

Health in Planning: The Role of Health in Local Development Plans in Wales



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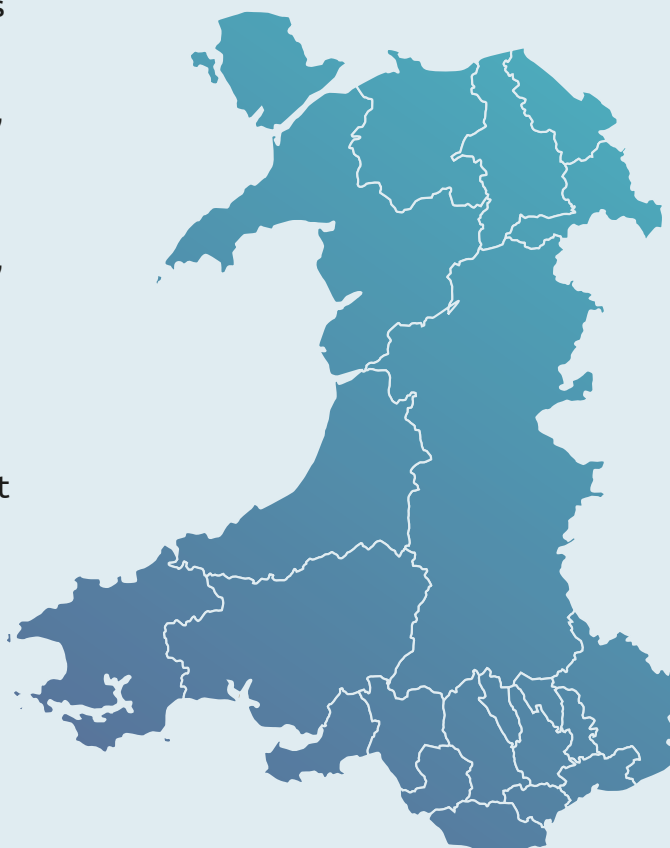
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About this document

This report presents a summary of the methods and key findings of the review of how health is included in Local Development Plans in Wales. The report is intended to inform and support the Wales Health Impact Assessment Support Unit.



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Executive Summary

The planning system in Wales operates at three levels: national, regional, and local. Local Development Plans (LDPs) guide land use and development at the local authority level. This report, commissioned by Public Health Wales, Wales Health Impact Assessment Support Unit (WHIASU), presents a summary review of how health is included in Local Development Plans (LDPs) across Wales. The primary aim of this report is to inform WHIASU's approach to supporting local governments in integrating health considerations into LDPs. The findings will also add value for other stakeholders working to improve health and wellbeing as it highlights opportunities for strengthening the inclusion of health in local plans.

The review of Local Development Plans across Wales revealed several opportunities to strengthen their role in promoting population health and reducing health inequities. Currently, most LDPs address health-related factors indirectly through planning policies such as housing, transportation, and environmental quality. Few plans explicitly define health or health inequalities, and none include specific health indicators or measures. While all LDPs incorporate elements that influence social determinants of health, such as access to services and quality of housing, these connections to health outcomes are often implicit rather than clearly articulated. Our analysis found that LDPs already contain many elements that can support population health and wellbeing. By making these health implications explicit, defining key health concepts clearly, and incorporating measurable health indicators, LDPs could more effectively advance their potential to improve health outcomes and reduce health inequities across Welsh communities.

Background

The planning system in Wales operates at three levels: national, regional, and local. At the local level, Local Development Plans (LDPs) are statutory documents that guide the development and use of land in local authority areas. The development plan provides a policy framework that:

- Identifies the scale of growth for residential, commercial, industrial and recreational purposes
- Sets out the spatial strategy and locations for future development, including housing and employment sites
- Identifies new infrastructure provision including roads and schools
- Identifies land for protection from development
- Advocates for good design and place making

The Well-being of Future Generations (Wales) Act 2015 significantly influences LDPs. This Act mandates public bodies to pursue sustainable development, aiming to enhance the economic, social, environmental, and cultural well-being of Wales. The Act sets out seven well-being goals which public bodies must work towards:

- A prosperous Wales
- A resilient Wales
- A healthier Wales
- A more equal Wales
- A Wales of cohesive communities
- A Wales of vibrant culture and thriving Welsh language
- A globally responsible Wales

The relationship between spatial planning and health and wellbeing are increasingly recognised. LDPs directly influence determinants of health and health equity such as housing and access to services. However, the role of LDPs in supporting health and well-being is inconsistent, presenting an opportunity for improvement. WHIASU is well-positioned to bridge this gap and advocate for stronger inclusion of health and well-being and health inequalities in LDPs.

