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Public Health
England

planning healthy-weight environments –

a TCPA reuniting health with planning project

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foreword

Obesity is a public health crisis. Unless we improve on current trends, we estimate that one in three people in England will be obese by 2034 and one in ten will develop type 2 diabetes. The implications of these projections are daunting: obesity on this scale is not only a threat to the mental and physical health of millions of individuals, but a burden on overstretched services, with potentially profound social and economic consequences.

Turning the tide on this epidemic is a priority. Public Health England has recently set out its commitment to addressing obesity, with specific actions ranging from campaigns to promote healthier eating and combat inactivity, to supporting local authorities in delivering whole-systems approaches to reduce obesity. But we do so in the certain knowledge that a problem of such scale, complexity and urgency is going to require a range of responses, as all of us – from local to national stakeholders – take action and share our learning. It is now widely acknowledged that the unhealthy habits and lifestyles that contribute to obesity do not exist in a vacuum. They are shaped by a web of interrelated factors – by our upbringing, how and where we live (our homes, our neighbourhoods), our jobs, and our social networks, to name just a few key influences. Attempts to reduce obesity cannot rely on changing individual habits, one person at a time, without taking into account the power of the environment to entrench old habits or support new ones.

We have a lot to learn about how to create environments which help to maintain healthy weights, and more to learn about how we can turn this new knowledge into action. This is new territory for all of us – from public health to local government. It will require new ways of working together and effective partnerships across different sectors and different professions.

Such collaborations are not simple things to get right. But they can be made easier by resources such as *Planning Healthy-Weight Environments*. This document includes a resource that can help to create a common understanding of what the evidence shows and what elements to focus on in order to bring about a healthy-weight environment – elements such as encouraging active travel, improving access to green open spaces, helping people to feel connected and safe in their neighbourhoods, and supporting people to eat more healthily. Crucially, the resource also sets out the range of opportunities that exist to influence the planning process and planning policy-making in the interests of reducing obesity. These range from Health Impact Assessments to the role of Joint Health and Wellbeing Strategies. These are not just practical opportunities to enable a particular course of action; they are also strategic opportunities to build a shared ambition, across local communities, to take control of one of the biggest health risks that our generation, and future generations, face. By doing these things, we will also improve general health and wellbeing in all sorts of other ways that extend far beyond the immediate focus of reducing obesity.

I am delighted to recommend this document to the broad constituency of readers who will be able to use the insights and resources it contains to improve the health and wellbeing of their local populations.

Kevin Fenton
National Director of Health and Wellbeing, Public Health England

About the authors

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summary

Almost two-thirds of adults and one-third of children in England are either overweight or obese; there is a similar picture across the UK. Obesity is a major risk factor for a number of diseases, such as type 2 diabetes, cancer and heart disease. It also can affect people's self-esteem and their underlying mental health. Reducing obesity, especially for children, is a priority for Public Health England (PHE) and health agencies across the UK. The causes of rapid increases in the levels of obesity are complex, and the influence of the environment where people live is one of the factors.

Local authority planners have a key role in creating places that enable people to achieve and maintain a healthy weight. But they cannot do this on their own: planners must work closely with public health practitioners as well as other built and natural environment professionals, elected members and communities.

Part 1 of this document is a practical resource for practitioners to use when working together to enable the creation of healthy-weight environments through the English planning system. This resource draws on current evidence and practical experience, and will help practitioners to identify common ground for ongoing collaboration on this agenda. Part 2 sets out key findings from a series of seven healthy-weight environment workshops held in 2014 with local authority partners. These findings summarise existing challenges, opportunities, and gaps in current policy and practice in relation to using the planning process to help create healthy-weight environments. They inform the TCPA's own recommendations to government, published in a separate document.

Collaboration
● Creating a healthy-weight environment is an excellent focus for collaborative, joined-up working within a local authority.

Masterplanning and design
● Healthy-weight elements such as sustainable transport and access to healthy foods need to be considered early in the planning and design process.
● Rural and urban areas face different challenges.
● Landowners have an important role in enabling the creation of connected walking and cycling networks.

Development management
● Minor design details have a cumulative impact for creating healthy-weight environments.
● In some places section 106 planning obligations are rarely delivering elements of a healthy-weight environment.

Behaviour change
● People are most likely to be influenced by their environment when moving to a new home, but often the design elements to help them maintain or achieve a healthy weight are missing when they move into new developments.
● Living environments need flexibility built in to accommodate lifestyle changes.

Monitoring and evaluation
● Currently, the local healthy-weight impacts of planning policy and development schemes are not being systematically evaluated.

introduction

'Changes in housing, water, and the physical environment were essential to controlling infectious disease. Today, modifications of the food environment to address obesity, or of the physical environment to promote physical activity, will be of central importance for chronic disease prevention and control.'
Dr Thomas Frieden, Director, Centers for Disease Control and Prevention (USA), quoted in *Active Design Guidelines: Promoting Physical Activity and Health in Design*. New York City Department of Design and Construction, 2010. **http://www.nyc.gov/html/ddc/html/design/active_design.shtml**

'What has planning got to do with childhood obesity?' This rather blunt question was posed to us by a child development expert at a European conference where we had been invited to present the findings of previous Town and Country Planning Association (TCPA) work on reuniting public health and planning. We thought of her challenge months later, when we noticed a billboard with the slogan 'Kids need to be active for at least 60 minutes every day' perched on a traffic island amid a four-lane gyratory coursing towards an inner city centre. The mismatch between a well intentioned public health message and an environment that promotes sedentary behaviour was stark: the lack of choice to be physically active is just one of the ways that planning can potentially influence weight gain for children.

Obesity has been described as a 'normal response by normal people to an abnormal environment'.[1] As the quote at the head of this section illustrates, the physical environment influences how easy or difficult it is to maintain a healthy weight. Local authority planners potentially have a key role to play in shaping places that support people's ability to achieve and/or maintain a healthy weight: making healthier choices easier.

But they cannot do this alone. Planning and public health have shared roots, but decades of working in relative isolation has created barriers to better, joined-up working, such as a lack of shared language, evidence and priorities. The duty on local government to promote the health of its population[2] provides fresh opportunities for policy and development management planners to work collaboratively with public health practitioners and other built and natural environment professionals to understand how they can help to create a healthy-weight environment locally. They can also harness the knowledge and experience of elected members and local communities to understand what matters to them, what they think makes it difficult to maintain a healthy weight, and what needs to change. This collaborative work needs to feed into a national and local approach to reducing obesity which recognises that creating a healthy-weight environment is only one element of achieving systematic change.

About this document

Part 1 of this document is a resource that policy and development management planners and public health practitioners can use together to identify how the local authority can shape the built and natural environment to help people to maintain a healthy weight, as one element in an overall strategy to reduce obesity. It is also a useful tool for development management planners to use with urban designers and developers to help them understand how they can contribute positively to this urgent national agenda.

Part 1 provides:
- background to the obesity crisis and an introduction to the concept of a healthy-weight environment;
- an explanation of the elements of a healthy-weight environment, including spatial criteria, public health evidence, and links to further guides and resources;
- an annotated illustration that can be used to engage public health practitioners, planners and other built and natural environment professionals and elected members to make progress on this agenda; and

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1   'Urgently needed: a framework convention for obesity control'. *The Lancet*, 2011, Vol. 378 (9,793), p. 741.
    http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2961356-1/fulltext
2   *The New Public Health Role of Local Authorities*. Department of Health, Oct. 2012.
    https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213009/Public-health-role-of-local-authorities-factsheet.pdf

David Lock Associates

Opportunities for play and recreational activity are important elements of a healthy-weight environment

- an overview of how to use the planning process to promote a healthy-weight environment.

There are a number of existing guides on discrete elements of the healthy-weight environment agenda – such as physical activity, active travel, and food growing – and this publication provides links to them. The emphasis in this document is on the need to take a holistic approach to develop an integrated response to a complex problem.

Part 2 summarises the national project that informs this resource. The project centred around a series of seven workshops, organised in collaboration with local authorities, where participants discussed real-life development schemes against a set of criteria that reflected current knowledge about what might constitute a 'healthy-weight environment'. These workshops reinforced our view that a primary obstacle

to better links between health and planning remains the lack of priority given to joint working. Providing a setting for joint working is an important prerequisite for the range of other things that will make collaboration more effective – developing a shared evidence base, getting public health input on planning policy and applications, evaluating health impact, and so on.[3]

The TCPA has also published a set of recommendations. These recommendations are available online, along with further resources and information:[4]
- a background research paper reviewing the evidence;
- the results of TCPA research on current Joint Health and Wellbeing Strategies and Local Plans;
- a summary of the project workshop proceedings; and
- the results of an evaluation of the workshops based on practitioner feedback.

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3 Breaking down professional silos greatly assists the integration of health into planning policy and decisions – see, for example, L. Carmichael, H. Barton, S. Gray and H. Lease: 'Health-integrated planning at the local level in England: impediments and opportunities'. *Land Use Policy*, 2013, Vol. 31, 259-66. **http://www.sciencedirect.com/science/article/pii/S0264837712001329**
4 See the 'Planning Healthy-Weight Environments' webpage at **http://www.tcpa.org.uk/pages/planning-out-obesity-2014.html**

part 1

promoting healthy-weight environments

obesity and healthy weight: an introduction

Obesity occurs when a person's 'energy intake from food and drink consumption is greater than energy expenditure through the body's metabolism and physical activity over a prolonged period, resulting in the accumulation of excess body fat'.[5] Currently in England 61% of adults – almost two-thirds – and 30% of children between the ages of 2 and 15 are classed as overweight or obese. It is predicted that by 2050 60% of men and 50% of women will be obese.[6]

Reducing obesity, particularly among children, is one of the seven priorities of Public Health England (PHE).[7] PHE aims to increase the proportion of children leaving primary school with a healthy weight, accompanied by reductions in levels of excess weight in adults. Together with the Department of Health, it hopes to achieve a sustained downward trend in the level of excess weight in children, and a downward trend in the level of excess weight averaged across all adults by 2020.

