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**Health Impact Assessment  
of the bid  
to the  
Big Lottery Fund for the  
Connswater Community Greenway  
in East Belfast**

**Commissioned by Belfast Healthy Cities  
and East Belfast Partnership**

**Report by Erica Ison  
Specialist Practitioner in Health Impact Assessment  
Affiliated to the Public Health Resource Unit, Oxford**

<i>Report Author</i>	Erica Ison
<i>Mapping Exercise</i>	Erica Ison (framework), Maire McCotter (content), Caroline Scott (content)
<i>HIA Project Management</i>	Maire McCotter, Belfast Healthy Cities (BHC)
<i>HIA Project Support</i>	Caroline Scott, BHC
<i>HIA Management Team</i>	<u>Chair</u> : Joan Devlin, BHC Maggie Andrews, East Belfast Partnership (EBP) Yvonne Cowan, Belfast Health and Social Care Trust formerly South and East Belfast Health and Social Services Trust Maire McCotter, BHC Mary McDonnell, Northern Ireland Housing Executive Caroline Scott, BHC Robert Scott, Belfast City Council (BCC) Stephen Walker, BCC Richard Williamson, NIHE
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## 1 Brief Introduction to HIA

Health impact assessment (HIA) has been defined as:

“a combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population and the distribution of effects within the population”.<sup>1</sup>

HIA is undertaken with the purpose of giving decision-makers information about the effects on health and well-being of a specific proposal, and supporting that information with suggestions about how to change and modify the proposal in order to achieve or optimise health gain through:

- Health protection – minimising or avoiding any negative or harmful effects;
- Health improvement – maximising or enhancing any positive or beneficial effects;
- Reducing health inequalities – working with the principle of equity.

In HIA, the effects on health and well-being are identified using both of the main models of health:

- The biomedical model of illness and disease;
- The social or socio-economic model of health and well-being.

Using a balance of both models, it is possible to identify potential health outcomes and trends in health using the socio-economic determinants of health as well as the biophysical and/or environmental. The determinants of health interrogated are usually outlined in an appraisal tool, and prioritised for interrogation according to the contents of a proposal and the conditions and circumstances in which the people affected by the proposal live.

### 1.1 HIA in Northern Ireland

Belfast Healthy Cities (BHC) has been at the forefront of introducing the methodology of HIA into Northern Ireland, and particularly to agencies and organisations in Belfast. Building on their community development work, BHC has pioneered a process of community HIA. In addition, as part of the World Health Organization’s (WHO) Healthy Cities Network, BHC is committed implementing to four cores themes including HIA and Healthy Urban Planning (HUP). As part of this commitment, BHC is one of a few organisations building capacity for HIA in Northern Ireland.

### 1.2 Introduction to the HIA of the bid to the Big Lottery Fund of the Connswater Community Greenway

The East Belfast Partnership (EBP) approached Belfast Healthy Cities for support during the preparation of the bid to the Big Lottery Fund for the Connswater Community Greenway.

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<sup>1</sup> World Health Organization European Centre for Health Policy (1999) Health Impact Assessment: main concepts and suggested approach. Gothenburg Consensus Paper.

A brief scope was drafted for the HIA, which was discussed with the HIA Management Team. The aims and objectives of the HIA are shown in Box

The values for the HIA were suggested as follows:

- Health protection and improvement
- Accessibility
- Sustainable communities
- Social inclusion and community cohesion
- Safety and security
- Environmental improvement/quality

**Box 1.1 Aims and objectives of the HIA**

***Aims***

- To identify the potential impacts on health and well-being of the introduction and ongoing management of the Connswater Community Greenway
- To suggest ways to increase overall health gain from the introduction and ongoing management of the Connswater Community Greenway

***Objectives***

- To provide evidence of the potential impacts on health of the Connswater Community Greenway to the proponents of the scheme to support them in their work
- To consult stakeholders about the potential impacts on their health and well-being of the Connswater Community Greenway and about ways to address those impacts
- To use the combined information from the stakeholder consultation and from the evidence base in the published literature to report to the decision-makers a set of suggestions to improve health and well-being through the introduction and ongoing management of the Connswater Community Greenway
- To use the results of the HIA to contribute to the benefit profiles for the Connswater Community Greenway

It was decided to conduct the HIA on the outputs of the proposal, which are shown in Box 1.2.

**Box 1.2: Key Outputs of the Proposal**

- 10 km of linear park
- 20 km of pedestrian and cycle paths
- 100 public-use bikes and 18 bike hubs
- 3 km of linkages to community facilities – 11 schools, 3 leisure centres, the health centre and a main commercial/retail node
- 37 bridges – 3 landmark, 4 intermediate and 30 small
- Protected habitats for wildlife
- 5.7 km of remediated river
- 1 public square at Holywood Arches
- 38.3 ha of improved parkland
- 1 weir for the regulation of water levels
- Education facilitates and programmes
- 7 Heritage trails
- 1 Eco trail
- 3 year public arts and events programme
- Allotments
- Community engagement officer
- Volunteering programme

In order to assess the potential impacts on health and well-being, it was decided to undertake rapid appraisal techniques, including:

- A desk-top appraisal;
- A participatory stakeholder workshop.

In addition, information useful to the appraisal of health impacts was extracted from the evaluation forms filled in by participants at the series of community consultation events run by EBP.

## 2 Summary Community Profile for East Belfast

To support the conduct of the rapid appraisal techniques used in the HIA, a summary community profile was compiled from information provided in the *Connswater Community Greenway Needs Analysis*, dated April 2006.

The electoral wards in East Belfast in the vicinity of the Connswater Community Greenway are shown in Box 2.1.

- Box 2.1: Electoral wards in the vicinity of Connswater Community Greenway**
- Ballyhackamore
  - Ballyhanwood
  - Ballymacarrett
  - Belmont
  - Bloomfield
  - Carrowreagh
  - Cherryvalley
  - Cregagh
  - Dundonald
  - Enler
  - Graham's Bridge
  - Island
  - Knock
  - Orangefield
  - Stormont
  - Sydenham
  - The Mount
  - Tullycarnet
  - Woodstock

In East Belfast, there are comparatively affluent neighbourhoods adjacent to neighbourhoods where people experience deprivation.

According to the Northern Ireland Multiple Deprivation Measure (NIMDM2005), East Belfast includes:

- one of the 10 most deprived wards in Northern Ireland – Ballymacarrett
- a further three wards that fall within the 10% most deprived in Northern Ireland – Tullycarnet, Woodstock and Island.

In East Belfast, it is estimated that there are:

- 14,981 people experiencing income deprivation;
- 6,378 people experiencing employment deprivation, especially with the loss of jobs associated with traditional industries in the area such as ship building.

Neighbourhoods where people experience deprivation are also those neighbourhoods where people suffer from higher levels of ill health. In the health domain of the NIMDM2005, it can be seen that four of the 20 wards with the highest levels of ill health in Northern Ireland (in the 5% of most disadvantaged wards) are in East Belfast:

- Ballymacarrett;
- Island;
- Mount;
- Woodstock.

With one exception, this list of wards overlaps with that of the deprived wards listed above. In addition, a further three wards in East Belfast fall within the 100 most disadvantaged wards in Northern Ireland with respect to health:

- Orangefield;
- Sydenham;
- Bloomfield.

In East Belfast, according to the Census 2001:

- 23% of people have a long-term limiting illness, health problem or disability;
- 12.9% of people provided unpaid care to family, friends, neighbours or others.

People living in the inner East area of Belfast next to the river:

- Experience some of the highest levels of ill health in Northern Ireland;
- Higher than average numbers of children with a disability;

In a survey of 828 households conducted by East Belfast Community Development Association (EBCDA), it was found that:

- More than one in three households included people receiving benefits as a result of illness;
- One in five households included people who are taking medication for stress, nervous illness or depression;
- Drug and alcohol abuse were regarded as problems in the local area by people in more than one in three households.

In the domain dealing with people's living environment in the NIMDM2005, it was found that:

- Three of the 10 most deprived wards in Northern Ireland are all in Inner East Belfast – The Mount, Ballymacarrett and Island;
- Two of the 10% most deprived wards in Northern Ireland are in Inner East Belfast – Woodstock and Tullycarnett.

The scoring system for this domain includes a "local area problem score" covering:

- Litter and rubbish dumping;
- General graffiti;
- Sectarian graffiti (including painted kerbs);
- Vandalism;
- Dog fouling;
- Scruffy or neglected gardens;

- Scruffy or neglected buildings;
- Vacant or boarded-up buildings;

There is also an overall measure for the visual quality of the area.

Access to green and open space is limited in three of the four Inner East Belfast wards:

- Ballymacarrett;
- The Mount;
- Woodstock.

In the education, training and skills domain of the NIMDM2005, it was found that:

- Three of the Inner East Belfast wards are in the 20 most deprived wards in Northern Ireland – The Mount, Tullcarnet and Ballymacarrett;
- Almost one-third of the wards in East Belfast are ranked in the most educationally deprived in Northern Ireland.

In addition, school enrolment in East Belfast has fallen by 26% over 7 years, and many school buildings are in a poor state of repair.