The primary aim of this project is to inform WHIASU's approach to supporting local authorities to integrate health considerations when developing and reviewing LDPs. The project will also provide value to other key stakeholders working to improve health and well-being.

- Describe how health and related concepts are currently included, or not, within Local Development Plans (LDPs) across Wales.
- Identify pockets of good practice and gaps in the inclusion of health.
- Identify opportunities to support local governments/local planning authorities (LPAs) in incorporating health into LDPs

The project methodology is outlined in appendix one.

Findings

This section presents the summary findings of the review. The analysis examined how each LDP addresses health and related concepts through several key dimensions: explicit references to health and its definition, treatment of health equity and inequalities, consideration of social determinants of health, attention to different population groups, use of Health Impact Assessments, and incorporation of health-related indicators and measures. For each dimension, we identify current approaches, notable examples of good practice, and opportunities for strengthening health integration in future planning frameworks.

Health

The review revealed an evolving approach to health integration across LDPs. Six of the 25 LDPs now include dedicated health policies¹, representing a significant step toward formal recognition of health in spatial planning. These vary in their positioning and scope, from strategic policies to detailed policies. Where LDPs don't have specific health policies, the aim of improving health and reducing inequalities is often integrated within the broader strategic framework and other policies. No LDPs had any explicit indicators or measures of health or specific health focused actions. More recent LDPs (2018-2023) demonstrate increased integration of health considerations.

Though lacking in explicit definitions, most of the LDP's contained implicit references to health-related concepts. The inclusion of health as a core concept may fall outside the traditional scope of these plans, and some LDPs link to external policies and strategies to explain this omission. Caerphilly provides a detailed rationale for why health is not a central focus of its LDP, explaining how health considerations are addressed through linked plans. Ceredigion notably links its LDP to its broader Health, Social Care and Well-being Strategy 2008-2011, demonstrating how LDPs can align with a wider network of policies and strategies to address health comprehensively.

The examples of Caerphilly and Ceredigion demonstrate the importance of positioning a LDP within a broader framework and aligning with related plans and policies. Planning, though key, is only one aspect of improving health and well-being, other plans and strategies will support addressing health issues within each area.

1 LDPs with a policy on health –

- Wrexham – Strategic Policy SP13: Health and wellbeing
- Bridgend – Strategic Policy SP8: Health and wellbeing
- Cardiff – Strategic policy KP14: Healthy Living, and Detailed policy C6: Health
- Neath Port Talbot – Strategic Policy SP2: Health
- Newport - Strategic policy SP2: Health, General policy GP7: General development principles - Environmental protection and public health.
- Swansea – Strategic Policies SI 1: Health and well-being and RP 1: Safeguarding public health and natural resources

Six LDPs referenced the National Wellbeing Goals. For those that did not, this could predominately be explained by the timing of its publication relative to the implementation of the Well-being of Future Generations Act 2015. It is possible that these will be included in the replacement LDP for these LPAs. For instance, recent LDPs such as Bridgend (2021), Flintshire (2023), and Wrexham (2023) explicitly reference and align with the National Wellbeing Goals. This contrasts with earlier plans such as Blaenau Gwent (2012), Ceredigion (2011), and Caerphilly (2010), which predate and therefore do not incorporate these national frameworks.

Making health more explicit, particularly through clear definitions and measurable outcomes, would enhance the ability of LDPs to effectively promote health and wellbeing.

Health Equity

The analysis revealed varying approaches to addressing health equity across LDPs, with most (21 out of 25) lacking explicit definition of health equity or inequalities. Several authorities have developed approaches to incorporating health equity considerations.

The Cardiff definition of health inequality was succinct and could be a segue into ways that the LDP can be used to improve health outcomes given its reference to *“disadvantaged areas”*. The Cardiff definition is as follows *“Health inequality – the avoidable difference between the least and most advantaged populations - is thus evident in parts of the population. Opportunities for health are less in disadvantaged areas and health outcomes such as cardiovascular mortality are poorer.”*

Wrexham explicitly defines health inequalities as *“differences in health status or in the distribution of health determinants between different population groups. For example, differences in mobility between elderly people and younger populations or differences in mortality rates between people from different social classes. Health, in this context, includes mental health”*.

