Belfast

A World Health Organization

Healthy City

BELFAST HEALTHY CITIES
Strategic Plan

Delivering the
World Health Organization
Phase VII (2020 – 2025)
European Healthy Cities
Network Core Themes in Belfast

Foreword

The city of Belfast was invited to submit a full application to become a member of the World Health Organization (WHO) European Healthy Cities Phase VII (2020 - 2025) network, following acceptance by WHO Europe of the 'expression of interest 'letter from the Lord Mayor in 2019. Phase VII builds on Belfast's 30 years of experience as a member of the network and provides an excellent foundation to meet challenges and opportunities aligned with delivering programmes within the local and regional policy context.

The priority areas within this strategic plan, were identified at the Phase VII Workshop, hosted by the Lord Mayor, Councillor John Finucane in November 2019, attended by over 60 invited representatives from the public, private, university, voluntary and community sectors in the city. The Phase VII six themes, People, Place, Participation, Prosperity, Peace and Planet and the priority areas within the themes identified at the Phase VII workshop are interdependent and mutually supportive with interconnection across the themes. They form the basis of this strategic plan. The results from the Situational Analysis Report, a requirement of the application to WHO Europe, highlights the extent of programmes across government departments and agencies on the Phase VII themes but also some of the gaps. A further requirement, the City Health Profile is currently being developed.

This strategic plan reflects the programme areas and demonstrates the connections across the WHO themes as well as the relationship to the draft **Programme for Government (PfG)** Northern Ireland, the Northern Ireland public health framework, Making Life Better and the Belfast community plan, the Belfast Agenda. Each programme area highlights the interconnected themes. It outlines Belfast Healthy Cities committed focus to improving health and well-being and reducing inequalities through: research; thought leadership; co- production; community engagement; policy influence; information sharing and dissemination and training and skills development. Belfast Healthy Cities with partner organisations will be responsible and accountable to funders, stakeholders, politicians and WHO Europe for implementation of Phase VII which will be delivered through actions outlined in the annual operational plan, during the five-year phase. The strategic plan will be reviewed with stakeholders after an initial three-year period.

The current Covid-19 pandemic has cost lives and has affected families and communities, economically and socially. Many of Belfast Healthy Cites core partners have been at the forefront of the response. Vulnerable groups, particularly older people, people with underlying health conditions as well as people who live in the most disadvantaged areas have been hit hardest by the pandemic. Covid-19 has not only highlighted the benefits of collaboration across sectors - public, private, voluntary and community - but also the need to strengthen collaborative working to continue to manage the disease during the transition stages, to provide support for the longer term health, social and economic impacts everyone is likely to experience and support Covid-19 recovery plans.

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Belfast Healthy Cities will continue to work collaboratively with all sectors in the city. We are committed to delivering these programmes and while doing so, sharing with and learning from not only our partners but also member cities across the WHO European Healthy Cities Network.

Dr David Stewart,
Chair, Belfast Heathy Cities

Joan Devlin,
Chief Executive, Belfast Healthy Cities

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1. World Health Organization European Healthy Cities Network

Over the last thirty years, encompassing six phases, the WHO European Healthy Cities Network has been a platform for inspiration and learning for European cities. The principles, methods and vision of Healthy Cities have remained true to the strategic goals of the Network, since its foundation in 1988:

- to promote action to put health high on the social and political agendas of cities

- to promote policies and action for health and sustainable development at the local level, emphasising addressing the determinants of health and equity in health

- to promote intersectoral and participatory governance for health, well-being and equity in all local policies and integrated planning for health

- to generate policy and practice expertise, good evidence, knowledge and methods to promote health in all cities in the WHO European Region

- to promote solidarity, cooperation and working links between European cities and networks of local authorities, and partnerships with agencies concerned with urban issues

- to increase the accessibility of the Network to all WHO European Member States

Within this context, each phase has emphasized and introduced new themes to member cities. The current overarching WHO framework for global health is the United Nations 2030 Agenda for Sustainable Development, consisting of 17 ambitious Sustainable Developments Goals (SDGs), which is aligned with WHO Europe's United Action for Better Health. For Phase VII, the WHO Healthy Cities Network has identified six core themes: People, Place, Participation, Prosperity, Peace and Planet and within each of the themes there are a number of priorities that represent areas for improving health and well-being and reducing health inequalities.

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Operationalising the core themes: a WHO European Healthy Cities organizational structure

Cities participating in Phase VII work individually and in partnership with each other and with WHO to develop knowledge, tools and expertise that can benefit their own city and all cities in European Member States. Structurally, **the WHO Healthy Cities Network has four components in Phase VII:**

- The network will include 100 cities and 35 national networks from all 53 WHO European Member States.

- The governing body will be the full meeting of the Network at the Annual Business Meeting and Technical Conference.

- The network will be supported by a number of committees representing the diversity of the network including a Political Committee, with representatives from cities across WHO Europe and a Scientific and Advisory Board, with technical experts from within and external to WHO.

- Subnetworks: taskforces and working groups will be established to support designated national networks and cities to develop technical guidance and training materials to support implementation of Phase VII.

Methods of working:

During Phase VII, WHO will prioritise capacity building across the network, both strengthening the capacity of individual cities, and investing in the potential of the Network as a whole. WHO will develop an implementation package to support cities to deliver the Phase VII framework, comprising guidance, tools and services aimed at advancing the capacity of cities to deliver and implement Phase VII themes.

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2. Belfast Healthy Cities

Belfast Healthy Cities, will work with stakeholders from government departments, universities, the private, public, voluntary and community sectors and within the local and regional context during Phase VII. Work on the WHO core themes, and priority areas does not occur in a vacuum. The Northern Ireland draft **Programme for Government (PfG)** a cross departmental framework with 12 outcomes is a basis for delivering public service as an effective and co-ordinated manner as possible, and 'Improving wellbeing for all - by tackling disadvantage and driving economic growth" and provides the overarching regional framework for Phase VII.

