

## **Response to NIHE Corporate Plan Review 2012-13**

**December 2011**

Belfast Healthy Cities welcomes the opportunity to comment on the review of the Northern Ireland Housing Executive (NIHE) Corporate Plan for the year 2012-13.

### **About Belfast Healthy Cities:**

Belfast Healthy Cities is a citywide partnership working to improve health equity and wellbeing for people living and working in Belfast and beyond.

Belfast is also a leading member of the World Health Organization European (WHO) Healthy Cities Network which has over 100 cities, with a strong track record of meeting WHO goals and objectives. Belfast Healthy Cities' office has a staff team dedicated to working with partner organisations to facilitate and support change. The office also acts as the link between the city and WHO, and Belfast Healthy Cities currently provides the WHO secretariat to the Network.

### **Role of Belfast Healthy Cities:**

The role of the partnership is, through our leadership and innovation, to inspire and utilise the collective and individual strengths of partners to *deliver the WHO European Healthy City* goals and requirements and maximise their impact on health and inequalities. The focus of the global Healthy Cities movement, including ours, is on the wider physical and social living conditions that shape health and wellbeing, and creating conditions that support health and tackle inequalities.

In the current Phase V (2009 – 2013), the overarching aim for Belfast, and all WHO European Healthy Cities, is Health Equity in All Local Policies, supported through the core themes of Healthy Urban Environment, including Climate Change and Health, and Healthy Living, including active living and wellbeing. Our comments are made in light of this.

## **Comments on NIHE Corporate Objectives**

### **Introduction: Links between housing and health**

Health is the result of many factors. Health and wellbeing are considered today as investments in economic and social development. Living conditions determine health, by shaping the choices people can make. Differences in living conditions result in differences in health outcomes. Health inequalities are defined as such differences in health, which are avoidable and therefore can be considered unjust. Striving for equity is not about ensuring that everyone has the same level of health, but about providing fair conditions that allow everyone to attain their full potential.<sup>1</sup> Income and social status are key determinants of equity or inequality. For example, people on low incomes and in lower social groups are more likely

to die younger and suffer ill health, primarily because their physical and social living conditions are poorer.<sup>2</sup>

Housing supports health and wellbeing by providing physical shelter and a safe space for recreation and self expression. Warm and secure accommodation is a prerequisite for good health, while a supportive physical and social neighbourhood can underpin mental wellbeing and social cohesion.

**Belfast Healthy Cities believes that the proposed four objectives are broadly appropriate to shape the work of NIHE.**

**Objective 1: Delivering better homes** is important as good housing is a crucial building block in particular for mental wellbeing. A well designed appropriately spaced dwelling offers a space for rest and recuperation in private, which is vital for mental wellbeing. It can also enable creativity and self expression; homes can be a major source of life satisfaction.<sup>3</sup> Appropriate and secure housing also supports people to participate in society, not least to seek and sustain employment or education.

Thermal energy and energy efficiency plays a key part in tackling fuel poverty and supporting people to make savings, which has well documented benefits on all aspects of health and wellbeing. According to the 2006 House Condition Survey, most properties that failed the Decent Homes standard did so on the thermal comfort criterion.<sup>4</sup> Energy efficient homes also strengthen health equity by cutting energy costs. This can be vital for low income households, who are most at risk of fuel poverty.<sup>5</sup>

It would be helpful if this objective also incorporated reference to delivering good quality neighbourhoods, in terms of the public realm surrounding homes. This has direct benefits for mental wellbeing, and also supports creation of stronger communities by encouraging social interaction as well as a sense of pride and place. While we appreciate that funding for more extensive schemes is very limited, even minor improvements, such as creating a playable area or communal green space, can have a significant impact.

Indeed, it may be possible to engage local communities in undertaking some work, which will give residents ownership and can further enhance both personal self esteem and pride in the local area, with potential for empowering the community to undertake further improvement and leadership for this work.

In spring-summer 2011, Belfast Healthy Cities worked with 100 9-11 year old children in three primary schools and one afterschool club in the Lenadoon and Suffolk area of west Belfast to give the children an opportunity to express their views about the environment through photography and art. The report on this project will be published in early 2012, but early findings indicate that the

children's priorities were clean and safe – ideally green – places that offer opportunities to meet friends and play, along with less traffic and safer streets.

**Objective 2: Supporting independent living** is key to sustaining and improving wellbeing, which is particularly important for the vulnerable groups outlined in the draft corporate plan. The NIHE will deliver on this objective through their Housing Related Support Strategy (formerly Supporting People Strategy) 2011 - 2014. The strategy works to support potentially vulnerable groups such as people with learning disabilities, mental health problems, older peoples, young vulnerable people and care leavers, people affected by domestic violence, homeless people, Black Minority Ethnic (BME) Groups, young offenders, people with physical and sensory impairment, refugees and asylum seekers to live independently in their own home and within the community and endeavours to prevent crisis and more costly interventions.

