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Rethinking Urban Living Environments: Investigating the Influence of Built Environment Features on Physical Activity Levels- Evidence from a Cross-Sectional Study in Ankara, Türkiye

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RELEVANCE TO THE THEME:

Relentless growth into Space

What happens to the physical attributes of built environments? -we can only get a hold of....

- street network
- land use characteristics,
- population density
- socio-economic features

As planners, what is our role in this transformative environment?



PLANNING AS A TRANSFORMATIVE ACTION IN AN AGE OF PLANETARY CRISIS

URBAN LIVING ENVIRONMENTS: TRANSFORMATION & GROWTH



Top: Illustration of Urban Transformation
Bottom: Le Corbusier, 1920-1950



Top: Nilüfer Neighborhood, Bursa, 2020
Bottom: Ümit Neighborhood, Ankara, 2022

CHANGE FOR THE BETTER?



ÇAYYOLU, 2002



ÇAYYOLU, 2012



ÇAYYOLU, 2022

URBAN LIVING ENVIRONMENTS



Pruitt-Igoe (Destruction Date: 1972)



The Relationship of Built Environments with Health Indicators and Quality of Life: A Community Participatory Model Proposal for Healthy Cities

ACKNOWLEDGMENTS

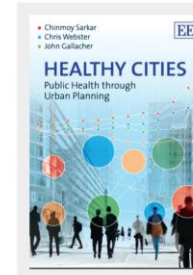
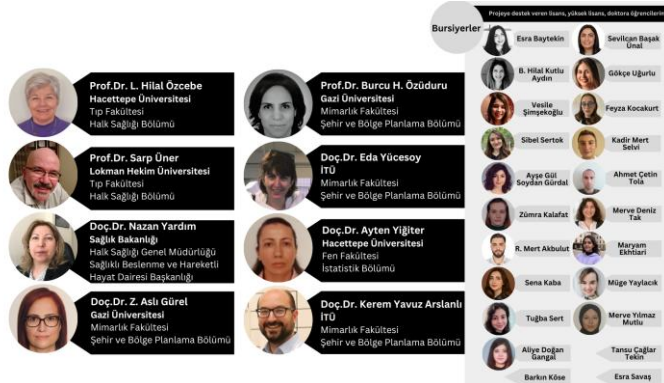
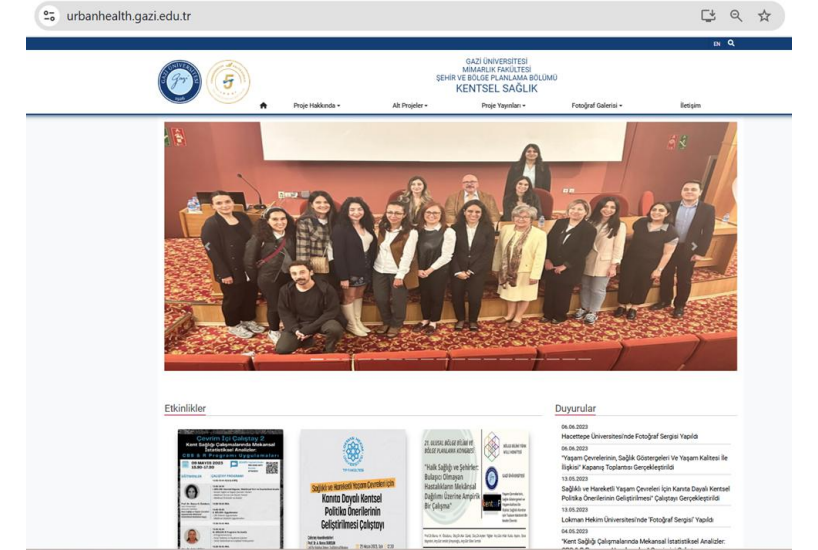
The Scientific and Technological Research Council of Türkiye

