A sustainable new community at Cranbrook

health impact assessment: technical report



for Devon County Council, East Devon District Council and Devon Primary Care Trust

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Abbreviations and acronyms

| BME | Black and Minority Ethnic |
|-------|--|
| DCC | Devon County Council |
| DCLG | Department of Communities and Local Government |
| EHOD | Exeter Heart of Devon |
| EDNCP | East Devon New Community Partners |
| EIA | Environmental Impact Assessment |
| FCTC | Framework Convention on Tobacco Control |
| HIA | Health Impact Assessment |
| HPA | Health Protection Agency |
| MPB | Multi-purpose building |
| PCT | Primary Care Trust |
| SCI | Statement of Community Involvement |
| SPD | Supplementary Planning document |
| SPG | Supplementary Planning Guidance |
| | Safe Routes to School |
| SWRDA | South West Regional Development Agency |
| TA | Transport Assessment |



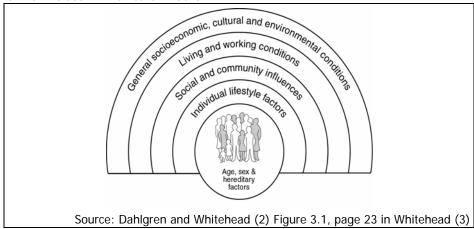


1. Methodology: identification, evaluation and management of health effects

Health determinants and health change

- 1.1 The World Health Organization define health as:
 - ... a resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities. (WHO Health Promotion Glossary, cited in source 1)
- 1.2 Health encompasses mental health and physical health and is affected by a broad range of factors including individual characteristics, such as age and gender, individual behaviours, such as levels of physical activity, use of alcohol or tobacco and broader social, economic and environmental factors. These include housing, employment status, transport and the social and the built environment: these are also known as *determinants of health*.

Figure 1: The main determinants of health



- 1.3 Development is not necessarily beneficial for health in the short-term. Improvements in determinants of health (for disadvantaged groups) do not automatically lead to demonstrable health improvement. There is a wealth of evidence linking poor health and deprivation, but there is less evidence to show what happens when determinants of health improve (4). It is thus important to consider, in the context of Cranbrook, how this evidence can be acted upon.
- 1.4 The evidence which we review below identifies areas where changes in health might occur: it does not provide quantifiable estimates of the magnitude of possible health effects. We aim to identify a clear description of the planned development and to link it to the public health evidence base (5).

Health impact assessment

- 1.5 Health impact assessment (HIA) is defined as:
 - ... is a combination of procedures, methods and tools that systematically judges the potential, and sometimes unintended, effects of a policy, programme or project on both the health of a population and the distribution of those effects within the population. HIA identifies appropriate actions to manage those effects (6).
- 1.6 The International Association for Impact Assessment have updated the Gothenburg definition (1) to include a requirement for the HIA team to prepare a *public health management plan* (6).
- 1.7 The steering group have requested an emphasis on practical guidance on managing the potential beneficial and the adverse health effects. The Public Health Management Plan is



- presented as a series of health codes for Cranbrook New Community. This is an important output as it will suggest ways in which health and health inequalities can continue to be addressed by all parties involved in the Cranbrook development beyond the life of the HIA itself
- 1.8 Consultation is an important part of HIA and while an in-depth programme of public consultation has not been carried out for this study we recommend continuing involvement as laid out in the Statement of Community Involvement (SCI).
- 1.9 For the purposes of this study we conducted interviews with professional stakeholders and community leaders.
- 1.10 The development process is highly regulated: an integrated approach to social, economic and environmental sustainability runs throughout policy documents and this particular outline planning application. Healthy public policy shares many of the aims of sustainable development. This HIA adds to and strengthens the population focus of the proposed development

Process

- 1.11 This HIA was a pilot for Devon County Council.
- 1.12 It was carried out by
 - Sara Gibbs, Devon County Council
 - Adam Coutts, Ben Cave Associates Ltd
 - Ben Cave, Ben Cave Associates Ltd
 - Andy Pratt, Ben Cave Associates Ltd
 - Ben Wheeler, Ben Cave Associates Lt.
- 1.13 The steering group for the HIA met five times and comprised of
 - Janthia Algate, East Devon District Council
 - Kate Little, East Devon District Council
 - · Peter Jeffs, East Devon District Council
 - Malcolm Baker, Devon County Council
 - · Gareth Bradford, Devon County Council
 - Becky Carmichael, Devon PCT
 - Ian Tearle, Devon PCT
- 1.14 Minutes of the steering group meetings are available on request.
- 1.15 The HIA was carried out in tandem with an HIA on the Sherford New Community in South Hams District Council.
- 1.16 The first steering group meeting took place in December 2006. The HIA was originally scheduled to be completed in March 2007.
- 1.17 The timetable was revised and the final report was submitted in June 2007.

Screening

1.18 The screening process took place prior to engaging BCA and was informed by the Devon County Council Local Development Framework Briefing Paper on *New communities and strategic urban extensions* (7).

Scoping

- 1.19 A scoping exercise was conducted using *Building in Health*. This exercise identified the importance of social cohesion and scoped out issues associated with the physical environment.
- 1.20 The HIA does not look at issues with the physical environment but consultees noted their importance. For example:



High standards of heat & noise insulation should be automatic. Noise insulation is especially important as this settlement has a far greater density of houses planned than previous new towns.

1.21 This scoping paper was circulated for comment to the steering group.

Assessment

- 1.22 The assessment process included consultation with key stakeholders. This was conducted by face-to-face interviews, telephone interviews and an online survey. This is described in more detail in *Appendix 5: Consultation: Purpose and approach* on page 77.
- 1.23 Consultees included officers from the District and County Councils, Voluntary Sector representatives and elected members. The consultees are listed on page 64. The consultation provided insight into the potential effects of developing a new community at Cranbrook. It also served to raise awareness of the progress of the new community and to raise awareness of health and wellbeing.
- 1.24 The consultation methods met with mixed success.
 - The face-to-face interviews were successful but time intensive.
 - The telephone interviews were a useful way of reaching a wider number of people.
 - The online survey was completed by three people. This is a 10% response rate. Each person on the list was contacted by telephone and advised, or left a message, about the survey. There were some technical problems with the survey website (www.surveymonkey.com) and e-mail addresses for consultees.
- 1.25 Consultees comments are provided in italics throughout the text. These are quotations from interviews or from the survey. We maintain people's anonymity.
- 1.26 Consultation and wider comment has been invaluable in drafting the report and formulating the health codes. The initial timeline for the HIA meant that a public consultation event was not held. The conclusions of this HIA will benefit from continued examination and refinement.
- 1.27 BCA contacted the applicant to provide information on the HIA.

Feedback

- 1.28 The draft reports were submitted to the steering group who provided feedback on the health codes and the conclusions in the reports.
- 1.29 The steering group discussed the difficulties associated with studying social cohesion and the absence of national, regional or local standards for social cohesion. Many of the HIA's conclusions focus on processes and on potential health outcomes.
- 1.30 It is clear that social cohesion is an important component and deserves consideration. It is also clear that it is a difficult concept to address in planning. The extent to which this report succeeds in providing clear direction remains to be seen. The steering group have been clear that this is the start of a process and that the dialogue about social cohesion and development needs to be developed.

Next steps

1.31 The steering group members are tasked with delivering the health codes. The steering group have committed to continue to meet as the development is brought forward.



2. Description of the population

2.1 The application site for the East Devon new community is located between Broadclyst, Whimple and Rockbeare, to the north of the former A30, to the east of Station Road (Broadclyst), and to the south of the Waterloo to Exeter railway line. The land comprises the area identified in the East Devon Local Plan (EDLP) Revised Deposit Draft 2003 as the preferred location for the new community. The outline planning application comprises 176 hectares of land and seeks to accommodate 2,900 dwellings with related infrastructure and associated development (8, p7).

Devon: summary health status

- 2.2 Devon is a predominantly rural county. Around 11% of Devon County's population are over 75 years of age. East Devon has the greatest proportion of residents over the age of 75 (14.1%) and Exeter has the lowest (7.8%). The population of all districts in Devon rose between 2002-2005, with those districts in the Exeter sub region (also know as Exeter in the Heart of Devon (EHOD) which is made up of Exeter, East Devon, Mid Devon and Teignbridge districts) growing faster than the England and Wales average.
- 2.3 Devon is often seen as an area where quality of life is high and health is good. Indeed, on many objective measures of health and well-being the population of Devon is in good health; people live longer in Devon compared to England and Wales, mortality from many causes of premature death, including coronary heart disease and cancer, are lower than the England average, teenage conceptions are reducing and importantly the people who live in Devon consider their health to be better than average.
- 2.4 However, this masks the fact that within the population there are communities and groups whose experience is persistently worse than the general population. The list of factors that can contribute to poor health includes poor access to education, training and skills, inability to secure employment, low income and poverty, poor housing and poor access to health and other mainstream services. Prejudice and inequity of service provision further affect some groups (9). The Cranbrook development aims to address many of these issues for its resident population.
- 2.5 Of the seventeen areas (super output areas) in EHOD which are categorised as being in the most deprived 25% of areas in England, 11 are in Exeter (concentrated in the city centre, Priory ward, Whipton and Mincinglake), five are in Teignbridge (Newton Abbot and Teignmouth) and one is in Mid Devon (Tiverton). The most pressing factors underlying deprivation in the sub-region are low incomes and poor access to services (in rural and coastal areas). In creating a more sustainable and prosperous economy, it will be essential that key regeneration initiatives are focused on:
 - coastal and market towns;
 - rural areas throughout the sub-region; and deprived and disadvantaged communities in Exeter

Exeter: Sub Region Growth

- 2.6 In 2003 the population of the sub-region was approximately 434,000. Between 1991 and 2003, the total population of the sub-region increased by over 9% (37,300). The significance of population growth was most pronounced in areas which have proved popular as locations for 'in-migration'. These include Exmouth, Honiton, Cullompton, Tiverton, Dawlish and Teignmouth.
- 2.7 The trend of population increase is forecast to continue with the number of people living in the sub-region increasing by 50,000 over the next 20 years. Of these, approximately 30,000 will be of working age. Whilst this will provide an important driver for economic growth, it will be essential to match labour market growth with appropriate investment in the creation of new jobs and supporting infrastructure.
- Overall, the skills and qualifications of the sub-region's population compares reasonably well to the national average. However, whilst younger age groups are more likely to have higher



- qualifications, the percentage of 25 to 34 year olds with higher qualifications in EHOD is notably below the national average. This reflects the fact that:
- a significant proportion of young people migrate outside of the sub-region to work. This is reinforced by low levels of graduate retention in the sub-region; and
- graduates, either with a permanent or term-time address in the sub-region move out of the region to find graduate employment.
- 2.9 There are relatively few young adults with high qualifications in EHOD and the sub-region is characterised by a low 'staying-on' rate at 16+. This is particularly the case in Exeter where staying-on rates and GCSE pass rates are low (43% compared to 53% in Devon). This reflects the significance of under-performance in education in parts of the sub-region and problems relating to low aspirations.
- 2.10 In 2003 research carried out for the Learning and Skills Council showed that levels of workplace training in Devon and Cornwall are insufficient to support the needs of the labour force (10). Consequently, it will be important for stakeholders in the sub-region to work closely with employers and small businesses to encourage and facilitate greater participation in workplace training. This is particularly important when one considers future skill requirements: it is anticipated that 43% of the total net increase in employment in Devon over the next 10 years will be accounted for by demand for professional occupations.

Predicting the population profile of Cranbrook

- 2.11 An understanding of the likely demographic and socio-economic characteristics of the new community will assist in service planning, physical design and community development. Precision estimates cannot be provided but assumptions can be made based on local knowledge, experience from other parts of the country, and routine data sources.
- 2.12 The purpose of this section is to outline the demographic context within which the new community will develop and to present a model of demographic and socio-economic assumptions for the new community. At best these assumptions will provide a context for planners and also offer an opportunity to influence and challenge our understanding of what constitutes a "balanced" community.
- 2.13 Figure 2 shows a map of deprivation in Devon using the combined indices of multiple deprivation, including health. It shows that Cranbrook is situated in an affluent area and one which contrasts with the levels of deprivation found within Exeter.



Figure 2: Devon Indices of Deprivation (2004) Health Domain Exeter East Devon District Council Site for Cranbrook New Community **Super Output Areas** Health Deprivation - National Ranks 247 - 10305 (most deprived 20% of SOAs in Devon) 10306 - 15485 15486 - 19530 19531 - 24034 24035 - 29788 (least deprived 20% of SOAs in Devon) Local/Unitary Authority Boundaries Super Output Areas (SOAs) are ranked across England, with the most health deprived SOA ranked 1, and the least health deprived ranked 32,482. The ranks are shown here by quintile The darkest green shade indicates the most health deprived 20% of SOAs in Devon, and the lightest green shade the least health deprived 20%.

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2.14 The new community at Cranbrook will include a 40% affordable housing quotient. This is likely make the community less affluent than the average for East Devon. The town is also likely to have a younger working-age population mix than the rest of East Devon. How the affordable housing element of Cranbrook is implemented will have a strong influence over the final socio-economic and demographic profile. Instead of producing a definitive figure for Cranbrook five different scenarios are outlined below to give a range of possible demographic outcomes. ¹

Scenario 1: East Devon Towns

2.15 This assumes that Cranbrook will have a similar demographic and socio-economic profile to the towns of Honiton, Ottery St Mary and Broadclyst. The underlying assumption is that Cranbrook will be similar in character to the nearest similar sized market towns.

Scenario 2: East Devon

2.16 This assumes that Cranbrook will have a similar demographic and socio-economic profile to East Devon in general, and will be a microcosm of the whole district. As the district contains many coastal towns and villages, and smaller dispersed settlements, this is a less likely outcome, but does provide an outlier (minimum possible value) for some of the indicators.

¹ We are indebted to Simon Chant of Devon PCT for providing these population projections.



Scenario 3: Exeter

2.17 This assumes that Cranbrook will have a similar demographic and socio-economic profile to Exeter in general. The underlying assumption here is that the town, as the nearest urban area to the city of Exeter, will be socially and demographically an extension of the city, with similar patterns of work. Exeter has a younger population, a higher working age population and a greater level of social housing that East Devon in general and East Devon towns, and is likely to have more in common with Cranbrook that East Devon district will in general.

Scenario 4: Priory

- 2.18 This assumes that Cranbrook will have a similar demographic and socio-economic profile to the ward of Priory within Exeter, which covers the areas of Wonford and Countess Wear.
- 2.19 The reason for this scenario is that Cranbrook is set to have 40% affordable housing, and the ward of Priory has just under 40% social housing (council, housing association or shared ownership).
- 2.20 The meaningfulness of this model will depend on how the affordable housing quotient in Cranbrook is defined and implemented. For example, if the affordable housing at Cranbrook was a mix of housing association, low cost market housing, key workers housing, shared ownership and other schemes, the demographic mix would be very different.
- 2.21 The communities of Priory are also effectively geographically segregated, with relatively high levels of deprivation affecting the Wonford area and the Lower Wear estate, and high levels of prosperity in other areas of Countess Wear and along the Topsham Road. The intensity of observed deprivation and socio-economic and health needs in Wonford and Countess Wear is likely to be exacerbated because the areas are separated in this way.
- 2.22 A similar pattern could emerge if all the affordable housing in Cranbrook was located in one area, whilst the severity of need would be likely to be lower if the affordable housing was dispersed throughout the new development (known as pepper-potting).
- 2.23 Priory is one of the most deprived wards in Exeter, and is in very close proximity to the Royal Devon and Exeter Hospital, so it is likely that the Priory Scenario will act as another outlier (maximum possible value) as did the East Devon scenario.

Scenario 5: Whipton

2.24 This assumes that Cranbrook will have a similar demographic and socio-economic profile to the ward of Whipton Barton in Exeter. The reason for this scenario is similar to the reason for the Priory scenario in that Whipton Barton has a fairly high level of social housing (c30%). However, level of deprivation and socio-economic need in the area are not as high as in Priory.

Population profile

- 2.25 The first step is to define the future population of Cranbrook. 2,900 dwellings are expected to be built in Cranbrook. In order to convert this into populations for different scenarios, we have to look at patterns of vacant dwellings and second homes to arrive at a figure for occupied households, and we can then convert this into population using average household size figures. These figures come from the 2001 Census for the relevant wards and districts for the individual scenarios, with a further reduction of 5.1% applied to the average household size figures to take account of national projections of falling household size between 2001 and 2012.
- 2.26 In order to predict the population profile for Cranbrook under the different scenarios, the population profile for December 2006 for the relevant wards and districts was used and allocated pro-rata to the total population supplied above.



Table 1: Estimated population projections for Cranbrook New Community at 2,900 households

| Measure | S1 ED Towns | S2 ED | S3 Exeter | S4 Priory | S5 Whipton |
|--------------------------|-------------|-------|-----------|---------------|----------------------|
| Households | 2,900 | 2,900 | 2,900 | 2,900 | 2,900 |
| Vacant (%) | 2.80% | 3.63% | 2.43% | 2.27% | 1.28% |
| Vacant (n) | 81 | 105 | 70 | 66 | 37 |
| Second home (%) | 0.85% | 3.94% | 0.40% | 0.22% | 0.09% |
| Second home (n) | 25 | 114 | 12 | 6 | 3 |
| Occupied households | 2,794 | 2,680 | 2,818 | 2,828 | 2,860 |
| Household Size (2001) | 2.28 | 2.22 | 2.27 | 2.52 | 2.32 |
| Household Size | 2.17 | 2 11 | 2.15 | 2.39 | 2.20 |
| (2012)* Population | 6,063 | 5,656 | 6,059 | 6, 758 | 2.20 6,293 |

Source: Reduction in national average household size by 2011 from: http://www.communities.gov.uk/index.asp?id=1002882&PressNoticeID=2097

Table 2: Estimated population projections for Cranbrook New Community at 6,500 households

| Measure | S1 ED Towns | S2 ED | S3 Exeter | S4 Priory | S5 Whipton |
|---------------------------------------|-------------|----------|-----------|-----------|------------|
| Households | 6,500.00 | 6,500.00 | 6,500.00 | 6,500.00 | 6,500.00 |
| Vacant (%) | 2.80% | 3.63% | 2.43% | 2.27% | 1.28% |
| Vacant (n) | 182.00 | 235.95 | 157.95 | 147.55 | 83.20 |
| Second home (%) | 0.85% | 3.94% | 0.40% | 0.22% | 0.09% |
| Second home (n) | 55.25 | 256.1 | 26 | 14.3 | 5.85 |
| Occupied households Household Size | 6,263 | 6,008 | 6,316 | 6,338 | 6,411 |
| (2001) | 2.29 | 2.29 | 2.33 | 2.11 | 2.32 |
| Household Size (2012)* | 2.17 | 2.11 | 2.15 | 2.39 | 2.20 |
| Population | 13,590 | 12,677 | 13,580 | 15,148 | 14,104 |

Source: Reduction in national average household size by 2011 from:

http://www.communities.gov.uk/index.asp?id=1002882&PressNoticeID=2097

NB this table uses household sizes as predicted at 2012.