Housing related support helps to address equity issues by providing support to vulnerable groups that otherwise may not be available to them. Support is provided to help people understand and manage their different rights and responsibilities such as: finding a home and setting up a tenancy, keeping their home safe, setting up a budget and paying bills, developing life skills to sustain living in their own home, and access to education, training or employment. Support services can also help with independent living skills, for example accessing benefits and local community resources including health and leisure services.

Housing related support is offered in a variety of ways depending on circumstances, by many different organisations and can address equity issues by allowing vulnerable to live as independently as possible. To achieve this support is provided in various ways: an accommodation-based service which is a service provided as part of the accommodation, floating support which is a service provided to the individual in their own accommodation regardless of where they live, a service provided through a community alarm, lifeline or pendant scheme or in sheltered housing where a warden or scheme manager may provide support.

Work in this area can be particularly effective in promoting health equity as vulnerable groups will benefit from the security and safety of a home. Becoming a valued member of a community with potential brings even greater health benefits.<sup>6</sup> In addition, good quality homes and housing provision are particularly important in contributing to the health and wellbeing of vulnerable groups or excluded people. Specifically, lifetime or adapted homes promote independence by mitigating the impact of illness and dependency.

Belfast Healthy Cities is currently working in partnership with NIHE to pilot the Health Equity in All Policies (HEiAP) approach on the Housing Related Support Strategy.

HEiAP is a policy mechanism that can help organisations achieve their objectives in a way that also addresses inequalities. It allows organisations to use a health lens approach to systematically look at policies and assess them against the social determinants of health with a view to identifying health equity issues.

It is encouraging that NIHE have demonstrated their commitment to health equity and addressing potential health inequalities in terms of supporting independent living by being part of the innovative HEiAP process.

For more information on the HEiAP process please visit: <http://www.belfasthealthycities.com/PDFs/Equity%20from%20the%20Start.pdf>

**Objective 3: Building stronger communities** is vital both to support wellbeing and social cohesion, and is a cornerstone of liveable neighbourhoods. Under this area, particularly important areas include building the capacity of local people to engage in decision making on an equitable footing, and also monitoring how initiatives affect local people.

Community capacity can be defined as 'activities, resources and support that strengthen the skills, abilities and confidence of people and community groups to take effective action and leading roles in the development of communities.'<sup>7</sup>

Capacity building through community learning and development describes a way of working with and supporting communities. Community learning and development is central to 'social capital' - a way of working with communities to increase the skills, confidence, networks and resources they need to tackle problems and grasp opportunities. Community learning and development help individuals and communities tackle real issues through community action and community-based learning.<sup>8</sup>

Building stronger communities through capacity building can be achieved through:

**Developing skills** - learning and training opportunities for individuals and groups, and sharing through networks and mutual support, to develop skills, knowledge and confidence.

**Developing structures** – developing the organisational structures and strengths of community groups, communities of interest and networks.

**Developing support** – developing the availability of practical support to enable the development of skills and structures.

Belfast Healthy Cities, in partnership with NIHE, Belfast City Council, PHA, Belfast HSC Trust and the five Belfast Area Partnerships has developed an indicator set aimed at monitoring how regeneration affects health and especially inequalities in the target area. The *Good for Regeneration, Good for Health, Good for Belfast* indicator set includes indicators under four headings: economy, social, environmental and access, and emphasises that initiatives that support

health and wellbeing often also help maximise the value of the regeneration project. Next steps will include further piloting of the framework, and exploring ways of enhancing data available.

Further discussion on how these indicators could be adopted at a regional level will be undertaken in 2012 and include NIHE as a key partner.

**Objective 4: Delivering quality services** is key to maintaining and strengthening confidence in services provided by NIHE as with any other service. Confidence in services can contribute in particular to the mental wellbeing of service users. As many NIHE tenants are among the most vulnerable or disadvantaged in society, the quality of service and support received from NIHE is particularly important to underpin their wellbeing and in achieving health equity.

Delivering quality services means:

**Putting the person at the centre** and developing on-going, personal relationships, between the public and providers rather than seeing services as anonymous, one-off transactions.

**By focusing on outcomes and monitoring** the real improvements people see in their services and communities rather than the level of cash and resource invested in services

**Efficient and more streamlined services.** This is to make sure that public money is spent effectively, getting the best results, but also wisely.<sup>9</sup>

In relation to staff, workplace health forms an important part of quality services. In particular in the current increasingly uncertain climate, appropriate workplace health initiatives are important to maintain and strengthen the wellbeing of staff. This is important in itself, but also contributes significantly to productivity, enabling staff to perform at their best. In addition, making sure that staff is adequately trained to do carry out their job to their full capability and allowing room for staff to demonstrate innovative working practices which may lead to improved delivery of services.

**Service Priorities: Belfast Healthy Cities recognises the value and importance of all of the housing service priorities however has chosen the following as the most important:**

### **New House Building**

New house building and shortage of affordable housing is a critical issue in Northern Ireland. While it is recognised that budgets for new housing are increasingly reduced, investment in new social housing is needed to tackle the shortage of affordable homes. Belfast Healthy Cities recognises that the Housing Executive is currently in the process of formulating a new 3 year Draft Social Housing Development Programme (SHDP).