TUBİTAK - 1003 Project: Prioritizing Quality of Life and Urban Living Environments

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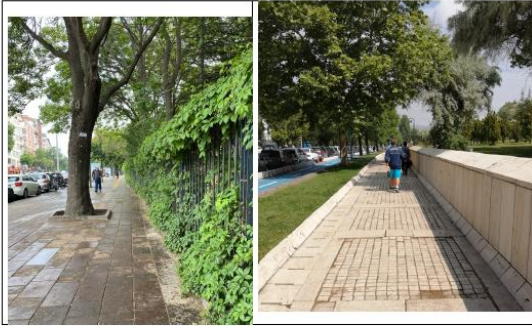
Project Duration: 01/12/2019 - 01/06/2023

<https://urbanhealth.gazi.edu.tr/>



PROBLEM DEFINITION

- What are the constituents of:
 - high-quality, active, healthy, livable built environments
- Can we explain the relationship between
 - Overall health status of individuals
 - Physical attributes of a built environment



Katılımcılar yaşam alanlarında fiziksel aktivite sırasında güvenlik ile ilgili sorunları da dile getirmişlerdir. Bazı yerlerde yol bittiği halde uyarı işaretinin olmaması, inşaat alanları ve atıkları, boş ve tenha alanların güvensiz olması ve serbest gezen köpek grupları en fazla bahsedilen konular olmuştur.



50. Yıl Parkı



Seğmenler Parkı



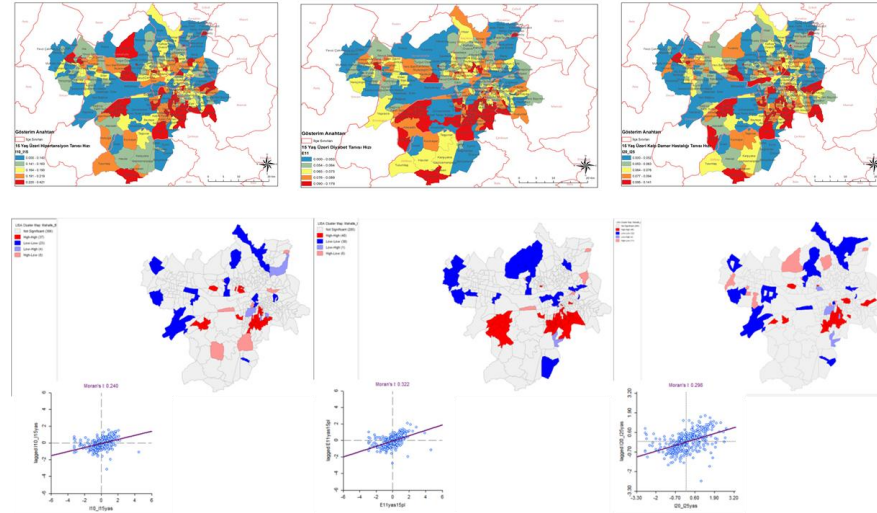
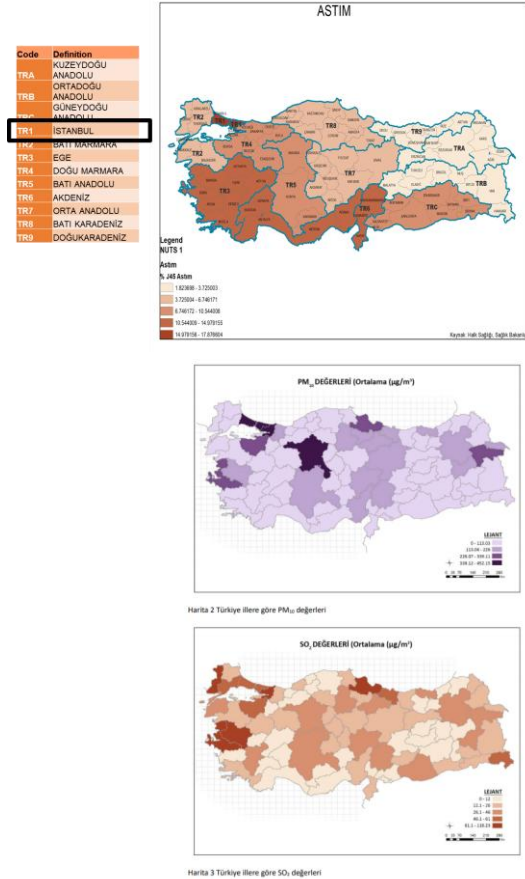
Mavi Göl