Table 3: Estimated age profiles for Cranbrook New Community at 2,900 households

| Age | S1 E |) Towns | | S2 ED | S | 3 Exeter | S | 4 Priory | S5 \ | Whipton |
|-------|-------|---------|-------|-------|-------|----------|-------|----------|-------|---------|
| | n | % | n | % | n | % | n | % | n | % |
| 00-04 | 277 | 4.6% | 220 | 3.9% | 293 | 4.8% | 439 | 6.5% | 371 | 5.9% |
| 05-15 | 803 | 13.3% | 658 | 11.6% | 657 | 10.8% | 1,043 | 15.4% | 849 | 13.5% |
| 16-24 | 556 | 9.2% | 504 | 8.9% | 1,067 | 17.6% | 923 | 13.7% | 738 | 11.7% |
| 25-44 | 1,464 | 24.2% | 1,211 | 21.5% | 1,784 | 29.4% | 1,950 | 28.8% | 1,623 | 25.8% |
| 45-64 | 1,604 | 26.5% | 1,573 | 27.9% | 1,355 | 22.3% | 1,518 | 22.4% | 1,570 | 24.9% |
| 65-74 | 628 | 10.4% | 681 | 12.1% | 442 | 7.3% | 472 | 7.0% | 528 | 8.4% |
| 75-84 | 523 | 8.6% | 554 | 9.8% | 338 | 5.6% | 315 | 4.7% | 434 | 6.9% |
| 85+ | 197 | 3.2% | 245 | 4.3% | 134 | 2.2% | 102 | 1.5% | 184 | 2.9% |
| Total | 6,051 | 100% | 5,647 | 100% | 6,070 | 100% | 6,763 | 100% | 6,297 | 100% |

Summary of data

- 2.27 Using these scenarios a number of demographic and socio-economic assumptions can be made relating to a new community in East Devon. There is a high level of uncertainly around the specific estimates provided but this demographic analysis provides a foundation upon which further work can be based, particularly once the housing strategy is finalised
- 2.28 Table 1 and Table 2 show that the Priory scenario (S4) has the highest, and the East Devon scenario (S2) the lowest, projected population.



- At 2,900 households there are likely to be between 5,656 and 6,758 people in the new community, with a best estimate of approximately 6,100 people. This is achieved by discarding the outliers (S2 and S4) and averaging the population totals for the remaining scenarios (n=6,138).
- At 6,500 households there are likely to be between 13,580 and 14,104 people with a best estimate of 13,758 people.
- 2.29 Table 3 shows what the age-profiles will look like at 2,900 households. This is difficult to estimate accurately.
 - The population age structure is likely to be younger than that of the East Devon district.
 - The balance of tenure will impact on the demographic, social and economic characteristics of the new community

Conclusions - a balanced community?

- 2.30 There is no agreement or prescribed formula as to what constitutes a "balanced" age structure for a new community. Across the country significant variations in demographic structures exist within communities that could be described as balanced.
- 2.31 Extremes in any population structure such a large number of young families, single people or older peoples brings unique problems. These include
 - Uneven demand for schools as the community develops and age structure evolves over time
 - Demand for services such as public transport, health centres
 - Building social capital in a very young and transient population
 - Perceptions of neighbourhood and community depend on length of residences and older age
- 2.32 Communities also have a life cycle and demographic transition occurs over time. In the long term if Cranbrook is to be sustainable it will be essential to build into the new community choice and mix in housing type to promote *balance*. This theme is covered throughout the report. Specific measures for all age groups and populations will need to be considered.



3. Policy context for the Cranbrook New Community

National Policy

- 3.1 The Wanless Review looked at priorities for public health and identified the risk that demands on the health services, and on the public purse, continue to spiral while public health shows little improvement (11). For public health to improve and for demands on the health service to be contained the public have to become *fully engaged* taking responsibility for their own health whereby:
 - ... levels of public engagement in relation to their health are high: life expectancy increases beyond current forecasts, health status improves dramatically and people are confident in the health system and demand high quality care. The health service is responsive with high rates of technology uptake, particularly in relation to disease prevention.
- 3.2 The White Paper on public health, *Choosing Health*, addresses this and stresses the importance of providing the social and economic context for health while also emphasising the role, and responsibility, that individuals have in determining their own health. The *Choosing Health* White Paper focuses on tackling health inequalities and identifies six priority areas for action: smoking, obesity, sexual health, mental health, and alcohol (12).
- 3.3 Wider society, public and private sector, need to provide the social, economic and physical environment within which people have the opportunity to choose a healthy lifestyle (12). The White Paper stresses that a major change is needed in the way *health* issues are addressed: improving health choices involves many players. Many of the required actions for implementing *Choosing Health* are only achievable in collaboration with a range of partners at both local level, such as local authorities, and others at a regional and subregional level.
- 3.4 The Wanless report (13) points to the potential for ever increasing costs of, and demand for, health services. The report states the importance of a *fully engaged public* who are able to do what they can to protect and manage their own health and well-being. In order for people to remain independent and to be self-reliant, they need the skills, the personal finance and the environment in which they can 'flourish'. This requires high levels of education and literacy.
- 3.5 This supports the focus this HIA is taking on social cohesion.

Our Health, Our Care, Our Say

3.6 Our Health, Our Care, Our Say (14) highlights the importance of taking action to improve local partnership working and to increase the responsiveness of health providers. Systematic partnership working between NHS bodies, local authorities and other partners is encouraged for instance through joint appointments, pooled budgets and joint commissioning arrangements.

Local Government White Paper

- 3.7 Strong and Prosperous Communities (15) aims to enhance local leadership on health and well-being and aims to give greater clarity over who is responsible for delivering local health and well-being targets. The white paper gives a stronger voice to overview and scrutiny committees whose role will include scrutinising the response of both local authorities and PCTs to the reports of Directors of Public Health on improving the health of local populations. The paper proposes introducing a new statutory partnership for health and well-being under the local strategic partnership and a formal duty on local authorities and Primary Care Trusts (PCTs) to cooperate.
- 3.8 The White Paper (15) not only advocates local authorities working together, it also advocates an integrated approach to economic development, housing and planning.



Regional and local planning policy

Regional Spatial Strategy for the South West

3.9 All the major development proposals such as mixed-use areas and urban extensions should be subject to a Health Impact Assessment, so that the potential impacts of development on health are identified and addressed at an early stage in the planning process (16, policy HE3).

New Communities and Strategic Urban Extensions

- 3.10 The LDF briefing paper on new communities and strategic urban extensions is Devon County Council's advice to Local Planning Authorities and refer to all planned 'new communities' including free-standing new settlements, semi-independent settlements and urban extensions of existing towns and cities (7). DCC states that the term 'new community' emphasizes the need to create a community rather than just a physical settlement.
- 3.11 The briefing papers (5) include clear direction to conduct Health Impact Assessments on major new developments. It also provides a list of key characteristics for new communities including substantial social and community infrastructure and governance. The briefing paper provides a strong mandate for considering health, wellbeing, health inequalities and cohesion within the wider agenda of sustainability.

Devon Structure Plan Policy ST12 (East Devon New Community)

- 3.12 Devon County Council's policy ST12 states that a New Community should include provision for at least 3,000 dwellings, associated employment land and a range of community and other associated facilities (17). It stated that the New Community should be located where it will:
 - be assimilated into the landscape of the area.
 - avoid, as far as possible, the use of significant areas of the best and most versatile agricultural land
 - be well related to but separate from existing settlements
 - be linked to Exeter in the first phase of its development by an effective road based public transport system
 - access the Exeter-Waterloo rail line by way of a new rail station to be provided in the first phase of the overall development scheme.
 - be accessible to the Strategic Road Network and the Local Highway system
 - be developed without adversely affecting the operation of Exeter Airport and where it would not be affected by unacceptable levels of aircraft noise, and be capable of accommodating further development beyond the current plan period.
- 3.13 The policies in the Devon Structure Plan (e.g. Proposal ST12 on Cranbrook) are now saved for a period of 3 years since the commencement of the 2004 Planning Act or until a Regional Spatial Strategy is adopted.
- 3.14 The potential for a significantly expanded new community in the range of 5000-6500 dwellings should be clearly addressed in all the developer strategies submitted in the amended planning application. Clearly the size and density assumptions in the RSS have fundamental implications for Cranbrook's design, character and infrastructure, though it accords with the general academic consensus of a sustainable size for a new settlement to function as a 'community' (18). In design terms there remain concerns that no masterplan has yet been produced for a 6,500 dwelling East Devon New Community and considered how the current 2,900 dwelling application could fit within the extended masterplan. Therefore it is essential for the new community to expand from its current proposed size of 2,900 dwellings in order to support a full range of infrastructure and services, and support the growth of Exeter providing the resource the city needs to grow and develop and helping to meet the sub-region's housing needs. There needs to be a clear vision of what the 6,500 dwelling new community may look like, rather than just planning for a 2,900 dwelling



- settlement without a clear articulation of how the 6,500 dwelling new community would function and how key issues would be addressed (e.g. transport in terms of accommodating high quality proposals, design, density etc.)
- 3.15 The implications of Cranbrook growing to 6,500 dwellings should be a significant consideration when designing, planning and implementing the 2,900 dwelling application. Clearly the expansion of Cranbrook beyond 2,900 dwellings has significant benefits in terms of infrastructure funding and critical population mass, but it does require that the settlement is future-proofed to ensure it is a sustainable community both now and in the future, and meets society's changing needs and demands.

East Devon Local Plan and Supplementary Planning Guidance

3.16 Devon County Council's policy ST12 states that a New Community should include provision for at least 3,000 dwellings, associated employment land and a range of community and other associated facilities (17). East Devon's Local Plan policy PUA1 provides more detailed parameters for a development up to 2,900 homes (19) which are also described in detail in the Supplementary Planning Guidance (20).

The new community will be a healthy, attractive and sustainable place to live; well designed and well thought out, with the services and facilities one would expect in a small town. The town will have an urban character but will be set within a "green framework" of open spaces, trees and hedges, which will provide a natural backdrop. High priority will be given to the pedestrian and cyclist, and the majority of streets and public places will not be dominated by motor vehicles. The new community will be economically active, both within its boundaries and in relation to nearby major employment sites. Overall, the intention is to create a modern market town. An exemplar development of which everyone can be proud. Its design and development will seek to meet the high standards set and will challenge the conventional approach, where necessary, in order to achieve this.

From East Devon District Council (20).



4. Description of the Cranbrook New Community

- 4.1 Due to its geographical position and generally high environmental quality East Devon probably faces both more challenges and greater economic growth prospects than other parts of the County. The high quality landscape both attracts inward investment and restricts those areas which can be developed.
- 4.2 Pockets of deprivation do still exist, however, the most concentrated of which are in Seaton and Exmouth, although pockets exist elsewhere. Market and Coastal Towns Initiatives and DCC's priority communities are part of a range of measures attempting to address these issues. The well-planned regeneration of existing communities has the potential to stem some of the growth in commuting within the area and to act as a hub for local and sustainable economic growth.
- 4.3 East Devon's position along the main road arteries of the M5, A30, A303 and A35 mean much of it is well placed to maintain the viability of existing business, to attract business investment and to act as a base for commuters.
- 4.4 The location of rapidly growing Exeter airport within the District and of the due to be improved long-distance line from Exeter to London Waterloo also contribute greatly to these advantages. Expansion plans for Exeter Airport and partner airlines and developers are still at an early stage. The new community at Cranbrook as well as the development of strategic employment sites at Skypark and Science Park Developments will have a significant impact on the economy of District. While these developments will have an impact on the entire District, Figure 3 shows how immediate effects will be felt most by the western most parts of the District adjacent to Exeter. Surrounding towns and villages will also feel the effects of this growth: Broadclyst, Rockbeare, Clyst Honiton and Whimple will all be affected by a new community at Cranbrook (see Figure 4).

Broadclyet

Station Cranbrook

Rockbeare

Ral Redent
Turmina

Styperk

Bectroa

Bectroa

Chyet

Fax

Honiton

Rockbeare

Ayleebeare

Ayleebeare

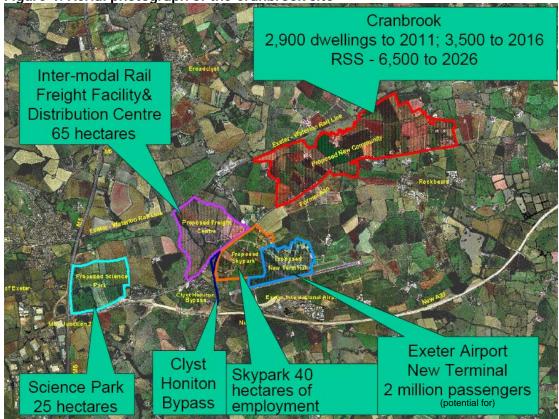
Clyst St Mary

Figure 3: Context plan

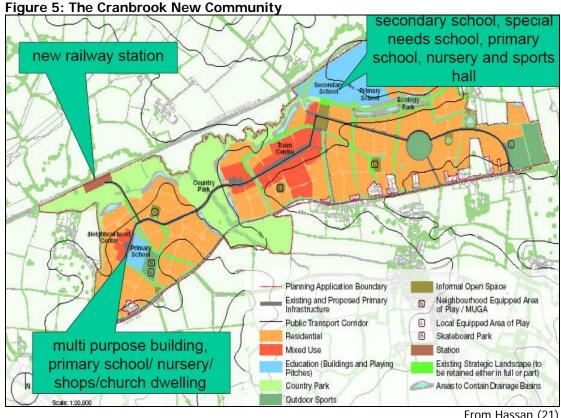
From David Lock Associates (8, p8).



Figure 4: Aerial photograph of the Cranbrook site



NB extra passengers for Exeter Airport indicates potential for expansion not actual expansion Adapted from Hassan (21)



From Hassan (21)



- 4.5 The high quality environment (i.e. Jurassic Coast, Blackdown Hills) is likely to continue to attract the growth of a range of smaller, often local produce or lifestyle focused businesses in many parts, in addition to other businesses located in settlements throughout East Devon and to the likely growth in larger scale employment in the western parts of the District.
- 4.6 The EDLP also proposes sites for the Structure Plan proposals for further strategic employment and infrastructure developments in the vicinity of the new community, making provision for the strategic employment site known as Skypark, an Intermodal Rail Freight Terminal (IMRFT) and for the expansion and development of Exeter Airport. Skypark is located less than 1km to the west, to the south of the old A30. Exeter International Airport is adjacent to Skypark and the proposed IMRFT is on the northern side of the former A30 opposite the proposed Skypark development, also less than 1 km to the west of the new community (8, p7).
- 4.7 Slightly further afield, the application site has strong physical connections to major employment concentrations to the east of Exeter on both sides of the M5. These include the Meteorological Office, EDF Energy, and now the Science Park proposal that has been endorsed in the now adopted Structure Plan 2001 to 2016. The relationship of the application site to the other strategic developments in the vicinity is shown on the context plan (8, p7).
- 4.8 The application boundary area for the New Community consists of 176 hectares of land situated to the east of Exeter, between Broadclyst, Whimple and Rockbeare. The site lies to the south of the Exeter-London Waterloo railway line and mostly to the north of the former A30 (other than a small part of the site which lies to the south of the former A30 but this land is proposed as a country park with no built development). The majority of the site is farmland. A small part of the site at the south-eastern end is used as a nursery and garden centre. Within the site there are two farmhouses and two other houses, which will be retained within the New Community. There are also a number of existing properties that abut the site boundary, including those at Higher Southbrook and Jack-in-the-Green.
- 4.9 The New Community site is located close to the major existing and proposed employment concentrations to the east of Exeter. Within 1km of the New Community site are Skypark (a proposed strategic business park), the proposed Inter-modal Rail Freight Terminal and the expansion and development of Exeter International Airport. Also nearby are the Meteorological Office, the new EDF Energy offices, and now the Science Park proposal envisaged in the Devon to 2016 Structure Plan.

Description of development

- 4.10 The East Devon New Community Partners' outline planning application proposes 2,900 homes to meet the housing needs of Exeter and East Devon. This would go towards meeting the adopted Devon Structure Plan's (Proposal ST8) requirement for "at least 3,000 dwellings to be provided in the new community in East Devon by 2016.
- 4.11 The plans for the Cranbrook New Community have been a long time in the making and the documentation associated with the proposed development describes a complex process. The 2005 Planning Statement (8) and the 2006 amendments to the outline planning application (22) set out the proposals for the development of Cranbrook. The proposals have been subject to a number of environmental assessments (23) and the design guidance for the town is laid out in the "Strategic Design Guidance" document which accompanies the amended application (24).
- 4.12 Development to include the following uses in the locations shown on the Development Framework Plan (25, ch2, p10):
- 4.13 Up to 2,900 dwellings of a mix of dwelling type and size, including a proportion of affordable dwellings, in locations shown on the development framework plan including the town centre and local centre, with associated car parking in accordance with PPG3 and PPG13 standards:
- 4.14 A town and local centre comprising the following uses with associated car parking in accordance with PPG13 and PPG3 standards:
 - up to 17,500 sq. metres (gross) of employment;



- up to 6,700 square metres (gross) retail floorspace (to include A1, A2, A3, A4 & A5);
- hotel(s); and
- community facilities including assembly, leisure and health.
- 4.15 Two primary schools, one special needs school and one secondary school and associated playing fields including all weather pitch(es) with floodlighting and associated parking of up to 70 spaces plus cycle storage facilities and associated facilities
- 4.16 A new railway station with associated parking of up to 70 spaces plus cycle storage facilities and associated facilities and A1 retail outlet (not to exceed 200sq.m.).
- 4.17 Sport facilities and pitches with associated car parking and children's play facilities comprising equipped areas of play, multi-use games areas and civic space.
- 4.18 Strategic open space and landscaping provision including the retention within the public realm of those hedgerows identified on the Development Framework Plan (either in part or full), the provision of a country park and informal open spaces, the planting of copses. The country park to include compensatory flood plain works, trim trail, shared surface walking and cycling route, interpretation features, and creation of new areas of habitat of wildlife value.
- 4.19 Primary road / public transport corridor and associated access roads onto the old A30 as identified on the Development Framework Plan, footpaths and cycleways. Associated infrastructure, roads, lighting, drainage systems for foul and surface water and floodplain compensation.



