

Haringey Clinical Commissioning Group response to Haringey's Main Modifications Public Consultation

Introduction:

Haringey is not unique in its battle with obesity, but the scale of the problem in our borough is daunting; on average obesity affects one in three children about the start secondary school, along with the majority of adults. More worryingly, in some of the more deprived parts of our borough, almost one in two children are affected.

The NHS Five Year Forward View sets out a vision for the future of the NHS. It outlines how action needs to be taken on four fronts, including doing more to tackle the root causes of ill health. The Forward View supports hard-hitting action on obesity and advocates for stronger public health-related powers for local government and elected mayors. Further Simon Stevens, Chief Executive of the National Health Service, said at Haringey's Obesity Conference in June 2015, *'by not tackling obesity we are storing up a huge tidal wave of diabetes, heart disease and cancers. And the negative impact this will have on the NHS, and people's quality of life is enormous'*.

The latest National Child Measurement Programme (NCMP) found that nationally, regionally and locally overweight and obesity among children is rising. In Haringey, overweight and obesity rates have risen by 1.2% among Reception year children and 0.8% among Year 6 children between 2014/15 and 2015/16. Given this rapid rise and the negative health consequences of obesity and its impact on the future sustainability of our National Health Service, successful prevention efforts are needed urgently.

Background:

Changes to Haringey Council's Development Management Plan as outlined in the Main Modifications Public Consultation has seen the removal of the 400m boundary to control the concentration of Hot Food Takeaways. This will impede efforts by Haringey's Health and Wellbeing Board to improve diet and health outcomes among Haringey's children by making the healthier choice the easier choice¹.

Changes to DM47 - Hot Food Takeaway Policy

Haringey's Clinical Commissioning Group is disappointed to see the following points removed from DMMod100-1-4 part one of DM47 in Haringey Council's latest Local Plan:

- *Healthy Eating Zones*
- *The council will resist proposals for hot food takeaway shops located within 400 meters of the boundaries of a primary or secondary school*
- *The percentage of hot food takeaway shops will not exceed 5% of designated shopping frontage in the Metropolitan and District Town Centres and local centres*
- *Within neighbourhood parades, other non-designated frontages and elsewhere in the borough*

Haringey CCG is also disappointed to see the amendment to the first sentence of paragraph 6.60 - DMMod 103, has removed the management of hot food takeaways around primary and secondary schools where they pose a significant health risk to children.

- *'In light of the above evidence base, it is considered appropriate for the Local Plan to seek to manage the development of hot food takeaways, particularly around primary and secondary schools where they pose a significant health risk to children to deliver mixed and sustainable communities, including viable town and local centres.'*

We believe that these changes are a missed opportunity to improve the health of our local community and children and therefore request that they are inserted back into the final Development Management Plan

Links between the food environment and obesity

What we choose to eat plays a large role in determining our risk of gaining weight but the choices school children make are shaped by four key issues 'Access, Availability, Affordability and Acceptability, also known as the 4A's'². In addition there is also a growing body of evidence which links aspects of the built environment, which includes exposure to fast food outlets, with an increase in energy consumption and thus obesity^{3 4 5}. This is because food purchased from fast food outlets is 65% more energy dense than the average diet and it also tends to be higher in fat and sugar. When consumed regularly, these foods can result in an imbalance between calories consumed and calories expended which results in weight gain⁶.

The Cambridge study, which is the latest evidence published in the British Medical Journal, looked at the eating habits and weight of nearly 5,500 people who took part in a lifestyle study in 2011, and compared the results to information on the number of takeaway outlets in their area. The study shows that those exposed to takeaway food outlets in home, work and commuting environments combined, was associated with marginally higher consumption of takeaway food, greater body mass index, and greater odds of obesity⁷. This challenges the notion that people's diet are solely influenced by personal choice but instead a result of complex relations between social, economic and physical environments which makes it far more likely that people will gain weight. As such, many academics, argue that obesity is a normal reaction to our abnormal environment⁸.

National Health Policy

Haringey Council's approach to regulating planning permission for takeaway's is in line with national policy recommendations.

The National Institute for Health and Care Excellence (NICE), which provides evidence based recommendations and guidance to improve health and social care, issued its public health guidelines on preventing cardiovascular disease in 2010. Its recommended that local authorities should be encouraged to restrict planning permission for fast food takeaways and other food retail outlets in specific areas (for example, within walking distance of schools). Therefore the approach taken by Haringey Council to restrict Hot Food Takeaways' within 400m of schools was consistent with this recommendation.

In addition, the 2007 UK government Foresight Report 'Tackling obesity: future choices' remains' the most comprehensive investigation into obesity and its causes. One important action which the Foresight report identified was the need to modify the environment so that it supports being active and does not provide easy access to energy-dense food.

Deprivation and obesity

There is a link between socioeconomic status and obesity nationally⁹ and in Haringey there is a clear relationship between the prevalence of obesity and the level of deprivation for both reception and Year 6 children. Year 6 and Reception children are measured annually in Haringey as part of the National Child Management Programme, key findings from 2015/16 are:

- Reception children in the most deprived areas (1st quintile) have the highest obesity rate at 28% compared to just 15.4% in the least deprived areas (5th quintile).
- Year 6 children in the most deprived areas (1st quintile) have the highest obesity rates at 43.7% compared to just 13.5% in the least deprived areas.