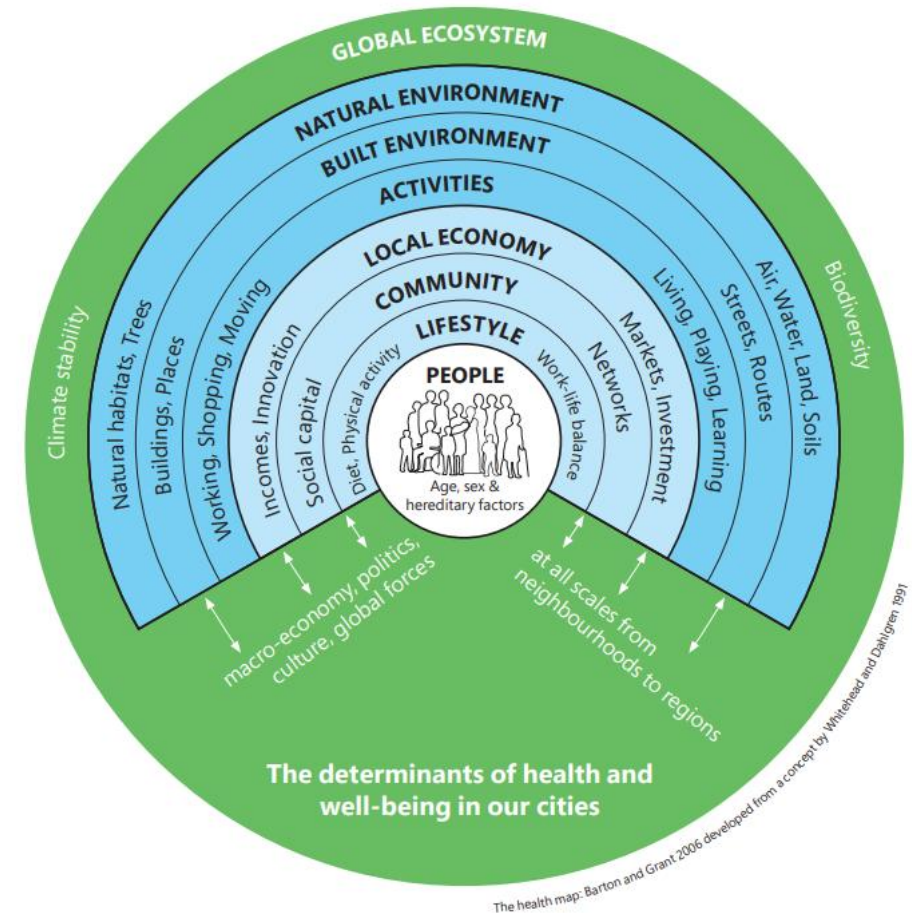
Mavi Göl

PROJECT SCOPE

Regional, City, Neighborhood (Ankara) & Individual Level Analyses (Ankara)



CONTEXT: URBAN HEALTH & HEALTHY CITIES



Reference: Healthy cities effective approach to a rapidly changing world. Geneva: World Health Organization; 2020. License: CC BY-NC-SA 3.0 IGO.

