

## Submission from Cancer Council NSW to the Greater Sydney Commission draft *District Plans* and the *Towards our Greater Sydney 2056* amendment to *A Plan for Growing Sydney*

31 March 2017

### Summary

Cancer Council NSW is committed to reducing the impact of cancer on individuals and the community, and to lessening the burden for people affected by cancer. More than just a health issue, cancer is a social issue. Though there are many risk factors that can be addressed to reduce the population's risk of cancer, these are just 'the tip of the iceberg'.<sup>1</sup> To achieve meaningful reductions in cancer, a commitment to the Social Determinants of Health is required. This is especially important considering the poorer cancer outcomes among people with low socio-economic status and Aboriginal peoples.<sup>2</sup>

Our submission sets out 21 recommendations that focus on ensuring public health measures are incorporated into the draft District Plans and the *Towards our Greater Sydney 2056* amendment to *A Plan for Growing Sydney*. Additionally, Cancer Council NSW supports the submission from the NSW Council of Social Services, Sydney Alliance and National Heart Foundation of Australia, as implementing the recommendations of these organisations also address the Social Determinants of Health and will have the consequent benefits of addressing cancer risk factors and cancer rates in the community.

### Recommendations:

**Recommendation 1:**

Protecting and promoting the health and wellbeing of current and future residents by implementing 'health in all policies' as an explicit priority for *Towards our Greater Sydney 2056*.

**Recommendation 2:**

Any planning and development applications in the Greater Sydney region should include a social impact assessment explicitly address how they will avoid negatively impacting on public health, or amenities, before they are accepted.

**Recommendation 3:**

The aim that Sydney become a '30 minute city' should include other aspects of health, for example, that people should have access to affordable healthy foods, medical and other health facilities within 30 minutes of where they live.

**Recommendation 4:**

Alcohol outlet density is considered in the planning for the 'three Cities' of Sydney to limit the number of outlets, particularly in areas where there are already high concentrations of alcohol outlets.

**Recommendation 5:**

Restrictions are enforced on the opening of new alcohol outlets in areas close to schools, childcare and other children's services.

**Recommendation 6:**

Develop meaningful targets for affordable housing by lifting the target to at least 15% of all new developments on private land, and at least 30% on government land, as proposed by Sydney Alliance.

**Recommendation 7:**

The *District Plans* and *Towards our Greater Sydney 2056* include a priority "To provide equitable access to fresh healthy food" This includes setting targets for a maximum distance to travel to purchase healthy food and providing active travel access.

**Recommendation 8:**

District Plans take into account access to healthy foods and include limitations on the density of unhealthy food outlets, particularly the location of fast food outlets in areas close to schools, childcare and other children's services.

**Recommendation 9:**

Marketing and advertising of energy-dense and nutrient-poor foods and drinks is restricted in all settings within council control including outdoor advertising, shopping centres, sporting clubs and recreational organisations to reduce the exposure to and protect children in all Greater Sydney regions.

**Recommendation 10:**

Vending machines and food outlets (such as in recreational facilities) under council control limit the amount of energy-dense and nutrient poor foods and drinks and provide affordable healthier options to improve food security and create great healthy places.

**Recommendation 11:**

Each District Plan prioritise policies on public health and the built environment to facilitate and encourage active living.

**Recommendation 12:**

Indoor and outdoor areas that service the local community are 100% smoke-free areas.

**Recommendation 13:**

Any planning and development applications specify whether they will be smoking or non-smoking areas. Applying the criteria of supporting a healthy lifestyle under 'liveability' should prevent the development of smoking areas within the community.

**Recommendation 14:**

All new apartment complexes and houses are designated smoke-free in any future development planning process.

**Recommendation 15:**

Tobacco outlet density is considered in the planning for the 'three Cities' of Sydney to limit the number of outlets, particularly in areas where there are already high concentrations of tobacco outlets.

**Recommendation 16:**

Restrictions are enforced on the opening of new tobacco outlets in areas close to schools, childcare and other children's services.

**Recommendation 17:**

Local government ensure up to date comprehensive sun protection for all employees who work outdoors all or part of the day.

**Recommendation 18:**

The relevant sections of the Local Government Act 1993 be used to improve sun protection practices by increasing provision of quality natural and built shade in public spaces through better planning and design.

