

# Getting Research into Practice (GRIP)

## How to use public health evidence to plan healthier places

**Resource Example 4:** Embedding health and wellbeing into Neighbourhood Plans for Gloucestershire

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# Acknowledgements

**Getting Research into Practice (GRIP) - A resource for local authorities in planning healthier places. Resource Example 4: Embedding health and wellbeing into Neighbourhood Plans for Gloucestershire.** Published by the Town and Country Planning Association (TCPA) and written in collaboration with Hull City Council, University of the West of England (UWE) and Public Health England (PHE).

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## What is the purpose of this resource?

This resource is a supplement to *Getting Research into Practice (GRIP) – a resource for local authorities in planning healthier places*.

It is designed to help neighbourhood planning groups understand how the places in which people live influence their health and wellbeing, so that the neighbourhood plans they produce fulfil their potential to support the wellbeing of communities. It explains where to find relevant evidence about local health and wellbeing and how to use it to inform the proposals in a neighbourhood plan.

The paper draws on a workshop held in Gloucestershire: information relevant to Gloucestershire is outlined in **orange** so that other locations can replace it with their own local information. The purpose of this paper is to provide a useful starting point. Some councils might want to use it as a framework for developing more detailed and locally specific guidance for their neighbourhood planning groups. If helpful, the content of this paper can be copied and used as the basis for locally specific resources.

## Who is this paper for?

This paper is for anyone working on a neighbourhood plan, or helping others with the creation of a neighbourhood plan, such as:

- Parish or town councils, or neighbourhood forums, working on a neighbourhood plan (referred to here as ‘neighbourhood planning groups’);
- Planners from district or unitary councils that are supporting neighbourhood planning groups in their areas;
- Private sector consultants employed by a neighbourhood planning group to help write a neighbourhood plan;
- Members of the community that want to influence or contribute to a neighbourhood plan
- Public health workers who want to support the creation of neighbourhood plans.
- Parish, Town, District and County Councillors

## How does health and wellbeing relate to neighbourhood planning?

When people think about what makes a healthy place, they often think about GP surgeries and hospitals – the health-care services provided by the NHS. However, health-care services have much less influence on people’s health and general wellbeing than is often assumed. The NHS is good at treating people once they get ill. However, in terms of helping people stay happy and well, some of the most important influences are the homes and neighbourhoods in which they live. Put simply, some neighbourhoods make it relatively easy for communities to thrive, while other neighbourhoods make it much more difficult.

Consequently, the process of creating a neighbourhood plan provides an important opportunity to ensure that the new development and other changes proposed for the neighbourhood are planned and designed to support people's wellbeing.

## National evidence

There is now a lot of evidence about what sort of places help people's wellbeing by supporting their mental and physical health. Neighbourhood planning groups might want to think about and discuss this evidence in the early stages of formulating their ideas for their neighbourhood plan. The evidence can also be used to justify proposals in the plan on the grounds that they will support community wellbeing.

In addition to this general evidence about what makes a healthy place, the evidence base in a neighbourhood plan should also include locally specific evidence about the health of the community (explained later in this document).

This section provides a summary of what makes a healthy place. The evidence to support this can be found in these documents, both of which are written in plain English and free to download:

- 'Spatial Planning for Health – an evidence review', Public Health England (2017)
- 'Putting Health into Place', NHS England (2019)

## Good homes

Living in a good quality, affordable and secure home (i.e. a safe home, with no risk of eviction) is linked to many aspects of health and wellbeing. Neighbourhood planning groups should find out what sort of homes are needed by the local community and including them in the plan. In most parts of the country there is a shortage of affordable housing. In many places there is a shortage of particular types of homes, such as those designed for people with disabilities, or smaller homes for single people. It is unlikely that a neighbourhood plan will be able to provide all of the new homes that are required, but by prioritising the type of homes the community needs most it could start to make a difference.

For more information and evidence see:

- 'Spatial Planning for Health' p23, 'housing'
- 'Putting Health into Place', Principle 7, 'Foster health in homes and buildings'
- 'How to Undertake a Housing Needs Assessment', Locality

## Neighbourhoods that make walking and cycling easy and attractive

Evidence shows that being active helps reduce the likelihood of many illnesses, both physical and mental. Even relatively small amounts of activity can be very beneficial to people's wellbeing. Walking is a form of physical activity that is beneficial for people of all ages – and is free. If a neighbourhood is planned and designed so that it is easy for people – including those who are older, very young, or less able – to walk to the shops, or to visit friends, or other places, it could really help people stay well by making physical activity part of their everyday lives. Everyday physical activity can also help people maintain a healthy weight, which has multiple health benefits.

Although walking is a cheap and easy way to be physically active in many places streets and neighbourhoods make walking unattractive, difficult or even dangerous. Through the neighbourhood planning process, it is possible to find out which parts of the neighbourhood people like walking in, and which could be improved. Sometimes relatively small changes, such as more benches to rest on, better signposting and safer crossings can give people the confidence to walk instead of drive short distances.

