

Application for designation as a member city of the WHO European Healthy Cities Network in Phase VII (2019–2024)

Guidance for application for designation as a member city of the WHO European Healthy Cities Network

Assessment will not begin until WHO has received a complete electronic application. The application must be submitted in English together with the supporting documents in their original language with a correct English translation (or a summary in certain cases).

Before you complete the form, please carefully read the document outlining the implementation framework of the Network in Phase VII and the Copenhagen Consensus of Mayors (referenced in Annex 7 of the document).

If you need assistance or have questions while completing this application, please contact the WHO Regional Office for Europe at: eurohealthycities@who.int

Applicant city

City: Belfast

Country: United Kingdom

City population: 340,220

Social media details: @belfasthealthy

Coordinator

Name: Joan Devlin Title: Chief Executive

Address 1: Gordon House Address 2: 22-24 Lombard Street City: Belfast

Country: N Ireland Postal code: BT1 1RD

Telephone: 0044 (0) 28 9032 8811

Email: joan@belfasthealthycities.com Website: www.belfasthealthycities.com

1. Political and partnership commitment

Mayor

Name: Councillor Frank McCoubrey	Title: the Right Honourable, the Lord Mayor	Date elected: 1 June 2020
Address 1: Lord Mayor's Office	Address 2: Belfast City Hall	City: Belfast
Country: N Ireland	Postal code: BT1 5GS	
Telephone: 0044 (0) 28 9032 0202	Email: lordmayorsoffice@BelfastCity.gov.uk	Website: http://www.belfastcity.gov.uk/

Politician responsible for the healthy city project in your city

Name: Daniel Baker	Title: Cllr	Date elected: 1 June 2020
Jim Rodgers	Cllr	
Address 1: Members Room	Address 2: Belfast City Hall	City: Belfast
Country: N Ireland	Postal code: BT1 5GS	
Telephone: 0044 (0) 28 9032 0202	Email: bakerd@belfastcity.gov.uk rodgersj@belfastcity.gov.uk	Website: http://www.belfastcity.gov.uk/

Council resolution supporting the participation of the city in Phase VII

Date of council resolution:

Please email a signed, scanned copy of the council resolution.

A 2–3-page Phase VII situation analysis document

This should identify the opportunities and challenges in the goals and themes at the city level and the priority issues for Phase VII.

Please email a scanned copy of the document.

[Situational Analysis Summary](#)

[Full Situational Analysis](#)

Letter of commitment from the mayor

To be attached

The letter should indicate the mayor's agreement to the city participating in Phase VII and include explicit commitment to the following:

- the dedication of resources to deliver the implementation framework for Phase VII;
- active participation in meetings of the Network and subnetworks;
- participation of the mayor in meetings of mayors;
- external monitoring and evaluation of the city by WHO; and
- payment of an annual financial contribution throughout Phase VII (2019–2024).

Please email a signed, scanned copy of the letter of commitment.

2. Human resources

Coordinator

Name of coordinator (or equivalent) for the healthy city project in your city: Joan Devlin

Title: Ms

Date appointed: 1996

Full time? Yes ✓ No

(Full-time employees who only work part-time for the healthy city project are classified as part-time)

Curriculum vitae of coordinator

Please email a one-page summary.

Attached

Job description for coordinator

Please email a summary in English.

Attached

Coordinator's competence in English: basic intermediate advanced ✓

If the coordinator is not fluent in English, what support is available?

Healthy city project office or team

How many staff members currently work for the healthy city project office or team?

(Full-time employees who only work part-time for the healthy city project are classified as part-time.)

Number of full-time staff: **4**

Number of part-time staff: **1**

Number of regular volunteers: n/a **Several student placements annually**

3. Intersectoral steering group or partnership group

Which people and agencies are represented on the main intersectoral steering group or partnership group that supports the healthy city project in your city?

What are the names of main agencies or representatives?

Please email a scanned copy of the letter of commitment to this application signed by the chair of the steering or partnership group.

[Belfast Health and Social Care Trust](#)

[Belfast City Council](#)

[Extern](#)

[Department of Health](#)

[Different Tracks Global Ltd](#)

[Northern Ireland Housing Executive](#)

[Queen's University Belfast](#)

[Ulster University](#)

[Strategic Investment Board, Northern Ireland Executive](#)

4. City health profile

If your city has a city health profile, please answer these questions:

A City Profile is being prepared by Belfast Healthy Cities, with support from several agencies in the city including Department of Health; Northern Ireland Statistics and Research Agency, Belfast City Council, Census 2011 information. A final draft is anticipated to be available in September 2020. It is envisaged this will contribute to Neighbourhood/Area Planning within the Belfast Agenda. It will also outline progress on key indicators from the 1998 and 2008 profiles.

The link below is based on the last completed city profile

What is the title of the profile? **Divided by Health: a city profile**

What is its date of issue? **2008**

What is its status (for example: draft, in consultation, endorsed, implemented)? **Endorsed**

What time does it cover? **1996-2006**

https://www.belfasthealthycities.com/sites/default/files/publications/DividedbyHealth_KeyFindings_2008.pdf

Several other profiles on small geographical areas or themes have been developed during Phase V and Phase VI.

Care Zone profile

<https://www.belfasthealthycities.com/sites/default/files/publications/0%20Care%20Zone%20Health%20Profile.pdf>

The Care Zone Health Profile has been produced as part of the Care Zone project, which was established as a community development pilot to tackle poor mental health and reduce suicide in the Sacred Heart Parish area in north Belfast. The project brings together a number of key stakeholders that operate in the area, including statutory, voluntary and community organisations and local residents. The Care Zone Health Profile contains statistical data on health and well-being and on the determinants of health, including demography, education, skills, housing and community safety. The health profile also served as a comprehensive resource to inform local community organisations and residents alike. The Care Zone Health Profile has been complemented with a range of qualitative data collected from residents throughout the duration of the Care Zone project, which are available in the [Care Zone report](#)

The Care Zone Health Profile has been collated and produced by Belfast Healthy Cities, with input and support from the Department of Education, Department of Health, Northern Ireland Housing Executive and the Public Health Agency.

Please email a copy of the city health profile or its website link.

If your city does not have a city health profile, please answer these questions:

Do you have anything similar? If so, please describe it.

What are your intentions and time scale for producing a city health profile?

5. Integrated planning for health

If your city has a city health development plan or equivalent, please answer these questions:

[Programme for Government \(PfG\)](#) sets the broader context for working together in Northern Ireland and is aligned with the UN SDGs. It recognizes the inter-relationship between health, disadvantage, inequality, childhood development and education, employment, the social and physical environment, and economic growth.

[Making Life Better](#) (MLB) is the Northern Ireland strategic framework for public health. It is designed to provide direction for policies and actions to improve the health and well-being of people in Northern Ireland and to reduce health inequalities. It is a framework agreed across all departments in the Northern Ireland Executive, with a commitment to creating the conditions for individuals, families and communities to take greater control over their lives and be enabled and supported to lead healthy lives. The approach to public health focuses on working collaboratively

with individuals, communities and partner organisations to address the factors that impact on health and wellbeing in Northern Ireland and to ensuring that there are effective mechanisms in place across the life to ensure protection of the community from current and future threats to public health.