Other authorities demonstrate different approaches to incorporating equity considerations. Bridgend’s LDP, while not providing a formal definition, explicitly aims to *“contribute to a fairer and healthier society”* and that *“the Replacement LDP seeks to tackle inequalities between communities and support people to adopt healthy, culturally fulfilled lifestyles by improving access to services, cultural opportunities and recreation facilitates”*. Similarly, Swansea’s LDP establishes objectives for reducing health inequalities, though the mechanisms for achieving these could be more clearly articulated.

The review identified opportunities to strengthen health equity integration across all LDPs. While many plans implicitly address health inequities through policies targeting specific population groups or areas, there is scope to develop more explicit frameworks for considering health equity in planning decisions. This could include clearer definitions, specific equity-focused indicators, and more detailed guidance on how planning mechanisms can be used to reduce health inequities.

Social Determinants of Health

The review identified a consistent pattern in how LDPs address social determinants of health. While all LDPs incorporate determinants of health such as housing, transport, and environmental quality, the connection between these planning elements and health outcomes is rarely made explicit. Eight LDPs directly reference social determinants of health, yet these references typically lack clear definitions or explanatory context about how these determinants influence population health.

Cardiff for example discusses the following *“Cardiff will be made a healthier place to live by seeking to reduce health inequalities through encouraging healthy lifestyles, addressing the social determinants of health and providing accessible health care facilities. This will be achieved by supporting developments which provide for active travel, accessible and useable green spaces, including allotments”*.

There were opportunities to strengthen the treatment of social determinants across all LDPs. Future plans could better articulate the relationships between planning decisions and health outcomes by:

- Providing clear definitions of social determinants of health
- Explaining how specific planning policies influence these determinants
- Establishing more explicit connections between planning mechanisms and health impacts
- Developing indicators to monitor how planning decisions affect health determinants over time

Population Groups

The depth and scope of demographic analysis varies considerably across LDPs. While all plans reference certain population groups, particularly elderly residents and Gypsy/Traveller communities, the consideration of other demographic factors is inconsistent. Across all LDPs, there is limited consideration of gender demographics and other population characteristics that might influence health outcomes.

11 LDPs identified that some populations were vulnerable to disparate health outcomes and had potentially differing requirements to the general population. This acknowledgement of the differing needs of differing groups was linked to an awareness of the social determinants of health. Seven of these 11 LDPs mentioned the social determinants of health. The Vale of Glamorgan provides one of the more comprehensive socio-economic profiles, including with some information on health and lifespan inequalities, while Neath Port Talbot identified ways that the LDP could assist in supporting vulnerable communities. However, its populations were described purely geographically.

The needs discussed were limited – across the board there were very few references to gender, LGBTIQI, culturally and linguistically diverse or migrant communities. There was some discussion of the specific housing and accessibility needs of older people. All LDPs mentioned Gypsy and Traveller communities, but not in terms of their potential vulnerabilities or specific requirements, they were mentioned due to the legislated obligation of council to provide sites for Gypsy and Traveller accommodation.

All LDPs would benefit from a further outlining of current and projected population demographics. Some included reference to the shifting demographics of the area, but this could be strengthened by understanding the bilateral nature of this shift – that the community will be impacted by these changes, but the community and the LDPs can also have an impact on the nature of these changes.

Health Impact Assessment (HIA)

Seven LDPs incorporated Health Impact Assessments, indicating growing recognition of the importance of systematic health consideration in planning. Carmarthenshire's LDP notably includes an explanation of the HIA process. LDPs frequently refer to other impact assessments, and many undertake HIA as part of an Integrated Sustainability Assessment. This implies that the LPAs are familiar with the impact assessment process.

The Public Health (Wales) Act 2017 includes forthcoming legislation which will mandate public bodies to undertake HIAs on strategic decisions. This will apply to local planning authorities developing LDPs and taking other strategic decisions.

Indicators and Measures

The Welsh planning framework establishes three distinct categories of indicators for LDPs. Contextual indicators, required by the Welsh Government, provide baseline data about the conditions in which the LDP operates. Core indicators, mandated by LDP Regulation 37, measure fundamental aspects of plan implementation, with each LDP required to include at least two such indicators. Local indicators are developed specifically for each planning area to reflect particular local priorities and contexts.

Our analysis reveals a significant gap in health-specific measurement across all LDPs. While plans consistently include measures related to factors that influence health outcomes - such as housing supply, employment rates, and access to services - these are not explicitly framed or tracked in terms of their health implications. Even in LDPs that demonstrate integration of health considerations, there is an absence of dedicated health metrics or indicators to monitor health-related impacts of planning decisions.

