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14 January 2011

Mr Cathal Boylan MLA
Chairperson
Committee for the Environment
Room 247
Parliament Buildings
Stormont
Belfast BT4 3XX

Dear Chair

Please find enclosed Belfast Healthy Cities' evidence submission for the Committee Stage of the Planning Bill.

Belfast Healthy Cities welcomes the opportunity to provide evidence for consideration during the Committee Stage. We would be pleased to expand on any of the points contained in our submission, should that be helpful.

Yours sincerely

A handwritten signature in black ink that reads "Joan Devlin".

Joan Devlin
Director



Working together for a healthier Belfast

Evidence submission to the Planning Bill Committee Stage

14 January 2011

Belfast Healthy Cities welcomes the opportunity to submit evidence for consideration at the Committee Stage of the Planning Bill. This is a very important Bill, as it will shape not only physical development, but also social and environmental outcomes for the foreseeable future. Because planning has such a major impact for all people and sectors in Northern Ireland, it is vital that the Bill reflects all the key issues.

Our submission focuses on how the Bill can help create not only economic, but also social prosperity and wellbeing for all, and draws on evidence that shows how planning legislation, policy and practice shapes people's health and wellbeing as well as how it affects health and social inequalities. Appendix 1, extracted from our recent publication *Healthy Places: Strong Foundations*, gives a brief outline of the links between land use planning and health. The full publication is enclosed with the submission.

Belfast is a designated Healthy City, and a leading member of the World Health Organization (WHO) European Healthy Cities Network, with a strong track record of meeting WHO goals and objectives. Belfast Healthy Cities is a citywide partnership working to improve health equity and wellbeing for people living and working in Belfast, and responsible to WHO for the implementation of requirements for designated WHO European Healthy Cities. Our focus is on improving social living conditions and prosperity in a healthy way, through intersectoral collaboration and a health in all policies approach. Key partners include Belfast City Council, Belfast Health and Social Care Trust, Bryson Group, Department of Health, Social Services and Public Safety, East Belfast Partnership, Northern Ireland Housing Executive, Planning Service, Public Health Agency, Queen's University of Belfast and University of Ulster.

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 currently provides the secretariat to the Network.

Healthy urban environment (HUE) is a core area of our work and focuses on highlighting how the physical environment impacts on people's lives, health and wellbeing. Our work has focused on collating evidence and building capacity among planners and other built environment professionals, as well as health professionals, on how the built environment affects health and wellbeing.

We would be happy to expand on any of the points in this submission, should that be helpful.

The key points of this submission are:

- **Purpose of the planning system:** – Clause 1 - should be **strengthened by outlining desired outcomes of the process**, which also offers a good basis for steering development in a way that supports the prosperity of Northern Ireland as a whole. Wellbeing and sustainable development are key outcomes that should be reflected throughout this Clause, for example by amending Clause 1(1) to state the function of the Department as being **'to secure proper planning, community wellbeing and sustainable development'**. Sustainable development and wellbeing should also feature as matters to be kept under review, and matters on which surveys can be conducted. Also referring to the duties of the Minister would strengthen democratic accountability, which is important for building confidence in the planning system.
- An outcome focused planning system would also be well placed to **contribute to community planning**. It would be important to **create a strategic link to community planning in the Bill**, in order to facilitate the **most effective operation of both land use and community planning** across the region. An effective linkage, in turn, is important to ensure the best possible outcomes for all in Northern Ireland, whether in terms of ensuring access to services (and from a commercial viewpoint, customers), promoting health and wellbeing, or delivering best value services. The Local Development Plan approach taken offers good opportunities for linkages at the local level.
- **Statements of community involvement and pre application consultation** are important elements of **a transparent and accountable planning system**, and essential for empowering communities for participative decision making. The Bill should include greater detail on the key elements of these engagement processes, as has been done for example in the Localism Bill going through Westminster, and incorporate a duty to take responses into account. It would also be important that the impact and effectiveness of statements of community involvement is monitored, in particular in relation to Section 75 groups and more deprived population groups.

