

## Heather Cooke

---

**From:** Kathryn Reilly <info@emra.ie>  
**Sent:** 26 November 2018 13:14  
**To:** RSES  
**Subject:** RSES - Online submission  
**Attachments:** 5bfbf1aa938e0.zip

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

**From:** Kathryn Reilly <kreilly@irishheart.ie>  
**Organisation:** Irish Heart Foundation

**Message Body:**

Please find attached the IHF Submission to the EMRA consultation on the Draft Regional Spatial and Economic Strategy

--

This e-mail was sent from a submission form on Eastern & Midland Regional Assembly (<http://emra.ie>)





## **Irish Heart Foundation**

Submission to Eastern &  
Midland Regional Assembly  
**Draft Regional Spatial &  
Economic Strategy**

November 2018



## Introduction

The Irish Heart Foundation (IHF) welcomes the opportunity to input into this consultation on the 'Draft Regional Spatial & Economic Strategy' of the Eastern & Midland Regional Assembly.

Under the Government's 2013 health and wellbeing framework – *Healthy Ireland* – planning authorities have a responsibility to promote healthy communities and, as such, the Regional Spatial & Economic Strategy should focus strongly on this.

The IHF's submission will focus on how the Regional Spatial & Economic Strategy could be used to improve the public health of people living in the Eastern and Midland region and, in particular, to ensure that children and young people are healthy and active. In a ten-year period, the region exceeded the state growth rate of 12% and increased in population size by over 300,000 people at a rate of 15%. Not least is the region the largest region in terms of population size, with over 2.3 million people, but it also has a significant young demographic. Importantly, the EMRA age profile is young, with the regional average of 1 in 5 people aged under 14 years of age with a population surge moving up from primary school aged children as the number of children in secondary school is expected to rise to 2026. Closely related to this point is the recognition that these demographic pressures "will require a planning response to ensure positive health outcomes for older people, for children, families and young people and to support the integration of migrants and address social exclusion and inclusion" (p158).

This submission firstly discusses why the IHF supports specific public health objectives within Regional Spatial & Economic Strategies. Secondly, it outlines the need for the environment around schools to support healthy lifestyles for young people in order to support the objective of building healthy communities.

## National public health objectives and the Regional Spatial & Economic Strategy

The current obesity crisis results from living in obesogenic environments: the environment around us has a powerful effect on a person's diet, physical activity levels and obesity. Although personal choices are important, obesogenic environments create dangerously high levels of obesity. Indeed, if we do not tackle this issue comprehensively now, we risk exacerbating an already dangerous crisis where:

- The direct and indirect cost of obesity in Ireland is estimated at around €1.13billion<sup>1</sup>
- The estimated excess lifetime cost attributable to childhood obesity and overweight is €16,036 per person<sup>2</sup>
- 55,056 premature deaths can be attributable to childhood overweight and obesity in the Republic of Ireland<sup>3</sup>

Environments can promote health, but they can also cause ill health and obesity. The WHO define an obesogenic environment as “an environment that promotes high energy intake and sedentary behaviour. This includes the foods that are available, affordable, accessible and promoted; physical activity opportunities; and the social norms in relation to food and physical activity.”<sup>4</sup>

A number of factors influence the obesogenic environment, including policy and commercial factors (trade agreements, fiscal and agricultural policies, marketing and food systems); the built environment (availability of healthy foods, infrastructure and opportunities for physical activity in the neighbourhood); social norms (body weight and image norms, cultural norms regarding the feeding of children and the status associated with higher body mass in some population groups, social restrictions on physical activity) and family environment (parental nutrition knowledge and behaviours, family economics, family eating behaviours).<sup>5</sup>

The IHF is calling for the Eastern and Midland Regional Assembly to place the promotion of healthy environments at the centre of the Regional Spatial & Economic Strategy, through the development of specific regional policy objectives. Regional Spatial & Economic Strategies and development plans are a central means of implementing national policies in communities across Ireland.