This finding presents a clear opportunity to strengthen the monitoring framework for health in planning. The core indicator requirements, in particular, could be enhanced to incorporate specific health-related metrics or explicit connections between existing indicators and health outcomes. Such integration would enable local authorities to better track how their planning decisions influence population health over time and provide evidence to inform future planning approaches.

Conclusions and recommendations

The national policy and legislative framework establish clear statutory requirements for incorporating health and wellbeing as key goals into the Local Development Plans (LDPs). The Planning (Wales) Act 2015 explicitly links the delivery of sustainable development goals through its alignment with The Well-being of Future Generations (Wales) Act 2015 (WFG Act 2015). The WFG Act 2015 sets out seven well-being goals and five ways of working, requiring Local Planning Authorities (LPAs) to establish well-being objectives and integrate these five ways of working throughout the LDP preparation process. Planning Policy Wales (Edition 12) has a clear focus on creating healthy spaces through planning and placemaking. LDPs should make reference to and include links to local Public Service Board's health needs assessments and well-being plans, as these provide important information about local population health priorities and the public bodies' approach to addressing the needs.

Our review reveals a significant gap between these policy requirements and their practical implementation in LDPs. No LPAs have thoroughly incorporated health and well-being goals and principles into their plans. This implementation gap appears to stem partly from the Development Plans Manual, where there is a notable misalignment between the human-centred well-being goals and the delivery mechanisms which focuses on economic growth. While the national policy frameworks objectives call for sustainable development to achieve economic, social, environmental and culture well-being, the operational guidance remains largely oriented toward conventional planning metrics.

Given the identified gap between policy requirements and practical implementation in LDPs, Public Health Wales and the Wales Health Impact Assessment Support Unit (WHIASU) are uniquely positioned to strengthen the integration of health and wellbeing considerations in local planning. This needs to be done alongside other key stakeholders and partners working in improving health and well-being. Building on its expertise in health impact assessment and established relationships with both health and planning sectors, WHIASU can enhance the work around health and LDPs by working in partnership with others.

Listed below are some suggested actions which would support the further inclusion of health and well-being as a key element of LDPs and planning policy. These recommendations should be considered through Public Health Wales working in partnership with key stakeholders.

1. Clear national-level policy guidance and frameworks

- Promote a strengthened focus on health, wellbeing, and equity in the next iteration of the Development Plans Manual
- Advocate for Social Determinants of Health (SDH) and health equity definitions and indicators to be explicit in LDP Regulation
- Promote a clearer focus on health and well-being in Wales's updated national planning policy framework, linking evidence-based planning principles to health, wellbeing, and equity outcomes

2. Supporting LPAs to strengthen the integration of health in LDPs

- Design templates for LPAs to include dedicated health policies in LDPs, and for supplementary planning guidance (SPGs) where they are specifically related to health policies
- Promote and provide guidance for LPAs on the development of strategies to integrate health in spatial planning e.g., active transportation, green spaces, healthy housing
- Encourage further Health Impact Assessments (HIAs) and their integration in LDP development and implementation, specifically in regard to stakeholder engagement and addressing inequalities
- Support LPAs to identify and address the needs of different population groups, particularly marginalised and vulnerable communities.

3. Build capacity and resources

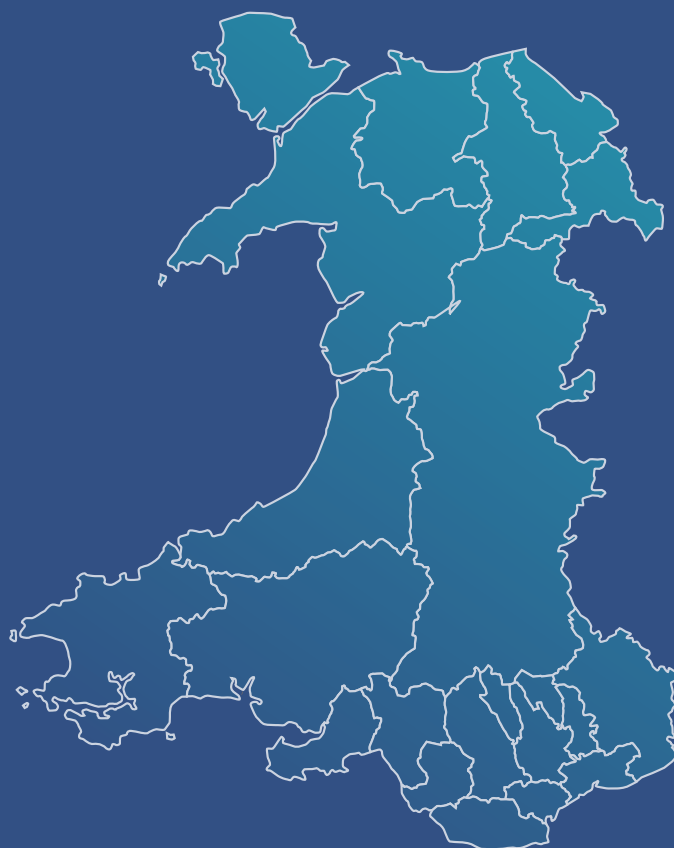
- Implement targeted capacity-building and education for LPA planners and local Elected Members
- Create and maintain a repository of good practice examples
- Provide practical guidance on health and health equity indicators where appropriate

