



COUNCIL OF CAPITAL CITY LORD MAYORS

HUMAN CAPITAL POLICY COMMITTEE

Submission to:

**House of Representatives Standing Committee
on Health and Ageing
Inquiry into Health Funding**

'Healthy Cities'

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'Healthy Cities'

'If you don't look after your body now,
where do you plan to live in the future?'

1. Introduction

This submission is about creating 'Healthy Cities' where our people and communities can enjoy physical, mental, environmental and social health and wellbeing.

2. Our role

The CCCLM is a collective entity which comprises the Lord Mayors of each of the Capital Cities in Australia and which performs a united advocacy role for the needs of the Capital Cities to other spheres of government. We have a Secretariat based in Canberra and a network of high-level Policy Groups that focus on a range of issues, including health and ageing. Each Capital City plays a leadership role in the following areas:

- **Regulator:** a mandatory role in monitoring and enforcing health and safety standards in areas such as drinking water, sewerage, food safety, contaminated site assessments, air quality, pollution abatement and control, urban and stormwater drainage, and street cleaning.
- **Provider:** direct provision of key health-related services, facilities and information such as active and healthy parks activities; pest control; alcohol and other drug-related programs; waste management; recreation and leisure facilities and services; maternal and child health (immunisation clinics, infant health and mothercraft clinics); community and school dental and nursing services.
- **Planner:** creating a healthy and safe urban environment and maintaining a healthy and sustainable natural environment and assisting with planning for social infrastructure.
- **Facilitator:** working in partnership with other areas of government, non-government organisations and the community to build strong and resilient local communities.
- **Advocate:** a leadership role at local and regional level in representing the health and wellbeing of city residents to other levels of government, including contributing to public health policy development.

3. Our guiding principles

The CCCLM is committed to prevention, health promotion and education and strongly believes that most of the costs in current health care programs fall in areas where significant preventative efforts are possible. The majority of Australian health expenditure is devoted to the care and cure of existing disease. Acute treatment services must continue, but the emphasis within an effective total health program should be more in the area of prevention.

CCCLM supports the following guiding principles:

- The social model of health is multi-dimensional and includes physical, environmental, economic and social aspects.
- Capital Cities will maintain their fundamental role in regulating aspects of city life that impact on public health.

- Healthy and active lifestyles rely on a clean, safe, well-planned and sustainable environment.
- Age, socio-economic level, culture, language and level of physical ability should not be barriers to living an active and healthy life.
- 'Healthy Cities' with healthy people rely on each individual taking responsibility for their own health and wellbeing.
- Connected, supportive communities and strong local relationships support health and wellbeing.

4. The challenge before us

The Federal Government has a vision of better health and active ageing for all Australians. One of the focus areas is on addressing the main causes of preventable disease including poor nutrition and physical inactivity with an emphasis on preventing disease associated with obesity, particularly childhood obesity.

Modest increases in physical activity, from less sedentary lifestyles, where public transport, walking and cycling (active transport) choices, encourage incidental activity, can reduce the need for medical treatment in those at risk. How cities are structured, along with their infrastructure and services, can impact upon the opportunity for people to be more active.

There is clear evidence that people need to be more active:

- The National Health Survey (February 2006) found that 62% of men and 45% of women reported being overweight or obese.
- In Queensland, there are approximately 650,000 adults and 25,000 children aged five to 17 years who are obese or overweight – and the figure is rising.
- The most recent estimates of the direct costs of overweight and obesity in Australia range from \$4.5 to \$18 billion a year.
- Cardiovascular disease remains Australia's biggest 'killer', accounting for about 50,000 deaths a year.
- Nine (9) percent of total health costs in Australia are attributable to overweight and obesity.
- From 1997 to 2004, the number of adult Queenslanders undertaking enough physical activity to produce a health benefit declined by 9.2% with only 40.2% of adults sufficiently active for health.
- 20 – 25 percent of Australian children do not participate in sufficient physical activity to gain health benefits.

