

Health and Wellbeing Strategy

Comments from Barbican Association

[The Barbican Association represents the 4000 or so residents of the Barbican Estate in the north west of the City]

AIR QUALITY

Comment 1. Section 8 Priorities: Guiding Principles p.13

Basing the Joint Health and Wellbeing Strategy (JHWS) on the Marmot principles is unduly restricting its scope. The objective of the Marmot review was to *propose the most effective evidence-based strategies for reducing health inequalities*. This means that any public health measures that do not specifically address health *inequalities* are largely ignored or dealt with in a tangential or incidental manner. This is the case of the major risk to public health, in general - that is, the consequence of poor air quality. The JHWS should recognise that poor air quality has a major impact on public health that effects everyone and should be key to health and wellbeing.

For example, Defra guidelines note that:

removing all fine particulate air pollution would have a bigger impact on life expectancy in England and Wales than eliminating passive smoking or road traffic accidents¹.

The guidelines go on to state the role of Public Health Professionals is:

to work with local communities and front line professionals to raise awareness of the health impact of poor air quality, support measures to reduce pollution and encourage lifestyle adaptations to reduce the risk to individuals and to their families.

The City's own commissioned research² notes that:

Public Health England's (PHE) figures suggest that PM2.5 is a major cause of disease in London, and at least as important as road accidents, communicable disease, liver disease and suicide.

Given the importance of poor air quality on public health, the 6 principles outlined on p.13 do not go nearly far enough to set the overall objectives of a meaningful strategy. Before all the measures to provide services and encourage better life styles, the number one priority should be to provide a healthy environment - and this must include ensuring air quality that does not pose a risk to health. The first principle on p.13 should therefore recognise this and include wording along the lines of:

¹ Defra Air Quality: Public Health Impacts and Local Actions

² The Impacts Of Air Pollution On Health A Summary Of The State Of Current Knowledge A review of recent primary epidemiological evidence on the health risks of air pollution for the City of London Corporation, including quantitative estimates of the effects in Central London Iarla Kilbane-Dawe PhD (Cantab) BA (Mod) & Leon Clement MA (King's Lond.) BA (Hons)

1. *Create and develop a healthy and sustainable environment, including putting in place local measures to ensure that air quality complies with or exceeds safe limits for health as laid down by the WHO.*

Comment 2. Section 8.3:

The priorities should be re-ordered with Priority 1 being, A healthy urban environment.

Comment 3. Section 8.3.2, p. 18

The JHWS should include firm objectives of what the City plans to achieve for air quality. For example, there should be a firm objective to reduce local air pollution to levels below the safe limit for health as laid down by WHO.

Comment 4. Section 8.3.3, pp. 18-19

Again - air quality should be the top priority - not the last. And the wording here is very wishy washy, tick boxy; the objective should be to monitor the *outcome* of the AQS, not whether it has been implemented. The JHWS is silent on what happens if the AQS is not fully implemented or does not attain the stated outcomes. Monitoring is no good unless it is based on tangible outcomes, such as improvement to air quality, and secondly it is no good unless failure to achieve the outcome is acted upon.

Comment 5. Section 8.5 Priority 4: Children have the best start in life

Children are the most vulnerable group to the effects of air pollution. Overall, children living in areas with high levels of particulates and nitrogen dioxide have up to 10 per cent reduced lung capacity³.

This most important risk to children's health should be specifically addressed in this section. The JHWS should also set objectives to specifically improve the air quality and health outcomes at schools and nursery sites in the Square Mile. For example, the Sir John Cass primary school is sited on one of the most polluted roads in the City. Measures to green the area and reduce traffic should improve the levels of pollutants, however, there should be specific objectives in the strategy to target and improve this significant risk to children's health.

OTHER ASPECTS of LIVING HEALTHILY IN THE CITY

Comment 6: Section 8.2 Good mental health for all

The Barbican Association supports parity of services for mental and physical health and the need for good mental health services.

³ Six year study led by Prof Chris Griffiths, principal investigator at the Medical Research Council of 2,400 children living in east London

We support the recognition of the risk of social isolation among older residents and would urge City support for community facilities for residents in the north west of the City – to provide space for clubs, societies, and community services easily accessible to all – and with good publicity so that people know about them.

Ways in which the City's existing cultural offerings (galleries, concert halls, cinemas) and public services such as libraries can contribute to sound mental health should also be considered in this strategy

Residents also consider that a healthy urban environment (in the widest sense) is good for mental health.

Comment 7. 8.3 A healthy urban environment – high quality public realm

As well as the points above about air quality residents welcome the recognition of well designed, high quality public realm. Where such space is in residential areas City plans need to respect residents' need for tranquil public space. The current public realm on the Barbican estate (the highwalks and associated space at ground level) is exceptionally well designed and serve its purpose well – providing safe, quiet pedestrian space with pleasant outlooks. Such space is rare in the City and should be protected and treasured.

Careless development plans can put this at risk and should be evaluated for their impact on health and wellbeing. We therefore welcome the City's plan to include "Health in all policies", but we would expect this to mean that proper health impact statements are available for all major developments.

Comment 8. 8.3 A healthy urban environment – noise and other pollution

The JHWS rightly recognises noise as a major issue in the City.

Noise from London Underground

Not noted is the fact that City residents experience unacceptable noise pollution arising from London Underground's (LUL) operations. LUL's own noise and vibration measurements in the Barbican have shown noise pollution exceeding the 42 decibel level, which the World Health Organisation identifies as the point at which sleep is likely to be interrupted (ie people wake up) and the 35 decibel level, at which sleep is disturbed.

Effective remedies are available. Track modernisation can, and has, significantly mitigate(d) noise pollution and nuisance. The City should continue to urge LUL to prioritise track upgrading near to City homes; modern jointless track, sound reducing track fixings, sleeper pads etc can very significantly reduce such nuisance and LUL should bring forward City area track upgrading to best modern standards. In general LUL should produce environmental and health impact assessments as part of its overall planning for new developments.

Light pollution

We would add to the problem of noise pollution the increasing problem (for residents more than any other group in the City) of light pollution as newer buildings are fitted with much brighter and more energy efficient LED lighting that tends to be left on 24 hours a day. There is growing evidence on the adverse effects of artificial light in the environment, particularly for people who are trying to sleep and we would like to see mention of this in the strategy -and indeed action taken in planning and environmental health policies to restrict such pollution.

The converse problem is a reduction in daylight and sunlight caused by the construction of large office blocks very close to residential flats.

We are disappointed to see no specific actions about pollution included in section 8.3.3. We suggest the inclusion of the following actions.

*Stronger action in the code of construction and deconstruction to require the use of the best state of the art quiet construction methods and equipment.

*An amendment to the construction code to forbid noisy work on Saturday mornings on construction sites that are very close to residences. Such a restriction would affect very little of the City but would have a big impact on the mental health and quality of the environment of residents. It has recently been adopted as a policy by the City of Westminster.

*Planning policies to require office blocks to prevent the emission of light onto residential areas at night and environmental health action to enforce this.

Comment 8- General

The Barbican welcomes the strategy – with the caveats above – and where we have not commented we generally support the measures suggested.

We obviously support the emphasis on decent services for residents and for integration of health and social care activities. However, most of the biggest impacts on health are not made through health services but through services and policies controlled or influenced by the local authority – transport, housing, education, air quality, public realm. We therefore urge the City to use its responsibilities for public health to ensure that the health impacts of all policies are assessed and to ensure more joined up thinking across City activities and policies.

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