- Incorporating a requirement for **sustainability appraisal** offers potential to ensure **appropriate attention to the impacts and potential outcomes** of Local Development Plans. For planning control, the requirement to assess environmental effects provides similar opportunities. However, consideration should be given to incorporating impacts on people and communities, to help ensure development contributes to sustainable social development. This can be done within a single tool; for example, there may be potential to link sustainability appraisal with elements of Health Impact Assessment. Belfast Healthy Cities has developed considerable experience on Health Impact Assessment and would be happy to expand on this.
- **Third party right of appeal** should be incorporated in order to ensure **transparent, quality decision making throughout the process**, and should be viewed as a complement to the otherwise strong focus on community engagement. The right can be limited and the introduction of fees can be used to deter vexatious or frivolous appeals. There may also be scope for considering planning mediation as an element of the community engagement process, which is not referred to in the Bill at present.
- It would be desirable to consider the strength of wording throughout the Bill, in particular regarding the strength of the duty to take into account instruments such as Departmental policy and guidance, Local Development Plans and statements of community involvement in decision making. This would help create clarity and confidence in the system for all stakeholders. Considering that a substantial amount of detail is deferred to subordinate legislation and guidance, it would also be helpful to establish how long it will take to put this in place.

Key areas of concern and the Clauses they affect

Part 1 – Functions of the Department of the Environment with respect to development of land

Clause 1, subsection 1. This subsection of the Clause states the purpose of the planning system as “securing the orderly and consistent development of land and the planning of that development”. However, this wording serves to separate planning and development from outcomes or impacts of planning and development, and therefore does not utilise an opportunity to shape these outcomes by stating what the desired outcomes are. This is at present outlined in planning policy and guidance, but including the broad, high level aims in the Bill would strengthen opportunities to indeed secure orderly development, but in a desired direction. It would also support a move to a more collaborative approach to planning, as planning as a specific function would have clarity as to what it aims to achieve, in addition to managing the process of planning control.

Belfast Healthy Cities would recommend amending this Clause to reflect the above, as has been done in other jurisdictions. For example, in the Republic of Ireland the stated purpose includes “proper planning and sustainable development”. Sustainable development also features strongly in relation to planning in the Localism Bill recently introduced in the Westminster Parliament. Incorporating definitions of the key terms would further improve clarity.

Belfast Healthy Cities would recommend incorporating ‘wellbeing’ into this section, as a desired outcome of planning, so that subsection 1(1) sets out the Department’s responsibility ‘**to secure proper planning, community wellbeing and sustainable development**’, and to provide policy that secures this in an orderly and consistent way. Both planning and development have very profound impacts on the wellbeing of people, which in turn affects the economic wellbeing of the region as a whole. For example, the recent trend of increasing suburban, low density development has increased reliance on the car. This trend is linked to a fall in physical activity and the rise in obesity, which increases demand for health care, and also reduces productivity throughout the economy. Similarly, the growing number of out of town and edge of town commercial development has reduced the viability of town centres, which is associated with a loss of social cohesion and local identity that support mental and social wellbeing.

Finally, consideration should be given to incorporating a reference to the duties of the Minister, which at present are given no attention. While it is important and helpful to clearly state the functions of the Department, also outlining the duties of the Minister would strengthen democratic accountability and transparency, which are of paramount importance for building trust in the planning system, that in turn is so critical for building sustainable prosperity.

Clause 1, subsection 2. It is to be welcomed that achievement of sustainable development is included as an objective for the Department. Sustainable development is essential not only to protect the natural environment, but also to protect people and communities, and ensure long term economic prosperity. Human health and wellbeing is also dependent on a healthy natural environment, while a successful economy requires a healthy population.

However, Belfast Healthy Cities believes a stronger wording of the Bill would be appropriate, to stress that sustainable development is a priority. For example, the subsection could state ‘**..with the objective of securing sustainable development**’. Indeed, we believe consideration should be given to including sustainable development as a desired outcome of the planning system in subsection 1. As noted above, this has been done in other jurisdictions, and it would create a strong basis for the new hierarchy of plans, which provides clarity and direction for all stakeholders.