Why is reducing levels of obesity important? Obesity is a major risk factor for a number of diseases, such as type 2 diabetes, cancer and heart disease. It also can affect people's self-esteem and their underlying mental health.[8] The financial consequences of dealing with the increases in these illnesses threaten to 'bankrupt the NHS';[9] the recently published NHS five-year strategy backs taking 'hard-hitting' action on obesity by supporting a range of lifestyle illness prevention programmes.[10]

Influence of place

There is a complex web of societal, behavioural and environmental factors that make it increasingly difficult for most of us to maintain a healthy weight:

'The choices we make are influenced… by the day-to-day pressures we face, the behaviour of those around us, the sort of neighbourhood we live in and the prevailing culture relating to food and physical activity which favours overconsumption and inactivity.' [11]

These factors can be exacerbated in deprived areas. For example, children living in the most deprived areas are twice as likely to be obese as children living the least deprived areas.[12]

5   *Tackling Obesities: Future Choices*. Foresight. Government Office for Science, 2007.
    https://www.gov.uk/government/publications/reducing-obesity-future-choices
6   *Ibid.*
7   *From Evidence into Action: Opportunities to Protect and Improve the Nation's Health*. Public Health England, Oct. 2014.
    https://www.gov.uk/government/publications/from-evidence-into-action-opportunities-to-protect-and-improve-the-nations-health
8   *Healthy Lives, Healthy People: A Call to Action on Obesity in England*. HM Government, 2011, p.5.
    https://www.gov.uk/government/publications/healthy-lives-healthy-people-a-call-to-action-on-obesity-in-england
9   S. Boseley: 'Obesity could bankrupt NHS if left unchecked'. *The Guardian*, 17 Sept. 2014.
    http://www.theguardian.com/society/2014/sep/17/obesity-bankrupt-nhs-warning
10 *Five Year Forward View*. NHS England, 2014. **http://www.england.nhs.uk/ourwork/futurenhs/**
11 *Healthy Lives, Healthy People: A Call to Action on Obesity in England*. HM Government, 2011, p.19.
    https://www.gov.uk/government/publications/healthy-lives-healthy-people-a-call-to-action-on-obesity-in-england
12 *From Evidence into Action: Opportunities to Protect and Improve the Nation's Health*. Public Health England, Oct. 2014.
    https://www.gov.uk/government/publications/from-evidence-into-action-opportunities-to-protect-and-improve-the-nations-health

PHE puts it bluntly:

'If an individual is poor, he or she is more likely to be affected by obesity and its health and wellbeing consequences.' [13]

Those living in deprived areas are also:
- ten times less likely to live in the greenest areas compared with people in the least deprived areas;[14]
- more likely to live near to fast-food outlets, which contribute towards the disparity in levels of obesity across the population;[15] and
- more likely to feel unsafe in their neighbourhood, with consequent negative effects on their health, including a reluctance to take exercise.[16]

Planners have an enabling role to ensure that facilities and infrastructure exist to give everyone the opportunity to live in a healthy-weight environment. While this will still only ever be one element of an overall approach to reducing obesity, a review of evidence on transport, physical activity and health has noted that 'good infrastructure is a prerequisite for the effectiveness of other, less tangible, measures'.[17] For example, there are many non-planning reasons why a person may or may not decide to participate in a programme of led walks recommended to them by their GP under a 'social' prescribing programme.[18] But the programme cannot be offered if the local area does not have parks that are attractive, safe and easy to get to. Research has suggested a variety of interventions that planners can make in deprived areas which would have a proportionately greater impact than in other areas, including:
- increasing access to, and improving the quality of, green space;[19]

- creating networks of high-quality cycling infrastructure;[20]
- increasing access to, and improving choice within, the local food retail environment;[21] and
- better connecting new or existing employment opportunities to areas of high unemployment (for example by creating walking or cycling links across existing spatial barriers such as busy roads).[22]

What is a healthy-weight environment?

A healthy weight is defined through an individual's body mass index (BMI): a BMI of between 18.5 and 25 is classed as a 'healthy weight'; BMI between 25 and 30 is classed as 'overweight', more than 30 is classed as 'obese'.[23] What this means is that an individual's body weight is 'appropriate for their height and benefits their health'.[24] For the purposes of this document, we propose that:

A healthy-weight environment supports people in avoiding being overweight or obese through how the place is designed and what it provides.

Specifically, a healthy-weight environment promotes physical activity of all sorts and ensures that sustainable transport and active travel is built into everyone's daily life.[25] It helps people to access and choose healthier goods (such as food and drink) and services (such as healthcare) that support them in choosing a balanced diet, leading an active lifestyle and maintaining a healthy weight.

13 *From Evidence into Action: Opportunities to Protect and Improve the Nation's Health*. Public Health England, Oct. 2014. https://www.gov.uk/government/publications/from-evidence-into-action-opportunities-to-protect-and-improve-the-nations-health

14 *Natural Solutions to Tackling Health Inequalities*. UCL Institute of Health Equity, 2014. https://www.instituteofhealthequity.org/projects/natural-solutions-to-tackling-health-inequalities

15 *The Built Environment and Health: An Evidence Review*. Concept Series 11. Glasgow Centre for Population Health, 2013. http://www.gcph.co.uk/publications/472_concepts_series_11_the_built_environment_and_health_an_evidence_review

16 *Ibid.*

17 R.L. Mackett and B. Brown: *Transport, Physical Activity and Health: Present Knowledge and the Way Ahead*. University College London, for Department for Transport, 2011. http://www.ucl.ac.uk/news/pdf/transportactivityhealth.pdf

18 'Social prescribing' provides a way of 'linking patients' in primary care and their carers with non-medical sources of support within the community – a recent evaluation of the Rotherham Social Prescribing Pilot, funded by the NHS Rotherham Clinical Commissioning Group, has been published by researchers at Sheffield Hallam University – *The Social and Economic Impact of Rotherham Social Prescribing Pilot: Main Evaluation Report*. Centre for Regional Economic and Social Research, Sheffield Hallam University, 2014. http://www.shu.ac.uk/research/cresr/sites/shu.ac.uk/files/social-economic-impact-rotherham.pdf

19 *Natural Solutions to Tackling Health Inequalities*. UCL Institute of Health Equity, 2014. https://www.instituteofhealthequity.org/projects/natural-solutions-to-tackling-health-inequalities

20 R. Aldred: *Benefits of Investing in Cycling. Manchester*. British Cycling, 2014. http://www.britishcycling.org.uk/zuvvi/media/bc_files/campaigning/BENEFITS_OF_INVESTING_IN_CYCLING_DIGI_FINAL.pdf

21 *Obesity: Working with Local Communities*. NICE Guideline PH42. National Institute for Health and Care Excellence, 2012. http://www.nice.org.uk/guidance/ph42

22 *Planning Out Poverty*. TCPA, 2013. http://www.tcpa.org.uk/pages/planning-out-poverty.html

23 *Healthy Lives, Healthy People: A Call to Action on Obesity in England*. HM Government, 2011. https://www.gov.uk/government/publications/healthy-lives-healthy-people-a-call-to-action-on-obesity-in-england

24 *Healthy Weight Strategy for Nottingham City 2011-2020*. Nottingham City Clinical Commissioning Group/Nottingham City Council, 2011, p.5. http://www.nottinghamcity.nhs.uk/healthy-living/child-obesity/871-healthy-weight-strategy.html

25 *Everybody Active, Every Day: An Evidence-Based Approach to Physical Activity*. Public Health England, 2014. https://www.gov.uk/government/publications/everybody-active-every-day-a-framework-to-embed-physical-activity-into-daily-life

David Lock Associates

Convenient, legible and safe cycling networks are vital parts of movement and access strategies

Healthy-weight environment themes

People live in a huge variety of settings, from dispersed rural areas to large cities, and from new communities to regenerated existing buildings or places. While there is no one-size-fits-all response to these different places, there are common elements that a collaborative approach to a healthy-weight environment will need to consider. These are grouped here into six themes:

A Movement and access: Walking environment; cycling environment; local transport services.

B Open spaces, recreation and play: Open spaces; natural environment; leisure and recreational spaces; play spaces.

C Food: Food retail (including production, supply and diversity); food growing; access.

D Neighbourhood spaces: Community and social infrastructure; public spaces.

E Building design: Homes; other buildings.

F Local economy: Town centres and high streets; job opportunities and access.

To help those actively considering how to address these issues locally, the list of themes and elements that make for a healthy-weight environment set out on pages 12 and 13 include a set of planning considerations that can be used to promote discussion and help bring each element to life for participants.