4. Monitor the integration of health in LDPs

- Establish a systematic monitoring framework
- Track the integration and implementation of health considerations across LDPs
- Monitor and track the /impact of health integration approaches
- Share learning and recommendations for continuous improvement

Through these coordinated actions, WHIASU and PHW, working with partners, can help transform how health and wellbeing are integrated into spatial planning in Wales. While the Well-being of Future Generations (Wales) Act 2015 (WFG Act 2015) and national planning policy provide a strong legislative foundation for health-integrated planning, translating these aspirations into local practice requires dedicated support and guidance. Success in this endeavour would not only strengthen the effectiveness of LDPs in promoting population health and well-being but also advance Wales' position as a global leader in sustainable development planning that genuinely delivers on all aspects of well-being - economic, social, environmental, and cultural.

Appendix 1: Methods



Methods

To investigate the incorporation of health into Local Development Plans (LDPs) across Wales, the research team designed an extraction and analysis process in collaboration with Public Health Wales. An extraction spreadsheet template was developed to standardise data collection. This template detailed specific categories of health-related information to be identified within each LDP.

For each local government area, the current LDP was located, downloaded, and initially reviewed to gain a general understanding of that specific LDP and its priorities. A targeted keyword search was then conducted for each category defined in the extraction template. Relevant quotes and critical information were systematically extracted and recorded in the spreadsheet.

To ensure a consistent understanding of the extraction requirements among all members of the research team, we conducted a test run using the LDPs from two Local Planning Authorities (LPAs)—Monmouthshire and Wrexham. Each team member independently extracted data onto the spreadsheet, and the results were compared for consistency before proceeding with the remainder of the LDPs.

The extraction template was cross-referenced using the AI platform SciSpace. This validation process confirmed the thoroughness of the manual analysis, which provided more detailed insights than the automated review.

The data was then organised into a report-style document. Context was sought from Public Health Wales as required to ensure that the information provided in the report was current and concise. An in-depth analysis of the report was then undertaken which involved identifying trends, strengths, and weaknesses across the LDPs.

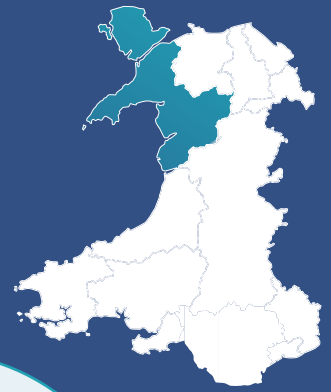
The report has assessed the status of LDPs in Wales up until October 2024.

Appendix 2: LDP review summary



Anglesey and Gwynedd Joint LDP

[Link to LDP >>>](#)



Background information

This LDP is collaboration between Anglesey and Gwynedd Local Council.

This LDP was published in 2017 and is due for renewal in 2026. The replacement LDP is currently in progress, which will cover the period from 2024 – 2039.



Anglesey has a population size of **68,900** (2021 Census). Gwynedd has population size of **117,400** (2021 Census). This is a combined population size of **186,300**.

Population Characteristics and Comments

The LDP Mentions some populations but in a purely descriptive manner. They mentioned people living with disability and their unique accessibility needs in relation to transport (pg. 50). Also mention accessibility needs of people with prams and young children. It mentions *“accommodation, homes for the elderly, Gypsy & Travellers, supported accommodation, nursing, residential and extra care homes, needs of people with disabilities”* (pg. 150).