5. Services

- 5.1 Social infrastructure can include: education; health and social care; recreation and leisure services; and emergency and essential services. Social infrastructure plays a vital role in creating sustainable healthy communities.
- 5.2 The importance of social infrastructure and the role that it plays in creating sustainable communities is easy to understand. However, the process of planning for and delivering services is subject to a wide range of challenges. The most important being the demographic profile of the population for whom the service is planned.
- 5.3 The influx of a new population will impact on the provision of health care, education and other services within the development and the surrounding towns and villages.

Key issues from consultation

- 5.4 Consultees were keenly aware of the importance of services. Two main issues arose:
 - services are vital for creating a sustainable and viable community; and
 - service provision must meet the needs and demands of all the age groups within Cranbrook.
- 5.5 A good understanding of the population profile of the new Cranbrook will enable services to adapt to meet the needs of the existing population and the new population. Whilst this is possible for the existing surrounding population it is significantly harder to determine what the likely effects will be for the proposed population.
- 5.6 Consultees asked for more information as to the potential needs and demands of residents in terms of services required. This will allow local service providers such as childcare providers, education and training organisations to plan and prepare for this new demand.
- 5.7 A number of consultees stated that youth service provision appears to be absent within the development proposals. They commented that the needs of young people need to be taken into account from the early stages of the development and in the phasing of the new community. Questions were also raised as to whether a physical location should be provided for youth services such as youth club/centre or will the youth themselves organically develop a site in which they interact with other children?
- 5.8 Consultees also noted that the needs of other demographic groups such as the elderly and ethnic minorities who will locate within the new community should be accounted for and considered within the design of services for the new community, i.e., there should not be an exclusive focus upon youth provision.

Government policy is encouraging services to redesign themselves so that people can be cared for in the community so we need houses we enable us to do that. But even if we get good provision of lifetime homes there will be a need for extra care provision.

Children's centres – they need to address the universal needs of 0-4 year olds. And the children's centre in Cranbrook will need to outreach to neighbouring communities who do not have the critical mass to support their own centre. It will be important that there is a café type facility to enable people to drop-in. This is important to enable people to build the social networks that are so important for people's health.

Description

5.9 East Devon District Council have indicated that providing services and infrastructure at the site will, in turn, provide the necessary land value uplift to enable a full range of services and facilities to be sited within walking distance of people's homes (18). The principle of community involvement is enshrined in the Section 106 Agreement to pay for the enhancement of facilities for wider community use: East Devon DC state that the premises



- need to make provision, or allowance, for the involvement of parents and the wider community (18).
- 5.10 The first community facility building to be completed will be Cranbrook's Multi-Purpose Building (MPB). East Devon see this as one of the key amenities within the emerging new community. It is envisaged that during the early phases of development the MPB will be a focus for community life. It will provide access to health, social, leisure and community resources including a temporary location for primary health care services and the police. The MPB will be sited in the western end of Cranbrook.
- 5.11 The HIA strongly supports the principle of co-location within buildings as the population grows. The use of the MPB will change as people move into Cranbrook. It will be important to ensure that the practicalities of co-location do not render the idea unworkable, *ie* that the design of the MPB is sufficiently flexible to allow simultaneous, and serial, use by organisations with different spatial requirements. For example, depending on the services offered, the primary health care services will require security within their area of the building to ensure privacy of patients and safety of both patients and staff. This could conflict with community, or educational uses. The tenancy agreement for the tenants of the MPB will stipulate who will cover the costs of refitting the space. It will be important to ensure that these costs are not a deterrent to potential tenants.

Generally the voluntary sector is expected to maintain these buildings. But often they are taken over, in a sense, by one or two groups who have the access to funding and resources to maintain them and then they can become exclusive. An important function of a community building is however to be broad and inclusive. It is difficult to balance the community's different needs in one building. For example getting schools being used more broadly by the community – shared use facilities (such as getting a health and well-being centre being used by others – children's centre and extra care facility – such as at Cranbrook) is now a more accepted approach.

In Cranbrook this is being encouraged – there will be shared facilities – a café / treatment rooms. It was a partnership challenge to agree to share things – but also a design challenge. Our problem now is having the capacity to get involved in the details of the facility's design. This kind of shared facility we haven't talk about at Cranbrook – but they have talked about the Community Trust idea there. This is really important and a good idea. – although details need to be worked out.

- 5.12 The new community will require a permanent library of at least 400m². Devon County Council consider acceptable the current proposals to locate the permanent library within the Governance and Administration Building before the occupation of the 1,501st dwelling. Prior to the permanent library facility being established it is essential that mobile provision is provided. Devon County Council will be seeking to achieve funding of approximately £60,000 towards mobile library provision at Cranbrook.
- 5.13 **Health and social care facilities:** Devon County Council (18) state the current health and social service requirements as:
 - 0.2ha (2,000m²) for a Children's Centre and funding towards the build cost;
 - a Children's Centre to be co-located within the Health and Well Being Centre (HWBC);
 - 0.6ha (6,000m²) for the Health and Wellbeing Centre (delivered at 1000 dwellings' occupation);
 - 0.5ha (5,000m²) for Extra-Care housing provision (approximately 50 units);
 - 100% Lifetime Homes Standard in all dwellings; and
 - 10% of homes to be wheelchair accessible
- 5.14 DCC has decreased its funding requirement for the Children's Centre from £830,000 to £430,000, in order to provide extra finance to support a permanent youth centre.
- 5.15 The Extra-Care facility will create increased, and very localised, demand for services for the elderly.
 - ... the development should cater for the very frail on the one hand and the older but independent people on the other and you need to get the balance right. Smaller than a



- 50 unit development it is hard to make work financially and much larger then it starts to become a community within a community.
- 5.16 **Education**: The application proposals include areas for two primary schools and one secondary school. The locations and land area have changed in accordance with the requirements of the Local Education Authority and they now comprise of one secondary and primary school campus of 11.5 hectares; and a second primary school of 2.5 hectares.
- 5.17 East Devon County Council propose to relocate Clyst Vale Community College (currently 1,090 students (26)) to accommodate the requirements of the New Community and to avoid inefficiencies in running a small secondary school (18) and use the opportunity afforded by the new community to improve provision of services.
- 5.18 Education provision has to be extended to allow for integrated services in schools, extended schools and *educare* as required by the Children's Act 2004. Access to the secondary school facilities for community activities and sports, needs to be agreed in writing through a joint-use agreement (18). The joint use agreement is an important document as it will set the terms of reference for access to the school and its facilities. Secondary schools are valuable facilities for communities and the community activities could include further education people living in Cranbrook and residents of adjacent villages. Appropriate facilities will need to be provided for joint-use arrangements (e.g. adult changing rooms in schools, expanded assembly hall).
- 5.19 **Child and youth provision:** 0.5 hectares has been allowed for the Multi Use Games Area (MUGA) requested by Sport England in place of a NEAP, to be provided as a shared facility with the primary school (8, p39). Importance of agreeing access for dual use facilities from the outset
- 5.20 Consultees involved in childcare provision stated that the capacity of the new community to deliver pre-school provision should be addressed.
 - ... they need to address the universal needs of 0-4 year olds. And the children's centre in Cranbrook will need to outreach to neighbouring communities who do not have the critical mass to support their own centre. It will be important that there is a café type facility to enable people to drop-in. This is important to enable people to build the social networks that are so important for people's health.
- 5.21 It was felt that the surrounding villages will be unable to accommodate the new and increased demand generated by Cranbrook residents for pre-school provision. In addition childcare services should have their own premises rather than sharing a flexible space with other civic organisations and groups. They also commented that developers and organisations associated with the new community planning, development and delivery should recognise the link between childcare provision and the ability of residents to access employment opportunities within and outside the new community. Without adequate and affordable child care facilities the socio-economically disadvantaged, and in particular lone parents. will experience difficulties in accessing employment opportunities. Further they felt that school and educational facilities will be the major drivers of social cohesion in the initial stages of the new community development. In combination schools could also act as major conduits of youth service provision in the initial stages of the development, helping to manage and direct the provision of services, *ie* they may be in a better position to decide what is appropriate for local young people in terms of their needs.

Opportunities for health improvement

5.22 The recent UK White Paper on Public Health (12) describes the importance of actions to 'secure better access to healthier choices for people in disadvantaged groups or areas', noting that 'deprived communities often lack good local access to places to buy fresh fruit and vegetables'. Policies to combat diet-related health inequalities have therefore been a priority (13;27-29) but evidence informing where, when and how to reduce these inequalities has been thin on the ground.



- 5.23 **Small retailers:** PAT 13 (28) states that the Government (national and local) needs to better understand the wider economic importance of small retailers as the linchpin of a sustainable business base in neighbourhoods.
- Indeed the masterplan proposes that small, low margin retailers will be protected in terms of rental agreements in order to prevent the community and the high street from being monopolised by large scale multi-national retailers. In terms of creating a socially and economically cohesive community this is an important proposal that must be adhered to over the course and phasing of the development. For example, while small retailers are very vulnerable they provide vital employment opportunities (part-time jobs in particular), and so have a positive impact on the quality of life of people living in these communities particularly for those groups such as lone parents and the elderly for whom it may not be feasible or realistic to enter the workforce on a full-time basis. As noted in the governance chapter they can also serve as local hubs or sites of informal social interaction and providers of local information which aides in the development of bonds between residents. As opposed to the more formal mechanisms of social interaction such as community groups and trusts. Therefore these retailers will be particularly important in the initial stages of the development, characterised by the absence of formalised groups and in which people will be in the process of forming social relations with their fellow residents. This informal interaction is important for groups such as the elderly. In terms of health this will also help to reduce the sense of social isolation that may be experienced by groups such as the elderly.

Other concern is the need to produce a high street for a new town – it will be near enough the size of Ottery – and it needs a range of shops – commercial centre – and hope that the developers will build this and that businesses will move in – need a shopping hub – that is more than just Tescos.

- 5.25 While the retail offer is described a public health focus would require mention of access to safe, affordable, nutritious food. A continuing focus on access to safe, affordable, healthy and nutritious food will be welcomed. A supermarket will be provided in phase 2 in the town centre. Objective 8H of the SPG requires allotments and community composting and recycling (20).
 - ... design in from the outset allotment & community garden spaces in central not marginal locations
- 5.26 **The construction process:** The phasing of the construction process is key as it will be important to ensure that all facilities and infrastructure are available at the required time. It will be important to ensure that the social infrastructure is established in advance of the population moving in to Cranbrook (or at least in tandem with it).

Potential health risks

- 5.27 **Diet and food access:** No mention is made in the masterplan proposals as to the nature of the actual retail provision particularly in terms of whether fast-food retailers will be allowed to locate in the high street or in the community. There is some mention of 'small, specialised food retailers' locating in the high street which may cater to high end food stuffs. In terms of health this is important as there has been growing interest in the ways in which features of the local food environment may be related to the dietary habits of individuals.
- 5.28 The dietary patterns of individuals differ across neighbourhoods and these differences are not wholly attributable to individual-level socioeconomic characteristics. Studies in the United States show that the number of supermarkets is lower (30) and the number of off-licences and fast food outlets higher (31-33) in more deprived neighbourhoods. In turn, the availability of services and amenities (such as grocery stores, pharmacies, as well as recreational spaces) may facilitate or constrain a person's ability to engage in health-promoting behaviours such as eating fresh vegetables, obtaining medicines, or getting regular exercise (34;35).
- 5.29 **Youth services:** One of the major social risks posed by the development is an absence of youth service provision. East Devon state that an outreach youth worker will be appointed



once the development has begun but it has been noted by variety of consultees that provision for young people in the development is inadequate. East Devon District Council state that the location of youth facilities will be decided in consultation with young people as Cranbrook becomes populated.

A process and programme of events needs to devised and funded and needs to ensure that EDDC will be able to respond to what young people say. To listen to what they say and take it seriously. Planning department tend not to be very receptive to these sorts of views and it is important that they are engaged before the consultation takes place.

- 5.30 Youth service provision is an important issue given the projected demographic profile of the future population. The provision of physical spaces where young people can congregate such as sports fields/playgrounds/community centres can be important mechanisms by which they can interact amongst themselves and also where they can feel included within the community.
- 5.31 This HIA supports the outreach approach for youth services: youth services may not be best situated in one building and consultation with Cranbrook youth and with pupils who will relocate to Cranbrook will help identify the best approach. The process of involving young people will also set a good precedent.
- 5.32 As always there is a balance to be struck: one consultee observed that
 - ... it will be important that there is a café type facility to enable people to drop-in. This is important to enable people to build the social networks that are so important for people's health.
- 5.33 The HIA suggests that East Devon identify a suitable town centre site for youth services in the event that they are required. As a number of consultees pointed out:
 - '... providing services for young people in a new community is critical if you want to prevent social problems from starting up ... Even if it's just a floodlit football pitch it provides a space they can feel safe and get away from their parents for a bit'.
 - ' ... a problem that could occur in the course of Cranbrook's growth is that the needs of young people are completely forgotten due to the concentration of the developers and local economic policy makers on making Cranbrook a place for affluent commuters to live'.
 - '... the idea of youth provision is to give children a place to go and be with their friends rather than roaming the streets like stray dogs and causing trouble. They might not be doing anything but to the old lady who lives in the street just seeing them in a place they should not be will scare her to death'.
- 5.34 The observation that children and young people can appear threatening to older people is well-recognised. Young people themselves feel quite vulnerable in public space. In one study half of the total sample of 1,087 9-16 year olds perceived streets to be fearful places when they are out alone and one fourth of them felt the same when they are out with friends. By far the most articulated dangers after traffic were bullies and gangs, fear of attack and fear of strangers (36). The results suggest that
 - young people's place fears are largely the products of how adults use places
 - being with friends when outside the home is very important to young people.
- 5.35 However, it is when young people congregate together that they are often seen as discrepant and their behaviour as threatening. The survey showed that in most cases all they are doing is making themselves feel safer by being together (37).
- 5.36 The consultee goes on to imply that there are places where young people should not be. Youth facilities are often located in marginal areas and this is often down to an adult perception of youth needs and adult fears about youth. The apparent threat posed by young people is dealt with by locating services for them away from busy centres. This separation does not assist with social inclusion. Shaftoe argues that this marginalisation is an error and a function of adult thinking (38). This suggests that the location and subsequent management of facilities is critical. It also suggests that young people should be involved in the final decisions. So while the HIA expresses support for East Devon's



- outreach approach to youth services it also suggests that sites for youth services are identified at this stage.
- 5.37 Generating a sense of cohesion amongst the youth population and strengthening youth service provision can also be aided by and through the educational institutions within the development. Schools facilitate and provide the context in which children interact and bond with their peer groups.
 - ... activities are important, but the most important element of the youth service is the personal and social education element. That is what is really needed out of school services that can offer that personal and social education, address issues around drugs and alcohol, sexual health, relationships, etc
 - ... it is important that youth service provision is there from the beginning. In a new town it is particularly important because the town is not established so young people may be already suffering a sense of isolation so in a new community there really is a need for somewhere where young people can gather and get the support they need.
 - ... key will be to engage young people and to ask them what they want. This should be very possible as Clyst Vale and Clyst Honiton schools will be moving to Cranbrook and the young people could be involved in the discussion about provision and design of these new schools.
 - ... consultation with young people should also involve youth service and include the outreach youth workers in Broadclyst for example, as well as other neighbouring towns. To ensure that the hard to reach young people are involved it is important that whoever is doing the consultation goes to where young people gather to ask them.
- 5.38 The relationships formed within this context can then be supplemented, supported and strengthened by the wider local community in terms of services geared towards young people.
 - ... and it is not just young people that should be involved faith group / older people for example should also be engaged. There are very many old people in East Devon and they will be very troubled by this new development and need to have their voices and concerns about the new development taken into account.



Health code 1: services

| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|--|--|--|---|--|
| A full social infrastructure, health, social care, retail, leisure, education and emergency services and associated facilities for community welfare and self sufficiency appropriate to all population age groups in a town of at least 6,000 people and future proofed for later expansion to a community of 5,000 to 6,000 dwellings. | Resources to fund services and facilities will be identified prior to the arrival of the population to enable services and facilities to be provided in phase with the development. | Services and facilities to be provided at locations accessible by sustainable transport initiatives and based upon a 'walkable community | Full and ongoing assessment of service needs to inform provision | Provision of services and facilities in phase with the development. Levels of uptake of services by new community residents and by residents from neighbouring villages. Levels of satisfaction with services. Access needs of all population groups are considered |
| Speed to Greek diversings. | Resources for a full social infrastructure needs assessment Start-up and innovation funding for small businesses especially retail | Site allocation required Space for small business retailers | Involvement of statutory and voluntary sectors and the public in East Devon and East of Exeter sub-region Preferential tenancy agreements for small local businesses Support for small businesses through successful and unsuccessful business cycles | Completion and implementation of social infrastructure needs assessment. Long-term viability of local businesses. |
| A sense of cohesion amongst the youth population and strengthening youth service provision | Specific facilities and services geared towards young people are provided for. Other community facilities (libraries, health, leisure services etc) also consider the needs of young people. | Principle of youth services provided at central and accessible location. Space is allocated for youth provision. Flexibility in design. | Early and ongoing consultation with young people to establish the most appropriate form of school and community provision. Services (school and community based) provide the context in which children interact and bond with their peer groups. | Identify the service needs of particular age groups such as 0-4, 5-11, 12-16, 16-18 year olds. |



| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|---------------------|------------------------|--------------------|--------------------------------|----------------------------|
| | | | Full and ongoing assessment of | Identify the service needs |
| | | | service needs to inform | of all age groups. |
| | | | provision | intergenerational projects |
| | | | Community Development | Satisfaction of all age |
| | | | Worker to run | groups |
| | | | intergenerational projects to | Sense of attachment to |
| | | | reduce potential for conflict | Cranbrook |
| | | | between generations. | |



6. Transport and connectivity

Key issues from consultation

- 6.1 Consultees were unanimous about the need for a public transport system that is reliable and affordable. Consultees stated that this will enable residents to access services and facilities not only within the new community but also those of the surrounding communities. This is particularly important in order to prevent a sense of social and geographical isolation from developing amongst the new community residents.
- 6.2 In addition a reliable, efficient and affordable public transport system will also enable groups such as the socio-economically disadvantaged, i.e., the unemployed and those who lack access to a car to access the employment opportunities which exist in and around the new community. This will therefore increase rates of social inclusion and social mobility amongst the socio-economically less well off resident of the new community.

Public transport needs to be very good. There needs to be a concerted effort to push this forward and to ensure good transport links to neighbouring communities as well as into Exeter. This is really important if sustainable transport is to become more attractive than the car.