**Recommendation 19:**

Councils ensure shade audits are included in management plans to determine quality and usability of existing shade structures (awnings, shade sails and permanent built shade structures) and natural shade (trees and other vegetation) as well as identifying sites requiring shade.

**Recommendation 20:**

Health infrastructure planners and managers undertake comprehensive consumer consultation and planning for accessible, affordable parking for cancer patients at new and redeveloped facilities.

**Recommendation 21:**

Health infrastructure planners and managers ensure that future contract negotiations with private car park operators provide for accessible, affordable parking for cancer patients, taking into account the frequency of use by cancer patients.

## Introduction

Cancer Council NSW is committed to reducing the impact of cancer on individuals and the community, and to lessening the burden for people affected by cancer. More than a third of cancers are related to smoking, overexposure to the sun, being overweight and obese, poor nutrition, alcohol consumption and lack of physical activity. Many cancers can be prevented by helping people make healthier choices every day. However, people's ability to make healthy choices is strongly influenced by the environment in which they live, work, learn and play. We believe health is central to urban planning in order to create environments that promote cancer-smart behaviours and reduce exposure to known cancer risks. We are community funded and community focused. We work to beat cancer by conducting world-class research, developing and implementing prevention programs, providing information and support to people affected by cancer and advocating for the community to ensure governments take action to reduce the population's cancer risk and improve access to care and treatment.

Cancer Council is a member of the Social Determinants of Health Alliance. As such, Cancer Council NSW recognises that the most common forms of ill-health, including cancer, that affect populations are strongly influenced by factors in the social environment, which exert an influence over the life course.<sup>3</sup>

Research shows that up to 37,000 Australian cancer cases per year are preventable.<sup>4</sup> Tobacco smoking causes 15,525 cancer cases each year<sup>5</sup> and exposure to UV radiation (UVR) causes 7,220 cancer cases each year.<sup>6</sup> Nearly 4,000 new Australian cancer cases diagnosed in 2010 could be attributed to overweight and obesity.<sup>7</sup> Diet is another modifiable risk factor, with more than 2,600 cancer cases attributed to consuming too much red and processed meat<sup>8</sup>; 1,555 cancer cases attributed to eating too little fruit, 311 to eating too little vegetables and 2,600 to insufficient fibre intake;<sup>9</sup> and over 3,200 cancers attributed to alcohol consumption.<sup>10</sup> An additional 1,814 cancer cases were attributed to insufficient physical activity levels.<sup>11</sup> Taken together, up to one-third of cancer cases were preventable by leading cancer-smart lifestyles.<sup>4</sup>

Australia continues to have among the highest rates of skin cancer in the world. Nationally melanoma is the third most common cancer diagnosed in males (after prostate and bowel) and the third most common cancer diagnosed in females (after breast and bowel).<sup>2</sup> It is estimated that in 2017, over 13,900 Australians will be diagnosed with melanoma of the skin<sup>12</sup> and Medicare records show that there are more than 950,000 paid Medicare services for non-melanoma skin cancer (NMSC) each year.<sup>13</sup> Exposure to UV radiation also causes eye damage and premature aging of the skin.<sup>14;15</sup>

Cancer Council NSW appreciates the opportunity to provide this submission to the Greater Sydney Commission. The *Draft District Plans* and *Towards our Greater Sydney 2056* provide an opportunity to ensure our local communities are developed to maximise health and wellbeing. There are planning considerations that should be considered that would assist in reducing the NSW population's cancer risk. These considerations link with existing NSW Government priorities, including the NSW Healthy Eating and Active Living (HEAL) Strategy, the Premier's Priority: Childhood Obesity, the NSW Tobacco Strategy NSW and the Skin Cancer Prevention Strategy 2016-2020.

While addressing cancer risk will require a comprehensive and multifaceted approach across a range of sectors, Cancer Council NSW has outlined below a number of areas we see as the most cost-effective planning initiatives that should be considered and included as priority action areas for the Greater Sydney region.

