Pathways to health and wellness

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Introduction

In its broadest context, the environment encompasses physical, social, cultural, and institutional factors, and has the potential to impact, both positively and negatively, on the engagement of individuals in a community. The physical environment includes both natural and built factors. Well planned, thoughtful design of the built environment creates opportunities for people to engage in community life through the provision of safe and equitable access to, and participation in, a broad range of occupations. (Occupation is defined here as “…everything people do to occupy themselves including looking after themselves,…enjoying life,…and contributing to the social and economic fabric of their communities….“¹ (pg 369). The importance of planning and developing community environments that facilitate access, safety, health, environmental awareness, and a sense of belonging within the community is acknowledged by many researchers and practitioners.²,³

Outline of project

In line with its commitment to contributing to the health, welfare and safety of Australian communities, during 2008 Charles Sturt University completed an evaluation project for the Roads and Traffic Authority of NSW (RTA). This evaluation project was focused on understanding the experiences of councils and other key stakeholders in the development of plans for pathways and access in communities in the South West region of New South Wales (NSW). The evaluation was funded by the RTA and targeted relevant council staff, road safety officers, and community representatives in the identified area. It also included interviews with a number of senior RTA staff.

The RTA has responsibility for a large range of issues including the promotion of safety and access for pedestrians and cyclists. To this end, the Pedestrian Access and Mobility Plans (PAMP) and Bike Plan programs have both been developed by the RTA in order to improve the safety, coherence and convenience of facilities for pedestrians and cyclists. These programs provide dollar for dollar funding for participating councils in order to achieve these aims. The resultant plans are “…partnerships between State and local Governments…”⁴ (pg 7) that endeavour to co-ordinate the planning and development of useful pathways for pedestrians and cyclists.

The aim of the study was to evaluate the processes, impacts and outcomes of the development of PAMP and Bike Plans by local councils. The study further aimed to explore the experiences of key stakeholders in developing, actioning and reviewing these plans in order to enhance pathway infrastructure and access in the various communities.

Methodology

This evaluation project primarily involved qualitative evaluation methods. Information was initially generated from a call for submissions forwarded to all councils and Road Safety Officers (RSOs) in the identified region. The call for submissions included details about the project and provided respondents
with a number of guiding points to address. All information (written and verbal) obtained from the call for submissions was thematically analysed by the evaluation team and key themes identified.

Semi-structured interviews, using the key themes identified in the responses to the call for submissions, were conducted with council staff, RSOs and/or consumer representatives from a purposeful sample of 15 of the 32 councils in the target region. As previously noted, a number of senior RTA staff were also interviewed about the programs in an attempt to gain a balanced perspective of the effectiveness of the programs. The evaluation team endeavoured to sample a mix of councils in terms of geographical size, population, and stage of development of their plans. A number of councils declined involvement in this evaluation project potentially impacting on the range of views and depth of information obtained. In four of the councils, interviews were conducted face-to-face and were accompanied by inspection of the pedestrian and cycleway infrastructure and facilities within the community. Due to time constraints, all other interviews were conducted by telephone. Detailed document analysis of a purposeful sample of six PAMPs and six Bike Plans developed by some of the participating councils was also conducted.

**Key findings**

The findings of the evaluation were far reaching and included themes such as the significant benefit to communities that the programs offer; the difficulties faced by some councils in accessing the programs (including the equity of access to the programs for more rural councils); the impact of limited resources on the plan development and actioning; the challenges encountered by councils in trying to harness community support for development of the plans; issues related to the integration (or lack thereof) of the PAMP and Bike Plans with other council and community plans; and the importance of effective communication to ensure a successful outcome for all parties.

Overwhelmingly, the results of this evaluation demonstrated that when effectively implemented, the PAMP and Bike Plan programs offer a broad range of benefits to communities. These benefits include a sense of improved health and well being; increased physical activity; enhanced opportunities for rehabilitation and weight loss; greater use of cycling and walking as a mode of transport; improved pedestrian and cyclist safety; greater equity of access for older people, families and others with special needs; improved town planning; increased community surveillance; and provision of facilities that “connect” the community. There were numerous anecdotal stories about the positive impact of the outcomes of these programs.

The results of the evaluation also demonstrated that the PAMP and Bike Plan programs are far less accessible and useful to those communities that are less wealthy, more resource-constrained, smaller, more remote and more dispersed. Some of these communities and their councils demonstrated difficulty seeing the relevance of the programs to their setting and/or were unable to match the RTA’s funding thus missing out on valuable opportunities to continue to develop their community’s cycleway and pedestrian infrastructure.