The Northern Ireland [Public Health Agency](#) is responsible for delivering the framework, which is currently under review. A range of organisations are contracted across Northern Ireland and Belfast to deliver the MLB themes. The purpose of the Public Health Agency is to improve the health and social wellbeing of our population and reduce health inequalities through strong partnerships with individuals, communities and other key public, private and voluntary organisations. The Chief Executive of Belfast Healthy Cities is a member of the Making Life Better Review group.

Can your city show evidence of integrated planning for health, such as a city health development plan or equivalent?

There are a number of partnerships in the city working to deliver the priorities within the Making Life Better framework. The [Belfast Health & Social Care Trust](#) in late 2019 began leading a process to bring existing partnerships into a unified format under **A Caring & Compassionate City**. The Chair and Chief Executive of Belfast Healthy Cities are participating in these discussions and workshops. This work was postponed due to Covid-19 but meetings will resume in September 2020.

In addition, there is in place across all Councils in Northern Ireland, **Community Planning Partnerships**. The Belfast Community Planning Partnership has produced the [Belfast Agenda](#), which was created by a partnership of key city partners, residents and community organisations. It is led by Belfast City Council and sets out the joint vision and long-term ambitions for Belfast's future, as well as outlining the priorities for action over the next four years. The Belfast Agenda document can be recognised as an **equivalent of a City Health Development Plan** and reflects the framework and process of the **City Health Development Plan Framework**, produced by WHO Healthy Cities in 1996.

What is the title of the plan? Belfast Agenda

What is its date of completion? The Belfast Agenda was produced in 2017.

What is its status (for example: draft, in consultation, endorsed, implemented)?

Endorsed/Being implemented

What time period does it cover? 2017 – 2035

Please send a copy of the plan by email or the website link to the report.

Belfast Agenda: <https://www.belfastcity.gov.uk/council/Communityplanning/BelfastAgenda.aspx>

If the plan is being implemented, are there progress or evaluation reports?

Yes ✓ No

If yes, list the titles and dates produced.

Belfast Agenda - Statement of Progress, 2017 -2019, published December 2019

The statement of Progress 2017 – 2019 provides an update on more than 25 key targets for priority identified in the Belfast Agenda, the city’s first community plan. It includes information and statistics on key areas including economic development, making life better for residents, competitiveness, sustainability, education and skills development

Please email the reports or the website links to the reports.

http://www.belfastcity.gov.uk/web/FILES/CommunityPlanning/Belfast_Agenda_Statement_of_Progress_FULL_REPORT.pdf

If your city does not have a city health development plan or equivalent, please answer these questions:

Do you have anything similar? If so, please describe it. As above

Is there evidence of strategic partnerships for health in your city?

Belfast Healthy Cities is a partnership for health in the city. A number of Area Partnerships exist that deliver on health determinants and various local partnerships also provide services on health and well-being issues.

Please outline the remit and/or achievements of the partnerships (in fewer than 200 words).

Belfast Healthy Cities partnership has been in existence for over 30 years and has had extensive influence in engaging other sectors in health and well-being issues; in influencing policy in government departments and public agencies and in promoting a partnership approach to health across Northern Ireland. It was the first partnership in the city in 1988 and has developed innovative programmes to address health determinants in the city as well as extensive capacity building and tools on health and health inequalities.

Over the 30 years, Belfast Healthy Cities has continued to evolve on the ‘three constants’ 1) Focus on equity and the determinants of health, from partnership based approaches for health

improvement, to community participation and policies and actions that address the root causes of ill health; 2) Putting health on the political agendas and making strategic and organic links with other relevant initiatives within the city; 3) Promoting partnership-based planning for health with the notion of systematic and integrated planning for health development in the form of the city health development planning tool. Further information is available in the publication:

Belfast Healthy Cities: A Partnership for Creating a Healthy, Equitable and Sustainable City

<https://www.belfasthealthycities.com/sites/default/files/publications/BHC30BookletSquareOnline.pdf>

6. Health-promoting, equitable and sustainable local development

Can your city show evidence of health and well-being dimensions in the overall city development strategy or equivalent?

What is the title of the plan? **Belfast Local Development Plan**

The Belfast Local Development Plan 2035 (LDP) will set out a clear vision for how the Council area should look in the future by deciding what type and scale of development should be encouraged and where it should be located. It will inform the general public, statutory authorities, developers and other interested bodies of the policy framework and land use proposals that will implement the strategic objectives of the Regional Development Strategy (RDS) and other regional planning policies, and will guide development decisions within Belfast up to 2035.

The new LDP will comprise of two development plan documents:

Plan Strategy – The strategic policy framework for the plan area as a whole across a range of topics. It will set out an ambitious but realistic vision for Belfast as well as the objectives and strategic policies required to deliver that vision. Establishing this strategic direction early in the plan process will provide a level of certainty on which to base key development decisions in the area as well as the necessary framework for the preparation of the Local Policies Plan; and

Local Policies Plan – The council’s local policies and site specific proposals in relation to the development and use of land in Belfast. It will contain the local policies, including site specific proposals, designations and land use zonings required to deliver the council’s vision, objectives and strategic policies, as set out in the Plan Strategy.

What is the date of its completion? Original date was late 2020 – delayed due to Covid-19

What is its status (for example: draft, in consultation, endorsed, implemented)?

The plan is at draft strategy stage with consultation already carried out. Local Policies Plans will be developed, 2020 – 2022, within the framework of the Local Development Plan.

What time period does it cover? **Initiated 2015 - 2035**

Please send a copy of the plan by email or the website link to the report.

Draft Plan Strategy is available at:

https://yoursay.belfastcity.gov.uk/planning-and-place/belfast-ldp-2035-draft-plan-strategy-equality-impa/supporting_documents/BELFAST%20LDP%20%20DRAFT%20PLAN%20STRATEGY%20%20WEB.pdf

If the strategy is being implemented, are there progress or evaluation reports?

Yes No X

If yes, list the titles and dates produced (BCC to comment).

Please email the reports or the website links to the reports.

List of relevant Local Development Plan documents are available at:

<https://www.belfastcity.gov.uk/buildingcontrol-environment/Planning/localdevelopmentplan.aspx#LDPemail>

Other supporting strategies that promote health, equitable and sustainable development include:

[Belfast Resilience Strategy Draft 2019](#)

Belfast's Resilience Strategy has been informed by, and is aligned with the UN Sustainable Development Goals. The 2030 Agenda for Sustainable Development is an historic global agreement to eradicate extreme poverty, fight inequality and injustice and leave no one behind. Agreed by world leaders at the UN in 2015, the 17 Sustainable Development Goals (SDGs) succeed the Millennium Development Goals (MDGs). The SDGs are universal with all signatories- including the UK- expected to contribute to them internationally and deliver them domestically. Belfast's Resilience Strategy contributes to the delivery of the 17 SDGs.

[A Bolder Vision for Belfast: Reimagining the centre, Draft December 2019](#)

[Green and Blue Infrastructure Plan 2020](#)

7. a) Goal 1: Fostering health and well-being for all and reducing health inequities

How will your city take forward Goal 1?

Please outline no more than three actions in fewer than 250 words. These actions should be measurable and represent key priorities as identified by the city health profile. These actions will provide the basis for the evaluation of the city throughout Phase VII.

Public Health Agency is the lead organisation across Northern Ireland focusing work on reducing inequalities, commissioning work to deliver on the priorities of Making Life Better.

