

3 March 2017

The Honourable Jackie Trad MP  
Deputy Premier, Minister for Transport and Minister for Infrastructure and  
Planning  
c/- Draft South East Queensland Regional Plan Review Feedback  
Department of Infrastructure, Local Government and Planning  
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Dear Deputy Premier,

### **Response to Shaping SEQ - Draft South East Queensland Regional Plan**

The Heart Foundation welcomes the opportunity to provide comment to Shaping SEQ - Draft South East Queensland Regional Plan (SEQRP) open for public consultation. We also provided a recent submission to the to the Draft State Planning Policy consultation.

The Heart Foundation is the research and advocacy leader on improving the cardiovascular health of all Australians. We advocate on behalf of more than 90% of Queenslanders who have at least one risk factor for cardiovascular disease, as well as 93,000 donors who support our charity.

We have been represented by Sheree Hughes, our Healthy Living Manager on the SEQRP Environment and Community Reference Group during the development of the Draft SEQRP. We appreciate the extent of the consultation and are grateful for the opportunity to provide regular input via this forum, along with the 12 local governments, state agencies, community members and businesses.

The Heart Foundation **recommends and commends** collaboration across Government agencies. This will ensure planning and approval mechanisms which support strong, active, healthy, complete communities are maintained and enhanced, not diminished in the pursuit of efficiencies to streamline processes, reduce regulatory 'red tape' or suit political agendas.

Two of the health risk factors that are significantly impacted by the urban environment are insufficient physical activity and poor nutrition. In this submission, we will highlight the important role that the urban environment plays as a major determinant in encouraging and enabling physical activity and access to healthy food.

It is critical for the SEQRP to take these into serious consideration, given the need for urgent action on the obesity epidemic in our State. More than 64% of our adult population is either overweight or obese<sup>1</sup>. A whole-of-government response is needed, and planning policies can support the quality of life, health and wellbeing of our people.

Our primary interest is to ensure public health and wellbeing impacts are incorporated more comprehensively into the planning process at the highest levels. While this link is present in the SEQRP, and there is information in the background papers supporting the SEQRP, this material is not statutory and without more mandatory requirements the interests of the State will not advance the health, social, economic and environmental needs of all South East Queenslanders.

A stronger link between planning, infrastructure, transport and health and wellbeing should be articulated more comprehensively across all five themes within the SEQRP;

- Grow and Live – liveable complete communities,
- Prosper – economic benefit of complete communities,
- Connect – integrated transport that prioritises active transport, and
- Sustain – food supply.

The Heart Foundation's **four key inclusions for the SEQRP** and all planning documents are:

1. **Health and wellbeing outcomes** – embedded as key considerations, across all interests.
2. **Complete communities** - include planning and approval mechanisms that support the creation and maintenance of strong, active, healthy, complete communities, with a solid focus on urban development that is higher density and mixed use in walkable and connected communities.
3. **Active travel** - make active travel (walking, cycling and public transport) an easy, safe, affordable and efficient choice through better, integrated transport infrastructure planning.
4. **Food security** - in vulnerable populations, food supply to remote Indigenous communities, and land use planning which protects good quality agricultural land for all.

## 1. Health and wellbeing outcomes

After reviewing the SEQRP, it is encouraging to see the link between liveability, quality of life and the built and natural environment, however there is not a robust link to the resulting health and wellbeing outcomes and economic benefit.

Since a person's health behaviour is influenced by the physical and social environments in which they live, work, study, play and pray, it is **strongly recommended** that health and wellbeing are embedded as key considerations in planning from the legislative level down to ensure health and wellbeing are enhanced and not diminished. Health and wellbeing of the population isn't just a 'nice to have', it is a major purpose of our communities and will drive economic growth.

Planning reform can contribute positively to tackling long-term challenges like the ageing population to help keep people well, socially connected, living independently and out of hospital. This is a key role state planning can play to enhance health and wellbeing and halt the rise in chronic disease due to lifestyle risk factors.

Current State Government strategies can provide direction to the SEQRP, if we have linked-up practices across government. For example, [The Queensland: an age-friendly community – Strategic direction statement](#)<sup>2</sup> cites an age-friendly community as one that enables people of all ages to actively participate in community life. It highlights actions to be taken across government, including housing, transport, employment, health services, outdoor spaces and buildings, and communication and inclusion.

Other State Government policy directions and strategies also need to be given due consideration in a whole-of-government approach. These include policies as diverse as:

- [Making Tracks – toward closing the gap in health outcomes for Indigenous Queenslanders](#)<sup>3</sup>,
- [Queensland Mental Health Commission's Action Plan, Early action: Queensland Mental Health Promotion, Prevention and Early Intervention](#)<sup>4</sup>, and the
- [Queensland Cycle Strategy](#)<sup>5</sup> and the soon to be finalised *Housing Strategy*.