Cycling, too, is very good for the health of people of all ages. Making the neighbourhood safer and more attractive for cyclists of all abilities can encourage people to be active and reduce the number of vehicles. Safe, well-lit cycle paths and secure places to park bikes can all give people the confidence to cycle instead of drive.

For more information and evidence see:

- ‘*Spatial Planning for Health*’ p11, ‘neighbourhood design’ and p52 ‘transport’
- ‘*Putting Health into Place*’, Principle 4, ‘Create compact neighbourhoods’ and Principle 5, ‘Maximise active travel’

### **Trees, parks and green spaces**

There is now very strong evidence that living in places that have plenty of trees, parks and green spaces is vitally important for people’s mental and physical health. Even being able to see a tree or greenspace through the window can have a measurable beneficial effect on people’s health. In addition, access to local green spaces has been shown to be particularly beneficial for parts of the population with the poorest health. Neighbourhood plans have an important role to play because of their powers to designate local green spaces.

For more information and evidence see:

- ‘*Spatial Planning for Health*’ p38 ‘natural and sustainable environment’
- ‘*Putting Health into Place*’, Principle 8 ‘enable healthy play and leisure’
- ‘*Improving Access to Green Spaces*’ Public Health England, Institute of Health Equity
- ‘*Making Local Greenspace Designations in Your Local Plan*’, Locality
- ‘*How to Consider the Environment in Neighbourhood Plans*’, Locality

### **Opportunities for neighbours to get to know each other**

There is a range of evidence that feeling lonely or isolated is bad for people’s mental and physical health and wellbeing – and that, conversely, living in a strong community, with regular contact with neighbours, and a sense of belonging, supports good health and wellbeing. Well-designed neighbourhoods create opportunities for people to meet and socialise as part of their day-to-day lives, and this supports good health and wellbeing.

For more information and evidence see:

- ‘*Putting Health into Place*’, Principle 3, ‘Connect, involve and empower communities’

## Local evidence

### Quantitative evidence

Neighbourhood plans should be informed by evidence – and evidence about the health of your community is a vital part of this. Council public health teams collect a wide range of data about the health of communities and this is freely available. In places that have ‘unitary’ councils (i.e. one council provides all of the services for an area) the public health team will be part of the council. In places that have more than one level of council (such as districts and counties) the public health team will be part of the county council (sometimes referred to as the ‘upper tier’ council).

The sort of information that neighbourhood planning groups could find useful to inform their local plans includes:

- Statistics about overweight and obesity in childhood
- Statistics about overweight and obesity in adulthood
- The proportion of people in an area that have several long-term health conditions
- The proportion of older people in an area.

Public health data often covers large populations, for instance the whole of a county, although there are data available at district or ward level. Neighbourhood planning, by its nature, is about small areas with small populations, which can mean that it is difficult for neighbourhood planners to find data for their area.

Also, public health data that is about large areas, such as whole counties, can be deceptive: sometimes the average might look all right, but there can often be small areas – even just a few streets – where the residents have particularly bad health. Neighbourhood planning groups should not assume that the health of their communities is the same as the local average: even in small areas there can be some groups with far better – or worse – health than the average. Important sources of local health evidence are:

- **The local JSNA and JHWS** - Neighbourhood plans can contribute to improving people’s health by supporting the aims of the local health and wellbeing strategy.
- **Fingertips** – A good starting point is to search for the ‘local authority health profile’ for your council area, which is available at district, county and unitary levels. This will provide a summary of the health of the population in the area, and whether it is getting better or worse against a range of indicators.
- **Index of Multiple Deprivation** – This data measures a number of different types of deprivation, including poor health, at very local levels in England. In general, people living in areas of multiple deprivation are likely to have poorer health than those living in less deprived areas. Some councils have maps showing which of their wards are in the most deprived areas and this can be helpful in order to ensure that the views and needs of people living in those areas are taken into account by the neighbourhood planning group.

In Gloucestershire, the joint strategic needs assessment for 2017 was published as a document called, 'Understanding Gloucestershire – 2017'.

It highlights that the average age of the population is increasing (the number of over 65s had increased by 25% in a decade) and that it will be important to help people stay healthy. Looking at district level data, it predicts that in the period 2012-2037 the number of over 65s in Tewkesbury Borough, for example, will increase by 70.5% (1)

*This evidence suggests that neighbourhood planning groups in Gloucestershire should consider carefully how the development of their areas could help older people live healthy and independent lives. Depending on what local older people suggest, this might include new road crossings that are timed so that less able people have time to cross; more seats and benches along streets; public toilets in busy areas; more homes built to 'Lifetime Home' standards.*

It shows that there are 14 areas in Gloucestershire that are in the 10% most deprived nationally for 'health, deprivation and disability'.

*This evidence suggests that neighbourhood plans that include these particularly deprived areas should consider how any development proposed nearby could benefit the health of those populations.*

31% of 10-11-year olds in Gloucestershire are affected by overweight or obesity. This is not significantly worse than the national rate. However, given that children who are affected by overweight or obesity are likely to grow into adults who are affected by overweight or obesity, and to suffer from associated health problems throughout their lives. Consequently, helping children keep a healthy weight should be a priority.