A city health profile is being developed for the city as part of the Phase VII application process. It will provide information at various administrative levels. Data are aligned with the strategic indicators and priorities of Making Life Better, a Whole System Strategic Framework for Public Health in Northern Ireland and the Belfast Agenda. It will provide insights for service delivery, equity and access to services.

Community Prosperity

Caring Places that Enhance Health and Well-being and Reduce Health Inequalities

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.

This will support the delivery of the Belfast Agenda and the Caring & Compassionate City initiative across the city, linked to the regional Programme for Government targets.

Promoting healthy transport

Increasing Physical and Mental Well-being through Promotion of Good Quality Active Travel Infrastructure

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.

This will support delivery of Belfast Resilience Strategy, Department of Infrastructure Active Travel agenda and Making Life Better ethos of collaborative delivery of public health.

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

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.

This will support the delivery of work to reduce inequalities across the city of Belfast, Belfast Agenda and Making Life Better.

7. b) Goal 2: Leading by example nationally, regionally and globally

How will your city take forward Goal 2?

Please outline no more than three actions in fewer than 250 words.

Belfast's Phase VII strategic plan will support delivery of local and regional government strategies including Belfast Agenda, a city wide initiative Caring and Compassionate Cities, Making Life Better and deliver on outcomes identified within the Programme for Government. This brings an awareness of and focus on delivering the priorities outlined in [Belfast Charter for Healthy Cities \(2018\)](#) and the supporting city level delivery of the Sustainable Development Goals.

Belfast Healthy Cities continues to draw attention to and align work across Belfast with WHO priorities for health and wellbeing. The current review of Northern Ireland Programme for Government provides an opportunity to influence government priorities and align with the Sustainable Development Goals (SDGs). This will direct local delivery on the SDGs and provide a mechanism for reporting on progress towards the SDGs in Northern Ireland. Belfast Healthy Cities programmes were included in the NI report, within the UK report to the UN in 2019.

A series of capacity building lecture series will draw on learning and examples of best practice from across the Healthy Cities Network and support policy development and organisational delivery on a health-in-all-policies approach. The 6 Ps will provide the overarching themes for learning and sharing, and best practice locally can be highlighted to a European audience through annual conference and networking opportunities.

A training programme for senior level health professional, policy makers and practitioners will highlight WHO evidence and policy on emerging areas of public health to be considered at city level. Like previous programmes, it will provide a forum for networking and cross sectoral planning on health and wellbeing to deliver on the shared agenda of reducing inequalities.

7. c) Goal 3: Supporting implementation of WHO strategic priorities

How will your city take forward Goal 3?

Please outline no more than three actions in fewer than 250 words.

The Belfast Agenda is the city's first community plan, created by a partnership led by Belfast City Council. It identifies the work that a cross sectoral partnership will focus on to drive prosperity, reduce inequalities for all people and communities. Belfast Healthy Cities is a member of the Growing the Economy Board, representing the third sector and sharing learning and experience from WHO Europe to shape priorities. A lead officer for the Belfast Agenda is a member of Belfast Healthy Cities Board of Directors. The city health profile will contribute to the evidence base on health determinants for the Belfast Agenda.

Belfast Healthy Cities continues to lead the city's first intersectoral partnership, initiated through the WHO Healthy Cities Network and continues to inform direction of policy and practice to promote health and wellbeing. The Board of Directors include representation from local and regional government, health and social care, academia and third sector. There is a commitment for the strategic priorities of Phase VII and United Action for Better Health in Europe Draft European Programme of Work, 2020–2025, to be aligned within the strategic priorities of these organisations as they lead policy development, research and services across the city. Covid-19

has increased partnership working and information sharing across sectors, this approach has been welcomed and will be considered in the way forward for city Reset/Recovery Plans and future emergency planning.

Belfast Healthy Cities is a member of and informs the mid-term review of Northern Ireland Public Health Framework Making Life Better. The priorities within Phase VII, Sustainable Development Goals and Draft United Action for Better Health in Europe will shape the policy direction of the review and the operational delivery of the framework.

8. Core themes of Phase VII

Theme 1: Investing in the people who make up our cities

Please describe (in fewer than 250 words) how you intend to address this core theme overall and which issues you intend to emphasize. These should be relevant to the results of your city's Phase VII situation analysis report.

Programme title: Fostering greater participation for health and well-being through health literacy

Lead organisation: Belfast Healthy Cities

In recovering from coronavirus, it is essential new and shared prosperity approaches are generated to deliver hope and aspirations to communities that are left behind. Health literacy programmes support understanding of health messages. Shaping these messages will support the vulnerable populations to engage effectively. Low levels of health literacy in populations result in less healthy choice, riskier behaviours, poorer health, lesser self-management and more hospitalization. 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.

The programme will support the delivery of the themes: **People, Participation and Prosperity**

Overall Goal: The overall goal is to strengthen health literacy in regional policies and develop health literacy capacity by co-designing services.

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

Objectives:

1. To strengthen the knowledge and skills of professionals to support them to enhance their health literacy practice
2. To support organisation to conduct health literacy audits
3. To promote health literacy within policy and practice across Northern Ireland, Ireland and UK

Actions: The programme will be delivered through the following actions: co-developed training programmes; Train the Trainers programmes; co-developed resources; conducting health literacy organisational audits and provision of training and capacity on health literacy to professionals and communities.

Theme 2: Designing urban places that improve health and well-being

Please describe (in fewer than 250 words) how you intend to address this core theme overall and which issues you intend to emphasize. These should be relevant to the results of your city's Phase VII situation analysis report.

Programme title: Increasing physical and mental well-being through promotion of good quality active travel infrastructure

Co-lead organisations: Belfast Healthy Cities/Public Health Agency/Active Travel Partnership

Covid-19 has changed people's travel habits and behaviours and there is now the opportunity to help people to form more sustainable travel habits. 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 claims lives prematurely and an increased use of space for all. Department of 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. Belfast Healthy Cities' Chief Executive is a member of the Minister's Walking and Cycling Advisory Group.

The programme will support delivery of the themes: **Place, People, Participation and Planet.**

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

Overall Goal: The overall goal is to promote good quality active travel infrastructure that boost physical and mental health for all service users including those with mobility needs, increase physical activity, improves air quality and promotes access to public transport and all other services and facilities

Objectives

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
2. To actively engage and involve communities in assessing, influencing, advising, and monitoring walking infrastructure, promoting influencing and advising on accessibility
3. To influence policies and plans to include good quality walking infrastructure for healthier places and improved community prosperity
4. To generate awareness on the importance of improved and increased public transport routes as access to all services and facilities for communities that are left behind

5. To promote no pavement parking, that supports inclusive accessibility across Northern Ireland

Actions: The following actions will be used to deliver the programme: evidence briefs; engaging local communities; co-developing briefs and guidance and influencing policy;

Theme 3: Greater participation and partnerships for health and well-being

Please describe (in fewer than 250 words) how you intend to address this core theme overall and which issues you intend to emphasize. These should be relevant to the results of your city's Phase VII situation analysis report.

Programme title: Developing interventions to reduce car dependency for improved population health (Generating the Evidence to Support Reduction in Car Dependency; Improving Air Quality and Public Health)

Lead organisation: Queen's University Belfast

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 accidents, 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 disproportionately exposed to risk factors associated to car-centric regions, including air and noise pollution and higher collision rates. Twenty –three per cent of Greenhouse Gas Emissions in Northern Ireland are due to transport. When compared to other parts of the UK, Northern Ireland has the highest number of road deaths by regions, with 34 deaths per million populations.

