Healthy Communities Research Forum

– linking health and sustainable development –

Preparing for an ageing society: is the built environment fit for the future?

Research Forum report, 25 April 2012

The seminar was held as a contribution to the European Year of Active Ageing and to mark World Health Day’s theme of Ageing and Health (on April 7th). It addressed what contribution the built environment can make to healthy and active ageing. Participants came together from a wide range of backgrounds (including public health, local authority planning, architecture, academia, and community activism) to consider:

- Are our neighbourhoods and settlements fit for a fulfilling and active old age?
- How can the planning of the built environment support healthy ageing?
- What are the new opportunities for supporting healthier older people with the public health transition to local authorities?

Whilst these questions provided an initial framework for the seminar, participants were encouraged to respond to the opening presentations to identify the core issues that they wanted to take into the workshop sessions. The forum was chaired by Pamela Akerman, the Director of Public Health in Bath and North East Somerset who introduced some initial thoughts on the agenda before the 3 speakers who were: Guy Robertson, Head of LGID ‘Ageing Well’ Programme; Professor Graham Parkhurst, Director of the Centre for Transport and Society at UWE, Bristol; and Cleo Newcombe-Jones, Planning Officer at Bath and North East Somerset Council.

The discussion session was facilitated by Marcus Grant, Associate Professor in Healthy Urban Environments at the University of the West of England.

Pamela Akerman, in her introduction to the afternoon, set the scene of the ageing population from a public health perspective and the issues and opportunities in relation to the public health ‘transition’ to local authority control. She gave a brief overview of the potential from a built environment perspective, as well the needs for ‘living’ in the built environment such as the provision of appropriate facilities.

She then drew on recent experiences of visiting the Netherlands on a study tour to see healthy

Health promoting environments

- Urban/community environment
  – Planning/core strategies
- Green spaces
  – Leisure/allotments/sports
- Transport
  – Sustainable/accessible/reducing pollution
- Housing
  – Energy efficiency/ fuel poverty
  – Lifetime designs
urban environments in practice to suggest some lessons that could be learnt for the UK including reducing the dominance of motorised traffic and making shared outdoor spaces more attractive for all.

The strategic approach to age-friendly places

Guy Robertson is Head of the LGID Ageing Well Programme and is responsible for delivery of the Local Government Association’s work on the programme; he previously led the support to the Partnerships for Older People Projects (POPP) programme for the Department of Health.

In his presentation, Guy discussed the future demographic structure in relation to the ‘ageing population’ and the positive aspects of this. He started by showing how the age profile of the UK has changed over the last hundred years and challenged what we might think of as an ‘older person’:

60 year olds now have the life of 40 year olds from a century ago.

He also pointed out that older people make a significant net contribution to the economy through paid and voluntary work and support to family as well as in their spending power. But there are disparities, with 40% of people over 65 having a long term illness and 16% of pensioners falling below the poverty line although over two-thirds of householders over 65 own their own homes outright.

The immediate home environment and local neighbourhood are important for older people as their spatial range becomes more limited. Age friendly communities help to promote opportunities for good health, participation and security through good design, opportunities for interaction and well organised facilities.

Responding to ageing society

Making cities and communities age friendly is one of the most effective policy approaches for responding to demographic ageing

World Health Organisation

The worldwide WHO Age Friendly Cities initiative has guidance on appropriate design and facilities to support older people in the urban environment — and these are also good aspirations for the whole population. The Dutch example of Woonzorgonzones follows the principle of integrated and inclusive neighbourhoods and the idea of ‘ordinary for special and special for ordinary’.

Guy then introduced the idea of an asset approach in which, rather than starting with deficiencies and needs in developing policy, the approach is to identify opportunities, strengths and assets in the community and to take a proactive community focussed approach.

