

Submission to the Department for Regional Development

Regional Development Strategy

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## Introduction

### The Institute of Public Health in Ireland

The remit of the Institute of Public Health in Ireland (IPH) is to promote cooperation for public health between Northern Ireland and the Republic of Ireland in the areas of research and information, capacity building and policy advice. Our approach is to support Departments of Health and their agencies in both jurisdictions, and maximise the benefits of all-island cooperation to achieve practical benefits for people in Northern Ireland and the Republic of Ireland.

IPH welcome the opportunity to respond to the consultation on the Department for Regional Development, Regional Development Strategy (RDS). It is well recognised that the spatial planning of human urban activity impacts on quality of life, health and wellbeing. IPH has been working in this area for a number of years and has developed extensive expertise<sup>1,2</sup>.

### Key points

- There is growing recognition that the leading causes of illness and death, including heart disease, cancer, respiratory diseases and injuries, may be exacerbated by elements within the built environment which contribute to sedentary lifestyles and harmful environments. IPH call for greater recognition of the links between regional development and health.
- Health inequalities are the preventable and unjust differences in health status experienced by certain population groups. The RDS has a role to play in tackling health inequalities experienced in Northern Ireland.
- Supporting a modal shift in transport methods can lead to improved health and reduced health inequalities.
- The RDS plays an important role in addressing climate change which is identified as a major public health concern for the 21<sup>st</sup> Century. Creating healthy sustainable places and communities can go hand in hand with reducing the negative impacts of climate change.
- IPH recognise the RDS is an overarching strategic framework which will be implemented by a range of other agencies. To fully appreciate the potential health impacts of the RDS, IPH call for a Health Impact Assessment to be undertaken to fully determine the links with health and potential impact on health inequalities particularly in relation to the implementation strategy.

### Response to specific consultation questions:

Consultation question	IPH response
1 Have we identified the most significant factors impacting on	IPH support the approach to balanced regional development across Northern Ireland and the strategy focuses heavily on land use planning where decisions made in relation to housing,

the Region?	transport and economic development, determine where people live. However IPH would like to see greater emphasis on spatial planning which implies a more integrated inter-agency process and supports tackling social exclusion and health inequalities <sup>3</sup> .
2 Do you agree with the aims of the RDS?	IPH agree with the aims but call for greater recognition of the opportunity to maximise health in the strategy. We welcome the aim ‘to promote development which improves the health and wellbeing of communities’ but potential health benefits of the strategy are associated with other aims and articulating this would emphasise the range of health benefits which the strategy can contribute to. For example improving connectivity can support active travel which has immediate health benefits primarily through increasing levels of physical activity. Protecting the environment is crucial as climate change has been identified as a major threat to public health in the 21 <sup>st</sup> Century. A more integrated approach between policies aimed at tackling climate change and creating healthier communities and addressing health inequalities is required.
3 Do you consider Alternative 4 is the most appropriate?	IPH welcome the approach to promote development in Belfast, Derry and in identified clusters of key settlements. This enhances opportunities outside the two main growth centres in Northern Ireland for development which can benefit more of the population.
4 Do you think the approach as illustrated by Diagram 4.1 is useful?	IPH welcome a diagrammatic representation to aid understanding however there needs to be some recognition that health is determined by a range of factors not just the presence of health care services in a community which is the impression currently conveyed by the diagram.
5 Do you agree that Belfast as the regional economic driver of the Region needs to be positioned as the regional centre for administration, commerce and specialised services?	No comment
6 Does the spatial framework recognise the important role of the North West and Derry?	No comment
7 The strategy proposed 9 sub-regional centres, do	No comment