It would be recommended that new housing be built where there are already sufficient and appropriate community supports and networks as to encourage a positively functioning community. It is important to create liveable neighbourhoods as well as liveable houses. It may be possible to develop this capacity simultaneously with housing development which would be important.

In terms of house building implementing strict quality standards for new housing can support healthy future environments. Ensuring new housing meets stringent energy efficiency standards can help tackle fuel poverty now and in the future. Exploration of new approaches, for example passive heating and novel designs also builds resilience to a changing climate and energy context and can also provide long-term savings by reducing the need for retrofitting and adaptation.<sup>10</sup>

Flexible housing design, which can be adapted to meet the needs of older residents and residents with disabilities, can help manage long term demand in an ageing society and provide savings in adaptation costs. Integrating specialist housing into mainstream housing supports the health and social wellbeing of residents by enabling social interaction that can reduce for example fear of crime and can strengthen social cohesion.<sup>11</sup>

Greater density housing, especially when coupled with easy access to greenspace, local facilities and services can create new opportunities for developing social support networks but increasing informal meeting places. Increased densities reduce travelling distances and can encourage active travel, which is important for increasing levels of physical activity as well as reducing energy demand. This in turn is a vital component of dealing with climate change and energy security concerns. By encouraging new community hubs, denser housing can also support new economic opportunities.<sup>12</sup>

### **Repairs/improvements**

While new housing is important to meet the demand for appropriate affordable accommodation, improvements to existing stock can underpin and support regeneration of a neighbourhood. Repairs and improvements to housing is important to the upkeep of an area and the sense of pride that the people living in the community have for their area. It is noticeable in many towns, cities and communities the number of derelict dwellings. Run-down, derelict and abandoned properties bring down the appearance of a neighbourhood, and give a sense of decay and decline this can act as a magnet for crime, antisocial behaviour and vandalism. This can have an effect on people's mental health by having a negative affect on how safe they feel in their own environment and may affect social contact if people are afraid to venture out of their homes.

To the extent possible, opportunities to make existing dwellings habitable should be utilised especially in areas of high housing need. Repairs and improvements can also help shape and channel future demand by initiating regeneration and revival of an area.

Repairs and improvements can greatly improve an area's appearance and boosts people's confidence in their neighbourhood. This can result in reduced negative health impacts associated with these issues, as well as improving the visual appearance of the homes and gardens. In addition, can attract inward investment and helps makes the area an attractive place in which to live and work.

### **Community safety, better community relations, building skills in the community**

Good housing creates a positive built environment that supports community cohesion. Housing is a core element of the built environment, well designed and maintained housing creates a framework that can encourage trust, social interaction and a sense of 'community'. Local identity and cohesion is essential for mental wellbeing, while there also is evidence that people who live in a supportive environment typically are in better health, requiring less health and social care and indeed live longer.<sup>13</sup> A positive local environment is particularly important for less mobile groups including older people and people on lower incomes and can reduce the stress associated with lower social status. Social cohesion can also help strengthen informal social control within a neighbourhood, which can reduce antisocial behaviour.<sup>14</sup> It can also generate confidence and willingness to take action for developing an area.

'Community spirit' is an important support for mental wellbeing and a prerequisite for developing resilient communities with a strong positive identity and ability to tackle challenges. Cohesive communities are also likely to be less affected by anti-social behaviour, which provides public cost savings.<sup>15</sup>

Mixed tenure can support health equity and wellbeing as well as the local economy. More socially mixed areas can strengthen social cohesion and equity, through supporting interaction and understanding between people of different backgrounds.

Skill building in an area is vital for example, supporting early years and other measures aimed at improving life opportunities such as supporting social enterprise, capacity building, childcare, education and training. All these contribute to health equity and wellbeing, by improving opportunities of residents especially in more disadvantaged areas. Such approaches can also strengthen local economy in a sustainable way.

Ongoing engagement is recommended with local communities in terms of achieving better community relations and meeting the needs of people in the area. Community engagement can support the creation of houses and spaces that meet people's needs, as stakeholder's local people have key knowledge. Engagement can also contribute to successful regeneration of areas, as it

enables local people to take ownership of the process and supports a stronger sense of place and pride in the neighbourhood.

## **Conclusion**

Belfast Healthy Cities welcomes the draft NIHE Corporate Plan in terms of its objectives and priority areas. Belfast Healthy Cities reinforces in particular, how health and wellbeing is underpinned by good quality and appropriate affordable housing, sustainable prosperity and social cohesion. Given the breadth of the Corporate Plan and potential impact of its implementation on many groups of people especially those vulnerable groups there is scope for strengthening action on tackling inequalities. Belfast Healthy Cities would advocate for the inclusion of health equity as specific core theme. This would strengthen the emphasis on the importance of tackling inequalities. Within this, consideration should be given to all policies and actions in terms of their impact on the determinants of health (social, access, lifestyle and personal, economic and environmental). This would demonstrate NIHE continued commitment to tackling health inequalities.

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