It is notable that this reference to contributing to sustainable development is not included in Part 3 on planning control. There appears therefore to be a risk that the provisions of Clause 1 on sustainable development are diluted in the process of planning control and management, and the overall impact reduced. Incorporating a clause similar to Clause 1.2 in Part 3 would help avoid such a situation, and also create clarity.

Clause 1, subsection 4. It is to be welcomed that this Clause incorporates social and environmental characteristics of an area among topics on which the Department can conduct surveys. In particular, the socioeconomic composition and population structure has an influence on what type of development is relevant, and also what type of specific conditions or protections may be required. For example, people in the most deprived population groups areas are more likely to suffer ill health than others, and potentially hazardous development near more deprived areas may compound previous risks and generate additional health burdens, for individuals and society.

This Clause should include wellbeing, for example under subsection (a) as ‘characteristics and wellbeing’. This would help ensure that the information on which planning policy and guidance is based incorporates the fullest possible evidence on what promotes the overall positive development of a given area.

Clause 2. Belfast Healthy Cities strongly supports the requirement for the Department to prepare a statement of community involvement. This is important from the perspective of empowering communities and underpinning participative democracy, both of which strengthen community wellbeing and confidence in public administration. It can significantly help achieve the best possible outcomes of planning policy and planning control, as the knowledge and expertise of people and communities is captured effectively. In addition, engaging people from the early

stages of the process through to decision making is a good way to improve effectiveness, as it can reduce representations at a late stage.

A statement of community involvement can provide an effective link to community planning, which also hinges on greater community engagement in planning and delivering services. The Bill could help create a link by stating how a statement should, or could, link to community planning structures potentially being developed in the next few years.

It would be helpful to include some further detail on the expected content of the statement, formats for engaging people, definitions of relevant communities and groups to be engaged, and arrangements for review. It would also be important to incorporate a requirement to assess the potential impact of the statement, in particular in relation to Section 75 groups and more deprived areas/population groups. Similarly, the effectiveness of the statement should be monitored, in particular in terms of its impact on these potentially vulnerable groups.

The Localism Bill currently going through Westminster Parliament includes considerable detail on citizen engagement, and may provide potentially useful and relevant models.

It may be useful to consider referring to planning mediation in the Bill, which is not included at present. This is a process where an independent party facilitates negotiation on disputes or contested issues/plans, and can help strengthen community engagement, as well as improve the quality and effectiveness of decision making.

Part 2 – Local Development Plans

Clause 3, subsections 1-3. The comments made above in relation to Clause 1.2 apply also to these sections.

Clause 4. As in relation to Clause 2, Belfast Healthy Cities strongly supports the requirement for local authorities to develop a statement of community involvement, and the comments made in relation to Clause 2 apply to this section also.

We also note that subsection 6 provides a useful outline of key considerations in relation to the statement. We would suggest that the same provisions could be stated in a separate subsection dealing with the expectations about what a statement should look like. Clarity of this type could be very helpful and help avoid situations where consultation in different areas is undertaken in very different ways, with the potential for raising disputes.

It would also be important to outline at earliest opportunity to what extent, if at all, how statements developed by local authorities should link to the Department's statement. At minimum, guidance should be provided on the procedure for ensuring

due engagement in cases where the Local Development Plan process (or major applications) is called in by the Department.

We would stress that engagement of communities throughout the process is a vital element for effective and equitable community engagement. A requirement to include in the statement a clear indication of how people's views will shape decision making, and how this will be monitored, goes a long way towards achieving this. In addition, this is a key way of increasing confidence in the system, which both strengthens community wellbeing and improves effectiveness of the system (as representations and conflicts are reduced).

Detailed guidance in relation to statements of community involvement will be required, in particular covering instances of joint plans. This is vital to ensure people in all areas have adequate opportunities to participate and be heard in the process.

