, urban population shifts, poverty and inequality
  – Barriers to health/planning integration: politically and technically fragmented institutions

• Challenges in Bristol:
  – North/south divide; disjointed transport system and population growth, housing standards, access to affordable and nutritious food, active travel, public transport, access to green space, lack of funding = spatial inequalities
  – lack of regional governance, lack of leadership, different knowledge base and priorities, structures
Bristol seminar: challenges for integrating health into planning

• Insights from Germany:
  – Shrinking population, high unemployment
  – Planning system: 4 tiers of responsibility and plan-led planning/contentious regional v. local tiers, but aspects of health in spatial planning delivered at every level

• Insights from USA:
  – Disparities between ethnic groups, segregation, deprivation, access to food, limited healthcare, poor housing and transportation
  – Portland: statutory planning goals at state level, delivery aided by Metro: sustainability and equity principles at all levels to promote social determinants of health, but still unintended consequences of health v. equity
  – Richmond: fragmented planning system, rise of community partnerships (Capital Region Collaborative) but delivery hindered by lack of governance arrangements
Bristol seminar: building capacity for planning and health in Bristol

- Good practice/building capacity in Bristol at city and neighbourhood levels:
  - Secondment from UWE
  - BCC/NHS Bristol protocol
  - Hartcliffe and Whithywood community partnership
  - Mede Community Centre and South Bristol Skills Academy
  - Knowle West Media Centre
  - Southville Centre
  - Dame Emely Park
Embedding staff in the practice world
Welcoming placements in the WHO Centre
Building capacity for planning and health: international and local perspectives

Richmond: health equality through consultation: assessing needs through charrette process
Portland: active travel through research: evidence based bicycle boulevards
Building capacity for planning and health: international and local perspectives

Hannover

*Issues and solutions: EU integration and local noise maps to inform policies*
How can we build capacity? comparisons and lessons to use

• Development of joint programmes
• Remember that ‘we are not alone’ – there is a community of people working to the same agenda
• Need to help ‘cells of success’ to multiply and share lessons
• Need to raise awareness before building capacity
• Protocols and memoranda of understanding are valuable
What skills are needed?

- Ability to devise good indicators, including mental health and social aspects
- Need to share skills:
  - Share data and understand data
  - Planning (mediation) and public health (advocacy) – informal networking - outside the comfort zone, - supporting individual agents of change in an organisation
- Interdisciplinary working requires that sectors understand each others values and languages
- Community empowerment: need resources, capacity and knowledge to make decisions that will lead to better health
How can planners and other built environment professionals best be supported to integrate health and wellbeing?

- Develop shared definitions
- Use maps and visual communications to promote issues integrated into larger strategies
- But still lots of silo thinking and a fear of stepping beyond remit
- Consider health equity
What is the role of academia and others in ensuring preparedness for the future?

- Linking local authorities and universities better – eg agency projects
- Wider availability of research outputs
- Developing joint programmes/modules, CPD courses