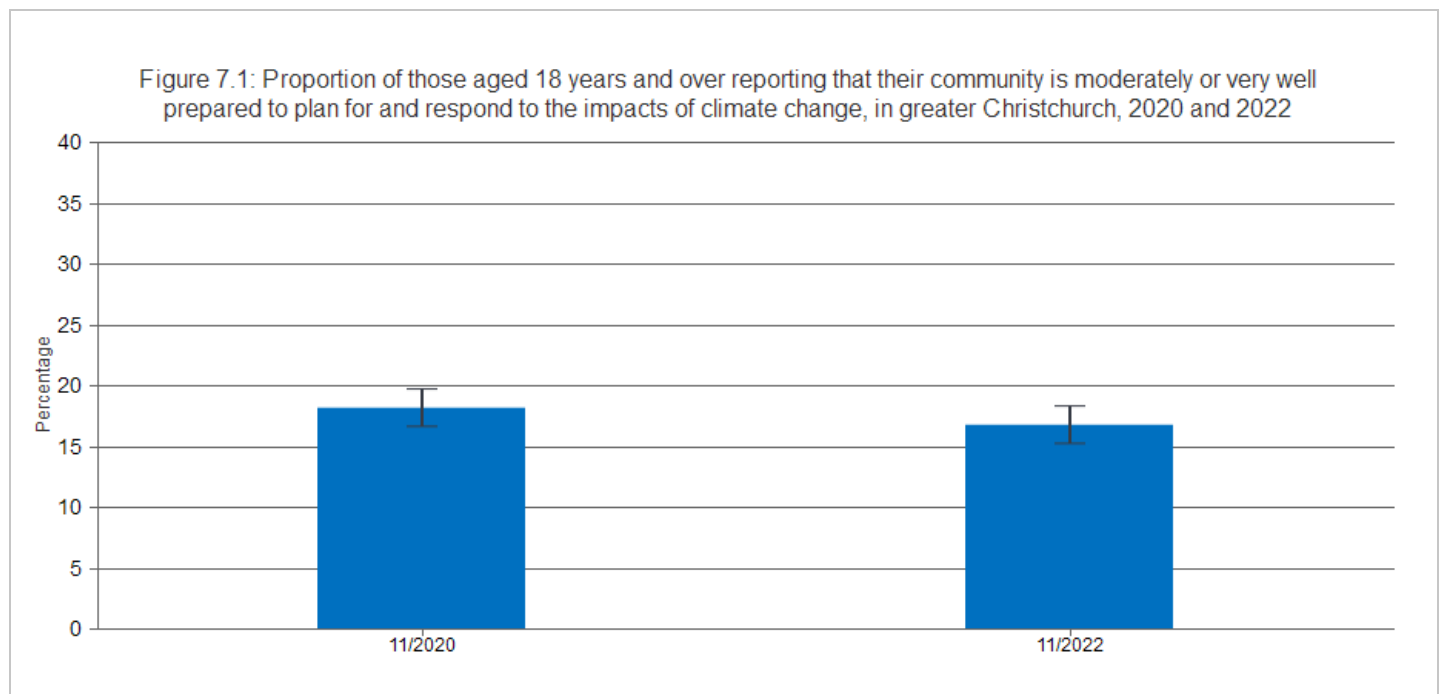


Environment: Climate change preparedness

Downloaded from <https://www.canterburywellbeing.org.nz/our-wellbeing/environment/climate-change-preparedness/> on 28/04/2024 2:36 AM