In implementing Phase VII, Belfast Healthy Cities will:

• further develop and implement a partnership-based approach on priority areas identified within the context of the city's Community plan the Belfast Agenda and the region's public health framework, Making Life Better

• produce the city health profile which will provide valuable insights into the factors that influence the health and well-being of the citizens of Belfast and the level of health inequalities experienced.

• engage citizens in defining their health needs and support them to engage with decision-makers for improved community prosperity

• identify three areas of good practice that will be shared with cities across the WHO Network for mutual learning and inspiration, and which will be monitored by WHO Europe

• develop annual operational plans that enable review and assessment of progress by all stakeholders, including funders and WHO Europe

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Operationalising the strategic plan:

Belfast Healthy Cities' model of working has the potential to enhance efforts on any given policy objective with a solid commitment to focusing on the determinants of health, reducing inequalities in health, and sharing learning and expertise from WHO and other Network cities. **Structurally there are several components:**

- The Board of Directors is the governing body of Belfast Healthy Cities. They determine the mission and strategic direction of the organisation, and ensure that it stays within its remit, the statutory and regulatory requirements. The Audit and Risk Committee, consisting of Board members, provides the Board of Directors with independent assessment and assistance on the risk register framework, the effectiveness of internal control mechanisms, and the levels of regulatory compliance, both internal and external, legally and financially. Monitoring Service Level agreements are in place with funding organisations

- Working Groups and partnerships with organisations will be established to support delivery during Phase VII. Briefing papers, health profiles, training on health determinants and health inequalities will be developed to support organisations to deliver the Phase VII programmes

- Opportunities will exist for partner organisations to participate in the WHO Subnetworks, task forces and working groups established by WHO Europe and the WHO Healthy Cities Network on core themes and priority areas

Methods of Working:

Belfast Healthy Cities will use various methods to deliver programmes on each theme including: **research, thought leadership, co-production, community engagement, policy influence, information sharing and dissemination and training and skills development.** Capacity-building during Phase VII will also be a priority.

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Figure 1 - Strategy Map

OUR VISION

Our Vision is that Belfast is recognised globally as a healthy, equitable and sustainable city

OUR MISSION

To promote health and well-being, provide inspiration and facilitate innovative collaborative action and good policy-making

OUR VALUES

| Good health is a fundamental human right of each individual | Good health is a valuable resource for families and for social and economic development | Health inequalities are avoidable and unacceptable and have consequences on all of society | Health and well-being is a shared priority for all sectors and whole of government |

OUR PROGRAMMES

| Promoting Healthy Transport | Greening the City | Community Prosperity |

| Increasing Knowledge and Capacity Building | Maximising Learning & Knowledge Exchange from Global, European and other networks |