Planning and transport policies tend to overlook health and wellbeing as outcomes and yet these decisions significantly impact both the physical and psychosocial health and wellbeing of our communities over the short, medium and longer term, both positively and negatively.

For example, the impact of less active travel is generally not considered as a health issue by planners<sup>6</sup> and yet the impact of car dependency on our society is clear with sedentary lifestyles and the consequent obesity epidemic, in addition to congestion and carbon emissions. Car dependent and sedentary behaviours are significant contributing factors to the prevalence of preventable chronic disease, including cardiovascular disease, diabetes, cancer and mental illness. The built environments in which we live, work, study, play and pray need to be conducive to healthy active living.

The importance of increasing levels of physical activity and improving nutrition in populations is echoed by the World Health Organisation, the World Medical Association, the Royal Australian College of General Practitioners and the health department in every state and territory in the country.

Health and wellbeing must be integral considerations in planning to counter the mega trends of increasing levels of psychosocial issues, unhealthy food choices, physical inactivity and obesity in our population and the resultant increased disability, hospitalisations, costs to our economy and community through direct health care costs and loss of productivity and premature death. The number of overweight or obese adults has increased by about 55,000 each year on average in Queensland since 1993<sup>1</sup>, in part due to poor land use and transport planning of the past.

The Heart Foundation **recommends** a stronger focus on urban development that delivers higher density and mixed use in walkable and connected communities<sup>7</sup>. There is a trend towards creating compact, denser communities with convenient access to the required functional attributes because they improve quality of life and address congestion, climate change and economic progress.

There is a need for the built environment to include increased medium density housing options and mixed use developments that are walkable environments<sup>7</sup>. Higher density living environments support people to be physically active and encourages social inclusion. The Heart Foundation's [Low density development: Impacts on physical activity and associated health outcomes](#) report<sup>8</sup> recommends at least 20 dwellings per hectare to encourage walking, and between 34-43 dwellings per hectare to support local services and public transport and reduce residents' reliance on cars.

There is some resistance and lack of understanding in the broader community about the benefits of higher density to our health and wellbeing. We encourage governments to raise awareness in their communications around these issues to support the cultural changes that are occurring.

For example, in the Premier's recent media release (3 February 2017) regarding the new Springfield development there was an opportunity to talk about the liveability or completeness of such a development to increase awareness about the positive effects of density done well, with the functional attributes the community needs, as well as about the jobs created and the number of dwellings to be built.

Healthy planning improves the heart health and psychosocial health of our community and reduces the risk of developing chronic diseases. Well-planned neighbourhoods can provide access to a healthy food supply and increase the number of people who walk or cycle to local destinations such as shops, educational institutions, parks, services, facilities and public transport. This supports healthier lifestyles for residents, more socially connected and strong, vibrant local neighbourhoods, thriving local businesses and associated economic and environmental benefits<sup>9,10</sup>.

## 2. Complete communities

Complete communities are places where all residents have access to the basic functional attributes of the community within easy walking distance of each another. The Heart Foundation wants to see the establishment of appropriate planning triggers and considerations for planning reform to be aligned with the best available evidence.

The key inclusions we support to create complete communities are:

- **Local access** - to increase residential density, intensity of land-use and active transport networks to support local businesses, employment, education, cultural and recreational opportunities, and frequent, accessible, affordable public transport.
- **Co-location** - to encourage groupings of key destination points within close proximity of each other to improve accessibility, integrated facilities and multiple uses of space and travel networks.

- **Traffic management** - to manage vehicle traffic to provide safe environments for people who are walking, cycling or catching public transport such as reduced speed limits.
- **Welcoming paths** - to provide an accessible, attractive and welcoming street environment, with well maintained footpaths for all users.
- **Connected streets and linked communities** - to create connected street networks that allow people on foot and bikes to take more direct routes to and from destinations.
- **Healthy active school design** - to design and locate schools to facilitate young people's active transport to school, and physical activity while at school.
- **Functional public open and green space** - to design multipurpose public open spaces that are functional and accessible and cater for the needs of children, adolescents, adults and seniors of all abilities.
- **Community safety** - to create communities where people feel safe in their homes, in the local streets and neighbourhood public spaces.
- **Food access** - to ensure that urban design and the built environment does not inhibit, but encourages, healthy eating.
- **Building and design location** - buildings and facilities should provide opportunities for physical activity through ensuring that the design, layout and location enhances amenity and provides an accessible environment for all.

The *Better Planning for Queensland Direction Paper* highlighted that integrated land use planning approaches will maximise the benefits of investing in infrastructure and services and that the timely support for local governments is vital when they are preparing their planning schemes.

