



TAKING ACTION FOR CHILD FRIENDLY PLACES: FIRST STEPS

Strategic Approach &
Action Plan for Belfast

JUNE 2016



Belfast Healthy Cities is a partnership organisation seeking to improve health and well-being, by identifying ways to tackle inequalities in health and create healthy urban environments. The organisation's key role is to fulfil the requirements of Belfast as a World Health Organization (WHO) Healthy City, and to act as the link between Belfast and WHO Europe. Within the city, the key roles for Belfast Healthy Cities are to facilitate intersectoral collaboration, to build capacity and share evidence on the social determinants that shape health, to share learning from the WHO Europe and the 100 member cities of the WHO European Healthy Cities Network, and introduce and test new concepts relevant to health and wellbeing. Key partners include Belfast City Council, Belfast Health and Social Care Trust, Department of Health (DOH), Department for Infrastructure (DFI), Northern Ireland Housing Executive (NIHE), Public Health Agency (PHA), Queen's University Belfast and Ulster University.

BELFAST HEALTHY CITIES

Our Vision

Our vision is to be a leader in creating a healthy, equitable and sustainable city.

Our Mission

Our mission is to promote health and well-being, provide inspiration and facilitate innovative collaborative action and good policies through:

- Leadership and learning from the WHO European Healthy Cities Network
- Supporting research, sharing evidence and building capacity
- Introducing and piloting innovative concepts and approaches
- Maximising partners impact on health and inequalities



FOREWORD

Children constitute a significant population group in Belfast; with nearly one fifth of children under the age of 13 years old. They are also a key population group for the future of our city.

For these reasons alone, it is essential that we provide opportunities to listen to children and their needs in order to create an inclusive, resilient and child friendly city. Engaging children is also important to effectively utilise all the unique knowledge and insight that children can bring. This action plan is built on a wide range of engagement methods, which offer valuable models that partner agencies including Belfast City Council can learn from and adapt in future.

This action plan also clearly demonstrates children's priorities, and it is encouraging to see the links with emerging priorities for the Belfast Agenda. A clean, safe and welcoming city where people want to live, work and play is a priority for us all, and the evidence underpinning this action plan highlights the willingness of children to engage with and contribute to this agenda.

Our city already has a number of mechanisms to engage young people in decision making, and it will be important to continue developing this in future, in particular to also hear the voices of our youngest residents.

This action plan offers a solid basis on which to develop child friendly places in Belfast. I commend the action and look forward to progressing this important agenda for our city, which is part of the Belfast Agenda.



Alderman Brian Kingston
Lord Mayor of Belfast

PREFACE

Child friendly places are physical environments that welcome children and meet their priorities and needs. Child friendliness is about recognising the role that children play in society, valuing children's contribution and enabling children to participate in decision making across sectors. It does not mean that children need their own city, but that children are considered as a key stakeholder group in city development and service provision for our city as a whole.

Listening to children provides essential information to work towards Belfast becoming a child friendly place. Children want to see and experience cleaner, calmer, greener streets and more public spaces. These views echo those expressed by other population groups which highlights that a child friendly city can create a better built and natural environment for people of all ages.

We recognise that many organisations provide services and opportunities to improve the quality of life for children and their life chances. This Child Friendly Places Action Plan is a starting point to help us address priority place issues identified by children. It contains actions specific to meeting the needs expressed by children using a variety of engagement approaches across Belfast since 2011 and there is an opportunity to continue to build on this engagement as the plan progresses. This action plan is aligned with and meets a number of objectives in the regional public health strategy Making Life Better and the emerging Belfast Agenda.

Belfast is a member of the World Health Organisation (WHO) European Healthy Cities Network and the Child Friendly Places programme has been developed under the theme of resilient communities and supportive environments.

The quality of our environment has a huge impact on the city and its communities. Experience tells us that we can achieve much more by working in partnership to achieve shared goals and a range of partners across the city play a critical role in supporting the development of child friendly places. This action plan is intended to shape our actions in relation to children and place to ensure that we make a positive difference in the lives of children in Belfast, now and in the future.

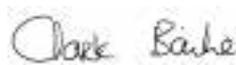
We would like to thank all those who have contributed to the development of this action plan. Special thanks must go to Belfast Healthy Cities for leading this programme as part of Belfast's fulfilment of WHO Healthy City designation requirements. We hope that working with our partners, this is the beginning of a journey in making Belfast a child friendlier place.



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KEY MESSAGES

'A good place for children is a good place for everyone.'

This action plan is based on extensive engagement with children across Belfast and aims to begin a process of creating Child Friendly Places in Belfast by responding to the priorities they identified.

What is Place?

Place comprises of the environment in which we live, shop, work, learn and play. It is about the people that inhabit these spaces and the quality of the life that comes from the interaction of people and their surroundings. Place means our cities, our towns and our neighbourhoods, and includes buildings; public space and landscape.

Why is Place important for children's health?

Place is important because it has a significant impact on our health and wellbeing. Successful places provide children with a sense of belonging, a sense of identity and a sense of community.

Positive places can be the critical factor in determining whether children's lifestyles are active and healthy. Supportive places enable children to walk or cycle to school, play outdoors, mix with people of different ages and incomes, and observe nature.

Young children spend most of their time in their local surroundings and their development is more affected by the environment in which they live than that of older children.

Not everyone enjoys equal access to a good quality environment. Poor quality surroundings can have a negative impact on children's health. Place, if properly designed and managed, is an asset which can create the conditions for children's health to flourish. There is a clear link between place, health inequalities and health outcomes.

Do Child Friendly Places have a role in Belfast?

Yes! Almost one in five people in Belfast are aged 13 or under.

Engaging with children is essential - it allows children to shape their neighbourhoods and encourages them to be active and participate in decision making processes as adults.

Our vision is defined by local children. It is a Belfast where quality places positively benefit children's health, and enrich their lives through increased human connectedness with access to good quality green space, safe streets and places for children to play outdoors.

The public sector has a key role in delivering good places for children. A mapping exercise undertaken with a range of voluntary and public sector organisations in Belfast identified limited action or programmes on children and place.



1. INTRODUCTION & CONTEXT

Why this Action Plan?

Where we live and the conditions in which we live, has a significant impact on our health and wellbeing. When children are able to move about a city safely, to play outdoors with peers, to mix with people of different ages and incomes, and to observe and appreciate nature, then a city becomes a good one for all of its residents.^{1,2} A child friendly built environment also contributes to implementing the UN Convention on the Rights of the Child (1989).³

This action plan sets out a vision for the city of Belfast to embrace the concept of child friendly places. The vision is identified by local children, and is accompanied by actions that provide a starting point for exploring how future spatial planning and decision making processes in the city can integrate children's experiences, ideas and aspirations. The actions outlined are based directly on children's priorities and are drawn from an extensive engagement process undertaken by Belfast Healthy Cities with children and families since 2011; see pages 20 -24 for detailed information on engagement methods. A public consultation in 2015 provided the basis for the action plan by identifying priorities from a wide range of actions outlined through the initial engagement process.

The focus of this action plan is children aged 13 and under, because their lives are to a great extent shaped by their local built environment, since they spend most of their time in their local neighbourhood. Young children also have the fewest opportunities to make their voice heard in decision making. The action plan is also designed in collaboration with stakeholders whose focus is on children and young people aged up to 18.

The places and environments developed today will, in most cases, last for several decades. Engaging children in shaping these places is important; to gain an understanding of children's needs and providing them with a sense of ownership of place which will also encourage them as adults to be actively involved with their environment.