Research

Co-Production

Thought Leadership

Capacity Building & Training

Information Sharing

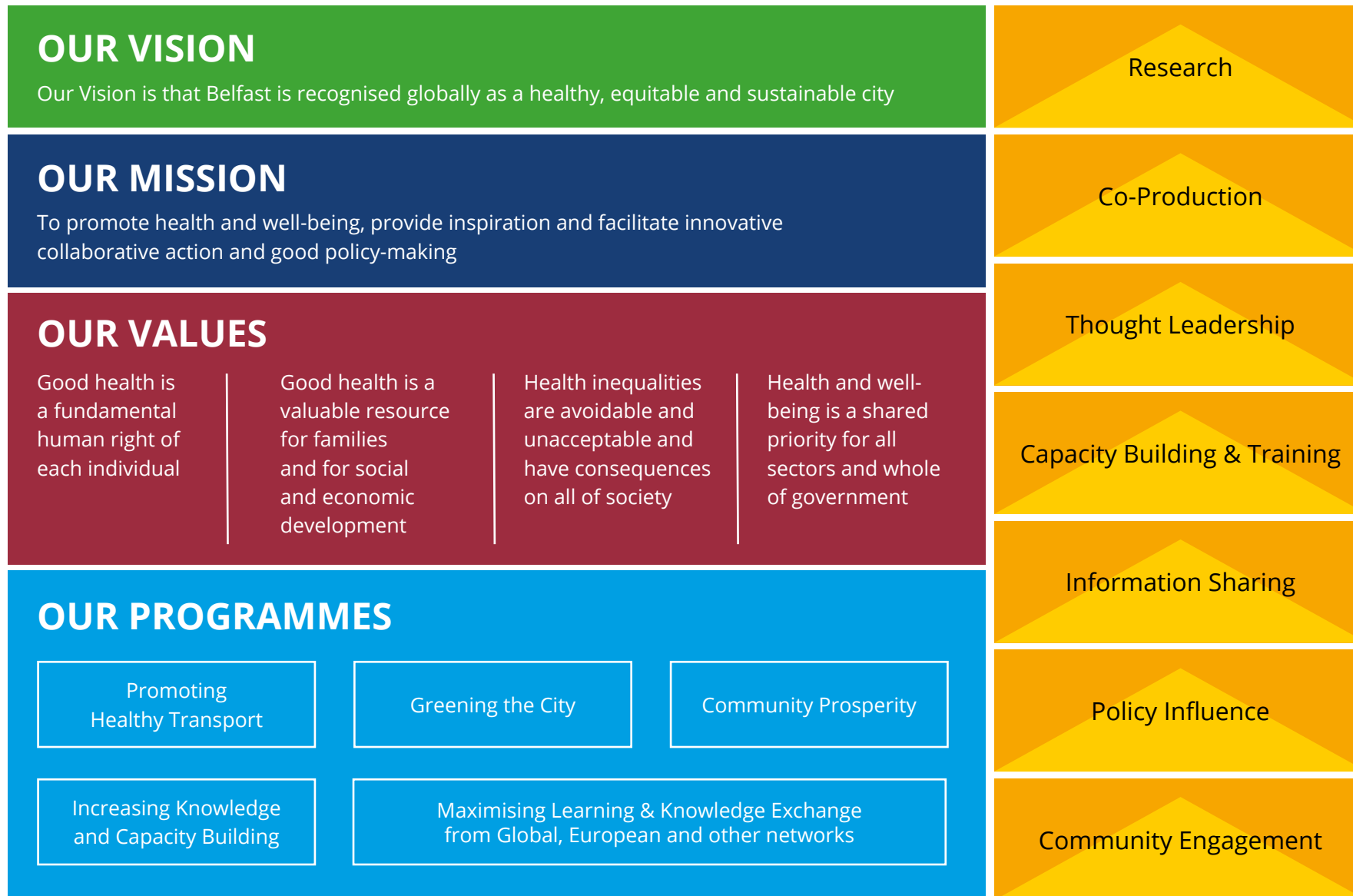Policy Influence

Community Engagement

Figure 2 - Phase VII Programmes

Promoting Healthy Transport	Greening the City	Community Prosperity	Increasing Knowledge and Capacity Building	Maximising Learning and Knowledge Exchange from Global, European and Other Networks
Improved use of public space for increased active travel and improved physical and mental well-being Agreed mechanisms for collaborative work and commitment to a series of discussions towards the common goal of reduced car dependency for improved population health	Citizens, implementers, and policy-makers, enjoy the benefits of and engage with Green Space resulting in increased health, wellbeing and prosperity and a reduction in inequalities.	Changes in policy and mechanisms are in place to increase community prosperity	Improved leadership, knowledge, skills and policies to improve health and well-being and reduce inequalities	Strengthened knowledge across sectors in Belfast and Northern Ireland on the determinants of health, inequalities and improved visibility of Belfast's programmes across global networks
Supporting the following themes:	Supporting the following themes:	Supporting the following themes:	Supporting the following themes:	Supporting the following themes:
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PROSPERITY	PROSPERITY	PROSPERITY	PROSPERITY	PROSPERITY
PEACE	PEACE	PEACE		PEACE
PLANET	PLANET			PLANET

Figure 3 - Belfast Healthy Cities Networks

A network diagram centred on **BELFAST HEALTHY CITIES** connected to:
- WHO European Healthy Cities Network
- WHO Europe
- Academic Sector
- NI Government Departments (DoH/DfI/DAERA/DE/DfC) — Core Funders (PHA/BCC/BHSCT/NIHE)
- Programme for Government
- Belfast Agenda
- Making Life Better
- Voluntary/Community Sector