The [Active, healthy communities](#)<sup>9</sup> web resource was similarly developed specifically for local governments to create healthy complete communities by accessing information about supportive environments for physical activity and healthy eating and enable them to prepare their planning schemes with consideration of these objectives.

The ACT Heart Foundation has been a key driver for the inclusion of active living principles into their Territory Plan. The inclusion of these principles in a planning framework is world first. The link between the built environment and health is undeniable and nowhere else has a government, through its planning policies, sought to improve the health and wellbeing of the community.

By incorporating the principles of equity, connectivity, active travel, safety, mixed use and density throughout the Territory Plan the intention is to ensure over time that walking, cycling and public transport are more broadly adopted by the community. What the ACT Government is proposing will see real change, it will build a better, healthier and more prosperous city, and lead to more Canberrans being more physically active more often<sup>11</sup>.

Planning for healthier outcomes can be applied to all parts of Queensland. The principles of healthy planning are just as applicable in metropolitan areas as they are in regional cities, towns, villages and remote communities. To maximise infrastructure integration and economic efficiencies in some regions of Queensland, it may make sense for local governments to coordinate and combine their strategies and resources for a regional approach to realising their planning strategies.

For example, the [Australian Heart Maps](#)<sup>12</sup> is an online, interactive resource tool that provides a picture of hospital admission rates for heart-related conditions by local government area. It can help prioritise regional coordination as it shows the many areas of Queensland that have particularly high heart risk factor profiles and high heart related hospitalisations.

### 3. Active travel (walking, cycling and public transport)

The Heart Foundation strongly supports the evidence that increasing participation in active travel not only improves population health (especially physical activity), it also has the potential to demonstrate cross sector benefits through impacts on relieving traffic congestion, reducing pollution and carbon emissions, improving road and pedestrian safety and upgrading urban attributes.

Physical inactivity is a major health problem, independent of healthy weight, overweight or obesity. Disturbingly, about half of Australian adults (54%) are not sufficiently physically active to gain health benefits. Physical inactivity:

- costs the health budget an estimated \$1.5bn a year<sup>1</sup>
- causes more than 16,000 premature deaths a year<sup>13</sup>
- increases the risk of heart disease, stroke, diabetes, colon and breast cancer
- is a critical factor in Queensland's obesity epidemic, with more than half of all Queensland adults being overweight or obese.

Active travel builds physical activity into everyday lives. It can be stimulated by:

- creating and retrofitting urban areas through planning and designing healthy, active, complete communities;
- investing in active travel infrastructure including connected street networks;
- connecting local destinations and public transport facilities;
- adequate shade provision;
- wide accessible footpaths with seating, lighting and water bubblers;
- cycleways and lanes; and
- through better integration of these strategies.

Public transport is important to active lifestyles. People who use public transport spend significantly more time walking than those who drive cars to work. A Melbourne study found those who used public transport on average spent 41 minutes walking and/or cycling as part of their journey compared with an average of just 8 minutes for those who used private transport<sup>14</sup>.

An extensive international review of evaluations of walking environments in 2011 by the University of the West of England showed positive cost benefit ratios of up to 37.6<sup>15</sup>. In comparison with other transport projects, investments in walking were found to be excellent value for money. The highest value for money transport projects were smarter choices, cycle and pedestrian schemes, local safety schemes and some bus schemes. This suggests that investment in the walking environment is likely to be at least, if not better, value for money than other transport projects.

The Heart Foundation **strongly recommends** the Queensland Government develop a coordinated state-wide strategy to achieve a more balanced transport system that provides Queenslanders with a greater choice of accessible, affordable travel modes and builds physical activity and social connectedness into our everyday lives. Planning reform should require all transport infrastructure projects to incorporate or enhance active travel using the [AusRoads road design guide](#)<sup>16</sup>.

It was disappointing to not see Active Travel mapping clearly articulated in the SEQRP documentation. We **recommend** that this can be repaired by including robust linkages to the local government Principal Cycle Network Plans and other related State action plans, like the soon to be released Cycle Strategy Action Plan or a future *Queensland Walking Strategy* to address the lack of support for walking, a mode of transport and physical activity that all Queenslanders perform.

Not only are modern cities around the world embracing changes to favour active transport, but these changes also result in economically competitive and more liveable environments, as well as healthier cities.

An ecologically sustainable development (ESD) requires the effective integration of economic, environmental, social and equity considerations in decision-making processes. An ESD aims to provide for the needs of present generations without compromising the ability of future generations to meet their own needs.

With a looming crisis in chronic disease being compounded by a massive demographic shift to an ageing population, achieving healthy, complete communities that are inclusive and encourage healthy ageing must be a primary concern for any government document and legislation that is serious about laying a sensible framework for the future generations of the region.