Chapter 9 – Quality of Life – recognises that “enhancement of the quality of the built and natural environments can improve mental and physical health and reduce health inequalities and enable healthy choices to be made” (p170). Regional Policy Objective 9.21

---

<sup>1</sup> Department of Health. A Healthy Weight for Ireland- Obesity Policy and Action Plan 2016-2025. Dublin: The Stationery Office. Available from: <http://health.gov.ie/wp-content/uploads/2016/09/A-Healthy-Weight-for-Ireland-Obesity-Policy-and-Action-Plan-2016-2025.pdf>

<sup>2</sup> Ivan J. Perry, Seán R. Millar, Kevin P. Balanda, Anne Dee, David Bergin, Laura Carter, Edel Doherty, Lorraine Fahy, Douglas Hamilton, Abbygail Jaccard, André Knuchel-Takano, Laura McCarthy, Adam McCune, Grace O'Malley, Laura Pimpin, Michelle Queally and Laura Webber. (2017). What are the estimated costs of childhood overweight and obesity on the island of Ireland?. Safefood. ISBN: 978-1-905767-75- 5 Available from: <http://www.safefood.eu/SafeFood/media/SafeFoodLibrary/Documents/Publications/Research%20Reports/Cost-of-childhood-obesity-Report.pdf>

<sup>3</sup> Ibid

<sup>4</sup> WHO. (2016). Report of the commission on ending childhood obesity. Geneva: WHO. Available from: [http://apps.who.int/iris/bitstream/handle/10665/204176/9789241510066\\_eng.pdf;jsessionid=ABB4F00758A3A9768005536C61FD102F?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/204176/9789241510066_eng.pdf;jsessionid=ABB4F00758A3A9768005536C61FD102F?sequence=1)

<sup>5</sup> WHO (2016) *Report of the Commission on Ending Childhood Obesity*. Geneva: WHO.

further reinforces this as it notes that public health policy shall be supported, and integrated by, local authorities, with planning policies contained in development plans. There is significant scope for greater emphasis for public health to be put in this document, particularly given that public health cuts across many, if not all, of the individual sectors discussed in the draft document.

The IHF recommends that reference be made to four policies in the plan in this regard: the cross-government public health framework *Healthy Ireland. A Framework for Improved Health and Wellbeing 2013-2025*<sup>6</sup>; *Better Outcomes Brighter Futures. The national policy framework for children and young people 2014-2020*<sup>7</sup>; *A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016 – 2025*<sup>8</sup>; and the local government policy *Local Area Plans - Guidelines for Planning Authorities*<sup>9</sup>.

### ***Healthy Ireland. A Framework for Improved Health and Wellbeing 2013-2025***

*Healthy Ireland* has made improving and protecting health a responsibility for all sectors of society, including across all Local Authorities and Government Departments. Under this national framework, planning authorities have a responsibility to promote healthy communities.

#### **Action 1.9**

Draw up specific proposals in relation to the potential role of local authorities in the area of health and wellbeing, having regard to the principles set out in Paragraph 2.5 of the Action Programme for Effective Local Government. Partners: DH, DECLG, local authorities, HSE Directorates.

#### **Action 2.3:**

Health and wellbeing impacts will be assessed locally and an integrated Social Impact Assessment approach at the local level will be mandated. Tools and supports for local authorities will be developed, to assist them in working across sectors at national and at county level in undertaking health and wellbeing assessments.

Partners in this role: DSP, DH, DECLG, Local authorities, HSE Directorates, County and City Managers' Association.

### ***Better Outcomes Brighter Futures. The national policy framework for children and young people 2014-2020***<sup>10</sup>

---

<sup>6</sup> Department of Health. (2014). *Healthy Ireland. A Framework for Improved Health and Wellbeing 2013-2025*. Dublin: Stationery Office. Available from: <http://health.gov.ie/wp-content/uploads/2014/03/HealthyIrelandBrochureWA2.pdf>

<sup>7</sup> Department of Children and Youth Affairs. (2014). *Better Outcomes Brighter Futures. The national policy framework for children and young people 2014-2020*. Dublin: Stationery Office. Available from:

[https://www.dcy.gov.ie/documents/cypp\\_framework/BetterOutcomesBetterFutureReport.pdf](https://www.dcy.gov.ie/documents/cypp_framework/BetterOutcomesBetterFutureReport.pdf)

<sup>8</sup> See page 39 Department of Health. (2016). *A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016 – 2025*. Available from: <http://health.gov.ie/wp-content/uploads/2016/09/A-Healthy-Weight-for-Ireland-Obesity-Policy-and-Action-Plan-2016-2025.pdf>

<sup>9</sup> Department of Environment, Community and Local Government (2013) *Local Area Plans - Guidelines for Planning Authorities*.