### **3 Information from the published literature relating to the potential impacts on health and well-being of the Connswater Community Greenway**

In the absence of a commissioned literature review, information in the published literature that was readily available was used to support the HIA. Of the literature reviews available, three main ones were used, as follows:

- Cave, B. and Molyneux, P. (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes and South Midlands Health and Social Care Group.
  - Cave, B. et al (2004) Healthy sustainable communities: What works? Milton Keynes and South Midlands Health and Social Care Group.
  - Barton, H. and Tsourou, C. (2000) Healthy Urban Planning. Spon Press.
- However, other individual references have been cited where relevant.

Information from the published literature has been divided into three sections:

- Section 3.1 covers the health effects of the physical infrastructure relating to the Connswater Community Greenway;
- Section 3.2 covers the health effects of the social and community projects associated with Connswater Community Greenway;
- Section 3.3 covers management and operational issues important to realising the beneficial effects on health and well-being of Connswater Community Greenway.

In Section 3.1, the following subjects are explored:

- Active travel – cycling and walking;
- Landscape: green and open spaces and water;
- Design;
- Community facilities;
- Water quality, surface water and drainage.

In Section 3.2, the following subjects are explored:

- Education facilities;
- Public art;
- Allotments.

In Section 3.3, the following subjects are explored:

- Management and maintenance;
- Co-operation among stakeholder organisations.

Under each heading, a brief outline of the potential effects on health is provided, together with some pointers for healthy urban planning.

### **3.1 Information relating to the health and well-being effects of the major physical infrastructure associated with Connswater Community Greenway**

#### **3.1.1 Active travel – cycling and walking**

Transport, including active travel, has several features that contribute positively to the determinants of health by providing access to a range of services, facilities and amenities, and by providing the opportunity for social contact and interaction.<sup>2</sup> Active travel also contributes to sustainable development, and promoting a sustainable community.

##### *Effects on health*

Active travel, i.e. walking or cycling, has the capacity to diminish morbidity and mortality within the population for various diseases or conditions:

- coronary artery disease;
- stroke;
- systemic hypertension;
- obesity;
- emotional disorders;
- incapacity associated with ageing;
- osteoporosis;
- diabetes mellitus;
- colon cancer;
- chronic back disease;
- athletic injuries.<sup>3</sup>

Physical exercise reduces the likelihood of developing, and dying from, many of these diseases, and can improve the control of some, e.g. hypertension and diabetes.<sup>4</sup> It can also improve the management of mild-to-moderate mental health problems, e.g. depression and anxiety, although acute anxiety responds better to exercise than chronic anxiety.<sup>5</sup>

##### *Factors to take into account to realise these effects*

- People's propensity to walk is significantly affected by the level of **safety, convenience or pleasure** experienced when walking.<sup>6</sup>
- **Safety** is also a key factor in encouraging people to cycle, especially for children and older people.<sup>7</sup>

##### *Healthy urban planning to encourage active travel*

- Barton and Tsourou recommend a permeable pedestrian and cycling environment as a policy objective for healthy urban planning in order to

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<sup>2</sup> Paragraph 6.1 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>3</sup> Paragraph 6.31 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>4</sup> Paragraph 6.32 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>5</sup> Paragraph 6.33 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>6</sup> Page 135 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>7</sup> Page 135 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

promote accessibility and increase the potential for social contact, interaction and cohesion.<sup>8</sup>

### Cycling

- The World Health Organization (WHO) recommends the creation of a comprehensive network of convenient cycle routes and the development of a safer cycling environment.<sup>9</sup>
- Barton and Tsourou recommend the provision of a strategic cycling network serving the locality as a policy objective for healthy neighbourhood planning, particularly to encourage movement to work places.<sup>10</sup>
- Positive planning for non-car modes of transport can include the insertion of separate or special cycle lanes as cycle routes.<sup>11</sup>
- To encourage and promote use, cycle routes need to give direct access to homes and facilities, be as continuous as possible, convenient and direct, and comfortable (e.g. easy gradients, smooth surface, protection from fumes and intimidation by heavy goods vehicles).<sup>12</sup>

### Walking

- The WHO recommends the creation of a dense network of footways to link all main activities and public transport facilities to ensure safety, directness, ease of use, especially for people who are less mobile (e.g. older people, people who have a physical disability), and the provision of an attractive and secure pedestrian environment.<sup>13</sup>
- The presence of pavements in a neighbourhood is associated with increased rates of meeting physical activity recommendations.<sup>14</sup>
- Minutes of walking and moderate-intensity activity are related to the quality of footways and accessibility of public transportation.<sup>15</sup>
- Pedestrian-friendly design, including pavements, street lighting, and planting, has been found not to encourage motorised transport.<sup>16</sup>
- Important to the potential pleasure and social benefits of walking is the creation of places where it is natural for people to stop and look;<sup>17</sup> the design and provision of streets and places where people can meet increases social contact, with the potential to foster local networks of support, and improve people's quality of life.<sup>18</sup> Casual meetings between people increase and facilitate friendship networks and a sense of

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<sup>8</sup> Table 5.1 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>9</sup> World Health Organization Regional Office for Europe (1997) *Walking and cycling in the city*. Local Authorities Health and Environment Briefing No. 35. WHO: Copenhagen.

<sup>10</sup> Table 5.1 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>11</sup> Page 138 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>12</sup> Pages 136-137 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>13</sup> World Health Organization Regional Office for Europe (1997) *Walking and cycling in the city*. Local Authorities Health and Environment Briefing No. 35. WHO: Copenhagen.

<sup>14</sup> Paragraph 5.39 in Cave et al (2004) *Healthy sustainable communities: What works?* Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>15</sup> Paragraph 5.41 in Cave et al (2004) *Healthy sustainable communities: What works?* Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>16</sup> Paragraph 5.42 in Cave et al (2004) *Healthy sustainable communities: What works?* Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>17</sup> Page 136 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>18</sup> Page 135 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

community.<sup>19</sup>

### Safety

- Barton and Tsourou recommend design for natural surveillance of footpaths and pavements as a policy objective for healthy neighbourhood planning,<sup>20</sup> to increase safety and promote movement by sustainable means.
- Improvements to street lighting reduce crime through both precisely targeted increases, and, in the UK, general increases.<sup>21</sup>
- In the most sophisticated studies, improvements to street lighting have been associated with reductions in crime during the day as well as during the hours of darkness.<sup>22</sup>
- CCTV can be effective in deterring property crime, but the findings are mixed when looking at its effect on personal crime, and public order offences.<sup>23</sup>
- Despite the potentially health-promoting potential of design of the built environment to reduce crime, it is important to bear in mind that linking community safety entirely with design can shift the focus away from the social and political causes of crime.<sup>24</sup>

### Neighbourhood planning

- Barton and Tsourou recommend that in neighbourhood planning neighbourhoods should be seen as part of an urban continuum, in which one neighbourhood merges into another, with free cycling and pedestrian movement through them.<sup>25</sup>

## **3.1.2 Landscape: green and open spaces and water**

### *Effects on health*

#### Green space

- Access to open spaces can increase the level of exercise undertaken in a community, contributing to reducing levels of obesity, cardiovascular disease, diabetes and arthritis (the impact on levels of exercise is most likely to be experienced by children).<sup>26</sup>
- Access to open spaces can increase the level of social contact and interaction, contributing to a reduction in stress-related problems.<sup>27</sup>

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<sup>19</sup> Page 132 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>20</sup> Table 5.1 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>21</sup> Pease, K. (1999) A review of street lighting evaluations: crime reduction effects. In Painter, K. and Tilley, N. (eds) *Surveillance of public space: CCTV, street lighting and crime prevention*. Criminal Justice Press, Monsey, NY.

<sup>22</sup> Pease, K. (1999) A review of street lighting evaluations: crime reduction effects. In Painter, K. and Tilley, N. (eds) *Surveillance of public space: CCTV, street lighting and crime prevention*. Criminal Justice Press, Monsey, NY.

<sup>23</sup> Phillips, C. (1999) A review of CCTV evaluations: crime reduction effects and attitudes towards its use. In Painter, K. and Tilley, N. (eds) *Surveillance of public space: CCTV, street lighting and crime prevention*. Criminal Justice Press, Monsey, NY.

<sup>24</sup> Paragraph 5.37 in Cave et al (2004) *Healthy sustainable communities: What works?* Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>25</sup> Page 134 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>26</sup> Michie and de Rozarieux (2001) *The health impacts of green spaces: a rapid review to support the Mayor of London's Biodiversity Strategy*.

<sup>27</sup> Michie and de Rozarieux (2001) *The health impacts of green spaces: a rapid review to support the*

- Green space including green space on the urban fringe can contribute to health and well-being.<sup>28</sup>
- Green spaces within a striking distance of homes provide the setting for healthy exercise and an inducement to walk or cycle for pleasure.<sup>29</sup>
- The presence of enjoyable scenery in a neighbourhood is associated with an increased likelihood of meeting physical activity recommendations.<sup>30</sup>
- In the presence of a park, people are more likely to report walking for exercise or recreation.<sup>31</sup>
- People who can see trees or green space from their home report higher levels of health and well-being.<sup>32</sup>
- Children who have access to, or sight of, the natural environment have higher levels of attention than those who do not.<sup>33</sup>
- However, criminal, social or psychological aggression, and drug abuse and conduct offences can take place in green spaces.<sup>34</sup>

#### Wildlife habitats

- Wildlife habitats in cities benefit well-being and quality of life through providing an educational and community resource in addition to the value of the habitat itself.<sup>35</sup>

#### Water

- Water is a leisure commodity,<sup>36</sup> and leisure is essential to an individual's psychological health.<sup>37</sup> "Leisure lack" has been equated with a diminished sense of well-being.<sup>38</sup>
- Improvements to urban waterways bring benefits for regeneration, recreation and wildlife.<sup>39</sup>

#### *Healthy urban planning to realise these effects*

- Barton and Tsourou recommend that homes are within 2000 metres of major natural green space.<sup>40</sup>

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Mayor of London's Biodiversity Strategy.