Children in Belfast: the context

In Belfast, there are over 50,000 children aged 13 years or under, equating to almost 1 in 5 of the population. This population of children is comparatively high in comparison to much of the western world.⁴

Children in Belfast report largely good health. In the Census 2011, 15% of children aged under 16 years reported a long term condition or disability. Educational attainment is also good overall; over half of school leavers in the final year of compulsory education achieve at least five good qualifications (General Certificate of Secondary Education passes at grades A*-C).⁵

However, Belfast is also affected by significant levels of deprivation. Around a third of children live in low income families (defined as households with an income less than 60% of the median income, or in receipt of key benefits). Seven per cent of children live in households with no one in employment.⁶ Children entitled to Free School Meals are also more likely to leave school with limited qualifications and more likely to be not in employment, education or training.

What is a Child Friendly Place?

Child Friendly Places is an approach for integrating children's rights into local development initiatives and educational programmes through a participatory, intergenerational and child friendly assessment that empowers communities to improve their local conditions and environments with children, adolescents, families, educators, service providers and decision makers.

A child friendly built environment welcomes children of all abilities and supports their needs. It respects their rights as citizens to access community services and facilities and to participate in community development processes.

A good city for children has been described as one in which children of all abilities can grow and develop, where they can build their confidence and become actively engaged in the world; yet be autonomous and capable of managing their own affairs.⁷

Child friendly places in Belfast: the context

The Child Friendly Places programme in Belfast forms part of the World Health Organization (WHO) European Healthy Cities Network programme on Healthy Urban Environments. Both the World Health Organization and UNICEF are part of the United Nations family, and the programme draws on the UN Convention on the Rights of the Child as well as the UNICEF concept of child friendly cities. The focus of the programme is to identify ways of integrating children's priorities for their environments and engaging children in decision making in order to support development of people centred places.



Belfast is a leading city within the WHO European Healthy Cities Network and currently acts as the WHO Secretariat for the European Networks. The Child Friendly Places programme in Belfast is guided by Belfast Healthy Cities' Regeneration and Healthy Urban Environments group (Appendix 1) and a sub group, the Child Friendly Places group (Appendix 2).

Belfast Healthy Cities coordinates action on Healthy Cities across Belfast and delivers our programmes through:

- leadership & participatory governance for health
- building capacity & training; direct access to WHO expertise
- research, evidence & publications
- innovative demonstration projects
- influence policy

A number of agencies already work individually and collectively in Belfast to develop and deliver services highlighted in the UNICEF's definition of a Child Friendly City. A mapping exercise undertaken by Belfast Healthy Cities in 2013-14 to identify specific action on child friendly places found that limited provision exists.

2. CHILDREN'S PRIORITIES: MAKING BELFAST A CHILD FRIENDLY PLACE

Vision and actions

VISION

- A city where children are valued community members and their ideas and perspectives are actively gathered, considered and contribute to decision making to create healthy places.
- A city that promotes connectedness, where children and their families feel safe, have freedom of movement, access to open and green space and opportunities for play and imagination.
- An equitable city where all children have access to a supportive built environment that promotes their healthy development regardless of their family's income or background.

OBJECTIVES

- Promote Belfast as a Child Friendly City in line with the UNICEF framework with a focus on child friendly places
- Provide opportunities for children to express their views, be heard and actively involved in decisions affecting their city/built environment
- Deliver action on the priorities identified by children across Belfast

OVERALL OUTCOME

Child Friendly Places is higher on the policy agenda and initial actions are delivered to initiate Belfast as a Child Friendly Place.

ACTIONS

Children's priorities are clustered around three distinct themes, which are reflected in the vision outlined above.

1. Engaging and empowering children
2. Creating healthier places & supportive environments
3. Strengthening child centred spatial planning and design



CHILD FRIENDLY PLACES ACTION PLAN APRIL 2015 – MARCH 2018

1. Engaging and empowering children

Action	To be achieved by	Partners
Develop and pilot a Key Stage 2 teaching resource on spatial planning and its effects on people's lives and health, including teacher training	July 2015 – May 2016	Belfast Healthy Cities (BHC) / Northern Ireland Housing Executive (NIHE)/Public Health Agency (PHA)/Education Authority (EA)
Develop exchange with schools through WHO European Healthy Cities Network	January - February 2016	
Launch resource	June 2016	
Share resource with schools across Belfast and promote use	September – October 2016	BHC
Identify partner with whom to develop and pilot companion resource targeted at rural schools	July 2016 – May 2017	BHC
Explore opportunities to promote resource in collaboration with partners	September – December 2016	BHC/Royal Town Planning Institute (RTPI)/PHA/NIHE
Present to City Council Committees	September - December 2016	BHC

CHILD FRIENDLY PLACES ACTION PLAN APRIL 2015 – MARCH 2018

2. Creating healthier places & supportive environments

Action	To be achieved by	Partners
Develop demonstration projects proposed by schools who participated in piloting Healthy Places, Healthy Children schools teaching resource	July 2016 – March 2018	BHC/Belfast City Council/NIHE/PHA/Belfast Health & Social Care Trust (BHSCT)
Review litter bin provision in neighbourhoods on identification of potential need by local schools or communities	Ongoing	Belfast City Council
Explore opportunities to pilot meanwhile use of space	June 2016 - April 2017	BHC
Identify opportunities to strengthen community safety element of initiatives	Ongoing	Safer Communities Partnership/Policing and Community Safety Partnership
Identify opportunities and initiatives to promote Family Friendly cities in policy and decision making	September 2016 – April 2017	Belfast Health Development Unit (BHDU)



CHILD FRIENDLY PLACES ACTION PLAN APRIL 2015 – MARCH 2018

3. Tools for child centred spatial planning and design

Action	To be achieved by	Partners
Develop GIS mapping tool on children's health and built environment data	September 2015 – June 2016	BHC/NIHE/Belfast City Council
Develop evidence base on the impact of planning and the built environment on children's health and wellbeing	January - March 2016	BHC
Develop a set of tools to support decision making: <ul style="list-style-type: none"> • Principles for child friendly places • Checklist to support use of principles • Guidelines for engaging children in decision making • Develop and pilot a Child Friendly Place audit tool with schools and community groups 	July 2016 – June 2017	BHC
Test and validate tools <ul style="list-style-type: none"> • Undertake assessment of local environments using tools • Analyse findings and report 	September 2016 - June 2017	BHC/QUB/UU
Support and promote use of tools in policy and decision making	June – December 2017	BHC
Develop a Place Quality Standard	January 2016 – March 2018	BHC/PHA/QUB/ UU/BHSCT
Share learning and good practice from WHO European Healthy Cities Network	Ongoing	BHC

3. RELEVANT POLICIES

POLICY	FOCUS	LEVEL
Children and Young People's Strategy, Office of the First Minister & Deputy First Minister 2006 - 2016 (OFMDFM) ¹	To deliver improved outcomes for all children and young people. The built environment is one of the themes mentioned.	Regional
Play and Leisure Implementation Plan 2011 (OFMDFM) ²	A supportive built environment is defined amongst the priorities.	Regional
Making Life Better: A Whole System Framework for Public Health 2013 - 2023 (OFMDFM) ³	To improve the health and wellbeing of people in Northern Ireland and reduce inequalities. Supportive environments are identified as an overarching priority and also the development of child friendly spaces.	Regional
Fitter Futures, Department of Health Social Services and Public Safety 2012 - 2022 (DHSSPS) ⁴	To address obesity and tackling the obesogenic environment.	Regional
Delivering Social Change for Children and Young People (Consultation Document) 2014 (OFMDFM) ⁵	To secure improvement on children and young people's health and wellbeing and life opportunities, and considers vulnerable groups.	Regional
Strategic Planning Policy Statement 2015 (Department of the Environment) ⁶	To promote open and playable space through planning.	Regional
Living Places: An Urban Stewardship and Design Guide for Northern Ireland 2014 (DOE) ⁷	To promote and encourage a range of qualities when creating new environments.	Regional