Annex 1 provides guidance and other helpful information for each theme. To help participants understand the importance of each spatial theme for reducing the number of people classed as obese or overweight, Annex 2 includes a selection of evidence and further information.

collaborating for a healthy-weight environment

This section sets out the themes and elements that contribute towards a healthy-weight environment and includes an annotated illustration that shows how they fit together spatially. Three ways of working with the themes and the annotated illustration are suggested:

- Collaborative sessions within a local authority – for example, in councils where there are only nascent links between planning and public health, the information in this section could be used to explore closer and stronger joint working and co-commissioning of integrated planning to help tackle this key public health priority. Other relevant internal departments include transport planning, local economic development, regeneration and housing, leisure and countryside services, and community development and behaviour change.
- Collaborative sessions involving local authority staff and external stakeholders – in the TCPA's experience this approach works well through a workshop format in which a range of local authority staff (see the bullet point above) discuss real-life development applications against the healthy-weight environment themes with urban designers, housing associations and private-sector developers, community groups, Clinical Commissioning Groups, government agencies (such as Sport England and Natural England), and special interest organisations.
- Development management engagement with urban designers and developers through pre-application discussions or other opportunities, such as a developer forum.

Box 1 sets out ten questions which can be used to ensure that the elements of planning for a healthy-weight environment remain a key focal point, regardless of the rationale for or participants in the discussion.

Box 1
Starter for ten: focusing discussion on healthy-weight environment elements

The questions below will help to keep collaborative discussions focused on relevant aspects of a healthy-weight environment (although they may not all be relevant for every development type or circumstance).

1 How is the use of walking, cycling and public transport services made easier than driving a car?
2 Is a supermarket or out-of-town retail development proposed? How will that impact on the viability of any proposed or existing local shopping? What are the implications for people who do not have cars and for minimising car use?
3 What is the proposed retail/food mix, and is it likely to make healthier choices easier for residents?
4 Does the proposal include employment, and does it prioritise creating infrastructure links to local areas of high unemployment?
5 How will new open spaces (and facilities such as playgrounds, food-growing schemes and nature walks) be managed and maintained? How will maintenance be funded?
6 How will existing/future residents and interest groups be involved in planning the development?
7 Does the design of the buildings encourage physical activity?
8 How can elements that enable behaviour change, such as wayfaring signs and lighting, be installed before people move in?
9 Will there be spaces that enable people to meet each other and that are suitable for a range of uses, depending on community priorities?
10 Does the proposed scheme connect to adjacent development via streets/paths that are safe and direct for walking and cycling?

Themes and elements of a healthy-weight environment

A Movement and access

Walking environment	● Clearly signposted street network with destinations within 400-800 metres (5-10 minutes' walk). ● Streets are connected to a coherent wider network designed to facilitate walking, including to public transport stops. ● Streets and the public realm are safe and accessible for all ages, and levels of disabilities. ● Well designed buildings overlook the streets without compromising home privacy and security. ● Walking is prioritised over private car use, and the speed of vehicles is managed.
Cycling environment	● Direct, convenient, legible and safe cycling network design. ● Appropriate segregation or shared surfaces between cyclists, pedestrians and vehicle traffic. ● Streets/cycle paths are connected to coherent wider networks. ● Area-wide cycle facilities are provided, including secure cycle parking, showering/changing rooms, and clothes-drying and storage facilities. ● Vehicle speed is managed.
Local transport services	● Local transport promotes sustainable travel modes over journeys by private cars. ● Travel plans are implemented and monitored where relevant (including for large-scale residential development). ● Existing transport infrastructure and services, such as rail and bus, are integrated effectively. ● School locations comply with local authority home-to-school transport legislative duties.

B Open spaces, recreation and play

Open spaces	● There is a planned network of high-quality green and blue spaces that can also be used for walking and cycling, amounting to a minimum of 40% of total development land. ● Open spaces cater for a range of uses with multiple social, health and environmental benefits.
Natural environment	● High-quality natural green open spaces of different sizes are easy to get to from dwellings – for example, no-one should live more than 300 metres from their nearest area of natural green space of at least 2 hectares in size. ● Opportunities for passive and active play and activity that will not lead to environmental degradation or loss of biodiversity. ● Consent obtained for public access to privately owned countryside adjacent to new development. ● Development improves access to high-quality green spaces for people living in deprived communities.
Leisure and recreational spaces	● A range of sports and leisure facilities and pitches designed and maintained for use by the whole community, not just schools and other institutions. ● Facilities are co-located with other appropriate uses such as schools if feasible. ● Schools have adequately sized open spaces, including playing fields and opportunities for food-growing.
Play spaces	● Wide range of high-quality play opportunities and experiences integrated into residential areas. ● Play spaces and facilities are challenging and fun for all children. ● Play spaces are easy and safe to get to by sustainable transport, and well over-looked to ensure safety. ● Streets are designed as places for incidental play.

C Food

Food retail	● Development avoids overconcentration of hot-food takeaways (A5 uses) in existing town centres or high streets, and restricts their proximity to schools or other facilities for children and young people and families. ● Shops/markets that sell a diverse offer of food choices are easy to get to by walking, cycling or public transport. ● Leisure centres, workplaces, schools and hospitals with catering facilities have a healthier food offer for staff, students, and/or customers. ● Opportunities for supporting innovative approaches to healthy eating through temporary changes of use have been explored.
Food growing	● Development maintains or enhances existing opportunities for food-growing, and prevents the loss of food-growing spaces. ● Opportunities are provided for households to own or have access to space to grow food – for example roof or communal gardens, or allotments.

D Neighbourhood spaces

Community and social infrastructure	● Community facilities are provided early as a part of new development to help people feel connected and to provide a local destination. ● Community facilities such as healthcare services and leisure centres are co-located if feasible. ● Community facilities are easy to get to because they are conveniently located near to where people live, are well signposted, and are close to public transport and on walking and cycling networks. ● Healthcare and other community services have a travel plan that promotes sustainable transport.
Public spaces	● Public spaces are flexible and durable and support civic, cultural and community functions, such as local markets and food stalls. ● Public spaces are easy to get to by public transport and are on walking and cycling networks. ● An attractive and well designed public realm promotes use and enhances safety.

E Building design

Homes	● Adequate internal spaces for secure bike storage and internal movement. ● Homes include space for storing, preparing, cooking and eating home-made food. ● Homes are well insulated and quiet. ● Development includes private or semi-private outdoor space, such as a front or back garden, and/or adequate-sized balconies. ● Car parking spaces per dwelling are minimised, and on-street car parking does not compromise safe walking and cycling networks.
Other buildings	● Buildings have attractive, visible and signed stairwells close to the entrance. ● Buildings include cycle racks, cycle storage and changing facilities. ● Internal design and layout promotes physical activity. ● Car parking spaces are minimised, and car-share schemes have been considered. ● Developments include a travel plan that promotes sustainable transport.

F Local economy

Town centres and high streets	● Development enhances the vitality and viability of the local centre by providing a more diverse retail offer. ● The centre is easy to get to by public transport and is on walking and cycling networks. ● Facilities are provided for people walking and cycling, such as benches, toilets and conveniently located secure bike storage.
Job opportunities and access	● Offices and other employment sites are easy to get to by public transport, walking or cycling. ● Development provides job opportunities and training for local people. ● Development improves sustainable transport access to existing jobs.

Planning healthy-weight environments: an illustration

The illustration on pages 14 and 15 depicts how the six themes fit together spatially in the context of a 'place'. It provides a useful starting point for highlighting and negotiating on particular issues in discussions between developers, policy and development management planners, public health officers and others involved in the planning process.

Planning Healthy-Weight Environments
Components of a healthy weight environment: an illustration

A Movement and Access

B Open spaces, play and recreation

C Food

E Buildings

F Local economy

D Neighbourhood spaces

A Movement and Access
- Clearly signposted and direct walking and cycling networks
- Safe and accessible networks and public realm for all
- Well-designed buildings with passive surveillance
- Walking prioritised over motor vehicles, and vehicle speed managed
- Area-wide walking and cycling infrastructure provided
- Use and monitoring of travel plans

B Open spaces, play and recreation
- Planned network of multi-functional green and blue spaces to achieve multiple benefits
- Easy to get to natural green open spaces of different sizes from dwellings
- Safe and easy to get to play spaces for all with passive surveillance
- Sports and leisure facilities designed and maintained for everyone to use

C Food
- Development maintains or enhances existing opportunities for food growing
- Development avoids over-concentration of hot food takeaways (A5 use) and restricts proximity to schools or other facilities aimed at children and young people
- Shops/food markets sell a diverse offer of food choices and are easy to get to by bike, walking or public transport

D Neighbourhood spaces
- Community and healthcare facilities provided early as a part of new development
- Services and facilities co-located within buildings where feasible
- Public spaces are attractive, easy to get to and designed for a variety of uses

E Buildings
- Dwellings have adequate internal spaces for bike storage, dining and kitchen facilities
- Development includes adequate private or semi-private outdoor space per dwelling
- Car parking spaces are minimised across the development
- Development includes a travel plan that promotes sustainable transport

F Local economy
- Development enhances vitality of local centre through providing more diverse retail and food offer
- Centres and places of employment are easy to get to by public transport, and on walking and cycling networks
- Facilities provided for people who are walking and cycling to local centres and high streets such as benches, toilets and secure bike storage

For full description of the elements please see Part 1

using the planning process to promote healthy-weight environments

This section focuses briefly on the opportunities for moving forward the healthy-weight environment agenda through the planning process, while recognising that this will only ever be one element of a local authority's approach to reducing obesity. It is divided into sub-sections on:

- gathering evidence;
- writing policies;
- supporting neighbourhood planning and community engagement;
- assessing development proposals; and
- monitoring delivery.

It is written primarily for public health practitioners and other non-planners who want to understand how they can collaborate constructively with policy planners (who write the policy framework for a local area) and development management planners (who take decisions based on this framework) on helping to create a healthy-weight environment locally.