Figure 4 - Sustainable Development Goals

1 NO POVERTY

2 ZERO HUNGER

3 GOOD HEALTH AND WELL-BEING

4 QUALITY EDUCATION

5 GENDER EQUALITY

6 CLEAN WATER AND SANITATION

7 AFFORDABLE AND CLEAN ENERGY

8 DECENT WORK AND ECONOMIC GROWTH

9 INDUSTRY, INNOVATION AND INFRASTRUCTURE

10 REDUCED INEQUALITIES

11 SUSTAINABLE CITIES AND COMMUNITIES

12 RESPONSIBLE CONSUMPTION AND PRODUCTION

13 CLIMATE ACTION

14 LIFE BELOW WATER

15 LIFE ON LAND

16 PEACE, JUSTICE AND STRONG INSTITUTIONS

17 PARTNERSHIPS FOR THE GOALS

SUSTAINABLE DEVELOPMENT GOALS

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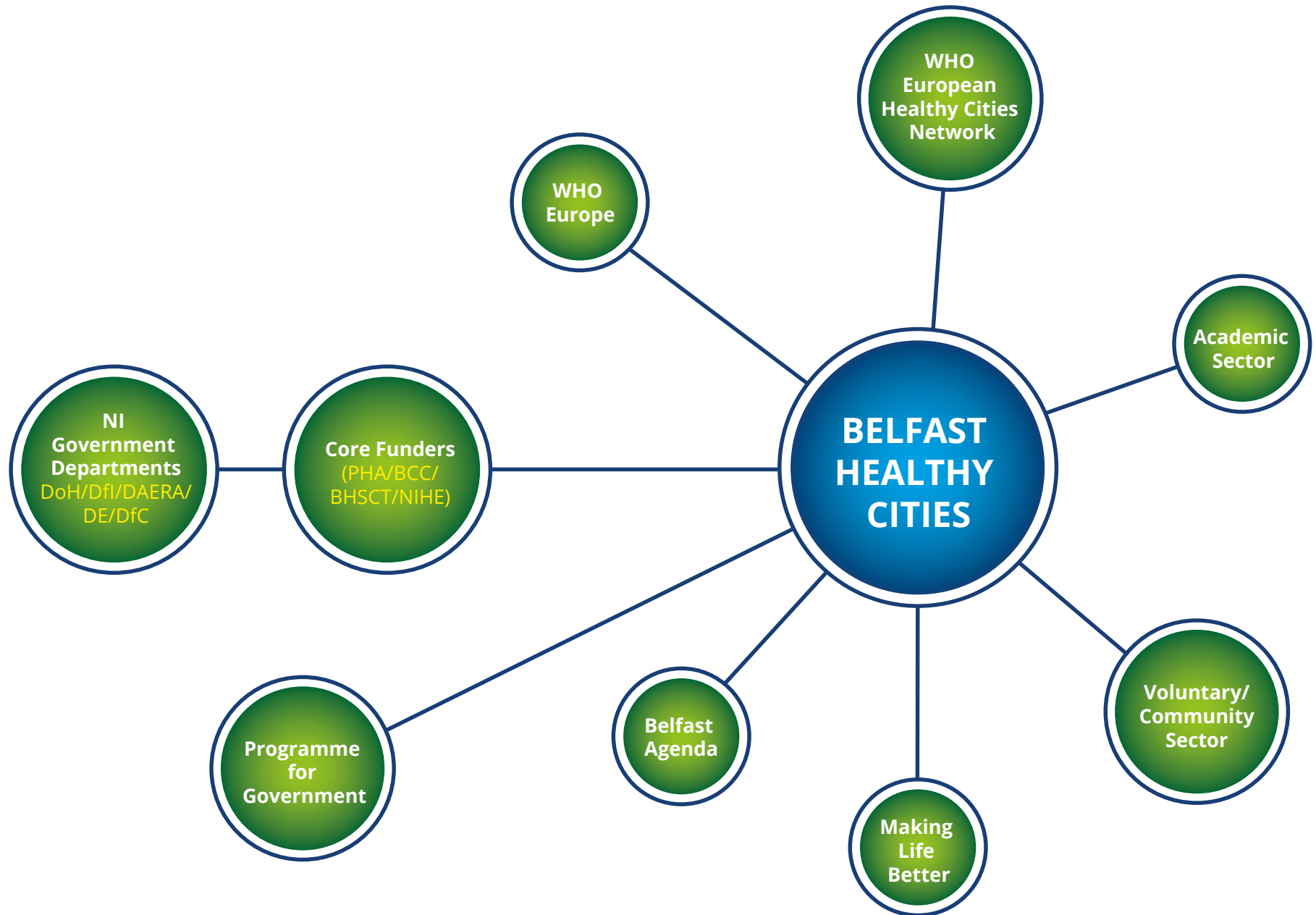
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3.0 Promoting Healthy Transport

Supporting the Phase VII themes of
People; Place; Participation; Prosperity; Peace; Planet

Covid-19 is redefining the relationship to both personal and public space. The long relationship between health and planning is one of the reasons why cities have proven so resilient. Cities have been quick to adapt, rolling out informal instructions to create a new standard of social behaviour. In a matter of weeks, officials and individuals all over the world brought about enormous change in infrastructure in city areas, normally resistant to change. Cities see the advantages of reduced traffic; the challenge for cities is how to make sure some of the changes are sustained, keeping in mind health and well-being. New housing developments are considering work ready homes, integrating remote working space into new designs. Flexibility has been at the core of change and the question is, is there the will to make this flexibility permanent.

Covid-19 has changed peoples travel habits and behaviours. There is now the opportunity to help people form more sustainable travel habits. Managing streets and public spaces, required little more than tape, traffic cones, spray paint, with a sense of urgency to bring about instant change in people's behaviour. Travel demands can be better managed including home working, staggering start hours or extended working hours to keep current underused road space for more sustainable modes of travel. Cities can be made safer by putting in place infrastructure that allows a move away from the pollution of vehicles that claim lives prematurely and an increased use of space for all. Department for Infrastructure Minister's initiative in Northern Ireland is targeted at maintaining the walking and cycling habits that have developed during Covid-19 as well as developing quiet streets to support child friendly places.

Social distancing (physical distancing) during Covid-19 has been more possible in privileged neighbourhoods. People who can work from home are largely in middle to high income jobs. Longer term, if people could work at home one day a week, it could be transformative for air pollution and public health. In changing practices, it is essential that inequalities across the communities in the city are not exaggerated.

Space is framed politically and economically. The majority of open space in cities is parking space. Parking space that is public space, requires a more sustainable approach where, for example, parking space can be allocated, where two or more people are in a vehicle, leaving current parking and other space funded by the

public, returned to the public for other usage. Space for cars is measured to ensure road width supports car driving. Pedestrian space needs to be created that is safe; pedestrians now need to have 2 metre safety zones.

Many public health challenges, such as those associated with demographic changes, growing health inequalities and increasing incidence of noncommunicable diseases, have complex connections to the physical environment. The environment has the potential to be a health-promoting and health-protecting asset that can extend people's lives life, improve quality of their lives and increase overall well-being. Designing places to improve health and well-being focuses on the positive impact that places and planning can have and reflects Belfast Healthy Cities focus on the determinants of health.

Making health goals central to the decision-making processes remains a challenge, but has real potential to create places that enhance social cohesion, increase the levels of physical activity and of mobility for people with disabilities and promote child-friendly and age-friendly environments and reduce chronic disease incidences, including obesity, asthma, cardiovascular disease and cancer. Given the increase in walkers and cyclists and the decrease in traffic during the Covid-19 pandemic, there is the opportunity to balance public space, extend the space for pedestrians and cyclists and move to space that prioritises health and improves physical and mental well-being for everyone.

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3a: Supporting good active travel infrastructure to increase physical and mental wellbeing

Supporting the Phase VII themes of
People; Place; Participation; Prosperity; Planet

Overall Goal:

The overall goal is to promote support for the creation of good-quality active travel infrastructure that boosts physical and mental health, increases physical activity, improves air quality and promotes access to public transport and all other services and facilities.

Outcome:

Improved use of public space for increased active travel and improved physical and mental well-being.

Lead organisation: Belfast Healthy Cities

Partners: Belfast City Council; Belfast Health & Social Care Trust; Community sector organisations; Department for Communities; Department for Infrastructure; Education Authority; Northern Ireland Housing Executive; Public Health Agency; PlayBoard; Outdoor Recreation Northern Ireland; Sustrans; Translink NI; WHO European Healthy Cities.