<sup>28</sup> Paragraph 6.11 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>29</sup> Page 140 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>30</sup> Paragraph 5.39 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>31</sup> Paragraph 5.39 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>32</sup> Paragraph 6.12 in Cave & Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>33</sup> Paragraph 6.12 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>34</sup> Michie and de Rozarieux (2001) The health impacts of green spaces: a rapid review to support the Mayor of London's Biodiversity Strategy.

<sup>35</sup> Page 141 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>36</sup> Paragraph 5.7 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>37</sup> London Health Commission (2002) Culture & health: making the link. London Health Commission.

<sup>38</sup> Neulinger (1982) Leisure Studies 1; 53-63.

<sup>39</sup> Paragraph 5.8 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>40</sup> Figure 5.1 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

- For healthy neighbourhood planning, Barton and Tsourou recommend the creation of wildlife habitats.<sup>41</sup>
- Segregated routes for cyclists are desirable when provided as greenways through parks.<sup>42</sup>
- Tree planting is beneficial for health because trees break up and counteract the concentration of pollution in cities,<sup>43</sup> and they can counteract the effects of heat islands in suburban areas (which can be 6-8 degrees Fahrenheit warmer than surrounding areas). Heat islands have two main causes, one of which is the lack of vegetation, especially trees, in urban areas. The effects of heat on health include heat syncope or fainting and heat oedema or swelling,<sup>44</sup> which could be of particular concern in vulnerable people especially those who are older.
- Trees can benefit health in various ways: by improving air quality, by reducing wind speed, by contributing to a supportive microclimate, by providing shelter, by increasing the level of carbon fixing, and by providing a supportive environment for some types of wildlife.<sup>45</sup>
- For healthy neighbourhood planning, Barton and Tsourou recommend structuring open space around watercourses to create habitats and conserve water.<sup>46</sup>
- It is important that any open and green space strategy addresses issues of criminal, social or psychological aggression, and drug abuse and conduct offences which carry a disbenefit for health and well-being. On balance, the London Health Commission advises that the health benefits of parks and open spaces outweigh the disbenefits, if there are policies and management practices in place to overcome barriers (such as fears about safety), and to maximise the benefits.<sup>47</sup>

### **3.1.3 Design of the Greenway, including the public square at Holywood Arches**

#### *Effects on health*

- The design of the built environment is important for people's psychosocial health.<sup>48</sup>
- Good design encourages greater ownership and involvement of communities, and can reduce negative effects such as vandalism, and the under-use of facilities.<sup>49, 50</sup>
- A well-designed built environment will help to foster and reinforce a sense

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<sup>41</sup> Table 5.1 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>42</sup> Page 136 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>43</sup> Page 139 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>44</sup> Paragraph 5.58 in Cave et al (2004) *Healthy sustainable communities: What works?* Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>45</sup> Adapted from Table 5.1 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>46</sup> Table 5.1 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>47</sup> London Health Commission (2002) *Culture & health: making the link*. London Health Commission.

<sup>48</sup> Seymour et al. (2001) *Rapid review of housing and the built environment*. Rapid reviews of public health for London. NHS Executive, London.

<sup>49</sup> Evans and Shaw (2001) *Draft Final Report of a study into the impact of Lottery Good Cause spending in the UK*. Centre for Leisure and Tourism Studies, University of North London, for the Department for Culture, Media and Sport.

<sup>50</sup> Wilson (1987) *The truly disadvantaged: the inner city, the underclass and public policy*. University of Chicago Press.

- of community.<sup>51</sup>
- An aesthetically pleasing environment will encourage people to walk for exercise or recreation.<sup>52</sup>

#### *Healthy urban planning to realise these effects*

- Important elements in planning for social inclusion<sup>53</sup> are as follows:
  - Design that aims to include people of all social and age groups, including children and older people;
  - Design and management that draws on public consultation and involvement;
  - Spaces that have a range of security regimes.
- Spaces that successfully attract social activity are often banal in design or untidy in their activities, such as street markets and allotments. Designers need to be responsive to the use of public spaces and not just the aesthetics.<sup>54</sup>
- The creation of streets and places (e.g. squares, pocket parks or broader streets) where people can stop and look and meet will foster local networks of support will improve residents' quality of life.<sup>55, 56</sup> More people using the public realm will increase the levels of both safety and perceived safety.<sup>57</sup>
- Barton and Tsourou suggest that locally distinctive architecture or townscape that reflects the traditional materials and culture of the area is used as a starting point for design.<sup>58</sup>
- Local sources of traditional building materials, including surfacing materials, normally associated with low energy use, give a sense of place and continuity with the past,<sup>59</sup> which will help to give residents a sense of local identity, which is important to mental well-being.

### **3.1.4 Water quality, surface water and drainage, including the weir**

#### *Health effects of flooding*

Although floods in Britain are typically small scale, short lived and shallow, the health effects can often be very marked:

- premature death;
- clinical problems requiring hospitalisation or consultation with doctors;
- an increase in the use of non-prescription drugs or alcohol;
- depression;
- insomnia;
- low self-esteem;

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<sup>51</sup> Paragraph 6.1 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>52</sup> Paragraph 5.39 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>53</sup> Holland, C. et al. (2007) Social interactions in urban public places. Public Spaces Series. The Policy Press for the Joseph Rowntree Foundation.

<sup>54</sup> Joseph Rowntree Foundation (2007) Public spaces. Research & policy development. Available at: <http://www.jrf.org.uk/public-spaces/> Accessed 27 April 2007.

<sup>55</sup> Page 136 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>56</sup> Page 135 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>57</sup> Page 133 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>58</sup> Page 152 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>59</sup> Page 156 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

- general feelings of ill health.<sup>60</sup>

In a small study in the Thames Region, by the Flood Hazard Research Centre, people from vulnerable groups (e.g. older people, lone parents, people from black and minority ethnic groups, people with a low socio-economic status) reported many health effects as a result of flooding:

- headaches;
- digestive problems;
- lethargy;
- stress and anxiety;
- other problems that contributed to their level of stress including problems with personal relationships, and employment, and feelings of isolation.<sup>61</sup>

There was also a loss of confidence in the authorities and institutions perceived to be associated with providing flood protection and recovery support, and a fear that those authorities/institutions would fail to protect or warn against any future event.<sup>62</sup>

#### *Healthy urban planning for surface water management*

- It is important to safeguard water catchment zones from inappropriate, i.e. polluting, development.<sup>63</sup>
- Barton and Tsourou recommend local, clean road drainage to replenish groundwater as a policy objective for healthy neighbourhood planning.<sup>64</sup>
- Barton and Tsourou recommend that all surface water reach local streams with pollutants removed.<sup>65</sup>
- Barton and Tsourou recommend that where subsoil permits rainwater should be allowed to percolate into the ground to recharge aquifers and avoid the danger of flooding; however, where run-off is inevitable, then swales and holding ponds can be used.<sup>66</sup>

### **3.2 Information about health and well-being effects of social and community projects associated with Connswater Community Greenway**

#### **3.2.1 Heritage trails and Eco trail**

##### *Effects on health*

- “Place-making” is about local distinctiveness. Taking account of the physical and historic context of the area will help to reinforce local identity and distinctiveness.<sup>67</sup>
- A sense of community identity and belonging is important for health and

<sup>60</sup> Paragraph 4.31 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>61</sup> Cited in Paragraphs 4.32 and 4.33 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>62</sup> Cited in Paragraph 4.34 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>63</sup> Page 116 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>64</sup> Table 5.1 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>65</sup> Page 154 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>66</sup> Page 116 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>67</sup> Commission for the Built Environment (CABE) (2007) Actions for housing growth. Creating a legacy of great places. CABE, London.

well-being.<sup>68</sup>

### **3.2.2 Education facilities: indoor and outdoor classrooms**

#### *Effects on health*

- The Organization for Economic Co-operation and Development (OECD) states that the economic importance of knowledge and skills is growing and the social impact of learning is equally significant as economic impact – education, training and learning play important roles in providing a basis for economic growth, social cohesion and personal development.<sup>69</sup>
- Education is positively correlated with employment earnings, and educational attainment in one generation has positive effects on educational attainment in the next – better-schooled parents have children with higher future earnings potential.<sup>70</sup>
- Educational attainment in childhood is linked to a range of improved adult health outcomes.<sup>71</sup>
- People with higher educational qualifications tend to be healthier and have a lower take on social benefits, and education is associated with lower crime, helping young people to remain in school.<sup>72</sup>
- People who have had more schooling tend to be less overweight and engage in more exercise per week than those who are less educated – they are also better able to identify relevant health-related information and use it in a constructive manner, for instance, one year of additional schooling is associated with reduced daily average cigarette consumption.<sup>73</sup>
- Schools can foster values for social co-operation as well as providing meeting places where social networks can intersect,<sup>74</sup> thereby promoting social cohesion and social integration, with the opportunity for social support to develop, and contributing to social capital in the community.