As background, Fig. 1 illustrates how public health generally can interact with the planning process; further guidance is also provided in the TCPA's 2012

	Local (Spatial) Plan development	Development management
Role of local public health teams	Work with planners to advise on drafting of Local Plans and policies on how to maximise health gain (for example promote active travel; access to green space; etc). Work with local NHS to ensure NHS infrastructure requirements are identified Ensure that appropriate references are made in plans from other statutory local (health) strategies – Joint Health and Wellbeing Strategy Undertake a Health Impact Assessment on the emerging policies and plan Support planners to prepare for/present evidence at an examination in public	Work with planners (and developers) – especially at pre-application stage to influence emerging masterplan designs to ensure key local health issues are addressed, and outline requirements for section 106/CIL to support health and health infrastructure requirements Assess or prepare a Health Impact Assessment Support local planners in any planning appeals which may arise
Public Health England (PHE)	Work with local public health teams to advise and support (usually at PHE Centre level and only if requested) Provide national guidance and support (for example Obesity and the Environment briefings)	Work with local public health teams to advise and support (usually at PHE Centre level and only if requested)

Fig. 1 An overview of public health involvement in planning

Source: Public Health England's Healthy People, Healthy Places programme

Does the JHWS refer to the influence of the built environment in tackling obesity?
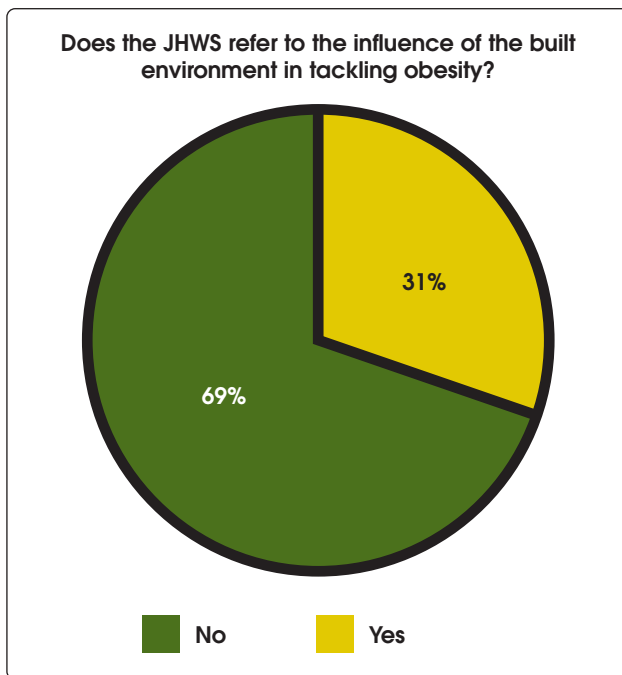
31%

69%

■ No   ■ Yes

Fig. 2 Less than a third of Joint Health and Wellbeing Strategies refer to the influence of the built environment when citing obesity

handbook, *Reuniting Health with Planning*, and the 2013 report *Planning Healthier Places*.[26, 27]

Gathering evidence

Public health practitioners need to work closely with policy and development management planners to establish what evidence can be used locally, and more generally to help interpret the fast moving evidence base in this area and its implications for policy and practice.[28]

Health and Wellbeing Boards are responsible for preparing Joint Health and Wellbeing Strategies (JHWSs), based on priority health needs identified through Joint Strategic Needs Assessments (JSNAs). Research carried out for this project has found that, unsurprisingly, reducing obesity is a priority for most JHWSs (89%).[29] However, the number that make links to the influence of the environment in which people live is much lower, at only 31% (see Fig. 2). Planning

Practice Guidance (PPG) requires planners to take account of obesity strategies (and healthy eating and physical activity).[30] In light of the results of the research carried out for this project, it seems that most Health and Wellbeing Boards might benefit from reviewing and refreshing their JHWS to reflect the links between obesity and place. This would allow planners to use local evidence and public health priorities to justify the inclusion of obesity considerations in local planning policy and decision-making, for example in relation to hot-food takeaways.

Writing policies

There is currently no national planning policy guidance that focuses specifically on reducing obesity. However, planners are required to take account of evidence on obesity via the Health and Wellbeing Board's JHWS and obesity strategy. They are also required to promote healthy communities, as set out in Section 8 of the National Planning Policy Framework (NPPF), which includes creating a healthy environment.[31] Planners can also use obesity evidence to strengthen the argument for achieving a range of existing policy objectives – including sustainable transport, adapting to and mitigating climate change, sustainable design, local economic growth, and better-designed places (see Box 2). Public health practitioners can assist planners through this process – the TCPA's *Planning Healthier Places* report provides further advice.[32]

Supporting neighbourhood planning and community engagement

The Localism Act 2011 introduced neighbourhood plans, which allow town councils, parish councils and neighbourhood forums to develop plans for their local area that complement the local authority planning framework. Neighbourhood planning provides an opportunity for local areas to consider health issues in local developments, and can be used to encourage local communities to build on and use local assets. Local planning authorities have various supporting roles in the neighbourhood planning

26   A. Ross with M. Chang: *Reuniting Health with Planning – Healthier Homes, Healthier Communities*. TCPA, 2012.
     http://www.tcpa.org.uk/pages/reuniting-health-with-planning-healthier-homes-healthier-communities.html
27   A. Ross with M. Chang: *Planning Healthier Places – Report from the Reuniting Health with Planning Project*. TCPA, 2013.
     http://www.tcpa.org.uk/pages/reuniting-health-with-planning-phase-2-project.html
28   For a fuller discussion of the uncertainties regarding evidence, see the project research review, at
     http://www.tcpa.org.uk/pages/planning-out-obesity-2014.html
29   The study reviewed published Joint Health and Wellbeing Strategies in England – a summary of the research is available at
     http://www.tcpa.org.uk/pages/planning-out-obesity-2014.html
30   'Health and wellbeing'. *Planning Practice Guidance*. Department for Communities and Local Government.
     http://planningguidance.planningportal.gov.uk/blog/guidance/health-and-wellbeing/what-is-the-role-of-health-and-wellbeing-in-planning/
31   Section 8: 'Promoting healthy communities'. *National Planning Policy Framework*. Department for Communities and Local Government, Mar. 2013. **https://www.gov.uk/government/publications/national-planning-policy-framework−2**
32   A. Ross with M. Chang: *Planning Healthier Places – Report from the Reuniting Health with Planning Project*. TCPA, 2013.
     http://www.tcpa.org.uk/pages/reuniting-health-with-planning-phase-2-project.html

Box 2
Existing planning policy drivers that support the creation of healthy-weight environments

The questions below will help to keep collaborative discussions focused on relevant aspects of a healthy-weight environment (although they may not all be relevant for every development type or circumstance).

Build a strong, competitive economy (NPPF)
- Identify priority areas for economic regeneration, infrastructure provision and environmental enhancement.

Ensure the vitality of town and village centres (NPPF)
- Retain, enhance or create new attractive and competitive markets.
- Encourage residential development on appropriate sites.
- Promote the retention and development of local services and community facilities.

Manage patterns of growth to make the fullest possible use of public transport, walking and cycling (NPPF)
- Give priority to pedestrians and cyclists, and give access to high-quality public transport facilities.
- Create safe and secure layouts that minimise conflicts between traffic and cyclists or pedestrians.
- Consider the needs of people with disabilities.
- Promote a mix of uses.
- Locate primary schools and local shops within walking distance of most properties.

Promote safe and accessible developments and routes (NPPF and PPG)
- Provide clear and legible pedestrian routes.
- Require high-quality public space and encourage active and continual use of public areas.
- Connect places with each other and make moving through them easy.

Provide open space, sports and recreation facilities (NPPF)
- Identify specific needs.
- Do not build on existing open space, sports and recreational facilities.
- Protect and enhance public rights of way and access.

Promote access to healthier food (PPG and NICE[a, b])
- Control the number of takeaways and other food outlets in a given area, particularly near schools.
- Encourage local provision of affordable fruit and vegetables.
- Discourage the provision of cheap, high-calorie food.
- Provide safe places for food growing.

Promote a low-carbon future and reduce air pollution
- Plan for new development in locations and ways which reduce greenhouse gas emissions.

a *Preventing Obesity and Helping People to Manage their Weight*. NICE Local Government Briefing. National Institute for Health and Care Excellence, 2013. **http://publications.nice.org.uk/preventing-obesity-and-helping-people-to-manage-their-weight-lgb9/what-nice-says**

b *Local Action to Prevent Type 2 Diabetes, including Strategy, Policy and Commissioning*. National Institute for Health and Care Excellence, 2014. **http://pathways.nice.org.uk/pathways/preventing-type-2-diabetes/local-action-to-prevent-type-2-diabetes-including-strategy-policy-and-commissioning**

process[33] – the TCPA's *Planning Healthier Places* report provides further advice and information.[34]

There is an opportunity for public health practitioners to work with neighbourhood planning groups to identify opportunities to create a healthy-weight environment. Such work could include ensuring that

the facilities and spaces that would facilitate other interventions, such as community cooking shops, are included in the plan.