Clause 5, subsection 2a. There is a notable discrepancy between the wording of the duty to consider policies and guidance by the Department for Regional Development in this section and section 1.3, in that section 1.3 states "must be in general conformity", while this section states "must have regard to". It would appear appropriate to make the duty in both cases similar, in order to secure consistency across policies. Belfast Healthy Cities believes the stronger wording provides a better basis for securing consistency and clarity, in that it establishes a hierarchy of conformance.

Clause 6. Belfast Healthy Cities supports the structure of Local Development Plans, divided into a plan strategy and a local policies plan. This approach will offer a basis for linking land use planning to community planning, which is important as land use affects the planning and delivery of most public services. It can also create greater flexibility in relation to specific areas of interest.

We note that there is no mention of community planning in the Bill, although the planning reform is intended to run in parallel with local government reform. It would be important to create a strategic link to community planning in the Bill, in order to facilitate the most effective operation of both land use and community planning.

We would also stress that the process of introducing Local Development Plans and associated responsibilities to local authorities will require new skills from local officers and elected representatives. A programme of capacity building is vital to ensure the system operates as accurately and effectively as possible from the outset.

Clause 6, subsection 3. This section creates an expectation that conflicts are resolved in favour of the newest policy. However, it provides no indication of how it can be ensured that for example specific protections are not reduced in this way, without full examination. Clarification of this would be helpful.

Clause 7. There may be scope to consider setting an upper time limit for preparing Local Development Plans, in order to ensure plans remain timely and current, and avoid the potential for confusion caused by lengthy delays.

Clause 8, subsection 2. Comments made above in relation to Clause 1.1 are relevant also to this section.

Clause 8, subsection 3. It would be helpful if the Bill gave more detail on the required form and content of the plan strategy. This would help create a level playing field across the region, and ensure that plans in all areas are developed in a comparable and equitable way. It would also create clarity from the outset and ensure the strongest possible basis for dealing with any issues or concerns that may arise.

Clause 8, subsection 5. The comments made above in relation to Clause 5, subsection 2a apply to this section as well.

Clause 8, subsection 6. Belfast Healthy Cities supports the introduction of a requirement to carry out sustainability appraisal, although it would be welcome to clarify at earliest possible opportunity how this differs from, or relates to Strategic Environmental Assessment. Incorporating this requirement becomes particularly valuable in relation to the independent examination, and can help ensure that sustainable development – in all its facets - is considered appropriately in the plan, as Clause 10 states all requirements under Clauses 7 and 8 must be satisfied.

We understand that detailed guidance on how to apply this methodology will need to be developed separately, but it would be helpful if the Bill gave basic details about the format and content it expects. Again, this would help create an equitable and level situation for all local authorities.

Sustainability appraisal offers potential opportunities to integrate a number of key issues, including health and wellbeing. Belfast Healthy Cities, which has developed considerable capacity on Health Impact Assessment, is currently exploring opportunities with statutory agencies in Northern Ireland to develop such an integrated tool. We would be happy to expand on this at a suitable time.

Clause 9. Comments made above in relation to Clause 8 apply also to this section.

In addition, it would create clarity if the Bill gave a broad outline of the type and/or level of policies local authorities are expected to develop. For example, the English local development plan system includes Area Action Policies, which can make particular provisions for specific areas within a locality, such as areas where very rapid – or very limited – change is to be expected or desired. In addition to clarity, this would create appropriate flexibility both between and within local authorities.

Clause 10, subsection 6. Belfast Healthy Cities supports the provision that any person who makes representations seeking to change a local development plan will

have the right to be heard in person. This safeguards in particular people, and communities, with more limited capacity of submitting written representations, which is important to ensure equity between all population groups.

Clause 11, subsection 1. It would be helpful if the Bill, rather than subordinate legislation, gave an outline of the reasons and circumstances under which a local authority can withdraw a local development plan document. This would create clarity and provide a strong basis for dealing with any disputes that may arise.

As noted under Clause 2, it would be important to also outline at earliest opportunity the procedure in relation to the statement of community involvement and ensuring appropriate opportunities for communities to continue to participate in the process, in these cases.

Clause 13. Including greater detail on the required intervals and formats for review in the Bill would be helpful. This would reduce the scope for very varying interpretations and practices, and help ensure equitable provisions for people across Northern Ireland.