<sup>10</sup> Department of Children and Youth Affairs. (2014). *Better Outcomes Brighter Futures. The national policy framework for children and young people 2014-2020*. Dublin: Stationery Office. Available from:

[https://www.dcy.gov.ie/documents/cypp\\_framework/BetterOutcomesBetterFutureReport.pdf](https://www.dcy.gov.ie/documents/cypp_framework/BetterOutcomesBetterFutureReport.pdf)

The 2014 national policy framework for children and young people – *Better Outcomes, Brighter Futures*<sup>11</sup> (Department of Children and Youth Affairs) – also includes commitments to use the planning system to support healthy childhoods.

“Government commits to:

- Develop child- and youth-friendly communities through Local Government adopting appropriate policies and objectives in County/City. Development Plans and further supported by the preparation and issuing of National Guidelines on Planning for Child-friendly Communities.
- Support children, young people and their parents to make healthier choices through education, addressing food poverty and ensuring that all educational and State institutions providing food and drink to children, whether directly or through franchised commercial services on-site, have a Healthy Foods policy and provide food that meets basic nutritional standards. (DES, DCYA, DSP)”

#### ***Local Area Plans - Guidelines for Planning Authorities***

At local level, under the *Local Area Plans - Guidelines for Planning Authorities*<sup>12</sup>, issued under section 28 of the Planning and Development Act 2000-2012, there is also an onus on Local Authorities to incorporate a focus on active and healthy living in their communities. The key policies and objectives are to “deliver high-quality urban design that improves people’s quality of life”. The guidelines state “planning also has an important role to play in promoting and facilitating active and healthy living patterns for local communities”.

“Regardless of the physical or locational context for local area plans, planning also has an important role to play in promoting and facilitating active and healthy living patterns for local communities. For example, the local area plan can promote active and healthier lifestyles by ensuring that:

- Future development prioritises the need for people to be physically active as a routine part of their daily lives;
- Pedestrians, cyclists and users of other modes of transport that involve physical activity are given the highest priority in transport and mobility strategies, policies and objectives;
- Public open spaces are located and delivered in a way that ensures they are capable of being easily reached on foot or bicycle by routes that are secure and of a high standard and that take biodiversity issues into account in their design;
- Any new workplaces are linked to walking and cycling networks;
- Play areas are designed to encourage varied and physically active play; and
- Exposure of children to the promotion of foods that are high in fat, salt or sugar is reduced such as the careful consideration of the appropriateness and or location of fast food outlets in the vicinity of schools and parks”

#### ***A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016 – 2025***

---

<sup>11</sup> [http://www.dcy.gov.ie/documents/cvpp\\_framework/BetterOutcomesBetterFutureReport.pdf](http://www.dcy.gov.ie/documents/cvpp_framework/BetterOutcomesBetterFutureReport.pdf)

<sup>12</sup> Department of Environment, Community and Local Government (2013) *Local Area Plans - Guidelines for Planning Authorities*.

This national policy and action plan, launched by Government in 2016, aims to reverse obesity trends, to prevent health complications and reduce the overall burden for individuals, families, the health system and the wider society and economy. A critical tenet of this policy is the need to change the obesogenic environment. The importance of prevention by gradually changing Ireland's food environment to one that facilitates consumption of healthier food and drinks and fosters active lifestyles should therefore be recognised in county development plans. The policy notes that food and retail outlets are more widely available now than ever before and that it is important that the "health input" into the local area planning process is consistent and evidence based.

Obesity Plan - Actions relevant to the drafting of development plans:

Action Point 2.1: "Develop guidelines and support materials for those working in developing the built environment for urban development and planning in relation to reducing the obesogenic environment".