## **A public health and Social Determinants of Health focus**

Urban planning has been described as the 'ultimate public health intervention', with the potential to positively influence the health of the entire population living and working in an area.<sup>16</sup> For a city to be economically sustainable, it is not enough to just maintain the health of its population; enhancing the quality of life will improve productivity of the city as a whole and contribute to the ongoing growth of the city.<sup>16</sup> The World Health Organization outlines the need to "*place health and health equity at the heart of urban governance and planning*" as a way of ensuring health equity.<sup>17</sup> Put in these terms, it is imperative that such considerations are incorporated into any future planning for the Greater Sydney Region.

We commend the Greater Sydney Commission for considering liveability into every level of planning for Greater Sydney. As part of ensuring liveability, the Greater Sydney Commission draws on the United Nations' Sustainable Development Goals,<sup>18</sup> of which 'good health and well-being' is one goal to meet the environmental, political and economic challenges facing the world.<sup>19</sup>

Cancer Council NSW is encouraged to see that one of the priorities of providing an equitable, polycentric city is to 'provide equitable access to health, open space and cultural

infrastructure'.<sup>18</sup> However, with the high burden of chronic diseases in Australia, we believe that an explicit public health priority should be included, to protect and promote the health and wellbeing of current and future residents. Further, considering the Social Determinants of Health will ensure that benefits are consistent for all sub-groups in the population. Applying this lens will ensure that planning decisions are considered in light of what residents need to allow them to lead healthy, active lifestyles and help prevent chronic diseases.

Of course, Cancer Council NSW supports efforts to increase Greater Sydney's residents' access to more opportunities to be active and greater proportions of green space. However, we believe there are other opportunities to improve the health of the Greater Sydney population by incorporating a 'health in all policies' approach.<sup>20</sup>

**Recommendation 1:**

Protecting and promoting the health and wellbeing of current and future residents by implementing 'health in all policies' as an explicit priority for *Towards our Greater Sydney 2056*.

Planning development should include an objective around health and wellbeing to align with health priorities to prevent chronic diseases and support state and local initiatives to shape healthy environments.<sup>21</sup> Including public health considerations in planning of the Greater Sydney cities supports 'health in all' policies and shows that health is everyone's responsibility.<sup>22</sup>

**Recommendation 2:**

Any planning and development applications in the Greater Sydney region should include a social impact assessment explicitly address how they will avoid negatively impacting on public health, or amenities, before they are accepted.

Cancer Council NSW commends the Greater Sydney Commission for the aim of making the Sydney Metropolitan Area a '30-minute city' in relation to where people live and work, as well as the focus on open space. However, we believe this should be extended to incorporate access to nutritious foods.

The food environment encompasses availability and accessibility of both healthy and unhealthy foods. Unhealthy food environments promote unhealthy dietary patterns, and the areas where these occur often simultaneously have higher levels of overweight and obesity and higher cancer rates.<sup>23</sup> It has been established that there are geographic inequities in access to healthy foods in lower socio-economic status areas within Sydney.<sup>24</sup> Additionally, access to medical services and other health care should also be considered within this priority.

**Recommendation 3:**

The aim that Sydney become a '30 minute city' should include other aspects of health, for example, that people should have access to affordable healthy foods, medical and other health facilities within 30 minutes of where they live.

## Promoting a healthier drinking culture and minimising harm from alcohol

One area that affects both health and wellbeing and public amenity is the availability and accessibility of alcohol. Alcohol is a well-established cause of 10 different cancers.<sup>25</sup> Alcohol consumption has been linked to many chronic diseases, including type 2 diabetes, cardiovascular disease, stroke, hypertension, liver disease, pancreatitis and mental health issues.<sup>26</sup> Additionally, excessive alcohol consumption contributes to weight gain, overweight and obesity, which are independent risk factors for most of the chronic diseases mentioned.<sup>27</sup>

In addition to long-term health risks, the short-term risks of binge drinking and overconsumption of alcohol are well established. Excess alcohol consumption costs the NSW government more than \$1 billion every year.<sup>28</sup> This does not include the costs of treatment of chronic conditions linked to alcohol use. It has been estimated that the net impact of alcohol contributes 2.3% of total burden of disease in Australia.<sup>29</sup>

Cancer Council NSW supports evidence-based action to reshape Australian social attitudes towards drinking, and to reduce the burden of morbidity and mortality caused by alcohol use.<sup>30</sup> The National Preventive Health Taskforce recommended that addressing the cultural place of alcohol in Australian society was important when addressing the issue of alcohol consumption.<sup>31</sup> Cancer Council NSW believes that changing the public's alcohol use will require a significant shift in Australia's cultural beliefs around alcohol and drinking. People must be supported to make healthier drinking choices, and positively influencing the drinking culture can reduce alcohol consumption in the long term, and hence improve people's future health. There are opportunities for the Greater Sydney Commission to establish healthier drinking cultures through the draft plans.