Outside of neighbourhood planning areas, engaging communities meaningfully in decisions about their local area can help to give people a greater sense of

33 Further information is available from the My Community Rights website, at **http://mycommunityrights.org.uk/neighbourhood-planning/**

34 A. Ross with M. Chang: *Planning Healthier Places – Report from the Reuniting Health with Planning Project*. TCPA, 2013. **http://www.tcpa.org.uk/pages/reuniting-health-with-planning-phase-2-project.html**

Box 3
Viability and healthy-weight environments

A key aspect of the assessment of any proposed scheme is viability: will the 'cumulative burden' of the Local Plan's requirements for things such as design quality and sustainable transport remove the ability of a landowner/developer to receive 'competitive returns' from their development?[a]

Feedback from the TCPA's Reuniting Health with Planning programme suggests that viability testing's current focus on short-term developer profits is squeezing out other considerations that are important for sustainable development, with considerable implications for creating health-promoting environments.[b]

However, there is evidence that, by considering the elements of a healthy-weight environment, designers and developers could create more economically thriving spaces that would add value to their schemes, as well as fulfilling national and local health policies. For example:
● Retailers report an increase in trade of up to 40% when places are made more attractive for walking.[c]
● Places that are easier and more attractive to walk around (designed for so-called 'walkability') do better commercially (with an 80% increase in retail sales) and have higher housing values.[d]
● The most valuable streets in London (as measured by rateable value per square metre) are those that have the best spatial accessibility.[e]

This economic evidence can help to build the case for development management planners to require an assessment of the health impact of a proposal, for example by requiring a Health Impact Assessment for larger schemes.

a See paras 173-174 of the National Planning Policy Framework on ensuring viability and deliverability – *National Planning Policy Framework*. Department for Communities and Local Government, Mar. 2012. **https://www.gov.uk/government/publications/national-planning-policy-framework—2**
b *Planning Healthier Places – Report from the Reuniting Health with Planning Project*. TCPA, 2013. **http://www.tcpa.org.uk/pages/reuniting-health-with-planning-phase-2-project.html**
c *The Pedestrian Pound: The Business Case for Better Streets and Places*. Living Streets, 2013. **http://www.livingstreets.org.uk/make-a-change/library/the-pedestrian-pound-the-business-case-for-better-streets-and-places**
d N. Boys Smith, P. Murrain, D. Taylor and F. Terry: *Mount Pleasant Circus and Fleet Valley Gardens: A Case Study of How Streets Are More Popular, More Prosperous and a Better Investment*. CREATE Streets/Legatum Institute. Legatum Institute, Sept. 2014. **http://www.li.com/activities/publications/mount-pleasant-circus-and-fleet-valley-gardens**
e *Ibid*.

ownership and empowerment, which can potentially be a prerequisite for promoting healthier lifestyles.[35]

There is also scope to involve communities in mechanisms and structures that are established to manage and maintain open spaces and community buildings, such as a Community Land Trust or a Development Trust. These are important elements of a healthy-weight environment.

Assessing development proposals

Development management planners are responsible for making decisions about applications for development in the local area, based on the Local Plan and other relevant documents in the planning framework. There are opportunities to raise the elements of a healthy-weight environment with developers as early as possible – and certainly as part of discussions before they submit a planning

application (pre-application). To help raise awareness of these issues, developer forums – which are hosted by a local authority and bring developers active in a local area together to discuss relevant issues – could include a session on healthy-weight environments. This could also be an opportunity to better understand how developers could be incentivised to provide the elements of a healthy-weight environment as part of their initial designs.

Some local authorities will already have an established protocol for what applications public health will comment on. For those that do not, this resource can be used as a focus for initiating contact and discussion between public health practitioners, planners and other relevant sections of the council.

A key factor in planning decision-making is the financial viability of a scheme (see Box 3). There are concerns about the extra costs involved to a developer of requiring the sorts of facilities and

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35 *Fair Society, Healthy Lives: The Marmot Review*. Strategic Review of Health Inequalities in England Post-2010. The Marmot Review, 2010. **http://www.instituteofhealthequity.org/projects/fair-society-healthy-lives-the-marmot-review**

Box 4
Planning healthy-weight environments

Healthy food and drink
Planning Practice Guidance (PPG) requires planners to create an environment that 'promotes access to healthier food'.[a] However, the term 'healthy food' does not sit within any category within the Use Classes Order (the framework that enables planners to decide what is allowed to go where), and planners therefore have no mandate to declare what food (or drink) is healthy and what is not. The public health profession should consider how to use JSNAs and other tools to help define 'healthy food and drink' in a way that can make it a material consideration that planners should take into account.

Minimising car use
There is often a tension locally about the extent to which making sustainable transport modes more attractive requires measures to make travelling by car less convenient, such as by reducing car parking provision. There are related health arguments for reducing traffic, such as the impact of poor air quality on respiratory diseases and premature death (and, potentially, obesity),[b] and the detrimental impact of traffic on social connections for people living on busy roads, which can lead to poorer mental health.[c] Strong political leadership is needed to make the case for reallocating space to sustainable transport and active travel, which should include the economic benefits of so doing.[d] This will be easier to achieve if public health evidence that helps to make the case locally is published in the Joint Health and Wellbeing Strategy.

Safety and sustainable transport
Sustainable transport and active travel policies – which favour developments that are easy to walk and cycle through – can run counter to Secured by Design policies, which broadly prefer to make it difficult for people to walk easily through a site. Minimising fear of crime is a crucial variable that can influence people's willingness to walk. However, the evidence as to the most effective layout for achieving this is mixed,[e] and is at odds with evidence that supports direct routes for walking and cycling.

Active spaces
Active design guidance encourages planners and developers to locate facilities where they can be over-looked by neighbouring development to improve safety and encourage people to use sustainable transport to get there. However, some developers prefer to design schemes so that active spaces such as playgrounds and football pitches are located away from housing. Their own marketing data indicates that people do not like living near the noise and potential nuisance of these facilities. Local authority planners need to share good practice examples of active design as early as possible in the design process (see Annex 1 for guides and information sources).

Green and blue spaces
Existing environments present various opportunities and constraints when taking a strategic approach to a green infrastructure network that makes effective provision for physical activity. Planners can be unsure about the best package of open spaces to help increase physical activity for all age ranges and abilities in a local area, and about how ongoing maintenance and management would be funded. There are guides and tools available to inform these decisions (see the 'Open spaces, recreation and play' and 'Neighbourhood spaces' sections in Annex 1).

a   Planning Practice Guidance is available online at **http://planningguidance.planningportal.gov.uk/**
b   'Overweight or obese people breathe more air pollutants'. *Science Daily*, 4 Feb. 2014 (reporting work at Université de Montréal). **http://www.sciencedaily.com/releases/2014/02/140204101408.htm**
c   *Fair Society, Healthy Lives: The Marmot Review*. Strategic Review of Health Inequalities in England Post-2010. The Marmot Review, 2010. **http://www.instituteofhealthequity.org/projects/fair-society-healthy-lives-the-marmot-review**
d   A. Davis: *Claiming the Health Dividend: A Summary and Discussion of Value for Money Estimates from Studies of Investment in Walking and Cycling*. Department for Transport, 2014. **https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/371096/claiming_the_health_dividend.pdf**
e   For example a review of the evidence is provided in T. Lorenc *et al.*: 'Environmental interventions to reduce fear of crime: systematic review of effectiveness'. *Systematic Reviews*, 2013, Vol. 2, 30. **http://www.systematicreviewsjournal.com/content/2/1/30**

services that are set out in Part 1. However, many of the suggested elements could be achieved at little extra cost by incorporating them into the design from the outset rather than requiring developer contributions to mitigate health impacts later. There is also a role for planners and public health practitioners – along with other partners such as Local Enterprise Partnerships, Sport England, Local Nature Partnerships, and so on – in identifying funding opportunities that could help developers to provide the elements of a healthy-weight environment without additional cost.
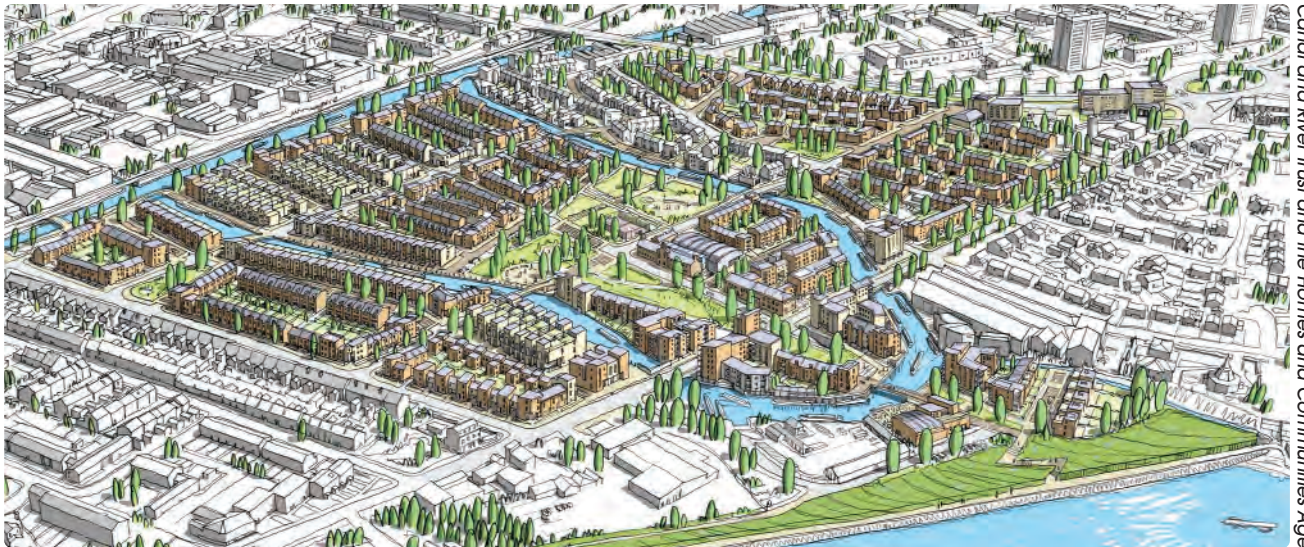
Canal and River Trust and the Homes and Communities Agency

A masterplan visualisation of the Icknield Port Loop development being undertaken by the Canal and River Trust and the Homes and Communities Agency – integrated with the canal network, the development provides a new local park and a walkable neighbourhood with home zones, play areas and an integrated pedestrian network

Monitoring delivery

Local planning authorities are required to prepare an annual Authority's Monitoring Report (AMR) to help determine whether the policies in the Local Plan are being implemented.