## **Make a strong commitment to public health in the Regional Spatial & Economic Strategy**

The IHF believes that given the increased emphasis on public health in national policy, the Regional Spatial & Economic Strategy should more fully recognise the wide potential for planning to improve health outcomes and to reduce health inequalities within the community. To-date development planning processes across the country seem to have adopted a relatively narrow view of public health, primarily limited to the promotion of active travel and the provision of open spaces. The physical and built environments, including infrastructure planning, availability and accessibility of healthy foods, transport networks and the design of streets, can all affect the health and wellbeing of individuals and communities.

By referencing the health of communities in the region throughout the document, particularly in the Regional Policy Objectives of the strategy, it could ensure that the subsequent Local Development Plans will include a focus on promoting good health for local communities. It would ensure that land use decisions and the planning process, for example, will be 'health checked'. This 'health checking' should include a commitment to invest money in infrastructure which promotes public health and reject proposals which will negatively impact the health of the community in the region.

Good health is not distributed equally amongst the population in any area of Ireland. Across Ireland, people living in the most deprived areas have the lowest life expectancy.<sup>13</sup> Local socio-economic circumstances also strongly affect the prevalence of chronic conditions in an area. People living in more deprived areas are more likely to be affected by chronic conditions.<sup>14</sup> Coronary heart disease is almost 2.5 times more prevalent and stroke 2.2 times more prevalent in the most deprived areas than in the least deprived areas.<sup>15</sup> The draft strategy acknowledges the need to provide for social inclusion and recognises that currently there exists pockets of deprivation in the region. As a result, the strategy should also include a commitment to addressing health inequalities amongst the population.

---

<sup>13</sup> Life expectancy is correlated with a person's social class, the affluence of the area in which they live and educational attainment. People with disabilities and carers also die younger, as do single persons and those who are widowed and divorced. CSO (2010) 'Mortality Differentials in Ireland'

[http://www.cso.ie/en/media/csoie/census/documents/Mortality\\_Differentials\\_in\\_Ireland.pdf](http://www.cso.ie/en/media/csoie/census/documents/Mortality_Differentials_in_Ireland.pdf)

<sup>14</sup> Institute of Public Health (2010). *Making chronic conditions count*.

<sup>15</sup> Balanda, K. *et al.* (2010). *Making Chronic Conditions Count: Hypertension, Stroke, Coronary Heart Disease and Diabetes*. Dublin: Institute of Public Health in Ireland.

## Public Health in the Regional Spatial & Economic Strategy

The Irish Heart Foundation supports the recognition of the importance of placemaking and supports it as a key principle in the draft regional spatial and economic strategy, particularly given that it links spatial planning, improved quality of life and creating places that are attractive to live, work, visit and invest in. Moreover, the IHF would additionally note the importance of creating places that are attractive to raise families, and in which children are able to thrive without threat to their health or development. For that reason, when referring to the creation of healthier places in the strategy, it is important to concentrate, not just on “access to services, housing, sustainable transport and social and economic opportunities”, but also on threats to health and future health in particular. It is critical that the strategy is cognisant of, and can react to, these threats to protect the population. This in turn, reinforces the vision statement of the strategy:

“To create a sustainable and competitive region that supports the health and wellbeing of our people and places, from urban to rural, with access to quality housing, travel and employment opportunities for all”.

The draft regional spatial and economic strategy points out that “the place or environment in which we live, or work has a profound impact on our health” (p21). This is further elaborated on in Chapter 9 – Quality of Life, where it states that “the place or environment in which we live or work, including its physical nature and social environment or community, has a profound impact on physical and mental health wellbeing, and quality of life” (p158). This is one of the most important considerations that should underpin the strategy – how can the assembly create a place and an environment that empowers and supports people to live healthy lives? What physical, social or economic decisions and issues impact on health in the community? How can threats to health, both in the short and long term, be mitigated against?

“Healthy communities” have been identified as one of the regional strategic outcomes, aligning with the key principle of healthy placemaking. Of note is the need to “support the protection of the healthy natural environment to ensure clean air and water for all, and the provision of quality healthcare and services that support human health” (p23). Whilst this is all critical to the development of healthy communities, it neglects to consider how planning decisions can have a negative impact on health and, as such, planning decisions must also support human health. This is not just in the consideration of the provision of healthcare and other services, but also how planning decisions can create an obesogenic environment. At all times going forward, and particularly considering the young profile of the region, measures must be taken to prevent the creation, or growth, of an obesogenic environment.