BUILT ENVIRONMENT EPIDEMIOLOGY

Risk Factors for Non-Communicable Diseases (NCDs)

- Physical inactivity
- Air, water, noise, and environmental pollution
- Limited access to health infrastructure and other urban services

How to eliminate the risks?

- Increase physical activity
- Decrease pollution
- Increase overall accessibility to urban services

At neighborhood scale: housing density, economic structure, centrality, accessibility, distance/walkability to green areas, land use diversity, and its level of integration can be linked to NCDs & their risk factors, such as physical inactivity.

What about the residents' perspective?

Soour quest is to investigate how our **overall health perception** is affected by the urban living environments?

QUALITY OF LIFE AND URBAN LIVING ENVIRONMENTS

- Personal Features
 - Genetics & Biology
 - Beliefs, food habits, lifestyle preferences, and family structure
- Environmental Features
 - Heat - light features
 - Air, water, and environmental pollution
 - Climate conditions
- Public Health & City Planning and Design (3D+2D) (Ewing & Cervero, 2010)
 - Design
 - Density
 - Diversity
 - Accessibility
 - Distance to Transit
 - Distance to Urban Services & Green Spaces



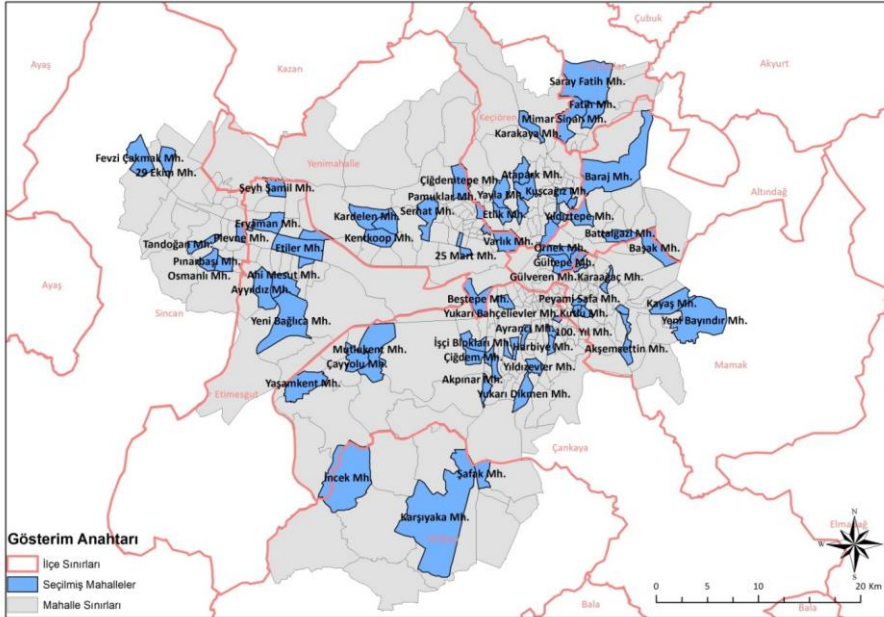
RESEARCH METHODOLOGY: NEIGHBORHOOD SELECTION

Study Area: Ankara, Türkiye

Survey Duration: 21st December 2021 and 15th March 2022

Sample Size: 4015 valid interviews

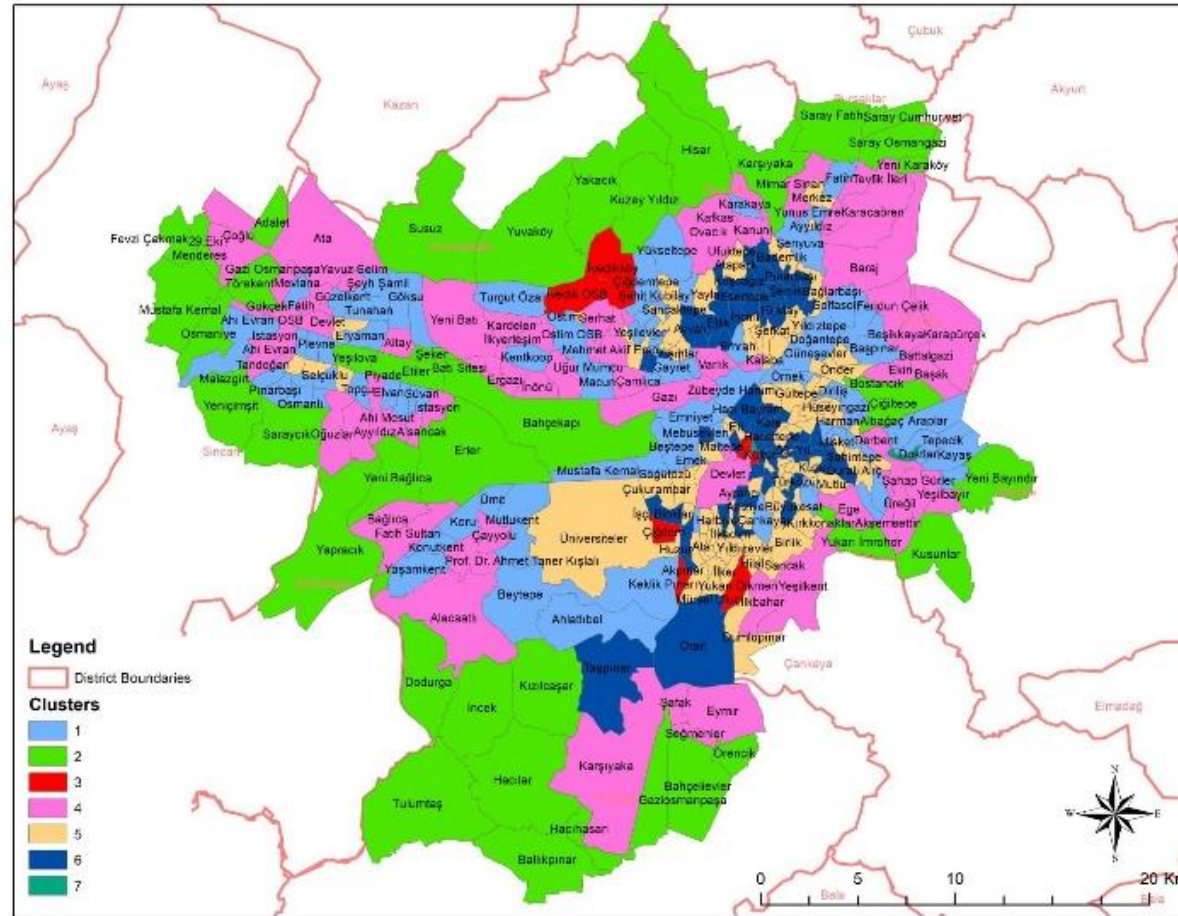
76 neighborhoods (distributed by SES and clusters)



| Cluster | Population 2020 | Share of Population | Sample Size | | Actual Distribution of Interviews | |
|--|--------------------|------------------------|--------------|---------------|--------------------------------------|---------------|
| | | | Number | % | Number | % |
| 1 | 1,393,621 | 0,28 | 929 | 23.23 | 953 | 23.74 |
| 2 | 326,598 | 0,07 | 450 | 11.25 | 420 | 10.46 |
| 3+7* | 39,286 | 0,01 | 176 | 4.40 | 177 | 4.41 |
| 4 | 1,112,234 | 0,22 | 830 | 20.75 | 828 | 20.62 |
| 5 | 1,217,823 | 0,24 | 869 | 21.73 | 878 | 21.87 |
| 6 | 898,796 | 0,18 | 746 | 18.65 | 759 | 18.90 |
| Toplam | 4,988,358 | 1,00 | 4,000 | 100.00 | 4,015 | 100.00 |
| * The clusters are merged due to the size and similarity of cluster 3 and 7. | | | | | | |