... ensure that public transport elsewhere such as Whimple station is not lost as a result of Cranbrook

Description

- 6.3 Cranbrook is designed to be an exemplar of sustainable travel with high quality, high frequency public transport provided into Exeter City Centre from the commencement of development through both bus rapid transit and a new railway station and shared surfaces that encourage walking and cycling for all short journeys (24).
- 6.4 A regular 15 minute service will be available to the first residents in order to establish a pattern of non private car dependent travel from the outset. The developer has an obligation to fund public transport from the earliest occupation, and to continue this funding until the completion of the community. It has also ensured that the bus can penetrate the community from the earliest opportunity, so that the bus is an obvious first choice for journeys to work. The Framework provides for all residents to live within easy walking distance of the public transport corridor (no more than 400m from a bus stop) in order to encourage usage.
- 6.5 Provision for and delivery of a high quality public transport link from Cranbrook to the airport, Skypark and the Intermodal Rail Freight terminal IMRFT is outlined (8, p76). Excellent public transport links to Exeter (via bus and train) is also central to vision of the new community. Relationship of Cranbrook to other strategic sites east of Exeter is shown in the context plan (see Figure 3 on page 13 and Figure 4 on page 14).

Opportunities for health improvement

- 6.6 A review for the DETR (39) suggested a link between transport and health and commented that transport provides:
 - access to work, food, health facilities, training, education, leisure;
 - practical services (eg in isolated rural areas, buses serve variety of functions such as carrying parcels, and a 'bank');
 - social interaction, through greater levels of contact between people; and
 - symbolic expression of an area as well connected with wider society in the city as a whole.



- 6.7 **Public transport**: The provision of high quality public transport into Exeter from the outset of the development is critical to Cranbrook's sustainability.
- 6.8 Residents in Cranbrook, and visitors to Cranbrook, need to be encouraged and empowered to adopt sustainable and active lifestyles from the outset. The design manual promotes the concept of 'initial dependency'. With high public transport usage comes higher walking and cycling usage; this is the pattern elsewhere in the UK and on the mainland of Europe where conditions are similar. The trick will be to ensure that public transport use is high and that people will feel comfortable and confident to use public transport to travel locally within Cranbrook and the surrounding villages and to travel between Cranbrook and Exeter and employment locations.
- 6.9 Particular groups are disproportionately affected by lack of access to transport, primarily the elderly, many women and young people. A 2002 survey in the South-West of England found that over 40% of a sample of young people (15-24 years) reported that transport issues had influenced their post-16 education decisions (cited in source 40). Employment opportunities and social activities are often severely restricted by the availability of transport and there is often little or no provision in the evenings and at weekends. The EDNCP's undertaking to ensure a 15 minute service is welcomed. We note that this undertaking is made for the first residents of Cranbrook only. We note that links are described between Cranbrook and employment sites. There is no explicit mention of links to surrounding towns and villages or to the affordability or timing of the routes. For example: will the bus service run after 8pm?
- 6.10 The Strategic Design Guidance describes how *movement and transport* needs dominate modern life and thus how *traffic management* is integral to the design philosophy of the new settlement (italics added: source 24, p33). Does this focus downplay pedestrians and cyclists? An alternative focus would concentrate on *accessibility* of which traffic management would be but one component.
- 6.11 Cranbrook is a new community on a greenfield site. It sits off the old A30 and the site has no existing through-traffic. From a safety point of view this is an advantage in that it minimises the volume of traffic (see below). A balance needs to be reached as the retail outlets will need footfall and passing traffic.
- Walking and cycling: Cycling is encouraged in the design guide for Cranbrook as a (sustainable) means of travel to work and also for leisure, health and social purposes. The design guide states that the streets (including the Main Local Route) have been designed to be 'cycleable' and form a completely connected system for cycling. The provision of appropriate facilities for cycle storage is an important means of fostering cycle use in the town. Covered cycle storage facilities will be provided at all schools, the Town Centre and the train station. Provision will also be made at local centres and sport facilities. Employers will be encouraged to make provision for cycle storage in their individual schemes (24, p93). This is very important and links with the point made in the design guide about initial dependency (24, p94). The provision of cycling infrastructure is supported.
- 6.13 There is a positive association between obesity and the level of/ intensity of physical activity in both adults and children (41). Body mass is greater in people who have a sedentary lifestyle compared to those who take part in some physical activity (42;43). Low land use mix and poor urban design have both been found to contribute to high obesity levels as they encourage unsustainable and unhealthy behaviour.
- 6.14 In the development proposals it states that cyclists will not have their own segregated off-carriageway routes, but that the distorted grid of streets will provide permeable but quiet and acceptable routes for them from the hinterland of the community to the town centre, or to the main cycle routes being provided to the east and west of the settlement. A comprehensive and separate network of footpaths and cycle ways within the fabric of the new community is not required, as these streets should be designed for low speed.
- 6.15 Devon CC have stated that all cycle ways should be integrated with the roads. This is following National guidance. Franklin (44) notes that segregated cycle lanes may not be maintained to the same standard as the highway and, on these segregated lanes, there is often conflict between the needs of cyclists and pedestrians.



- 6.16 Through partaking in physical activity each day e.g. walking, cycling or a team sport people can significantly lower their risk of cardiovascular problems and obesity whilst improving their general health (41). Walking and/or cycling as an alternative mode of transport can present some health risks however including road traffic accidents, stranger danger and breathing problems associated with inhaling air pollution from traffic (41).
- 6.17 Strategies that reduce reliance on the private car will contribute to reducing social severance and to increasing social networks within Cranbrook New Town (see, for example, 45). At a local level they may also help to prevent the onset of obesity and consequent conditions such as diabetes. This impact may be particularly pronounced for children by encouraging the use of cycles and walking to school. However, in promoting the use of cycles and walking the development has to ensure that these routes are safe. The provision of infrastructure for active travel, such as public transport, walking and cycling, will increase opportunities for physical activity. Exercise contributes to reducing a range of illnesses and conditions such as obesity, cardiovascular disease, diabetes, osteoporosis and some cancers in adulthood (46).
- 6.18 **Accessibility:** Accessibility to, and throughout, Cranbrook is a requirement of the Disability Discrimination Act (47). Accessibility issues do not start at the bus stop or even the front door. Accessibility planning should take account of the complete lived experience over a day starting from movement within an individual home to a shop, place of work etc and back to the home.
- 6.19 The HQPT will need to meet accessibility standards.

Potential health risks

- 6.20 While transport systems may bring benefits traffic volume and speed, the design of transport systems and the travel behaviour of individuals can all present a hazard to health and safety, in particular for child pedestrians and older people.
- 6.21 **Public transport:** The profile of the future population of Cranbrook is currently unknown but the scenarios on page 5 suggest that the population will be younger than the average for East Devon. This is highly relevant when considering transport infrastructure as lack of access to transport is experienced disproportionately by many population groups including women, children and disabled people, people from minority ethnic groups, older people and people with low socio-economic status. These groups can find that their access is reduced to services such as shops and health care and they spend a higher proportion of their resources on transport (27, p56). Access to the public transport is equated with the bus service: as previously noted this will need to be affordable, reliable and available at appropriate times. The 400m distance to a bus stop appears to be *as the crow flies:* it is not clear whether it takes length of roads into account (24, p32)(48).
- 6.22 **Road traffic injuries:** The most obvious impact of transport on health is through road traffic accidents, where the health affects are direct and immediate, causing both death and injury. Road traffic accidents impact upon both the physical and psychological health of all involved in the incident, causing post traumatic stress disorder, injury, travel anxiety and changes in mood. The rates of car ownership that will be associated with the development may give rise to increased rates of road traffic injuries both within the new community but also the surrounding areas via increased traffic flows between communities.
- 6.23 No explicit mention is made in the development proposals. Children are among the groups at highest risk of pedestrian injuries, especially when the amount of walking done by children is taken into consideration. The risk to child pedestrians is very clearly related to the number of roads they have to cross (49). The greater the number of roads crossed, the higher the risk of pedestrian injuries. Children under the age of 9 and of low socioeconomic status have higher rates of pedestrian injuries at least in part because of their increased exposure to traffic. The reduction in pedestrian fatalities to children in the US, UK, and other countries in recent years is probably largely due to a reduction in walking by children (50).



- 6.24 **Community severance:** Traffic has the potential to affect social networks on a very local basis: as traffic volumes increase people's sense of neighbourliness and the geographic density of their friendships decreases (see (45) cited in (51, p102)).
- 6.25 The problem teenagers face with regard to public spaces is that these spaces are designed so as to 'underscore that they are not meant primarily for spontaneous social meetings, they are instead meant for certain specific activities such as transportation' (52).
- 6.26 The development of a new transport network in an area can have major implications for the social networks of the community in question, reducing social cohesion and contributing to feelings of isolation. This process is termed community severance and occurs when roads carrying large volumes of traffic cut through residential areas, in effect 'severing' them (53).
- 6.27 Car *use* is not the only parameter: levels of *ownership* and the modes *accommodation* of cars are also important.
- 6.28 The EDNCP approach to car parking is to balance resident's requirements for convenience with a reduction of the visual intrusion and clutter usually associated with parked vehicles. The intention is to create attractive human scale streets dominated by buildings and (where appropriate) landscape and where vehicles are welcome, but in a calmed, subservient manner (24, p100). It will be vital to prevent this *visual intrusion and clutter* caused by parked cars as this can increase social severance and deters people from walking. A high density of curb parking is also associated with increased risk of injury for children (54).
- 6.29 The stated intention to incorporate a *Devon style* including tight structure of streets, paths, alleys and in some instances rear courts (24, p44) needs to be aligned with the intention to build a town that is an attractive, memorable and lively centre which meets the aspirations of the twenty first century consumer, especially with regard to convenience and car parking provision (24, p54).
- 6.30 An approach to parking design is covered in the Strategic Design Guide (24, p100). A comprehensive parking strategy, for both on-street and off-street parking, is essential if a sustainable development that encourages modal shift away from the car is to be achieved. Consultees expressed concern that when parking spaces are provided with homes there will be a pressure for the developers to maximise such spaces for the open market houses. Consultees felt this should be resisted and parking provision should be limited *per se* but also it should be equitably distributed amongst housing of all tenures.

Conclusion

- 6.31 It is clear that while the main form of travel is by private car all development will increase traffic *per se*. While car ownership and use is equated with economic success the numbers of cars will rise. However the global supply of oil is dwindling. Energy costs will rise. Cranbrook is a large development but it is prey to wider forces. Devon County Council must work with private industry, the District Councils, the SW Regional Assembly and the DfT to systematically reduce the demand for car ownership and use. Strong political leadership is required to find answers to problems that are politically sensitive and to make large developments such as Cranbrook sustainable.
- 6.32 There are tensions between various competing elements of design for the town from a movement and highway perspective. The desire to make any street a place incorporating good urban design, the needs of cyclists, the needs of buses to travel unimpeded throughout the community, and the needs of pedestrians, all compete with each other and are not always mutually compatible. For instance, if bus lanes were provided throughout the community, for some sections of the main route the sense of good urban space would be lost
- 6.33 The Planning and Highway Consultation/Development Control Committee require the design to be 'future proof' and to ensure the most sustainable transport outcome taking into account the vagaries of traffic behaviour, and the increase in Cranbrook's size over time.
- 6.34 EDNCP cite evidence from previous new communities and the New Towns Experiment in the UK which shows that a first class public transport system from the earliest days is critical to establishing sustainable patterns of travel (widely known as the concept of 'initial').

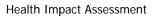


- dependency') (24, p94). Consultees were keen to see walking and cycling added to this model of initial dependency.
- 6.35 The Structure Plan Policy ST12, East Devon New Community Proposal, requires that the new community should access the Exeter Waterloo rail line by way of a new rail station to be provided in the first phase of the overall development.
- 6.36 A Travel survey should be conducted about mode of travel. It should be repeated at regular intervals. This could be designed with input from residents. This should look in detail at each stage, or leg, of a journey. This could be linked with a programme of Personalised travel planning.



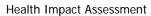
Health code 2: transport and connectivity

| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|--|---|---|--|---|
| The Cranbrook New Community will deliver an ambitious modal split from the outset in favour of sustainable modes of transport. | Resources to fund and support the preparation of a Community Travel Plan and the employment of an officer to oversee implementation of the travel plans. Resources for monitoring/Travel Survey. | Distance of houses from bus stops. The potential for conflict between the need for fast moving bus service and frequent bus stops. Will this service require a wider catchment area than 400 metres? Placement, and number, of bus stops – accessibility. | Personalised Travel Planning to assist people to access the public transport NB different access needs of Cranbrook residents (NB role of Community Travel Officer). | Travel surveys automatic, electronic and traditional methods noting, for example: Trip rate on public transport, Modal shift to active transport Breakdown of transport/journey type (noting the legs of each trip eg walking, public transport, walking etc) Amount of walking (pedometers?) |
| A holistic approach to travel planning | Resources for capacity building programme for residents to conduct travel surveys. | Provision for training facilities | Role of Community Travel officer. Training to enable residents to design, to conduct and/or to interpret travel surveys | Number of residents taking training/involved in design of survey |
| Strong political leadership is required to systematically reduce the demand for car ownership and car use and to find answers to problems that are politically sensitive and to make Cranbrook sustainable | Identify/agree sanctions for failing to achieve the required modal split (eg fines) and incentives for exceeding the modal split. | Use a design hierarchy headed by pedestrians and cyclists and public transport. Ensure parking does not reduce visibility and movement for pedestrians. Design cycle routes for everyday commuting & market them as such, & to work in partnership to join these routes up with the main centres, from the outset | Car share network, Car Club and Travel Forum. Personalised Travel Planning Cycle routes for everyday commuting. | Travel surveys Proportion of streets that are shared surface Parking strategy implemented and enforced |
| | Car Club operator subsidised for start-up period | Parking spaces for Car Club cars identified | Publicity and advice about benefits of Car Clubs disseminated throughout Cranbrook. | Business plan for Car Club operator Membership of Car Club Use of cars |





| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|--|--|---|---|---|
| | Resources for organizations in Cranbrook to develop and implement Travel Plans. | Traffic calming as part of design including integral provision for cyclists. Infrastructure for cycle provision and storage as well as showers and changing rooms | All road users obey the rules of the road. Travel Plans | Road traffic incidents Qualitative survey of cyclists and pedestrians Number of travel plans in preparation Indicator to check |
| | Resources supporting the high frequency public transport including soft initiatives such as real-time information and Personalised Travel Planning, and smart card ticketing infrastructure | in <i>destination</i> buildings etc Infrastructure to enable Cranbrook-wide, and beyond, technology for real-time information and smart card ticketing infrastructure | Dependent on the financial/management model chosen to operate the high frequency public transport | implementation of travel plans Monitoring high frequency public transport including Affordability Reliability Comfort Sensitivity to needs of residents of Cranbrook (eg relevance of route, frequency of service, length of service – night-bus?) Image of service – high status/quality |
| The Cranbrook development should be permeable, safe and slow. | Resources for schools to implement Safe Routes to School (SRTS) initiatives. | Minimize the number and size of roads that children must cross to get to nearest school. | Safe Routes to School (SRTS) | Number of SRTS User/volunteer/child surveys of their efficacy |
| Cranbrook should be designed to encourage moderate physical activity, including walking and cycling, as part of everyday life. It should be pedestrian oriented. | Resources for a programme of Personalised Travel Planning with new residents to increase awareness of active and sustainable modes of transport, to explore the options for travel and to encourage and assist use of these different options. | Identify organisation to employ and manage the resources for the Community Travel officer Personalised Travel planning as part of brief. | Community Travel officer to be appointed and work plan to include number of homes and businesses to be supported over specified period of time. | Audit of organisations and people involved in developing travel planning |





| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|---------------------|---|--|--|--|
| <u> </u> | Resources for secure cycle parking and notification of cycling and walking routes. Washing facilities at key destination points | Secure cycle parking and notification of cycling and walking routes as integral part of design. | Maintenance and upkeep of secure cycle parking facilities. Link with Community Travel Officer to ensure cycling and walking routes with Personalised Travel Planning | Number of secure cycle parking facilities Use of secure cycle parking facilities. Measure of security Levels of walking and |
| | Resources to develop a Car Parking Management Plan and Green Travel Plans. | Locate parking away from buildings – zone employee parking at some distance from office and commercial developments. | Include explicit choices for physical activity as one of the core aims for the Car Parking Management Plan and the Green Travel Plan | cycling Travel survey Travel Plans |



7. Governance

Key issues from the consultation

- 7.1 Consultees felt that the development of a community centre where people can meet informally and formally will be a key mechanism which cohesion can be generated. Consultees were also concerned that the new community should have enhanced youth services. The creation of a town council over the course of the development was deemed essential.
- 7.2 As an initial source of governance which would eventually be replaced by a town council consultees expressed the need for the community to develop *community activators* to work with initial residents and manage the process of development in order that residents feel and perceive they have some control over how the community develops. In combination with this consultees stated that the new community must consider that in order to develop effective governance structures the competing needs and personalities of various individuals and groups need to be included and managed over the course of the new community development, i.e., from the initial inception stages to the final stages of building.
- 7.3 Consultees also noted that the new community must aim to develop a balanced community in terms of housing tenure/provision thereby creating a socially and economically mixed population. This it was believed will prevent Cranbrook from becoming an enclave or commuter town of the wealthy. However, the development of socially, economically and demographically mixed community requires effective governance structures to be established in order to manage conflicts and tensions that may arise between these groups in terms of their differing needs both socially and economically. This 'mixed community' also requires the governance structures to agree and deliver on the various services required for these diverse population groups. The overall aim of these systems and structures of governance is to prevent the new community from developing and compounding social and economic disparities which will help enhance a sense of social cohesion within the community.