POLICY	FOCUS	LEVEL
<p>Urban Villages Initiative The Urban Villages initiative is a headline action within the NI Executive's Together Building a United Community (TBUC) strategy.⁸</p>	<p>Overseen by OFMDFM, the Urban Villages initiative is designed to improve good relations outcomes and develop thriving places where there has been a history of deprivation and community tension. It has three inter-connected aims:</p> <ol style="list-style-type: none"> 1. To foster positive Community Identities; 2. To build Community Capacity; and 3. To improve the Physical Environment. 	<p>Regional</p>
<p>United Nations Convention on the Rights of the Child 1989⁹</p>	<p>An international human rights treaty for all children.</p>	<p>International</p>
<p>WHO Health 2020 Policy Framework and Strategy¹⁰</p>	<p>To promote a whole of government and whole of society approach across governments in WHO Europe to improve health and well-being and reduce health inequalities.</p>	<p>International</p>
<p>WHO European Healthy Cities Network Phase VI (2014-2018) of the European Healthy Cities Network: Goals & Requirements¹¹</p>	<p>Goals and requirements for European cities designated to the WHO European Healthy Cities</p>	<p>International</p>

1. <http://www.ofmdfmi.gov.uk/ten-year-strategy.pdf>
2. http://www.northernireland.gov.uk/play_and_leisure_implementation_plan.pdf
3. <http://www.dhsspsni.gov.uk/mlb-strategic-framework-2013-2023.pdf>
4. <http://www.dhsspsni.gov.uk/framework-preventing-addressing-overweight-obesity-ni-2012-2022.pdf>
5. <http://www.ofmdfmi.gov.uk/dsc-children-young-people-consultation-2014.pdf>
6. http://www.planningni.gov.uk/index/policy/planning_statements_and_supplementary_planning_guidance.htm
7. http://www.planningni.gov.uk/downloads/livingplaces_-_web.pdf
8. <http://sibni.org/project/urban-villages-regeneration-initiative/>
9. <http://www.ohchr.org/Documents/ProfessionalInterest/crc.pdf>
10. http://www.euro.who.int/_data/assets/pdf_file/0011/199532/Health2020-Long.pdf
11. http://www.euro.who.int/_data/assets/pdf_file/0017/244403/Phase-VI-20142018-of-the-WHO-European-Healthy-Cities-Network-goals-and-requirements-Eng.pdf

The Child Friendly Places Action Plan is designed to align with the priorities of the emerging Belfast Agenda, which at the time of publication is in development. The action plan also aims to support the Local Development Plan by identifying directions for action to address children's priorities through planning.



4. IDENTIFYING THE PRIORITIES – HOW CHILDREN WERE ENGAGED

Consultation process and development of the Action Plan

Direct engagement with children is the cornerstone and core principle underpinning this action plan. A range of models and approaches was developed to support the engagement process to ensure that children and families from all parts of Belfast had an opportunity to share their views and priorities for child friendly place making in the city. Approximately 7000 children and families were directly engaged through the following initiatives.

Shaping Healthier Neighbourhoods for Children and Children's Voices: A Charter for Belfast

The Shaping Healthier Neighbourhoods for Children initiative sought to give primary school age children an opportunity to share their views and priorities for change within their local environments. Over 400 primary school children aged 8-11 years in a total of 17 classes in 12 schools across the city participated in the programme, between 2011 and 2014.

Photography and art were used as engagement methods accessible to all children. The initiative was child led; and involved 3 sessions.

SHAPING HEALTHIER NEIGHBOURHOODS FOR CHILDREN

Methodology

- Based on 3 x 1 hour long sessions with each primary school group; designed for Key stage 2 (years P5-P7) but adaptable for Key stage 1
- Session 1: An introductory session, introducing the concepts of place and planning and exploring children's understanding and experience of living in their neighbourhood. Children were given the opportunity to explore elements of healthy environments in a class based setting.
- Session 2: The key element of the project, focused on a guided walk in the immediate school neighbourhood. Participants were supported to photograph elements they liked or did not like, using disposable cameras or where available, iPads or digital cameras
- Session 3: An imagining session, giving children the opportunity to share their views, ideas and priorities using the photographs from session 2 and additional art and writing. Participants are encouraged to visualise their key messages through posters and electronic presentations

A report detailing the pilot project in West Belfast in 2011 can be accessed at: <http://www.belfasthealthycities.com/sites/default/files/HealthierNeighbourhoodsReport.pdf> A key aim of the initiative was to give participants an opportunity to share their views with decision makers. The 2011 pilot initiative culminated in an event in Belfast City Hall in 2012 where participating classes shared their views with the then Junior Ministers, Martina Anderson MLA and Jonathan Bell MLA; the then Lord Mayor of Belfast, Niall Ó Donnghaile and a panel of senior decision makers.

The findings from the Shaping Healthier Neighbourhoods for Children 2014 project were collated into a working charter, 'Children's Voices: A Charter for Belfast', which can be accessed at: <http://www.belfasthealthycities.com/sites/default/files/ChildrensVoices-CharterForBelfast.pdf>.

CHILDREN'S VOICES:

- **Green space:** Green spaces should be good quality, well maintained spaces where children can spend time with friends and family. Children value green space and recognise that it is important in terms of social interaction, pride in the local neighbourhood and opportunities for play and physical activity.
- **Open space:** Open spaces should be safe spaces where children can play and spend time with friends. Play parks are welcome but small open good quality spaces close to children's homes are also welcome.
- **Clean and safe environments:** Children see clean environments as essential to making their neighbourhoods more pleasant and attractive to live in. They are also aware of how others view the areas in which they live and are concerned about dog fouling, broken glass and graffiti.
- **Liveable and connected communities:** Vacant houses should be occupied and derelict land used for children and community activities. Connected communities support independence.
- **Reduced traffic:** Roads should be safer with less cars and increased traffic calming. Traffic has an impact on where children play, walk and cycle. Children recognise the effects of heavy traffic; including congested streets, parking difficulties, noise and air pollution

The then Minister of the Environment, Mark H Durkan MLA, and Deputy Lord Mayor of Belfast, Cllr Maire Hendron and senior policy makers celebrated the 2014 project in a similar event in City Hall.



Surveys – school pupils and public consultation

In spring, 2014 Belfast Healthy Cities undertook a survey with schools in Belfast, disseminated through the then Belfast Education and Library Board, as another method of identifying children's priorities. The survey took the form of a questionnaire adapted from the Spectrum tool developed by Barton and Grant,⁸ asking respondents to rate their neighbourhood in relation to open space, play space, condition and safety of roads and street lighting. The survey also sought respondents' views on priority areas for change.

The survey was targeted at key age groups, including the following:

Primary

Primary 4 (7-8 year olds)

Primary 7 (10-11 year olds)

Post primary

Year 8 (11-12 year olds)

Year 10 (13-14 year olds)

The survey focused on Year 7 and 8 groups, to enable exploration of how the transition to post primary school affects young people's views and priorities. In total 1,200 responses were received, covering schools across the city.

Findings indicate that the survey corroborates and strengthens the findings of the Shaping Healthier Neighbourhoods for Children project. Responses show a strong preference for more open and green space and safer, cleaner streets.