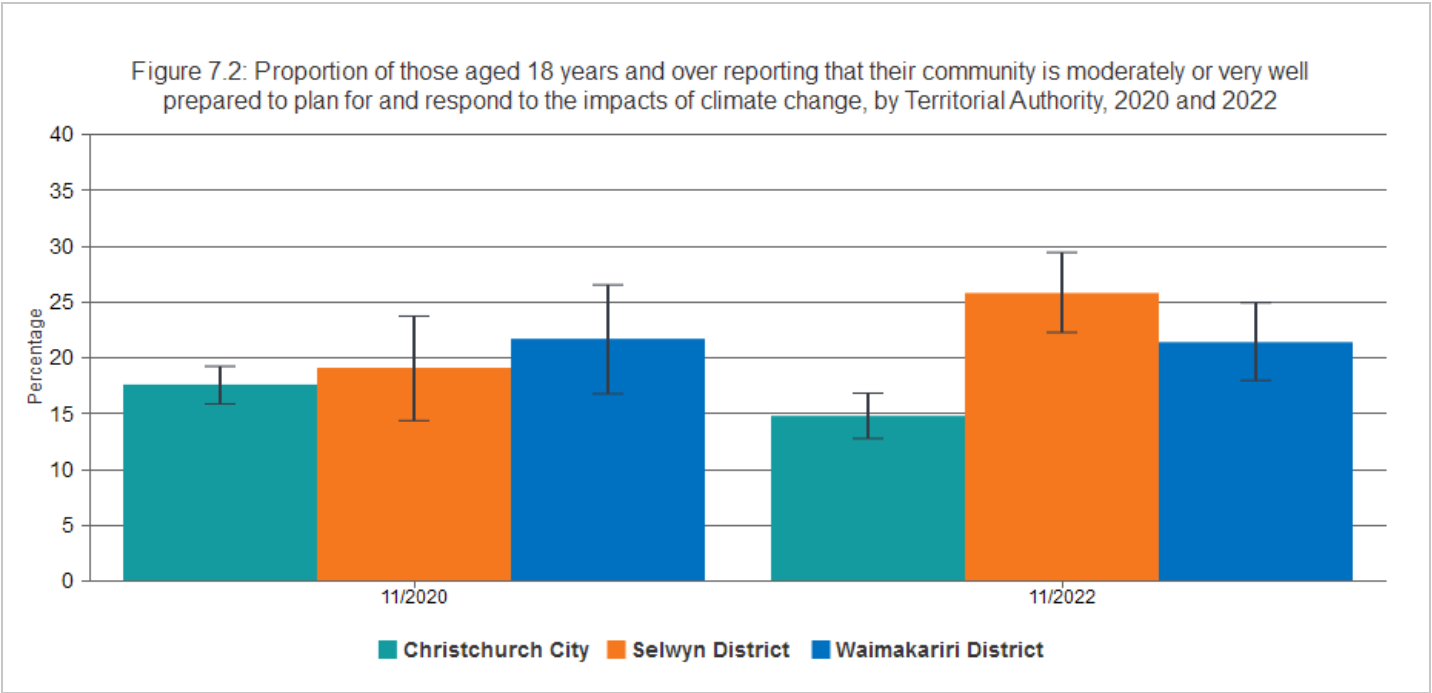
Climate change impacts will be experienced most intensely at the local level, therefore community-based preparation is important to build capacity to adapt and reduce vulnerabilities to climate change [31]. Communities have local knowledge of their social, political, economic, and environmental circumstances, which can inform responses to climate change impacts [32].

This indicator presents the proportion of those 18 years and over who reported that their community is moderately or very well prepared to plan for and respond to the impacts of climate change, in the Canterbury Wellbeing Survey.