Clause 14. Comments made above in relation to Clause 13 also apply to this Clause.

In addition, Belfast Healthy Cities supports the flexibility granted by subsection 14 (1). It is important, however, that provisions are made to ensure that all relevant persons are made aware of a proposed review, to maximise accountability, transparency and an opportunity for relevant persons to make representations.

Clause 17-18. Belfast Healthy Cities supports the provision for joint plans across local authorities. This can help ensure meaningful development of a larger area, and help reduce the potential for competition of any kind between local authorities.

In relation to Clause 18, greater detail would be helpful on the circumstances in which the Department may direct two or more local authorities to prepare a joint plan. Detailed guidance in relation to statements of community involvement will be required to ensure people across the relevant area have adequate opportunities to participate and be heard in the process.

Clause 20. Comments made above in relation to Clause 5 (2a) also apply to this section.

Belfast Healthy Cities welcomes the inclusion of the Office of the First Minister and Deputy First Minister among Departments whose guidance is highlighted. It would be helpful if any subsequent regulations or guidance highlighted that relevant guidance from OFMdFM also includes policy in relation to equality and poverty. Planning and development can have a significant impact on both equality and

poverty, and ensuring alignment with existing policy in these fields would help avoid unintended outcomes that may result in increasing disadvantage.

Part 3 – Planning control

Clause 25. Belfast Healthy Cities accepts the division of development into major and local, and believes that this will enable appropriate attention to be focused on each development application or proposal. While we appreciate that the detail around the classification must be included in separate subordinate legislation, it would be helpful if the broad thresholds were given in the Bill. Similarly, it would be helpful if the Bill could outline circumstances in which the Department may reclassify a development proposal. This would create clarity and help all interested persons and stakeholders assess the process accurately from the outset.

Clause 27. Belfast Healthy Cities strongly supports the introduction of pre application consultation, which is an important way to inform and involve relevant persons in shaping development proposals, and promoting participative decision making. Pre application consultation can also help ensure that development supports the needs in the relevant area.

Comments made in relation to Clauses 2 and 4 apply also to this section. We would further stress that the Localism Bill currently going through Westminster Parliament includes a significant level of detail on requirements for pre-application consultation, including format, content and acceptable publicity. For example, this Bill incorporates clauses where applicants must be able to contact the majority of people in an area and must provide a statement of how they have responded to consultation. These can provide a ready made and helpful model for Northern Ireland. Incorporating this detail creates both clarity and confidence for the public, and can help create an empowering and inclusive, high quality yet timely planning process.

Clause 28. This section would benefit from greater detail on the required form and content of the report. It would also be important to include a duty on the person conducting the consultation to take responses to it into account in the report. This would strengthen accountability and transparency, and provide reassurance to persons participating in the consultation that it is a valuable exercise. It could also help speed up the application process, by reducing the likelihood of objections at a later date. In addition, such a provision would strengthen the provisions of Clause 50.

Clause 30. Belfast Healthy Cities supports the provision for pre determination hearings. While we appreciate that the detailed procedure cannot be incorporated in the Bill, we would at this stage like to stress that any subordinate legislation or guidance on this should set clear minimum criteria. This would ensure high quality and equitable practice across Northern Ireland, and help build confidence in the

system, while not removing the scope for flexibility and choice by individual local authorities.

Clauses 33-38 – Simplified Planning Zones

Belfast Healthy Cities would welcome clarification in the Bill as to whether making or altering a Simplified Planning Zone, if this does not coincide with the preparation of a Local Development Plan, amounts to a revision of the Plan. In particular, we believe it is important to clarify what external consultation is needed in conjunction with this, so that relevant persons have clarity on how to make representations. This is important also to ensure accountability and transparency, and build public confidence.

Belfast Healthy Cities believes that it is important to exclude conservation areas and areas of natural importance from simplified planning zones, as stated by Clause 38(1). We believe it would be desirable to also make specific provisions for cases where a zone is proposed in an area of high deprivation. While development in itself may not be objectionable in such an area, provisions should offer existing residents mechanisms to be heard and safeguarded against for example large scale decanting, as this will harm established communities, with potential risks for social exclusion, and also create risks to the wellbeing of individuals.