Our annual budget submission - [Five actions to beat heart disease: Heart Foundation Queensland State Budget Submission 2017-18](#)<sup>17</sup> is available for your consideration. Of interest for the Department are our calls for legislative and policy reforms around planning and transport (Action 4) and initiatives to increase physical activity through active travel infrastructure and programs (Action 5).

#### 4. Food Supply

Easy access to environmentally sustainable, nutritious and healthy food choices in the areas where people live, work, study, play and pray is important in improving health outcomes. Overweight and obesity, hypertension, high blood cholesterol and insufficient intake of fruits and vegetables are food related risk factors for heart disease.

Many Queenslanders are not consuming the recommended amounts of fruit and vegetables necessary for good health – only about half eat sufficient fruit and one-tenth eat sufficient vegetables. In contrast, they are spending about half of their household budget on foods that provide little or no nutritional value<sup>1</sup>.

The Heart Foundation **strongly recommends** that alongside a strong economy, priority be given to addressing health, food security in vulnerable populations, food supply to Indigenous communities and land use planning which protects good quality agricultural land. Providing safe and healthy food for our population should be a priority and, considering the health and financial impact of unhealthy food consumption, must be prioritised in economic considerations.

The Heart Foundation also **recommends** addressing factors impacting on the production and cost of basic healthy foods, the availability of food and securing the production of healthy food for Queenslanders in the region, now and into the future.

As highlighted at the 2015 Planning Summit by Dr Stefan Hajkowicz (CSIRO), increasing per capita income across the world will equate to more demand for food, but this will also drive up food economy prices which will impact most on people with lower incomes and their ability to afford healthy food. We know these people already have poorer health from the [Australian Heart Maps](#)<sup>12</sup>.

We must provide for the needs of present generations without compromising the ability of future generations to meet their needs. Globally we need food production to increase by 70% with greater food diversification for nuts, fruit and vegetables and seafood for the Asian market and this provides further opportunities for the Queensland economy<sup>18</sup>.

We encourage you to review and consider the recommendations in the Heart Foundation resource [Food-sensitive planning and urban design](#)<sup>19</sup> which was developed to support a sustainable and healthy food system. Access to healthy, sustainable and equitable food can be facilitated by planning that integrates food considerations into urban land use and development.

The design and layout of our cities and towns can have a major effect on which foods people can readily access and consume. We currently have too many obesogenic communities where access to healthy foods is more difficult due to a limited range of healthy and affordable food options from food wholesalers, food retailers and foodservice outlets.

We need to consider access to healthy food in our planning so people can easily access and afford to buy healthy food. Too many urban areas are planned in a way where the easy, affordable access to food is to foods high in unhealthy fats, salt and sugar, contributing significantly to overweight and obesity rates leading to heart disease, diabetes and other chronic diseases. This is exacerbated where people at highest risk of chronic disease, living in socio-economically disadvantaged communities are exposed to a higher number and proportion of fast food outlets and convenience stores selling unhealthy foods<sup>9</sup>.

We **recommend** these planning solutions to address these population health issues include:

- reducing density and exposure of food outlets selling unhealthy foods;
- ensuring the presence of supermarkets and grocery stores in neighbourhoods as they are associated with higher fruit and vegetable consumption;
- encouraging availability of farmers' markets and community gardens supports the consumption of fruit and vegetables;
- providing public baby-care rooms and breastfeeding facilities; and
- ensuring water fountains in public spaces<sup>9</sup>.

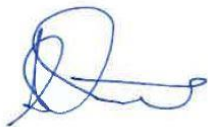
A healthy and strong community needs to optimise access to healthy food, making the healthier choices the easier choices, and reduce disproportionate exposure to unhealthy food choices.

Planning for the regionalisation of food production in Queensland must be accompanied by consideration of the wholesale, retail and food service aspects of the food supply to improve access to healthy foods for people living in regional, rural and remote areas<sup>9</sup>.

The Heart Foundation commends the department on this draft SEQRP and on renewing the Queensland planning system that benefits and supports the health, well-being and economic prosperity of Queenslanders – at the same time as streamlining processes and providing a long-term vision that is beyond the current market and election cycle. The principles for creating active, healthy complete communities will deliver sustained economic, health and social benefits for governments, business and communities and create great places for Queenslanders to live, work, study, play and pray.

If Queenslanders are to become among the healthiest people in the world by 2026<sup>20</sup>, we urge the Queensland Government to ensure that planning mechanisms and processes which support active living and improve the health of Queenslanders continue to be well integrated into the Planning System, at all levels and across all planning documents.

Yours sincerely



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