#### *Healthy urban planning to realise these potential effects*

- Integrating and co-locating facilities and human service (e.g. education, leisure, library) delivery has a wide range of benefits from health promotion to service synergies to more cost-effective one-stop-shop models, including extended and full service schools.<sup>75</sup>

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<sup>68</sup> Paragraph 3.3 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist.

<sup>69</sup> Organization for Economic Co-operation and Development (2001) The wealth of nations: the role of human and social capital.

<sup>70</sup> Paragraph 8.28 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>71</sup> Paragraph 8.29 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>72</sup> Paragraph 8.34 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>73</sup> Kenkel (1991) Journal of Political Economy 99; 287-305.

<sup>74</sup> Organization for Economic Co-operation and Development (2001) The wealth of nations: the role of human and social capital.

<sup>75</sup> Adapted from Paragraph 9.6 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

### **3.2.3 Community facilities as a foundation for building social capital**

#### *Effects on health*

- A thriving localised community life needs appropriate facilities and meeting places – neighbourhood resources are important for building and sustaining networks, developing trust and economic participation, and have an impact on residential continuity, interaction and socialising with fellow residents; it also helps to facilitate identity, pride in an area, and can have a direct influence on some forms of antisocial behaviour.<sup>76</sup>

#### *Healthy urban planning to realise these potential effects*

- Good local services and facilities are essential for quality of life and the willingness of people to stay and invest in an area – they are central to sustainable local communities.<sup>77</sup>

### **3.2.4 Community engagement officer**

- Public consultation and involvement are key means of empowering local communities and of trying to ensure the responsiveness of policy to local needs.<sup>78</sup>
- It is important that local people are consulted about what they want from the public spaces in their communities if these places are to deliver their full promise.<sup>79</sup>
- Planning policy fails if it does not recognise basic human needs and public participation is a means of reducing the risk of devising unhealthy policies.<sup>80</sup>
- Some forms of democratic participation may be beneficial for the health and well-being of those who take part, by enhancing a person's sense of empowerment and self-efficacy – people are most likely to take control of their health if they feel in control of other aspects of their lives.<sup>81</sup>
- Participation may also contribute to health within a community by building social capital. Higher levels of trust and participation in a community are related to the degree of equity in income distribution and population health outcomes.<sup>82</sup>
- If participative processes strengthen social networks that draw on both bonding (i.e. close ties and/or relations/social support between members of a network who are similar in terms of social identity) and bridging (i.e.

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<sup>76</sup> Catell & Evans (1999) Neighbourhood images in East London: social capital and social networks on two East London estates. YPS for the Joseph Rowntree Foundation.

<sup>77</sup> Paragraph 9.1 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>78</sup> Barton, H. et al. (eds) (2003) Healthy Urban Planning in practice: experience of European cities. Report of the WHO City Action Group on Healthy Urban Planning. World Health Organization, Regional Office for Europe, Copenhagen.

<sup>79</sup> Joseph Rowntree Foundation (2007) Public spaces. Research & policy development. Available at: <http://www.jrf.org.uk/public-spaces/> Accessed 27 April 2007.

<sup>80</sup> Barton, H. et al. (eds) (2003) Healthy Urban Planning in practice: experience of European cities. Report of the WHO City Action Group on Healthy Urban Planning. World Health Organization, Regional Office for Europe, Copenhagen.

<sup>81</sup> Paragraph 2.4 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>82</sup> Paragraph 2.5 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

- connections between those who are unlike each other yet are relatively equal in terms of status and power) relations there may be positive health effects for socially excluded groups – in the context of a renewal programme, this may help to reduce health inequalities.<sup>83</sup>
- UNICEF has set up a network of Child Friendly Cities (CFCs), and recommend 9 building blocks for how to build a child friendly city, the first of which is children's participation.<sup>84</sup>
  - Good participatory work appears to benefit young people by building their confidence and knowledge, skills and educational achievement, and by changing attitudes.<sup>85</sup>
  - Only a minority of young people are involved in public decision-making, and many young people are cynical about the extent to which adults take their views into account.<sup>86</sup>
  - Although young people are increasingly asked for their views, youth influence on decision-making is low.<sup>87</sup>

*Factors to take into account when consulting young people*

- To find the appropriate model for involving young people organisations need to be clear why they are seeking their participation, what it is hoped will be achieved through young people's participation and how power might be shared between adults and young people.<sup>88</sup>

**3.2.5 Public art**

*Effects on health*

- Neighbourhood aesthetic quality, including interesting features such as public art, may be related to the experience of stress or the ability to recover after exposure to stressors.<sup>89</sup>
- In a more aesthetically pleasing environment people are more likely to walk for exercise and recreation.<sup>90</sup> There will also be an increase in public safety by increasing the number of people using streets or other walkways and public places/spaces, which will then increase the possibility for social interaction and cohesion.

*Healthy urban planning to realise these potential effects*

- As the arts in general have been found to contribute more to bonding social capital within groups, when compared with bridging social capital

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<sup>83</sup> Paragraph 2.7 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>84</sup> UNICEF. Child Friendly Cities. Available at: <http://www.childfriendlycities.org/>

<sup>85</sup> Curtis, K. & Roberts, H. (2003) Effective interventions to tackle inequalities in children's health. Child Health Research and Policy Unit. City University, London.

<sup>86</sup> Curtis, K. & Roberts, H. (2003) Effective interventions to tackle inequalities in children's health. Child Health Research and Policy Unit. City University, London.

<sup>87</sup> Kirby, P. & Bryson, S. (2002) Measuring the magic? Evaluating and researching young people's participation in public decision-making. Carnegie Young People Initiative.

<sup>88</sup> Teenage Pregnancy Unit (2001) A guide to involving young people in teenage pregnancy work. Teenage Pregnancy Unit. Available at: <http://www.teenagepregnancyunit.gov.uk>

<sup>89</sup> Paragraph 9.9 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>90</sup> Paragraph 5.39 in Cave et al (2004) Healthy sustainable communities: What works? Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

- between groups,<sup>91</sup> any public art should not reinforce entrenched patterns of social grouping which could lead to feelings of exclusion for some groups.
- If public art is placed in a green space there may be greater incentives to exercise, thereby benefiting health in terms of physical activity.

### **3.2.6 Allotments**

#### *Effects on health*

- The provision of allotments can help to increase access to safe and healthy food; working in an allotment encourages regular exercise, improves mental health, promotes social contact, networking and support, and provides the opportunity to grow fresh, nutritious and affordable food.<sup>92</sup>
- Although social interaction is of benefit to anyone who tends a plot, it is particularly important to those people at risk of social isolation, such as older people, the unemployed or people who have mental health problems.<sup>93</sup>
- For older people, regular physical activity tending an allotment can help to keep them active for longer and reduce the likelihood that they will need to be cared for.<sup>94</sup>
- Tending allotments can provide lifelong learning opportunities.<sup>95</sup>

#### *Healthy urban planning to realise these potential effects*

- Barton and Tsourou recommend that any allotments in a new development are within easy “barrow distance” from homes, e.g. 200 metres or less.<sup>96</sup>

#### *Case-study examples involving allotments*

- Bridgend Allotments in the Craigmillar district of Edinburgh are situated in an area of multiple deprivation, where few residents have access to gardens. In this project, apart from benefits to individual ploholders, links have been made to the wider community, which includes community gardens, taking referrals from local health providers, plots adapted for people with a disability and a demonstration garden. These allotments are the first in Scotland to be exclusively committed to organic gardening techniques, and they use grey and rain water and composting as part of a commitment to sustainability.<sup>97</sup>
- In addition, allotments have been used to help asylum seekers integrate into a new environment.<sup>98</sup>

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<sup>91</sup> Paragraph 3.4 in Cave and Molyneux (2004) Healthy Sustainable Communities: A Spatial Planning Checklist. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>92</sup> Adapted from page 118 of Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>93</sup> COSLA (2007) Allotments in Scotland. Guidance Notes for Scottish Councils.

<sup>94</sup> COSLA (2007) Allotments in Scotland. Guidance Notes for Scottish Councils.

<sup>95</sup> COSLA (2007) Allotments in Scotland. Guidance Notes for Scottish Councils.

<sup>96</sup> Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

<sup>97</sup> Gardenscotland (2006) An advocacy document from the Scottish Allotments and Gardens Society.

*Draft.*

<sup>98</sup> COSLA (2007) Allotments in Scotland. Guidance Notes for Scottish Councils.

### **3.2.7 Volunteering programme**

#### *Effects on health*

- In the Americans' Changing Lives Study, older adults who volunteered and who engaged in more hours of volunteering reported higher levels of well-being, and this effect was not moderated by race, gender or level of social integration.<sup>99</sup>

### **3.3 Management and operational issues relating to the delivery of health benefits from Connswater Community Greenway**

#### **3.3.1 Management and maintenance**

##### *Factors to take into account to realise potential positive effects on health and well-being*

- The concept of green infrastructure in urban environments has implications for its management<sup>100</sup> – without proper management it may not be possible to realise the potential positive impacts associated with green space including those for health and well-being.