The programme will support the themes of: **People; Place; Participation and Planet**

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

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 care dependency and increasing the use of public space for improved physical and mental well-being

Objectives:

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
2. To evaluate the importance of individual-level influences on car dependency and on alternative travel modes.
3. To provide an understanding of the complex interplay between policy and interventions on car dependency in the Belfast region
4. To understand the preferences and perspectives of car users in relation to a series of policy alternatives to reduce car trips
5. To gain shared understanding from the evidence for implications of reduced car dependency

Actions: The programme will be delivered using a variety of methods including: engaging new stakeholders; exploring barriers and enablers for organisations to collaborate; literature reviews; analysing policies; enable stakeholders from across sectors to come together and build a shared understanding.

Theme 4: Improved community prosperity and access to common goods and services

Please describe (in fewer than 250 words) how you intend to address this core theme overall and which issues you intend to emphasize. These should be relevant to the results of your city's Phase VII situation analysis report.

Programme title: Caring places that enhance health and well-being and reduce inequalities

Lead organisation: Belfast Community Planning Partnership

Covid-19 has changed circumstances for people's lives – essential services have been interrupted and especially to people who really need the services. Death rates are highest amongst vulnerable population groups and it has disproportionately affected those who are most disadvantaged. Education has been affected by those families who are not online. Employing people locally has sustained local connections during Covid-19. A shared prosperity approach supports good health and well-being through the determinants of health, increases life expectancy, resilience, enhances well-being and generates community prosperity within left behind communities. Belfast's disadvantaged communities have been further disadvantaged 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 places¹ with inclusive sustainable growth.

The programme will support the delivery of the themes: **People, Place, Participation, Prosperity and Peace**

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 and mechanisms are in place to increase community prosperity

Objectives:

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

¹ https://www.ads.org.uk/a_caring_place_report/

2. To identify and build on the assets within these communities that will generate action to develop caring places and increase community prosperity
3. To inform public and private decision makers of policies and action changes required (social, technological, environment and economic) that will strengthen community prosperity and peace and develop caring places, increasing health and well-being and reducing inequalities.
4. To test the set of principles against a current policy to assess the policy changes required to ensure prosperity and peace are shared across communities in the city.

Actions: The programme will be delivered using a series of approaches and methods: engaging with communities; defining prosperity from a community perspective; supporting identification of needs of local communities; engaging with decision makers; advocating change to develop shared prosperity; co-designing principles; co-designing and delivering training programmes to enhance well-being and capacity and testing principles to assess change within local communities.

Theme 5: Promoting peace and security through inclusive societies

Please describe (in fewer than 250 words) how you intend to address this core theme overall and which issues you intend to emphasize. These should be relevant to the results of your city's Phase VII situation analysis report.

Programme title: Caring places that enhance health and well-being and reduce inequalities

Lead organisation: Belfast Community Planning Partnership

The programme outlined under theme 4 Prosperity will also support delivery on the theme of Peace. There will be a focus on community relations across the two traditional communities in Belfast, given the legacy of the 'Troubles', as well as engaging with 'new communities'.

Theme 6: Protect the planet from degradation, leading by example, including through sustainable consumption and production

Please describe (in fewer than 250 words) how you intend to address this core theme overall and which issues you intend to emphasize. These should be relevant to the results of your city's Phase VII situation analysis report.

Programme title: Greening the city: intersectoral partnerships for healthy places:
RESURGE4HEALTH

Lead organisation: Queen's University Belfast

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 crises. The coronavirus as well as other infectious diseases, malnutrition and non-communicable diseases are linked to the decline of biodiversity 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. A prosperous economy and society can be achieved that also safeguards the common good, improving the quality of the air we breathe and stopping irreversible damage to the natural habits on which protecting human health depends.

The programme will support the themes: **Place, Prosperity, Peace and Planet**

Overall Goal: The overall goal is to develop and deliver healthier and more equitable urban environments for all citizens and generate global influence

Outcome: Citizens, implementers and policy makers, enjoy the benefits of and engage with Urban Green Space (UGS)

Objectives:

1. To input to an application to EU that will develop and test innovative urban green space (UGS) actions and policies to improve urban health and address inequalities, enhancing the evidence base for effective urban policies and actions
2. To co-develop an UGS Ambassador programme involving researchers, policy makers, practitioners and citizens and provide training to Ambassadors using a variety of methods
3. To provide various training programmes and presentations at Conferences involving the Ambassadors to showcase the programme and provide global influence
4. To lead the development of an effective and efficient communication and dissemination strategy to exploit the outputs from the RESUREG4HEALTH project across cities
5. To ensure practitioners in local and regional communities, policy makers and decision makers across Northern Ireland are informed of the results and the products of the RESURE4HEALTH project.

Actions: The programme will be delivered using a variety of methods including: research; training workshops; peer to peer training; communication and dissemination strategies; creating networks of advocates; development and provision of guidance and equipping communities with increased knowledge on urban green space.

9. Three areas of good practice for Phase VII

Phase VII will include the identification of **three examples of good practice** that will be shared with cities across the Network for mutual learning and inspiration. These should address priority health outcomes or populations according to need, and should be demonstrated through the appropriate indicators.

Once your application to Phase VII is deemed successful, you will be asked to provide a full case study of the examples that will be shared with other cities, included in Phase VII publications and featured on the WHO website. These examples will also be used for your city-specific evaluation of Phase VII.

For each of the **three examples of good practice**, please provide the following.

- a short description of the example, including the need it addresses, its main achievements and the lessons learned (*please provide a narrative text of fewer than 350 words*);
- *which Phase VII goal or theme this example addresses;*
- *which Sustainable Development Goals (SDGs) and specific SDG targets this example addresses (please provide a simple list); and*
- *the relevant SDG indicators for the last available year for the SDG targets that this example addresses – this will act as a baseline for the evaluation of Phase VII for your city (please provide a simple list).*

Health Literacy School Pharmacy Resource

Belfast Healthy Cities and the Department of Health are working to develop a health literacy schools programme that aims to enhance children’s knowledge and understanding of minor self-limiting conditions and the resources available to manage these conditions using a health literacy approach. The aim is to influence behavioural change within the school setting to encourage children and their parents or carers to use community pharmacy as the first point of contact for advice and treatment of minor conditions.

This project aims to address the need raised in the research report, produced by the Innovation Lab ‘Medicines for self-limiting conditions’ produced by Northern Ireland’s Department of Finance and Department of Health, which suggests school education on physical health focusses on proactive approaches to healthcare such as exercise and diet but there appears to be a gap for education on understanding illness and self-care. The report also suggests people may lack the ability or confidence to identify a minor ailment, which can lead to people using their GP to confirm the ailment.

An increase in levels of health literacy could lead to improvements in knowledge and confidence to identify minor ailments as ‘common or self-limiting or uncomplicated conditions which can be diagnosed and managed without medical intervention leading to a decision to self-care’. The development of a health literacy school programme will support the NHS Confederation call for a return to healthcare education in schools, an interactive resource involving children, parents and teachers would guide and inform choices on self-care for self-limiting conditions and minor ailments.

Currently a health literacy school resource is being developed with teachers, parents, curriculum advisers and a literature review of best practice has been collated to inform development of resources. An artist has engaged with children in the classroom and with teachers to develop characters that will be at the core of the resource.