The same survey questionnaire was used to engage the public through a series of sessions in shopping centres across Belfast, which sought in particular to engage the adult public, including parents. In total almost 200 responses were received through sessions held in April-May 2014 in CastleCourt in the city centre, the Kennedy Centre in West Belfast, Connswater shopping centre in East Belfast, Cityside shopping centre and the Asda store in North Belfast.

KidsSpace

KidsSpace is a pop up event, which explores the creation of child friendly space in the city centre. Since 2011, KidsSpace has taken place in a variety of locations across the city centre, including St Anne's Square, Buoy Park, Writer's Square, Belfast City Hall front lawns, Urban Soul, May Street and vacant units in CastleCourt and Victoria Square shopping centres. It has become a key event in the annual Culture Night programme, and has contributed to greater visibility for children's events within the Culture Night programme.

The aim of KidsSpace is to encourage children and families to take ownership of public space. Activities such as arts and crafts, dance and puppet theatre are offered to encourage children to engage with the space, along with flexible

play equipment and pavement chalk. The events have attracted an average of 1,000 children and families, and have also been used as a platform for public engagement on child friendly places through art based consultation exercises.

Findings

The overarching finding from the consultation is that more child friendly space in the city centre would encourage families to visit the city centre more often and stay longer, benefiting the retail sector and civic ownership of the city centre. Priority wishes from children and their families include modification of existing provision, for example through increasing the amount of green space and increased usage of existing green and open space, interactive public art and programmed family activity.

Some comments from parents include:

Anna (mum) said that she doesn't 'come into town often but will do if something special is on for the kids like KidsSpace to do, otherwise it's a hassle'.

Lorraine (mum) would like more nights like KidsSpace. 'I don't come into town unless something special is on – I would like more free stuff like this for kids to do.'

Claire (mum) would like to see 'more events like KidsSpace where adults and kids can have fun together in the city.'

Turlough (father): 'There needs to be more dedicated child friendly spaces, Belfast has good space which should be utilised better'

The overall conclusion from consultation with participants is that creative use of the existing environment can significantly strengthen the attractiveness of Belfast city centre as a destination for families. Participants also noted that comparatively small scale initiatives, such as providing interactive public art, can have a significant impact.

A report on KidsSpace can be accessed at:

<http://www.belfasthealthycities.com/sites/default/files/KidsSquareReport.pdf>



Planning my City

An additional model of engagement took the form of a four day 'Planning my City' event which was held in the Ulster Museum between 28–31 October 2014. The event focused on the role that the built environment and urban planning play in children's lives. A miniature city model was developed and the event centred around mini workshops supporting children to plan and build their own city using key planning principles. This was a partnership project with Belfast Healthy Cities, Ulster University, Queen's University Belfast, Bricks for Kidz and Royal Town Planning Institute (RTPI). The event formed part of the UK wide RTPI centenary programme and contributed to an increase of an estimated 23% in the Museum's visitor numbers compared to the same period in 2012 and 2013.

More information can be accessed at:

<http://www.belfasthealthycities.com/%E2%80%98planning-my-city%E2%80%99-rtpi-centenary-event>

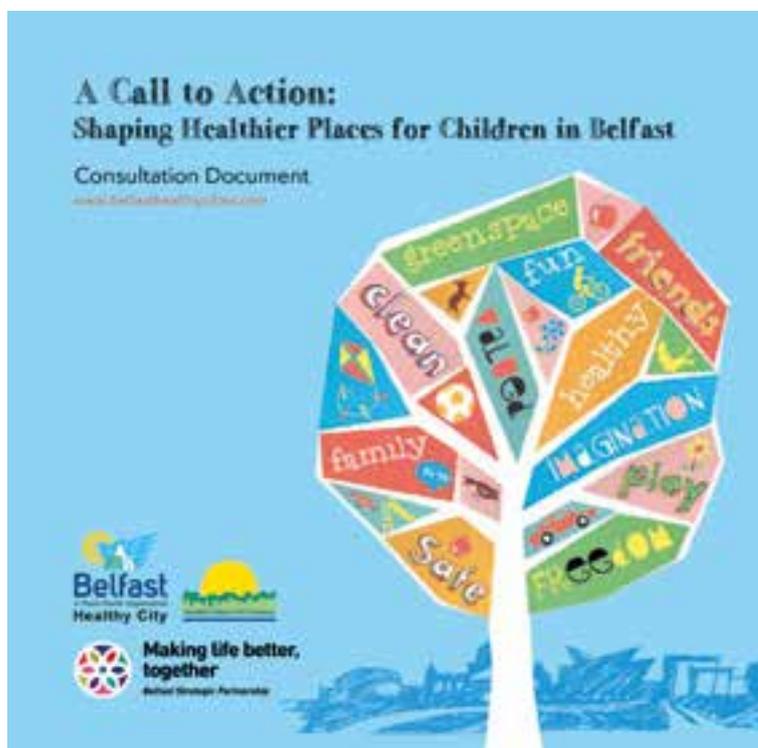
Streets Ahead

In October 2012, Belfast Healthy Cities presented a variety of child friendly approaches in relation to place to the DSD Belfast Streets Ahead team. This presentation demonstrated how the child friendly approach has been successfully implemented in other cities using new architecture but also adapting existing infrastructure.

This presentation can be accessed at:

www.belfasthealthycities.com/sites/default/files/publications/Child%20Friendly%20Places.pdf

5. 'A CALL TO ACTION: SHAPING HEALTHIER PLACES FOR CHILDREN IN BELFAST'



Stakeholder consultation

The public consultation 'A Call to Action: Shaping Healthier Places for Children' took place in May - June 2015. The document can be accessed at:

<http://www.belfasthealthycities.com/sites/default/files/publications/Call%20to%20Action%20Final%20.pdf>

The purpose of the 'Call to Action' consultation document was to identify stakeholders' perspectives on developing child friendly places and to seek organisations view on:

- The overall approach to deliver Child Friendly Places
- Place inequalities
- The indicative actions outlined
- Additional priorities and
- Willingness to deliver actions to meet the children priorities



Overall, the feedback from individuals and organisational responses on the Child Friendly approach was positive and supportive:

- There was a general consensus on the approach and the importance of engaging and empowering children with child centred planning and design mechanisms.
- Responses reinforced the need to include children within the community planning process/emerging Belfast Agenda.
- There was a general agreement that the indicative actions would improve the lives of children and make Belfast a better place for people of all ages.
- Addressing place issues was seen as a core element of tackling health inequalities.

A list of respondents is available in Appendix 3

Children's consultation on the Call to Action

A children's version of a Call to Action was developed and distributed to children through primary schools, with the support of the Education Authority. Schools were offered consultation sessions with Belfast Healthy Cities staff, and this was taken up by five schools and an after school club. In total 150 children in Primary 5, Primary 6 and Primary 7 classes took part in the following schools across Belfast:

- Currie Primary School
- Fane Street Primary School
- Malvern Primary School
- Our Lady's Primary School
- St Joseph's Primary School
- Suffolk after-school club

Each child identified 3 priority actions. The table below demonstrates the priority actions as identified by the children:

- Clean city
- Safer city
- Traffic risks/air pollution levels
- Children have a say
- Children's activities in all festivals
- Test a place in Belfast to be Child Friendly
- Map where children live
- Fun ways to use public space/greenspace/temporary spaces
- Map walking and cycling paths to school
- Joined up walking paths
- Tool to help decision makers make better places for children
- Learning resource

6. KEY CONCEPTS AND DEFINITIONS

CONCEPTS

What is child centred planning & design?