Alcohol is a cause of cancers of the mouth, pharynx, larynx, oesophagus, breast, stomach and bowel.<sup>32</sup> The risk of cancer increases with the amount of alcohol consumed and is significantly higher when combined with tobacco smoker.<sup>32;33</sup> Reducing the amount of both long-term (e.g. chronic disease) and short-term harm (e.g. accidents and assaults) rely on cultural change. The Greater Sydney Commission has an opportunity to positively influence the alcohol culture in the Greater Sydney region.

A higher density of alcohol outlets is associated with higher consumption of alcohol<sup>34</sup> and greater alcohol-related harms, including domestic violence and assaults.<sup>35;36</sup> Further, some evidence suggests that increased availability of alcohol influences social norms in relation to heavy alcohol use.<sup>37</sup> Therefore reducing the outlet density is an effective way to not only reduce acute alcohol-related harms, but also reshape the drinking culture.

**Recommendation 4:**

Alcohol outlet density is considered in the planning for the 'three Cities' of Sydney to limit the number of outlets, particularly in areas where there are already high concentrations of alcohol outlets.

**Recommendation 5:**

Restrictions are enforced on the opening of new alcohol outlets in areas close to schools, childcare and other children's services.

Cancer Council NSW is pleased that collaboration is a key priority outlined in *Towards our Greater Sydney 2056*. As such, we believe that members of the public and people working in

areas directly affected by alcohol use and misuse, such as policing and local government, should have opportunities to comment on and raise concerns with new liquor licence applications and variations to existing licences. The World Health Organization recommends that the public is informed about new liquor licences both on-site and in the public notices section of local newspapers,<sup>38</sup> which is not currently required in NSW.

## Promoting healthy diets and healthy weights and providing a supportive food environment

We are in the midst of an obesity epidemic with over half of the adult population and a staggering 22% of school-aged children overweight or obese in NSW.<sup>39</sup> Obesity is a major risk factor for non-communicable diseases including 11 different cancers: bowel, breast (post-menopausal), stomach, kidney, gallbladder, liver, pancreas, oesophagus, endometrium, ovarian and advanced prostate.<sup>32</sup> Obesity puts enormous pressure on the health system and costs an estimated \$19 billion in NSW alone.<sup>40</sup> There is a need to look toward preventative solutions to address the obesity crisis and Greater Sydney Commission has an opportunity to be part of this solution.

### A planning system that facilitates healthy eating

The NSW Healthy Eating and Active Living (HEAL) Strategy outlined that “healthy eating and active living are key factors in maintaining individual and population health”.<sup>40</sup> Local and state governments share responsibility for protecting health and safety through providing opportunities for the community to be active and have access to healthy food and drink, and therefore have a role in preventing chronic disease. It is known that housing affordability stress has been associated with a negative impact on the nutritional status of children in low-income families.<sup>41</sup> Therefore ensuring ‘health in all policies’ in relation to housing affordability is one step towards changing this.

#### **Recommendation 6:**

Develop meaningful targets for affordable housing by lifting the target to at least 15% of all new developments on private land, and at least 30% on government land, as proposed by Sydney Alliance.

One of the Strategic Directions of the NSW HEAL Strategy is ‘Environments to support healthy eating and active living’.<sup>40</sup> This includes both healthy food environments and healthy built environments that support active transport and other physical activity.<sup>40</sup> Though increasing physical activity is a priority in *Towards our Greater Sydney 2056*, there are opportunities to encompass this priority of the HEAL Strategy and develop healthier food environments in the Greater Sydney Region.

#### **Recommendation 7:**

The *District Plans* and *Towards our Greater Sydney 2056* include a priority “To provide equitable access to fresh healthy food”. This includes setting targets for a maximum distance to travel to purchase healthy food and providing active travel access.