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Objective 1:

To raise awareness and create an understanding of the benefits of walking, promoting Belfast as a walking city and generating debate in relation to policies and plans for improved walking infrastructure

Objective 2:

To actively engage and involve communities in assessing, influencing, advising and monitoring walking infrastructure, promoting influencing and advising on accessibility for all and improved community prosperity

Objective 3:

To influence policies and plans to include good quality walking infrastructure for healthier places and improved community prosperity

Objective 4:

To generate awareness on the importance of improved or increased public transport routes as access to all services and facilities for communities that are 'left behind'[1]

Objective 5:

To promote legislation for no pavement parking, that supports inclusive accessibility across Northern Ireland

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1   https://localtrust.org.uk/wp-content/uploads/2019/08/local_trust_ocsi_left_behind_research_
    august_2019.pdf

3b. Generating the Evidence to Support Reduction in Car Dependency; Improving Air Quality and Public Health

Supporting the Phase VII themes of
People; Place; Participation; Planet

Reducing car dependency has the potential to mitigate a series of public health risk factors that importantly contribute to the burden of disease including: road traffic incidents, injury and death rates, injury severity, physical inactivity, air pollution, and noise pollution. Low income areas are used as quick routes around the city; these are areas where fewer people have cars but are disproportionally exposed to risk factors associated to car-centric regions, including air and noise pollution and higher road collision rates. The various characteristics of public transport – accessibility, affordability, availability, reliability, frequency, safety, and distance to bus stops – affect whether people use public transport and are key contributions that cities can make to reduce GHG (greenhouse gas) emissions. Twenty-three per cent of GHG emissions in Northern Ireland are due to transport[2]. This equates to 4.5 million tonnes of carbon dioxide equivalent, which itself has increased by 30% since 1990 levels. Cars require a large amount of urban space, (roads and car parking), which means there are less shared spaces, urban greenspace, all of which have significant health-enhancing benefits. When compared to other parts of the UK, Northern Ireland has the highest number of road deaths by region, with 34 deaths per million populations[3].

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2   DAERA, 2019; https://www.daera-ni.gov.uk/sites/default/files/publications/daera/ghg-inventory-statistical-bulletin-2017.pdf.

3   Travel Survey for Northern Ireland; https://www.infrastructure-ni.gov.uk/articles/travel-survey-northern-ireland)

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Overall goal:

The overall goal is to generate evidence and commitment to introduce policies and actions that will reduce car dependency in the city, reducing the consequences for population health, as a partner in a Queen's University Belfast, led research project, 'Developing interventions to reduce car dependency for improved population health'

Outcome:

Agreed mechanisms for collaborative work and commitment to a series of co-ordinated discussions to build synergistic actions towards the common goal of reducing car dependency and increasing the use of public space for improved public health.

Lead organisation: Queen's University Belfast

Partners: Belfast City Council; Belfast Healthy Cities; Belfast Health & Social Care Trust; Chamber of Commerce; Community sector organisations; Department for Communities; Department of Health; Department for Infrastructure; Northern Ireland Housing Executive; Public Health Agency; Royal Town Planning Institute; Sustrans; Translink NI.

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Objective 1:

To understand the organisational structures and characteristics of key stakeholders involved in the development, implementation and evaluation of interventions and policies to reduce car dependency

Objective 2:

To evaluate the importance of individual-level influences on car dependency and on alternative travel modes

Objective 3:

To provide an understanding of the complex interplay between policy and interventions on car dependency in the Belfast region

Objective 4:

To understand the preferences and perspectives of car users in relation to a series of policy alternatives to reduce car trips

Objective 5:

To gain shared understanding from the evidence for implications of reduced car dependency

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3.1 Greening the City:
Intersectoral Partnership for Healthy Places

Supporting the Phase VII themes of
Place; Prosperity; Peace; Planet

The planet is changing in ways that are unprecedented in human history, and which directly threaten human health. Protecting the planet is one of the world's greatest challenges and the current Covid-19 experience is one of today's many global health challenges and comes on top of an even greater climate and environmental crisis. The coronavirus as well as other infectious diseases, malnutrition and noncommunicable diseases are linked to the decline of biodiversity (the sheer variety of life found on Earth) and ecosystems (a geographic area where plants, animals, and other organisms, as well as weather and landscape, work together to form a bubble of life), that arise from mismanagement of the natural world. Destruction of natural habitats and climate change both drive wildlife closer to people that harbour many pathogens including the Ebola virus and Lyme disease. Seventy-five per cent of all emerging infectious diseases come from wildlife, and more deadly pathogens exist in nature. If even more troubling threats are to be averted in the future, things need to change and profoundly. The World Health Organization has warned that this will not be the last or the worst pandemic. Catastrophic levels of global warming await unless countries quintuple their carbon-cutting ambitions.

The future of planetary health depends on cities as the engines of economic growth and social change. A prosperous economy and society can be achieved that also safeguards the common good, improving the quality of the air and stopping irreversible damage to the natural habits on which protecting human health depends. Cities can choose investments from the Covid-19 emergency that can develop healthier, safer paths to be in a better place and hold on to the harmony this crisis has inspired or create higher risk futures for the planet and for population health. As most of the global population now live in cities, it is more important than ever that urban infrastructure is improved to support a higher quality of life for the growing populations in cities. Urban heat islands are created in places that have lots of activity and lots of people. They can have worse air and water quality because more pollutants are being pumped into the air. These pollutants are blocked from scattering and becoming less toxic by the urban landscape, buildings, roads, sidewalks, and parking spaces. Using green roofs, helps cool things down. An increased number of street trees in deprived areas will absorb carbon and improve the mental well-being of people resident in these areas.