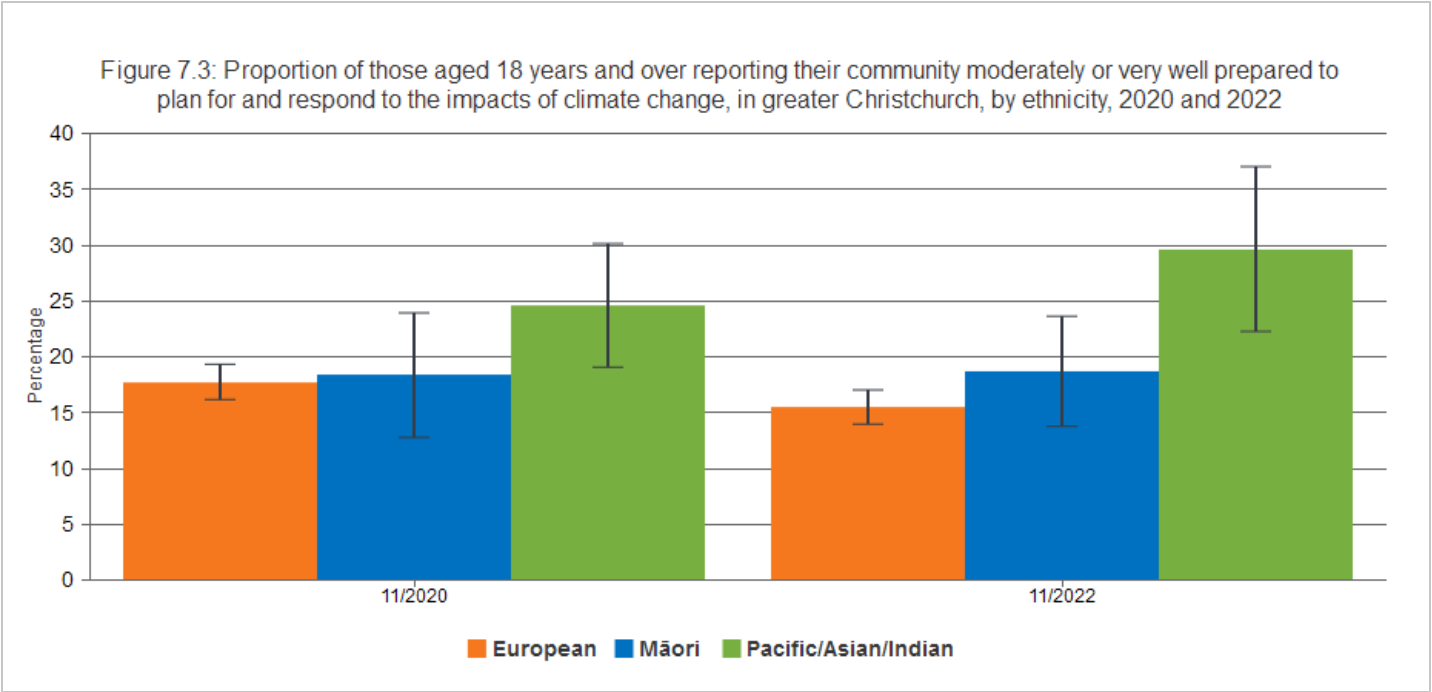
The figure shows the proportion of respondents who indicated that their community is moderately or very well prepared to plan for and respond to the impacts of climate change, in greater Christchurch, 2020 and 2022. The decrease, between 2020 (18.2%) and 2022 (16.8%) is not statistically significant.