Encouraging the community to lead healthy, cancer-smart lifestyles by improving access and availability to affordable healthy food and beverages and reducing exposure to unhealthy options is a priority for Cancer Council NSW.

One area for improvement relates to planning and development approvals, specifically for unhealthy food outlets such as fast food chains. There are a number of recent examples of development applications from major fast food chains that would see these fast food chains located close to schools.

Like any business, fast food chains try to capitalise on consumers by making them easy to access. However, there is evidence that in Australia, fast food outlets are more highly concentrated around schools in lower socio-economic status (SES) areas than schools in higher SES areas.<sup>42</sup>

Although there is some conflicting evidence,<sup>43</sup> the availability of fast food outlets in close proximity to children's and adolescent settings such as preschools and schools appears to have negative associations with weight,<sup>43-45</sup> poorer nutritional intake<sup>45,46</sup> and unhealthy eating behaviours, such as breakfast skipping and frequent snacking.<sup>47</sup> There is also evidence that the negative effects of the proximity of fast food outlets to schools on weight are more prominent in individuals from lower SES areas.<sup>47</sup>

The number of types of fast food outlets is also important, with adults exposed to more types of outlets in their local environment more likely to be overweight.<sup>48</sup>

To address this, the Greater Sydney Commission and the relevant local councils could implement planning and development restrictions on the establishment of fast food outlets within close proximity to childcare facilities and schools. As well as positively impacting on the children attending these services, a reduced availability of fast food is also likely to have positive effects on their parents' weight status also.<sup>49</sup>

**Recommendation 8:**

District Plans take into account access to healthy foods and include limitations on the density of unhealthy food outlets, particularly the location of fast food outlets in areas close to schools, childcare and other children's services.

A planning system that models healthy food provision

Marketing of unhealthy foods and drinks to children influences children's nutrition knowledge, food preferences, food requests, purchase behaviour, diet and health.<sup>50</sup> Therefore there is a need to protect children from the harms of unhealthy food advertising.

Cancer Council NSW is encouraged that the NSW Premier announced that 'tackling childhood obesity' is one of 12 priorities and is aiming to reduce childhood obesity by 5% over 10 years.<sup>51</sup> Changing the food environment is an important part of achieving this goal. The latest evidence shows that reducing junk food marketing is one of the most cost-effective interventions to reduce childhood obesity and would save an estimated \$38 for every \$1 invested.<sup>52</sup> Furthermore reducing children's exposure to junk food advertising is one of the NSW Health HEAL Strategy actions for improving food environments.<sup>40</sup>



Greater Sydney Commission has an opportunity to lead by example and include restrictions on junk food advertising in areas under council-control within the *Draft District Plans* and *Towards our Greater Sydney 2056* to improve our children's health outcomes.

**Recommendation 9:**

Marketing and advertising of energy-dense and nutrient-poor foods and drinks are restricted in all settings within council control including outdoor advertising, shopping centres, sporting clubs and recreational organisations to reduce the exposure to and protect children in all Greater Sydney regions.

In NSW only 6% of people aged two years and over are meeting the recommended serves of vegetables and just over half meet the requirements for fruit.<sup>53</sup> Discretionary foods made up one-third of an adults diet and an alarming 38% of a child's intake.<sup>53</sup> The current environment is saturated with energy-dense, nutrient-poor food choices that are often cheaper than healthier options. This obesogenic environment influences consumption patterns.<sup>54</sup>

The latest report from the Physical Activity Nutrition Obesity Research Group (PANORG) found clear evidence that changing availability of foods in areas such as vending machines and canteens does change purchase and consumption patterns and influences body weight.<sup>52</sup> There is an opportunity for the Greater Sydney Commission to improve the food environment to maximise the opportunities for the community to access healthy food and drink therefore create great healthy places for a productive, liveable and sustainable Sydney.

**Recommendation 10:**

Vending machines and food outlets (such as in recreational facilities) under council control limit the amount of energy-dense and nutrient poor foods and drinks and provide affordable healthier options to improve food security and create great healthy places.