CCCLM proposes a focus on 'Healthy Cities' and the promotion of good health is one tangible way where the Commonwealth can prevent the onset of various illnesses and diseases.

5. Our 'Value Proposition' – What makes us unique?

The Capital Cities are ideally positioned to work with the Commonwealth in advancing health outcomes for all Australians:

- Capital Cities are close to the action – where people work and play.
- Proven 'track record' in delivering community programs.
- A strong demonstrated commitment to 'Healthy Cities' and healthy lifestyles.
- An implementation network that is second to none.
- An established Secretariat (based in Canberra) and a network of Policy Groups throughout Australia.

- Logical partner with the Commonwealth for the delivery of health related projects via direct funding.
- Host the bulk of the nation's premier training and research institutions.
- House the lion's share of Australia's Advanced Business Services that are vital to the incubation and diffusion of innovation.
- Flagships and cultural markers for our State and Territory communities.
- Provider of valued municipal services for local residential and business constituencies.
- Can bring alternative insights on health and ageing issues than those put forward through State agencies.
- Established partnerships with the private sector, major sporting bodies, state government departments, universities, schools, key private-sector health agencies, neighbouring local government and the community.

6. Our track record

The Lord Mayors recognise how precious health is to the individuals and communities they represent. As a consequence, they have collectively invested considerable funding into public health programs, infrastructure and services over many years. For example, Brisbane City allocated approximately \$125 million to health related programs in 2006. Other Capital Cities have also invested between \$10 million and \$40 million into similar programs.

In their May 2005 submission to this inquiry, the Australian Local Government Association (ALGA) also pointed out that 49% of all local government expenditure is now related to the provision of human services, such as welfare, housing, health, community amenities, recreation and culture.

The following are some examples of what the Capital Cities are doing:

- Adelaide Safe Community program collects data in relation to injuries and uses any trends to develop appropriate responses. Eg. Safety audits, home safety and security checks.
- Melbourne is currently addressing issues associated with the continued development of residential high rise apartments. The 'Lighthouse Project' is focussing on the provision of aged care services to residents in these apartments. These 'vertical communities' have specific challenges such as gaining security access to buildings, carer parking (close to or within the complex) and delays in making appropriate modifications to apartments.
- Brisbane City via its 'Active & Healthy' Program runs a number of health related programs including Active Parks, GOLD n' Kids, Chill Out, Real Adventure Women (RAW), Gone Walking and Black Diamonds. Brisbane City also operates an immunisation service, which has traditionally targeted young people and babies, but is now diversifying to other groups such as the elderly.
- Hobart City is currently building on the work undertaken over the past two years through the National Illicit Drug Strategy and is in the process of developing an expression of interest in the current funding round. Opportunities to work closely with the University, schools in Hobart and possibly TAFE have been identified out of the current project.
- City of Perth's Physical Activity Plan creates physical and policy environments in both the community and in Perth workplaces. The 'Be Active' program is supported by the Department of Premier and Cabinet and has a clear focus on improving health by supporting increased physical activity.
- City of Sydney runs a range of projects around health and safety. It has successfully implemented a "Creating a Safer Communities" Project in large public housing estates targeting actual and perceived safety for tenants. This has been a partnership between the City, Police, Departments of Housing and Health sponsored by NRMA. The City also supports programs such as "Midnight Basketball", targeting at-risk, disadvantaged and especially indigenous young people for late night

weekend basketball tournaments. The City has direct relationships with the community through its own community workers, the services it provides and its extensive grants program.