Public health practitioners should ensure that the AMR includes commentary on the health impact of development, especially in relation to being obese or overweight. Practice is not well developed in this area, so there is an opportunity for public health practitioners to devise feasible measures to assess the effectiveness of planning interventions.[36] These should complement relevant indicators set out in the Public Health Outcomes Framework (PHOF), such as the utilisation of green space for exercise/health reasons.[37] Possible measures include:

- devising a baseline using existing datasets, such as data from the JSNA, GP surgeries, the National Child Measurement Programme, and travel-to-school surveys;
- evaluating the impact of large-scale new development through appraisal of design elements that could be influencing behaviour change;

- evaluating the impact of all new developments on people and their behaviour (not just whether buildings and structures have been built or green space etc. provided); and
- exploring opportunities to apply for local public health research grants to fund local evaluation initiatives in association with a local university and/or research centres.

Planning practice challenges to creating a healthy-weight environment

Planning is always a process of balancing competing priorities, and creating a healthy-weight environment is no different. Rarely will all the priorities align neatly in any plan or development; the aim is to secure as much benefit as possible.

Box 4 summarises some tensions in planning policy that may arise when a local authority considers how to help create a healthy-weight environment, and suggests some potential ways forward.

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36   Stockport Council is a pioneer of including health data and indicators in its AMR – see **http://stockport-consult.limehouse.co.uk/portal/pp/zzz_adopteddocuments/aaa_ldsamrsci/amr_1**/
37   The full set of PHOF indicators and data, by local authority, is available at **http://www.phoutcomes.info/**

part 2
project findings

project workshops

During the summer of 2014 the TCPA partnered with seven local authorities from around England to organise and run a set of workshops on planning healthy-weight environments. The key findings set out in this section are based on the seven workshop discussions. A summary of the workshop proceedings and an evaluation of the workshops based on practitioner feedback are available online.[38]

Local authority contacts were asked to work with planning and public health teams to identify development examples (applications pending approval, approved applications, developments under construction, or completed developments – see Box 5 for an overview of the selected schemes) that would be suitable for cross-sector, inter-departmental collaborative discussion, hosted by the local authority.

Different development types and scales will require different healthy-weight environment solutions, and there is no one-size-fits-all formula that can be used. The workshops used selected real examples from a range of development types (retrofitting the existing environment, regeneration, town centres/high streets, small-scale and large-scale developments) as the focus of facilitated discussions. The workshop participants were drawn from the seven partner local authorities, stakeholder organisations such as Natural England and Sustrans, private-sector developers and housing associations, and other interested local authorities. The developer of each example scheme had to be willing for the scheme to be discussed; and at each workshop a proponent of the development spoke and provided important information and context. To support discussions, briefings were developed to present key development information from Design and Access Statements and conditions on planning permission. The development examples were not intended to represent best or good practice. Rather, they were chosen because they showed potential for facilitating a stimulating discussion against a range of criteria that broadly reflected the elements of a healthy-weight environment as set out in Part 1.

Who participated?

The dominant professions attending were planning, public health, and transport and travel planning, and feedback was collected from more than 100 participants out of a total of more than 200. Overall, there was an excellent spread of expertise, from a range of professional areas that also included housing, regeneration, diet and obesity, and sport. This reinforced the view that planning healthy-weight environments is a valuable topic for stimulating and promoting collaborative discussions on improving the health-promoting properties of places.

Findings

Collaboration

Creating a healthy-weight environment is an excellent focus for collaborative, joined-up working
Reducing obesity is a complex, multi-faceted challenge, which needs a considered, joined-up response. The partner local authorities demonstrated that it is possible to develop a collaborative place-based approach to the challenge. These local authorities have laid a foundation for ongoing inter-disciplinary working across the different stages of the planning process between planners, transport planners, urban designers, developers, other built

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38   Available from the TCPA's 'Planning Healthy-Weights Environments' webpages, at **http://www.tcpa.org.uk/pages/planning-out-obesity-2014.html**

Box 5
TCPA workshops – summary of local development examples

Sefton, Merseyside
- *Large-scale development in Kew, Southport (approved):* Mixed-use development, including 668 dwellings, an extra-care development, 216 square metres of retail space, and a business park.
- *Regeneration at the Klondyke and Penpoll sites, Bootle (completed):* 154 dwellings, 805 square metres of retail space and 1,197 square metres of office space, using existing memorial gardens as a focal point.

Hertfordshire, East of England
- *Town centre and retrofitting the existing environment at Clarendon Road, Watford (completed):* Part of an urban realm regeneration project to encourage sustainable travel between the railway station and the town centre.
- *Large-scale development at Bishop's Stortford North, East Hertfordshire (outline approval):* A Garden City style development of 2,200 dwellings, mixed-use local centres providing up to 21,000 square metres of commercial floorspace, and retail space, schools and green infrastructure, including allotments.

Luton, Bedfordshire
- *Regeneration at Marsh Farm Central Area (approved):* A three-phase redevelopment with 1,503 square metres of retail space and 16 flats, three residential blocks comprising 85 flats and 11 houses, and reorientation of the road layout and implementation of a bus-only route.

Stockport, Greater Manchester
- *Small-scale development at Ratcliffe Street (completed):* Edge-of-town-centre development of a three-storey block of 12 apartments, and 12 car parking and 12 secure cycle parking spaces.
- *Small-scale development at George Street, Compstall (completed):* Six-unit one-bedroom sheltered accommodation, with a covered and secure store for parking cycles and mobility scooters.

Lincolnshire, East Midlands
- *Large-scale development at N'Dola Drive, Horncastle (approved):* 106 dwellings with semi-detached and detached houses, semi-detached bungalows, a terrace of bungalows and blocks of flats, and a centrally located open space.
- *Large-scale development at Greylees, Sleaford (approved):* Phase-five development of 58 dwellings with a mix of smaller one-, two-, three- and four-bedroom houses, alongside open space with existing woodland and a community orchard.

Suffolk, East of England
- *Large-scale development at Ravenswood, Ipswich (completed):* Redevelopment of a former airport to provide 1,000 dwellings, with employment land, school and recreation facilities, and a community centre.
- *Large-scale development at Chilton Woods, Sudbury (outline planning application):* Up to 1,250 dwellings, 17 hectares of new employment land, and 3 hectares for education uses and community uses, including a possible new community hall, and green infrastructure.

Sandwell and Birmingham, West Midlands
- *Large-scale development at Smethwick Midland Metropolitan Hospital (application):* NHS acute hospital development with approximately 670 beds, set within wider area regeneration plans for Smethwick providing 1,500 new homes.
- *Large-scale development at Icknield Port Loop, Birmingham (outline approval):* A Canal and River Trust/Homes and Communities Agency development of 1,000 dwellings, 7,900 square metres of employment space, a hotel, a retail store and community centre, and a new local park and revitalised canal system.

The TCPA also participated in two Greater London Authority workshops on planning and health to help inform the project findings. Further details on each development example are provided in the briefings prepared for each workshop, available at
http://www.tcpa.org.uk/pages/planning-out-obesity-2014.html

environment professionals (from across the local authority and from outside organisations), public health practitioners, elected members, and local communities.

Masterplanning and design

Sustainable transport needs to be considered early in the planning and design process
A key public health aspiration regarding maintaining and achieving a healthy weight is that adults should have

150 minutes a week of moderate activity and children 180 minutes.[39] The National Physical Activity Framework for England includes creating active environments as one priority for action,[40] and one way of helping to achieve this aim is to create environments that make sustainable transport and active travel an attractive option (which is also a key requirement of the National Planning Policy Framework – NPPF). Scotland, Wales and Northern Ireland also have national obesity strategies which strive to achieve active environments.

Information requirements such as Design and Access Statements prepared as part of a developer's planning application often described a proposed development as walking and cycling friendly. Planners and urban designers need to evaluate early on whether the walking and cycling distances in a proposed scheme meet the suggested thresholds for good practice. Furthermore, some development examples proposed development densities that would be unlikely to make the proposed local retail businesses viable – this in turn undermines the potential for more local walking and cycling trips.

Example: *The Icknield Port Loop redevelopment in Birmingham is proposed on land owned by the Canal and River Trust. It aims to create 'an environment attractive for families adjacent to the inner city'. While there were concerns about the scale of the proposed development densities, outline permission has been granted alongside a commitment by planners to take elected members on a study tour to demonstrate how places designed at this higher density can work well.*

Landowners have an important role in enabling the creation of connected walking and cycling networks

Sometimes new development includes so-called 'ransom strips' – small tracts of land that effectively act as buffers between one development and future neighbouring schemes. Access to the countryside and rural walking and cycling networks can also be disrupted by landowners who refuse people permission to use their land. One consequence can be long and indirect walking and cycling routes, which in practice can discourage people from using them.

Example: *Tackling disconnected land ownership is sometimes better addressed at community level. For example, Horncastle Parish in Lincolnshire is pioneering a community plan that focuses on connectivity with a 'green wheel' that aims to link up green spaces and create better permeability.[41]*

The Neighbourhood Forum has been able to liaise with private landowners in informal ways that would not have been open to local authority staff.