During the course of the interviews with various key stakeholders and the subsequent analysis of data, it became apparent that there was, perhaps, a limited appreciation by many of the key stakeholders of the full impact of well planned, built pathways beyond being just a potential means of transport. The RTA is responsible for improving road safety; licensing of drivers; and managing the road network to ensure safe, timely and consistent travel. Undoubtedly, their focus for both the PAMP and Bike Plan programs is to enhance the flow of traffic, cyclists and pedestrians on and around roadways and cycle paths. The RTA is also focused on providing safe, coherent and convenient methods for people to
travel from one point to another. As previously noted, to some extent this focus ignores the other potential benefits to a community that a well planned pathway may offer.

Although there was limited empirical evidence to support the reported health benefits of the pathways, there were numerous stories about the use of the pathways within the communities and how this use might contribute to the health and wellbeing of individuals and the wider community. There were also numerous comments about the opportunities that a well planned pathway infrastructure can provide for connecting communities and enabling people to fully experience the community. One council went so far as to say that their pathway had had a “healing effect” on a community that was endeavouring to overcome a series of negative events and significant change.

There was frequently discussion around who had been involved in the consultation and planning phase and how decisions about what should happen were made. For example - Who had assisted with identifying priorities? Who had decided on where the pathways or improvements to access should be developed? How would the new developments link community facilities (if at all)? Many councils had made varying attempts at community consultation; these strategies included newspaper advertisements, public meetings, surveys, and making developed plans available for public comment. Local Access Committees, Landcare groups, and Bicycle User Groups were also used to obtain relevant community perspectives. Obtaining community input to aid the planning process was seen as important but appeared to be a challenging task for the majority of councils although feedback (both positive and negative) was often forthcoming after completion of path construction.

From the data collected during the evaluation, it would be fair to surmise that very few health professionals had had input to the plans developed by councils, and subsequently submitted to and approved by the RTA. This is not to say that health professionals had not been involved in some capacity (for example through membership of the local Access Committees or attendance at community forums) however this involvement was not obvious and in some instances was obviously lacking (as evidenced by some of the facilities viewed and experienced!)

**Impact of findings**

Following completion of the evaluation an extensive list of recommendations was outlined to the RTA in an effort to further enhance these valuable programs. In particular it is felt that further work is required in order to ensure that rural and remote communities are able to have equitable opportunities to access, receive and achieve the intended benefits of the programs. Work toward this goal will require the commitment of the RTA, local government, and the community.

It is the belief of the evaluation team that health professionals have a great degree to offer the consultation, planning and review processes involved in developing the built environment within communities (including the development of pathways). As previously noted, this study demonstrated that there appears to be little involvement of health professionals in this process thus potentially impacting on the overall effectiveness of the final outcome. The involvement of health professionals in this arena adds a new dimension to the planning and development of communities.

With a background in occupational therapy, the first author believes there is much potential for the profession to be involved in the area of town planning. Occupational therapists have a unique perspective to offer those who plan and develop shared built environments, such as pedestrian and bike pathways: the perspective that occupations and environments are interdependent and that engaging in occupation has considerable potential to either enhance or decrease health and wellbeing. Occupational therapists understand that the environment is a complex and multi-faceted phenomenon
that stretches far beyond just physical components and that the environment has the potential to either facilitate or constrain choice and engagement in occupations. With this knowledge, it is felt that occupational therapists are well placed to provide valuable and insightful input to the policies, planning, and development of the constructed aspects of the physical environment within communities. It is recognised however, that there are many other health professionals who have valuable contributions to make to this process and that we must also work in partnership with community members and others with expertise in other relevant areas (for example town planning, engineering) in order to achieve useful and meaningful outcomes for communities.

Careful design and construction of the built environment within communities can ensure, for example, that planned pathways are not only safe, coherent and convenient (as per RTA guidelines) but that they also link relevant facilities within communities (such as schools and sports complexes, child care centres and the town library); that community spaces facilitate a range of occupations for users from a variety of age groups, from diverse cultural backgrounds, and with a broad range of abilities and needs.

**Conclusion**

The PAMP and Bike Plan initiatives are valuable programs developed by the Roads and Traffic Authority of NSW in order to assist local government in the development of their pedestrian and cycle pathway infrastructure. The recently completed evaluation of these programs indicates that for communities who are able to access, receive and achieve the intended outcomes there are a vast range of benefits to be had. Further work however is required to ensure that more rural and remote communities are able to benefit fully from them and that members of the involved communities are more actively involved, in a meaningful and ongoing manner, in the development and actioning of the plans. It is also suggested that involvement of a range of health professionals in programs such as the PAMP and Bike Plan programs may assist in the development of plans that address a greater range of factors including the health and wellbeing of communities.

**References**


**Presenter**

Tracey Parnell is an occupational therapist who has predominantly worked in the area of adult rehabilitation in various settings including hospitals, the community and the occupational/vocational rehabilitation industry. Tracey is currently employed by Charles Sturt University where, for the past three years, she has contributed to the undergraduate occupational therapy program through teaching and fieldwork coordination.