Lessons have been drafted and are due to be piloted in schools when classes resume. It is an exciting and innovative project to be monitored in Phase VII, that can be applied nationally and internationally, it is accepted that a change in behaviours may be longer term.

Robust evaluation methods that can measure baseline and any change in knowledge and awareness of minor conditions, community pharmacy and health literacy skills will be required and are being developed, to support the finalized resource.

This programme supports the delivery of the following themes: **People; Participation and Prosperity.**

It will contribute to the delivery of the following Sustainable Development Goals:

SDG 3: Good health and well-being: Ensure healthy lives and promote well-being for all at all ages

SDG 4: Quality education: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

SDG 10: Reduced inequalities: Reduce inequality within and among countries

SDG 16: Promote just, peaceful and inclusive societies

The following SDG indicators are relevant:

SDG Indicator 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

SDG Indicator 4.7: By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development

SDG Indicator 10.2: By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status

SDG Indicator 16.7: ensure responsive, inclusive, participatory and representative decision-making at all levels

2. Promoting active travel within communities

Healthy urban environments have been a core theme of the work for Belfast Healthy Cities during Phase V and Phase VI of the WHO European Healthy Cities Project. Walkable neighbourhoods create supportive and healthy places for people of all ages to work, live and play. Communities designed with people at the centre contribute to health and equity as well as the environment and the economy.

Belfast Healthy Cities developed the Walkability Assessment for Healthy Ageing tool, inspired by a WHO checklist of essential features for age-friendly cities. It has been piloted with over 200 older people, including people in supported housing with early-stage dementia, community-based walking groups and senior forums.

The Community Active Travel initiative is a three-year project aimed at encouraging communities in Belfast to travel more actively, both for transport and leisure purposes. The project is funded by the Public Health Agency and delivered in partnership with Sustrans.

Over 20 Walkability assessments have been carried out across communities in Belfast to provide baseline insight into the community's perceptions of regarding walking and walkability in the local neighbourhood.

The main achievements have been to increase knowledge and evidence of the assets and the challenges to walking in the participating communities and to extrapolate the key issues that are relevant across the city so that walkability can be achieved for all. The approach has been successful in giving local residents an opportunity to share their views and ideas on their neighbourhood environment to inform consultations on local master plan developments. The findings from the walkability assessments have formed a set of recommendations to improve the walkability of neighbourhoods and identify options for addressing the changes identified.

Lessons learnt have been to engage the Department of Infrastructure earlier in the process, as the department that can make changes to walking infrastructure. During Covid, the Minister of Infrastructure, has embarked on increasing walking and cycling routes in the city, building on the changed active travel behaviours during the pandemic. The [report](#) has been forwarded to the newly appointed Walking and Cycling Champion to provide information to the Minister and to the Minister's Walking & Cycling Advisory Group for information in developing new active travel infrastructure.

This programme supports the delivery of the following themes: **People; Participation; Place, Prosperity and Planet**

It will contribute to the delivery of the following Sustainable Development Goals:

SDG 3: Good health and well-being: Ensure healthy lives and promote well-being for all at all ages

SDG 11: Make cities and human settlements inclusive, safe, resilient and sustainable

SDG 13: Take urgent action to combat climate change and its impacts

The following SDG indicators are relevant:

SDG Indicator 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

SDG Indicator 11.1: By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums

SDG 11.3: By 2030, enhance inclusive and sustainable urbanization and capacity for participatory, integrated and sustainable human settlement planning and management in all countries

SDG Indicator 11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities

3. Care Zone initiative

The Care Zone is a multi-sector suicide prevention initiative focused on the Sacred Heart Parish, located in the deprived Oldpark/ Cliftonville area in North Belfast. The initiative was developed in response to a 'future exercise' in Belfast in 2016, led by Lighthouse and supported by the

Public Health Agency, on improving resilience in the local communities affected by suicide and to improve the response to suicidal behaviour.

The aim of the Care Zone is to build a caring community and a sense of hope by supporting residents in improving their health and well-being, with the longer term aim of reducing suicide and tackling health inequalities. To create a sense of community empowerment and ownership, a bottom-up approach is pursued that seeks to work with the community, not to them or for them.

The main achievements have included: ‘looking back to go forward’, exploring the impact of transgenerational trauma resulting from ‘the Troubles’; creating a more positive sense of community identity; dealing with the social and economic changes that have occurred throughout recent decades through a local history project and developing a community-based exhibition; empowering and skilling up local people as community champions to carry out focus groups, giving the local residents a voice to express the issues that are influencing their mental health and well-being. Through this process, community champions have been identified and have collected local qualitative data. The Care Zone Profile that seeks to establish a baseline for future recommendations has been produced and the Care Zone Report has been collated with a number of suggested actions.

Meetings are now being held with agencies and government departments to take forward the actions. A local partnership approach, including a wide range of stakeholders from the public sector, academic and community voluntary sector is in place to support delivery of actions.

Lessons learnt have included the need to have a core resource to support the Care Zone partnership earlier in the process, that can operate both at a community level and have the strategic links to allow a quicker response to the suggestions actions by the community.

The initiative supports delivery of the following themes: **People; Peace; Place, Participation and Prosperity.**

It will contribute to the delivery of the following Sustainable Development Goals:

SDG 3: Ensure healthy lives and promote well-being for all at all ages

SDG 8: Promote inclusive and sustainable economic growth, employment and decent work for all

SDG 10: Reduce inequality within and among countries

SDG 11: Make cities and human settlements inclusive, safe, resilient and sustainable

SDG 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

The following SDG indicators are relevant:

SDG Indicator 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

SDG Indicator 8.5: By 2030 achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value

SDG Indicator 10.2: By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status

SDG Indicator 10.3: Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard

SDG Indicator 11:1: By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums

SDG Indicator 11:7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities

SDG Indicator 16.7: Ensure responsive, inclusive, participatory and representative decision-making at all levels

10. Three priority areas of action for Phase VII

Phase VII will include the identification of **three priority areas of action** that you will address in Phase VII as a member of the Network. These should emerge from the findings from your city health profile, and address priority health outcomes or populations according to need. Progress will need to be determined through the appropriate indicators.

These priority areas of action should be consistent with your answers to Section 8 of this application form. They will be used as the basis of your joint commitment with WHO under Phase VII and for your city-specific evaluation of Phase VII.

For each of the **three priority areas of actions**, please provide:

- a short description of the priority action, including the need it addresses, the main activities planned (including the evidence base for the planned interventions) and the expected outcome(s) (*please provide a narrative text of fewer than 350 words*);
- *which Phase VII goal or theme it addresses;*
- *which SDGs and which of their specific SDG targets it addresses (please provide a simple list); and*
- *the relevant SDG indicators for the last available year for the SDG targets that it addresses – this will act as a baseline for the evaluation of Phase VII for your city (please provide a simple list).*

1. Greening the City: intersectoral partnerships for healthy places

Goal: the overall goal is to develop and deliver healthier and more equitable urban environments for all citizens and generate global influence

Outcome: Citizens, implementers and policy makers enjoy the benefits of and engage with Urban Green Space (UGS) resulting in increased health, well-being and prosperity and a reduction in health inequalities

The priority actions will include the development of an UGS Ambassador programme with researchers, policy makers, practitioners and citizens; development of a network of advocates for UGS and development of training programmes and a toolkit for Ambassadors and advocates for UGS.