RESEARCH METHODOLOGY: NEIGHBORHOOD SELECTION

| Key Variables |
|--|
| Housing Density |
| Floor Area Ratio (FAR*) |
| TPBtA1000 |
| TPBtA5000 |
| Number of pharmacies per 1000 people |
| Number of eating and drinking places per 1000 people |
| Land Price |
| Number of chain markets per 1000 people |
| Number of physicians per 1000 people |
| Number of primary healthcare centers per 1000 people |
| MAD1000 |
| MAD5000 |
| Volume |
| Average Height |
| Active Green Areas per Person |
| Active Green Area Ratio |



RESPONDENT ATTRIBUTES

DEMOGRAPHIC & SOCIO-ECONOMIC ATTRIBUTES

| VARIABLES | Frequency | % | Cumulative % |
|-----------------------------------|-----------|------|--------------|
| Education | | | |
| Primary and Secondary School | 1593 | 39.7 | 39.7 |
| High School | 1455 | 36.2 | 75.9 |
| University | 864 | 21.5 | 97.4 |
| No Education | 103 | 2.6 | 100 |
| SES | | | |
| Moderate Low | 1193 | 29.7 | 29.7 |
| Moderate | 1068 | 26.6 | 56.3 |
| Moderate High | 773 | 19.3 | 75.6 |
| High | 407 | 10.1 | 85.7 |
| Low | 574 | 14.3 | 100 |
| Age Grouped into 4 Classes | | | |
| <29 | 799 | 19.9 | 19.9 |
| 30-44 | 1253 | 31.2 | 51.1 |
| 45-64 | 1399 | 34.8 | 86 |
| >65 | 564 | 14 | 100 |

LIFESTYLE & BEHAVIORAL ATTRIBUTES

| VARIABLES | Frequency | % | Cumulative % |
|---|-----------|------|--------------|
| GreenSpaceRef | | | |
| Visits Green Spaces | 2001 | 49.8 | 49.8 |
| Not Available | 156 | 3.9 | 53.7 |
| Does Not Visit Green Spaces | 1858 | 46.3 | 100 |
| Environment Attitude | | | |
| Negative | 1030 | 25.7 | 25.7 |
| Moderate | 1418 | 35.3 | 61 |
| Positive | 1567 | 39 | 100 |
| Physical Activity Level (metref) | | | |
| Moderate | 1943 | 48.4 | 48.4 |
| High | 622 | 15.5 | 63.9 |
| Low | 1450 | 36.1 | 100 |
| Life Satisfaction | | | |
| Very High/High | 1856 | 46.2 | 46.2 |
| Not Satisfied | 1541 | 38.4 | 84.6 |
| Undecided | 618 | 15.4 | 100 |
| BMI | | | |
| <18,5 (Underweight); 18,5-24,99 (Normal Weight) | 1786 | 44.5 | 44.5 |
| 25,00-29,99 (Overweight) | 1648 | 41 | 85.7 |
| 30,00 ve üstü (Obesity-Morbid Obesity) | 575 | 14.3 | 100 |

MULTINOMIAL LOGISTIC MODEL RESULTS: MODERATE

SIGNIFICANT VARIABLES

SocioEconomicStatus (SES)
Age Grouped into 4 Classes
GreenSpace (2: Not Available)
Environment Attitude (1: Negative)
Physical Activity Level
(1: Moderate; 2 High)
BMI (1: Underweight & Normal;
2: Overweight)
LifeSatisfaction
(1: High/Very High; 2: Low/Very Low)