Description

- 7.4 **Public involvement:** the amended planning application (2005) was prepared after consultation and consideration of formal representations and a 'new community design workshop' held in July 2004 ... Regular meetings have been held between the applicants, the District Council and the County Council to consider matters arising relating to the proposals. Individual meetings with statutory consultees have been held where appropriate (8, p26-31)
 - [Develop] community relationships through engaging residents in the design, planning and delivery of the development and its governance thereby giving them ownership of the community. Also through designing the community in a way which encourages social interaction (e.g. public squares, little set-back from carriageway) Economic opportunity through integration with the other developments to the east of Exeter and provision of high quality, high frequency and affordable public transport (using smartcard technology) into Exeter from the outset
- 7.5 We understand that a Community Development worker will be funded. Community cohesion / social equity is something the SPG 03.05 points to as being key to developing a new and genuine 'community'.
 - A community worker has the difficult task of setting things up as an example, helping establish things that can then be taken over and run by others. But there is always the danger that because you are a paid professional that there will be an expectation that the work you initiate will be thought of as a service that will continue to run. The trick is to set stuff up and hand over responsibility. The community development worker needs to try to



- identify and build the capacity of others to make things happen rather than do it themselves.
- 7.6 The design and development process has used consultative methods. Consultation will need to be continued throughout the full term of the construction process and the life of the development. Integration and inclusiveness is key to realising the sustainable vision espoused by the East Devon New Community Development partners. The Sustainability Strategy refers to consultation with community (23, section 2.12.2); it does not look at social issues but concentrates on matters relating to the physical environment.
 - It is not about consultation but more about involving people. It will be really important to get a group of residents to come forward and be a residents association / proxy council and get involved doing whatever they can to influence whatever they are able to influence. I think the design of open spaces is one thing people could easily get involved with. The design of community buildings another. And the nature of any local governance / community activities.
- 7.7 **Integration:** Provision for and delivery of a high quality public transport link from Cranbrook to the airport, Skypark and the Intermodal Rail Freight terminal IMRFT is outlined (8, p76). Excellent public transport links to Exeter (via bus and train) is also central to vision of the new community. Relationship of Cranbrook to other strategic sites east of Exeter is shown in the context plan (8, p8).
- 7.8 **The arts:** Two mentions in the design manual, one mention in outline of design for the town square: 'Public art features within landscape design' (24, p70). The landscape features of green lanes / cycle paths mentions that 'landscape features in key locations, as public art'. The SW draft RSS supports the for role of culture in reducing social exclusion and the health improving role of cultural activities (16).
- 7.9 Public art can provide a focus for community activity and enhance the sense of civic pride and quality of life within towns. Resident involvement is a key factor in a successful public art strategy- enhancing the sense of ownership of the public realm. Artist's involvement in the design process can also contribute to a sense of identity (55).
- 7.10 SPG objective 9D outlines the need for provision of a public art strategy within the new community design statement. But no strategy as such just two mentions. Who will take this forward? And how? Who will fund it?
 - A mixed and integrated community where all can feel and exhibit pride in their locality, and be welcoming of visitors and new residents. A vibrant programme of community activities which bring together all residents with something for everyone, and which are defined by local needs rather than imposed by those outside.

Opportunities for health improvement

- 7.11 Achieving a balanced or mixed community is widely seen as an important objective of planning, housing and communities policy (56). This was as true for the *New Towns Programme* in the 1940s, as it is for the *Sustainable Communities Plan* today. Exactly what is meant by a "balanced community" is not very well defined by policy makers, but tends to presume a mix of people of different ages, household types and incomes. The concept of a *sustainable community*, as defined by current policy includes the notion of balance, but also a wide range of other components, including economic, democratic, environmental and physical factors (57).
 - Community cohesion so much comes down to personalities in the end. However, having said that getting the social mix right from the outset is really important.
- 7.12 Democratic participation can be beneficial for the health and wellbeing of those who take part. Participation may benefit individual health by enhancing one's sense of empowerment and self-efficacy. People are most likely to take control of their health if they feel they are in control of other aspects of their lives (58). Participation may also contribute positively to health at a more collective level by building *social capital* in a community. Socially isolated individuals living in less cohesive communities are more likely to experience poor health than those living in more cohesive communities (59). Higher levels of trust and participation



in a community are related to the degree of equity in income distribution and to population health outcomes (60).

7.13 Consultees described different models by which community governance could be provided: for example a town council or a Cranbrook Company.

The other model or additional resource is the Town council – which gives a statutory accountability but can compromise flexibility. Communities tend to have expectations of a town council that they make decisions/deliver services. And there are always compromises. E.g. the public toilets in ____ used to be run by the district council who decided to close them. The town council wanted them and decided to take on the management of the toilet themselves. But this meant that the 'britain in bloom' budget was lost. There's always a compromise.

And because a % of council tax goes to the town council people are less likely to fund raise. There are always tensions over the direction of a community council / community centre and careful thought about how to manage this needs to be taken.

A Cranbrook Company/Trust could employ the local workers – the community development workers / youth workers - and could be the vehicle for trying to get harder to reach groups involved and would be the body that builds the rationale for taking forward a range of issues identified by the community.

7.14 A community development worker was seen as critical to ensuring people were able to become involved but consultees also recognised difficulties in relying on one person for such an important role.

A community worker has the difficult task of setting things up as an example, helping establish things that can then be taken over and run by others. But there is always the danger that because you are a paid professional that there will be an expectation that the work you initiate will be thought of as a service that will continue to run. The trick is to set stuff up and hand over responsibility. The community development worker needs to try to identify and build the capacity of others to make things happen rather than do it themselves.

- 7.15 The multi-purpose building will be important in providing a starting point for services, social networks and informal governance as the new community grows. It will be important to establish the community role in running this building and the services it hosts. The process of moving from informal governance to more formal processes such as management of the MPB with a constitution, principals of public involvement in management and day to day running. The establishment of a town council will also be important. We suggest below some measures of *Institutional Maturity* (see 61) which might be applied to the management of the Multi-Purpose Building eg
 - participatory group processes;
 - extent of dependence on East Devon District Council;
 - management capacity for planning, finance, and conflict resolution;
 - · links with other agencies; and
 - adoption of new technologies.
- 7.16 Cattell's (62) qualitative study of deprived housing estates in East London showed how social networks (63), affected the health of socially excluded individuals. Benefits to psycho-social health were seen to come from close bonding relations via the provision of emotional support, information and practical mutual aid, through a number of different networks, including extended families, work-based networks, neighbours and voluntary organizations representing shared interests. This and later studies (62;64;65) demonstrated health benefits including hopefulness, enjoyment, increased confidence, enhanced sense of esteem and control.

Creating spaces for people to meet in informal settings is crucial. It is crucial for the neighbouring communities too – the new community is likely to be better resourced so could attract people in. This is likely to be influenced by the school's catchment areas.



- Particularly primary school children will be brought in by their parents secondary school children more likely to come in via a school bus.
- 7.17 However, some forms of 'bonding' relations can be a barrier to both personal development and social cohesion with wider society. A tightly knit group may be less orientated to trust and co-operate with the wider community level (66), and this can impede individuals from expanding their contacts with a wider network.
- 7.18 If participative processes strengthen networks which draw on both bonding and bridging relations there may be positive health effects for socially excluded groups. Within renewal programme this may help to reduce health inequalities.
- 7.19 A sense of community will have beneficial effects on psychosocial health, (with reference to particular groups *eg* maternal and child health, health of older people).
- 7.20 Social networks are important in creating and maintaining social support which in turn is linked with better mental health and physical health (67). Better social support is
 - associated with reduced risk of cardiovascular disease: people with better social support may cope with illness better and have better prognoses when ill; and
 - it is also beneficial to mental health and is associated with lower levels of anxiety and depression. There may be gender differences in the importance for health of social support from different sources.
- 7.21 Social capital and cohesion within communities are associated with a variety of health outcomes ranging from all cause mortality, cardiovascular disease, sexually transmitted diseases and obesity. Social capital has also been found to be related to teenage pregnancy rates.
- 7.22 Arts can play a role in establishing a shared history and an identity. As a new community Cranbrook will be devoid of history. Projects such as Common Ground (68) use arts and participative methods to both create and establish local histories and so contribute to local identity and a sense of belonging. Cranbrook will have its history as a piece of land. The new residents will be bringing memories and histories to the new community. These should become part of the shared history of Cranbrook. We recommend below that the Community Development worker should look to these approaches for intergenerational work which will help people document their histories and set down the memories and experiences of the people moving in to the new community (69).

Potential health risks

- 7.23 Community-level structural factors which impede social organisation include residential instability, family disruption and high ethnic heterogeneity (70). These factors can lead to a weakening of adult friendship networks and a weakening of value consensus in the neighbourhood and increase the likelihood of deviant behaviour.
- 7.24 A lack of integration with residents in existing settlements as well as lack of integration between new residents could affect social cohesion and in turn the sustainability of Cranbrook. Poor cohesion and poor social networks will mean that people will have differing access to support: the population is likely to have a large population of families with young children. Services, including mental health services, for maternal and child health will be required.
- 7.25 A shortage of venues for interaction in local neighbourhoods which are attractive to more affluent mobile groups and low quality and poor availability of amenities (71) militates against forming social networks.
 - Creating spaces for people to meet in informal settings is crucial. It is crucial for the neighbouring communities too the new community is likely to be better resourced so could attract people in. This is likely to be influenced by the school's catchment areas. Particularly primary school children will be brought in by their parents secondary school children more likely to come in via a school bus.



- 7.26 Social and community networks are critical to the success of the development. The social infrastructure by which services and facilities are provided is one key component of ensuring that the development works.
- 7.27 The provision of community facilities does not constitute or develop social capital: greater participation and representation in growth and development of facilities are needed to create wider ownership (72).

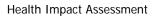
Conclusions

- 7.28 It would be an error to rely too heavily on the input of local parish councilors. The statutory authorities are well aware of the burden of the Cranbrook planning and consultation process.
- 7.29 Capacity building and increased support for parish councilors may be required as the transition from a quiet rural parish to a new town can be very stressful for elected representatives. Co-operation should be built in as much as possible and advantage made of their local expertise but the emphasis must be on utilizing the human capital of Cranbrook and some professional capacity development via specialist worker(s). It is important not to take the local councilors for granted or to make too many assumptions.
- 7.30 A sense of community will have beneficial effects on psychosocial health, (with reference to particular groups e.g., maternal and child health, health of older people). Social networks are important in creating and maintaining social support which in turn is linked with better mental health and physical health (67). Relative deprivation is regarded as a fundamental social process in a causal chain which leads to health inequalities (18). Greater horizontal separation, or fragmentation, among communities can also be deleterious to health (18). Private ownership of health assets is a form of social closure which may fragment society and preclude members from maximising health.
 - Involvement/engagement/representative democracy
 - · Will take time to build
 - All population groups need to be involved/engaged
 - Social organisation: town council, parish council, voluntary sector, community development worker
 - History projects, where have people come from? Sense of place ...
- 7.31 Commitments to community-driven development processes will improve health assets by enhancing community ownership, promoting shared identity, and building individual and collective efficacy. Participation promotes individual health by enhancing one's sense of empowerment and self-efficacy.
- 7.32 How will different population groups who do not usually engage in the planning process be encouraged and enabled to take part? The community is likely to have a young demographic profile and therefore it would seem important that consultation and engagement be carried out with young people re provision of services and facilities they may need / use including providing them with opportunities to design their youth centre.



Health code 3: governance: social and cultural

| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|----------------------------|--------------------------------|---------------------------------|-----------------------------------|--|
| Commitment to community | Long-term revenue support for | Provision of space for public | Establish election to town | Scrutiny of the political |
| driven development process | community facilities eg spaces | meetings and for informal | council, constitution, principal | mechanisms. |
| | for public meetings and for | social interaction in Town Hall | of involvement in | Processes for community |
| | informal social interaction in | and/or Community Centre. | management and day to day | participation |
| | Town Hall and/or Community | | running | Grievance and |
| | Centre. | | Capacity building for local | compensation mechanisms |
| | | | elected members and for | Access to mental health |
| | | | youth governance to ensure | services |
| | | | strong political support to | Measures of <i>Institutional</i> |
| | | | achieve sustainable new | Maturity (see 16) of |
| | | | community. | management of the Multi- |
| | | | Engage and consult with existing | Purpose Building <i>eg</i> |
| | | | and new community | participatory group |
| | | | Empower population to | processes; |
| | | | contribute to decision making | extent of dependence on |
| | | | processes Establish grievance and | East Devon District Council; management capacity for |
| | | | compensation mechanisms | planning, finance, and |
| | | | during the construction | conflict resolution; |
| | | | process | links with other agencies; |
| | | | The running of facilities, for | and |
| | | | example the Multi-Purpose | adoption of new |
| | | | Building, should be open to | technologies. |
| | | | scrutiny. | teermenegies. |
| | | | Early identification and | |
| | | | treatment for new and | |
| | | | existing population - build up | |
| | | | mental health services in the | |
| | | | community | |
| | Resources for Community | Space in the MPB | Job requirement to acknowledge | How will the changing role |
| | Development Worker | | evolving/changing role as | be planned and |
| | | | Cranbrook develops | accommodated? |
| | | | Identify high-level support | How supported/isolated is |
| | | | within East Devon and Devon | the CDW? |
| | | | County Council for CDW in | |
| | | | post | |

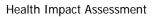




| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|--|---|--|---|---|
| | Resources to develop and foster youth governance | Town centre sites allocated for youth facilities | Youth facilities: outreach worker and budget – consultation process | Number of youth service User satisfaction with youth services |
| There should be well-designed places available where people and groups can gather such as places of worship, community centres, sports facilities, and community spaces. The community should be involved in the design and management of such places. | Resources to foster and to monitor the development of social networks throughout the phases of Cranbrook New Community (e.g. community development worker). | Ensure that the physical infrastructure for attractive community facilities and meeting places is established throughout the development. Ensure open spaces within the development are inclusive public spaces i.e. are safe mixed use public spaces. | Ensure that the mechanisms and personnel are in place to manage the community facilities and meeting places. Programme of events to welcome new residents and to provide information about resources, services and organisations available within Cranbrook. Develop a local/social history of Cranbrook, the place, and of the new residents to help foster identity | Number of clubs, resident associations, etc in Cranbrook Membership of Cranbrook residents of clubs, associations etc Age, gender and ethnicity profile of clubs and associations (and of their governing bodies). Socio-economic and ethnic profile of Cranbrook Residents Measures of community ownership, and shared identity, and individual and collective efficacy² |
| | Resources to design build and manage the community facilities. | Ensure that the physical infrastructure for attractive community facilities and meeting places is established throughout the development. | Ensure that the mechanisms and personnel are in place to manage the community facilities and meeting places. | Who has been involved in developing guidelines and governance arrangements? Are the facilities and services accessible and appropriate for all ages, all genders and all socioeconomic groups? |

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² Collective efficacy can be measured by asking 'how much impact do you think people like you can have in making your community a better place to live - no impact at all, a small impact, a moderate impact, or a big impact?'





| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|---------------------|--|------------------------|--|---|
| | Identify resources to convert the MPB from its initial use as a temporary school, and then as temporary accommodation for public services, to become a community facility | Flexible design of MPB | Partnership working to use, fund and operate MPB | |
| | Agreement that development of social cohesion and social networks should be subject to review at each phase of the development and that lessons from the evaluation should be used in allocating the resources in subsequent phases. | | Review of social networks | What are the lessons for the next phase (critical feedback loop to design and the opportunities offered by phasing – how can the lessons from 1 st phase inform the 2 nd phase and so on?). |



8. Housing and the built environment

Key issues from consultation

- 8.1 Consultees cited various examples of successful new communities and the need to ensure that the housing development is 'pepper potted', i.e., mixed housing tenure which will help to prevent ghettos or a 'them and us' situation from developing which will would not help to generate a social cohesive community.
- 8.2 In terms of *urban design* consultees stated that a built environment which is walkable, which has shared use of space and good natural surveillance will play an important role in facilitating informal and safe social interaction amongst the local residents. This will help generate a more cohesive community and it will also indirectly improve rates of physical activity. For instance consultees noted how the urban physical and social environment will allow residents to engage in physical activity. This will be complemented by ensuring that residents feel safe and have a low perception of crime. Public health evidence tells us that areas with high levels of fear of crime are associated with a low resident usage of physical spaces: this therefore limits the opportunities and potential for social interaction and individuals to engage in physical activities.
- 8.3 A review of teenagers and public space (37) cites how a 1970's survey (*Growing Up In Cities*) was repeated in the 1990s. All of the features that determined good environments for teenagers in which to grow up in the seventies re-emerged in the nineties (73):
 - a feeling of social integration and acceptance;
 - varied, interesting activity settings;
 - peer gathering places;
 - a general sense of safety and freedom of movement;
 - identity; and
 - where available, green areas for informal play and exploration as well as organised sports.
- 8.4 It is notable that consultees for this HIA mention each of these issues. It is also notable that these issues are important for all age groups.
- 8.5 Consultees expressed concern that there has been no demographic survey or projections of the likely household mix of Cranbrook in order to ensure that the provision of housing tenures, types and mix are appropriate to meet the local housing market profile. Without this information there are not adequate assurances either that the services at Cranbrook will be appropriate for the households who will live there, or secondly that Cranbrook is actually meeting the housing needs in East Devon and Exeter.

Description

- 8.6 Housing and the built environment provide a framework for Cranbrook's long-term sustainability ensuring a well-balanced community develops with a genuine social mix and evenly distributed housing of different types and tenures within each phase of development.
- 8.7 The design manual states that a characteristic of Cranbrook will be its future sustainability by making allowances for future needs and requirements. The manual states that the new community should provide a range of residential dwelling types, sizes and tenures. It is stated that this encourages an 'inclusive' community and also allows families and individuals to remain within their chosen neighbourhood as their lifestyle and housing requirements naturally change. Built form and plot layouts should be flexible and adaptable to allow for future modifications or extensions where appropriate (24, p30).
- 8.8 The form and scale of the town centre as prescribed by the application proposals anticipates a larger range of facilities than is necessary for the application proposals for 2,900 dwellings (74).