Recognising the importance of placemaking across the draft regional spatial and economic strategy, the IHF welcome that Chapter 9 notes that “the creation of healthy and attractive places requires ongoing improvements to the physical and social infrastructure of our urban centres” (p163). However, the IHF believe that as part of informing this, there must be an explicit reference to reducing the obesogenic environment in the regional policy objectives. While the RPOs for placemaking refer to the need to provide for improvements in the appearance of streetscapes and revitalising spaces, as well as catering for all levels of disability, there is no reference to how the built environment can enable the growth of the

obesogenic environment. Moreover, there is no recognition that planning can impact on the environment. Unless this is recognised in the RPOs, it will not be possible to create healthy places. The IHF recommend an additional RPO that could be worded:

“RPO 9.X: In planning policy formulation and implantation Local Authorities and other stakeholders shall be informed by the need to reduce the obesogenic environment, through the appropriate mitigation of the built environment, and in particular for the needs of a young population.”

The IHF believes that Regional Spatial and Economic Strategies need to have firm commitments to promote and facilitate the development of walkways; to protect and enhance public open spaces and established recreational green areas; to support schools in providing safe routes and other active travel initiatives; to promote the provision, improvement and expansion of sports facilities within the County; and to support the protection of lands zoned as amenity/open space in settlement plans for recreational/amenity use.

The IHF supports regional policy objectives RPO 7.23 and RPO 7.24, particularly in respect of the development of sustainable greenways. However, in Chapter 8 - Connectivity, the absence of prioritised and numbered regional policy objectives on walking and cycling is disappointing. The IHF does note that there are four walking and cycling objectives stated that will guide investment in the region, however the lack of prioritisation of these as stated RPOs is unsatisfactory. This is also reflected in Chapter 9 – Quality of Life where walking and cycling are not referenced specifically in the RPOs on recreation and open space. Indeed, the IHF believes that the delivery of the cycle network, the national cycle plan, the provision of safe cycling routes in towns and villages across the region and enhancing pedestrian facilities are critical and particularly support the development of healthy communities. There is a danger that, without giving these objectives sufficient recognition in the plan now, they will be downgraded in terms of importance when it comes to practical application by local authorities.

It is essential that the facilities and infrastructure to support active travel are provided in the region. Creating an environment conducive to active travel in communities which tend to be inactive could play a significant role in reducing health inequalities. Poorly accessible neighbourhoods (including lack of accessible pavements and cycling paths) can impede older people and people with disabilities in particular from being physically active. Walking and cycling are cheap and potentially accessible to all. In conjunction with the National Heart Alliance, the Irish Heart Foundation published a report, *Building Young Hearts – physical activity, young people and the built environment*<sup>16</sup>, addressing the interplay between the physical environment and levels of physical activity amongst young people. The paper aims to show how the physical environment can improve young people’s opportunities for physical activity and it recommends that the promotion of physical activity should be the key focus of policy for Local Authorities and Government. The report makes a number of recommendations, including: pedestrian and cyclist priority zones; lower speed limits in the proximity of all schools; and the introduction of ‘park and walk’/‘park and stride’ zones directly outside schools, all of which should be considered for inclusion in the Strategy.

---

<sup>16</sup> Irish Heart Foundation and National Heart Alliance (2010) ‘Building Young Hearts’. Dublin: Irish Heart Foundation. [http://www.irishheart.ie/iopen24/pub/building\\_young\\_hearts\\_final\\_pdf\\_2010.pdf](http://www.irishheart.ie/iopen24/pub/building_young_hearts_final_pdf_2010.pdf)

## **Regulate for a Healthy Environment – Reducing the Obesogenic Environment**

A current priority for many Local Authorities is the provision of schools. This is supported by section 9.6 on social inclusion and economic opportunity as the growth of children and young people in the region necessitates “the continued provision and enhancement of facilities and amenities for children and young people, such as childcare, schools, playgrounds, parks and sportsgrounds” (p166). The IHF supports the reference to the need for schools to be located alongside sustainable transport corridors. However, schools and children must also be protected from unhealthy influences and, as such, planning authorities must also ensure that obesogenic influences are not newly located beside schools. This is why the development of an additional RPO as identified in the previous section is essential.