| Parameter Estimates | | | | | | | | | |
|---------------------------|-------------------------------------|----------------|--------------|---------------|----------|--------------|--------------|---------------------|--------------|
| Overall Health Assessment | | B | Std. Error | Wald | df | Sig. | Exp(B) | Interval for Exp(B) | |
| | | | | | | | | Lower Bound | Upper Bound |
| Moderate | Intercept | 3.169 | 0.510 | 38.585 | 1 | 0.000 | | | |
| | Education | -0.073 | 0.089 | 0.670 | 1 | 0.413 | 0.930 | 0.780 | 1.107 |
| | SES | -0.175 | 0.055 | 10.059 | 1 | 0.002 | 0.840 | 0.754 | 0.935 |
| | Age Grouped into 4 Classes | -0.244 | 0.094 | 6.663 | 1 | 0.010 | 0.784 | 0.651 | 0.943 |
| | [Greenspaceref=1.00] | -0.113 | 0.171 | 0.433 | 1 | 0.510 | 0.893 | 0.639 | 1.250 |
| | [Greenspaceref=2.00] | -1.341 | 0.321 | 17.392 | 1 | 0.000 | 0.262 | 0.139 | 0.491 |
| | [Greenspaceref=3.00] | 0 ^b | | | 0 | | | | |
| | [EnvironmentAttitude=1.00] | -0.799 | 0.194 | 16.907 | 1 | 0.000 | 0.450 | 0.307 | 0.658 |
| | [EnvironmentAttitude=2.00] | 0.141 | 0.218 | 0.420 | 1 | 0.517 | 1.152 | 0.751 | 1.767 |
| | [EnvironmentAttitude=3.00] | 0 ^b | | | 0 | | | | |
| | [PhysicalActivityLevel=1.00] | 0.995 | 0.175 | 32.324 | 1 | 0.000 | 2.705 | 1.920 | 3.813 |
| | [PhysicalActivityLevel=2.00] | 0.593 | 0.274 | 4.694 | 1 | 0.030 | 1.809 | 1.058 | 3.092 |
| | [PhysicalActivityLevel=3.00] | 0 ^b | | | 0 | | | | |
| | [BMI=1] | 1.072 | 0.220 | 23.701 | 1 | 0.000 | 2.922 | 1.897 | 4.499 |
| | [BMI=2] | 0.777 | 0.203 | 14.715 | 1 | 0.000 | 2.175 | 1.462 | 3.236 |
| | [BMI=3] | 0 ^b | | | 0 | | | | |
| | [LifeSatisfaction=1.00] | -0.796 | 0.307 | 6.733 | 1 | 0.009 | 0.451 | 0.247 | 0.823 |
| | [LifeSatisfaction=2.00] | -0.893 | 0.290 | 9.489 | 1 | 0.002 | 0.409 | 0.232 | 0.723 |
| | [LifeSatisfaction=3.00] | 0 ^b | | | 0 | | | | |

a. The reference category is: bad/very bad.

b. This parameter is set to zero because it is redundant.

MULTINOMIAL LOGISTIC MODEL RESULTS: GOOD/VERY GOOD

SIGNIFICANT VARIABLES

SocioEconomicStatus (SES)

Age Grouped into 4 Classes

GreenSpace (2: Not Available)

Environment Attitude

(1: Negative; 2: Moderate)

Physical Activity Level

(1: Moderate; 2 High)

BMI (1: Underweight & Normal;

2: Overweight)

LifeSatisfaction

(1: High/Very High; 2: Low/Very Low)