Breakdown by Territorial Authority



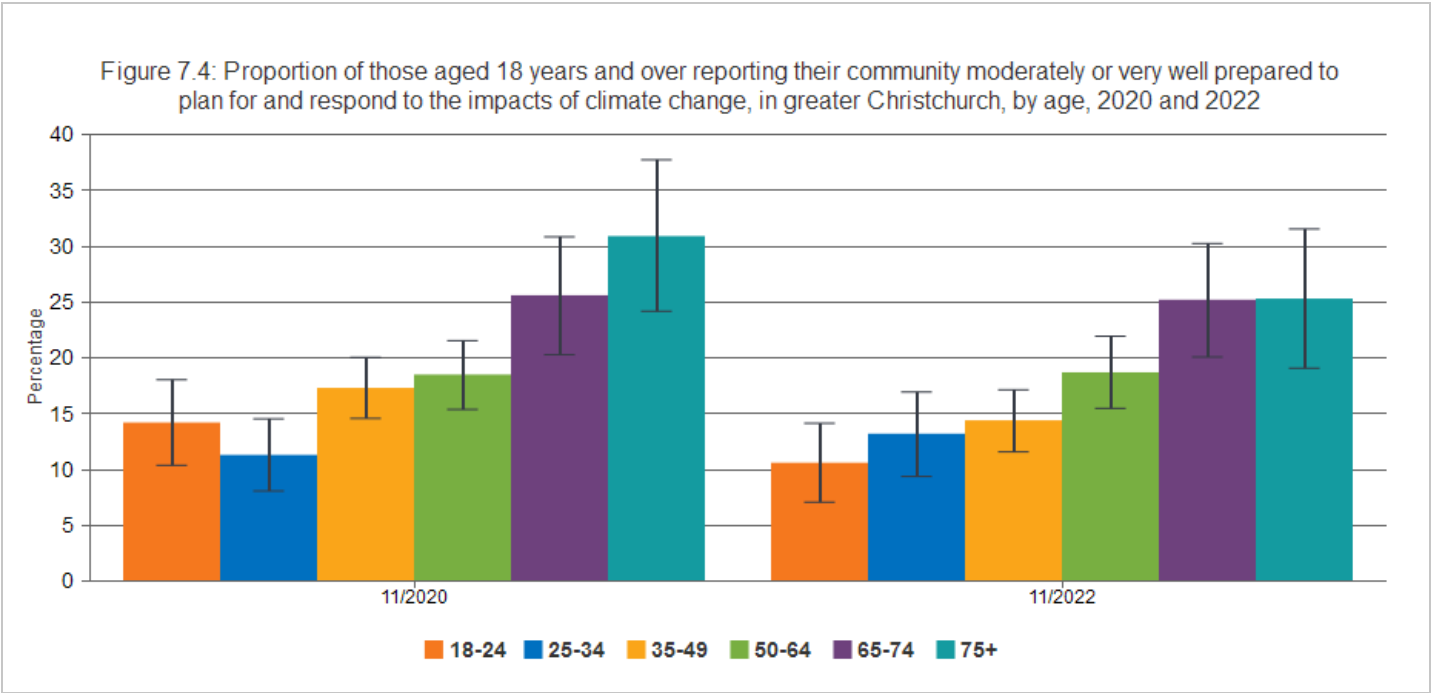
The figure shows that 14.8 percent of respondents in Christchurch City indicated that their community is moderately or very well prepared to plan for and respond to the impacts of climate change, in 2022. In Waimakariri District and Selwyn District, statistically significantly higher proportions of respondents indicated that their community is moderately or very well prepared (21.4% and 25.8%, respectively). The decrease in proportion across greater Christchurch - shown in Figure 7.1 - is wholly attributable to the decrease in Christchurch City.