you agree with those that have been identified?	
8 Newtownards has been included as a sub-regional centre, should it be included in the BMUA instead?	No comment
9 Do you think the concept of clustering cities and towns will enable greater economic prosperity and delivery of services?	IPH support the concept of clustering cities to enable greater economic prosperity and delivery of services. IPH is an all-island organisation and support the recognition that strong North/South cooperation can be beneficial not only for greater economic prosperity but health outcomes resulting from clustering in relation to the provision of employment, education opportunities and access to services.
10 Do you agree with the cities and towns that have been clustered together?	No comment
11 Does the spatial framework recognise the important function of rural communities?	A significant proportion of the Northern Ireland population live in rural areas (40%) and within these areas lies significant deprivation. It is essential that development in urban areas does not further exclude or exacerbate existing inequalities for this population.
12 Does the spatial framework recognise the important role of Gateways?	IPH welcome the recognition of the important role of Gateways particularly in relation to North/South linkages. IPH would like to see greater recognition of the ‘Spatial Strategies on the Island of Ireland: Framework for Collaboration’ within the RDS as it an important parallel development. Key to this strategy is the recognition that geographical inequalities are associated with the distribution of economic benefits.
13 Do you think the concept of Economic Corridors as described is useful?	We welcome the recognition of the role of the Economic Corridors and importance of maximising links with the Republic of Ireland. Increased prosperity may not fall equally across local populations. Emphasising economic growth without due regard for social and environmental consequences of such growth can have negative impacts on health both for the population as a whole and for groups within the population <sup>4, 5, 6</sup> .
14 Do you agree with the Spatial Framework set out in this chapter?	IPH welcome the approach to promote development in Belfast, Derry and in identified clusters of key settlements.
15 Do you consider that the identification of a BMUA continues to be appropriate for forward planning	IPH support the identification of BMUA and recognise the potential for creating a framework for enhanced social, economic and environmental outcomes which favour health. The BMUA provides an opportunity for progressive thinking in relation to a modal shift in reducing the reliance on carbon-

purposes?	fuelled transport and planning for easy accessibility and active travel. The BMUA is well positioned to be developed as a sustainable initiative. Northern Ireland has a small population which presents a barrier to progressing such initiatives. BMUA encompasses a significant population base and has the potential to provide real alternatives and options for enhancing connectivity. This could provide a pilot area to monitor the conditions which foster change when accessibility is improved and assist to determine how people change behaviour for improved health. However this needs to be developed in the context of the RDS as a strategic guide to support and create opportunity for innovation.
16 Do you agree that Sprucefield should continue to be classified as a regional out of town shopping centre	No comment
17 Does the guidance address the development of a strong North West and strengthened role for Derry City?	No comment
18 Does the guidance address the key issues to promote economic growth in the Sub Regional Centres?	As for question 13 we recognise the need for Sub Regional Centres but increased prosperity in pockets can have negative impacts on health both for the population as a whole and for groups within the population <sup>4,5,6</sup> .
19 Does the guidance on clustering enable places to attract economic development and deliver services that are functionally sustainable?	Employment and income are clearly linked and it is essential that opportunities for economic growth are provided outside the two main growth centres of Belfast and Derry.
20 Does the guidance on the rural area meet the needs of rural communities?	IPH welcome the recognition of the integrated approach required to support rural communities. There is a need to balance development pressures with the protection of the natural and built environment. In terms of local settlement and access to services, it is an advantage to have services available in local centres of population. Good relationships between housing, local employment, retail, education and health facilities help to establish healthy neighbourhoods, ensure local people (particularly those without use of a car) can access services, and