| Parameter Estimates | | | | | | | | | |
|---------------------------|------------------------------|----------------|------------|--------|----|-------|--------|---------------------|-------------|
| Overall Health Assessment | | B | Std. Error | Wald | df | Sig. | Exp(B) | Interval for Exp(B) | |
| | | | | | | | | Lower Bound | Upper Bound |
| Good/Very Good | Intercept | 4.337 | 0.507 | 73.090 | 1 | 0.000 | | | |
| | Education | 0.167 | 0.089 | 3.540 | 1 | 0.060 | 1.181 | 0.993 | 1.405 |
| | SES | -0.067 | 0.055 | 1.485 | 1 | 0.223 | 0.935 | 0.839 | 1.042 |
| | Age Grouped into 4 Classes | -0.690 | 0.094 | 53.603 | 1 | 0.000 | 0.502 | 0.417 | 0.603 |
| | [Greenspaceref=1.00] | 0.066 | 0.172 | 0.149 | 1 | 0.699 | 1.068 | 0.763 | 1.495 |
| | [Greenspaceref=2.00] | -0.750 | 0.301 | 6.198 | 1 | 0.013 | 0.472 | 0.262 | 0.853 |
| | [Greenspaceref=3.00] | 0 ^b | | | 0 | | | | |
| | [EnvironmentAttitude=1.00] | -1.662 | 0.194 | 73.496 | 1 | 0.000 | 0.190 | 0.130 | 0.277 |
| | [EnvironmentAttitude=2.00] | -0.469 | 0.217 | 4.668 | 1 | 0.031 | 0.626 | 0.409 | 0.957 |
| | [EnvironmentAttitude=3.00] | 0 ^b | | | 0 | | | | |
| | [PhysicalActivityLevel=1.00] | 0.841 | 0.176 | 22.940 | 1 | 0.000 | 2.320 | 1.644 | 3.273 |
| | [PhysicalActivityLevel=2.00] | 1.041 | 0.267 | 15.166 | 1 | 0.000 | 2.832 | 1.677 | 4.782 |
| | [PhysicalActivityLevel=3.00] | 0 ^b | | | 0 | | | | |
| | [BMI=1] | 0.910 | 0.218 | 17.437 | 1 | 0.000 | 2.484 | 1.621 | 3.808 |
| | [BMI=2] | 0.458 | 0.200 | 5.218 | 1 | 0.022 | 1.580 | 1.067 | 2.340 |
| | [BMI=3] | 0 ^b | | | 0 | | | | |
| | [LifeSatisfaction=1.00] | 0.166 | 0.304 | 0.297 | 1 | 0.586 | 1.180 | 0.650 | 2.144 |
| | [LifeSatisfaction=2.00] | -1.321 | 0.291 | 20.602 | 1 | 0.000 | 0.267 | 0.151 | 0.472 |
| | [LifeSatisfaction=3.00] | 0 ^b | | | 0 | | | | |

a. The reference category is: bad/very bad.

b. This parameter is set to zero because it is redundant.

OTHER FINDINGS

SIGNIFICANT FINDINGS

- a significant relationship between BE characteristics and health status:
 - the prevalence of chronic diseases, and individuals' socio-economic statuses, PA levels, and obesity prevalence, assessed by Body Mass Index (BMI).
 - individuals with **chronic diseases tend to use green areas for walking more frequently** than those without chronic diseases (59.8% vs. 49.6%; $p > 0.05$).
 - individuals with **a high BMI tend to use parks more frequently**, particularly during the **summer months**.
 - people with **a low BMI tend to walk to urban facilities**, such as markets and fast-food chain stores (94.4% and 89.9%; $p < 0.001$).
 - Availability and accessibility of green spaces significantly affect PA levels; people **with high PA levels stated that they live close to a park** (21,4% and 9,3%; $p < 0,001$).
 - Housing conditions also affected the results. People living **in high-rises are less likely to use these parks than those living in low-rises** (60.0% and 50.0%; $p < 0.001$).

DISCUSSION: POTENTIALS AND CHALLENGES FOR URBAN LIVING ENVIRONMENTS

- Health determinants (WHO, 2018) & the "Health in All Policies" approach
- Health outcomes cannot be attributed **solely to the health sector**
- Social determinants of health framework highlights the significant impact of income, age, environmental quality, and social support mechanisms on health **evidence-based research** supports a holistic framework that enables the development of healthier societies by **transforming the social and physical environments** in which individuals live.
- The focus should be **at the community level** rather than solely on individual behavioral change

Thank you!
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