Breakdown by ethnicity



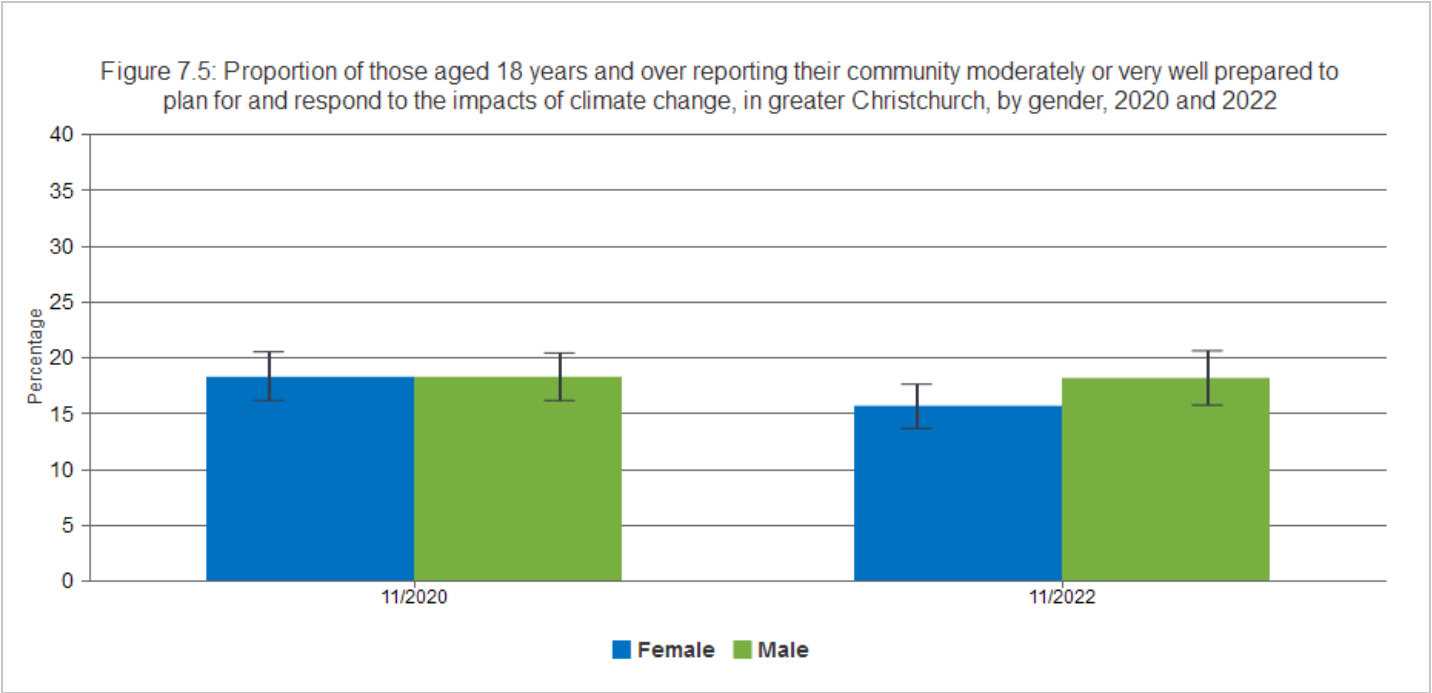
The figure shows differences by ethnicity in the proportion of respondents who reported that their community is moderately or very well prepared to plan for and respond to the impacts of climate change, in greater Christchurch, in 2022. The difference in the proportion of Pacific/Asian/Indian respondents and European respondents that reported that their community is moderately or very well prepared to plan for and respond to the impacts of climate change (29.6% and 15.5% respectively) is statistically significant in 2022.