##### *Ways to realise potential positive effects on health and well-being*

- It is important to identify resources to enable people to run culture, leisure, community and sports facilities, otherwise they become symbols of neglect within a community,<sup>101</sup> which can erode community identity and a sense of belonging and may facilitate negative behaviours such as vandalism – a sense of community identity and belonging is important for health and well-being.<sup>102</sup>

#### **3.3.2 Co-operation among stakeholder organisations**

##### *Healthy urban planning to realise potential positive effects on health*

- As the agencies or departments responsible for transport, energy, water, health and other important facilities, services or amenities do not often coincide, Barton and Tsourou recommend that authorities and agencies ensure a collaborative approach to planning in order to create a healthy human habitat that functions to create opportunities and a high quality of environment for people irrespective of their wealth or status, in a way that is ecologically sustainable.<sup>103</sup>
- An holistic and integrated approach to urban planning is based on co-operation and partnership.<sup>104</sup>
- Barton and Tsourou consider some of the most critical spheres for co-operation to be: land use and transport planning, an integrated transport strategy, and integrated resource planning (involving energy, water, food, waste, wildlife, job creation and recreation strategies).<sup>105</sup>

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<sup>99</sup> Morrow-Howell, N. et al. (2003) Effects of volunteering on the well-being of older adults. *Gerontol. B Psychol. Sci. Soc. Sci.* 58: S137-145.

<sup>100</sup> Paragraph 6.11 in Cave and Molyneux (2004) *Healthy Sustainable Communities: A Spatial Planning Checklist*. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>101</sup> Paragraph 3.4 in Cave and Molyneux (2004) *Healthy Sustainable Communities: A Spatial Planning Checklist*. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>102</sup> Paragraph 3.3 in Cave and Molyneux (2004) *Healthy Sustainable Communities: A Spatial Planning Checklist*. Milton Keynes/South Midlands Sub-Region Health and Social Care Project Team.

<sup>103</sup> Page 84 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>104</sup> Page 85 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

<sup>105</sup> Page 85 in Barton and Tsourou (2000) *Healthy Urban Planning*. Spon Press.

- The Commission for Architecture and the Built Environment (CABE) also recommends that people need to collaborate and cooperate if sustainable neighbourhoods are to be created, so that social infrastructure such as new schools, surgeries, parks, and leisure and recreation facilities are integrated into new and existing neighbourhoods.<sup>106</sup>

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<sup>106</sup> Commission for Architecture and the Built Environment (CABE) (2007) Actions for housing growth. Creating a legacy of great places. CABE, London.

#### **4 Results of the rapid appraisal of the Connswater Community Greenway**

The potential impacts on health and well-being of the Connswater Community Greenway were identified using two rapid appraisal techniques:

1. Desk-top appraisal;
2. Consulting stakeholders at a participatory workshop held on 16 March 2007.

These results were supplemented by extracting information from the evaluation forms completed at community consultation events relating to the Greenway.

For each technique, potential impacts on health and well-being were identified using a rapid appraisal tool comprising selected determinants of health.<sup>107</sup>

The combined results from these two techniques are shown in the following tables.

- ❖ The potential impacts of the proposed physical infrastructure of the Greenway on health and well-being are shown in Table 4.1A and 4.1B, together with the health and well-being outcomes identified using the information from the published literature (presented in Section 3).
- ❖ The potential impacts of the proposed social and community projects associated with the Greenway on health and well-being are shown in Tables 4.2A, 4.2B and 4.2C, together with the health and well-being outcomes identified using the information from the published literature (presented in Section 3).

To help readers attribute sources to the potential impacts identified, information in Tables 4.1-4.2 has been presented according to the following key:

- If potential impacts were identified only during the desk-top appraisal, they are presented in Times Roman type
- If potential impacts were identified during the desk-top appraisal and the participatory stakeholder workshop, they are presented in italic type
- If potential impacts were identified during the participatory stakeholder workshop, they are presented as underlined text
- If potential impacts were extracted from the evaluation forms from the community consultation events, they are presented in Arial type

In addition to the identification of potential impacts on health and well-being, stakeholders at the participatory workshop made suggestions about how to address potential impacts on health to increase the potential health gain from the Connswater Community Greenway. These suggestions are presented in Section 5.

At the participatory workshop, it was also agreed that a mapping exercise be undertaken in order to identify the policies, strategies, action plans and other

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<sup>107</sup> Ison, E. (2002) Rapid appraisal tool for participatory stakeholder workshops. Eleventh iteration.

initiatives of agencies, organisations and partnerships at all levels (local and regional) that the Greenway could provide a mechanism through which not only would it be possible for those organisations to achieve some of their aims, etc., but also added value from health gain for those organisations and the community could be attained. The results of this rapid mapping exercise are presented in Tables 5.1-5.6, and relate to the stakeholder suggestions presented under Section 5.2.

**Table 4.1A: Potential impacts on health and well-being of the major physical infrastructure for the proposed Connswater Community Greenway**

<b><i>Element of the infrastructure</i></b>	<b><i>Outcomes of the infrastructure affecting health &amp; well-being</i></b>	<b><i>Pathways by which mental health &amp; well-being are affected</i></b>	<b><i>Pathways by which physical health &amp; well-being are affected</i></b>	<b><i>Potential outcomes for health &amp; well-being in the short and long term</i></b>
Improvements to physical infrastructure overall	<i>Improved environment</i>	<u>Increased sense of pride</u> <u>Increased sense of belonging</u> Improved image and reputation of area		<i>Improved self-esteem</i> Increased optimism Reduction in people moving from the area contributing to a more sustainable community
10 km linear park 38.3 ha improved parkland	<i>Improved natural environment</i> Increased opportunities for exercise and physical activity Increased opportunities for play <u>Increased opportunities for relaxation</u>	<u>Increased pleasure</u> Increased social contact, with increased opportunities for social interaction, support and community cohesion Increased community safety <i>Reduced social exclusion and isolation</i> Increased physical activity Potential for criminal, social or psychological aggression, and drug abuse and conduct offences	Increased physical activity Potential for criminal, social or psychological aggression, and drug abuse and conduct offences	Reduced anxiety and stress Improved self-esteem Reduced morbidity and mortality from: <ul style="list-style-type: none"> <li>➤ coronary artery disease;</li> <li>➤ stroke;</li> <li>➤ systemic hypertension;</li> <li>➤ obesity;</li> <li>➤ emotional disorders;</li> <li>➤ incapacity associated with ageing;</li> <li>➤ osteoporosis;</li> <li>➤ diabetes mellitus;</li> <li>➤ colon cancer;</li> <li>➤ chronic back disease;</li> <li>➤ athletic injuries.</li> </ul> Improved control of hypertension and diabetes,
20 km pedestrian/cycle path	Increased connectivity Increased opportunities for active travel <u>Increased opportunities for physical activity as a family</u> Increased accessibility	Increased physical activity <u>Increased family cohesion</u> Increased social contact, with increased opportunities for social interaction, support and community	Increased physical activity <u>Increased family cohesion</u>	

		cohesion <i>Increased community safety</i> <i>Reduced social exclusion and isolation</i>		and the management of mild-to-moderate mental health problems, e.g. depression and anxiety, although acute anxiety responds better to exercise than chronic anxiety. Improved psychosocial well-being.
100 public-use bikes + 18 bike hubs	Increased accessibility to cycles Increased opportunities for active travel	Increased physical activity	Increased physical activity	Improved psychosocial well-being.
3 km linkages: schools leisure centres health centre retail	Increased opportunities for active travel Reduced volume of traffic Reduced potential for congestion Increased accessibility to: <ul style="list-style-type: none"> <li>o Education facilities;</li> <li>o Health services</li> <li>o Leisure facilities</li> <li>o Retail amenities</li> </ul> <u>Increased potential for sustainability of community facilities and amenities</u> <u>Contribution towards the physical basis for social capital</u>	Increased physical activity Increased social contact, with increased opportunities for social interaction, support and community cohesion <i>Reduced social exclusion and isolation</i>	Increased physical activity Improved air quality Reduction in noise levels Reduced risk of road traffic accidents Improved levels of health care (diagnosis, treatment, rehabilitation & particularly prevention)	<u>Improved childhood development</u> <u>Family structure maintained or improved</u> Fear of crime and/or antisocial behaviour can increase stress and anxiety and contribute to or exacerbate social isolation, especially for older people Victims of crime can suffer both mental and physical harms to health
37 bridges: 3 landmark 4 intermediate 30 small	Increased connectivity Increased permeability Increased accessibility <i>Improved built environment</i> <u>Potential location for antisocial behaviour</u>	Increased potential for movement Increased physical activity <u>Fear of antisocial behaviour</u>	Increased physical activity	