A planning system that promotes physical activity

Sedentary behaviour and physical inactivity increases an individual's risk of heart disease, type 2 diabetes and different types of cancer including endometrial, bowel, lung, breast and ovarian cancers.<sup>55-58</sup> Sedentary behaviour is also linked to premature death.<sup>59</sup> Only 42% of adults in NSW are meeting the physical activity guidelines.<sup>39</sup> Furthermore, Australian adults sit for nearly nine hours per day.<sup>60</sup>

Encouraging the community to lead active lifestyles to prevent cancer is a priority for Cancer Council NSW. The built environment where we live, work and play has a major impact on the communities' ability to be physically active.<sup>61</sup> One of the four Strategic Directions of the NSW HEAL Strategy is for 'environments to support healthy eating and active living' including opportunities for active transport and other physical activity to help achieve the goal of a healthy community that stays out of hospital.<sup>40</sup> Therefore, improving health should be a central principle in urban planning.

Cancer Council NSW commends Greater Sydney Commission for the aim of making Sydney a 'great place to live with communities that are strong, healthy and well connected'. A priority

**Recommendation 11:**

Each District Plan prioritise policies on public health and the built environment to facilitate and encourage active living.

centred on public health would ensure planning considers creating an environment supportive of active living through measures specified in the Healthy Urban Development Checklist developed by the NSW Department of Health.<sup>62</sup> Prioritising public health within the built environment will help support and encourage the community to be more active will provide many benefits including reduced risk of chronic disease and mental health issues.<sup>62</sup>

## Supporting smoke-free environments and minimising harm from Tobacco

### Smoke-free environments

Secondhand tobacco smoke can cause cancer and a range of other respiratory and cardiovascular conditions and it is not safe for a person to be exposed at any level.<sup>63</sup> Allowing more people to live smoke-free by reducing the community's exposure to secondhand smoke is a priority for Cancer Council NSW. Urban planning that promotes smoke-free environments and supports people to live healthy, cancer free lives in local communities is essential to reduce the risks of secondhand exposure.

Laws restricting smoking in indoor and outdoor public areas have been widely adopted and accepted due to the known, serious health risks of secondhand smoke exposure.<sup>63;64</sup> The Smoke-free Environment Act 2000 does not create or preserve the right of a person to smoke in a public place, rather it protects people from exposure to secondhand smoke.<sup>64</sup> Therefore, the Greater Sydney Commission should feel confident in applying restrictions on where people can smoke in indoor and outdoor areas that service the local community.

Smoking is restricted in NSW prisons under state law; NSW Health facilities under the NSW Health Smoke-free Health Care Policy and local by-laws of the Local Health District; and in central business districts, beaches, parks and public events under local council policies. Thus, it has already been established that local councils can increase the amount of smoke-free environments. The Greater Sydney Commission should consider implementing a criteria that states only non-smoking areas can be approved in future planning applications.

**Recommendation 12:**

Indoor and outdoor areas that service the local community are 100% smoke-free areas.

**Recommendation 13:**

Any planning and development applications specify whether they will be smoking or non-smoking areas. Applying the criteria of supporting a healthy lifestyle under 'liveability' should prevent the development of smoking areas within the community.

### Smoke-free housing

The liveability of housing is a core part of planning for the Greater Sydney Commission. Councils have the ability to address the smoke-drift that occurs between houses and apartments. Most NSW residents (93%) do not permit smoking within their homes, yet residents of multi-unit housing remain exposed to secondhand smoke, even in common areas.<sup>39</sup> Residents of multi-unit housing are particularly susceptible because smoke can easily move between smoking and non-smoking areas of a building.

Cancer Council's NSW Community Survey on Cancer Prevention (2016) found one in five people reported secondhand exposure to smoke inside their homes with 62% experiencing it weekly. People living in multi-unit housing were twice as likely to be exposed as those living in houses (34% vs 17%).<sup>65</sup> Cancer Council NSW is frequently contacted by owners and residents seeking advice on what can be done to stop secondhand smoke from entering their home.