Appendix 3 provides a *“statistical profile”* of the area. This includes a breakdown of the population by age, gender, religion, and employment status and information.

Anglesey and Gwynedd Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health. Health is alluded to throughout, but what it means to be healthy or healthier is undefined.

Consideration is given to the potential adverse health impacts of development. The *“Anglesey and Gwynedd Partnership aims to put plans and projects in place that will promote prosperous, healthy and safe communities”* (pg. 25). *“All proposals must help create healthy and active environments, and considers the health and well-being of future users”* (pg. 63).

There is no separate section on health. There is a section called *“healthy, distinctive and active communities”* however this relates to Welsh language, infrastructure, IT and sustainable transport with no explicit links to health.

There are no explicit indicators or measurements of health in the LDP.

Anglesey and Gwynedd LDP understanding of health equity / equality

There is no definition of health equity or equality. Equality is mentioned in terms of providing Gypsies/Travellers and settled Community members equal access to housing.

Anglesey and Gwynedd LDP discussion of social determinants of health

The LDP discusses social determinants of health without naming them as such. Various determinants are mentioned throughout but not named as social determinants of health and not linked to health. The LDP recognises that planning and the way land is used contributes to economic development, to maintaining Wales' natural assets and to health, well-being and the quality of life of individuals and communities (section 2.2 pg. 9). There is a focus on the Welsh language, and the impact this has on sense of community and the local economy.

All proposals must include *"A comprehensive assessment is provided of the proposal's environmental (landscape, built, historic and natural), social (including health and amenity), linguistic and cultural, transport and economic impacts (positive, negative and cumulative) during the construction, operation and decommissioning and restoration (if relevant) phases, as well as measures to be achieved where appropriate to avoid, reduce, alleviate and/or off-set the harm done"* (pg. 81).

Strategic Health – Health impact assessment

No Health Impact Assessment was carried out for this LDP.

The LDP does however mention Welsh Language Impact Assessment, Equalities Impact Assessment, highway impact assessment, Landscape and Visual Impact Assessment, Retail impact assessment, Heritage Impact Assessment. This indicates the LPA's exposure to the Impact Assessment process and provides an opportunity for health to be integrated into future LDP's.

Reference to the National Wellbeing Goals

The Anglesey and Gwynedd LDP does not reference the National Wellbeing Goals. This could be due to the timing of the document (published 2017. Wellbeing Goals established 2015).

Opportunities for Health within the Anglesey and Gwynedd LDP

An explicit definition of what health is / isn't and identifying some key health related metrics or indicators. An explicit definition of health equity and discussion of the social determinants of health and links between health and certain social determinants (housing supply, employment).

A strength of this LDP is the detailed breakdown of the local population. There is however the opportunity to strengthen this further by outlining the specific needs of certain subsets of the population.



Blaenau Gwent has a population size of **66,900** (2021 Census).

Background information

This LDP was published in 2012 and due for renewal in 2021. The replacement LDP is in progress and is for the period from 2018-2033.

Population Characteristics and Comments

Population characteristics are discussed descriptively. There are no gendered demographics. There is no discussion of vulnerable or marginalised communities and their specific needs.

The housing needs of the Gypsy and traveller population are mentioned. Disability is mentioned in terms of access to housing and town centres. Migration is mentioned only in terms of people leaving the area. The LDP makes one reference to the needs of various communities with *"In determining applications the Council will be able to ensure that developments take into account the needs of people with special access requirements such as children, young people, the elderly and people with restricted mobility"* (pg. 51).

The LDP identifies that Blaenau Gwent has some of the highest levels of ill health and long-term sickness in Wales (pg. 36).

Blaenau Gwent Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health.

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

There are a number of references to the large levels of ill health within the population. There are a number of references to the way that greenspace can be utilised to improve health and social wellbeing.

Blaenau Gwent LDP understanding of health equity / equality

The LDP provides no definition of health equity or inequalities, but there are a few mentions. *"The Wales Spatial Plan (July 2008) identifies Blaenau Gwent within South East Wales - Capital Region, which will function as a networked city region that reduces inequalities"* (pg. 2). *"In Wales, sustainable development means enhancing the economic, social and environmental wellbeing of people and communities, achieving a better quality of life for our own and future generations in ways which promote social justice and equality of opportunity"* (pg. 3), *"strengthening provision for transnational cooperation, social innovation, gender equality and equal opportunities"*, (pg. 6). A key objective of the Blaenau Gwent Local Housing strategy (a linked strategy) is listed as tackling inequality (pg. 11).