The programme will support local citizens across Belfast to become local Ambassadors and the training workshops will develop knowledge and skills; encouraging walk leaders and walk champions to be involved, to increase the use of green space in the city for improved health and wellbeing and reduced inequalities. Monitoring systems will be co-designed with researchers and citizens within the programme.

The programme will address the themes of Place; Participation and Planet

It will address the following SDGs:

SDG 3: Good health and well-being: Ensure healthy lives and promote well-being for all at all ages

SDG 11: Make cities and human settlements inclusive, safe, resilient and sustainable

It will address the following SDG indicators:

SDG Indicator 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

SDG Indicator 3.9: By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination

SDG Indicator 11.1: By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums

SDG Indicator 11.2: By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons

SDG Indicator 11.3: By 2030, enhance inclusive and sustainable urbanization and capacity for participatory, integrated and sustainable human settlement planning and management in all countries

SDG Indicator 11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities

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

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 are in place and mechanisms are in place to increase community prosperity

Priority actions will include supporting communities to define community prosperity and the key causes of why they are 'being left' behind; increasing capacity amongst individuals and groups active within the community; engaging decision makers to take action to bring about change that will generate prosperity through social, environmental, economic and technological approaches for local people.

This programme will support capacity and skills development with local communities and indicators will explore the success of the model in generating prosperity that can be transferred to other left behind communities. It will address the needs in disadvantaged communities to support them to act on their own behalf, with stronger engagements from government departments and public agencies to support the rebuilding of hope and aspirations in these communities.

The programme will address the themes of People, Participation, Prosperity, Place and Peace

It will address the following SDGs:

SDG 3: Good health and well-being: Ensure healthy lives and promote well-being for all at all ages

SDG 11: Make cities and human settlements inclusive, safe, resilient and sustainable

SDG 12: Ensure sustainable consumption and production patterns

SDG 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

It will address the following SDG indicators:

SDG Indicator 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

SDG Indicator 3.5: Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol

SDG Indicator 11.3: By 2030, enhance inclusive and sustainable urbanization and capacity for participatory, integrated and sustainable human settlement planning and management in all countries

SDG Indicator 12.5: By 2030, substantially reduce waste generation through prevention, reduction, recycling and reuse

SDG Indicator 12.6: Encourage companies, especially large and transnational companies, to adopt sustainable practices and to integrate sustainability information into their reporting cycle

SDG Indicator 16.7: Ensure responsive, inclusive, participatory and representative decision-making at all levels

3. Inequalities Training: Building public health capacity at the local level

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 action that will improve health and wellbeing for all and reduce inequalities

Outcome: increased knowledge about evidence, tools, skills, within organisations that focus policy and actions on improving health and reducing health inequalities

Priority actions include assessment of training and knowledge across organisations; provision of training programmes; development and application of tools; accessing WHO expertise on inequalities and on core themes

The programme will support delivery of Goal 1 and the theme of People, Participation and Prosperity.

It will address the following SDGs:

SDG 3: Ensure healthy lives and promote well-being for all at all ages

SDG 10: Reduce inequality within and among countries

SDG 17: Strengthen the means of implementation and revitalize the global partnership for sustainable development

It will address the following SDG indicators:

SDG Indicator 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

SDG Indicator 10.2: By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status

SDG Indicator 10.3: Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard

SDG Indicator 17.14: Enhance policy coherence for sustainable development

11. Strengthening partnership and coherence

Please provide a short description how your healthy city activity links to SDG implementation within your city; with other cities; with national initiatives led by your national government; and with international partnerships.

Please provide a simple list.

The following Phase VII programmes will support delivery of the Sustainable Developments Goals:

1. Promoting Healthy Transport

- a) Increasing physical and mental well-being through promotion of good quality active travel infrastructure
- b) Generating the evidence to support car reduction, improving air quality and increasing the use of public space for improved health
- 2. Greening the City: Intersectoral Partnerships for Healthy Places
- 3. Community Prosperity: Caring Places that enhance health and well-being and reduce health inequalities
- 4. Increasing knowledge and capacity building for improving health and reducing health inequalities and improving health literacy

The SDGs that will be supported include:

- SDG 3: Ensure healthy lives and promote well-being for all at all ages
- SDG 4: Quality education: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all
- SDG 10: Reduce inequality within and among countries
- SDG 11: Make cities and human settlements inclusive, safe, resilient and sustainable
- SDG 12: Ensure sustainable consumption and production patterns
- SDG 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels
- SDG 17: Strengthen the means of implementation and revitalize the global partnership for sustainable development

At a Northern Ireland level, the main programmes/policies that support delivery of the Sustainable Development Goals include:

- Programme for Government
- Northern Ireland Environment Link
- Department of Agriculture & Rural Affairs
- Northern Ireland Community & Voluntary Action (NICVA) SDG Working Group

At a Belfast City level, the following strategies will support the delivery of the SDGs:

- Belfast Resilience Strategy
- Belfast Agenda

12. Capacity-building

How will your city address training and capacity-building for increasing leadership, strengthening participatory governance, improving health for all and reducing health inequalities throughout Phase VII?

Please identify no more than three actions in fewer than 250 words.

The following three training and capacity programmes will be delivered during Phase VII:

1. Inequalities Training: Building Public Health Capacity at the local level

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 well-being 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

2. Health Literacy: Increasing levels and skills in health literacy

Goal: The overall goals are to strengthen health literacy in regional policies and develop health literacy capacity by co-designing resources

Outcome: Supporting individuals and communities to understand health related information, enabling them to make decisions to improve their health and well-being

3. Seminar Series on People; Place; Participation; Prosperity; Peace and Planet

Goal: The overall goal is to provide inspiration, knowledge and learning on subject areas from local organisations, cities and other experts in WHO.

Outcome: Increased knowledge and inspiration for local organisations on positive interventions on health determinants and actions to improve health and well-being and reduce health inequalities

13. Networking

What are the strengths or experiences your city could contribute to the overall work of the Network?

Please identify no more than three areas in fewer than 250 words.

Belfast has 30 years of experience as a member of the network, this provides an excellent foundation to meet challenges and opportunities aligned with Phase VII priorities, delivered through programmes, within the local and regional policy context. With a commitment and focus on improving health and well-being and reducing inequalities, ways of working include: research; thought leadership; co- production; community engagement; policy influence; information sharing and dissemination and training and skills development.

Many of Belfast Healthy Cities core partners have been at the forefront of the Covid-19 response. 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 and to provide support for the longer term health, social and economic impacts everyone is likely to experience. Now more than ever exists an appreciation of the unique benefit of membership to the Healthy Cities Network.

Belfast Healthy Cities partners will continue to work collaboratively with all sectors in the city. There is commitment to sharing with and learning from not only partners but also member cities across the WHO European Healthy Cities Network.

The application process including the [Situational Analysis](#) and the development of the City Health Profile has renewed vigour across City of Belfast for a new phase of Healthy Cities. The

Situational Analysis was completed following an engagement exercise with Government Departments and Statutory Bodies, whom also attended the WHO Belfast Phase VII preparation workshop, hosted by the Lord Mayor of the city. A commitment has been gained from key organisations and politicians in the city to remain involved in the Network.

How does your city expect to gain from membership in the Network during Phase VII?
Please respond in fewer than 250 words.