Attention should be paid to ensuring that the environment around new and existing schools is healthy and suitable for children. Closely related to this point is Regional Policy Objective 9.16. This objective states that “statutory plans shall designate new school sites at accessible, pedestrian, cycle and public transport friendly locations”. The IHF also believe that once a new school site is designated, regard must also be had for the location of ancillary businesses and operations that could impact the environment in which children will grow. In this case, *new* fast food outlets should be restricted from opening within a certain distance of these schools. In the drafting of the Strategy, the IHF calls on the Eastern and Midland Regional Assembly to develop a strategic policy objective on the issue of land zoning and land use so as to limit access to fast food and the promotion of unhealthy foods in the vicinity of schools.

While the Draft Strategy does not expressly mention fast food outlets and takeaways, it is important that the draft plan itself is explicit in this. Regard must be given in the plan to *prevent the development or concentration of fast food outlets or takeaways, particularly in the proximity of schools.*

The draft regional spatial and economic strategy notes the importance of demographics and population profile in terms of being able to plan for housing, transport, education and employment needs. With the planning and development of new facilities to service the expanding population, it is imperative that consideration is given to tying these in with ensuring the environment is conducive to better public health outcomes.

The Department of Housing, Planning, and Local Government have noted that a practical effect of their statutory guidelines for planning authorities on Local Area Plans (LAPs) under Section 28 of the Planning Act 2000 (as amended) with regard to fast-food outlets is that “consideration can be given to the appropriateness of their location in the vicinity of schools and parks, for example in newly developing areas, while at the same time taking into account wider land use considerations. In addition, planning policy with regard to the location of fast-food outlets needs to be considered also within the wider policy context of practical steps that planning authorities and other public bodies can take to more widely promote and facilitate active and healthy living patterns, for example, by enhancing the scope for activities such as walking, cycling and sports and active leisure pursuits and their associated facilities.”

It is important that health concerns be admissible in planning decisions, especially for sites close to schools. No-fry zones are increasingly receiving attention at Local Authority level. The development of No Fry Zones is recognised as an integral part of reducing the obesogenic environment. In fact, important national, and international, policies and reports have made specific recommendations on No Fry Zones and planning:

*A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016 – 2025*<sup>17</sup>

Action Point 2.1: “Develop guidelines and support materials for those working in developing the built environment for urban development and planning in relation to reducing the obesogenic environment”.

*British-Irish Parliamentary Assembly Committee D Report on Childhood Obesity*<sup>18</sup>

Recommendation: “Enhanced local planning powers, in particular regarding controls on the location and number of fast food outlets in the vicinity of schools”

*Better Outcomes Brighter Futures. The national policy framework for children and young people 2014-2020*<sup>19</sup>

Commitment 4.10: Develop child- and youth-friendly communities through Local Government adopting appropriate policies and objectives in County/City Development Plans and further supported by the preparation and issuing of National Guidelines on Planning for Child-friendly Communities.

*Healthy Ireland. A Framework for Improved Health and Wellbeing 2013-2025*<sup>20</sup>

Action 2.3: Health and wellbeing impacts will be assessed locally and an integrated Social Impact Assessment approach at the local level will be mandated. Tools and supports for local authorities will be developed, to assist them in working across sectors at national and at county level in undertaking health and wellbeing assessments.