Breakdown by age



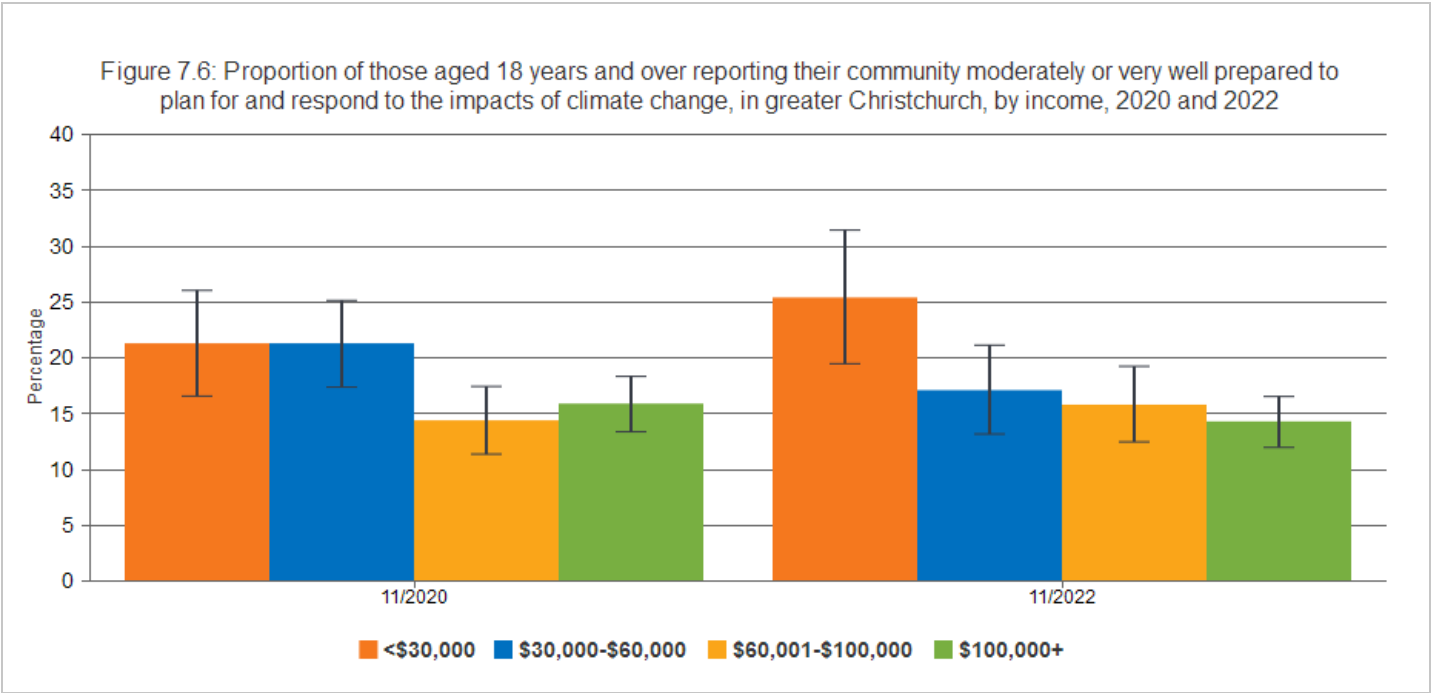
The figure shows a clear positive relationship between perceived climate change preparedness and age. Lower proportions of respondents from younger age groups reported that their community is moderately or very well prepared to plan for and respond to the impacts of climate change in 2022 (10.6% for 18 to 24 years, 13.2% for 25 to 34 years, 14.4% for 35 to 49 years, and 18.7% for 50 to 64 years) compared to the oldest age groups (25.2% for 65 to 74 years and 25.3% for 75+ years). These differences were statistically significant between the three younger age groups (18 to 24, 25 to 34, and 35 to 49 years) and the two oldest age groups (65 to 74 and 75+ years).