The closure of leisure facilities, bars, restaurants, cafes and the need to self-isolate at home and socially distance as part of the response to Covid-19 pandemic has provided a stark reminder of the importance of urban green and blue spaces, including parks, pocket parks, greenways, beaches, rivers and canals for population health and wellbeing. Green and blue space is an integral part of the infrastructure of Belfast and opportunities now exist to consider how smaller green spaces can be integrated across the city. Planning has a key role to play in protecting and promoting health and well-being, making urban planners part of the public health community.

Overall goal:

The overall goal is to create mutually beneficial relationships between citizens and the urban environment for improved physical and mental wellbeing.

Outcome:

Improved knowledge on the impact and use of green space to inform future policies and programmes

Partners: Queen's University Belfast; Belfast City Council, Department for Infrastructure, Department of Health, Ashton Centre, Eastside Partnership, Sustrans UK; Ulster University; Northern Ireland Housing Executive; Belfast Hills partnership

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Objective 1:

To promote inclusive green environments for all, increasing physical activity and mental wellbeing to reduce the risk of long term disease

Objective 2:

To encourage the greening of public spaces to mitigate the consequences of climate change, support bio-diversity and increase recognition that trees and other vegetation are critical urban infrastructure

Objective 3:

To increase stakeholder collaboration and community engagement in design of green space

Objective 4:

To promote green space interventions to reduce health inequalities

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3.1a   Child Friendly Places

Overall Goal:

The overall goal is to create places that are actively inclusive and facilitate the pursuit of health and well-being for all.

Outcome:

Strengthened environments to ensure people of all ages have opportunities for improved physical activity and mental well-being and are better able to reach their full health potential.

Lead partner: Belfast Healthy Cities

Northern Ireland partners: Belfast Healthy Cities; Belfast Health & Social Care Trust; City/District Councils; Community sector organisations; Department of Finance; Department of Health; Department for Infrastructure; Education Authority; Ministerial Advisory Group; Northern Ireland Housing Executive; Public Health Agency; Royal Town Planning Institute (RTPI); Translink NI

Objective 1:

To promote child friendly spaces across the city, increasing knowledge of children of the relationship between health, place and environment

Objective 2:

To increase knowledge and awareness of planners across government departments and Council on design guidelines for child friendly spaces

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3.1b   Age Friendly Cities

Overall Goal:

The overall goal is to create places that are actively inclusive and facilitate the pursuit of health and well-being for all.

Outcome:

Strengthened environments to ensure people of all ages have opportunities for improved physical activity and mental well-being and are better able to reach their full health potential.

Lead partner: Belfast Healthy Cities

Northern Ireland partners: Belfast Healthy Cities; Healthy Ageing Strategic Partnership; Belfast City Council.

Objective 1:

To increase awareness of Belfast as a World Health Organization (WHO) Age Friendly City with government departments, agencies, the voluntary and community sector

Objective 2:

To increase awareness of the needs of older people in the city parks and environments

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3.2 Community Prosperity: Caring Places that Enhance Health and Well-being and Reduce Health Inequalities

Supporting the Phase VII themes of
People; Place; Participation; Prosperity; Peace

A shared prosperity[4] approach supports good health and well-being through the determinants of health throughout the course of people's lives. Shared prosperity increases healthy life expectancy, increases resilience, enhances well-being and generates community prosperity within 'left behind'[5] /excluded communities. Communities that have been 'left behind' have experienced the disappearance of a wide range of social facilitates, social infrastructure including shops, pubs and cafes, community centres and in some communities, community organisations, as well as economic decline. This has been exaggerated in Belfast's disadvantaged communities by the migration of people as a result of the conflict within and between communities and deaths during 'the troubles'. Investing in these communities that have missed out on the wider benefits of social, environmental, technological and economic growth is critical to increasing shared and community prosperity, reducing inequalities and delivering caring places[6] with inclusive sustainable growth. Engaging people who live in 'left behind' communities supports the identification of existing assets - knowledge, skills, resources, land and buildings - which can be harnessed to enhance community prosperity and growth.

Covid-19 has brought changed circumstances for people's lives – essential services have been interrupted, especially to people who really need the services. Death rates are highest amongst vulnerable population groups and Covid-19 has disproportionately affected those who are disadvantaged. Education has been affected particularly for families who do not have access to Wi-Fi. Employing people locally has sustained local connections; levels of pollution in air and water have decreased and levels of physical activity have increased.

Covid-19 shows how regional and local government can react quickly and radically and bring about instant change in peoples' behaviour in their daily living and working

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4   https://www.worldbank.org/en/research/publication/a-measured-approach-to-ending-poverty-and-boosting-shared-prosperity

5   https://localtrust.org.uk/wp-content/uploads/2019/08/local_trust_ocsi_left_behind_research_august_2019.pdf

6   https://www.ads.org.uk/a_caring_place_report/

activities. Collaboration has increased across administrative, political and community infrastructure in Northern Ireland with many initiatives across the Northern Ireland Executive supporting local communities, businesses and infrastructure. Lessons are still being learnt on how to sustain the benefits that have been put in place to limit the spread of the virus, alongside the increased community resourcefulness. Defining community health is a central element of this. There is a need for systemic change and to consider how as a city, health is monitored and how 'health in all policies' become more than rhetoric, making it a permanent feature in all policy making and a primary objective in rejuvenating the city. Covid-19 recovery plans are now underway across local and regional government and must include new approaches to support social interaction for people experiencing loneliness.

