

# Institute Responds to DSD Consultation on Cathedral Quarter Masterplans

*17 May 2005*

## **1. Introduction**

1.1. The Institute of Public Health welcomes the opportunity to respond to the following consultations on the regeneration of Belfast City Centre;

A. Draft North East Quarter Masterplan Key Regeneration Principles and Concept Plan – February 2005

B. Draft North West Quarter Masterplan Key Regeneration Principles and Concept Plan – February 2005

## **2. The Institute of Public Health in Ireland**

2.1. The Institute of Public Health is a cross border organisation funded by the Department of Health, Social Services and Public Safety in Northern Ireland and the Department of Health and Children in the Republic of Ireland ([www.publichealth.ie](http://www.publichealth.ie)).

2.2. It aims to improve health and tackle inequalities in health across the island of Ireland.

2.3. The Institute believes that one of the most effective ways of addressing inequalities in health across the island is to ensure that all Government Departments recognise the wider determinants which influence health and maximise opportunities within their policies to improve the health of the population.

## **3. What is Health?**

3.1. The World Health Organisation defines health as “a state of complete physical, mental and social wellbeing not merely the absence of disease or infirmity”.

3.2. It is now well recognised that where people live and work, their socioeconomic, cultural and environmental conditions, social and community influences as well as lifestyle choices have a major influence on people’s health.

## **4. The Links between Urban Planning, Regeneration and Health**

4.1. Urban planning and regeneration of cities influences the social, economic and physical environment. These affect how a city functions and the lifestyle choices people make within the city.

4.2. Urban planning can obviously help reduce infectious diseases and environmental toxins by ensuring good water and sanitation and improving waste disposal and air quality but its effects reach much further. The major diseases of this century are the so called “chronic” diseases, such as, heart disease, diabetes, obesity and depression. These can be moderated by how we design and build the environments in which people live, work and play.

4.3. Urban regeneration and planning can influence health and help reduce disease by providing attractive environments for living and working which;

- Promote positive personal lifestyle choices, such as, physical activity
- Improve social cohesion
- Create job opportunities
- Secure access to services
- Promote safety and the feeling of safety within communities

It is also essential that planning ensures appropriate, good quality housing located near essential services and that the design of the area and buildings will not be detrimental to air quality and will secure good water and sanitation systems and protect residents from excessive noise.

4.4. In summary good urban planning can help secure conditions within cities which are conducive to health and wellbeing and will improve the quality of life of residents.

## **5. The Area for Development/Regeneration**

5.1. The North East and North West quarters of the city comprise and neighbour the communities of the following wards – Falls, Duncairn, New Lodge and Shankill. These are known to be some of the most deprived wards within Northern Ireland.

5.2. All four wards are within the most deprived decile on the multiple deprivation measure of the Noble Indices with the Falls ward being the second most deprived ward in Northern Ireland.

5.3. All four wards are also within the most deprived decile for the income, employment, health and education domains with Falls and New Lodge also within the most deprived decile for the social environment domain.

5.4. These wards have a larger percentage of residents with a limiting long term illness than Belfast District Council or Northern Ireland as a whole . Residents also rate their general health poorer . In addition there is a high number of claims for Disability Living allowance.

5.5. These wards also feature a high number of births to unmarried mothers and a low number of children (aged 3-5) registered with a dentist .

5.6. There are also high levels of unemployment within the area and low levels of educational achievement . The wards have some of the highest rates of notifiable offences within Northern Ireland.

5.7. The Institute feels that it is essential, within any regeneration in this area, that the opportunity is taken to ensure that any developments do not add to the current inequalities experienced by residents and that the proposed plans maximise the potential to improve health and reduce inequalities.

5.8. Whilst the current plans address the economic, tourism and architectural potential of the area they need to be linked with health to ensure that the potential to improve the health status of the population within this area, via the above mechanisms, is realised.

5.9. The Institute feels that the best way to achieve this is via a Health Impact Assessment.

## **6. Health Impact Assessment (HIA)**

6.1. Health Impact Assessment is a methodology which identifies and judges the potential positive and negative health effects of policies and plans in order that positive effects may be enhanced and secured and that measures to mitigate any negative effects may be explored.

6.2. The Institute of Public Health has led a number of developments in HIA, on behalf of the Departments of Health, North and South. This has included the production of guidance on conducting a HIA, two major conferences, the development of a training programme and work to help others carry out health impact assessments. The Institute has also been involved in research looking at the local environment and it's importance in terms of social capital and health and the effects of transport and employment on health.

6.3. HIAs have been carried out successfully on a number of regeneration/land use plans in the UK with positive outcomes.

6.4. An excellent example of this is in the South-East of London where a development had been proposed for Lewisham town centre to bring forward a major high quality, high profile, mixed-use development incorporating retail, residential, commercial, and leisure uses. The Borough of Lewisham is placed within the worst 20% of deprived areas in England.

6.5. A HIA was identified as appropriate to make recommendations on how to encourage and support positive change within the area. The Urban Renaissance Lewisham (URL) board funded Lewisham Primary Care Trust to commission a HIA. Key people such as local residents, community groups and the business community were involved in the process.

6.6. The HIA considered both the construction and operation phase and identified specific areas for which recommendations were made to mitigate negative and maximize positive impacts on health. Some of the key areas identified were;

- Development issues
- Air Pollution
- Noise
- Community safety – specifically looking at ‘designing out’ crime through design lead solutions.
- Access/mobility
- Road Traffic injuries
- Physical activity and access to food
- Community severance

6.7. The strongest theme that emerged from this consultation was communication. As a result the recommendations highlighted the communications actions required for each key theme to ensure all informants were fully aware of all developments.

6.8. Thus we can see that HIA contributes to creating healthy neighbourhoods through sustainable urban design. The Institute, in conjunction with the Investing for Health Team at DHSSPS, has recently produced guidelines on how to undertake a HIA. This could be used as a framework for an HIA on the two master plans in question.

## **7. Summary**

7.1. The Institute feels that a full Health Impact Assessment should be carried out on the plans for the regeneration of the North West and North East quarters of Belfast to ensure that the plans do not negatively impact on health and health inequalities and maximise opportunities for health improvement and reduction of health inequalities in these areas.

7.2. The Institute feels that, in their current state, these masterplans represent an ideal opportunity for this assessment to be carried out. There is clear potential to adapt the plans at this stage in light of any recommendations that may result from the assessment.

7.3. The Institute has produced guidelines on conducting an HIA, in conjunction with the Investing for Health Team at DHSSPS, which gives a suitable framework against which such an assessment could be undertaken.

7.4. The Institute would be happy to engage with the Department of Social Development and other stakeholders in taking forward such a process.

7.5. We welcome the opportunity to participate in this consultation process. If you require any further information or wish to discuss this submission further please do not hesitate to contact us.