Child centred planning is about the need for planning authorities and professionals to consider children as a way to create inclusive and equitable places. There are a number of reasons why it is important for children to be included in decisions such as those for land use planning. In particular, two main motivations include: to better understand children's lives so their needs can be better taken into account; and to directly engage them in the development process.¹⁰

Understanding children's needs can significantly help address traditional assumptions around who has an interest in planning, including the idea that 'adults know best'.¹¹ Including children in decision making on the built environment is important not only to reduce risks to children's health and wellbeing, but also to support inclusion of children in public life and public spaces as a major population group in society.

What do we mean by a healthy urban environment?

The urban environment means our cities, towns and neighbourhoods. It includes where we live, shop, work, learn, play and interact. It also includes places we think of as natural, such as green open space and rivers, which have been heavily influenced by urban development.¹²

Where we live and the conditions in which we live, has a significant impact on our health and wellbeing. Access to high quality housing in safe neighbourhoods, green spaces, strong communities and good transport systems all contribute to positive health and wellbeing. In an urban environment, factors which affect health outcomes include: air pollution, traffic, noise, lack of space, poor housing, urban design which can lead to feeling unsafe and insecure, stress and mental ill health, exposure to infections and limited options for physical activity. Urban design can also contribute to anti-social behaviour and absence of neighbourliness.¹³

There is a link between the built environment, health inequalities and health outcomes. The rise in diseases associated with inactive lifestyles, including Type 2 diabetes, obesity and respiratory problems are strongly linked to where and how we live. Differential access to good housing, employment, education and training, open space and affordable, nutritious food is a key element of health inequalities between areas and population groups.



A healthy urban environment is one that allows people to lead active lives, access jobs, education and services, socialise and participate in society and choose healthy lifestyles. Healthy Urban Environment (HUE), developed by the World Health Organization (WHO) European Healthy Cities Network since the late 1990s, is a concept that aims to highlight how the physical environment affects people, their lives and their health and wellbeing. It seeks to identify and demonstrate ways in which sectors including design and planning, transport, housing and green space can take a greater focus on people and their health and wellbeing and thus address inequalities.¹⁴

A key focus of HUE is to support and encourage decision makers to ensure that spatial plans, initiatives and projects consider health issues at an early stage, as they typically have a long life span. In practice, the Healthy Urban Environments programme of the WHO Healthy Cities Network focuses on building capacity among professionals, collating and sharing evidence of effective and promising practice, and developing models of good practice through innovation and demonstration projects.

What is a Child Friendly Place?

A good city for children has been described as one in which children of all abilities can grow and develop to the extent of their powers; where they can build their confidence and become actively engaged in the world; yet be autonomous and capable of managing their own affairs.¹⁵

A healthy community for children, in turn, has been described as one that raises healthy children who maintain their involvement in community and love for nature into adulthood, and transmit these values to their own children.¹⁶ When children are able to move about a city safely, to play outdoors with peers, to mix with people of different ages and incomes, and to observe and appreciate nature, then a city becomes a good one for all of its residents. A good community for children is a good community for everyone.^{17,18}

A child friendly built environment welcomes children of all abilities and supports their needs. It respects their rights as citizens to access community services and facilities and to participate in community development processes.

Child Friendly Cities as a concept has been developed by UNICEF since the 1990s and a Framework for Child Friendly Cities was published in 2004. The most fundamental aspect of a UNICEF Child Friendly City is to guarantee children's rights to essential services, most notably: health; shelter; adequate sanitation and protection from violence and exploitation. Additionally, it calls for young people and children to express their opinions on the city and make decisions on how specifically they would improve their city and participate in community activities, thus empowering them as individuals and making them a participatory and therefore valued member of their community. The initiative implores the fact that children have the right to walk the streets by themselves safely, to meet friends and play in a green, unpolluted environment; they should in no case ever be the victim of discrimination.¹⁹

A child friendly built environment contributes to implementing the UN Convention on the Rights of the Child (1989).²⁰ A child friendly built environment supports the right of every young person under the age of 18 years to:

- Influence decisions about their environment (Article 12)
- Express their opinion on the environment they want (Article 13)
- Participate in family and social life (Article 9 & Article 31)
- Receive basic services such as health care, education and shelter (Articles 24, 27 & 28)
- Drink safe water and have access to proper sanitation (Article 24)
- Be protected from exploitation, violence and abuse (Article 19)
- Walk safely in the streets on their own (Article 34 & 35)
- Meet friends and play (Article 15)
- Have green spaces for plants and animals
- Live in an unpolluted environment
- Participate in cultural and social events (Article 31)
- Be an equal citizen of their community with access to every service, regardless of ethnicity (Articles 22 & 30)

DEFINITIONS

Liveable Places

A liveable city contains complete communities with mixed use and affordable housing close to shopping, employment, and cultural centres. Its transportation networks are pedestrian friendly. It has a vital core with public spaces and economic activity, as well as green spaces such as agricultural lands and parks. Such an environment will best meet the social needs of children and the broader community. By creating communities that are responsive to the needs of children community planning can result in communities, towns, and cities that are economically, ecologically and socially beneficial.²¹ If families spend more time in a city they are likely to spend money, contributing positively to the economy. Feedback from consultation with parents attending Belfast Healthy Cities KidsSpace events indicates this.²²

A liveable city fosters contact with nature and opportunities to walk, cycle and participate actively in a community's social life, thereby improving the health and well-being of adults and children.

Child friendly cities thrive because people require the same basic things, like an accessible environment and rich social life. Some ideas that foster child friendly liveability include: (i) designing buildings, roads, parks and street furniture to inspire imagination, invite exploration, and serve multiple uses; (ii) planning social spaces such as cafés, shops, and libraries so that they are within walking or cycling distance of



residences; and (iii) creating an inclusive environment where people of different age, race, and income groups can live together and learn to appreciate each other's values and differences – all of these ideas contribute to liveable and connected communities.²³

Green space

Green space is any vegetated land or water within an urban area. This includes: parks, gardens, playing fields, children's play areas, woods and other natural areas, grassed areas, cemeteries and allotments, green corridors like paths, disused railway lines, rivers and canals.²⁴

Green space has a role to play in improving wellbeing and treating mental ill-health. Regular access to natural environments has been shown to have a number of positive benefits for mental health and wellbeing for all ages. Green space also plays a role in tackling air pollution, which as outlined in Chapter 2 is a significant health risk.

Green spaces encourage physical activity and free play, which is critical to tackling obesity. Children in greener neighbourhoods have lower Body Mass Index.²⁵ Green spaces also act as meeting places for people of different ages and population groups, and can contribute to social cohesion.

Open space

In land use planning, urban open space is defined as open space areas for parks and other open areas. The landscape of urban open spaces can range from playing fields to highly maintained environments to relatively natural landscapes and also public realm spaces.²⁶

Increasing urbanisation has left children with fewer opportunities than previous generations to play freely outdoors and experience the natural environment. Good quality public spaces including well-designed school grounds can help to fill this gap, providing children with opportunities for fun, exercise and learning.²⁷

Children's access to play and recreational activities is recognised internationally as a fundamental human right. Article 31(1) of the United Nations Convention on the Rights of the Child (UNCRC) states 'parties recognise the right of the child to rest and leisure, to engage in play and recreational activities appropriate to the age of the child and to participate freely in cultural life and the arts'.²⁸

Play is crucial for many aspects of children's development, from the acquisition of social skills, experimentation and the confrontation and resolution of emotional crises, to moral understanding, cognitive skills such as language and comprehension and of course physical skills. However, increasing urbanisation has left children with fewer opportunities than previous generations to play freely outdoors and experience the natural environment.²⁹

Fear of crime and to a much lesser extent crime itself, can deter people, not just vulnerable groups, from using even good-quality public spaces.³⁰ Children and young people, for example, are often prevented from using parks, squares and streets because of their parents' fears about crime. Physical changes to and the better management of public space can help to allay these fears. Such changes can help everyone to make the most of public spaces.