	<p>encourage shorter journeys by car. In addition ‘casual meetings between people increase and facilitate friendship networks and a sense of community’<sup>7</sup>. The loss of access to local services, particularly a local shop, can ‘threaten the viability of communities and affects some severely - particularly the low paid and unemployed, young people and the elderly’<sup>8</sup>. The emphasis here is on provision of local services for those who live locally, in order to ensure access and local community cohesion. In areas which are particularly rural, it is essential to provide support to maintain basic services and allow regeneration in a balanced approach.</p>
<p>21 Does the strategic guidance address the key issues relating to climate change and clearly demonstrate what needs to be done in order to help improve the environment?</p>	<p>Climate change has been identified as one of the biggest issues facing public health in the 21<sup>st</sup> Century. Climate change and health share many agendas and measures taken to improve the quality of the environment support a drive for healthier communities. IPH recognise the RDS has a major role to play in tackling climate change and developing more energy efficient environments. We welcome the approach set out in the strategy which clearly links to the Northern Ireland Sustainable Development Strategy. Settlements contribute to the causes of climate change and a radical change in the approach to how we plan our communities is required.</p> <p>Significant reductions in GHG emissions through private car use may be achieved if motorists are encouraged and facilitated to switch from private motor vehicle use to more sustainable transport such as public transport, walking and cycling. Emissions per km are higher for short journeys and therefore walking and cycling can provide significant benefits for both environment and health. The co-benefits to health of more active travel are many, including: increased physical activity, which is one of the best ways to improve health overall, in particular reducing obesity; reductions in road traffic injuries; better air quality; lower levels of noise pollution and improved social interaction. The shift towards a more sustainable transport system requires change in our environment and behaviour. Change at the environmental level to make sustainable travel choices available and attractive will require cooperation and coordination between regional and local development and transport planning.</p> <p>A recent review in England (Fair Society: Healthy Lives<sup>6</sup>) considered action required to reduce health inequalities in relation to climate change and recommends:</p> <ul style="list-style-type: none"> <li>○ Improving active travel across the social gradient</li> <li>○ Improving the availability of good quality open</li> </ul>

	<ul style="list-style-type: none"> <li>○ and green spaces across the social gradient</li> <li>○ Improving the food environment in local areas across the social gradient</li> <li>○ Improving energy efficiency of housing across the social gradient</li> </ul> <p>The RDS has the potential to ensure health inequalities are not further exacerbated through its delivery.</p>
<p>22 Does the strategic guidance address the key issues relating to our society and clearly demonstrate what needs to be done in order to help improve how we live and work?</p>	<p>The health and wellbeing of individuals is greatly affected by the communities in which they live and the nature of their physical environment. IPH recently identified that in the next 15 years the prevalence of Coronary Heart Disease will increase by 30%, high blood pressure will increase by 22% and more alarmingly diabetes will increase by 40%<sup>9</sup>. Increasing levels of physical activity, facilitating social interaction and enhancing areas for positive mental wellbeing are aspects of regional development which can help address these diseases. Northern Ireland is facing an obesity epidemic with 59% of all adults identified as being either overweight or obese and 25% of these are obese<sup>10</sup>. Rates in children show 22% are either overweight or obese, with more than 5% already obese<sup>11</sup>. These figures are alarming as obesity can lead to diseases such as diabetes, heart disease and some forms of cancer, all of which have implications for future health care service provision. Physical and social characteristics of communities, and the degree to which they enable and promote healthy behaviours, all contribute to social inequalities in health. There is a clear social gradient in healthy community characteristics. IPH call for a stronger recognition for development initiatives to target people who live in the 10% most deprived communities and set in place clear indicators to measure this action. Planning frameworks for large residential developments should identify the potential impacts on surrounding areas and how these should be dealt with to ensure there are no unintended distributional impacts<sup>12</sup>. The RDS therefore needs to explicitly shape how we develop our communities and Planning Policy Statements (PPS) need to reflect the changing needs of development across Northern Ireland which requires a coordinated approach between DRD and DoE. A key element of sustainable communities is access to space as environments which lack public gathering places can encourage sedentary living<sup>1</sup>. Open space provision can improve levels of exercise in a community which impacts on obesity and can improve social interaction and community activities which can contribute to reducing stress-related problems<sup>13</sup>.</p> <p>Creating environments conducive to community cohesion can</p>

