# Australia Is Building 20 Minute Neighbourhoods And People Are Loving It.

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e were heavily involved in the consultation program for Melbourne's long-term land-use plan, Plan Melbourne. The idea that resonated most with many participants was shaping the city as a series of 20-minute neighbourhoods.

People generally loved the thought that most (not all) of the things needed for a good life could be within a 20-minute public transport trip, bike ride or walk from home. These are things such as shopping, business services, education, community facilities, recreational and sporting resources, and some jobs (but probably not brain surgery).

Creating a city of 20-minute neighbourhoods is a key policy direction of Plan Melbourne 2017-2050. As the plan states:

The 20-minute neighbourhood is all about 'living locally' – giving people the ability to meet most of their everyday needs within a 20-minute walk, cycle or local public transport trip of their home.

This planning idea has gained Melbourne recognition in international planning circles. For example, Singapore's recent Land Transport Master Plan 2040 is based on shaping the city and its transport systems to achieve 20-minute towns within a 45-minute city. Officials who prepared the report have acknowledged to one of us Melbourne's leadership with the concept.

The concept is not about travel by car. It is about active transport (walking, cycling) and the use of public transport. The goal is that this combination of modes would offer a reasonably sized catchment area in which people, jobs and services, including recreational opportunities and nature, are accessible.

Inner parts of Australia's capital cities and parts of their middle suburbs already meet a 20-minute neighbourhood test. Very few of the outer suburbs would do so. However, new developments such as the City of Springfield in outer Brisbane are encouraging.

### Key ingredients of 20-minute neighbourhoods

If outer suburbs, in particular, are to become 20-minute neighbourhoods, then two key requirements must be met.

First, local development densities need to be increased. This means ensuring minimum density levels of around 25-30 dwellings per hectare, which will better support local activity and services provision.

Consultations with council planners suggest new developments in Melbourne's outer north, for example, are typically running at about 18 dwellings. The density of developments was about 12 just a decade ago.

Accompanying more dense residential development is the need to integrate a mix of uses within these neighbourhoods. This would bring more jobs and services close to where people live. They would also have a range of housing to support a mix of household types, income levels and age groups.

So we need not just density but also a mix of land uses within a neighbourhood. This is often known as density plus diversity.

Second, local public transport service levels need to be greatly improved. To achieve 20-minute neighbourhoods requires local weekday public transport



services running every 20 minutes or better, from around 5am until 11pm (start of last run). That's a minimum of 55 services per stop per day per direction.

The map below shows very few parts of outer Melbourne have services anywhere near this level.

## What would it cost to achieve?

Gross funding increases of about 50% for local public transport services (essentially buses) would be needed to meet this basic service standard for 20-minute neighbourhoods across Melbourne. Based on scaling up the cost of current bus services in Melbourne, we estimate the cost would be about A\$250 million a year, or A\$4 billion over the long term, in present values.

This is a modest amount compared to current capital commitments for rail. These total A\$30-40 billion, depending on what share of the cost of level-crossing removals is attributed to rail. Development of the government's proposed Suburban Rail Loop around the city will add an estimated A\$50 billion. Annual payments for metropolitan train services add A\$1.1 billion.

Trains now carry only twice as many passengers as buses do. So the suggestion that an extra A\$4 billion or so be spent on bus services, in capitalised terms, is very modest compared to the commitments being made to rail. The amount includes an allowance for infrastructure works to improve operating speeds – such as bus lanes and B-lights, which give buses priority through intersections.

The tram network could make an equally strong argument for extra funding, relative to trains, given the relative passenger loads carried and small new capital program in place for trams (hundreds of millions rather than tens of billions).

Melbourne has recently had a massive jump in spending on capital projects, particularly transport projects. This investment is needed to tackle the backlog from years of neglect and cope with one of the fastest population growth rates of any similarsized city in the developed world.

The 2019-20 state budget, for example, suggests capital spending will average A\$13.9 billion a year over the four years to 2022-23. It was less than A\$5 billion a year from 2005-06 to 2014-15.

## It's about more than walkability

In stark contrast, implementation of 20-minute neighbourhoods has been limited to three pilot studies, in Strathmore, South Croydon and Sunshine West. These studies appear to be focused heavily on developing walkable neighbourhoods, rather than on improving access by walking, cycling and public transport, which was the original intent of the idea.

Walkable neighbourhoods are an important part of 20-minute neighbourhoods, but only one part. Increased neighbourhood densities and more mixed-use development across local active transport and public transport catchments, together with better walking, cycling and local public transport opportunities, need far greater attention if 20-minute neighbourhoods are to be created in outer and middle suburbs.