5.7 km remediated rivers	Reduction of blight Improved natural environment Improved biodiversity Improved amenity Increased opportunities for leisure	Increased physical activity <u>Increased levels of pleasure (in natural environment)</u>	Increased physical activity	
Public square at Hollywood Arches	<i>Improved built environment</i> Improved access to amenities Decreased levels of antisocial behaviour	Increased social contact, with increased opportunities for social interaction, support and community cohesion <i>Reduced social exclusion and isolation</i> Increased levels of pleasure (in built environment)	Increased physical activity	

**Table 4.1B: Potential impacts on health and well-being of the major physical infrastructure for the proposed Connswater Community Greenway**

<b><i>Element of the infrastructure</i></b>	<b><i>Outcomes of the infrastructure affecting health &amp; well-being</i></b>	<b><i>Pathways by which mental health &amp; well-being are affected</i></b>	<b><i>Pathways by which physical health &amp; well-being are affected</i></b>	<b><i>Potential outcomes for health &amp; well-being in the short and long term</i></b>
Protected habitats for wildlife	Improved natural environment Increased biodiversity Increased opportunities for education	Increased educational attainment	Increased educational attainment Reduced levels of cigarette smoking	Improved health Lower take on social benefits Reduced levels of overweight and obesity Reduced risk of lung and other cancers, e.g. bladder
Weir	Decreased risk of flooding	Reduced risk of the impacts of flooding	Reduced risk of the impacts of flooding	Health protection from the effects of flooding: <ul style="list-style-type: none"> <li>• premature death;</li> <li>• clinical problems requiring hospitalisation or consultation with doctors;</li> <li>• an increase in the use of non-prescription drugs or alcohol;</li> <li>• depression;</li> <li>• insomnia;</li> <li>• low self-esteem;</li> <li>• general feelings of ill health.</li> </ul> Health protection from the effects of flooding for vulnerable groups: <ul style="list-style-type: none"> <li>• headaches;</li> <li>• digestive problems;</li> <li>• lethargy;</li> <li>• stress and anxiety, resulting from problems with personal relationships, and employment, and feelings of isolation.</li> </ul>

**Table 4.2A: Potential impacts on health and well-being of the social and community projects for the proposed Connswater Community Greenway**

<b><i>Social and community project</i></b>	<b><i>Outcomes of the social and community project affecting health &amp; well-being</i></b>	<b><i>Pathways by which mental health &amp; well-being are affected</i></b>	<b><i>Pathways by which physical health &amp; well-being are affected</i></b>	<b><i>Potential outcomes for health &amp; well-being in the short and long term</i></b>
Social and community projects overall		<u>Increased sense of pride</u> <u>Increased sense of belonging</u> Improved image and reputation of area		Increased optimism Reduction in people moving from the area contributing to a more sustainable community
7 Heritage trails	Increased number of visitors to the area Increase in the amount of money in the local economy Increase in the number of employment opportunities Depending on the quality of employment opportunities, increased level of disposable income Potential to increase the number of new business start-ups Improved amenity Improved image and reputation of area	Entry into employment Potential to increase the quality of employment Potential to reduce fuel and transport poverty	Entry into employment Potential to increase the quality of employment Potential to reduce fuel and transport poverty Increased capacity to access healthy, nutritious food	Increased self-esteem If quality of employment is good, reduced risk of cardiovascular disease and decreased levels of chronic stress <i>Reduced levels of stress</i> Increased capacity to recover after exposure to stressors Reduced morbidity and mortality for: <ul style="list-style-type: none"> <li>➤ coronary artery disease;</li> <li>➤ stroke;</li> <li>➤ systemic hypertension;</li> <li>➤ <i>obesity</i>;</li> <li>➤ emotional disorders;</li> <li>➤ incapacity associated with ageing;</li> </ul>
1 Eco trail				
Public art/events programme	Increased aesthetics Improved built environment <u>Increased sense of ownership</u>	Increase in pleasure (in environment and in public arts activities) <u>Increase in sense of pride in</u>	Increased physical activity	

		<u>area</u> <u>Increase in sense of belonging</u> Increased social contact, with increased opportunities for social interaction, support and community cohesion <i>Reduced social exclusion and isolation</i> Increased physical activity		<ul style="list-style-type: none"> <li>➤ osteoporosis;</li> <li>➤ diabetes mellitus;</li> <li>➤ colon cancer;</li> <li>➤ chronic back disease;</li> <li>➤ athletic injuries.</li> </ul> Improved control of hypertension and diabetes, and the management of mild-to-moderate mental health problems, e.g. depression and anxiety, although acute anxiety responds better to exercise than chronic anxiety.
Allotments	Increased access to affordable, nutritious food Increased availability of educational opportunities Increased opportunities for social integration	Increased social contact, with increased opportunities for social interaction, support and community cohesion <u>Reduced social isolation and exclusion</u> Increased physical activity <u>Increased awareness of nutritional values of food</u> <u>Increase in levels of skills</u>	Increased physical activity Increased nutritional value from food	

**Table 4.2B: Potential impacts on health and well-being of the social and community projects for the proposed Connswater Community Greenway**

<b><i>Social and community project</i></b>	<b><i>Outcomes of the social and community project affecting health &amp; well-being</i></b>	<b><i>Pathways by which mental health &amp; well-being are affected</i></b>	<b><i>Pathways by which physical health &amp; well-being are affected</i></b>	<b><i>Potential outcomes for health &amp; well-being in the short and long term</i></b>
Education facilities: indoor and outdoor classrooms	<p><u>Increase in number of educational opportunities available</u>  Improved access to education  Improved quality of education  <u>Increase in level of skills</u>  Increased levels of attention  Increased levels of confidence</p>	<p>Improved educational attainment  Increased physical activity  Increased ability to identify health-relevant information and use it constructively  <u>Improved level of social skills</u></p>	<p>Improved educational attainment  Increased physical activity  Increased ability to identify health-relevant information and use it constructively  Reduced daily average cigarette consumption</p>	<p><u>Improved childhood development</u>  Improved health  Lower take on social benefits  Reduced levels of overweight and obesity  Reduced risk of lung and other cancers, e.g. bladder  Increased sense of empowerment</p>
Community engagement officer	<p><i>Increased levels of participation in community</i>  Increased levels of trust in community  <u>Increased levels of ownership</u></p>	<p>Improved skills and knowledge for young people  Increased educational attainment  Increased social capital  <u>Decreased levels of antisocial behaviour</u>  <u>Decreased levels of vandalism</u></p>	<p>Increased educational attainment</p>	<p>Increased self-efficacy  Improved levels of confidence in young people</p>

**Table 4.2C: Potential impacts on health and well-being of the social and community projects for the proposed Connswater Community Greenway**

<b><i>Social and community project</i></b>	<b><i>Outcomes of the social and community project affecting health &amp; well-being</i></b>	<b><i>Pathways by which mental health &amp; well-being are affected</i></b>	<b><i>Pathways by which physical health &amp; well-being are affected</i></b>	<b><i>Potential outcomes for health &amp; well-being in the short and long term</i></b>
Volunteering programme	<p><i>Increased levels of participation in community</i></p> <p>Increased levels of trust in community</p> <p><u>Increased levels of ownership</u></p>	<p>Increased social contact, with increased opportunities for social interaction, support and community cohesion</p> <p><u>Reduced social isolation</u></p> <p>Increased social capital</p> <p>Improved skills</p> <p>Entry into employment</p>	Entry into employment	<p><u>Improved quality of life</u></p> <p><u>Increased self-esteem</u></p> <p><u>Increased levels of confidence</u></p> <p>For older people, increase in length of time able to remain active and reduced need for care</p> <p>Improved health and well-being</p>

## **5 Suggestions to increase potential health gain from the Connswater Community Greenway**

Participants in the stakeholder workshop made suggestions about ways to improve the potential health gain from the Connswater Community Greenway. These suggestions were made on the basis of stakeholders' knowledge and experience, but were also informed by the information extracted from the published research literature (see Section 3). For some stakeholder suggestions, supporting information has been provided if it is additional to that from the published literature or if it draws upon other sources of information, e.g. from the summary community profile.

Suggestions are presented under the following series of headings:

- Community engagement and ownership (Section 5.1)
- Engagement of policy-makers and service providers at all levels (Section 5.2)
- Encouraging uptake and use of the Greenway (Section 5.3)
- Design of the Greenway (Section 5.4)
- Management of the Greenway (Section 5.5)
- Health promotion and health improvement opportunities provided by the Greenway (Section 5.6)
- Education opportunities provided by the Greenway (Section 5.7)
- Heritage trails along the Greenway (Section 5.8)
- Monitoring the impacts of the Greenway (Section 5.9)

However, some of the stakeholder suggestions may relate to more than one of these headings but to save repetition have been presented under only one.