Covid-19 experience, highlights how communities play a vital role in promoting health, health protection and disease prevention as well as the inclusion of older people, children and other vulnerable groups. With the current pandemic, communities are experiencing, resourcefulness and new-found unity and an expression of hope. Companies have come together to manufacture ventilators; self-isolating households gathered on doorsteps across the city to pay tribute to the efforts of frontline health and other workers. Communities have learned how much they depend on each other for health systems as well as for food systems and supply chains and that society itself, is only as safe as its most vulnerable members.

Overall Goal

The overall goal is to change public policy to include interventions to generate prosperity in 'left behind' communities, strengthening community assets, creating caring places and reducing health inequalities.

Outcome:

Changes in policy and mechanisms are in place to increase community prosperity in left behind communities

Lead organisation: Belfast Community Planning Partnership

Partners: Belfast City Council; Belfast Health & Social Care Trust; Belfast Healthy Cities; Community Planning partners; Department for Communities; Department for Infrastructure; Invest NI; Northern Ireland Housing Executive; Public Health Agency; Sustrans; The Executive Office; Translink; Voluntary and community organisations

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Objective 1:

To define, increase awareness and understanding of community prosperity and the key causes of 'left behind' communities in Belfast

Objective 2:

To identify and build on the assets within these communities that will generate action to develop caring places and increase community prosperity

Objective 3:

To inform public and private decision makers of policies and action changes, (social, technological, environmental and economic) required that will strengthen community prosperity and develop caring places, increasing health and wellbeing and reducing inequalities

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4.0 Increasing Knowledge and Capacity Building for Improving Health and Reducing Health Inequalities

Supporting the Phase VII themes of
People; Place; Participation; Prosperity; Peace; Planet

Policies across sectors, including regional and local government, have a significant impact on people's health. Achieving better health outcomes in policies require strengthening public health functions and capacity. While capacity and resources vary across organisations, investing in public health capacity-building is a priority to improve policies and action for improving health and reducing inequalities. Capacity-building and tool development as part of strategic leadership for Phase VII, will comprise of needs assessment, training development, tools and services aimed at advancing the capacity of organisations to collectively implement policies and practice to reduce inequalities and implement healthy cities approaches. The greatest health challenges – non-communicable diseases, health inequalities and climate change are highly complex and are linked to the determinants of health. Reviewing procurement policies for food, transport and other public tenders could enhance the health and sustainability and could protect planet health. Belfast Healthy Cities will work with WHO European Healthy Cities Network and partnerships in Belfast, regionally, UK and Ireland to increase knowledge and build capacity to reduce health inequalities.

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4.1 Inequalities Training: Building Public Health Capacity at the Local Level

Overall Goal:

The overall goal is to increase capacity at operational and strategic level across sectors for greater leadership for health and well-being and to support organisations to shape policy and deliver actions that will improve health and wellbeing for all and reduce inequalities.

Outcome:

Increased knowledge about evidence, tools and skills within organisations that focus policy and actions on improving health and reducing health inequalities in a post Covid-19 society and in future pandemics.

Lead organisation: Belfast Healthy Cities

Partner organisations: Belfast City Council; Belfast Health & Social Care Trust; Department of Health; Department for Infrastructure; Department for Communities; Education Authority; Northern Ireland Housing Executive; Public Health Agency; Queen's University Belfast; Ulster University; Voluntary, community and social enterprise organisations; WHO Europe

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Objective 1:

To increase knowledge and understanding of organisations on health, the root causes of health inequalities, how organisations can contribute to reducing inequalities and gain knowledge on how not to introduce new inequalities

Objective 2:

To support organisations to continue to change policies and actions to reduce health inequalities

Objective 3:

To share experiences and transfer knowledge and learning from WHO Europe and the WHO European Healthy Cities Network members

Objective 4:

To support sectors in Northern Ireland to apply Health Equity in All Policies, to enhance policy making to improve health, reduce inequalities

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4.2 Health Literacy: Fostering Greater Participation for Health and Well-being through Increasing Health Literacy

Supporting the Phase VII themes of
People; Participation; Prosperity

In recovering from coronavirus, it is essential new and shared prosperity approaches are generated to deliver hope and aspirations within 'left behind' communities. Health literacy programmes will support understanding of health messages. Shaping these messages will support the vulnerable populations to engage effectively. Department of Communities has been working with local communities across Northern Ireland to support disadvantages and vulnerable groups with food, advice and other forms of support. Departments of Finance and for Economy are supporting businesses across Northern Ireland with Covid recovery plans.

Low levels of health literacy in populations results in less-healthy choices, riskier behaviour, poorer health, less self-management and more hospitalisation. Empowering individuals by increasing health literacy, can support them to achieve a better understanding of and control over their lives, and thereby enable them to play an active role in improving their own health. Meeting the health literacy needs of the most disadvantaged and marginalized communities will accelerate progress in reducing inequalities in health. Public sector organisations can take a strong leadership role to ensure information provided is clearly understood, buildings are easy to navigate and services easy to access, by developing and implementing health literacy promotion policies and strategies, and setting up special projects, coordinating action across sectors, and conducting regular health literacy surveillance regularly.

Overall Goal:

The overall goal is to strengthen health literacy in regional policies and develop health literacy capacity by co-designing resources

Outcome:

Individuals and communities are supported to improve their understanding of health-related information, enabling them to make decisions to improve their health and well-being.