Clause 51. Belfast Healthy Cities supports the requirement to consider environmental effects of a proposed development as part of considering a planning application. We would suggest that consideration is given also to incorporating effects on humans, and in particular equity, human health and wellbeing. This would help ensure that all development contributes to sustainable social and human development, and avoid unintended negative outcomes for people affected by any given development.

Such consideration may take a number of formats. A potentially useful model is Health Impact Assessment (HIA), which provides both a methodology and concrete tool for assessing the potential health impacts (positive and negative) of a proposal, and making recommendations for how to maximise benefits. HIA has been successfully used to inform decision making elsewhere, including in England where an increasing number of regeneration projects and spatial plans incorporate at least some element of HIA. In practice, HIA is often carried out at the request of a public sector organisation, but a key principle of the concept is that all interested stakeholders are involved on an equal basis.

Belfast Healthy Cities has developed considerable experience on Health Impact Assessment, and would be happy to expand on this, should that be helpful.

Belfast Healthy Cities has also led the development of a set of indicators that can be used to monitor how regeneration affects health, equity and wellbeing of local residents. The aim of the set is to help ensure both that regeneration improves health and that regeneration successfully contributes to economic renewal, as the

issues are interdependent: a healthy economy requires a healthy population and cohesive, skilled and engaged communities. It includes both existing and new indicators under a total of five domains, including economic, social, environmental and access issues, plus neighbourhood indicators.

The project has been undertaken with the support of EU funding under the Urbact II fund, by a partnership including Belfast Healthy Cities, Belfast City Council, Belfast Health and Social Care Trust, Northern Ireland Housing Executive, Public Health Agency and the five Belfast Area Partnerships. The indicators are currently being tested and piloted on concrete regeneration proposals in Belfast, including the regeneration of Templemore Avenue School in east Belfast and the housing regeneration in the Village area of south Belfast.

We would be happy to expand also on this model, should that be helpful.

Clauses 58-59 – Appeals

Belfast Healthy Cities note that no reference is made in the Bill to third party right of appeal (TPRA). We believe it would be very important to include provision for this in the Bill. There may be scope to introduce it initially as a transitional provision, while the return of planning powers to local authorities embeds. At this stage, TPRA is particularly important to safeguard a transparent and credible planning system.

Third party right of appeal is important to ensure quality decision making, and helps ensure equitable, balanced and participative decision making by offering relevant interested persons full opportunities to participate throughout the process. As such, it can be seen as complementing the strong emphasis on community engagement in the Bill, and a way of ensuring and testing that development is in the public interest. It can also be viewed as a way of safeguarding the rights of landowners neighbouring a particular proposal site. In addition, the existence of this provision is likely to provide an incentive to invest in pre-application consultation, which can as noted above speed up the planning process.

It is important to note that TPRA can be introduced in a number of formats, including different limitations that help ensure it is used appropriately – for example, limiting the types of development it applies to, the parties who have a right to appeal, and through the use of costs. For example award of costs, or a charge for making an appeal, is likely to deter vexatious or frivolous appeals, and the scaling of fees can be used to strengthen this deterrent.

Alongside provisions for TPRA, it may be useful to also consider referring to planning mediation in the Bill, which is not included at present. This is a process where an independent party facilitates negotiation on disputes or contested issues/plans. It can help strengthen community engagement by offering opportunities to be heard and air concerns for all parties, as well as improve the quality and effectiveness of decision making by reducing conflicts prior to appeal stage.

Clause 75-77 - Planning agreements

In relation to these Clauses on planning agreements, Belfast Healthy Cities notes that no reference is made in the Bill to a community infrastructure levy or similar arrangement. We believe consideration should be given to introducing this, at a time to be specified, in order to increase planning gain. Such a requirement may also help ensure development is well considered; it may be worth noting that the 'ghost estates' in the Republic of Ireland have resulted in costs to the councils within which they are located. In addition, these estates have had impacts on the wellbeing of those residents who remain in these areas, in particular in relation to mental wellbeing.