Rural and urban areas face different challenges when considering the elements of a healthy-weight environment

The potential impact of simple improvements to public realm infrastructure to make villages more accessible and safe, and to support healthier living in a rural context, is significant for rural communities. Within the context of facilitating healthy-weight environments, key issues for rural places include a lack of space for footpaths, landowner unwillingness to provide access to the surrounding countryside, the viability of local food shops and other facilities and services, and transport links and the frequency of services to main centres. There are also non-planning factors such as cuts to bus subsidies and community transport.

Example: *Lincolnshire's public health team is working with rights of way officers to improve walking routes and networks by, for example, funding the creation of hitherto missing bits of infrastructure such as footbridges that create more contiguous rural walking networks.*

Development management

Minor design details have a cumulative impact for creating healthy-weight environments

Relatively minor design elements – such as secure bike storage, wayfaring signs, benches and enough space to sit and eat at home – can influence people's propensity to be active and eat well. It came to light in some workshops that councils lack the capacity to actively enforce some planning conditions that form part of the development approval. This raises the question of whether some of these smaller elements of approved schemes are always included in the actual construction. There is a potential opportunity for neighbourhood planning groups and other community organisations to identify when these things are not provided and to alert the local authority to enforce its own conditions.

In some areas section 106 planning obligations are rarely delivering elements of a healthy-weight environment

In the past, local authorities relied on section 106 planning obligations for a range of elements that might broadly be described as being an important part of a healthy-weight environment, such as the provision

39 *Start Active, Stay Active: A Report on Physical Activity from the Four Home Countries' Chief Medical Officers*. Department of Health, 2011. **https://www.gov.uk/government/publications/start-active-stay-active-a-report-on-physical-activity-from-the-four-home-countries-chief-medical-officers**

40 *Everybody Active, Every Day: An Evidence-Based Approach to Physical Activity*. Public Health England, 2014. **https://www.gov.uk/government/publications/everybody-active-every-day-a-framework-to-embed-physical-activity-into-daily-life**

41 Horncastle Neighbourhood Development Plan (draft) is available at **http://horncastleneighbourhooddevelopmentplan.co.uk/**

of open spaces, bike parking and cycle lanes. As noted in the TCPA's *Planning Healthier Places* report,[42] the focus on viability has meant that many councils involved in the TCPA Reuniting Planning with Health programme roundtables have not been able to secure such contributions as part of planning approval. This raises significant questions about who should be paying for the provision of these elements, and why. This is a discussion that reaches well beyond achieving healthy-weight environments through planning.

In places that continue to seek section 106 contributions, the local authority's requirements as set out in a Local Plan or Supplementary Planning Document may need to be reviewed. For example, one council asks for a 50% smaller section 106 financial contribution for children's play spaces on designated town centre sites in order to help make it more attractive for developers to build in the area it wishes to regenerate. But is that sending the right signals about the importance of play and physical activity for children? The same council splits section 106 contributions between formal sports provision and maintenance, and children's play provision and maintenance – but this means there is no opportunity to use the money to promote other relevant activities, such as provision of spaces for local food-growing.

Behaviour change

Development phasing does not take account of when people are most likely to be influenced by their environment

A frequent comment at the workshops, from a variety of professional perspectives, was that the point at which someone moves home is a key moment to influence their behaviour in their new environment. Consequently, it is important that the elements of a healthy-weight environment – such as parks, safe and legible walking routes, community facilities, and so on – are in place from the moment that households move in. However, the phasing of most large-scale development schemes is designed so that these kind of elements are installed after a percentage of the homes are already built, which means that people can have lived in an area for years before the infrastructure and services that might influence how they live are provided.

Example: *The large-scale development at Ravenswood, Ipswich, included construction of a community centre at the same time as the first phase of the development. This was a requirement of the local authority, as the development was constructed on council land. It may be in the public-sector*

interest to develop funding models that lever in public-sector contributions for upfront infrastructure that can be repaid as the development is completed.

Environments need flexibility built in to accommodate lifestyle changes

Assuming that the value of physical activity and healthy food choices for maintaining a healthy weight becomes increasingly recognised, it is possible that demand will grow for spaces that can be used for a variety of different activities. For example, spaces for communal food-growing were not generally included in the older planning applications discussed at the workshops, but they were a feature of some of the newer ones – something that reflects community aspirations, market demand, and local planning policy. Future-proofing (for healthy-weight) environments to include flexible and temporary-use spaces is one response to the uncertainties of the future, although this is challenging for urban sites where land is limited and profitability is the key driver. Green infrastructure strategies could help to identify flexible spaces in a local area that developers of smaller-scale development could contribute to.

Examples: *The Icknield Port Loop development in Birmingham will include 'undesignated' open space; future residents will be able to influence how it is used. The Bishop's Stortford North development includes a proposal for a Community Trust that will use funds negotiated through a section 106 agreement to manage allotments and other green spaces. The Trust will be a mechanism that will enable residents to influence how these spaces are utilised.[43]*

Monitoring and evaluation

The local healthy-weight impacts of planning policy and development schemes are not being systematically evaluated

Planners and other environmental professionals urgently need more engagement from public health on topics such as gathering useful baseline data, identifying synergies between existing datasets, advising on the feasibility of gathering new data, and deciding what that data should be. The case for creating healthy-weight environments will need evidence – both health-based and financial. The incentive for compiling this evidence, especially in relation to reducing health inequalities and improving performance against the PHOF indicators, is likely to rest with public health rather than other parts of the local authority, at least to begin with.[44] This evidence should be able to help inform the local authority's AMR for their Local Plan.

42   A. Ross with M. Chang: *Planning Healthier Places – Report from the Reuniting Health with Planning Project*. TCPA, 2013. **http://www.tcpa.org.uk/pages/reuniting-health-with-planning-phase-2-project.html**

43   This ties in with broader debates on the use of temporarily vacant spaces and land – see, for example, the Meanwhile Space project website, at **http://www.meanwhilespace.com/users/local-authorities/making-communities-and-spaces-work/**

44   The Public Health Outcomes Framework (PHOF) sets the context for monitoring improvement across a range of indicators – local-level data updates are published quarterly. See **http://www.phoutcomes.info/**

planning healthy-weight environments: concluding thoughts

The TCPA's Planning Healthy-Weight Environments project and this document have provided invaluable advice and insight on how local authorities are currently working to reduce obesity through the planning process.

Making use of the Part 1 resource will be a good first step for local authorities that wish to reduce obesity levels in their local area through planning and development. However, the targeted local workshops and real development examples that complement this resource revealed that this is a new agenda for local authorities, and there are a number of challenges in enabling healthy-weight environments locally.

We are optimistic that there is determination both nationally and locally to tackle these challenges; the energy of participants at the workshops and wherever we have discussed the issue of healthy-weight environments confirms this. We look forward to this agenda continuing to evolve and mature, within the context of a wider body of work and initiatives undertaken by government and relevant stakeholders, in particular PHE's emerging whole-systems approach to reducing obesity.

The TCPA and project partners hope that practitioners and those interested in enabling the creation of high-quality and healthier places for communities embrace the advice and information provided in this document – please continue to share with us how you get on.

annex 1

guidance for healthy-weight environment themes

The following guidance and resources complement the spatial information set out in the themes and elements section of this document, 'Collaborating for a healthy-weight environment'.

A Movement and access

Walking environment
- R. Ballantyne and N. Blackshaw: *Active Planning Toolkit 2. Promoting and Creating Built or Natural Environments that Encourage and Support Physical Activity*. Gloucestershire Health Community, 2014.
  http://www.gloucestershireccg.nhs.uk/wp-content/uploads/2012/12/Active-Planning-Toolkit-2.pdf
- *Obesity and the Environment: Increasing Physical Activity and Active Travel*. Healthy People, Healthy Places Briefing. Public Health England, 2013.
  https://www.gov.uk/government/publications/obesity-and-the-environment-briefing-increasing-physical-activity-and-active-travel
- Secured by Design. Association of Chief Police Officers.
  http://www.securedbydesign.com/

Cycling environment
- *Design Guidance – Active Travel (Wales) Act 2013*. Consultation Document. Welsh Government, 2014.
  http://wales.gov.uk/consultations/transport/ active-travel-design-guidance/?lang=en
- *Draft London Cycling Standards*. Transport for London, 2014.
  https://consultations.tfl.gov.uk/cycling/draft-london-cycling-design-standards
- *Handbook for Cycle-Friendly Design*. Sustrans Design Manual. Sustrans, 2014.
  http://www.sustrans.org.uk/news/new-handbook-cycle-friendly-design

Local transport services
- 'Travel Plans'. Paragraph 009. *Planning Practice Guidance*. Department for Communities and Local Government, 2014.
  http://planningguidance.planningportal.gov.uk/blog/guidance/travel-plans-transport-assessments-and-statements-in-decision-taking/travel-plans/

B Open spaces, recreation and play

Open spaces
- *Planning for a Healthy Environment – Good Practice for Green Infrastructure and Biodiversity*. TCPA and The Wildlife Trusts, 2012.
  http://www.tcpa.org.uk/pages/planning-for-a-healthy-environment-good-practice-for-green-infrastructure-and-biodiversity.html
- *Public Health and Landscape: Creating Healthy Places*. Landscape Institute, 2013.
  http://www.landscapeinstitute.co.uk/policy/health.php
- *Policy Advice Note: Inland Waterways. Unlocking the Potential and Securing the Future of Inland Waterways through the Planning System*. TCPA, with British Waterways, 2009.
  http://www.tcpa.org.uk/pages/inland-waterways.html