Lead organisation: Belfast Healthy Cities

Partner organisations: Department of Health; Northern Ireland Health & Social Care Trusts; Education Authority; Community Planning Partnerships; Public Health Agency; Northern Ireland Housing Executive; Northern Ireland City/District Councils; Communities within the Community prosperity programme; Community Development & Health Network; WHO European Healthy Cities Network; Ulster University; Queen's University Belfast

Objective 1:

To strengthen the knowledge and skills of professionals to support them to enhance their health literacy practice

Objective 2:

To support organisations to conduct health literacy audits

Objective 3:

To promote health literacy within policy and practice across Belfast, Northern Ireland and UK

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4.3 Seminar Series on People; Place; Participation; Prosperity; Peace; Planet

Overall goal:

The overall goal is to provide inspiration, knowledge and learning on subject areas from local organisations, cities and other experts' in the WHO European Healthy Cities Network on the WHO Phase VII themes

Outcome:

Increased knowledge and inspiration for local organisations on positive interventions on health determinants and actions to improve health and wellbeing reduce health inequalities across sectors

Lead organisation: Belfast Healthy Cites

Partners: Governments departments; Ulster University; Queen's University Belfast; Public Health Agency; Belfast City Council; Belfast Health & Social Care Trust; Northern Ireland Housing Executive; Voluntary, social enterprise, community and private sector organisations

Objective 1:

To deliver a seminar series programme on WHO Phase VII priorities to inform local organisations about actions to improve health and reduce health inequalities

Objective 2:

To consider methods of delivering the seminar series to extend the learning across Northern Ireland

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5.0 Maximising Learning and Knowledge Exchange from Global, European, United Kingdom, Republic of Ireland, Northern Ireland and Belfast Networks

Supporting the Phase VII themes of
People; Place; Participation; Prosperity; Peace; Planet

Overall goal:

The overall goal is to promote Belfast within global and European networks and to maximise knowledge and learning from WHO, international and other networks among elected representatives; stakeholders in the public, voluntary, community and private sectors

Outcome:

Strengthened knowledge across sectors in Belfast and Northern Ireland on the determinants of health, inequalities and improved visibility of Belfast's programmes across global networks.

Lead organisation: Belfast Healthy Cities

Partners: Department of Health; Public Health Agency; Belfast Health & Social Care Trust; Belfast City Council; Northern Ireland Housing Executive; Queen's University Belfast; Ulster University; Third and community sector organisations; Northern Ireland Assembly Committees; Belfast City Council Committees

PEOPLE

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Objective 1:

To share evidence and learning from WHO European Healthy Cities Networks to support policy development, reviews and actions at strategic and operational level

Objective 2:

To engage in partnerships to strengthen networks and provide a focus on health in sectoral policies and actions

Objective 3:

To generate visibility on Phase VII theme programme areas and consider increased multimedia approach in promoting information and knowledge exchange

PEOPLE

PLACE

PARTICIPATION

PROSPERITY

PEACE

PLANET

	DRAFT PROGRAMME FOR GOVERNMENT	BELFAST AGENDA	Making Life Better	SUSTAINABLE DEVELOPMENT GOALS
Promoting Healthy Transport	2 We live and work sustainably, protecting the environment 4 We live long, healthy, active lives 11 We connect people and opportunities through our infrastructure	City Development Living Here	Creating the Conditions Empowering Healthy Living	SDG 3 Good Health and Well-being SDG 7 Affordable and clean energy SDG 11 Sustainable Cities and Communities
Greening the City	2 We live and work sustainably, protecting the environment 4 We live long, healthy, active lives 10 We have created a place where people want to live and work, to visit and invest 11 We connect people and opportunities through our infrastructure	City Development Living Here Growing the Economy	Creating the Conditions	SDG 3 Good Health and Well-being SGD 6 Clean Water and Sanitation SDG 7 Affordable and Clean Energy SDG 11 Sustainable Cities and Communities SDG 13 Climate Action SDG 14 Life Below Water
Community Prosperity	3 We have a more equal society 5 We are an innovative, creative society where people can fulfil their potential 6 We have more people working in better jobs 7 We have a safe community where we respect the law and each other 8 We care for others and help those in need 9 We are a shared, welcoming and confident society that respects diversity 12 We give our children and young people the best start in life	Working and Learning Living Here	Giving Every Child the Best Start Equipped throughout Life Empowering Communities	SDG 1 No Poverty SDG 2 Zero Hunger SDG 3 Good Health and Well-being SDG 4 Quality Education SDG 5 Gender Equality SDG 8 Decent Work and Economic Growth SDG 10 Reduced Inequalities SDG 16 Peace, Justice and Strong Institutions SDG 17 Partnerships for the Goals

	DRAFT PROGRAMME FOR GOVERNMENT	BELFAST AGENDA	Making Life Better	SUSTAINABLE DEVELOPMENT GOALS
Health Literacy	3 We have a more equal society 4 We live long, healthy, active lives 5 We are an innovative, creative society where people can fulfil their potential 8 We care for others and help those in need 12 We give our children and young people the best start in life	Working and Learning Living Here	Giving Every Child the Best Start Equipped throughout Life Empowering Healthy Living Empowering Communities	SDG 3 Good Health and Well-being SDG 10 Reduced Inequalities
Reducing Car Dependency	2 We live and work sustainably, protecting the environment 4 We live long, healthy, active lives 11 We connect people and opportunities through our infrastructure	Living Here Working and Learning City Development	Creating the Conditions Empowering Communities	SDG 7 Affordable and clean energy SDG 11 Sustainable Cities and Communities SDG 13 Climate Action
Increasing Knowledge and Capacity Building	3 We have a more equal society 4 We live long, healthy, active lives 5 We are an innovative, creative society where people can fulfil their potential 8 We care for others and help those in need 12 We give our children and young people the best start in life	Living Here Working and Learning City Development	Giving Every Child the Best Start in Life Equipped throughout Life Empowering Healthy Living Empowering Communities	SDG 3 Good Health and Well-being SDG 5 Gender Equality SDG 10 Reduced Inequalities SDG 11 Sustainable Cities and Communities

Belfast
A World Health Organization
Healthy City

Belfast Health and Social Care Trust

Public Health Agency

Housing Executive