- 8.9 Housing densities within Cranbrook will also ensure a wide variety and range of house types. High densities in the town centre and in the most accessible locations will ensure a significant proportion of flats and apartments and will maximise the number of people with good access to, and able to support, local services and facilities. To achieve the densities proposed there will not be a preponderance of any particular dwelling type.
- 8.10 Good urban design is needed to produce attractive, high-quality, sustainable places in which people will want to live, work and relax. Urban design includes the way places work and matters such as community safety, as well as how they look. It concerns the connections between people and places, movement and urban form, nature and the built fabric, and the processes for ensuring successful urban environments. Urban design is a key to creating sustainable developments and the conditions for a flourishing economic life, for the prudent use of natural resources and for social progress. Good design can help create lively places with distinctive character; streets and public spaces that are safe, accessible, pleasant to use and human in scale; and places that inspire.
- 8.11 **Affordability:** 40% of housing will be affordable housing (24, p108) made up of a mix of low cost housing predominantly small units, intermediate / shared ownership housing and social rented tenures.
- 8.12 **Urban design and housing:** In their Planning Statement the EDNCP state that design was one of the main issues on which views were expressed by a full range of public bodies, resident groups and individuals (8, p26).
- 8.13 A fine grained network of routes based on a 'loose grid' or continuous 'web' of streets is one of the key characteristics of Cranbrook. The streets and places will become the natural place for interaction and activity and residents and visitors alike will find walking along such animated streets enjoyable. In order to achieve this, each street will lead to another, contributing to the creation of a well connected network, designed to ensure that a choice of routes to get from A to B promotes efficient and direct journeys, minimising the distances that need to be travelled and encouraging walking and cycling. There will be no need for sinuous culs de sac or unattractive, car dominated distributor roads which are unwelcoming to pedestrians and produce unnecessary amounts of road surface.
- 8.14 **Walkability** is given prominence within the strategy in terms of stated importance including offering direct routes for pedestrians even if difficult for cars (8). The most consistent evidence regarding the effects of environmental factors on physical activity in adults is observed for accessibility of facilities, opportunities for activity, and aesthetic qualities of the area (75) (cited in 76). Other studies have found that the presence of enjoyable scenery and the frequency of seeing others exercise are positively associated with being physically active (77).
- 8.15 **Child development:** Quality of life and the safety of the physical environment are important for healthy child development (70;78). Environmental factors such as the distance between houses, access to facilities such as parks, the density of the child population, and safety all influence measures of children's behaviour.
- 8.16 **Green and open space:** Cranbrook has a park which bisects the site. People who can view green spaces from their home also report higher levels of health, well-being and satisfaction with their neighbourhood (79). The park is situated in the floodplain but it may hamper the development of a unified community as the land to the west of the park, and closest to the train station will be developed first. Connectivity and permeability are clearly important.

Opportunities for health improvement

Quite clearly the health and well-being of the new residents should be substantially improved by moving to Cranbrook, as it should be designed to be an exemplar, healthy sustainable community. But again this is highly dependent on the design of the development (e.g. is there a permeable and consistent cycling network) and its phasing (e.g. when are health facilities provided) and how is the development of the community facilitated (e.g. through a Community Trust or Town Council). A lot of the impacts on the



- new residents will depend on where they have moved from and the extent to which Cranbrook encourages more healthy lifestyles to be adopted.
- 8.17 **Urban design and housing:** The feel of an area and peoples' perceptions of safety are important predictors of the ways in which people use that area. This is linked to a range of health effects including social capital and physical activity as well as choices about lifestyle. The *fine grain* design of the Cranbrook New Community will contribute to encouraging people to walk and to use and enjoy the space. The texture and width of pavements are important.
- 8.18 A review of US developments found that the 'inclusion of pedestrian amenities such as lighting, water fountains and bicycle racks ... can increase pedestrian activity. ... In addition amenities such as walking/jogging paths ... have been reported as successful' (80). Other design measures that promote physical activity include locating parking for offices at some distance from the workplace and ensuring that stairs feature prominently within buildings and that lifts and escalators are less prominent.
- 8.19 A series of global case studies looking at design for people identifies how the idea of the unfinished is critical to allowing the community to grow into, and appropriate the new community (55). Settlements such as Poundbury in Dorset, the Disney town of Celebration in the USA and new suburbs in London or towns in China are cited as being successful in that they fulfil, or aspire to fulfil, current planning and design practice, yet they are also disconcerting in that they are wholly finished. The authors argue that these developments allow no space for the community to grow through adaptive inhabitation of the new towns and there are few ways in which the predetermined vision of the future embedded in the design can accommodate changes in the wider context: the new residents of Cranbrook must be able to adapt the physical and social spaces in their new community.
- 8.20 Cranbrook's approach to youth services goes some way to allowing for adaptation *ie* ensuring that space will be available, providing outreach services and conducting consultation when there are young people in the new community. This process must be replicated for the whole of the new community. In many ways this process might need to be recognised by and regulated for, but essentially outside, the formal planning framework.
- 8.21 People must feel that they own their space in the new community and that they have appropriated it: the process for this will be different between population groups: older people and youth groups may feel differently towards ready made facilities. Young people do not necessarily want to be away from the town centre or see themselves as in conflict with older groups but they will want some autonomy within, and control over, their space (see for example website on informal spaces in Exeter (81) and studies on skaters in Marseille (82)).
- 8.22 A creative input to design and to identifying and solving problems in urban and rural communities is one way of building flexibility into the design and planning process (55). Local context, engagement and ownership are critical to allowing and enabling people to develop a relationship with the new community.
- 8.23 This theme of appropriation is echoed in studies looking at teenagers and public space
 - Through their developing environmental transactions, young teenagers frequently come into contact with places in ways not envisaged by adults.
 - For example, children's play areas became convenient places where groups could hang out during the evening away from the adult gaze; the local shops became a social venue where teenagers from one group could come into contact with other groups and show off their latest clothes and hairstyles, and wait for things to happen; and alleyways and back passages provided spaces for exciting mountain bike races ...
 - Because these teenagers were developing their own and alternative patterns of land use, places were used in ways not anticipated by adults and this led to frequent clashes (83).
- 8.24 **Affordable housing:** The main public policy mechanism for achieving a balanced population is the provision of a diversity of housing types, in terms of size, tenure and cost within a given area. The case for creating balanced communities is not based on idealised or utopian groupings. Rather, on the basis of powerful evidence which shows that where



polarization has concentrated lower income and vulnerable people in an area, the resulting multiple deprivation becomes reinforcing and is difficult to address.

- ... a good neighbourhood is a balanced neighbourhood! The word 'balance' is fundamental to neighbourhood cohesion and social sustainability.
- 8.25 A wide range of Government programmes since the 1980s have sought to correct the problems of concentrated multiple deprivation (84). Some of the causes of these problems are now recognised to have been exacerbated by the failure of earlier public policy programmes to avoid concentrating lower income households in the same areas (85). Recently there has been much focus on the problems that can arise in areas with high concentrations of social housing, which due to the limited supply of affordable housing and needs-based allocations policies include high proportions of vulnerable households and low-income families with children (86). The return to large scale, concentrated housing growth, where wholly new communities are being created, raises much broader questions about achieving the right balance.

... a good neighbourhood is one where there is an appropriate balance of different socioeconomic groups, there are places to meet and exchange, most daily needs are within walking distance of people's homes, there is a strong sense of identity and place, there are large areas of well-managed sport and recreational facilities and open space and there are excellent public transport links to the main urban centres ...

Many people are talking about the first phase at Cranbrook as being the 'posh bit'. And that the social housing / affordable housing will be in the second phase. But as the developers have still not produced the housing strategy it is difficult to say what exactly they are planning.

It is hoped that socio-economically deprived groups will take advantage of the affordable housing offer at Cranbrook, and thus increase the opportunities for them to become part of a socially cohesive community. Again however, this strongly depends on the design of the affordable housing (e.g. is it tenure blind) and how it is distributed across the settlement.

- 8.26 Consultees also suggested that rigid zoning should be avoided in the urban design: the central area should include a mixture of uses including some buildings and spaces that can be used in a flexible manner for small and start-up businesses. Avoid creating mini business parks.
- 8.27 **Green and open space:** The green framework which will maintain the open spaces, trees and hedges (20) will provide a link to green space and a reminder of Cranbrook's heritage. The Country Park is also clearly important in this respect as green space is beneficial to psychological and physical health (87) and levels of use of green outdoor common spaces can be used to predict the strength of neighbourhood social ties and sense of community (88).
 - Ensure that all housing has easy access to green space including space where children can play freely & with minimal restriction
- 8.28 Neighbourhood community ties are especially important for the elderly. Settings which encourage older adults to develop social ties with neighbours include features such as access to transport and safe public spaces. Trees near older people's homes may be an inexpensive way to enhance their social integration. Caring for their local environment may also enhance their health (89).
 - Ensure that there is plenty of space available for informal interaction and activity throughout the settlement.
- 8.29 There are also wider issues of neighbourhood quality in terms of safety, quality of physical spaces, incidences of graffiti, and broken windows incivilities which have a variety of negative health outcomes. For instance a neighbourhood which is perceived as possessing a high number of incivilities leads to increased rates of fear of crime and prevents the uptake of physical activity with the local area.
- 8.30 The most consistent evidence regarding the effects of environmental factors on physical activity in adults is observed for accessibility of facilities, opportunities for activity, and



- aesthetic and natural qualities of the area (75) (cited in 76). Studies have found that the presence of enjoyable scenery and the frequency of seeing others exercise are positively associated with being physically active (77).
- 8.31 **Tobacco control:** England is a signatory to the Framework Convention on Tobacco Control (FCTC) (90) and all public places in England are required to be smoke-free from 1st July 2007. The smokefree law is intended to protect employees and the public from the harmful effects of secondhand smoke (91). The construction and design stages provide opportunity to promote a smok-free environment
 - Ban advertising of tobacco products on project site and within Cranbrook.
 - Provide cessation services to workers/local community
 - Provide information/education on tobacco use to workers/local community
 - Make sure that any tobacco products available on site are fully duty paid (not smuggled)
 - Smoke free enforcement on construction site.
 - All public buildings must be smoke free and not include ventilation rooms as part of the build.

Potential health risks

- 8.32 East Devon District Council argue that the new community will need to expand from its current proposed size of 2,900 dwellings in order to support a full range of infrastructure and services, and support the growth of Exeter providing the resource the city needs to grow and develop and helping to meet the sub-region's housing needs. They request a clear vision of what the 6,500 dwelling new community may look like (e.g. transport in terms of accommodating high quality proposals, design, density etc.) (18).
- 8.33 **Crime and the fear of crime:** Consultants to the NCDP 'have had regard' to Secure by Design principles (23, p47) but there is no mention in amended planning application / design manual. Linking community safety entirely with the design of the built environment shifts the focus away from the social and political causes of crime. Environmental changes are welcomed but they will not reduce incidents that take place in the private realm, i.e., attacks on women in the home (92). This will require strong support networks within Cranbrook.
- 8.34 The reduction of actual crime and fear of crime is an important cross cutting social determinant of health and one that may affect the potential of the development to realise certain social and health benefits. This is particularly the case in terms of promoting healthy lifestyles via increased physical exercise, and increasing interaction and social capital between individuals within the community in the urban space
- 8.35 Children who live in 'unsafe' neighbourhoods are exposed to greater risks of developing problem behaviours such as hyperactivity, aggression or withdrawal regardless of the quality of their family life (93)
- 8.36 **Affordable housing:** Tenure blind housing design may avoid visual inequalities between socio-economic groups. These perceived inequalities may have a psychological benefit by reducing the anxiety that may exist between groups. However, tenure blind housing which is not accompanied by appropriate support will do nothing to reduce the actual health inequalities that are experienced by deprived and low SES groups. The evidence concerning the links between health and rehousing or housing renewal suggests that the degree of control individuals have over the rehousing process is important. Medical priority rehousing has been found to alleviate mental illness and depression; however it can also precipitate bouts of depression (94).
- 8.37 This is preferable to segregating owner-occupied from tenant occupied. However, tenure blind housing which is not accompanied by appropriate support will do nothing to reduce the actual health inequalities that are experienced by deprived and low SES groups. Will the affordable housing percentages remain as they are over the course of the development? Is there the potential that deprived individuals who currently occupy this tenure bracket may be priced out of the area?



- 8.38 A risk inevitably associated with affordable housing are the clear socioeconomic disparities of neighbouring home-owners. This can lead to stigma and reduce social interaction.
- 8.39 In the long-run, high turnover of public residents compared with lower turnover of private residents could severely reduce social cohesion and create tensions between "newcomers" and established community members. This effect on social cohesion is even more pronounced since the affordable housing shall be evenly distributed throughout the community.
- 8.40 Construction carries health risks to established patterns of living. It is realistic to anticipate inconvenience and stress for different population groups both adjacent to, and residing in, the development area over the development period.
- 8.41 **Lifetime Homes:** The East Devon New Community Partners have committed to achieving Lifetimes Homes Standards in only 10% of the socially rented affordable housing at Cranbrook. This equates to only 1.65% of all the homes at Cranbrook (or 48 homes). Considering the importance of Cranbrook being an exemplar socially inclusive community with homes built for centuries and built for 'lifetimes; this is concerning.
- 8.42 It is important that the home offers accessibility and design features that make the home flexible enough to meet changing needs e.g. a teenager with a broken leg, a family member with a serious illness, parents manhandling heavy shopping and a pushchair or older people (76). Lifetime Homes do not just benefit the older population. The level proposed in the planning application does not meet the good practice guidance for 100% of homes built to be lifetime homes nor best practice which would in addition provide for 10% of homes to meet wheelchair housing standards.

Some of the additional elements of lifetime homes are about space / some about design. The design bit is not at all costly – just about doing things a bit differently. The space issues do cost more – but are important – e.g. a room on the ground floor that can be adapted into a bedroom.

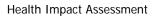
Conclusions

- 8.43 Tenure blind design and pepper-potting are critical. RSLs may require support in managing their tenants.
- 8.44 Support good design which encourages physical activity, interaction and passive surveillance.
- 8.45 Support a creative input to design process which encourages local ownership and which leaves space for appropriation as the Cranbrook new community grows.
- 8.46 Ensure that green and open spaces are well maintained.



Health code 4: housing and the built environment

| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|--|--|--|---|--|
| Up to 50% provision of affordable housing | Provision of affordable housing units Resources to enable Registered Social Landlords (RSLs) to provide support to tenants spread throughout Cranbrook New Community | Lifetime homes providing flexible housing units. 10% of homes built to Wheelchair Design Standards Buildings to be adaptable and flexible Equal size (floorspace) in affordable and market properties | Family and housing support to reduce residential instability and family disruption Enhanced management for RSLs | Percentage of affordable housing delivered in each development phase Profile of people moving into the housing units; Reduced (community) turnover, Comparative analysis of rates of turnover for owner-occupiers and for residents in affordable housing; Enhanced ability of community members to cope with unanticipated family sickness, and Good (improved) measures of community health and wellbeing |
| Tenure blind policy for allocation of units for affordable housing | Affordable housing will be subject to the same design and environmental standards as private housing and will not be zoned or isolated from the rest of development | Equitable distribution of affordable housing units throughout the development | Family and housing support to reduce residential instability and family disruption | Did the provision of affordable housing, type and tenure, in the current phase meet the housing needs of East Devon District and Exeter City? What alterations are required to the provision of affordable housing, type and tenure, in the subsequent phase to ensure that the Cranbrook New Community meets the housing needs of East Devon District and Exeter City? |





| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|--|---|--|--|--|
| Functional and aesthetic neighbourhoods and housing for all Cranbrook residents with areas that encourage and allow people to mix and to move about the community using the hierarchy of transport modes (walking, cycling, public transport, car) | Resources for environmental features and inclusive public spaces and management of environmental features / inclusive public spaces | Design focus on housing unit complemented with design focus on the neighbourhood to ensure inclusive public spaces are incorporated into the design. Design focus on active streets Design focus on accessibility of walking and cycling routes from homes and cycle storage within homes Ensure buildings and the public realm are designed to encourage people to be more physically active, for example making stairs and walkways prominent ³ and sign-posting walking and cycling times to facilities and places of interest. Ensure all public buildings are wholly smoke-free and do not include ventilated rooms for smokers. | Surveys of aesthetics of Cranbrook and physical activity. NB link to travel survey | environmental factors and physical activity in adults accessibility of facilities, opportunities for activity, and aesthetic qualities of the area the presence of enjoyable scenery and the frequency of seeing others exercise Links to Travel Survey Environmental factors such as the distance between houses, access to facilities such as parks, the density of the child population, and safety all influence measures of children's behaviour. |
| Creative input to design process which encourages local ownership and which leaves space for appropriation as the Cranbrook new community grows | Resources for community arts projects and design features which give Cranbrook a sense of place | Elements of phasing that could involve artistic design / community involvement identified Space left within the Cranbrook new community which leaves space for appropriation | Artist employed. Community involved in projects. | Numbers of people involved in projects People's view of design and art features in landscape |

 $^{^{\}rm 3}$ NB potential conflict with requirement for accessible development.



| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|---------------------|----------------------------|------------------------------------|---------------------------------|----------------------------|
| | Developer should produce a | Artistic input seen as integral to | Artist employed. | Artist employed. |
| | public realm strategy | design | Community involved in projects. | Numbers of people involved |
| | | | | in projects |



9. Economy

Key issues from consultation

- 9.1 The majority of consultees agreed that the local economy of the new community will be a major influence on how cohesion and quality of life develop within the context of Cranbrook. Important issues highlighted were that consideration should be given to the types of jobs provided within the new community in terms of their quality wage, sustainability and security. In order to facilitate the social and economic inclusion of deprived individuals within the community efforts should be made to ensure that the employment opportunities created by the development contain attributes noted above such as a living wage and job security. It was stated that a buoyant local economy in terms of high rates of resident employment is an important influence on the cohesiveness and equality of the community.
- 9.2 Questions were also raised as to whether the new local residents of Cranbrook will possess the necessary skills and education to access these jobs? And also that employment opportunities may be taken up by non Cranbrook residents thereby reducing the likelihood of Cranbrook residents benefiting from economic growth within and around the new community? In order to ensure to prevent a mismatch between local skill and education levels, consultees felt that links should be initiated with local employers and employment agencies such as Sky Park business area and Job Centre Plus to enable education and active labour market training programmes within the Cranbrook development to meet local employment demand.
- 9.3 The economic development of the new community should also be seen and work in a 'joined up' fashion with the other social and economic change mechanisms embodied within the development proposals. This is particularly relevant in terms of transport and connectivity as well as service provision as it will allow individuals to access employment opportunities outside Cranbrook but also enable them to access the information and resources required to conduct job search activities and therefore take up employment opportunities.

There is a need to think about the range and mix of employment that might be needed and to work with Job centre plus and to ensure training is being provided. For instance it would be good to have training providers on industrial sites to provide a service for all industries there.

Also need training for people in the new communities to help them take up community development / social enterprise initiatives.

Description

- 9.4 The Employment and Retail Strategy (November 2006) is an essential strategy if Cranbrook is to avoid becoming a dormitory of Exeter but function, in its own right, as an economically vibrant town which can respond to changing economic needs and requirement, attract a diversity of employment opportunities and encourage living and working at Cranbrook. It must set out the employment, retail and commercial mix at Cranbrook, its broad distribution and phasing across the settlement and how it will complement the other developments to the east of Exeter and the regeneration of the city itself.
- 9.5 The strategy takes account of market demands and requirements only providing retail and employment opportunities when appropriate thresholds can be achieved and showing the number of businesses and potential occupiers interested in establishing a presence at Cranbrook. For example, the strategy refers to it being based upon the trigger points for commercial development. Given this commercially-oriented approach to land release, it is essential that a clear phasing regime is in place for Cranbrook prior to any planning approval being given.