Natural environment
- *'Nature Nearby': Accessible Natural Greenspace Guidance*. Natural England, 2010.
  http://publications.naturalengland.org.uk/publication/40004
- J. Allen and R. Balfour: *Natural Solutions to Tackling Health Inequalities*. UCL Institute of Health Equity, 2014.
  http://www.instituteofhealthequity.org/projects/natural-solutions-to-tackling-health-inequalities

Leisure and recreational spaces
- *Planning for Sport: Forward Planning*. Sport England, 2013.
  http://www.sportengland.org/ facilities-planning/planning-for-sport

Play spaces
- A. Shackell, N. Butler, P. Doyle and D. Ball: *Design for Play: A Guide for Creating Successful Play Spaces*. Play England, 2008.
  http:// www.playengland.org.uk/resources/design-for-play.aspx

C Food

Food retail
- *Obesity and the Environment: Regulating the Growth of Fast Food Outlets*. Healthy People, Healthy Places Briefing. Public Health England, 2013.
  https://www.gov.uk/government/publications/obesity-and-the-environment-briefing-regulating-the-growth-of-fast-food-outlets
- *Takeaway Toolkit: Tools, Interventions and Case Studies to Help Local Authorities Develop a Response to the Health Impacts of Fast Food Takeaways*. London Food Board and Chartered Institute of Environmental Health, 2012.
  http://www.cieh.org/policy/default.aspx?id= 44318
- *Obesity: Working with Local Communities*. NICE Guideline PH42. National Institute for Health and Care Excellence, 2012.
  http://www.nice.org.uk/guidance/ph42
- Healthy Places initiative. UK Health Forum.
  http://www.healthyplaces.org.uk/

Food growing
- *Planning Sustainable Cities for Community Food Growing: A Guide to Using Planning Policy to Meet Strategic Objectives through Community Food Growing*. Sustain, 2014.
  http://www.sustainweb.org/publications/?id=295

D Neighbourhood spaces

Community and social infrastructure
- *Improving Culture, Arts and Sporting Opportunities Through Planning: A Good Practice Guide*. TCPA, 2013.
  http://www.tcpa.org.uk/pages/planning-for-culture-arts-and-sport.html

- *Draft Social Infrastructure Supplementary Planning Guidance*. Mayor of London. Greater London Authority, 2014.
  http://www.london.gov.uk/priorities/planning/ consultations/draft-social-infrastructure- supplementary-planning-guidance

Public spaces

- *It's Our Space: A Guide for Community Groups Working to Improve Public Space*. CABE, 2007.
  http://webarchive.nationalarchives.gov.uk/ 20110118095356/http://www.cabe.org.uk/ publications/its-our-space
- *Urban Design Compendium*. Homes and Communities Agency, 2013.
  http://www.homesandcommunities.co.uk/ urban- design-compendium?page_id=&page=1

E Building design

Homes

- *Housing Supplementary Planning Guidance*. Mayor of London. Greater London Authority, 2012.
  http://www.london.gov.uk/priorities/planning/ publications/housing-supplementary-planning- guidance

Other buildings

- *Active Design Guidelines: Promoting Physical Activity and Health in Design*. New York City Department of Design and Construction, 2010.
  http://www.nyc.gov/html/ddc/html/design/ active_design.shtml

F Local economy

Town centres and high streets

- *The Pedestrian Pound: The Business Case for Better Streets and Places*. Living Streets, 2013.
  http://www.livingstreets.org.uk/make-a- change/library/the-pedestrian-pound-the-business- case-for-better-streets-and-places

General planning and health checklists

- *Healthy Urban Planning Checklist*. NHS London Healthy Urban Development Unit, 2014.
  http://www.healthyurbandevelopment.nhs.uk/wp- content/uploads/2014/04/Healthy-Urban-Planning- Checklist-March-2014.pdf
- Healthy Active by Design Tool. Heart Foundation, Australia, 2014.
  http://www.healthyactivebydesign.com.au/
- 'Spatial Planning and Health Group Checklist'. Appendix One, in *Steps to Health Planning: Proposals for Action*. Spatial Planning and Health Group (SPAHG), 2011.
  http://www.spahg.org.uk/?page_id=299
- *Active Design: Promoting Opportunities for Sport and Physical Activity through Good Design*. Sport England, 2006.
  http://www.sportengland.org/facilities- planning/planning-for-sport/planning-tools-and- guidance/active-design/
- *The Art of Building a Garden City – Garden City Standards for the 21st Century*. TCPA, 2014.
  http://www.tcpa.org.uk/pages/garden-cities-the-art- of-building-a-garden-city-garden-city-standards-for- the-21st-century-241.html
- BREEAM UK Communities assessment method. BRE.
  http://www.breeam.org/page.jsp?id=372

annex 2

overview of public health evidence to support healthy-weight environment themes

Further information on the evidence base is available from a background research paper, at
http://www.tcpa.org.uk/pages/planning-out-obesity-2014.html

A Movement and access

Why is this important?

- Indicators of urban sprawl are positively associated with obesity, and measures of land use mix are negatively associated with obesity.[A1]
- There is a close relationship between how people travel every day and the risk of obesity – walking, cycling and using public transport are associated with not being overweight or obese.[A2]

B Open spaces, recreation and play

Why is this important?

- Children living near green spaces are less likely to experience an increase in body mass index (BMI) over time.[A3]
- People with access to good-quality and safe open space are more likely to be physically active for recreation and to report better mental health outcomes.[A4]

C Food

Why is this important?

- Many (but not all) research studies have found a direct link between a fast-food-rich environment and poorer health, and particularly obesity.[A5]
- Community food-growing spaces can increase the likelihood that people will eat more freshly grown food.[A6]
- Availability of fresh produce is often worse in deprived areas owing to the mix of shops that tend to locate in such neighbourhoods.[A7]

D Neighbourhood spaces

Why is this important?

- Well connected and attractive public places and streets can encourage more people to exercise and make active travel choices.[A8]
- Feeling unsafe within a neighbourhood is associated with a series of negative health outcomes and can prevent people from using the built and natural environments to undertake exercise.[A9]

E Building design

Why is this important?

- Stair-climbing is a physical activity that can easily be integrated into everyday life.[A10]
- Healthy eating is influenced by having space/facilities in which to store, cook and share home-made food.[A11]

F Local economy

Why is this important?

- Retailers report an increase in trade of 40% when places are made more attractive for walking.[A12]
- Jobseekers in England and Wales are three times more likely than employed people to live in a no-car household.[A13]

A1   J. Mackenbach *et al*.: 'Obesogenic environments: a systematic review of the association between the physical environment and adult weight status, the SPOTLIGHT project'. *BMC Public Health*, 2014, Vol. 14, p.233. **http://www.biomedcentral.com/1471-2458/14/233**

A2   *Improving the Health of Londoners: Transport Action Plan*. Mayor of London. Transport for London, 2014. **https://www.tfl.gov.uk/cdn/static/cms/documents/improving-the-health-of-londoners-transport-action-plan.pdf**

A3   J. Allen and R. Balfour: *Natural Solutions to Tackling Health Inequalities*. UCL Institute of Health Equity, 2014. **https://www.instituteofhealthequity.org/projects/natural-solutions-to-tackling-health-inequalities**

A4   J. Kent, S.M. Thompson and B. Jalaludin: *Healthy Built Environments: A Review of the Literature*. Healthy Built Environments Program, City Futures Research Centre, University of New South Wales, 2011. **http://www.be.unsw.edu.au/programs/healthy-built-environments-program/literature-review**

A5   D.H. Bodicoat, P. Carter, A. Comber, C. Edwardson, L.J. Gray, S. Hill, D. Webb, T. Yates, M.J. Davies and K. Khunti: 'Is the number of fast-food outlets in the neighbourhood related to screen-detected type 2 diabetes mellitus and associated risk factors?'. *Public Health Nutrition*, 2014. **http://dx.doi.org/10.1017/S1368980014002316**

A6   *Planning Sustainable Cities for Community Food Growing: A Guide to Using Planning Policy to Meet Strategic Objectives through Community Food Growing*. Sustain, 2014. **http://www.sustainweb.org/publications/?id=295**

A7   *Fair Society, Healthy Lives: The Marmot Review*. Strategic Review of Health Inequalities in England Post-2010. The Marmot Review, 2010. **http://www.instituteofhealthequity.org/projects/fair-society-healthy-lives-the-marmot-review**

A8   *The Built Environment and Health: An Evidence Review*. Concept Series 11. Glasgow Centre for Population Health, 2013. **http://www.gcph.co.uk/publications/472_concepts_series_11-the_built_environment_and_health_an_evidence_review**

A9   *Ibid*.

A10 J. Kent, S.M. Thompson and B. Jalaludin: *Healthy Built Environments: A Review of the Literature*. Healthy Built Environments Program, City Futures Research Centre, University of New South Wales, 2011. **http://www.be.unsw.edu.au/programs/healthy-built-environments-program/literature-review**

A11 See the VicHealth website, at **http://www.vichealth.vic.gov.au/Programs-and-Projects/Healthy-Eating/Overweight-and-obesity.aspx**

A12 *The Pedestrian Pound: The Business Case for Better Streets and Places*. Living Streets, 2013. **http://www.livingstreets.org.uk/make-a-change/library/the-pedestrian-pound-the-business-case-for-better-streets-and-places**

A13 R. Aldred: *Benefits of Investing in Cycling. Manchester*. British Cycling, 2014. **http://www.britishcycling.org.uk/zuvvi/media/bc_files/campaigning/BENEFITS_OF_INVESTING_IN_CYCLING_DIGI_FINAL.pdf**