Strata schemes in NSW have the authority to restrict smoking in multi-unit housing complexes under the NSW Strata Schemes Management Act by passing local by-laws. Strata schemes in NSW are already adopting smoke-free by-laws including by-laws that ban smoking completely. Internationally, the US leads the way in implementing complete bans on smoking in multi-unit housing. In November 2015 the US Department of Housing and Urban Development announced a rule making public housing smoke-free.<sup>66</sup> The National Preventative Health Taskforce recommended action to "protect residents from exposure to smoke drift in multi-unit developments".<sup>31</sup> Cancer Council Australia also recommends prohibition of smoking in specific common areas and entrances to multi-unit housing.<sup>67</sup> Therefore, the commission should consider making new apartments "100 % smoke-free" as part of the approval process for new developments.<sup>66</sup> Housing providers may be reluctant to go smoke-free, but there are numerous financial benefits of smoke-free homes. These include cheaper cleaning costs, better re-sale value and a reduced risk of fire.<sup>68-71</sup> There should also be consideration for how local governments within Greater Sydney can address smoke-drift between privately owned detached homes.

**Recommendation 14:**

All new apartment complexes and houses are designated smoke-free in any future development planning process.

Tobacco outlet density

Despite the known impact of tobacco use, NSW still has almost 10,000 retail outlets selling cigarettes.<sup>72</sup> Cancer Council NSW is working with the NSW Government to introduce retailer licensing to restrict the amount of retailers selling tobacco. High-density and widespread distribution of tobacco retailers contribute to smoking and there are more retailers in disadvantaged communities.<sup>73-76</sup> Retailers near schools contribute to increased smoking behaviours, particularly experimentation and initiation, and cigarette purchases among adolescents.<sup>77-80</sup> Urban planning could explore a role in restricting the amount of tobacco retail licenses that are issued close to schools and in disadvantaged communities.

**Recommendation 15:**

Tobacco outlet density is considered in the planning for the 'three Cities' of Sydney to limit the number of outlets, particularly in areas where there are already high concentrations of tobacco outlets.

**Recommendation 16:**

Restrictions are enforced on the opening of new tobacco outlets in areas close to schools, childcare and other children's services.

## Supporting skin cancer prevention

Two in three people who grow up in Australia will be diagnosed with some form of skin cancer before the age of 70.<sup>81</sup> The International Agency on Research for Cancer has classified UV radiation as carcinogenic to humans.<sup>82</sup> Almost all skin cancer (approximately 99% of NMSC and 95% of melanoma) are caused by over exposure to ultraviolet (UV) radiation from the sun.<sup>83;84</sup> and skin cancer is highly preventable by reducing exposure of unprotected skin to UV radiation.

Decades of skin cancer prevention campaigns have resulted in Australians having high levels of knowledge about skin cancer and sun protection<sup>85</sup> and there is evidence of a decline in the incidence of melanoma and a stabilisation and slight decline of non-melanoma skin cancer among people aged under the age of 45 years.<sup>86;87</sup> However, too many Australians still practice sun protection inconsistently; some 360,000 adolescents and two million adults report being sunburnt on any given summer weekend and certain sections of the community continue to be at higher risk.<sup>88-90</sup>

Skin cancer is also a significant burden of disease on the NSW health system. A recent economic evaluation conducted by Cancer Institute NSW concluded that the direct costs (diagnosis, treatment and follow-up) and indirect costs (morbidity and premature mortality) associated with melanoma and other skin cancers in NSW totals some \$536 million every year.<sup>91</sup>

There are opportunities for the Greater Sydney Commission to develop and implement policies as well as influencing structural changes to support the reduction of community exposure to UV radiation.

### Sun protection policies for outdoor workers

The workplace can be a major source of exposure to UV radiation for many people in NSW. Outdoor workers receive between five and ten times more sun exposure than indoor workers<sup>92</sup> and that around 200 melanoma and 34,000 non-melanoma skin cancers per year are caused by occupational exposures in Australia.<sup>93</sup> Furthermore, the 2011 report on *Workers' compensation claims paid in Australia 2000-2009, Occupational exposure to ultraviolet (UV) radiation*, showed Safe Work Australia data indicating that a total of 1,360 workers' compensation claims for sun related injury/ disease were made between 2000 and 2009, at a total cost of \$38.4 million.<sup>94</sup> This did not include costs associated with absenteeism for treatment, reduced productivity, morale and financial returns.<sup>94</sup>

The Australian Work Exposures Study found that while 95% of Australian outdoor workers reported using at least one form of sun protection, only 8.7% were fully protected.<sup>95</sup> Research has found that employees are more likely to use sun protection if their workplace has a mandatory sun protection policy in place<sup>96</sup> and if there is a perception of support for sun protection practices within workplace culture and from management.<sup>97;98</sup>

#### **Recommendation 17:**

Local government ensure up to date comprehensive sun protection for all employees who work outdoors all or part of the day.