From deficit to asset approach

<table>
<thead>
<tr>
<th>Deficit approach</th>
<th>Asset approach</th>
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<tbody>
<tr>
<td>Starts with deficiencies and needs</td>
<td>Starts with assets in the community</td>
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<tr>
<td>Responds to problems</td>
<td>Identifies opportunities and strengths</td>
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<td>Provides services to users</td>
<td>Invests in people as citizens</td>
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<td>Emphasises role of agencies</td>
<td>Emphasises the role of civil society</td>
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<td>Focuses on individuals</td>
<td>Focuses on communities and neighbourhoods</td>
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<tr>
<td>Sees people as clients and service users</td>
<td>Sees people as citizens and co-producers as something to offer</td>
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<td>Treats people as passive and ‘done to’</td>
<td>Helps people to take control of their lives</td>
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<td>‘Fixes people’</td>
<td>Supports people to develop their potential</td>
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Adapted from “A glass half full…”, IDEA, 2010
He gave an example of how older people have challenged supermarkets to design better by highlighting issues that are important, especially for older people, and then assessing how well different establishments perform.

Segregation across generations was then raised as an issue with many older people having no contact or friends with younger (non-family) adults and vice versa.

The final issue was that of dementia and how good design can support higher levels of independence and social interaction.

### Conclusion

- It’s all about people
  - How we see them
  - How we involve them
  - How the built environment supports or hinders

- Most of it is about mainstream rather than specialist

Get it right for older people and you get it right for most people

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**Ageing and mobility: ‘Modalities of Connectivity for Healthy Ageing in the Community’**

*Professor Graham Parkhurst* is Director of the Centre for Transport and Society at UWE, Bristol. The implications of an ageing population for transport policy have been a cross-cutting theme in his teaching and research interests in recent years.

Graham first considered whether there was a difference in rural and urban areas in relation to transport and an ageing population. He suggested that many issues are similar and that many trips originating in rural areas have urban destinations and much of the rural population are actually in ‘small towns’. Bus services are often perceived as a particular problem but in fact 96% of all households are within a 13 minute walk of a bus stop with an hourly service. Extending the conventional bus network even further in time and space is likely to be financially prohibitive.

He then introduced the ‘Grey and Pleasant Land project’ and his work on ‘Travelling through the Rural Lifecourse’ which is exploring issues of mobility in rural areas. The project has a number of rural locations being studied across the South West and Wales and research has taken place to understand the issues of age and mobility.

The number of car drivers over the age of 70 is expected to double over the next 20 years although they tend to drive less far. Cars are important for the older population to enable them to get about and see places and people:

> “….it is the first time when you are an older person that you have got time to go and see these places”. (Male late 60s)

Concerns over safety tend to limit the use of other modes such as walking and cycling although walking is the main mode of travel for short journeys – with the attendant health benefits of maintaining physical mobility capacities. There is also recognition of the benefits of mobility for engagement with the wider community, reducing isolation and meeting people.

> “Keeping fit first, fresh air, seeing people, seeing different things, enjoying the flowers at the moment, meeting people on your way”. (Female late 60s)

Car access is seen as important with most people having access to a car which allows them to participate fully in community activities. Most people use a variety of types
of transport including car drivers who will also walk and get the bus.

Policy has tended to focus on travel for essential needs such as health and food but a survey of access to different activities highlighted problems accessing cultural facilities such as cinemas and museums as being an issue.

However, for the future, there are a number of alternatives gaining in popularity including methods of ‘collective transport’ such as liftsharing and taxibuses which can be facilitated via the web.

He concluded with some suggestions as to where current policy is falling short and some challenges for discussion.

Limitations of Current Policy

- Over-focus on travel for essential needs (food and health)
- Insufficient focus on needs of pedestrians (and cyclists and scooter users)
- Insufficient recognition of the direct health and wellbeing benefits of exercise, social interaction and experience of shared community space while travelling
- Limited exploitation to date of new technologies

How can strategic urban planning contribute to the healthy ageing agenda - a local authority planning perspective

Cleo Newcombe-Jones is a Planning Officer at Bath and North East Somerset Council and has a particular interest in community involvement in planning and climate change/environmental sustainability and healthy urbanism.

Cleo gave a brief overview of the activities and priorities of the B&NES Policy and Environment team before introducing two projects with particular relevance to healthy ageing.

The Supplementary Planning Document (SPD) on Sustainable Construction & Retrofitting is under consultation at the moment and aims to give clear guidance on retrofitting the different housing types commonly found in Bath. Of particular interest are issues to do with energy efficiency, condensation and damp in existing buildings where older people are more vulnerable to the adverse effects.