Blaenau Gwent LDP discussion of social determinants of health

Some social determinants are mentioned, without labelling them as such. There are attempts to link these determinants to health outcomes. There are multiple references to air pollution, ground contamination and the impact of these on public health. Local leisure and community facilities are seen as vital to increased health.

“Through collaborative working, by 2021, Blaenau Gwent will become a network of sustainable, vibrant valley communities, where people have the skills, knowledge and opportunities to achieve a better quality of life and residents will live in safe, healthy and thriving communities, with access to a range of good quality affordable homes and thriving town centres. Its unique environment, cultural and historic identity will be protected and enhanced to create a place where people want to live, work and visit.” Vision and Objectives (pg. 19).

Strategic Health – Health impact assessment

A Health Impact Assessment has not been carried out for the purpose of this document.

The LDP does mention Health and Social Impact Assessment, and a retail impact assessment, indicating the LPA's previous exposure to the Impact Assessment process.

Reference to the National Wellbeing Goals

The Blaenau Gwent LDP does not reference the National Wellbeing Goals. This could be due to the timing of the document (published 2012. Wellbeing Goals established 2015).

Opportunities for Health within the Blaenau Gwent LDP

This LDP contains obvious attempt to integrate health into the planning process. Explicitly labelling the SDH's, discussion of the specific needs of various population groups and an explicit definition of health and equity would tie together the work that has already been done to consider health throughout the document.

Bridgend

[Link to LDP >>>](#)



Background information

This LDP is the “replacement LDP”. Published in 2024, it is due for renewal in 2033.



Bridgend has a population size of **145,500** (2021 Census).

Population Characteristics and Comments

The LDP mentions the significant elderly population and the importance of balancing this out with attracting and maintaining a variety of ages and demographics in the area (pg. 15).

The LDP mentions the Gypsy / Traveller community and their specific land use needs and the relevant Acts surrounding this. There are no gendered demographics or further mention of vulnerable or marginalised populations.

Bridgend Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health. Consideration is given to the multifaceted nature of health, and the LDP Views “people’s health and well-being as essential” (pg. 59).

“This LDP is based on a balanced and sustainable level of economic growth that will facilitate the continued transformation of the County Borough into a network of safe, healthy and inclusive communities that connect more widely with the Cardiff Capital Region and Swansea Bay Region” (pg. 46). “Since the turn of the millennium, Bridgend and the wider County Borough has been on a journey to expand access to key services, enhance physical environmental quality and improve quality of life for residents, workers and visitors” (pg. 32).

Health is considered throughout the entire document, which also contains a specific section on health – SP8: Health and wellbeing “Health inequalities will be reduced and healthy lifestyles and choices encouraged by ensuring that development proposals: 1) Reflect the spatial distribution of need for healthcare provision, ensuring such proposals are accessible by non-car modes and have the potential to be shared by different service providers; 2) Create sustainable places that accord with the principles of placemaking (refer to SP3) to support climate change mitigation and adaptation; 3) Are supported by appropriate social infrastructure and community facilities (refer to SP9 & SP10); 4) Are supported by a Health Impact Assessment where appropriate (major developments must be supported by a HIA, which demonstrates how the proposal will result in beneficial effects (and avoid adverse impacts) on the key determinants of health in the County Borough); 5) Promote a healthy lifestyle through the utilisation of the physical and built environment, in particular maintaining and/or enhancing the extent, quality and connectivity of the Active Travel and Green Infrastructure Networks; and 6) Protect (and where possible enhance) safety, security and resilience and do not result in significant risk to life, human health or well-being, particularly in respect of air, noise, light, water or land pollution” (pg. 119).

There are no explicit indicators or measurements of health in the LDP.

Bridgend LDP understanding of health equity / equality

There is no explicit definition of health equity or equality, however the LDP discusses *"contributing to a fairer and healthier society"* Mentioned under Prosperity for all. (pg. 20) It then mentions *"the Replacement LDP seeks to tackle inequalities between communities and support people to adopt healthy, culturally fulfilled lifestyles by improving access to services, cultural opportunities and recreation facilitates"* (pg. 97).

Section SP8 p119 explains how development will be used to reduce health inequities. (Quoted above)

Bridgend LDP discussion of social determinants of health

The Bridgend LDP mentions the social determinants of health but only calls them this in SP8: by saying- Development proposals must be *"supported by a Health Impact Assessment where appropriate (major developments must be supported by a HIA, which demonstrates how the proposal will result in beneficial effects (and avoid adverse impacts) on the key determinants of health in the County Borough)"* (pg. 119). It does not outline what is meant by a determinant of health.