We also note that the Localism Bill currently going through Westminster incorporates a community infrastructure levy and makes detailed regulations around this.

Appendix 1.

The links between land use planning and health

Drawn from *Healthy places: Strong Foundations*, Belfast Healthy Cities, April 2010. Available at <http://www.belfasthealthycities.com/publications.html>.

Land use planning

Land use planning shapes people's everyday living environment and through it people's health and wellbeing. Land use that supports local services and facilities, green and open spaces and good connectivity can underpin improved health and wellbeing. Through supporting local communities it can also contribute to a vibrant and sustainable economy.

Access, economy and wellbeing

Land use planning can improve access to jobs and services.

Locating key job hubs close to residential areas, as well as integrating good transport links with land use development, improves physical access to jobs, education and other essential services for all population groups. This can strengthen equity, as it reduces or simplifies travel, which can be a barrier for vulnerable groups. In particular it can benefit people from lower socioeconomic backgrounds, who are less likely to own a car but more likely to have low paid jobs.ⁱ

Mixed land use can also improve access by altering perceptions. Especially in more deprived neighbourhoods, mental images of where suitable jobs are located and what places are safe to go to can affect job search.ⁱⁱ

Vibrant places support the economy. Vibrant, active places help sustain existing and generate new local business opportunities, as they increase footfall and people's willingness to spend time and money within the local area. As an example, experiments with pedestrianising town centres in England have indicated increased use and associated economic benefits. Even small businesses can help sustain or regenerate a local high street, through generating footfall to other businesses. Squares can support more informal economic activity, such as markets, which also can be essential for social cohesion and interaction.ⁱⁱⁱ There is also increasing evidence that house buyers are willing to pay a premium for a positive sense of place, and living in a walkable environment with easy access to key services.^{iv}

Places support equity. Economic development of the type outlined above can also have a positive impact on equity, by creating new job opportunities within the local neighbourhood. Local jobs are particularly significant in more deprived areas, because people in these areas may face a range of barriers to employment elsewhere, from transport to personal attitudes. Positive impacts can be maximized when new businesses and workplaces aim to fit within the area, in terms of offering jobs and services that local people can access and benefit from.^v

Sustainable communities

Social networks thrive in local places and economies. Locally available services and public space encourage active use of the neighbourhood. This physical dynamic supports natural social interaction and can strengthen social capital and social cohesion. Greater housing density can create the ‘critical mass’ for supporting local provision.^{vi} Mixed tenure can further support cohesion across socioeconomic groups, which is vital to support wellbeing as well as job readiness across groups. Such ‘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 behavior, which provides public cost savings.^{vii}

Places shape lifestyles. Places that offer local destinations of interest, such as shops, schools, services and greenspace, within a reasonable distance can encourage people to walk and cycle, which is vital for preventing and treating obesity, as well as reducing emissions from motorized travel. Tackling obesity can bring about considerable savings, as it has been estimated that obesity and associated conditions cost the UK economy about, and may cost £50 billion per year by 2050.^{viii}

Urban design and wellbeing

Good urban design supports wellbeing and prosperity. Design that focuses on active uses facing the street – whether this includes shops, cultural and community uses or dwellings with windows overlooking the street – creates a welcoming atmosphere that encourages use of the street. It also contributes to place making, which focuses on integrating land uses in a specific space, in ways that respect and meet people’s needs. In particular, design that encourages active use of urban space generates social life, which is essential to sustain visitor interest and can help underpin economic development and stability.^{ix}