Belfast expects to gain the following from membership of the Phase VII Network:

1. Learning and knowledge from other cities within the WHO network on Covid-19/Recovery from Covid-19
2. Learning and knowledge from other cities within the WHO Network on the Phase VII core themes and priority issues
3. Direct access to WHO expertise on new and emerging public health issues
4. Access to new tools that will support reduction of the widening gap in the city on inequalities
5. Learning on administrative and political processes that have worked to produce successful results in reducing inequalities
6. Provide opportunities for organisations to participate in specialist Working Groups/Task Forces
7. Increase learning and knowledge on successful interventions that reduce inequalities
8. Increased access to other cities in WHO Europe and other WHO global regions

National network of Healthy Cities

Does your country have a national network? Yes X No
Is your city a member of this national network? Yes X No

Other networks of healthy cities

Are you a member of a regional or metropolitan (subnational) network of healthy cities?

Yes X No

If yes, which?

Belfast is a member of the UK Healthy Cities Network and is an associate member of the National Networks of towns and cities in Ireland.

Other international city networks

Are you a member of any other international city networks working for health or sustainable development?

Yes X No

- International Society for Behavioural Nutrition and Physical Activity

- International Society for Physical Activity and Health
- WHO Global Co-ordination Mechanism for NCDs (application in process)

14. City Phase VII overview

Once your application is successful and your designation complete, your city will be featured on the WHO website. Please provide a narrative text providing an overview of your city's Phase VII implementation, and provide a high-resolution photograph to be included on the WHO website. The narrative should focus on the reasons for applying to the Network, the city's vision in terms of Phase VII outcomes, the city's main health needs, examples of what the city intends to address during Phase VII and an example of good practice.

The narrative should be fewer than 400 words. It does not need to include key facts and figures as these will be presented elsewhere on the relevant webpage.

Reasons for applying to the WHO Network

The city Belfast is applying to be a member of the WHO Phase VII European Healthy Cities Network to:

1. Exchange learning and knowledge with other cities within the network on Covid-19/Recovery from Covid-19 and the other Phase VII themes and priority issues
2. Access WHO global expertise on current and emerging public health issues including training, tools, webinars and publications
3. Test and apply new concepts; tools and themes within the city and across Northern Ireland that will improve health and well-being and reduce the widening inequalities
4. Participate in Task/Working Groups that advance the learning of organisations/departments on relevant issues
5. Promote and advance learning across the city on the Sustainable Development Goals
6. Develop links with cities across WHO Europe and internationally as appropriate

Phase VII Strategic Plan & Outcomes

Belfast Healthy Cities Phase VII Strategic Plan outlines how the six themes, **People, Place, Participation, Prosperity, Peace** and **Planet** and the priority areas within the themes will be delivered. The priority issues were agreed at the Phase VII workshop attended by representatives from the public, private, university, voluntary and community sectors in the city. The results from the [Situational Analysis Report](#), highlights the extent of programmes across government departments and agencies on the Phase VII themes. The plan reflects the relationship between the WHO themes, Northern Ireland's Programme for Government as mapped to SDGs, the Making Life Better framework in Northern Ireland and the Belfast Agenda.

Belfast Healthy Cities is committed to improving health and well-being and reducing inequalities using the following methods of delivery: **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 the Phase VII plan which will be delivered through the annual operational plan, during the five-year phase.

The current Covid-19 pandemic has cost lives and has affected families and communities, economically and socially. Many of Belfast Healthy Cities 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 and to provide support for the longer term health, social and economic impacts everyone is likely to experience.

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

City Vision, Phase VII programmes and Phase VII Outcomes.

Figure 1 represents Belfast Healthy Cities Strategy Map and the 6 main programmes that will be delivered within the themes, during Phase VII. It outlines the vision, mission and values on which programmes will be delivered. **Figure 2** presents the programmes that will support delivery of the themes and the intended outcomes of each Phase VII programme.

Belfast Healthy Cities Phase VII Strategy Map

Figure 1 – STRATEGY MAP

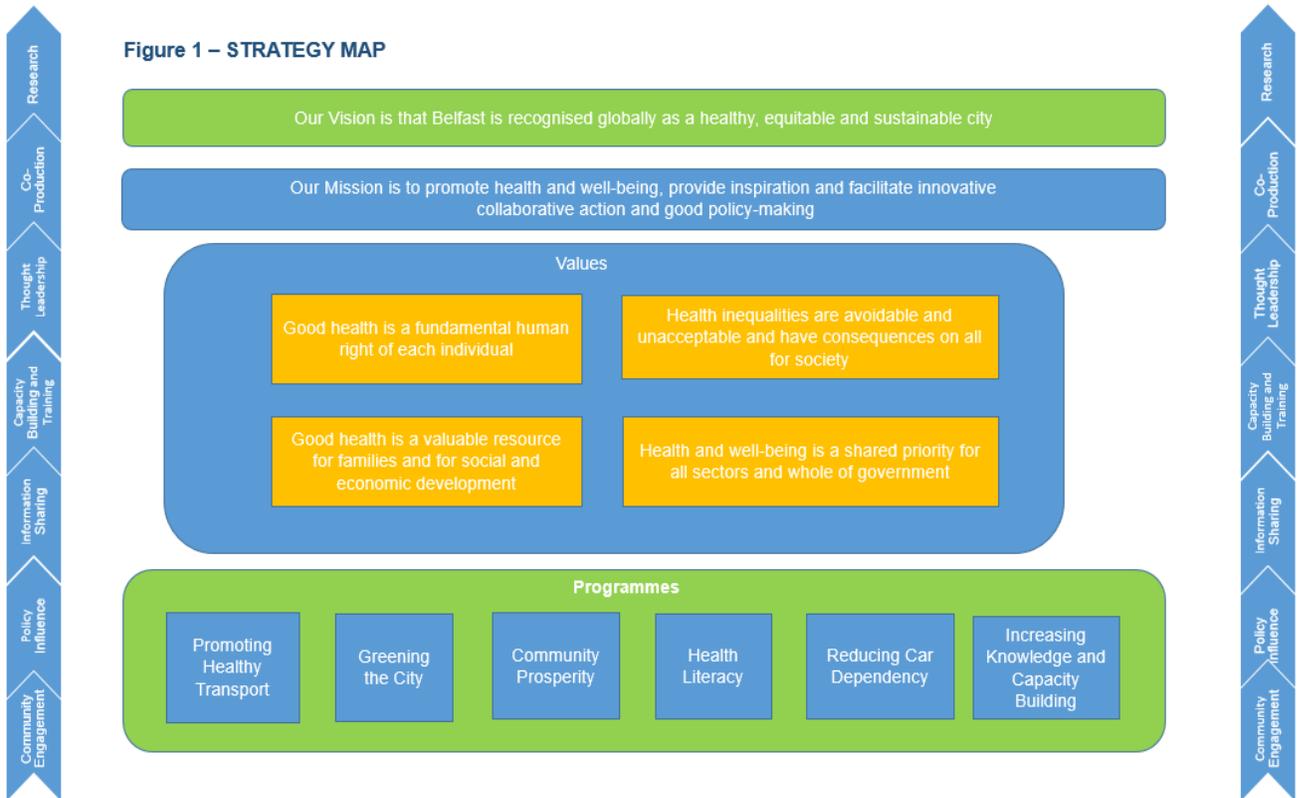


Figure 2: Belfast Healthy Cities Phase VII programmes and the links with the themes

