



SPECTRUM Response to Draft National Planning Framework 4 Consultation

SPECTRUM is a research consortium of academic, policy and advocacy partners working together to generate new evidence to inform the prevention of Non-Communicable Diseases (NCDs). SPECTRUM provides a unique overview of NCD prevention strategies including action on price, availability and marketing of tobacco, alcohol and unhealthy food products, and industry influence on health policy. We investigate the conduct and influence of Unhealthy Commodity Industries in driving unhealthy consumption, build understanding of the systems that perpetuate those drivers, and support the prioritisation of political, social and other measures to prevent harm to health and reduce the social health gradient.

The Draft National Planning Framework 4 (NPF4) presents a significant opportunity to shape policy that can contribute to improving public health and reducing health inequalities in Scotland by focusing on place-shaping and thinking about how the environment we live in impacts on health and wellbeing. SPECTRUM welcomes the opportunity to input to the consultation on the NPF4. Our primary interest in the NPF4 is in its potential to address some of the main public health challenges facing Scotland, particularly as we plan Scotland's recovery from the COVID pandemic. We have chosen therefore to provide broad comment on the draft framework in this regard, and to provide detailed answers to only selected consultation questions relevant to our interests.

Scotland's health and the role of the NPF4

Consumption of tobacco, alcohol and foods high in fat, salt and sugar (HFSS) are causes of non-communicable diseases (NCDs) and drivers of health inequalities in Scotland and worldwide. NCDs, such as cancer, heart disease, diabetes, liver and lung disease and stroke are the leading cause of death and disability in Scotland. In 2020 they caused more than 62% of all deaths in Scotland, more than 40,000 lives lostⁱ. Healthy life expectancy in Scotland is only around 62 years which lags considerably behind the rest of the UK and much of western Europe, with a 20-year gap between the most and least disadvantaged areas of the countryⁱⁱ. Consumption of unhealthy products is driven by complex systems of production, distribution and promotion. How we think about and plan our community spaces, towns and regions in Scotland can facilitate or constrain people's access and exposure to unhealthy products and environments, with the potential to affect health, wellbeing and inequalities either positively or negatively.

SPECTRUM welcomes the focus on health in the NPF4 and notes the stated outcome of improving the health and wellbeing of our people. While we are pleased to see public health and health inequalities being given prominence in the framework, we are concerned that it is dealt with only at a fairly high level and is lacking in key details which are important in enhancing Scotland's health, and meeting national strategic targets such as realising a tobacco-free generation by 2034ⁱⁱⁱ as well as reducing the availability of alcohol products, reducing alcohol consumption, and addressing alcohol-related harms including morbidity, violence, abuse, offences and anti-social behaviour^{iv}. We are concerned that there is a lack of focus on the vital preventative role that the planning system can and should play in relation to health and health inequalities, and particularly the lack of acknowledgement in the NPF4 of the role that unhealthy commodities play in driving NCDs, and the significant burden of poor health these create in Scotland.

Controlling the availability of unhealthy commodities to reduce their consumption is recognised by the World Health Organisation (WHO) as one of the most effective and cost-effective approaches to reducing health harm, alongside increasing prices, and restricting marketing^v. To date, whilst progress has been made on pricing and marketing, reducing the availability of unhealthy commodities in Scotland has received limited attention amongst policy makers. Addressing the availability of unhealthy commodities to reduce consumption, is one of the most promising policy opportunities for addressing NCDs globally. We believe that the NPF4 has a key role to play in realising this opportunity in Scotland.

We are concerned that in its current draft form, the NPF4 could be a missed opportunity to utilise place-based policies effectively to reduce the exposure of communities to health harming products to protect health, and in turn make significant progress towards a number of the National Outcomes in Scotland's National Performance Framework. Specifically, we believe that the NPF4 should be expanded in several areas with a focus on place-shaping that encourages developments that do not rely on the promotion and sale of unhealthy commodities. We have also identified some areas where the insertion of specific focus on the impact of unhealthy commodities on consumption and health harm would be welcome. These are detailed in the responses to consultation questions below.

Responses to selected consultation questions

Question 15: What are your views on these strategic actions for this action area?