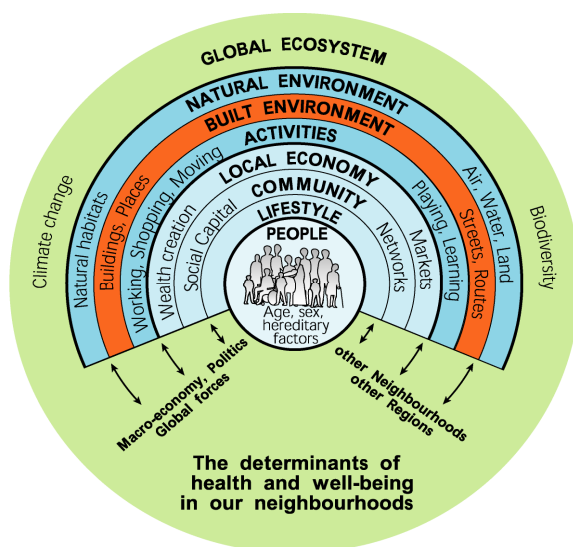
Careful design can improve community safety. Active frontages and streets that are populated for most of the day provide natural surveillance, which can improve both actual and perceived safety. Over time this can reduce anti social behaviour and crime, with associated cost savings for the public sector and police. Safe communities also support mental wellbeing, and are important for social cohesion.^x

What shapes our health?

Health is the result of many factors, which are outlined in figure 1. The figure highlights that living conditions determine health, by shaping the choices people can make. In short, it illustrates that while lifestyle choices ultimately determine health, wider social factors crucially influence them.

The figure shows that the built environment and land use policy are crucial for health and wellbeing. For example, well designed, maintained and safe urban environments encourage people to actively use their neighbourhood and help create strong social support networks. Greenspaces are vital supports for mental wellbeing and can also strengthen the local economy, for example by attracting visitors. A walkable, well connected environment encourages active use of the neighbourhood, including physical activity.^{xi} This supports health directly and can also strengthen environmental health through reducing reliance on cars, which contributes to good air quality and safer roads.

Figure 1. The determinants of health



Source: Barton & Grant 2006^{xii}

What are inequalities in health and how do they arise?

What the figure does not show is how differences in living conditions result in differential 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.^{xiii}

Income and social status are key determinants of equity, or inequality. The level of income has a decisive influence on material living conditions. Social status affects both self esteem and mental wellbeing, and ability to alter those conditions. People on low incomes and in lower social groups are more likely to die young and suffer ill health, primarily because their physical and social living conditions are poorer.^{xiv} There is also increasing evidence that having or perceiving low social status can lead to chronic stress, which contributes to physical health risks. Stress is associated for example with a higher risk of heart disease, diabetes and metabolic syndrome.^{xv}

The built environment can influence health inequalities significantly, although often indirectly. For example, land use that concentrates social housing at the edges of towns and/or with limited facilities and public transport connections may reduce access to work, for people without access to a car. Limited maintenance of the built environment or greenspace can add to the stress of living on a low income. Especially poorly maintained greenspace can negatively impact on people's image of an area and residents' sense of place.^{xvi}

Health and the economy: some figures

A quarter of the Northern Ireland population is obese, and over half is overweight. Figures in England are similar and obesity costs the NHS an estimated £4.2 billion per year.

If current trends continue, it has been estimated that obesity will cost the UK economy £50 billion per year by 2050, through increased need for healthcare, increased incapacity to work and lost productivity at work.^{xvii}

Air pollution reduces average UK life expectancy by about eight months. Each year an estimated 50,000 people die prematurely because of air pollution, which also damages ecosystems.^{xviii}

Around 100 people die each year in road crashes in Northern Ireland. UK wide, the estimated value of preventing all casualties was £17.9 billion, of which about £10 billion involves human costs, £5.6bn damage to property, £2.5bn lost output and the remainder public costs and insurance.^{xix}

In 2007, the Public Accounts Committee found that missed outpatient appointments alone cost the Northern Ireland NHS £12million in 2007.^{xx} Transport problems have been identified as one factor why people miss appointments.^{xxi}

In 2006, 34% of households in Northern Ireland were classified as fuel poor. Fuel poverty is predominantly an issue for lower income and older households: 75% of households with an income under £7,000 were fuel poor, dropping to 25% of households in the £15,000-£19,999 income bracket. In total 43% of households with a head aged 60-74 were fuel poor, compared to 28% of households with a head aged 40-59.^{xxii}

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