

Submission to the Levelling Up, Housing and Communities Committee Inquiry into Children, Young People and The Built Environment

<https://committees.parliament.uk/call-for-evidence/3282/>

Written Evidence Submitted by GroundsWell ( <https://groundswelluk.org/> )

The GroundsWell Consortium is an interdisciplinary team of researchers who, in collaboration with local communities and policymakers, are understanding and documenting the role that urban green and blue spaces (UGBS) play in the social, economic, environmental, cultural and health systems that make up urban areas. Specifically, Groundswell is identifying how we can use UGBS to reduce health inequalities that have emerged in these settings and chronic disease prevention. We will focus on a subset of the issues raised by the committee here;

**The experiences of children and young people of their built environment**

- How do children and young people experience outdoor spaces in towns, cities and rural areas across the country? For example, their streets, estates, villages, neighbourhoods and parks?
- How do these experiences vary across income, race, gender, age?
- How easily can children and young people travel to outdoor spaces and schools
- How has this changed over the years?

There is well established evidence supporting the positive impact that exposure to urban green and blue spaces (UGBS) has on childhood health across several physical, cognitive, social and emotional outcomes. Spending time in UGBS in childhood is also a key predictor for future use across the life course. In fact, childhood experience is one of the strongest predictors of adult use of UGBS for enjoyment and wellbeing, with lack of childhood access as the strongest predictor of lack of adult access. And to access UGBS frequently and regularly as a child (at least once a week), it almost certainly needs to be within 5-10 minutes' walk of the child's home (1).

This signifies the importance of ensuring all children and young people have access to well-designed UGBS irrespective of their income status, race, gender and age. The work currently undertaken by GroundsWell is aiming to understand inequalities experienced by these different groups, as well as other underrepresented groups who currently visit UGBS rarely or never. As is often the case, the differential experiences of visiting outdoor spaces (including UGBS) are influenced by a number of complex and interrelated factors that span the individual, social (e.g. the people around you), organisational (e.g. childcare, school and health setting), environmental (e.g. greenspace quality, active travel etc.), and policy domains (e.g. planning, benefits and child welfare system etc.).

Recent evidence of how much children played outside during the COVID pandemic paints a particularly bleak picture for those living in social housing and with little or no outdoor space at home (not even a balcony) (2). This study showed that there were high proportions of private renters (27%) and local authority tenants (25%) who had no access to a garden. Further, a greater proportion of children whose parents lived in social housing, who had no access to outdoor space or who were from low-income households did not visit a local

park/greenspace at all in the week measured, compared to children whose parents were homeowners/private renters, had access to some form of outdoor space, or were from high-income households.

Findings from the SPACES project, which for one study utilised a longitudinal cohort from Growing Up Scotland, showed that 15% of children's total outdoor time (excluding school hours) was spent in natural spaces, increasing to 41% when private gardens were included. An increase in the availability of natural space and private gardens around the home was associated with increased use and children from deprived areas were particularly likely to use natural spaces closer to home (3). Making urban green spaces safe and accessible for younger people, especially those from deprived areas, could hugely improve the experience that children and younger people have in urban outdoor spaces and lead to increased UGBS use.

Increasing the use of urban green spaces as safe throughfares for travel would increase options for active travel in younger populations. In 2022, Sport England reported active travel as one of the most common activities performed by children and young people, with 57% of young people surveyed reporting active travel in the last week. (4) They also reported that the increases in active travel seen during the pandemic have largely been retained and active travel is more popular now than before the pandemic. (4). Furthermore, recent findings from Northern Ireland demonstrate the popularity of active travel, with a third (33%) of those 16 years old reporting walking or cycling to school, college or work (5). Increase or improvement of green space, through encouraging active travel, can contribute to chronic disease prevention, but also, creation of more green space is one co-beneficial solution proposed for minimising road traffic injuries involving children and young people (6). In fact, increasing natural space close to home may go as far as helping to narrow inequalities in social, emotional, and behavioural health outcomes (7).

Disparities clearly exist in the provision and quality of UGBS across the socioeconomic gradient (8, 9), and the committee should explore how disadvantaged younger urban communities can benefit from equitable access to high-quality UGBS (9). GroundsWell researchers have shown that positive effects of UGBS on mental health are greater in more deprived urban areas (11, 12). This is also the case in children (13). Furthermore, GroundsWell researchers have identified that urban regeneration of UGBS for deprived neighbourhoods can contribute to better mental health through promoting residents' environment perceptions and instauration (14).

### ***Recommendations:***

- **Explore Alternative Solutions:** Encourage and support public and private housing providers to find alternative means of outdoor provision for young residents without private spaces.
- **Retrofit and Access:** Consider retrofitting gardens or granting access to nearby private greenspaces, such as shared communal areas, to fulfil younger residents' needs and enhance their wellbeing.
- **Improve Public Access:** Enhance access to public greenspaces by reallocating road space, repurposing existing amenity areas, or revitalizing nearby vacant or derelict land into quality greenspaces, including garden spaces.
- **Develop Shared Garden Initiatives:** Foster the development of shared garden schemes, encouraging community engagement and collaboration among residents to utilize and maintain these spaces.