We expect a much stronger focus at the neighbourhood level will deliver very high social, environmental and economic returns from small outlays. But, for this to be achieved, much greater urgency is needed.

## What Is Hypnobirthing, The Technique The Duchess Of Cambridge Used?

## MARY STEEN

n a new parenting podcast, Catherine, the Duchess of Cambridge, said she used hypnobirthing techniques to help her get through severe morning sickness – a condition called hyperemesis gravidarum.

She also used the techniques during labour.

She told the Happy Mum, Happy Baby podcast: I saw the power of it, the meditation and the deep breathing and things like that, that they teach you in hypnobirthing, when I was really sick, and actually I realised that this was something I could take control of during labour.

It was hugely powerful.

So what is hypnobirthing and what does the evidence say about its use?

## Calmness and relaxation

Hypnobirthing aims to reduce fear, pain and anxiety during childbirth. It involves learning calm breathing techniques, some deep relaxation, guided mediation, visualisation, positive suggestions and affirmations.

These affirmations might include phrases such as, "I have the ability to give birth to my baby," or "I trust in my body and my baby to help me."

Hypnobirthing teaches women to induce a "selfhypnotic" state of mind where a woman focuses her attention inwards, concentrates deeply and this helps her to decrease peripheral awareness. But she can still respond to suggestions and affirmations.

When a woman is afraid she will physically become tense, rigid and produce the stress hormones adrenaline and cortisol. Her perception of pain will increase and this can affect labour.

Hypnobirthing aims to counteract the effects of fear and help women secrete the hormones oxytocin and endorphins which enable her to remain calm and relaxed, so labour can progress.

Some women who have used hypnobirthing techniques say they feel like they are day dreaming, in a trance and drifting into a calm, deeply relaxed state but are not actually sleeping.



Hypnobirthing techniques are founded on British obstetrician Grantly Dick-Read's observations. In his 1942 book, Childbirth without Fear, he proposed women in a calm state of mind, and who had faith in their ability to give birth, did so with less pain.

These days, women and their partners or support people can learn self-hypnotic techniques for hypnobirthing by attending one-to-one sessions, group classes or online courses.

Usually, women attend sessions from about 25-30 weeks of pregnancy but self-hypnosis and guided mediation techniques are sometimes taught earlier in pregnancy.

There is also emerging evidence it could be used postnatally if women have had a traumatic birth or are experiencing increased levels of anxiety, stress or depression after birth.

Fear and anxiety in childbirth

Historically, women have been supported and comforted by other women during labour and birth, including in traditional Aboriginal birthing practices. Women would support other women by performing special songs, chants and rituals to ease the birthing process and make the woman feel safe and calm.

But while great advances in care have resulted in better outcomes for mothers and babies in childbirth, many women today are extremely anxious and afraid of this process.

So it's important find ways to reduce anxiety and fear associated with childbirth.

didn't for most of the other measures. These included their satisfaction with pain relief, their sense of coping with labour and their likelihood of having a spontaneous vaginal birth.

Importantly, the review found hypnobirthing didn't cause any harm.

Overall, little research has been conducted on hypnobirthing. We need more well-designed studies to accurately assess the effectiveness of these techniques.

It might help some women and not others

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Other strategies women can also use alongside hypnobirthing include having a continuous support person for labour and undergoing combined complementary therapies, such as yoga, acupressure and learning breathing techniques, in preparation for birth.

## What does the evidence say about hypnobirthing?

A 2016 Cochrane review examined the effectiveness and safety of hypnosis for pain management in labour and birth. The review examined nine studies of varying quality which included just under 3,000 women.

It found women who used hypnobirthing techniques used less of some kinds of pain relief such as opioid pain medication or inhaling nitrous oxide and oxygen, than women who didn't. However epidural rates were similar in both groups.

There were no clear differences between women who used hypnobirthing techniques and those who Some women who participated in a clinical trial of self-hypnosis were followed up and interviewed and reported feelings of calmness, confidence and empowerment.

But the techniques don't work for everyone. Some women reported feeling frustrated or disappointed when their labour and birth experiences didn't match their expectations, or when their midwives misinterpreted their relaxed state.

Other women find it extremely difficult to switch off and relax. They may find they're not able to put themselves into a deeply relaxed state and then respond to positive suggestions and affirmations.

Some women may be sceptical of the process and don't see any potential benefits.

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