### **5.1 Community engagement and ownership**

- To ensure ownership of the Greenway by the local community, stakeholders ask EBP to consider securing widespread community support should the bid be successful, particularly through a programme of community consultation that builds and expands upon the consultation that has already been conducted

*Supported by information from the published literature, see Section 3.2.4.*

#### ***Specific suggestions for community engagement include:***

- ◆ Involving the community in the design of the physical infrastructure of the Greenway (*see also suggestions under Design*)
- ◆ Working with youth clubs in the area;
- ◆ Involving the community in health promotion activities associated with the Greenway;
- ◆ Involving the schools near the Greenway in the Public Art Programme (and not just the indoor/outdoor classroom facilities)
- ◆ Involving the community in the Public Art Programme

## **5.2 Engagement of policy-makers and service providers at all levels**

To ensure that policy-makers and service providers responsible for the East Belfast community make the most of the opportunities provided by the Connswater Community Greenway, and that the greatest level of health gain can be obtained through the Greenway, stakeholders ask EBP to work with relevant national, regional and local agencies, organisations and partnerships:

- to increase awareness and understanding of the benefits of the project, including the impacts on health and well-being;
- to discuss possible synergies that could be achieved by policy-makers and service providers exploiting the potential of the Greenway to meet their aims/objectives/targets in policies, strategies and action plans as well as generating the added value of health gain

For the potential synergies of the Connswater Community Greenway with the policies, strategies and/or action plans of various agencies and organisations, see Tables 5.1- 5.6, which are set out at the end of the stakeholder suggestions. All these policies, strategies, action plans or initiatives will serve as entry points to increase the health gain potential of the Greenway.

*Supported by information from the published literature, see Section 3.3.2.*

## **5.3 Encouraging uptake and use of the Greenway**

- To increase awareness of the Greenway and thereby encourage its use, stakeholders ask EBP to consider using the Public Square at Holywood Arches as a focal point for certain activities, for example, the Lantern Procession, a highly successful community event in East Belfast
- To encourage the use of the Greenway by all age-groups, but especially older people, stakeholders ask EBP to consider developing some inter-generational projects associated with the Greenway, for example, by working with the Community Safety Partnership
- To encourage the use of the Greenway by all cultures and traditions in the community, stakeholders ask EBP to consider conducting cross-community work/projects with the schools in the vicinity of the Greenway

*Supported by information from the published literature, see Section 3.2.7.*

- To increase the use of the Greenway, stakeholders ask EBP to consider expanding on the volunteering opportunities that could be generated through the facilities provided by and activities associated with the route
- To encourage the sustainable use of the Greenway and to increase access for vulnerable groups, stakeholders ask EBP to consider organising activities associated with the Greenway within walking distance of people's homes
- To increase the benefits to all users but especially some groups of people who may experience health and other inequalities, e.g. people with a physical disability, stakeholders ask EBP to consider including sensory

areas in the design of the Greenway

- To increase use of the Greenway, stakeholders ask EBP to consider installing:
  - drinking fountains along the route;
  - seating at regular intervals along the route;
  - lighting along the route;
  - access to public toilets;
  - signage.

*Supporting information*

*SUSTRANS has drinking fountains along some of their routes, which not only provide refreshment but also a focal point for the community, if incorporated as part of the public art programme. Children are the most enthusiastic users of these fountains. However, there is a maintenance cost associated with installing drinking fountains.<sup>108</sup>*

*In a study of public spaces in Aylesbury, inadequate provision of toilets, suitable seating, lighting and signage effectively discriminated against certain groups of people using public spaces, e.g. older people, people accompanied by children and people with disabilities were disproportionately affected by the lack of public toilets in a town centre.<sup>109</sup>*

- To encourage the use of the Greenway by both cyclists and pedestrians, stakeholders ask EBP to consider publicising the Greenway as a mixed use path (i.e. open to both walkers and cyclists)
- To manage the use of the Greenway by both cyclists and pedestrians, stakeholders ask EBP to encourage a high level of usage of the route

*Supporting information*

*SUSTRANS find that high levels of usage of their routes encourage safe behaviour among all users.<sup>110</sup>*

#### **5.4 Design of the Greenway**

- To encourage use of the Greenway by all age-groups, stakeholders ask EBP to consider using this opportunity for:
  - creative and innovative design;
  - good-quality design to a high specification
- To encourage use of the Greenway by cyclists and potential cyclists, stakeholders ask EBP to consider including a cycle path that is designed to recognised standards for off-road cycle paths and takes account of the following criteria recommended by Barton and Tsourou<sup>111</sup> for Healthy Urban Planning:

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<sup>108</sup> Shepherd, M. (2007) Personal communication from Operations Director, SUSTRANS.

<sup>109</sup> Holland, C. et al. (2007) Social interactions in urban public places. Public Spaces Series. The Policy Press for the Joseph Rowntree Foundation.

<sup>110</sup> Shepherd, M. (2007) Personal communication from Operations Director, SUSTRANS.

<sup>111</sup> Pages 136-137 in Barton and Tsourou (2000) Healthy Urban Planning. Spon Press.

- Providing access to homes and facilities;
  - Being as continuous as possible
  - Convenience;
  - Directness of route;
  - Comfortableness of route – e.g. easy gradients, smooth surfaces.
- To encourage the use of the Greenway by families, stakeholders ask EBP to consider incorporating a children’s play or park area

*Supported by information from the published literature, see Section 3.1.2.*

### **5.5 Management of the Greenway**

- To ensure the use and sustainability of the Greenway, stakeholders ask EBP together with other major stakeholders (e.g. Belfast City Council) to consider the management arrangements, both short and long term, for the appropriate use of the Greenway

*Supported by information from the published literature, see Section 3.3.1.*

#### ***Specific suggestions for management include:***

- ◆ Working with local community organisations in the area to arrange “sponsorship” of different sections of the Greenway, such that the community organisations are responsible for the general appearance of that section, e.g. clearing litter, etc.

### **5.6 Health promotion and health improvement potential of the Greenway**

- To use the Greenway as a mechanism to address, and potentially reduce, some health inequalities, stakeholders ask EBP to consider targeting certain groups of people who may be vulnerable to health inequalities, such as people on a low income, the unemployed, older people and children in families dependent on means-tested benefit
- For each vulnerable group identified in the community, stakeholders ask EBP to consider developing separate action plans to provide those groups of people with opportunities to improve their health through involvement in the activities associated with, and by using facilities provided as a result of, the Greenway

#### *Supporting information*

*This suggestion is supported by information in the Summary Community Profile. The East Belfast community is characterised by differing socio-economic profiles, particularly along the course of the river, with some neighbourhoods experiencing severe deprivation (particularly those in Inner East Belfast) and others experiencing relative affluence. There is a risk that the Greenway will be well used by more affluent people in the community and not by those experiencing deprivation.*

### **5.7 Education opportunities provided by the Greenway**

- To derive long-term benefit from the Greenway, including for health and well-being, stakeholders ask EBP to consider developing to the fullest extent the opportunities provided by the Greenway for the education and skills development of **all** age-groups in the community
- To derive the greatest number of educational opportunities from the Greenway, stakeholders ask EBP to consider the educational opportunities provided outside the classrooms, for example, the potential offered by the allotments (skills development and skills transfer) and the volunteering programme

### **5.8 Heritage trails along the Greenway**

- To signal the need for a consistent policy with respect to heritage sites in the vicinity of the Greenway, stakeholders ask EBP to liaise with the Environment and Heritage Service and the Planning Service to ensure that heritage sites important not only to the Greenway but also to the community of East Belfast are conserved

### **5.9 Monitoring the impacts of the Greenway**

- To be able to monitor effectively the impact of the Greenway, stakeholders ask EBP to establish a baseline of various indicators **before** the implementation of the project

**Table 5.1: Government departments and agencies**

<b>Organisation</b>	<b>Policies</b>	<b>Strategies</b>	<b>Other, e.g. Action Plan</b>
Department for Social Development (DSD)	<ul style="list-style-type: none"> <li>○ Targeting Social Need</li> <li>○ Renewing Communities</li> </ul>		
Roads Service	Environmental Handbook (inc bridges)	Northern Ireland Cycling Strategy	Walking Action Plan
Belfast Regeneration Office (BRO)		Neighbourhood Renewal	
Department of Finance & Personnel			<ul style="list-style-type: none"> <li>○ Northern Ireland Statistics &amp; Research Agency;</li> <li>○ Northern Ireland Neighbourhood Information Service</li> </ul>
Department for Culture, Arts and Leisure (DCAL)	Equality Scheme	Sport Strategy	Guidance to District Councils on Development of Local Cultural Strategy
Environment and Heritage Service	Managing the Water Environment in Northern Ireland	<ul style="list-style-type: none"> <li>○ Waste Management Strategy</li> <li>○ Strategic Environmental Assessment</li> <li>○ Air Quality Strategy</li> </ul>	
Planning Service Northern Ireland	Belfast Metropolitan Area Plan		
OFMDFM	<ul style="list-style-type: none"> <li>○ First Steps Towards Sustainability – A Sustainable Development Strategy for Northern Ireland</li> <li>○ A Shared Future</li> </ul>		
Arts Council	Architecture and Built Environment Policy	Creative Connections – a 5-year plan for developing the arts 2007-2012	
Northern Ireland Housing Executive (NIHE)		Supporting People Strategy 2005-2010	
Belfast Education and Library Board	<ul style="list-style-type: none"> <li>○ Special Educational Needs</li> </ul>	Equality Impact Assessment	School Curriculum