Breakdown by gender



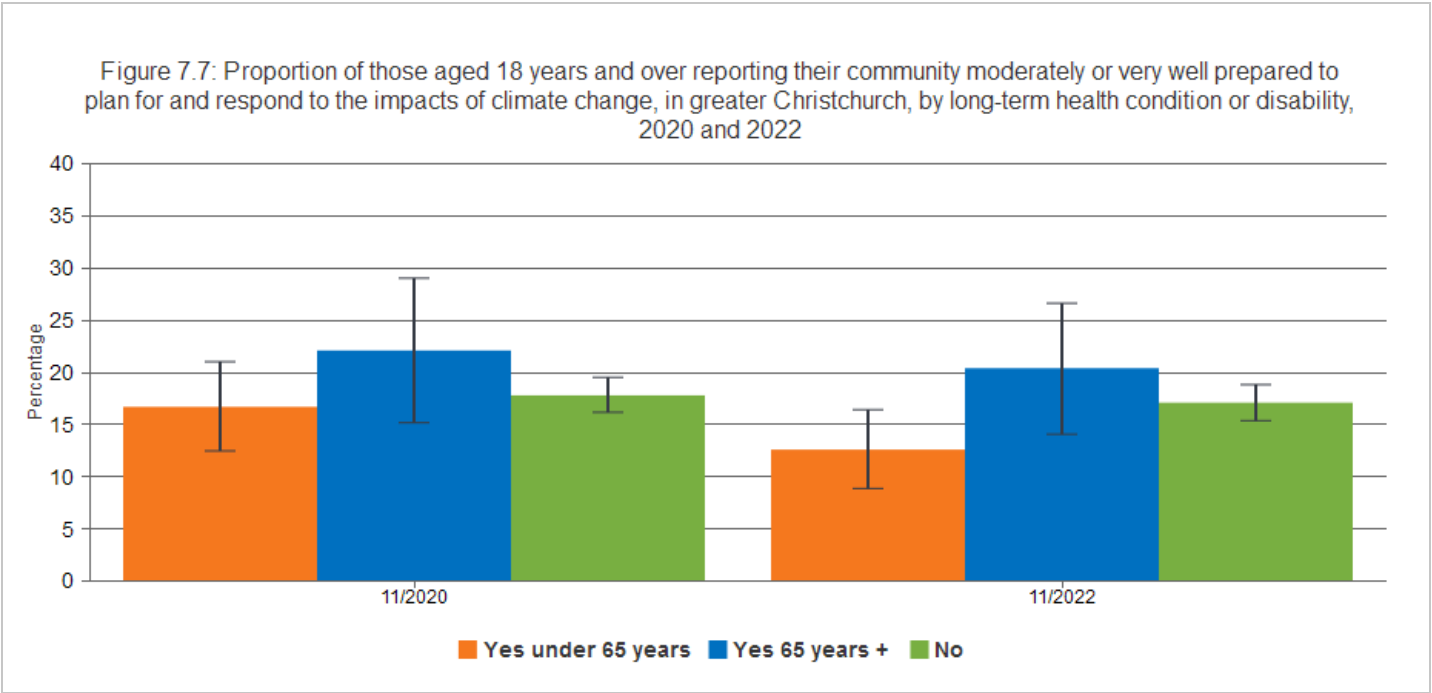
The figure shows no statistically significant difference, by gender, in the proportion of respondents who reported that their community is moderately or very well prepared to plan for and respond to the impacts of climate change, in greater Christchurch in 2022.