SPECTRUM notes and welcomes the intention of creating a 24 hour city that is safe and open to everyone (Central Urban Transformation, section 14: Reinvent and future proof city centres), and wish to highlight the challenges of this with regards to the availability of unhealthy commodities. Unlike in England, Scotland's alcohol premises licensing system has a presumption against the granting of 24-hour alcohol licences for on-trade businesses^{vi}. This is based on solid evidence that extra hours of sale of alcohol after midnight are associated with a higher rate of violent assaults and other harms, including in some studies increased violence against women^{vii}. It is important therefore that planning decisions do not undermine this policy, and that the 24-hour city is not one which relies on alcohol for entertainment or prosperity^{viii}. The NPF4 could helpfully note that any such undermining would be contrary to the goal of safety and openness for everyone and make reference to the Licensing (Scotland) Act 2005 and local licensing policies in this regard.

Question 22: Do you agree that addressing climate change and nature recovery should be the primary guiding principles for all our plans and planning decisions?

Given the vital role of the planning system in supporting Scotland's public health priorities, SPECTRUM believes that addressing Scotland's public health challenges and reducing health inequalities should be given equal prominence within the guiding principles, alongside climate change and nature recovery. Enhancing health and reducing health inequalities are embedded in the Place Principle, yet more liveable, healthier and sustainable places can only be achieved by extending these principles into the planning system

Question 36: Do you agree that this policy will ensure places support health, wellbeing and safety, and strengthen the resilience of communities?

Policy 14: Health and wellbeing

SPECTRUM welcomes the inclusion of this policy in the Liveable Places section of the NPF4. The policy seeks to support developments that support the health, wellbeing and safety for all, and strengthen the resilience of communities. It notes that the planning system

should support development that reduces health inequalities and creates an environment that promotes active and healthier lifestyles. This is to be commended, but we believe the detail of this policy should be expanded to include action to limit the availability of and exposure to unhealthy commodities including tobacco, alcohol and unhealthy food.

The policy, at section (a) states that local development plans should aim to create vibrant, healthier and safe spaces and should seek to tackle health inequalities. The provision of health and social care facilities is highlighted as being a key consideration. SPECTRUM believes that the NPF4 should set out further key considerations here by acknowledging the role that unhealthy commodities play in driving NCDs and health inequalities, and setting the expectation that local development plans should control for the number and types of development which could increase the availability of and exposure to such products. It is particularly important to protect children from easy availability of and exposure to unhealthy commodities (including alcohol, tobacco, fast food, dessert stores). SPECTRUM work has shown that all children in Scotland have high levels of exposure to unhealthy commodities, with children from the most disadvantaged areas experiencing seven times the frequency of exposure as children from the least deprived areas^x. Exposure to unhealthy commodities during childhood is a key factor affecting uptake of unhealthy behaviours (smoking, alcohol consumption) during this formative period of the life course^x. As such, developments which would introduce further availability of these commodities into 'child spaces' (e.g. areas around schools, playgrounds) should not be supported.

Policy 14 (b) states that development proposals should not be supported where significant adverse health effects are likely to occur. We welcome this but would appreciate clarity in the NPF4 on the detail of what should be included in a health impact assessment, and if necessary, ensure that the working definition of significant adverse health effects can and does include impact on availability and consumption of unhealthy commodities and NCDs. This should include consideration of any likely changes to the retail environment which affects the availability of unhealthy commodities, particularly in areas of high provision and disadvantaged areas. Further, we think greater specificity is required on the key criteria for assessing the health impacts of a development proposal to enable local planning departments to refuse developments on the basis of health. It is also important that a health impact assessment includes an examination of impact on health inequalities.

SPECTRUM is interested in Policy 25 section (c) under Distinctive Places, which notes that development proposals should not be supported if they contribute to the number and clustering of some non-retail uses, such as hot food takeaways, including permanently sited vans, betting offices and high interest moneylending premises, if the further provision of particular activities would undermine the character and amenity of centres or the health and wellbeing of centres and their communities, particularly in disadvantaged areas. We believe that the intention of this policy is closely linked to Policy 14 and the point we make in the previous paragraph, and should be expanded to include retail uses which also undermine the health and wellbeing of local communities, particularly in disadvantaged areas, including where the sale of alcohol, tobacco or unhealthy food is central to the business model being proposed. Work by the SPECTRUM team over a number of years has shown consistently that high local availability of tobacco and alcohol products is detrimental to the health of communities across Scotland, and contributes markedly to the recent increases in health inequalities^{xi xii}.