- 9.6 The strategy provides no tangible commitments for providing training/skills development and employment opportunities to the local population. This provides a visible sign to the local community of the benefits of Cranbrook to the local population.
- 9.7 The majority of stakeholders who have been interviewed consistently refer to, and question how, the development of the new community will encourage community/social cohesion. What services will be provided that will facilitate the interaction of individuals and groups in the local area? How will Cranbrook new community contribute more widely to the cohesiveness of East Devon and also the South-West.
- 9.8 Another major issue that has arisen relates to how the new development will contribute to the regeneration of the region, i.e., how will it facilitate the social inclusion of deprived and unemployed groups within East Devon. Will job opportunities be mainly taken up by the new residents of Cranbrook or filled by incomers from the surrounding region? Evidence from the public health literature suggests that the employment opportunities generated by regeneration or the creation of a new community tend to be taken up by those living outside the development.

Jobs for all?

- 9.9 The development will generate approximately 1,200 jobs through the range of employment space that it will offer (74, p7). Significant employment opportunities exist already, locally at the Lodge Trading Estate and Hungry Fox Estate and, in particular, at the airport and on the eastern fringes of Exeter. Provision for a substantial growth in employment is also made at: the intermodal rail freight terminal; the Skypark development; the proposed Science Park; and the airport (74, p5).
- 9.10 Employment is one of the key determinants of health: as such Cranbrook New Community has the potential to provide major employment opportunities and so significantly improve the health and wellbeing of people in Cranbrook and in Exeter. Employment and socioeconomic status are the main drivers of social gradients in physical and mental health and mortality and there is a strong association between worklessness and poor health (95).

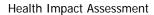
Opportunities for health improvement

- 9.11 The employment opportunities generated by the development will have a beneficial health effect for those who are excluded from the labour market. However, this positive impact will be dependent upon whether socially excluded groups such as the long-term unemployed are able to access these employment opportunities. In this regard active labour market programmes will have important role to play in enabling people to access these opportunities.
- 9.12 More widely the generation of employment opportunities via the development will have a socially positive economic impact on the local and regional economy.
- 9.13 The health improvements that may occur due to economic growth can have further cumulative economic benefits. Better health increases labour supply and productivity and historically, health has been a major contributor to economic growth.
- 9.14 The role of the public sector as major regional and local employers should not be overlooked: this applies to local government and to the NHS and training and apprentice schemes for Cranbrook residents could be designed with education providers. The NHS has apprenticeships and training schemes in a range of areas. These are badged under the *Wider Healthcare Team* (96) and include
 - Administration
 - Estates
 - Corporate services
 - Clinical support services
 - Domestic services
 - Support services



Potential health risks

- 9.15 Jobs created by the development and the residents of Cranbrook have the potential to be taken up by incomers from surrounding towns and villages. This is a double-edged sword as it may have a beneficial regional, or sub-regional effect but an adverse local effect: eg promoting the integration of the new community into the sub-region while failing to promote the social inclusion of deprived individuals within Cranbrook. Jobs created by regeneration initiatives are often filled by workers from other areas, rather than the local population (97-99). As the Cranbrook population will be growing it will be important to explore ways in which Cranbrook residents can benefit from the new opportunities.
- 9.16 There is a particular need to discover the socio-economic status of the new residents in particular their levels of education and skills. In doing so the development will be able to effectively meet the training and educational needs of the unemployed and labour market weak. There is a danger that these socially disadvantaged groups may only be able to access poorly paid service/retail jobs in adequate training and education is not provided. In effect they could end up servicing the social and economic needs of the higher socio-economic groups of Cranbrook.
- 9.17 Recently the Medical Research Council conducted a systematic review of the health impacts of state subsidised economic development (100). They examined over 9,000 titles and abstracts and found only 11 studies that provided robust and rigorous evidence on health impacts. The majority of this evidence points to the negative health effects of development particularly in terms of the health status of the existing population.
- 9.18 Employment opportunities created by economic development risks being dominated by low paid, insecure, secondary sector, non-standard forms of employment which may contain many of the negative attributes such as low pay, insecurity and limited job sustainability. These types of employment do not promote the social inclusion of the worst off (101-103). Re-employment in low quality work may be actually worse for psychological health than the experience of unemployment (104-106). Re-employment into satisfying work may be beneficial. However, a transition from unemployment to 'inadequate' work is unlikely to be beneficial to health (105;107-109). Furthermore, it may take a significant time for the 'damage' to health resulting from unemployment to be repaired.
- 9.19 Even if employment prospects do improve, for some groups of workers such as lone mothers, there may be conflicts between the demands of employment and other salient roles and responsibilities such as childcare (110-112).
- 9.20 As a number of consultees have noted there is the possibility that the Cranbrook development could increase inequalities particularly income inequalities within the local area given that funding and investment for services may be channelled into creating the development. This may lead to house prices in Cranbrook becoming higher than the surrounding towns and villages which currently suffer from under resourced service provision. It was also noted that the types of residents attracted to such a development may also be of higher socio-economic status than the surrounding populations, which could lead to a 'them' and 'us' type scenario developing which will not facilitate a sense of social cohesion within the region.
- 9.21 The local economy is key to the long-term success of Cranbrook, and the surrounding towns and villages. Developing local linkages must be prioritised so that the local economy is a main beneficiary of the increased levels of spending. External experts can help but should not be expected to develop strategies alone. The new community residents, the businesses and other public sector budget-holders hold many of the keys to the local economy. Only if an inward investment is really embedded, with a thick web of local linkages and ties, can it secure a long-term future (113).
- 9.22 A related area of concern is the provision of a supermarket of 3,500m². The strategy needs to encourage unique, local, quality-branded retail opportunities, and the supermarket will need to be very carefully designed to ensure it is an appropriate landmark and enhances the townscape. A more fundamental concern of the strategy is the almost universal concentration of employment opportunities within the town centre and western neighbourhood centre. This means that the settlement is not truly mixed-use in the holistic





sense with large areas of residential use to the east of the town centre without any retail or employment opportunities.

Conclusions

9.23 The Employment and Retail Strategy does not provide any real detail as to when the employment development will be delivered and how this will be phased with housing provision to provide a better balance between housing provision and job creation. Nor is there any real guidance as to how the employment provision at Cranbrook will align with the development of Skypark and the Science Park. Although people's lives are increasingly fluid (eg in terms of location of their home and where they work) it is vital for developments to create as many opportunities as possible for living and working locally,



Health code 5: economy

| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|---|---|--|--|---|
| The Cranbrook New Community will have a distribution of different types of employment and a sufficient quantity of employment for its population. | Clear and robust economic strategy that fits into the wider sub-regional economic strategy Active Labour Market Training programmes in the subregion targeted at those who require basic skills and qualifications in order to take up employment opportunities in and around Cranbrook | Community facilities adaptable for training needs provided within Cranbrook. | Links to employment sites such as Sky Park and the Science Park Major employers (including public sector) should recruit and employ within Cranbrook where possible Occupational health services need to recognise and address mental health needs Invest in community development Ensure that the public sector, including the NHS, and other major employers fulfill their Corporate Social Responsibility | Policy of local recruitment Percentage of residents living and working in the new community Number of disadvantaged individuals accessing the economic opportunities generated within Cranbrook Processes for community consultation Mix and variety of jobs available Presence of mental health services |
| | Facilities and resources for childcare facilities | Facilities (space) for childcare | Training and capacity building for childcare workers | Training programmes for childcare workers Number of children 0-13 years and capacity of licensed child care (centres and family homes) |
| The built environment will support a mixed use throughout the lifetime of the development. | Funding for business startups Provision of favourable rents and incubator units | Are buildings designed so that they can be adapted to meet changing needs of market. Dwellings should include offices or rooms capable of being adapted to offices (eg full ICT capability). Do the structures span living and work space? | Support for social enterprises, small businesses and Black and Minority Ethnic (BME) small businesses. | Active Labour Market Training (ALMT) programmes, business start ups, role of MPB to ensure employment spread Monitor income and employment rates of the residents as compared to the surrounding districts, sub-region and region. |



| Strategic principle | Developer contribution | Design requirement | Management requirement | Monitoring and review |
|---|--|---|---|---|
| Cranbrook should not contribute to increasing income inequalities within the subregion. | Local procurement to be defined and prioritized <i>eg</i> building materials to be sourced locally where possible and workforce recruited locally. | Local building materials to be used in the construction of Cranbrook. | Consult local providers and education providers Involvement of local stakeholders such as Job Centre Plus to incorporate basic skills training and educational qualifications Support through early stages of employment to ensure that ALMT programme and the employment does not conflict with other responsibilities eg childcare. | Number of disadvantaged individuals accessing the ALMT programmes Number of disadvantaged individuals accessing the economic opportunities generated within Cranbrook Percentage of materials sourced locally |



10. Conclusion

- 10.1 The process of development is critical. The process of managing the new community and its relations with surrounding towns and villages is critical.
- 10.2 While partners, such as the District and the County Councils and the East Devon New Community Partners, undoubtedly have differing agenda it is clear that all partners are also working towards the sustainability of Cranbrook. There are large overlaps between healthy public policy and sustainable development.
- 10.3 Consultation, engagement and involvement are key. Flexibility as the new community develops is paramount.
 - **Transport**: we commend the goal to provide a public transport system/service that is reliable, effective and affordable as well the promotion of alternative modes of transport as a means of travel within the new community.
 - Cranbrook's sustainability depends on a dramatic shift in society's relationship with the private car. The bus service must be top quality: affordable, reliable and providing an appropriate service to all age and population groups.
 - Certainly in the early stages Cranbrook will have a low volume of through traffic which may make cause difficulties for services.
 - The aim to enable residents to be within 400m of a bus stop is commendable but the 400m should be measured in walking distance and not as a straight line on a map.
 - Active travel needs continual support and encouragement. It needs to be adequately resourced and targeted towards the local population.
 - **Governance**: The development of a Multi-Purpose Building in the initial stages of the new community and the opportunity to co-locate services will help to foster community spirit and social cohesion. Cranbrook, and those charged with administering services, will thrive on strong political support and leadership. East Devon must ensure a responsive service to the residents of the new community.
 - Mechanisms should be developed to address initial and ongoing tensions such as social
 and economic diversity of residents that may be present or develop between
 community residents which could threaten the cohesiveness of the new community.
 - Housing and the built environment: We welcome the Cranbrook plans for the
 design of the built environment to function in order to facilitate walking and cycling.
 Building design and location, and pricing, of parking facilities can also encourage
 walking.
 - Specific aims for the urban form of the new community should be to enable and encourage formal and informal social interaction amongst the community residents.
 - Crime and the fear of crime must be addressed as the community develops in order that residents feel safe and comfortable using the streets and open spaces.
 - The housing strategy is not clear: a 'pepper potted' housing tenure mix is an ideal mechanism by which to facilitate community cohesion between different social and economic groups. This will generate informal social interaction between groups, however, residents must not be forced into such interaction but rather more one off accidental encounters should be facilitated via the provision of facilities and the design of the urban environment.
 - **Services**: A full assessment of the social infrastructure requirement should be undertaken.
 - Services should cater to all age groups within the new community: in particular young
 people and children in terms of childcare availability and provision within the new
 community. We support the East Devon outreach approach to youth services and their
 intention to consult about the location of youth services. We suggest that town centre
 sites are allocated for youth facilities in anticipation that they are required after
 consultation.
 - The Community Development Worker should consider inter-generational projects.



- **Economy**: The needs of local employers and the skill base of the local population should be identified. Provide education and training programmes specifically designed for certain types of employment demand within the local area and region. This will enable active labour market training programmes to effectively match the local skills and education base to that of employment demand which will aid in the process of inclusion of socially economically deprived individuals.
- Efforts should be made to ensure the quality of employment opportunities are composed of secure, sustainable living wage employment in order to help promote social mobility and social inclusion. The local economy and associated policies should not function to exacerbate social and economic inequalities amongst the local population or between towns and villages within the region.
- 10.4 Involvement and consultation of representative groups and of a wide range of service providers will help ensure that the development is not merely a large building site but a community that is part of East Devon and that contributes to the life of Whimple, Rockbeare, Broadclyst and Clyst Honiton and other surrounding villages and towns.
- 10.5 All development is a matter of negotiation and balance. This is especially true of community development. The consultees for the HIA were clear that the long-term success of Cranbrook depends on a fine balance being struck, a balance that meets the needs of each population group, a balance that will need to be adjusted as the needs and requirements of the Cranbrook new community emerge.



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Appendix 1: List of consultees

Table 4: People interviewed for Cranbrook HIA

| ame | | Post, Organisation, |
|-----|------------------------------|---|
| 1. | Sulina Tallack | Funding Consultation Co-ordinator, East Devon District Council, EDDC |
| 2. | Tim Todd | Head of organisation, Young Devon |
| 3. | Becky Carmichael | Local Strategic Partnership: Chair of Officers Group + Primary Care, |
| 4. | Jill Elson | District / County Councillor, |
| 5. | Kerry Thorne | District coordinator early years and childcare service, |
| 6. | Sue Turner | Youth service provision, |
| 7. | Lisa Rutter | Youth Work Team Leader , |
| 8. | Lynne Robertson | Public Involvement Coordinator, CVS |
| 9. | Peter Jeffs | Director of Communities, East Devon District Council |
| 10. | Alan Stone | Urban design, County Council |
| 11. | Becky Jenkins | Interim lead health information, |
| 12. | Christine McNeil | Education & skills – policy, DCC |
| 13. | Dillon Hughes | Youth Services, DCC |
| 14. | Kate Little / Janthia Algate | Local Planning Authority |
| 15. | Malcolm West | Development Control, County Council |
| 16. | Sue Craythorne | Community Strategy, DCC |
| 17. | Vic Ebdon | Education Capital funds, DCC |
| 18. | Alison Morgan | Social care, DCC |
| 19. | Andrew Lightfoot | Economic Development, DCC |
| 20. | Lesley Smith | Community Council for Devon |
| 21. | Mrs Hammond | Clerk to Broadclyst parish council, |
| 22. | Sue Ayres | Whimple Parish Councillor , |
| 23. | Peter Bowden | Whimple Parish & East Devon District Council, |
| 24. | Henry Massey | Broadclyst Parish Council , |
| 25. | Derek Button | Broadclyst Parish Council, East Devon District Council and Devon County Council |
| 26. | | Chair of Rockbeare Parish Council |

Table 5: People invited to complete online survey

| Name | _ | Post, Organisation |
|------|-----------------|---|
| 1. | Helen Cooke | Data analyst, SW Public Health Observatory |
| 2. | Jill Borrow | Sport and recreation, DCC |
| 3. | John Golding | Housing, East Devon |
| 4. | John Mckenna | Calculation older person need |
| 5. | Kathy Moran | Connexions, |
| 6. | Mike Jones | Urban design, Devon County Council |
| 7. | Mike Skinner | District Librarian, East Devon, DCC Libraries |
| 8. | Mike Studden | Head of environmental hazards, Health Protection Agency |
| 9. | Phil Dent | Transport planner, Devon County Council |
| 10. | Phil Slater | Transport planner, Devon County Council |
| 11. | Steve Church | Landscape, Devon County Council |
| 12. | Sue McGrath | Crime and disorder partnership |
| 13. | Jeff Evanett | West Country Ambulance, Ambulance Service |
| 14. | Annette Dentith | Waste, DCC |



| Name | | Post, Organisation |
|------|-----------------|--|
| 15. | Robin Beavis | Cycling, DCC |
| 16. | Ros Mills | Rights of way officer, Access Officer, DCC |
| 17. | Ed Moffatt | Churches Together in Devon |
| 18. | Diana Crump | Represents disabled peoples needs, Living Options |
| 19. | David Whitfield | Arts officer, DCC |
| 20. | Pamela Akerman | Consultant in public health, Regional Public Health Group, SHA |
| 21. | Ian Hutchcroft | Sustainable Development, DCC |
| 22. | Ian Tearle | Public health lead East Devon, Devon PCT |
| 23. | Janet McCarthy | Economic development, DCC |
| 24. | Debbie Hart | Primary Care Development Manager, East Devon PCT |



Appendix 2: On-line survey

- 12.1 The question themes and format were developed out of the scoping stage, the initial round of interviews with stakeholders, discussion with the steering group and analysis of the empirical evidence base on the social determinants of health.
- 12.2 The survey questions and scales shown below relate to neighbourhood issues. They were drawn from studies concerned with the effects of the neighbourhood environment on individual health and well-being (114;115).
- 12.3 The survey begins with three introductory pages. A link is provided to further information about the development and the HIA.
- 12.4 The focuses on ways in which respondents see the development generating social cohesion, and on potential threats to that process, *ie*
 - what are the major drivers of social cohesion;
 - what are existing problems in the local area; and
 - whether they themselves could identify how the development of a new community could affect residents health.
- 12.5 The survey finishes with some open-ended questions about the respondent's own professional, and lived, experience.
- 12.6 The survey was distributed via www.surveymonkey.com.



Health Impact Assessment of Cranbrook

1. Introduction

It is crucial that Cranbrook is designed as a sustainable community both now and in the future, that meets people's changing needs and requirements. Ben Cave Associates Ltd are working with Devon County Council, Devon PCT and East Devon District Council to help ensure that the proposed development of the new community at Cranbrook is sustainable and healthy. To do this we are carrying out a health impact assessment (HIA). For more information on HIA go to click here This HIA is being carried out in parallel with an HIA of Sherford New Community. If you are involved in both developments we ask that you also look at the questionnaire for Sherford. This questionnaire should take no longer than 15 minutes to complete. We are sending it to a wide range of service providers. It will provide us with a valuable overview of your hopes for, and any concerns about, the proposed development.

2. Health and wellbeing

We are investigating ways in which health, wellbeing and health inequalities might be affected by the proposed development at Cranbrook.

This could apply to existing residents and the neighbouring communities of Whimple, Rockbeare, Clyst Honiton and Broadclyst or to the people moving in to Cranbrook.

Our health is affected by many different factors including

- · our access to employment,
- · our access to transport and to good housing and
- \cdot whether we feel comfortable and supported in our neighbourhoods.

Cranbrook clearly offers much potential.

How can we maximise this?