Breakdown by income



The figure shows that in 2022, a statistically significantly higher proportion of those in the lowest income group (<\$30,000, 25.4%) reported that their community is moderately or very well prepared to plan for and respond to the impacts of climate change compared with those in the highest income group (\$100,000+, 14.3%). Broadly, the figure indicates a negative income gradient, with increasing income being associated with lower levels of perceived preparedness.

Breakdown by disability



The figure shows no statistically significant differences by long-term health condition or disability (for either age group), in the proportion of respondents who reported that their community is moderately or very well prepared to plan for and respond to the impacts of climate change, in greater Christchurch in 2020 and 2022.

Data Sources

Source: Te Whatu Ora Waitaha Canterbury - formerly Canterbury District Health Board.
Survey/data set: Canterbury Wellbeing Survey to 2022. Access publicly available data from Te Mana Ora | Community and Public Health website www.cph.co.nz/your-health/wellbeing-survey/
Source data frequency: Annually.

REFERENCES

This is the full reference list for **Environment**.

- 1 Handy SL, Boarnet MG, Ewing R, Killingsworth RE (2002) How the built environment affects physical activity. *American Journal of Preventive Medicine* 23: 64-73.
- 2 Perdue WC, Stone LA, Gostin LO (2003) The built environment and its relationship to the public's health: The legal framework. *American Journal of Public Health* 93: 1390-1394.
- 3 Sallis JF, Spoon C, Cavill N, Engelberg JK, Gebel K, et al. (2015) Co-benefits of designing communities for active living: An exploration of literature. *International Journal of Behavioral Nutrition and Physical Activity* 12: 30.
- 4 Björk J, Albin M, Grahn P, Jacobsson H, Ardö J, et al. (2008) Recreational values of the natural environment in relation to neighbourhood satisfaction, physical activity, obesity and wellbeing. *Journal of Epidemiology and Community Health* 62: e2.
- 5 Blaschke P (2013) Health and wellbeing benefits of conservation in New Zealand. *Science for Conservation* 321.
- 6 de Dios Ortúzar J, Willumsen LG (2011) *Modelling Transport*. New York: Wiley.
- 7 Bennett H, Jones R, Keating G, Woodward A, Hales S, et al. (2014) Health and equity impacts of climate change in Aotearoa-New Zealand, and health gains from climate action. *New Zealand Medical Journal* 127.
- 8 Royal Society Te Apārangi (2017) *Human Health Impacts of Climate Change for New Zealand: Evidence Summary* Wellington.
- 9 Canterbury Earthquake Recovery Authority (2012) *CERA Wellbeing Survey 2012 Report, prepared by AC Nielsen for the Canterbury Earthquake Recovery Authority*. AC Nielsen and the Canterbury Earthquake Recovery Authority.
- 10 Cameron MP, Cochrane W, McNeill K, Melbourne P, Morrison SL, et al. (2012) Alcohol outlet density is related to police events and motor vehicle accidents in Manukau City, New Zealand. *Aust N Z J Public Health* 36: 537-542.
- 11 Livingston M, Chikritzhs T, Room R (2007) Changing the density of alcohol outlets to reduce alcohol-related problems. *Drug and Alcohol Review* 26: 557-566.
- 12 Popova S, Giesbrecht N, Bekmuradov D, Patra J (2009) Hours and days of sale and density of alcohol outlets: Impacts on alcohol consumption and damage: A systematic review. *Alcohol and Alcoholism* 44: 500-516.
- 13 Cameron MP, Cochrane W, Gordon C, Livingston M (2013) *The locally-specific impacts of alcohol outlet density in the North Island of New Zealand, 2006-2011. Research report commissioned by the Health Promotion Agency*. Wellington: Health Promotion Agency.
- 14 Browne M, Bellringer M, Greer N, Kolandai-Matchett K, Langham E, et al. (2017) *Measuring the burden of gambling harm in New Zealand*: Central Queensland University and Auckland University of Technology.
- 15 Abbott M, Bellringer M, Garrett N (2018) *New Zealand National Gambling Study: Wave 4 (2015). Report number 6*. Auckland, New Zealand: Auckland University of Technology, Gambling & Addictions Research Centre.
- 16 Rook H, Rippon R, Pauls R, Doust E, Prince J (2018) *Gambling harm reduction needs assessment*. Wellington, New Zealand: Sapere Research Group.
- 17 Kristiansen S, Trabjerg Camilla M (2016) Legal gambling availability and youth gambling behaviour: A qualitative longitudinal study. *International Journal of Social Welfare* 26: 218-229.
- 18 Welte JW, Barnes GM, Tidwell M-CO, Hoffman JH (2009) Legal gambling availability and problem gambling among adolescents and young adults. *International Gambling Studies* 9: 89-99.
- 19 Pearce J, Mason K, Hiscock R, Day P (2008) A national study of neighbourhood access to gambling opportunities and individual gambling behaviour. *Journal of Epidemiology and Community Health* 62: 862-868.
- 20 Binde P (2013) Why people gamble: A model with five motivational dimensions. *International Gambling Studies* 13: 81-97.
- 21 Wardle H, Keily R, Astbury G, Reith G (2014) 'Risky places?': Mapping gambling machine density and socio-economic deprivation. *J Gambli Stud* 30: 201-212.
- 22 Beckert J, Lutter M (2009) The inequality of fair play: Lottery gambling and social stratification in Germany. *European Sociological Review* 25: 475-488.
- 23 Orford J, Wardle H, Griffiths M, Sproston K, Erens B (2010) The role of social factors in gambling: Evidence from the 2007 British Gambling Prevalence Survey. *Community, Work & Family* 13: 257-271.

- 24 Abbott M, Binde P, Hodgins D, Korn D, Pereira A, et al. (2013) *Conceptual Framework of Harmful Gambling: An International Collaboration*. Guelph, Ontario: Problem Gambling Research Centre (OPGRC).
- 25 Easton B (2002) Gambling in New Zealand: An economic overview. In: Curtis, B, editor. *Gambling in New Zealand*. Palmerston North: Dunmore Press. pp. 45-58.
- 26 Department of Internal Affairs Gambling in Pubs and Clubs (Class 4). Wellington: The Department of Internal Affairs.
- 27 Canterbury DHB (2019) *Canterbury Wellbeing Survey, June 2019: Report prepared by Nielsen for the Canterbury District Health Board and partnering agencies*. Christchurch: Canterbury District Health Board.
- 28 Environment Canterbury Regional Council (2018) *Air Quality in the Canterbury Region- Winter 2018 Update: Environment Canterbury Environmental Snapshot Report*. Christchurch: Environment Canterbury Regional Council.
- 29 World Health Organization (2013) *Health effects of particulate matter*. Copenhagen: World Health Organization.
- 30 World Health Organization (2005) *WHO Air quality guidelines for particulate matter, ozone, nitrogen dioxide and sulfur dioxide: Global update 2005, Summary of risk assessment*.
- 31 McNamara KE, Buggy L (2017) Community-based climate change adaptation: a review of academic literature. *Local Environment* 22: 443-460.
- 32 Ebi KL, Semenza JC (2008) Community-based adaptation to the health impacts of climate change. *American Journal of Preventive Medicine* 35: 501-507.