Policy 25 (d) states that when considering proposals for neighbourhood shopping planning authorities, developers, owners and occupiers should give consideration to where a retail proposal will alleviate a lack of convenience goods/fresh healthier food and drink provision,

especially in disadvantaged or remoter areas. Again, we think this policy should be expanded to consider where a retail proposal will add to the availability of unhealthy products and seek to limit this, especially in disadvantaged areas. We would like to see this policy linked with the requirement for a health impact assessment as referenced at Policy 14 (b).

Some of the points we make in our consultation response highlight the potential synergy of aims and outcomes between the planning system and the alcohol licensing system in Scotland. We would like to see the NPF4 enhanced to promote policy coherence across planning and licensing, acknowledging the respective roles that they have in place-shaping and developing mechanisms to ensure the two systems work in concert with one another. One such mechanism could be the sharing of improved data on businesses that sell tobacco, alcohol and/or unhealthy food products between the two systems. This would support local authority planning committees and licensing boards to undertake their respective duties to assess 'clustering', overprovision and to carry out well-informed health impact assessments.

The Licensing (Scotland) Act 2005 requires local authority licensing boards to carry out an assessment of 'overprovision' of licensed premises when they are developing their Statements of Licensing Policy. An overprovision policy (declaring an area as overprovided for licensed premises, or licensed premises of a particular type) has the effect of reversing the presumption to grant licence applications in the Licensing (Scotland) Act 2005. Implementation of an overprovision policy therefore has the potential to 'cap' the availability of alcohol in a particular area. Previous in-depth work by SPECTRUM partners analysing the alcohol premises licensing system in Scotland and England has highlighted some of the challenges in assessing 'clustering' of premises without reliable sources of data^{xiii}. We would therefore recommend that the NPF4 makes provision for live and accurate data to be made available on existing businesses that sell unhealthy commodities. A national online data source would enable assessment of clustering in a robust and standardised way across Scotland and would assist with assessing the health impact of any such clustering over time.

ⁱ <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/deaths/avoidable-mortality>

ⁱⁱ <https://www.scotpho.org.uk/population-dynamics/healthy-life-expectancy/key-points/>

ⁱⁱⁱ <https://www.gov.scot/publications/raising-scotlands-tobacco-free-generation-tobacco-control-action-plan-2018/pages/2/#:~:text=Because%20of%20the%20significant%20financial,these%20children%20out%20of%20poverty.>

^{iv} <https://www.gov.scot/publications/alcohol-framework-2018-preventing-harm-next-steps-changing-relationship-alcohol/pages/4/>

^v https://www.who.int/ncds/management/WHO_Appendix_BestBuys_LS.pdf

^{vi} Fitzgerald, N *et al.* (2022) 'How do legal, structural and philosophical differences influence public health team engagement in alcohol premises licensing in England and Scotland? Interview and

documentation analysis.' Under Review, *NIHR Public Health Research Journal*.

^{vii} Fitzgerald, N. *et al.* (2016) 'Gender differences in the impact of population-level alcohol policy interventions: evidence synthesis of systematic reviews', *Addiction*, pp. 1735-1747.
Doi:10.1111/add.13452

^{viii} Fitzgerald, N. *et al.* (2021) 'Lockdown and licensed premises: COVID-19 lessons for alcohol policy', *Drug and Alcohol Review*. John Wiley & Sons, Ltd. Doi:10.1111/DAR.13413

^{ix} <http://dx.doi.org/10.1136/tobaccocontrol-2018-054891>

^x <http://dx.doi.org/10.1136/tobaccocontrol-2013-051473>

^{xi} Shortt N, Rind E, Pearce J, Mitchell R, Curtis S, 2018. Alcohol risk environments, vulnerability and social inequalities in alcohol consumption. *Annals of the Association of American Geographers* 108, 1210–1227.

^{xii} Pearce J, Rind E, Shortt N, Tisch C, Mitchell R, 2016. Tobacco retail environments and social inequalities in individual-level smoking and cessation among Scottish adults. *Nicotine & Tobacco Research* 18, 138-146.

^{xiii} Fitzgerald N. *et al.* (2022) Exploring the impact of alcohol premises licensing in England and Scotland: Synopsis report. Under Review. *NIHR Public Health Research Journal*.