Clean and safe environments

A liveable city is clean, contains attractive streetscapes and public facilities. It fosters individual unique community identities that make the city as a whole special.

Community pride encourages community cohesion and social networking; in other words it is about creating places where residents regularly cooperate and interact with each other. Community attractiveness and identity also cultivate friendliness and consideration, where positive personal interactions between people (including residents, employees, and visitors) contribute to community liveability.³¹

Strong civic pride is essential for a community to be able to adapt and meet its needs. When individuals feel strong civic pride, they are driven to take actions that either improve or support the well-being of the community. Those who witness displays of civic pride are encouraged to follow suit, adding to the momentum. Civic pride attracts new investment in the community and local economy, and is necessary for keeping local businesses in business. Civic pride discourages litter, graffiti and criminal activity and increases the property values of homes and businesses. Just as important, civic pride helps support the education system and creates an atmosphere for volunteerism and personal responsibility.³²

Having a safe neighbourhood is important for positive child and youth development. Communities and neighbourhoods that are perceived to be unsafe are also typically associated with higher rates of deprivation and associated issues, including infant mortality and low birthweight, antisocial behaviour and lower school readiness among preschool children. Conversely, children who live in highly supportive neighbourhoods have positive outcomes such as stronger connections with family, peers and community and greater participation in out-of-school activities.³³

Reduced/calmer traffic

Traffic calming refers to interventions designed to control traffic speed. It is most often implemented in urban areas and can be used to reduce the number of car-borne commuters using residential streets and the speed of the remaining traffic.³⁴

Routes to and from parks and schools and throughout a community can be made safer for children and encourage safe travel by implementing more of the following:

- Traffic calming measures, lower speed limits, speed cushions
- Zebra, puffin, pelican or toucan crossings
- Central refuges
- Paths exclusively for cyclists & pedestrians³⁵



7. THE BUILT ENVIRONMENT AND IMPACT ON CHILDREN'S HEALTH

Physical activity

Physical activity contributes to preventing the main chronic conditions and diseases including cardiovascular disease, diabetes mellitus, some cancers and obesity. It also contributes to mental wellbeing. Recent evidence shows that the impact of sedentary lifestyles on health and wellbeing may be more significant than the impact of obesity, highlighting the importance of encouraging physically active lifestyles for people of all ages.

Children who are active will:

- Have stronger muscles and bones
- Have a leaner body because exercise helps control body fat
- Be less likely to become overweight
- Decrease the risk of developing type 2 diabetes
- Possibly lower blood pressure and blood cholesterol levels
- Have a better outlook on life
- Besides enjoying the health benefits of regular exercise, children who are physically fit sleep better and are better able to handle physical and emotional challenges³⁶

National Institute for Health and Care Excellence (NICE) recommendations refer to opportunities for moderate to vigorous-intensity physical activity. Children and young people should undertake a range of activities at this level for at least 60 minutes over the course of a day. At least twice a week this should include weight-bearing activities that produce high physical stresses to improve bone health, muscle strength and flexibility. This amount of physical activity can be achieved in a number of short, 10-minute (minimum) bouts.³⁷

Play is an important element in physical activity for children 13 years and under and for a percentage of this age group, play will contribute to some form of physical activity. Play is a spontaneous and active process in which thinking, feeling and doing can be inventive and creative.³⁸

Play is an excellent way to:

- Improve physical activity
- Prevent obesity
- Promote mental wellbeing
- and overall health and wellbeing

Internationally, the importance of play is also recognised and enshrined in the United Nations Convention on the Rights of the Child (UNCRC). Article 31 of the UNCRC states that the child has the right to play and to join in other recreational activities.³⁹ Tackling sedentary lifestyles is particularly important, as the habits

nurtured in children tend to shape adult lifestyles. Sedentary behaviour in childhood therefore predicts sedentary lifestyles among adults.

The built environment is an important determinant of physical activity behaviour. It can provide the opportunities, support and choices or barriers to being physically active.

Features of the built environment which have an impact on physical activity include:⁴⁰

- Location, density and mix of land use, street layout and connectivity
- Physical access to public services, employment, local fresh food and other services
- Safety and security
- Open and green space
- Affordable and energy-efficient housing
- Air quality and noise
- Resilience to extreme weather events and
- Climate change
- Community interaction
- Transport

Several studies have shown a positive association between access to natural environments and increased rates of physical activity for all ages.⁴¹ Physical activity can help obesity, mental health and overall health and wellbeing.

Mental health and wellbeing

Anyone can be affected by mental health issues, irrespective of age, gender, socio-economic status, or ethnic group. Epidemiological evidence indicates that 20% of children will develop a significant mental health problem. This can impact on day to day coping, educational attainment and may have lifelong impact. The direct and indirect costs associated with mental illness are significant; estimates suggest the total cost is around £2.8 billion in Northern Ireland.⁴²

A study of GP records in the Netherlands indicated that the annual prevalence rates for 15 of 24 chosen disease clusters was lower where there was more greenspace within 1km. This correlation was strongest for anxiety and depression. The correlation was also stronger for children than for adults.⁴³



Evidence demonstrates that regular access to natural environment has been shown to have a number of positive benefits amongst children:

- Reduced symptoms among children with ADHD and increased concentration and self-discipline among inner city girls⁴⁴
- Enhanced emotional and values-related development in schoolchildren⁴⁵
- Reduced stress in children in rural areas⁴⁶
- Children's perception of their neighbourhoods in terms of the trustworthiness or honesty of the people who live there or feeling safe walking alone has a strong association with childhood mental health⁴⁷

Obesity

The prevalence of people who are overweight and obese has been steadily rising in Northern Ireland, in line with the western world, over the last few decades. It has been described as an "obesity time-bomb"; given the impact that obesity can have on physical and mental health and wellbeing.⁴⁸ The financial costs of obesity are high, and rising rapidly as the prevalence of obesity increases. Making precise or comprehensive estimates of the cost is difficult but is estimated to amount to billions of pounds each year.

Almost one in five children in Northern Ireland is overweight by the time they start primary school. The British Health Foundation figures reveal nearly 20% of children are now overweight, or even obese, before they reach just five years of age⁴⁹ rising to 29% of children in Year 8 (aged 11-12).⁵⁰

Obesity can affect a child's growth and development. Children and young people who are overweight or obese are also at increased risk of developing negative health factors that contribute to heart disease and include raised blood pressure, blood cholesterol and blood sugar. Obesity in childhood can also be linked to many other factors including social and psychological bullying, low self-esteem, and depression. In fact, the immediate consequence of being overweight, as perceived by children themselves, is social discrimination and low self-esteem. These can have a significant impact upon their future health and wellbeing, especially in relation to mental health.⁵¹

A child who is overweight or obese is more likely to take this into adulthood. The health conditions associated with obesity will be carried into adulthood and increase the likelihood of developing disease where obesity is a contributing factor. Not only that, but it is likely that the manifestations of these diseases are more likely to occur at a younger age than if the adult did not have existing overweight or obesity issues. Adults who have been obese since childhood are at a greater risk of suffering weight related ill health and have a higher risk of facing an early death than those who may have only become obese later in adulthood.⁵²

Road traffic incidents

Traffic is the biggest non-medical cause of death for UK children and the leading cause of death in children aged 5 to 14.⁵³ Each week on Northern Ireland roads, 4 children are involved in traffic incidents and hurt while on foot.⁵⁴ Children in the most disadvantaged areas are most at risk: children in the lowest socio-economic group are more than four times more likely to be killed on foot than those in the highest group.⁵⁵

Slowing down to 20mph in communities is critical in protecting children and other vulnerable road users, because it gives drivers a better chance of stopping in time in an emergency. 20mph limits have been shown to be highly effective in improving safety especially for children on foot. The introduction of 20 miles per hour (mph) zones in parts of London has resulted in a 50% reduction in road accidents over a ten-year period.⁵⁶ Reduction in traffic is also essential to promoting play and the health benefits associated with active play.

