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건강개념에 대응하는 근린환경 조성 정책 연구

Policy Measures for Creating Healthy Neighborhood Environment

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The concept of healthy city in Korea, which was first introduced in 1986, were actively pursued by both the Ministry of Health and Welfare and the Ministry of Environment, and many local governments have conducted various healthy city and neighborhood projects until now. Despite much discussion about creating healthy cities, there is little consideration towards making improvements to the physical environment in order to achieve this objective. The central government is mainly occupied with improving the welfare and health sector, whilst local governments tend to concentrate on simply promoting no smoking and drinking campaigns.

However, there are arguably various factors that adversely affect health levels of an individual in a city these days. This is fundamentally connected with the complex physical attributes of a given area, and also by the fact that factors causing bad health are more related to changed lifestyles and a lack of physical activeness nowadays. Therefore, although ensuring adequate health and welfare facilities are of continuing importance, there also needs to be appropriate measures for improving the physical environment of the city in order to prevent and minimize negative health issues from arising.

Hence this study emphasizes the importance of improved physical

environment in achieving healthy cities, and the need for an appropriate neighborhood design guideline which properly reflect health issues. Furthermore, the study derives healthy city planning factors based on the everyday experiences of city residents, and conclusively proposes a health design guideline for planning or improving individual spatial units that form the neighborhood environment.

First, by reviewing literature on healthy cities and neighborhood design, the research deducted six attributes – publicness, environmentally friendliness, safety, space availability for physical activities, social exchange, and cleanliness – of a healthy environment. The study also withdrew seven types of physical realms which should be subjected to health design considerations, which are public open spaces, health promotion facilities, social welfare facilities, transportation related facilities, building interiors, sanitation facilities, and medical facilities. Based on such elements, the research defined 'healthy neighborhood environment' as having adequate space for physical activities for residents, implementing continuous sanitation management, having easy access to health and medical services, and where there is sufficient number of environmentally friendly buildings and open spaces. Furthermore, the study argued that the notion of a healthy city should not only be approached through welfare and medical terms, but also be considered in relation to wide-ranging expertise such as urban planning and design, architecture, landscape architecture, welfare and ecology.

Despite the need for a multi-faceted approach to healthy cities, through analyzing local government healthy city projects, the study found that the majority of cases were limited to health campaigns, and although there were projects where improvements to the physical environment were made, these cases were very few. The study conducted surveys of residents where healthy city

projects were implemented and discovered that there are three prominent elements which define a healthy neighborhood environment. Those were areas which accommodate for walking, running and other dynamic activities(Active space), hygienic areas with clean air and sparse litter(Clean space), and areas which are safeguarded from natural disasters, crimes etc(Safe space). It was also revealed that people related the availability of pedestrian and cycling routes, playgrounds around residential areas to the idea of a healthy neighborhood environment. In contrast, the study found that the awareness and participation level of local government's healthy city projects were very low, and satisfaction levels of the health enhancing effects of these projects were also found to be similarly low. Based on the healthy city planning factors of the research, the study identified that priorities were required in improved amenities, safety and eco-friendliness.

Proceeding from the findings of the research, a design guideline was drawn up through the following five stages. First, neighborhood planning and design factors related to healthy city notions were derived, and second spatial unit categories were established by considering existing legislations and the particularities of the Korean urban environment. Next, based on a survey of architecture and urban design experts, neighborhood environment design guideline factors according to each spatial unit were determined, amended and weighted. Fourth, the draft design guideline was applied to past healthy city projects and was further modified. Last, the application stages and utilization of the health design guideline were revised. The five final spatial units of application – pedestrian and cycling routes environment, parks and open space environment, welfare and sports environment, residential and built environment, transportation environment – were concluded by taking into account the attributes of the Korean urban context.

For future researches, the study identifies the need for specialized design guidelines for schools, elderly care centers, and medical centers. Also the study suggests the supplementation of planning standards in project planning, design and construction phases since these are the stages where site selection, building use and placement, use of environmentally friendly building materials are decided which fundamentally influence the formation of healthy cities.

Keyword : Health, Healthy City, Healthy Neighborhood Environment, Healthy Neighborhood Design Guidelines