Many of Bath’s building are in the pre-1919 harder-to-treat category and the SPD contains information on how different building types work as well as appropriate interventions.

A range of events and workshops have been held to involve the community and an open homes event in March showcased actions taken already in houses across Bath.

‘My Neighbourhood: A Neighbourhood Planning Protocol’ is a community planning guide to harnessing the positive role of community action and “grey power” in planning. It has been produced in response to the Localism Act and contains guidance to residents, community groups and businesses on how to get involved in local planning issues.
Two particular projects that have emerged recently are:

1. **Energy Efficient Widcombe** - where the community has worked together to tackle energy efficiency issues. The project was funded through the Government’s Local Energy Action Fund (LEAF). There were a number of innovations including the use of shop fronts to raise awareness. There were also specific actions targeted at older people to ensure that they were involved and aware of the project and the action that could be taken to improve home energy efficiency.

2. **Freshford and Limpley Stoke Neighbourhood Plan** – produced by the Parish Councils, the plan supported the building and operation of a neighbourhood shop which has volunteers and apprenticeships included in its workforce.

**Discussion**

In the discussions that followed, Ben Barker from the Bedminster Neighbourhood Partnership mentioned some of the very local initiatives happening in his area to support older people (and the wider population). These included installing benches in places where people walked and might need to rest – although they were not universally popular with some shopkeepers objecting to them outside their shops. Another initiative was a map of the area which showed toilet availability – not just public toilets but also pubs and cafes where toilets were available for public use.

Participants then discussed ‘what are we hearing?’, bringing out issues such as the asset approach, resource tensions, community engagement (the bottom up approach) v. top down and maintenance and ownership of public space.

**Developing the agenda**

Following the discussions, participants identified the issues that were taken forward into the workshop sessions. These themes together with some of the points from each discussion are set out below.

1. **Street Closures and ‘Playing Out’**
   - Successful in Bristol where it started
   - Potential to roll out to other local authorities
   - A great opportunity for older people to interact with others in the community
   - Part of the wider issue of how we see our public spaces

2. **Pros and Cons of ‘age’ as a category**

   **Urban design for all:**
   - Housing mix, ie the benefits of older people’s complexes compared with mixed neighbourhoods including starter homes, families, older people and extra care housing
   - Walking environment – including parents with pushchairs, wheelchair users and people with mobility challenges
   - Toilet provision – good not just for the elderly
   - Community spaces with play equipment, seating, cafes

Decision making for and by whom?
3. **The evidence base: making the case**
   - There are good examples but evidence is often not sufficiently robust – good evaluation is necessary to underpin work
   - Evidence for outcomes needed in financial terms
   - Sharing good local examples more widely to inform the evidence base
   - What role do Health and Wellbeing boards have in driving evidence
   - Need councillor ownership of JSNAs to keep consistent priorities and to link to the public health outcomes framework
   - Needs to be a review of the evidence base on health and the built environment – presented in a format/language to promote dialogue and use by planners, councillors, commissioners etc

   — Understanding each other, managing conflict, listening

5. **Collective Mobility**
   - The issue is in part about the efficient use of cars and taxis but also how to encourage a degree of physical activity in accessing public transport
   - ‘Demand responsive transport’ can be aimed at everyone but needs to make accommodation for the less mobile (e.g. closer drop off points)
   - Taxi sharing could particularly work at rail stations on a fill-up-and-go basis (such as the Treintaxi system in the Netherlands which operates as a fixed-price add-on to the rail ticket)
   - Family concerns about older people’s safety on buses could be addressed by pre-booking shared taxis or minibuses

6. **Participation of the silent majority**
   - The challenge is how to get everyone to access and respond to information
   - Funding constraints hinder initiatives which tend to be resource intensive
   - Different methods to try to reach everyone eg local events, social media, personal contact, notices, community clubs, press releases from different sources (not just council but also local community)

4. **Partnerships and tensions**
   - Trust needed to build partnerships and networks and to take action
   - Involvement of a range of people is important – including young and old to encourage an intergenerational mix
   - Using the asset approach instead of solving problems
Summary of feedback from the forum
– based on the feedback forms completed by participants

**Key messages that I will take away**
- Plan for all rather than separately for the elderly so that everyone gains, similar issues but more impact, only a small proportion have special requirements
- Don’t stereotype older people’s activities and interests and their mobility needs
- Consider and promote ageing people as assets – not problems / needs led
- Barriers to access, car dependence, transport as an issue for the elderly
- Importance of neighbourhood for older people and potential for positive experiences in public open spaces but need for simplicity and sustainability
- Ongoing need to develop evidence to support health / well being and the built environment
- Need to join up research, strategy and implementation
- The intergenerational divide – is it another form of isolation for older people?