Outdoor air quality in the UK is mainly affected by traffic, although in some areas emissions from solid fuel heating and in some cases industrial emissions are also present.⁵⁷ Exposure to harmful pollutants can reduce life expectancy and heighten the ill effects of some respiratory conditions. WHO has linked transport-related air pollution to numerous health impacts, including mortality, asthma, rhinitis, cardiovascular disease, cancer, adverse pregnancy and birth outcomes and decreased male fertility.⁵⁸ Significantly, poor air quality has been found to be associated with socio-economic status, with people living in deprived areas more exposed to air pollution.

Chemicals in vehicle exhaust are harmful to asthmatics; asthmatic children are particularly sensitive to air pollution. In Northern Ireland 182,000 people (1 in 10) are currently receiving treatment for asthma. This includes 36,000 children and 146,000 adults.⁵⁹ Exhaust fumes can adversely affect lung function and may promote allergic reactions and airway constriction. All vehicles, especially diesel engines, emit very fine particles that deeply penetrate lungs and inflame the circulatory system, damaging cells and causing respiratory problems. Even short-term exposure to vehicle exhaust fumes may harm asthmatics.⁶⁰

Noise

A WHO report⁶¹ states that each year Europeans lose at least one million healthy life-years due to disability or disease caused by traffic noise, an estimate which is said to be conservative. The new calculation includes data that measure exposure to traffic noise and its impact on health related to cardiovascular disease, cognitive impairment in children, sleep disturbance, tinnitus, and annoyance.



Environmental triggers such as traffic noise may impact a child's brain during important developmental periods, increase levels of circulating stress hormones or disrupt a child's ability to sleep and concentrate.⁶²

Children are exposed to many different types of noise while at school. Schools may be exposed to high levels of environmental noise, particularly in urban areas. Sources include road traffic, trains, aircraft and construction noise.⁶³ Research indicates that traffic has a negative impact on children's learning. In relation to academic learning and performance older primary school children around 11 years of age, appear to be more affected by noise than the younger children.⁶⁴

Previous studies have found an association between exposure to road traffic and aircraft noise at school and child learning problems, though little research has focused on motor vehicle noise at home.⁶⁵ However, a study carried out in Munich⁶⁶ indicated that children's exposure to road traffic noise at home may be related to increased hyperactivity.

Age friendly places

The world is experiencing a rapidly ageing population. Recognising this trend in 2005, the World Health Organization (WHO) Global Network of Age-friendly Cities and Communities was established. Its purpose is to provide a new approach to ensure older people's needs are met and promote active ageing. Its focus is on creating an environment where older people continue to participate in social, economic, cultural, spiritual and civic affairs.

An age-friendly environment supports older people to use their local neighbourhood. Creating a barrier free built environment will create possibilities for improved connectivity, enhancing opportunities for social contacts and physical activity levels.

It is essential that planners, policy makers and developers design cities that take account of the interests of both age groups – children and older people as they are too often marginalised in current policy and design process. They are hugely important groups and often cities that meet the needs of children and older people meet the needs of everyone.^{67,68}

Leadership and governance for Age-friendly Belfast is provided by Belfast Strategic Partnership (BSP), which is a collaborative multi-sectoral partnership that aims to reduce life inequalities in Belfast.

The Healthy Ageing Strategic Partnership (HASP) co-ordinates the delivery of the 3-Year Age-friendly Belfast Plan 2014-2017, which has three themes Age-friendly image, Age-friendly lives and Age-friendly neighbourhoods.

8. PLACE INEQUALITIES

Physical living conditions are a key determinant of health, and poor quality environments are a significant risk factor to health and wellbeing. The quality of the environment is closely associated with deprivation; the more deprived the neighbourhood, the more likely it is to have social and environmental characteristics presenting risks to health. These include poor housing; higher rates of crime, poorer air quality, a lack of green spaces and places for children to play and more risks to safety from traffic. Creating a physical environment in which people can live healthier lives with a greater sense of wellbeing is a significant factor in reducing health inequalities. Investing in good physical living conditions, including access to safe and attractive green space and safe walking and cycling routes can significantly contribute to tackling inequalities in health.⁶⁹

The built and natural environment that forms the backcloth to our lives is also an important determinant of health. This is particularly so for population groups disadvantaged by relative poverty, unemployment, low status and disability.⁷⁰

Evidence shows that a disproportionate burden of ill-health associated with the built environment is borne by certain groups within the population.⁷¹

People from the most disadvantaged groups are more likely to be subject to an 'obesogenic' environment, which discourages walking and cycling, perceiving their neighbourhoods to be busier with traffic, less attractive, and less supportive of walking.⁷² They also often disproportionately bear the impacts of car-dominated urban planning practice.⁷³

Disadvantaged children/communities

A report for Environmental Determinants of Public Health in Scotland (EDPHiS) outlines neighbourhood physical design, condition and disadvantage and the impact on children.⁷⁴ Children living in disadvantaged families are often also living in neighbourhoods, which are not well designed. Thus, they suffer from a 'double disadvantage' and the associated cumulative or synergistic risk factors increase the risk of harm.⁷⁵ The norm of car access has meant that children in households without access to a car cannot access play and physical activity facilities, which have been designed and sited to be available to those who do have private transport.⁷⁶ Where facilities that charge entry are successful in a local area, free facilities may be downgraded. Yet the free alternatives of street play, loitering and skateboarding are often prohibited. Traffic accidents are three times more likely to happen to children from the most deprived compared with the most affluent areas, yet these children are the least likely to be travelling in cars.⁷⁷



The quality and frequency of maintenance is often lower in disadvantaged areas.⁷⁸ More greenery and less litter is associated with lower levels of obesity and feeling satisfied with the area⁷⁹ but disadvantaged areas tend to have more litter, fly tipping and may actually require more maintenance because they tend to be more densely settled. Services, such as policing and street lighting, may also be relatively poor, compared to more affluent areas. In addition, fear of traffic can be a strong disincentive to allowing children to play outside and to walking and cycling.⁸⁰

Physical activity

The physical environment can have an extremely important influence on opportunities to be physically active. People from the poorest households are least likely to meet the recommended levels of physical activity. These low physical activity levels are a significant cause of health inequalities, with inactive groups suffering poorer health and living shorter lives than the general population.⁸¹

People from lower socioeconomic groups tend to have poorer access to environments that support physical activity such as parks, gardens or safe areas for play; are less likely to visit green space, and are more likely to live close to busy roads. The local environment appears to be a more important influence on transport-related physical activity (walking and cycling) than recreational physical activity, which may exacerbate social inequalities.

People from lower socioeconomic groups are more likely to live in areas that do not support walking and cycling, but in turn are more likely to need to walk and cycle for transport and to access employment.