- **Encourage active travel:** Improve quality and accessibility of green space corridors for active travel and promote usage of the space for active travel among young people, encouraging physical activity, and reducing preventable deaths and road traffic accidents involving children and young people.

### **Best practice and evaluation**

- Where are the examples of **policy and good practice** that are improving children and young people's experiences in the built environment, either directly or indirectly, in the UK or internationally?
- How are these outcomes measured? For example, through economic or health and wellbeing indicators?

One example of good policy is the Scottish National Planning Framework 4 (15), which specifies how development or removal proposals that concern children and young people should be assessed and what tools to use. The framework itself emphasizes the creation of accessible and inclusive public spaces that cater to the needs of children and young people. The frameworks also encourages integrated planning that incorporates educational institutions within the community fabric and encourages community engagement in the planning process, ensuring that the voices of children and young people are heard and considered.

Similarly, an example of good practice is the use of the Place Standard Tool for Children and Young People (16) which is based on the core Place Standard tool but the theme names, questions and prompts have been adapted to be more accessible and appropriate for younger users. These versions help improve the ability of children and young people to have their views heard through discussing what is important to them in their everyday lives as part of the Place Standard process. Another example is the Play Sufficiency Assessment which is also included in the Scottish National Planning Framework 4 (17). These assessments can inform local planning and development strategies by highlighting areas where play spaces and spaces for young people are lacking or need improvement. They also allow communities to be able to advocate for change.

### **Cross Government working**

- How does the relationship of children and young people with the built environment overlap with policy areas beyond the work of DLUHC, such as public health, transport, policing and net zero?
- Are government departments working together to address children and young people's needs in this respect?

Children and Young people have a relationship with the built environment that is deeply rooted in the home, and other space that they use regularly (e.g. local open spaces, schools, streets etc.). However, the urban realm is more complex than physical buildings and is made up of the interplay of different things.

Transport plays a major role in young people's outcomes. Depending on where you live, air quality and noise pollution will have a major impact on outcomes. Air quality has been shown to affect health outcomes such as child asthma (18). In extremes, this air quality can also be a contributing factor to mortality, even in children. This can be seen in the groundbreaking case of Ella Adoo Kissi-Debrah, whereby a coroner concluded that air

pollution from road traffic made a significant contribution to the death of the 9 year old girl, making her the first person to have air pollution named as a cause of death by a coroner (19). These outcomes are also reflected in the Index of Multiple Deprivation and, as such, the *Living Environment* domain can highlight where outcomes are at their poorest.

Transport can also play a positive contributor. Active travel amongst children and young people can lead to positive outcomes. This can include the health benefits of walking and cycling (to school, or to/for play). Similarly, interventions such as School Streets can create lower-pollution spaces around schools at times when children congregate. Other interventions such as Low Traffic Neighbourhoods have been shown to drastically reduce accident/injury rates (20) whilst simultaneously creating the spaces for Children to play immediately outside their houses. This may represent a viable solution for urban areas which are not well-served by parks or other forms of open space.

The COVID-19 pandemic demonstrated that there is latent demand for active travel. Quieter road spaces during the pandemic saw more families, including young people taking up opportunities for walking and cycling (21) and, across the country, more and more local authorities are increasing efforts to provide dedicated infrastructure supported by the Government's *Gear Change*. In this way, how children and young people travel to, and through, the urban realm will play a vital role in how broader health outcomes are achieved.

The most vulnerable groups in society face the biggest impact of the climate crisis, for example, children, older people and marginalised communities. The World Health Organisation estimates that over 88% of the existing burden of disease due to climate change occurs in children under 5 years of age globally (22). The Royal College of Paediatrics and Child Health have highlighted the need to view climate change through the lens of children's health, acknowledging that children born today will face disproportionate increases in floods, heatwaves, droughts and crop failures, as well as worsened air quality and pollution (23). Built environment, urban areas, and cities have an important role to play in working towards, and achieving, Net Zero. Therefore, urban planning is a crucial leverage point for building sustainable cities, which will enable children and young people to live and grow well. Government departments could work together more efficiently to address children's built environment needs by linking their data together and with health data that is currently stored separately. This will allow for policy decisions to be better informed and for resources to be allocated where they are most needed. In brief, such data linkage would enable the addition of comprehensive data on our towns and cities as modifiable factors influencing health and wellbeing.

Some examples of how this could be used:

1. This could allow a third sector organisation making small improvements to houses to allow young people to return home from hospital more quickly.
2. This could allow the local council to understand the health benefits to children of improving the housing quality for people in their region.
3. Departments could share pollution data (e.g. noise, air quality) to identify priority action areas. For example, DEFRA could share data with DfT, DLUHC etc.

### ***Recommendations:***

**Recognise** the multidimensional impact of the built environment on children across various government departments, but particularly public health and transport.

**Consider** the interconnectedness between transport, air quality, and health outcomes for children and **promote** the importance of active travel and local interventions like School Streets and Low Traffic Neighbourhoods.

**Connect** across policy areas, and consider the co-beneficial strategies design and optimise our built environment for children and young people, whilst also achieving sustainability goals in aiming for Net Zero.

**Advocate** for more efficient collaboration among government departments by linking data on housing, health, and environmental factors to inform policy decisions and resource allocation effectively.

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