(BELB)	and Inclusion o New Targeting Social Need		
Rivers Agency	o Drainage (EIA) Regulations o European Water Framework Directive		
Water Service	o Environmental Policy o Energy Policy		
Belfast Harbour Commissioners			
Police Service Northern Ireland (PSNI)	o Community Safety Unit: o Creating a Safer Northern Ireland through Partnership	Roadwise	
Department of Health, Social Services and Public Protection		o Investing for Health o Fit Futures o Minding Your Head o Space to Breathe	
Belfast Health & Social Care Trust			
Health Promotion Agency		o Get a Life, Get Active o Space to Breathe o Minding Your Head	

**Table 5.2: Local government**

<b>Organisation</b>	<b>Policies</b>	<b>Strategies</b>	<b>Other, e.g. Action Plan</b>
Belfast City Council (BCC)	o Community Planning o Community Safety Unit: o Creating a Safer Northern Ireland through Partnership	o Good Relations Strategy o Public Art Strategy o Open Spaces Strategy o Community Development o Economic Development o Healthwise	
Castlereagh Borough Council		Healthwise	

**Table 5.3: Non-governmental organisations (NGOs)**

<b>Organisation</b>	<b>Policies</b>	<b>Strategies</b>	<b>Other, e.g. Action Plan</b>
Belfast Healthy Cities (BHC)			Core themes of Active Living, Healthy Urban Planning and HIA
EBCHIP		Health Strategy for East Belfast	<ul style="list-style-type: none"> <li>○ Health Fairs</li> <li>○ Men's health pilot</li> <li>○ Women's Health</li> <li>○ Family Support</li> <li>○ Mental Health</li> <li>○ Drug/Alcohol Awareness</li> <li>○</li> </ul>
SUSTRANS			<ul style="list-style-type: none"> <li>○ Public Art Programme</li> <li>○ National Cycle Network</li> </ul>
National Trust			Environmental Principles
Northern Ireland Tourist Board (NITB)		A Strategic Framework for Action 2004–2007	
East Belfast Community Development Agency (EBCDA)		Leading From Behind: An Agenda for Change in East Belfast	
Ulster Scots Agency			
Friends of the Earth			Environmental Protection
Age Concern		Actively Ageing Well	Lobbying: <ul style="list-style-type: none"> <li>○ Income</li> <li>○ Transport</li> <li>○ Housing</li> <li>○ Community Safety</li> <li>○ Lifelong Learning</li> </ul>
Conservation Volunteers			<ul style="list-style-type: none"> <li>○ Green Gyms</li> <li>○ Environments for All</li> </ul>
Community Technical Aid			Guidelines for Community Groups and Projects Seeking Assistance
Greater Village Regeneration Trust	Good example of community regeneration		<ul style="list-style-type: none"> <li>○ Youth Strategy</li> <li>○ Is Your Community Ready for Economic Development?</li> </ul>
VSB			Volunteering Opportunities

**Table 5.4: Educational and youth institutions/projects**

<b>Organisation/personnel</b>	<b>Initiatives</b>	<b>Projects</b>	<b>Other</b>
Queen's University Belfast (QUB)			<ul style="list-style-type: none"> <li>○ School of Planning: Mapping Exercise</li> <li>○ Healthy Urban Planning Module (with School of Medicine)</li> </ul>
Jordanstown University			
Belfast Institute of Further and Higher Education (BIFHE)			Various skill/vocational courses
East Belfast Community Education Centre (EBCEC)			
Castlereagh College			Various skill/vocational courses
Strand Primary School	As for BELB		
Mersey Street Primary School	As for BELB		
Avoniel Primary School	As for BELB		
Elmgrove Primary School	As for BELB		
Greenway Primary School	As for BELB		
Braniel Primary School	As for BELB		
Nettlefield Primary School	As for BELB		
Cregagh Primary School	As for BELB		
Lisnasharragh Primary School	As for BELB		
Lisnasharragh High School	As for BELB		
Orangefield High School	As for BELB		
Grosvenor Grammar School	As for BELB		
Clarawood Special School	As for BELB		
East Belfast Youth Project			
Inner East Youth Project			
Inner East Sure Start			

**Table 5.5: Health-related organisations/primary care roles**

<b>Organisation/personnel</b>	<b>Initiatives</b>	<b>Projects</b>	<b>Other</b>
Eastern Health and Social Services Board (EHSSB)		Mental Health Strategy	Public Health remit
Belfast Local Commissioning Group <sup>112</sup>			
South & East Belfast Trust			
Belfast Trust <sup>113</sup>			
Investing for Health (IfH) East Belfast	<ul style="list-style-type: none"> <li>○ Mental Health Promotion</li> <li>○ Healthier Lifestyles</li> </ul>		
General practitioners	Healthwise		
Practice Nurses			
School Nurses			
District Nurses			
Occupational Health Nurses in private companies			<ul style="list-style-type: none"> <li>○ Shorts</li> <li>○ Allied Bakeries</li> </ul>
Health Promotion			Walk Leaders Course
Healthy Living Centre			

<sup>112</sup> New organisation – outcome of Review of Public Administration, March 2007

<sup>113</sup> New organisation – outcome of Review of Public Administration, March 2007

**Table 5.6: Partnerships in East Belfast**

<b>Organisation</b>	<b>Policies</b>	<b>Strategies</b>	<b>Other, e.g. Action Plan</b>
East Belfast Partnership			
Community Safety Partnership	<ul style="list-style-type: none"> <li>○ Community Safety Unit:</li> <li>○ Creating a Safer Northern Ireland through Partnership</li> </ul>		
The Inner East Forum			
Inner East Neighbourhood Renewal Partnership		Neighbourhood Renewal	
East Belfast Business Group			
Belfast East Seniors Forum			
East Belfast Churches Forum			

## **6 The potential contribution of the Connswater Community Greenway to health and well-being in East Belfast**

### **6.1 Improving health and well-being for the communities of East Belfast**

There is wide variation in the levels of health and well-being among the communities in East Belfast, with people living in Inner East Belfast experiencing high levels of multiple deprivation and people living further from the inner city experiencing relative affluence.

People in Inner East Belfast are deprived with respect to:

- Level of income and level of disposable income;
- Employment opportunities;
- Opportunities for education and training;
- Levels of health and well-being;
- The quality of the built environment;
- Access to green and open spaces.

The Connswater Community Greenway has the potential to improve health for the entire community of East Belfast but in order to improve the health of people experiencing health and other inequalities, it is important that there are targeted initiatives at the various vulnerable groups, especially those in the Inner East Belfast electoral wards.

The Connswater Community Greenway could also be a mechanism to increase social integration, across the generations, across cultures and traditions, and across socio-economic groups. However, in order to achieve social integration, targeted initiatives also need to be developed and can be focussed around some of the elements of the Greenway such as the indoor and outdoor classrooms, the volunteering programme and the allotments.

### **6.2 Pointers from the published literature**

Information from the published literature indicates that walk- and cycle-ways can improve health and well-being but need to meet various criteria such as safety (including lighting and natural surveillance), convenience, directness, ease of use and comfortableness to encourage and increase usage especially for vulnerable groups and those with mobility problems. Walk- and cycle-ways also need to provide:

- connectivity with surrounding neighbourhoods to encourage movement and provide a foundation for social cohesion;
- access and linkages to facilities and amenities, including workplaces and public transport..

Good-quality design is important for to stimulate the use of green and open spaces, with three key factors being:

- Inclusiveness of all social groups in the community;
- Public consultation and involvement;
- The provision of a range of security regimes.

However, good-quality design needs to be supported by appropriate

management and maintenance regimes to ensure that all groups feel safe in the spaces created. The green and open spaces can incorporate public art, wildlife habitats and new tree planting, all of which have benefits for health and well-being.

Community consultation and involvement will be key to achieving the potential of the Greenway to improve health and well-being, and needs to be conducted with **all** social groups in the residential communities on an on-going basis, including children and young people who are frequently ignored in consultations. Therefore, the concept of a community engagement officer could prove vital to delivering better health and well-being for the community, especially for groups who are hard to reach or who may normally be excluded from society.

The educational opportunities offered by the Greenway could have long-term effects on the health and well-being for the communities in East Belfast, especially for children and young people who may experience beneficial effects throughout their life-course.

The Public Arts Programme although potentially beneficial to health needs to be developed in ways that do not entrench current social groupings which could lead to social exclusion but instead be designed to be inclusive.

Finally, it is important that the many agencies who may have an interest in the Greenway liaise and work together to deliver the potential health gain.

### **6.3 Stakeholder views**

Stakeholders at the participatory workshop wished to see the Greenway address social needs and be used to address the health and other inequalities experienced by people in East Belfast, particularly people living in Inner East Belfast.

Stakeholders also wished to see:

- extensive community consultation and engagement;
- the educational and skills development opportunities offered by the Greenway extended to all age and social groups;
- the volunteering programme extended;
- the allotments used as a focus for skills development and transfer, especially between generations.

Stakeholders endorsed the information from the published literature about the need for co-operation and partnership working among the many local and regional agencies and partnerships that could use the Greenway to achieve not only their own objectives but also the added value of health improvement. This resulted in a mapping exercise that identifies entry points for these organisations not only for ways they can use the Greenway but also to help deliver the potential health gain (see Tables 5.1-5.6).

Finally, the stakeholder suggestions offer insight that cannot be derived from the published literature, based as they are on local knowledge, understanding

and experience, which are vital to implementing projects at a local level especially for encouraging the use of the Greenway.