Green infrastructure

Green space has a significant impact on health, mental health in particular, and wellbeing in general.⁸² Green spaces link directly to levels of physical activity, children with more green space are less likely to be overweight and have a lower Body Mass Index. Residents who live 'near nature' in poorer areas cope better with nature and have an innate sensitivity to and need for other living things and a population is generally healthier if it is near green areas

However, green space is not equally available to all of the population, with poorer neighbourhoods often lacking in green space or with poorly maintained or vandalised green areas. The benefits of increases in physical activity and improved mental health only arise where the green space is high quality, accessible and safe.⁸³ Evidence suggests that populations that are exposed to the greenest environments also have lowest levels of health inequality related to income deprivation.⁸⁴

The Marmot review also highlights the importance of the quality of green space, pointing out that some groups, including children, can feel excluded if spaces are not designed appropriately and that poor maintenance or cleanliness can impact more widely on perceptions of safety.

Traffic

Lower socioeconomic groups have higher incidences of injury and deaths from traffic accidents. Several recent studies indicate that children living close to busy roads have an approximate 50% increased risk of experiencing respiratory illness including asthma.⁸⁵

Residents of busy streets have less than one quarter the number of local friends than those living on similar streets with little traffic as social contact between neighbours is low in car-busy residential streets, but high in quiet residential streets.⁸⁶

A study of people living in a deprived housing estate on the outskirts of Glasgow where the main road was traffic calmed showed that 20% of adults walked more after the traffic calming, and there was a statistically significant improvement in physical health.⁸⁷

'Walkable' neighbourhoods help because they are by definition more compact and traffic tamed. Many walkable destinations such as shops, schools etc. encourage exercise through cycle routes, parks, and foot paths, which are a prerequisite for 'active travel' and healthier life styles.⁸⁸

Disability is highly concentrated in the poorest areas

Among children and young people, the lack of infrastructure for play, walking and so on, actually generates ill health and disability, including obesity and mental health problems. Moreover, disabled people's level of physical activity is hampered by access barriers and they require a carefully designed built environment and buildings.

People with physical disabilities are less active and more likely to be sedentary than the general population,⁸⁹ and are also more likely to suffer from poor health and obesity. Poorly accessible neighbourhood environments are likely to hinder people with disabilities more than able-bodied people.⁹⁰



Safety concerns

Low physical activity levels are found among those who perceive their neighbourhood to be unsafe due to crime. Concern about personal safety is a major reason for low levels of walking in disadvantaged neighbourhoods. In one study, European residents in neighbourhoods with high levels of social disorder were about 50% less likely to be physically active and about 50% more likely to be overweight or obese.⁹¹

The lack of play and green space for children in disadvantaged areas is very significant. Parents' fears about safety lead them to constrain their children. Environmental conditions can give strong signals of problems, and fear generates withdrawal from streets and public spaces, particularly by families and the elderly.

A main issue is the lack of space for children to play as they get older with a concentration of environmental problems in the surrounding areas and a sense of insecurity on streets, in parks and play areas.

9. THE IMPACT OF ENGAGING AND EMPOWERING CHILDREN

Working alongside children, treating them as equal stakeholders and valuing their knowledge is now considered a best practice approach to consulting on issues relevant to children. Children are experts about their own experiences and aspirations. Examples of the many benefits of involving children in decision-making are outlined in a Child Friendly Toolkit developed for Victoria in South East, Australia:⁹²

Benefits for children:

- Participating in matters that directly affect them
- Seeing their community in a new way
- Meeting new people
- Developing confidence and sense of self
- Improve their experience in receiving services, increasing potential success of interventions

Benefits for community:

- Developing intergenerational interactions and understandings
- Building a strong sense of community
- Recognising the value of children's contribution to community

Benefits for policy makers:

- Grounding decision making in the reality of children's and young people's experience
- Removing assumptions about who children and young people are, what they need and what they want
- Recognising children's right to participate in community development processes as citizens of their community
- Recognise that how children and young people experience their environments differs from adults
- Development of services that reflect the expressed needs of children, thereby improving access and participation



One of the best ways to develop child friendly places is to involve children in creating them. Ideally this begins with children and young people participating in local government and community processes to help set the agenda for community development. At the very least, children and young people should be involved in community projects and decision making processes as they are developed and designed to ensure they contribute to children's wellbeing.

The New South Wales Commission for Children⁹³ outlines the major benefits of involving children in developing the built environment as:

- Grounding adult understanding and decision making in the reality of children's experiences
- Removing the need for assumptions by adults about who children are, what they need and what they want
- Recognising children's right to participate in community development processes as citizens of their community
- Recognising the value of children's contribution to community development
- Recognising that the knowledge and experience of children and their environments differs from adults

APPENDIX 1

Regeneration and Healthy Urban Environments (RHUE) Working Group Membership

Paul Roberts	Ashton Community Trust
Neil Dunlop	Independent Belfast Healthy Cities Board Member
Anne Doherty	Belfast City Council
Claire Patterson	Belfast City Council
Gary McNeill	Belfast City Council
Bryan Nelson	Belfast Health and Social Care Trust
Kim Kensett/Elma Greer	Belfast Health Development Unit
Joan Devlin	Belfast Healthy Cities
Jonna Monaghan	Belfast Healthy Cities
Laura McDonald	Belfast Healthy Cities
Barbara Megaw	BRO/Department for Social Development
Tom Reid	Department for Regional Development
Nigel McMahon	Department of Health Social Services & PS
Richard Rogers	Groundwork NI
Robin Hawe	Northern Ireland Housing Executive
Rebekah McCabe	PLACE
Caroline Bloomfield	Public Health Agency
Séamus Mullen	Public Health Agency
Geraint Ellis	Queen's University Belfast
Carol Ramsey (Chair)	RTPI/Department for Social Development until September 2015
Justine Daly	Turley Associates until December 2015, now Strategic Investment Board
Gavan Rafferty	Ulster University
Conor McKinney	Ulster Wildlife Trust
Geraldine McAteer	West Belfast Partnership Board

Organisations as at April 2016: Departmental restructure since completed.



APPENDIX 2

Child Friendly Places (CFP) Group – Membership

Paul O'Neill	Ashton Community Trust
Roisin McCooey	Belfast Childcare Partnership
Tom Smith	Belfast City Centre Management
Elaine Black	Belfast City Council
Martina Lundy	Department of the Environment until April 2015, now Belfast City Council
Elma Greer	Belfast Health Development Unit
Margaret Devlin - Hania	Belfast Healthy & Social Care Trust
Joan Devlin (Chair)	Belfast Healthy Cities
Laura McDonald	Belfast Healthy Cities
Lynne McElhinney	Department for Regional Development
Stuart Freeman	Department of the Environment
Jill Trotter	Education Authority Belfast Region
Trevor Murphy	Education Authority Belfast Region
Gill Hassard	National Children's Bureau
Damien Martin	Northern Ireland Housing Executive
Mairead Kane	PLACE
Susan Kehoe	Playboard NI until March 2016
George Kirk	Police Service of Northern Ireland

Organisations as at April 2016: Departmental restructure since completed.

Special thanks are expressed to Jonna Monaghan and Laura McDonald, Belfast Healthy Cities who led the development of this action plan.

APPENDIX 3

Consultation respondents

1. City Centre Management
2. Ligoniel Healthy Living Centre
3. Royal National Institute for Blind People (RNIB)
4. East Belfast Community Development Agency (EBCDA)
5. BHSCT Children's Community Services
6. Linking Generations
7. Belfast Childcare Partnership
8. Belfast City Council
9. Sustrans
10. Big Lottery
11. Department of the Environment (DOE)
12. Belfast Health Development Unit
13. National Children's Bureau
14. Belfast Health and Social Care Trust
15. South Eastern Health and Social Care Trust
16. PlayBoard



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NOTES





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