	<p>impact on social capital and health. Supporting sustainable patterns of housing development promotes integration within settlement areas for re-use of previously developed land and higher density housing. Social capital is the link between individuals that bind and connect people within and between communities. It nurtures resilience and is a buffer against risks of poor health, through social support which is critical to physical and mental well-being and through the networks that help people find work, or get through economic and other material difficulties. The extent of people’s participation in their communities and the added control over their lives that this brings has the potential to contribute to their psychosocial wellbeing and then to other outcomes<sup>6</sup>.</p>
23 Do you agree with the revised definition of “brownfield” and that there is need for a target?	<p>Developing brownfield sites can support a more sustainable population density<sup>14</sup>. There is a need to ensure that housing development and revitalisation does not exacerbate existing inequalities for local communities which is particularly relevant for areas where there may already be high levels of inequality, and where development may increase deprivation and social exclusion.</p>
24 Do you think these figures will be helpful in enabling local planning authorities to produce development plans?	<p>Tackling the social determinants of health at a local level requires a fully integrated planning, transport, housing, environment and health system in each locality. Current regional and local planning is not systematically concerned with impact on health and health equity which can lead to unintended and negative consequences. The recent announcement to include wellbeing in the Environment Committee Planning Bill is welcomed but this needs to be reflected in Planning Policy Statements to guide development plans at a local level. The Review of Public Administration and transfer of planning powers to local government presents an opportunity for greater focus on health at a local level but needs to be supported by regional guidance, for example a PPS on health would assist to incorporate health equity into planners roles<sup>3</sup>.</p>
25 Does the strategy address the key spatial issues for developing the economy?	<p>It is essential that developing the economy is not undertaken in isolation and approached from a mixed land use perspective which reduces distances between where people live, employment, shops and other services. This needs to be facilitated with good networks which improve access to services and makes it possible to walk, cycle or use public transport.</p>
26 Have we covered the most significant issues in the strategic guidance?	<p>IPH call for a greater recognition and integration of health throughout the strategy.</p>
27 Do you agree with the types of projects	<p>IPH believe the RDS will guide future development however little consideration has been give to the distributional impacts</p>



<p>that the RDS considers as being of regional significance?</p>	<p>on local communities. Health inequalities are preventable and unjust differences in health status experienced by certain population groups. People in lower socio-economic groups are more likely to experience chronic ill-health and die earlier than those who are more advantaged. In Northern Ireland the gap between the most deprived 20% of areas and NI overall in 2006-8 in male life expectancy was 4.6 years. The RDS focuses on the major determinants of health, namely transport, creating opportunities for economic development, creating sustainable communities and climate change and therefore has an important role in tackling health inequalities which needs to be reflected in the RDS.</p>
<p>28 What are your views on how the strategy will be implemented and monitored?</p>	<p>IPH welcome the Inter Departmental Steering Group which will ensure the Department of Health, Social Services and Public Safety contributes to the implementation and monitoring of the strategy. Clear indicators and reporting mechanisms need to be established to ensure the strategy is not just seen as Regional Development responsibility. The implementation of the RDS has implications for current action to address obesity through the new Fitter Futures: Obesity Framework<sup>14</sup>. It also supports the cross-sectoral goals set out in the Investing for Health Strategy<sup>15</sup>.</p>
<p>29 Do you think we have identified the most appropriate headline indicators?</p>	<p>The strategy presents a good structure however greater attention needs to be given to the validity of performance measurements to be used for monitoring. Good performance measures must be quantifiable, valid and useful, and they need to fit neatly within the larger context. For example the strategy could include active travel levels as an indicator to assess if adequate action is being taken to facilitate a change in the environment which is conducive to walking and cycling. The indicator reviewing the % population who live in 10% most deprived areas is unclear. What will this indicator measure and how will it support the aims? We also believe this indicator should be linked to improving the health and wellbeing of communities as there are clear links between social deprivation and poorer health outcomes. Again the carbon footprint indicator needs to link to improving the health and wellbeing of communities.</p>

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<sup>11</sup> Child Health System Northern Ireland – Obesity in Primary 1 Children (1997-2006). Available at <http://www.inisphoedata.ie/phis/indicators/tables.php?resID=1390>

<sup>12</sup> Greater London Authority (2007) Health Issues in Planning: Best Practice Guidance. London: Greater London Authority.

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