3. Your views

We are very interested in your views about how the designs and delivery of the new community can be strengthened to maximise positive health effects. You do not have to be a medical expert to be an expert in improving health. During the first stage of the health impact assessment we reviewed the plans and existing research about the new community to identify the main issues. A briefing note is available at click here This review and subsequent interviews have identified a key question: How will the new development link to and integrate with the existing communities (at Whimple, Rockbeare, Clyst Honiton and Broadclyst) and with Exeter itself, and also how will Cranbrook grow as a community? The following questionnaire asks your views about the ways in which communities develop and how residents will come together to form a community. This is called social cohesion. We are interested in your opinion on this and other matters. We provide space to cover other issues below.



| Health Impact Assessment of Cranbrook | | | | | | | | |
|---|---------|---------|--------|--------------------|---------|----------|---------|------------|
| 4. | | | | | | | | |
| 1. Please rank the factors wi | hich yo | u think | are th | e mos | t impor | tant fo | r socia | ı |
| cohesion in local communities | | | | | | | | |
| Social trust - such as the sense that others in the community can be trusted | Rank 1 | Rank 2 | Rank 3 | Rank 4 | Rank 5 | Rank 6 | Rank 7 | N/A |
| Sense of belonging and shared values - such as the emotional bond with area, feeling of belonging and knowing the people | O. | O. | O: | O: | O | O. | O. | O. |
| Political trust & participation - such as trusted local politicians who represent views of community | 0 | 0 | O: | O | O | O | O: | 0 |
| Respecting diversity – such as respecting differences and being happy when a mix of different people are in the area | O | O: | O: | O | O | O. | O: | \bigcirc |
| Similar life opportunities – such as lack of discrimination in local public services | 0 | 0 | O: | 0 | O: | O: | O: | 0 |
| Community relationships – such as being proud of, and enjoying, neighbourhoods where people are trusted and look out for | O. | O | O: | C | O | O | O. | O. |
| each other Economic opportunity - such as access to stable living wage employment | 0 | 0 | 0: | 0 | 0 | 0 | O: | 0 |
| Are there other drivers what above for social cohesion in I Taking your top three drives how these particular aspects. | ers of | social | ities? | on plea n be pr | ise giv | e a brie | ef exam | ple of |
| | | | | | | | | |

Page 2



Health Impact Assessment of Cranbrook 6. How do you think people's health and well-being will be affected by the development of a new community at Cranbrook? This applies to existing residents of the community and the neighbouring villages of Whimple, Rockbeare, Broadclyst and Clyst Honiton For answers which apply to the existing residents of the community and the neighbouring villages of Whimple, Rockbeare, Broadclyst and Clyst Honiton please answer this question. For answers which apply to new residents of Cranbrook please go to question 7. Answers which apply to other groups please go to question 8. A 7. How do you think new residents of Cranbrook health and well-being will be affected by the development of a new community at Cranbrook? · 8. How do you think the health and well-being of other groups such as those of Black and Ethnic Minority and the socio-economically deprived will be affected by the development of a new community at Cranbrook? 7. 9. In your work do you make links between environmental, social and economic factors? Please provide some examples. 4



| Health Impact Assessment of Cranbrook |
|--|
| 8. |
| 10. Are you aware of any work done to profile the new population? Please indicate where we can get hold of this work. |
| × |
| 11. Give us your definition of a good neighbourhood |
| |
| 9. |
| 12. What should the HIA recommend and have we missed anything out? |
| |
| 10. Finish |
| Thank you for your time If you would like more information about this survey, or about the wider project, please contact Adam Coutts at adam.coutts@bcahealth.co.uk or Sara Gibbs at sara.gibbs@devon.gov.uk Telephone: Adam Coutts - 07818 216 559 Sara Gibbs - 07976 922702 For BCA Health: click here |



Appendix 3: First thoughts: design codes etc

... a briefing paper to the steering group

- 12.7 The steering group have asked for guidance on the design codes as one of the outcomes of the HIA. This will be used by a (probably over stretched) planning officer. They will need to be clear, unambiguous and directive.
- 12.8 This document is the first step and is circulated to HIA team for information only at this stage.
- 12.9 The document reviews a number of approaches to including health in assessment and planning processes. The main conundrum is that a checklist approach, which will suit design codes, tends to recommend/reinforce good planning practice. The benefit of drawing on public health evidence is not immediately clear and may not be applicable in a straightforward checklist approach.
- 12.10 We do not want to overcomplicate the checklist but I suggest that the main health benefit comes through the way in which the development is delivered and the way in which the development is run. So we may want to move on from the approaches reviewed in this document and develop some process indicators which the planning officers can use as the development is brought forward.

Our process

- 12.11 We will need comments from steering group on this emerging document: from both planning and public health/PCT. The codes must have legitimacy for both organisations.
- 12.12 We will aim for informal feedback before steering group.
- 12.13 Comment/discussion on thee will be an agenda item at the next steering group.
- 12.14 The inclusion of health in design codes will have resource implications for PCT as development is brought forward.
- 12.15 The design codes will need to be grounded in appropriate local and regional (and national) quidance.
- 12.16 Please send other refs through.



Tests of Planning Soundness from PPS12

12.17 These tests refer to Development Plan Documents and are thus at a higher strategic level than the considerations for individual projects. They illustrate the criteria against which the Planning Inspectorate will judge the plan.

4.24 The presumption will be that the development plan document is sound unless it is shown to be otherwise as a result of evidence considered at the examination. The criteria for assessing whether a development plan document is sound will apply individually and collectively to policies in the development plan document. A development plan document will be sound if it meets the following tests:

Procedural

- i. it has been prepared in accordance with the local development scheme;
- ii. it has been prepared in compliance with the statement of community involvement, or with the minimum requirements set out in the Regulations47 where no statement of community involvement exists;
- iii. the plan and its policies have been subjected to sustainability appraisal;

Conformity

- iv. it is a spatial plan which is consistent with national planning policy and in general conformity with the regional spatial strategy for the region or, in London, the spatial development strategy and it has properly had regard to any other relevant plans, policies and strategies relating to the area or to adjoining areas;
- v. it has had regard to the authority's community strategy;

Coherence, consistency and effectiveness

- vi. the strategies/policies/allocations in the plan are coherent and consistent within and between development plan documents prepared by the authority and by neighbouring authorities, where cross boundary issues are relevant;
- vii. the strategies/policies/allocations represent the most appropriate in all the circumstances, having considered the relevant alternatives, and they are founded on a robust and credible evidence base;
- viii. there are clear mechanisms for implementation and monitoring; and
- ix. the plan is reasonably flexible to enable it to deal with changing circumstances.



The NHS Healthy Urban Development: watch out for health

- 12.18 Watch Out for Heath' (116) provides a structure to assess the likely impacts of developments on health. It helps to ensure that health is properly considered when determining proposals. It allows the opportunity to influence planning proposals to maximise the benefit to human health. It permits development proposals to be justified on the basis of their positive effect on health.
- 12.19 This guide, based on the WHO publication 'Healthy Urban Planning' 2000 Hugh Barton and Catherine Tsourou, is described as a tool for assessing the impact on public health of planning policies and planning proposals.
- 12.20 The list is similar to the Building in Health checklist used in the scoping stage of the HIA.
- 12.21 It offers some useful pointers about developing healthy and sustainable communities. It is closely tied to planning policies and proposals: this is both a weakness and strength. The topics should be part of established planning procedure and so the steering group may wish to consider what this list adds to decisions taken by Development Control. On the other hand it serves to emphasise the link between planning and health and it is a reminder of the importance of requiring these facilities and enforcing their provision.

Healthy Lifestyles

- Do planning policies and proposals encourage and promote healthy exercise?
- · Opportunities for play and exercise.
- · Open spaces.
- Green space and parks.
- · Playing fields.
- Manage parks and spaces for everyone.
- Green space within 15 minutes from any home.

Housing Quality

- Do planning policies and proposals encourage and promote housing quality?
- Lifetime homes standards.
- Adaptability and flexibility.
- Are homes well designed and oriented; have the highest energy efficiency rating; and constructed from environmentally friendly materials as locally sourced as possible?
- Tenure mix. Are lettings policies in the development tenure blind?
- Affordability.

Access to Work

- Do planning policies and proposals encourage and promote access to employment and training opportunities?
- Does the development or policy promote diversity in jobs for local residents; and provide opportunities for business?

Accessibility

- Do planning policies and proposals encourage and promote accessibility?
- · Encourage mobility.
- Public transport.
- Reduce car dependency.
- Minimise the need to travel.
- Is the community served by frequent, reliable, cheap public transport?
- · Are the streets pedestrian-friendly and cycle-friendly?



Food Access

- Do planning policies and proposals encourage and promote access to wholesome locally produced food?
- · Address food deserts.
- Does the development or plan allow for allotments, city farms or healthy living centres; safeguard good agricultural land from development; and avoid centralisation of shopping and provision of large supermarkets?

Crime Reduction and Community Safety

- Do planning policies and proposals encourage and promote crime reduction and community safety?
- Is there effective security and street surveillance?
- Traffic calming and home zones.

Air Quality and Neighbourhood Amenity

- Do planning policies and proposals encourage and promote air quality and an attractive environment?
- Good urban design.
- High quality public spaces.
- Minimise air and noise pollution and conserve existing quality townscape.

Social Cohesion and Social Capital

- Do planning policies and proposals encourage and promote social cohesion and social capital?
- Opportunities for social interaction, leisure activities and local empowerment.
- Avoid community severance by major roads or large commercial schemes.
- Are existing health inequalities likely to be reduced?

Public Services

- Do planning policies and proposals encourage and promote access to good public services? The right services in the right place.
- Sustainable design and construction in public buildings.
- Are community facilities provided and is community involvement encouraged?

Resource Minimisation

• Do planning policies and proposals encourage waste reduction, minimise energy and water use, minimise use of non-renewable resources, promote recycling and waste reduction, promote sustainable urban drainage, minimise land contamination?

Climate Change

- Do planning policies and proposals encourage and promote climate stability and minimisation of greenhouse gases?
- Does the plan or development reduce energy use in buildings and transport?



SEAs and health

12.22 In a paper reviewing the way in which the Environment Agency approaches human health in SEAs Fiona Taylor adapts the review tool produced by Manchester University (117). The question on baseline conditions is as follows.

| Is the local area and population described in terms of: | | | | | |
|---|----------------------------|--|--|--|--|
| Size of the populationY/N | Mortality & morbidity Y/N | | | | |
| Socio-economic deprivationY/N | Access to food produce Y/N | | | | |
| EthnicityY/N | HousingY/N | | | | |
| Health care utilisationY/N | Employment Y/N | | | | |
| Social/voluntary careY/N | Safety (crime)Y/N | | | | |
| Transport & communications Y/N | Leisure services Y/N | | | | |
| Educational facilitiesY/N | Pollution/sewerageY/N | | | | |
| Community participationY/N | Spiritual provision Y/N | | | | |
| Waste disposalY/N | Odour Y/N | | | | |
| NoiseY/N | Energy consumption Y/N | | | | |

12.23 The same question is repeated with a slightly different focus.

| Existing health problems and pressures on the | wider determinants of health should | also be described. |
|---|-------------------------------------|--------------------|
| Size of the populationY/N | Mortality & morbidity | Y/N |
| Socio-economic deprivation Y/N | Access to food produce | |
| EthnicityY/N | Housing | |
| Health care utilisationY/N | Employment | |
| Social/voluntary careY/N | Safety (crime) | |
| Transport & communications Y/N | Leisure services | |
| Educational facilitiesY/N | Pollution/sewerage | Y/N |
| Community participationY/N | Spiritual provision | |
| Waste disposalY/N | Odour | |
| NoiseY/N | Energy consumption | Y/N |

- 12.24 The advantage these questions have is that they bring an explicit focus on <u>population</u>: which can also be fine-tuned to include inequalities. The green text relates to characteristics of the population. A further question could be included about population change: does the assessment account for likely change in population profile over the life of the plan?
- 12.25 It is notable that each of these categories has an effect on health. Once again the question about duplication occurs as it is assumed that the service and infrastructure questions would be picked up by standard planning approaches.
- 12.26 As they currently stand the questions are a checklist that ask about the report in the assessment process. They could be adapted to consider whether a planning application takes account of these issues. They would need to be tied in with key themes in a statutory document such as the Community Strategy.



Appendix 4: Social cohesion

- 12.27 At the local level, cohesive communities are ones in which people:
 - trust and get along with each other and have a sense of belonging;
 - respect diversity and are tolerant; and
 - promote fairness to ensure that community members have similar life chances.
- 12.28 At the national level, a cohesive British society is one in which people have a clear idea of what is expected of them and share a common set of values that transcend ethnic, religious or other identities.
- 12.29 Cohesive communities are central to many key government objectives, including:
 - preventing and managing conflict and tension;
 - increasing levels of cooperation between individuals and communities and
 - improving their ability to get along;
- 12.30 However, there are significant challenges to promoting cohesion. Individual communities may be experiencing very specific changes and can face very different challenges for cohesion. The same factors that develop or improve cohesion in one community may reduce cohesion in other communities.
- 12.31 For example the development of a new community at Cranbrook should improve the quality of life for its residents. There is a risk that this could cause resentment in other areas, unless carefully handled. A number of consultees pointed out how Cranbrook may develop to the detriment of the surrounding towns and villages in terms of the new community becoming the centre for service provision and detract services and investment from the surrounding areas. This will cumulatively concentrate wealth and services within Cranbrook and lead to an increase in sub-regional inequalities which will not be conducive to the social cohesiveness of the sub-region.
- 12.32 In order to create a socially and economically cohesive community in Cranbrook the development must enable and facilitate a combination of factors such as economy, housing, transport, services and facilities and promote local/micro democratic forms of community governance. This will ensure that individuals are provided with the social and economic opportunities and capabilities to participate within their community and society at large.
- 12.33 In terms of the discussion of cohesion specifically the consultees felt that a sense of belonging could be created by the development of a community centre embodied within the establishment of the multi purpose community building (health and well-being centre). This will provide a range of social services and act as an informal and formal context in which community members are able to interact and meet one another.
- 12.34 Views were also expressed amongst the consultees that the development should be contextualised within the surrounding areas and region in order to prevent the new community from becoming isolated from neighbouring towns and villages in a social and economic sense but also in relation to social identity. Consultees questioned whether the new community and its residents would adopt an area specific identity particular to that region or adopt the identity and cultural values of Devon more widely.
- 12.35 Perhaps the most important mechanism by which the development will facilitate the creation of social cohesion and governance is through the creation of institutions that will help create and manage the views and needs of local residents. These will play an important role in the development and management of local forms of democracy, increasing the participation and ownership of residents in the development of the community, and improving the long-term sustainability of the community particularly by holding local political representatives to account.



Appendix 5: Consultation: Purpose and approach

- 12.36 The use of the qualitative interview data embodied within the consultation process is to examine issues such as what and who is involved in the process of implementation, the steps and processes involved, barriers and facilitators, decisions made, whether the development is being implemented as envisaged, and the reasons for deviation from the original design. The consultation helps us understand the processes by which the development proposals will be delivered and what potential outcomes it may have. It can, for example, generate a detailed description of the mechanism involved delivery of the development proposals, who provides them, what form they take, how they are delivered, and how they are experienced by participants and by those who deliver them. It provides an in-depth understanding of the decisions, choices and judgments involved, how they are made and what shapes this. This is particularly important where the development is itself highly process-orientated, where the intention is to effect change through interactions rather than through a one-off event or input.
- 12.37 The consultation process and the information generated also plays a key (although sometimes neglected) role in understanding impacts and outcomes. Rather than providing quantitative measurements of gross or net impact, it can answer more detailed questions which might be summarised as 'how, under what circumstances, in what ways and for which types of people is the development working ... and what do we mean by "working" anyway?' It can tell us about the range and types of impacts the development has, giving a voice to outcomes that were not anticipated or intended and which an evaluator or consultant might not have thought to consider.
- 12.38 In summary the consultation process can help us to understand where a development or social context is not well understood, and the evaluation questions, issues or criteria are not immediately obvious; where 'insider' values and perspectives are particularly important as well as the 'official' perspective; where diversity in how the development operates across different sites or services needs to be understood; provide new insights into the implementation or experience of the development; check for unintended or perverse consequences of the development; explore the complexity of what goes on, in its natural settings; explore 'taken for granted' practices, lay behaviour and organisational cultures.
- 12.39 Consultation is invaluable in framing the development proposals in ways that are meaningful to ordinary people, and in eliciting their perceptions, understandings and experiences of the development context. It is probably not too grandiose to suggest that it also helps to enhance the democratic process by introducing the residents and or citizens' perspective in rigorous, systematic and non-anecdotal ways.
- 12.40 Throughout the consultation process we aimed to consult a range of stakeholders who would provide differing insights and opinions on the development proposals and the potential outcomes the development of the new community may have in terms of social and economic impacts but in particular health related outcomes. The methodology has sought to use a variety of data sources to described the relationship and mechanisms linking the development proposals and public health evidence in order to provide an indication as to the potential health impacts generated by the development of Cranbrook New Community
- 12.41 Key stakeholders were identified via consultation with steering group members and project documents. These gate keepers were then snowballed for further respondents. Key stakeholders were initially contacted via email which provided a description of the development and how their views and opinions would be useful in the development process. Stakeholders were then followed up with a telephone call or further email.
- 12.42 The interview question format was drawn from the themes of the evidence base. However, after conducting a number of interviews key issues began to emerge such as social cohesion, housing affordability, urban design which helped us refine and direct the



remaining interviews, i.e., this enabled us to be more specific in our line of questioning rather than asking a number of general questions which helped to provide more in-depth information on the development proposals and potential outcomes that may arise from the development. Respondents also provided information as to how the process of actually delivering and sustaining the development over time could be achieved.

Questionnaire survey

- 12.43 The online survey was established in order to broaden the consultation process and context. It enabled us to gather the views and opinions of certain individuals and groups who would otherwise have fallen outside the remit of the interviews. This included local civic, faith and community groups as well as individuals who were deemed to have a direct/indirect interest or may be affected by the development of the new community.
- 12.44 How were they selected? Steering groups recommendations/contacts/identified people and groups through review of development proposals as well as general search for community and civic groups within the local area.
- 12.45 The question themes and format were drawn from the issues arising from the interviews and again from the empirical evidence base on the social determinants of health. Major issues addressed in the questionnaire survey concerned how respondents thought the development could generate social cohesion, i.e., what are the major drivers of social cohesion, significant problems with the development and whether they themselves could identify how the development of a new community could affect residents health. Respondents were also asked how they thought the HIA could be improved and what key recommendations could be included in the process.
- 12.46 Respondents for the online questionnaire were initially approached via email which provided a description of the development and how their views and opinions would be useful in the development process. Stakeholders were then followed up with a telephone call and further email. The steering group members were also asked to remind people/colleagues of the survey.

Analysis of questionnaire and interview data

12.47 The qualitative data derived from the consultation process were analysed and thematically coded using the empirical evidence base on the social determinants of health and the review of the project documents. Quotations and ideas expressed by the interview and survey respondents were then coded under each of these themes such as Transport, Governance, Housing in order to provide a clearer account of the development process itself but also to support the recommendations and concerns that were generated by the HIA team. The data collection also provided a number of new insights into issues concerning the phasing and future proofing of the development.