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
<p>a) Improved use of public space for increased active travel and improved physical and mental well-being</p> <p>b) Agreed mechanisms for collaborative work and commitment to a series of discussions towards the common goal of reduced car dependency for improved population health</p>	<p>Citizens, implementers, and policy-makers, enjoy the benefits of and engage with Urban Green Space (UGS) resulting in increased health, wellbeing and prosperity and a reduction in inequalities.</p>	<p>Changes in policy and mechanisms are in place to increase community prosperity</p>	<p>Improved leadership, knowledge, skills and polices to improve health and well-being and reduce inequalities</p>	<p>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</p>
<p>Supporting the following themes:</p> <p>People Place Participation Prosperity Peace Planet</p>	<p>Supporting the following themes:</p> <p>Place Prosperity Peace Planet</p>	<p>Supporting the following themes:</p> <p>People Place Participation Prosperity Peace</p>	<p>Supporting the following themes:</p> <p>People Participation Prosperity</p>	<p>Supporting the following themes:</p> <p>People Place Participation Prosperity Peace Planet</p>

Example of good practice

Child Friendly Places

**A resource for Healthy Places, Healthy Children:
Teaching Resource, Engagement Guidelines And Design Guidelines**

Introduction/Purpose

Belfast, as a Healthy City, developed the concept of healthy urban environments during Phase III (1998-2002) of the WHO European Healthy Cities Network and initially this work focused on sharing evidence and building capacity. A key driver for the child friendly places programme was the United Nations Convention on the Rights of the Child.

Over time, the programme led to the identification of a gap in policy in relation to children, and child friendly places was identified as an opportunity to explore the practical application of the healthy urban environments concept. As such, a main aim of the programme was to provide children with a platform for sharing their views as a major, but often less heard population group, whose healthy development and future engagement in society could be significantly strengthened through a greater sense of ownership, both in their communities and in decision making.

This [Healthy Places, Healthy Children resource](#) has been piloted with over 20 schools and has resulted in numerous proposals, developed by children and presented to decision makers, being

brought to life. Belfast Healthy Cities has recently launched an online version of the resource that allows teachers and other stakeholders to access a range of training videos as well as all the booklets and supporting teaching exercises. This allows the resource to be delivered on a regional and wider basis in the future.

Method/Design/Approach

To progress the child friendly places programme, Taking Action for Child Friendly Places, an inter-sectoral action plan based on extensive engagement with children across Belfast, was developed and was the first time such a focus has been put on children and the built environment in Belfast. Around 7000 children and families were directly engaged with using innovative methods to identify priorities and the action plan set out partners' responsibilities under the following areas: Engaging and Empowering Children; Creating Healthier Places and Supportive Environments; and, Tools for Child Centred Spatial Planning and Design.

In 2015, in response to feedback from teachers, this model was developed into a dynamic teaching resource, in partnership again with the Education Authority, the Public Health Agency and Northern Ireland Housing Executive. Healthy Places, Healthy Children is a Key Stage 2 (7-11 years) teaching resource that supports delivery of the Northern Ireland Curriculum on cross curricular skills such as critical thinking, teamwork and problem solving, as well as in relation to the World Around Us curriculum – a thematic area of learning comprising the subjects of geography, history and science and technology.

Outcomes

The resource, which can also be used in an afterschool or youth group setting, consists of seven Units, designed to support modular delivery over a flexible time period. The Units have been designed to introduce children to a project planning approach and enable children to work their way through a planning process from framing the issue and gathering evidence to identifying priorities and developing a delivery plan. The Units also include opportunities to explore different perspectives, compare subjective and objective assessments, and practise reaching consensus.

Each Unit booklet sets out the learning intentions and contains teachers notes and learning exercises. The booklets are supported by a range of guidance and practical resources. A Delivering Change booklet – telling the stories of six schools who have successfully completed the programme is also available for peer learning.

The teaching resource has also been delivered in cities across the WHO European Healthy Cities Network to raise awareness of the impact of the built environment and teach English.

Discussion/Practice and Social Implications

The Healthy Places, Healthy Children teaching resource was designed to enable children to explore the relationship between local built environments, their everyday lives and their health and to engage with and inform local decision makers

The resource uses teaching methods which embrace the principles of co-creation so children are empowered and have ownership of outcomes and also provides a platform for children to

contribute towards decisions that affect them in places where they live, go to school and play. This is a fundamental element of the Belfast approach to child friendly places, which aims not only to increase understanding of children's needs among planners, but strengthen opportunities for children to directly influence decision making.

The focus and promotion of Belfast Healthy Cities child friendly cities programme has influenced policy direction and has been identified as one of the key areas of work for the Commissioner of Resilience in Belfast and the community planning strategic document Belfast Agenda. To support city planners, policymakers and developers to consider the views of children in the development of the city a series of supporting documents have been developed;

1: [Placemaking: Engaging Children and Young People: A guideline for planners, policymakers and developers in Northern Ireland](#)

2: Designing Places for Children and Young People: Guidelines for Child Centred Planning, Design and Stewardship for the Built Environment in Northern Ireland

15. Monitoring and evaluation

Does your city confirm that it agrees to be externally evaluated by WHO?

Yes No

This should appear in the letter of commitment from the mayor (see Section 1).

Is your healthy city project systematically monitored or evaluated?

Yes No

If yes, describe:

Belfast Healthy Cities is funded by four public sector agencies. Two contracts are in place. A joint contract with the Public Health Agency and Belfast City Council is in place and a Performance Monitoring Report (PMR) is completed quarterly. The PMR is based on the Annual Operational Plan actions which is developed on the Strategic Plan of each phase. A second contract is in place with the Belfast Health & Social Care Trust and targets are agreed annually. A report is provided monthly to the Trust on these targets. The targets are also developed from the Annual Operational Plan. The fourth public agency that provides funding is Northern Ireland Housing Executive.

In addition to this, other funding applications or joint funding application are made to various sources of funding including government departments and the EU. Appropriate targets and monitoring are in place when these are successful.

Belfast Healthy Cities is a legal company, registered with Companies House, Northern Ireland. It is also registered as a charity and annually presents a Statement of Regulated Progress (SORP) and audited annual accounts to Companies House and to the Charities Commission. An

[annual review](#) is also prepared that outlines the progress that has been achieved during the year and is presented by the Chair of the Board of Directors and Chief Executive at the Annual General Meeting (AGM).

Please email a signed, scanned copy of any substantial report or a website link to the original.

Thank you for your interest in becoming a member of the WHO European Healthy Cities Network in Phase VII.

Please print a copy of this page for your records.

Below is a checklist of signed, scanned or original documents to be submitted by email with the application.

- Council resolution supporting city participation in Phase VII
- Letter of commitment from the city mayor supporting city participation in Phase VII
- Phase VII city situation analysis document
- City development strategy analysis document
- City statement indicating how the city will benefit membership in Phase VII
- Curriculum vitae of coordinator
- Job description for coordinator
- Letter of commitment to this application signed by the chair of the steering or partnership group
- City health development plan
- City health profile
- Optional evaluation report
- Completed and signed Declaration of Interests form for the city coordinator
- A completed and signed non-exclusive licence to use photographic images

In the heading of your application package, please reference “Phase VII Healthy Cities Network application documentation”.

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