Mapping of fast food outlets in Haringey showed an over concentration of fast food outlets almost exclusively in the deprived east of the borough, which was also judged by the National Obesity Observatory to be in the top quintile of local fast food outlet concentrations. This stark inequality was further highlighted in a recent report by the Royal Society of Public Health which showed that Haringey was the only borough in London to be placed in both the top ten healthiest high streets and the top ten unhealthiest high streets¹⁰. In addition, the RSPH recommended a threshold of 5% to manage clustering. This was sought to capture the detrimental impact of the clustering of fast food takeaways and betting shops by removing one Richter score point for each successive outlet once the proportion of them in an area hits a threshold of more than 5% of total outlets⁹.

Given the stark rates of obesity in the most deprived wards in Haringey and the growing evidence base linking the food environment to increased consumption and greater odds obesity, there is an urgent need to improve the food environment around schools, which has the potential to **influence children's food** –purchasing habits and therefore influence their diets and health. Therefore Haringey CCG would like to see the inclusion of the spatial link between schools (400m boundary) and 5% threshold which is in line with national recommendations from the Royal Society of Public Health.

Strong local support

There is strong local support for addressing the over concentration of fast food outlets and improving accessibility for healthier food options.

During the October half term Haringey residents participated in the Great Weight Debate (GWD) which is a conversation to fully engage and involved Londoners in the future health of their children. Results from the GWD A high proportion of our residents are aware of the childhood obesity epidemic. Haringey residents also told us that:

The top 3 things that made it hard for children to lead healthier lives were:

- Too many fast food outlets
- Too many cheap unhealthy food and drink options
- Too much advertising of unhealthy food and drink options

Haringey residents told us that in order for children to be better supported to lead healthier lives, there needed to be:

- Limits on the number of fast food outlets
- Support or families to cook healthier food
- Cheaper healthier food and drink options

Conclusions

Obesity and the rising trend of child obesity is a serious public health challenge. However tackling obesity is a complex and multifaceted problem and the evidence suggests that we need a multi-layered approach as there is no single silver bullet' which will reverse the rising trend of obesity. Instead we need many interventions, policies and actions from individuals and society across multiple sectors to improve the food environment. Haringey's approach to regulating the clustering of Hot Food Takeaway's, which combined with other interventions to improve the food environment will support reversing the rapid rise of obesity locally in Haringey.

Given the evidence linking the food environments to obesity we also welcome the re-inclusion of part one of DM47 DMMod 100- 104 back into Haringey Council's latest Development Management Plan.

- *Healthy Eating Zones*
- *The council will resist proposals for hot food takeaway shops located within 400 meters of the boundaries of a primary or secondary school*
- *The percentage of hot food takeaway shops will not exceed 5% of designated shopping frontage in the Metropolitan and District Town Centres and local centres*
- *Within neighbourhood parades, other non-designated frontages and elsewhere in the borough*

and reference to the amendment of the first sentence of paragraph 6.60

- *'Particularly around primary and secondary schools where they pose a significant health risk to children'.*

¹ Haringey Health and Wellbeing Strategy 2015-18

² **Children's Food Choices on the Streets around Schools in Haringey: A wall of crisps and other food choices.**

³ L K Fraser, K L Edwards, J Cade and G P Clarke. The Geography of Fast Food Outlets: A Review. *Int. J. Environ. Res. Public Health* 2010, 7, 2290-2308

⁴ T Burgoine, N G Forouhi, S J Griffin, N J Wareham, P Monsivais. Associations between exposure to takeaway food outlets, takeaway food consumption, and body weight in Cambridgeshire, UK: population based, cross sectional study. *BMJ* 2014;348:g1464

⁵ Burgoine, N G Forouhi, S J Griffin, N J Wareham, P Monsivais. Does neighbourhood fast-food outlet exposure amplify inequalities in diet and obesity? A cross-sectional study. *The American Journal of Clinical Nutrition*. 2016;103(6):1540-1547. doi:10.3945/ajcn.115.128132

⁶ Prentice, Andrew M., and Susan A. Jebb. "Fast foods, energy density and obesity: a possible mechanistic link." *Obesity reviews* 4.4 (2003): 187-194

⁷ Burgoine T, et al. Associations between exposure to takeaway food outlets, takeaway food consumption, and body weight in Cambridgeshire, UK: population based, cross sectional study. *BMJ* 2014;348:g1464

⁸ Urgently needed: a framework convention for obesity control. *The Lancet*. Published: 27 August 2011 DOI: [http://dx.doi.org/10.1016/S0140-6736\(11\)61356-1](http://dx.doi.org/10.1016/S0140-6736(11)61356-1)

⁹ NOO data factsheet. *Child Obesity and Socioeconomic Status*. September 2012

¹⁰ Royal Society of Public Health. *Health on the High Street*. 2015