*This evidence suggests that neighbourhood plans should help create environments in which children can be physically active – such as local parks, improved play areas (for children of all ages), or improving streets close to schools so that children can walk to school.*

## **Qualitative evidence**

Health inequalities are about the differences in the status of people's health and opportunities that they have to lead a healthy life (2). As such, the people who have the worst health and wellbeing in an area are likely to be least well off and less likely to become involved in the neighbourhood planning process. However, it is important to understand their needs to ensure that plans for development and change in the neighbourhood support them to live healthier lives, rather than making it more difficult.

When talking to the local community about plans and ideas it is vital to try to include the views of children, teenagers, the frail elderly, people with poor mental health, people with mobility problems, and people who do not speak English as a first language. Sometimes local voluntary groups can help facilitate this, particularly if the people in question are less able to speak for themselves or hard to reach, such as people with dementia, or refugees.

Neighbourhood planning groups should try to understand how a wide range of people in the local community experience living in that place. Methods such as asking people to photograph what they like about the place and what they dislike about it can be enlightening. Similarly, asking young people to show on a map which areas they feel safe in, and where they don't feel safe, can be revelatory to other generations. Different groups of people experience the same

places in very different ways, and it is important that proposals to change and develop the neighbourhood are based on an accurate understanding of this, rather than assumptions, which could lead to proposals that make things worse for some groups.

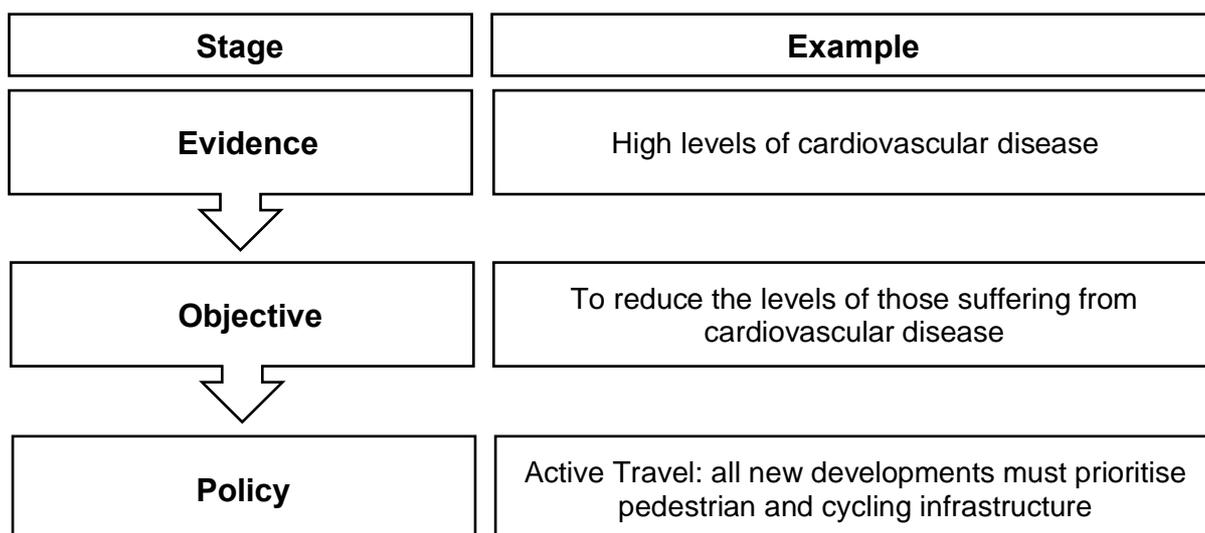
For more information see:

- 'Putting Health into Place', Principle 3, 'Connect, involve and empower communities'
- 'Neighbourhood Planning Community Consultation', Locality

## The 'how to' process

Gathering evidence to support the progress of a neighbourhood plan should start from an early stage. It is likely that evidence will continue to be gathered as the policies and content of the Neighbourhood Plan are developed. At the start of the process, general evidence may be compiled to provide an overview of the local area. This evidence can be found using the sources identified in previous chapters, as well as working with local authority partners. As work on the plan progresses, more specific or detailed evidence may be required to support specific policies. These policies must be based on evidence, but also be shaped by community engagement in order to reflect the needs of the local area. Figures 1 and 2 below aim to show the 'how to process' of embedding evidence into plan-making.

**Figure 1: Turning evidence into policy**



**Figure 2: Embedding health and wellbeing into the neighbourhood plan process**



## Useful links

- [Planning Help CPRE – How to prepare a Neighbourhood Plan](#)
- [Local Government Association – Neighbourhood Planning: A simple guide for councillors](#)
- [Locality – Neighbourhood Plans Roadmap: A step-by-step guide \(2018 edition\)](#)
- [Cornwall Council: Neighbourhood Planning Health and Wellbeing Guide](#)

## References

- (1) [Understanding Tewkesbury Borough \(2015\)](#)
- (2) [Kings Fund: What are health inequalities? \(2020\)](#)