*Obesity and the environment: regulating the growth of fast food outlets*<sup>21</sup>

“There are several reasons why the presence of fast food outlets may be undesirable from a public health perspective, with implications for planners. For example:

- improving access to healthier food in deprived communities may contribute to reducing health inequalities

---

<sup>17</sup> See page 39 Department of Health. (2016). *A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016 – 2025*. Available from: <http://health.gov.ie/wp-content/uploads/2016/09/A-Healthy-Weight-for-Ireland-Obesity-Policy-and-Action-Plan-2016-2025.pdf>

<sup>18</sup> BRITISH-IRISH PARLIAMENTARY ASSEMBLY TIONÓL PARLAIMINTEACH NA BREATAINE-NA HÉIREANN. (2017). REPORT from Committee D (Environment and Social) on Childhood Obesity July 2017. Available from: <http://www.britishirish.org/assets/com-D/BIPA-Cttee-D-Childhood-Obesity.pdf>

<sup>19</sup> Department of Children and Youth Affairs. (2014). *Better Outcomes Brighter Futures. The national policy framework for children and young people 2014-2020*. Dublin: Stationery Office. Available from: [https://www.dcy.gov.ie/documents/cypp\\_framework/BetterOutcomesBetterFutureReport.pdf](https://www.dcy.gov.ie/documents/cypp_framework/BetterOutcomesBetterFutureReport.pdf)

<sup>20</sup> Department of Health. (2014). *Healthy Ireland. A Framework for Improved Health and Wellbeing 2013-2025*. Dublin: Stationery Office. Available from: <http://health.gov.ie/wp-content/uploads/2014/03/HealthyIrelandBrochureWA2.pdf>

<sup>21</sup> Public Health England, Chartered institute of Environmental Health & Local Government Association. (2014). *Healthy people, healthy places briefing Obesity and the environment: regulating the growth of fast food outlets*. March 2014. Available from:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/296248/Obesity\\_and\\_environment\\_March2014.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/296248/Obesity_and_environment_March2014.pdf) (p5)

- many hot food takeaways may generate substantial litter in an area well beyond their immediate vicinity
- discarded food waste and litter attracts foraging animals and pest species
- hot food takeaways may reduce the visual appeal of the local environment and generate night-time noise
- short-term car parking outside takeaways may contribute to traffic congestion”

Health organisations and the public are increasingly concerned about the impact on children of the number of fast food / take-away outlets located in close proximity to schools. The need for action to protect Irish children is strong. Prevalence of obesity in Ireland has increased significantly in the last two decades. There has been a tenfold increase in the rate of obesity among Irish boys between 1975 and 2016, and a nine-fold increase among Irish girls. In 1975, only 1% of children in the State were classified as obese.<sup>22</sup> In 2016, 30.1% of girls and 31.6% of boys in Ireland were overweight, whilst 9% of girls and 10.2% of boys were obese.

Research by the World Obesity Federation predicts that by 2025, 241,000 schoolchildren in Ireland will be overweight or obese by 2025 and as many as 9,000 will have impaired glucose intolerance; 2,000 will have type 2 diabetes; 19,000 will have high blood pressure; and 27,000 will have first stage fatty liver disease.<sup>23</sup> The consequences for the future health of these children will be dire.

The Irish Heart Foundation fully support the introduction of no-fry zones and we believe that a greater sense of urgency must be attached to this. A body of research links over-concentration of and/or proximity to fast-food outlets and obesity.<sup>24</sup> Fast food is readily available beside Irish schools. Currently, 75% of Irish schools have at least one and almost 30% have at least five fast food outlets within 1km.<sup>25</sup> In the absence of proper regulation this situation can only deteriorate further given the business value to fast food outlets of being sited near schools. Studies also indicate that in order to buy something from a takeaway after school or at lunchtime, the takeaway needed to be located close by (on the way to school or a short walk). The Irish Heart Foundation believes that an effective no-fry zone would be set at 1km around a school (approximately equates to a 10-minute walk).

The Irish Heart Foundation believes it is inappropriate to continue to address the issue of new fast food outlets beside schools on a case-by-case basis at local level, requiring parents/schools to organise to appeal planning applications which are in opposition to national policy. A co-ordinated, national approach to protect the health of children and young people across the country is required. To support the work of Local Authorities, the

---

<sup>22</sup> NCD Risk Factor Collaboration (NCD-RisC). (2017) Worldwide trends in body-mass index, underweight, overweight, and obesity from 1975 to 2016: a pooled analysis of 2416 population-based measurement studies in 128.9 million children, adolescents, and adults. *Lancet* 2017; published online Oct 10. [http://dx.doi.org/10.1016/S0140-6736\(17\)32129-3](http://dx.doi.org/10.1016/S0140-6736(17)32129-3).