**An activity, action or change I could make in my practice**
- More emphasis on bottom up proposals – joining top down and empowering communities
- Explore new partnerships for research with community groups and share experiences from practice with researchers
- Follow up evidence sources and use evidence from different spheres in policy development
- Understand the role of Health and Wellbeing Boards
- Consider the ageing population!
- Develop ‘playing out’ idea to make local streets more neighbourly
- Explore using asset based approaches in community projects – examples from other LAs?
- More on intergenerational working and partnerships

**Where next? Questions arising, actions for others, support needed**
- Improve evidence and evaluation of the robustness of evidence to prove action
- Joining up bottom up and top down action – the need for co-ordinated policy / strategy alongside getting local groups moving – where will funding come from?
- Value of the wealth of older people, information on the economics of age
- Community transport and collective mobility issues in relation to age
- Embrace diversity and give voices to the voiceless – get them more involved
- What is the impact of bringing Public Health into LAs and what about budgets?
- Do practitioners learn enough from academic research?

**Value of the forum with people from built environment and public health**
- Really useful to hear examples of actual projects on the ground + experiences
- Very valuable, varied representation of different services and skills affecting the elderly – different perspectives can be gained from meeting with people from other backgrounds
- Keeps academics live to the reality of practice
- With the increasing role of public health and the ageing population, it is important to have relationships between disciplines and have shared ideas / language / information

**Overall Impressions of the afternoon**
- Great involvement from all attendees, lots of interest and enthusiasm
- Could have been longer, so much to cover, ended too soon
- Helpful as always with these forums in developing knowledge base and application
List of participating organisations

- Bedminster Neighbourhood Partnership
- Bristol City Council
- Bristol City Council Development Services
- City of Bristol College
- Coventry City Council, Public Health Practitioner
- Faculty of Public Health, Speciality Registrar
- G2 Architects
- INTERREG IVB Contact Point – North West Europe
- Lockleaze Community Development Health Worker, Bristol
- NHS Bath & North East Somerset
- NHS Bristol Public Health Directorate
- NHS Devon, Exeter
- NHS Dorset Public Health Directorate, North Bristol Advice Centre
- North Somerset Council
- North Somerset Council, Adult Social Services
- Public Health Specialist, Bristol
- Public Health Wales
- North Somerset PCT, Public Health
- South East Public Health Group, Public Health Specialist
- South Gloucestershire Council
- South Gloucestershire Council, Environment and Community Services
- South West Observatory
- South West Public Health Observatory
- UWE Centre for Transport & Society
- UWE Department of Engineering Design & Mathematics
- UWE, Faculty of Environment & Technology
- UWE Faculty of Health & Applied Social Sciences
- UWE Department of Planning & Architecture
- We Care & Repair, West of England

Further Information:

LGID Ageing Well: http://www.idea.gov.uk/idk/core/page.do?pageId=20344655

LGID, Glass half full asset approach guidance: http://www.local.gov.uk/c/document_library/get_file?uuid=fc927d14-e25d-4be7-920c-1add80bb1d4e&groupid=10171


Grey and Pleasant Land: http://ehealth.chiirup.org.uk/greyandpleasantland/

Bath Sustainable Construction and Retrofitting SPD: www.bathnes.gov.uk/greenbuild

Bath, Homes Fit for the Future: http://www.bathhomesfitforthefuture.co.uk/

Bath, My Neighbourhood: www.bathnes.gov.uk/neighbourhoodplanning

Playing Out: http://playingout.net/

Upcoming events:

WHO Healthy Community Research Fora: http://www.bne.uwe.ac.uk/who/hcrf.asp

Event organised and report prepared by Caroline Bird, Research Fellow in the WHO Collaborating Centre for Healthy Urban Environments, University of the West of England, Bristol May 2012