## Chesterfield

Parks and Open Spaces Strategy Health Impact Assessment Workshop

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#### Introduction

We were tasked to "develop a model for a workshop to consult community based organisations and residents to help inform the council of the health impact of the proposed Parks and Open Spaces Strategy"

#### Introduction...cont'd

In order to fulfil the remit we:

• Looked at the Demography

Looked at the Strategy

• Pulled these together to inform the workshop

### Chesterfield Demographics

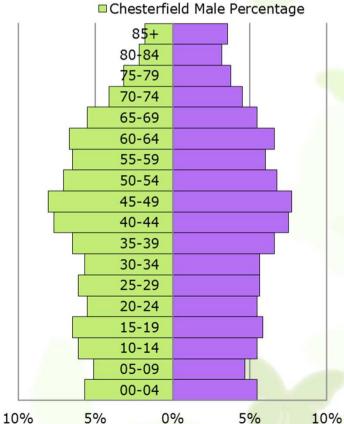
• Population = 103,800

Male: Female ratio - 49:51

- Age breakdown largest age group is at 40-49
- Ethnicity 96.5%White/White British
- O Deprivation Index of Multiple Deprivation 2010 ranks Chesterfield 91st out of 326 Local Authorities.

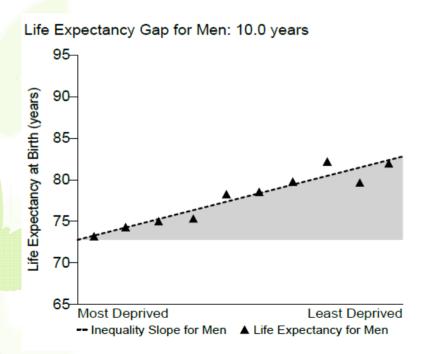
### Chesterfield population age breakdown

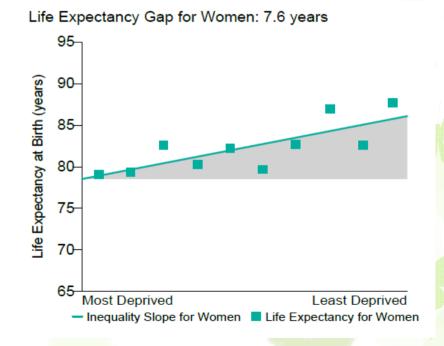




### Chesterfield Demographics...cont'd

- Life Expectancy for males = 77.7
- Life Expectancy for females = 82.3
- Slope of index of deprivation = 10.0 years in males, 7.6 years in females

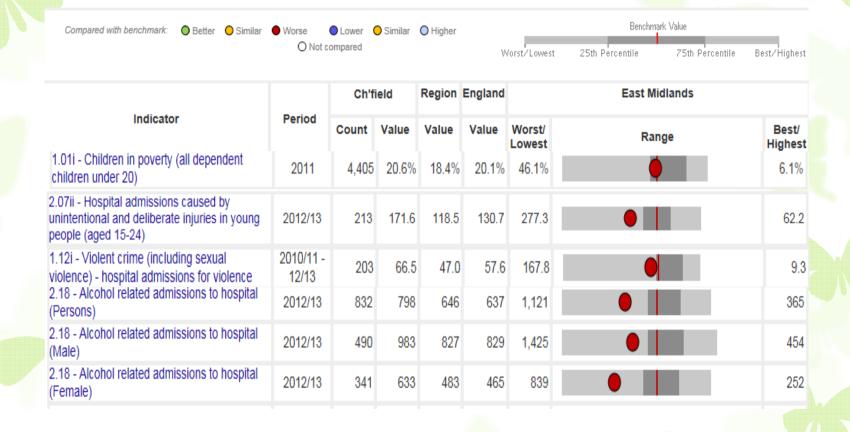




# Particular health needs in Chesterfield

- Children in poverty
- Hospital admissions caused by unintentional and deliberate injuries in young people aged 15 – 24
- Violent crime (including sexual violence)
- Alcohol related admissions to hospitals (males and females)
- Injuries due to falls in persons aged 65 and over
- Under 75 mortality rate from cardiovascular diseases
- Health related quality of life for older people

## Particular health needs in Chesterfield....cont'd



## Particular health needs in Chesterfield....cont'd



	Period	Ch'field		Region	England	East Midlands		
Indicator		Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
2.24i - Injuries due to falls in people aged 65 and over (Persons)	2012/13	536	2,485	1,865	2,011	3,508		1,132
2.24i - Injuries due to falls in people aged 65 and over (males/females) (Male)	2012/13	153	1,931	1,467	1,602	2,975		836
2.24i - Injuries due to falls in people aged 65 and over (males/females) (Female)	2012/13	383	3,040	2,264	2,420	4,041		1,402
4.04i - Under 75 mortality rate from all cardiovascular diseases (Persons)	2011 - 13	275	97.8	80.0	78.2	137.0		37.1
4.04i - Under 75 mortality rate from all cardiovascular diseases (Male)	2011 - 13	183	132.1	111.5	109.5	184.9		49.1
4.04i - Under 75 mortality rate from all cardiovascular diseases (Female)	2011 - 13	92	64.6	49.7	48.6	91.2		25.5
4.04ii - Under 75 mortality rate from cardiovascular diseases considered preventable (Persons)	2011 - 13	185	65.7	53.9	50.9	89.0	•	25.3
4.04ii - Under 75 mortality rate from cardiovascular diseases considered preventable (Male)	2011 - 13	138	100.2	81.8	76.7	130.9	•	34.1
4.13 - Health related quality of life for older people	2012/13		0.694	0.724	0.726	0.636		0.793

### Parks and Open Spaces Strategy

- Previous strategy in need of refreshing and refocussing given newer financial constraints on Chesterfield.
- Aim of strategy To ensure Chesterfield has accessible open spaces which puts good health and excellent quality of life within reach of everyone who lives and visits Chesterfield
- To achieve this vision for Chesterfield's parks and open spaces the following 6 strategic objectives were identified:

### Parks and Open Spaces Strategy

- 1. Improve biodiversity and sustainable landscapes
- 2. Maximise the efficient use of resources to achieve our priorities
- 3. Improve partnership working to achieve joint objectives such as getting more people more active

- 4. Improve the quality of existing open spaces
- 5. Rationalise the quantity and accessibility of open space
- 6. Promote our spaces and engage our communities to maximise use and benefits.

#### Final Workshop design

- Incentives to engage the Community:
  - A mural design and judging competition
  - A lunch, made from local produce, and produce available to buy throughout day.
  - A drama production
- Invitations to be sent using a variety of media: traditional and electronic

### Final Workshop design...cont'd

- Based around the idea of a knowledge café which allows people to talk and write as groups or individuals:
  - Participants consider three options and the implications for them
  - 3 x tables linked to themes such as:
    - What would be the impact on your health if your green space was closed down?
    - What would be the impact on your health if the green space around you was regenerated and the quality improved?
    - What would be the impact on your health if more green space were built near you?



# Health Impact Assessment: Positives & Negatives

Positives	Negatives		
Motivates people to engage in physical activity	Increase crime - May serve as places for alcohol use and illegal activities.		
Improves mental health	Increase injuries, e.g. falls and		
Reduce environmental pollution	accidents		
Increases social gatherings			
Reduces accidents			
Grass routes sport development			
Crime reduction			

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