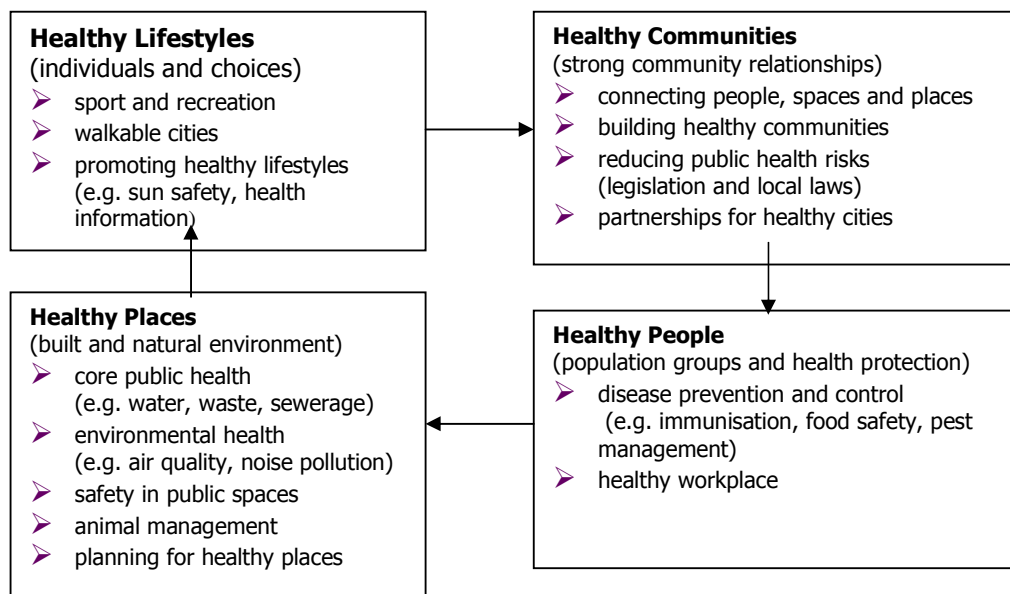
The Capital Cities diverse experience has lead to the development of the CCCLM's Healthy Cities framework.

7. Healthy Cities Framework

Healthy Cities – where people and communities enjoy physical, mental, environmental and social health and wellbeing.

The CCCLM 'Healthy Cities' framework is multi-dimensional and focuses on four (4) major outcome areas:

- Healthy places
- Healthy lifestyles
- Healthy people
- Healthy communities



The Capital Cities contend that cities that have a balanced investment in all elements of the Healthy Cities Framework will enjoy better health outcomes and lower health related costs.

8. Making it happen!

A crucial part of our philosophy is the belief that the development and maintenance of effective partnerships and strategic alliances is the only way to go. Capital Cities, more so than other local governments in our respective States and Territories, have the opportunity and credibility to work closely with a range of stakeholders to deliver effective outcomes.

To assist Capital City Councils contribute to national health and ageing goals, Federal funding should be provided to support and encourage Councils to obtain both national and international examples of best practice across the four elements of the CCCLM's *Healthy Cities Framework*. These models could then be transferred to other settings in the form of 'demonstration projects'.

Following are several examples that illustrate types of possible partnerships.

(a) Healthier people through improved service integration

Many community services systems contributing to health and related outcomes are fragmented. This fragmentation results in poor client outcomes and costly inefficiencies. Councils, with their detailed local knowledge and strong networks, are ideally placed to work with community service providers and State agencies to address fragmentation and improve service delivery.

(b) Planning for healthy places

A healthy city will be shaped in a way that encourages walking, lowers stress levels, provides shade and protection from the elements. The CCCLM could explore with the Commonwealth opportunities to improve health and ageing outcomes through better urban planning.

(c) Joint ventures for healthier lifestyles

The Australian Government has a wealth of information on the factors needed for healthier lifestyles. Many of the Capital Cities have experience in delivering lifestyle programs, working with marginalised groups, and are, in their own right, major employers. Opportunities exist to explore joint ventures for healthier lifestyles.

(d) Healthier communities

Cities comprise multiple communities of residents, workers, and visitors. These communities range between the most marginalised within the nation, through to the most affluent. The Capital Cities are experienced in working collaboratively with their local communities in responding to diverse challenges. The opportunity exists for the Capital Cities to work with the Commonwealth to strengthen community bonds, whether it is through support for recent refugees, Indigenous communities, or other communities with compromised health and wellbeing.

The examples above are intended to illustrate the range of opportunities that exist. The Lord Mayors look forward to discussing with the Committee a future working relationship with the Australian Government.