## Shade provision

Shade is a highly effective way for individuals and communities to minimise their exposure to UV radiation. Good quality shade can reduce UV exposure by up to 75%<sup>99</sup> and can be used to create healthier, more pleasant environments. Shade is also the only sun protection measure of the recommended five behaviours (wearing protective hats, clothing and sunglasses, applying sunscreen and staying in the shade) that promotes environmental change, as opposed to solely individual behaviour change, in relation to skin cancer prevention.

Research has shown that in NSW, shade in outdoor recreational and other public spaces such as children's playgrounds, sporting grounds, schools, parks, beach areas and public amenities such as bus stops and streetscapes is frequently unavailable or inadequate.<sup>100;101</sup> There is a socio-economic differential with public space in disadvantaged areas being less likely to have shade than those in higher socio-economic areas.<sup>100</sup>

In NSW, Local Government is the major contributor to the creation of shade for local communities. Councils have responsibility for a range of health promoting activities intended to benefit their communities including responsibility for land-use and planning, maintaining sporting and recreational facilities and maintaining open space including parks and beaches. Facilitating sun protection through shade provision is a part of these responsibilities.

Councils also have the power through components of the Local Government Act 1993 - Section 94 to determine applications relating to buildings, temporary structures and community land use by granting approval, either unconditionally or subject to conditions (such as the need for shade), or by refusing approval altogether.

### **Recommendation 18:**

The relevant sections of the Local Government Act 1993 be used to improve sun protection practices by increasing provision of quality natural and built shade in public spaces through better planning and design.

### **Recommendation 19:**

Councils ensure shade audits are included in management plans to determine quality and usability of existing shade structures (awnings, shade sails and permanent built shade structures) and natural shade (trees and other vegetation) as well as identifying sites requiring shade.

## **Cancer support and transport**

### Hospital parking

Parking is a problem for many people attending hospital. However, it poses an extra challenge for cancer patients because they typically need to attend appointments up to five days per week for six or eight weeks at a time.<sup>102</sup> The cost accumulates over the course of treatment, and the side effects of chemotherapy and radiotherapy may leave patients feeling tired and nauseous, making long walks to car parking burdensome.<sup>102</sup>

Cancer Council NSW commends the Greater Sydney Commission for the aim of making the Sydney Metropolitan Area highly liveable and striving for quality of life for all. Access to free parking for the duration of cancer treatment for patients and their carers would greatly improve the cancer experience for a large percentage of patients.

**Recommendation 20:**

Health infrastructure planners and managers undertake comprehensive consumer consultation and planning for accessible, affordable parking for cancer patients at new and redeveloped facilities.

**Recommendation 21:**

Health infrastructure planners and managers ensure that future contract negotiations with private car park operators provide for accessible, affordable parking for cancer patients, taking into account the frequency of use by cancer patients.

## Conclusion

It is imperative that a comprehensive and multifaceted approach is taken to reduce the impact of cancer and other chronic diseases on the lives of the Greater Sydney population. The development and implementation of *Towards our Greater Sydney 2056* and the draft *District Plans* provides a unique opportunity to ensure that the health of Greater Sydney residents, both current and future, are considered in all planning decisions. It is vital that public health and the Social Determinants of Health are considered in all decisions made regarding the future Greater Sydney area. Implementing the recommendations presented in this submission will not only assist in preventing many future cases of cancer, but also improve public health and quality of life for people experiencing cancer in the future. In addition to the specific recommendations in our submission, it is also imperative that the *District Plans* include clear and measurable objectives with meaningful targets.

Cancer Council NSW appreciates the opportunity to contribute to the Greater Sydney Commission submission process. We would be happy to provide further information on the issues raised in this submission. Please contact Wendy Watson, Nutrition Program Manager on (02) 9334 1467 or at [wendyw@nswcc.org.au](mailto:wendyw@nswcc.org.au) if you would like further information.

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