<sup>23</sup>World Obesity Federation. (2017). Ireland National Infographic. Available from: <http://www.obesityday.worldobesity.org/fullscreen-page/comp-it36nur2/068a7dcd-eb0d-4dd7-9cf6-1220ddc79ef0/60/%3Fi%3D60%26p%3D0a2r2%26s%3Dstyle-j84eeb5h>

<sup>24</sup> For example, see Currie, J., DellaVigna, Moretti, E. And Pathania, V. (2009) 'The Effects of Fast Food Restaurants on Obesity.' *American Association of Wine Economics* and Davis, B. and Carpenter, C. 'Proximity of Fast Food Restaurants to schools and adolescent obesity'. *American Journal of Public Health*, 99 (3), 1541-8.

<sup>25</sup> Callaghan, M., Molcho, M., Nic Gabhainn, S. and Kelly, C. (2015) 'Food for thought: analysing the internal and external school food environment'. *Health Education*, 115(2), 152-170.

Irish Heart Foundation is advocating for national level guidance for all Local Authorities on the introduction of no-fry zones adjacent to schools.

Chapter 9 – Quality of Life – recognises that “enhancement of the quality of the built and natural environments can improve mental and physical health and reduce health inequalities and enable healthy choices to be made” (p170). Recognising this is integral to developing healthy communities and supports the need for no fry zones to be developed as a central tenet to reducing the obesogenic environment and enhancing the health of children and young people. Regional Policy Objective 9.21 further reinforces this as it notes that public health policy shall be supported, and integrated by, local authorities, with planning policies contained in development plans.

## **Promote food growing as a sustainable and health promoting use of green space**

The Growing up in Ireland study shows that children from disadvantaged areas tend to live further away from larger supermarkets, with more fresh food such as fruit and vegetables.<sup>26</sup> It is essential that communities have access to healthy food. This may require local fresh food shops, public transport to large supermarkets, local food markets, as well as opportunities for people to grow their own food.

Planners can play a significant role in the development of 'healthy-weight environments'. The UK Town and Country Planning Association (TCPA) describe healthy-weight environments as supporting people in avoiding being overweight or obese through how an area is designed and what it provides. The TCPA set out guidance for how planning authorities can support healthy-weight environments<sup>27</sup> through: movement and access; open spaces, recreation and play; food; neighbourhood spaces; building design; and local economy. In terms of the food environment they suggest the following assessment criteria, which could be incorporated into the Regional Spatial and Economic Strategy:

- Development maintains or enhances existing opportunities for food growing;
- Development avoids over-concentration of hot food takeaways 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.

---

<sup>26</sup> Layte, R. and McCrory, C. (2011) *Growing up in Ireland - Overweight and obesity among 9-year olds*.

<sup>27</sup>TCPA and Public Health England (2014) 'Planning healthy-weight environments'.

[http://www.tcpa.org.uk/data/files/Health\\_and\\_planning/Health\\_2014/PHWE\\_Report\\_Final.pdf](http://www.tcpa.org.uk/data/files/Health_and_planning/Health_2014/PHWE_Report_Final.pdf)



## **Conclusion**

The IHF recommends that the promotion of health should be front and centre of the Regional Spatial and Economic Strategy. In doing so, this would facilitate the achievement of the regional strategic outcome to develop healthy communities. However, this can only be achieved through specific regional policy objectives and it must also be cognisant of the obesogenic environment, and the need for measures to offset its effects, particularly on the young population in the region.

For more information:

**Kathryn Reilly | Policy Manager |**

Irish Heart Foundation | 17-19 Rathmines Road Lower, Rathmines, Dublin 6 |

T: 01 6346926 | E: [kreilly@irishheart.ie](mailto:kreilly@irishheart.ie)



**Irish Heart  
Foundation**



Irish Heart Foundation  
17-19 Rathmines Road Lower, Dublin 6.

Phone: +353 1 668 5001

Fax: +353 1 668 5896

Email: [info@irishheart.ie](mailto:info@irishheart.ie)

[www.irishheart.ie](http://www.irishheart.ie)

Follow us on  

Registered Charity CHY 3507