It also discusses SDH in the following ways, without explicitly naming them as such or describing the way they link to health - *"There is a need to maintain a healthy balance between younger people, those of working age and those who are retired across each settlement. This will help catalyse sustainable communities, ensure there are enough current and future economically active residents to support local employers and help maintain infrastructure, services and facilities"* (pg. 15).

"The NDF is set in the context of a vision that will help deliver sustainable places across Wales by 2040, by supporting placemaking and ensuring our choices direct development to the right places, making the best use of resources, creating and sustaining accessible healthy communities, protecting our environment and supporting prosperity for all" (pg. 19).

"Well connected developments will assist in promoting the improvement of health and well-being by encouraging people to adopt healthier and active lifestyles, whilst also contributing to the creation of a successful place" (pg. 22).

Strategic Health – Health impact assessment

A Health Impact Assessment was carried out to be integrated into the Bridgend LDP. This was a separate document. The LDP also discussed the requirement of future development proposals to undertake a HIA.

The LDP also mentions Equality Impact Assessment, Landscape Visual Impact Assessment, Tourism needs and development Impact Assessment, Project level ecological Impact Assessment, Arboriculture Impact Assessment, heritage impact assessment, Environmental Impact Assessment (pg. 212).

Reference to the National Wellbeing Goals

The Bridgend LDP made multiple references to the National Wellbeing Goals.

Opportunities for Health within the Bridgend LDP

This LDP has made a conscious effort to integrate health into most areas in a definitive and easy to understand way. Like other LDPS- it would benefit from explicit definitions of health and health equity and connections being made to the needs of vulnerable or marginalised populations.



Background information

This LDP was published in 2010 it is due for renewal in 2021. The replacement LDP is currently underway and will cover the period until 2035.



Caerphilly has a population size of **175,900** (2021 Census).

Population Characteristics and Comments

The LDP describes elements of the population with no explanation of what this means for the plan, and no links to health outcomes.

The LDP identifies Gypsies and travellers, states that there has been an increase in elderly population, and a decrease in the number of children born per family. It outlines that 11 of the 110 statistical areas in the LDP are in the top 10% of deprived areas in Wales.

It outlines that 72.3% of working age residents are economically active (lower than national average), 39.8% with no qualifications - far higher than national average. There are no gendered demographics or description of specific needs of the Caerphilly population.

Caerphilly Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health.

The LDP has a description of how health works in the context of this LDP and the link of the LDP to other strategies that have a stronger focus on health and wellbeing- *"The LDP will facilitate the delivery of the land use elements of the Health, Social Care and Well Being Strategy, Living Environment Strategy and The Smart Alternative (the Regeneration Strategy) in particular"* (pg. 16). Health is discussed as an outcome to more greenspace and accessible cycle ways.

There are no explicit indicators or measurements of health in the LDP.

Caerphilly LDP understanding of health equity / equality

The LDP does not contain a definition of health equity or equality.

Caerphilly LDP discussion of social determinants of health

The Caerphilly LDP does not explicitly reference the social determinants of health. It discusses the inclusion of formal and informal open spaces within new development as being important as they *"provide for the recreational needs of local residents and there are significant health benefits by increasing exercise opportunities that enable greater physical activity; it enhances the quality of life of residents and contributes to their sense of well-being; it can positively contribute to the built environment; and it can contribute to biodiversity, the conservation of nature and landscape, air quality and the protection of groundwater"* (pg. 34).

It outlines that *"to contribute to improving public health, by promoting land use developments that contribute to healthy lifestyles and wellbeing"* (pg. 20). A Health and Social Care Resource Centre is proposed for Rhymney to serve the north of the Borough (pg. 63).

Strategic Health – Health impact assessment

There has been no Health Impact Assessment carried out for the purpose of this LDP. The only type of impact assessment mentioned in this document is a Traffic Impact Assessment.

Reference to the National Wellbeing Goals

The Caerphilly LDP does not reference the National Wellbeing Goals. This is likely due to the timing of the document (published 2010. Wellbeing Goals established 2015).

Opportunities for Health within the Caerphilly LDP

A strength of this LDP is the explanation given as to why health is not a key focus of this LDP and how health is considered and linked through other plans (see quote under understanding of health). The LDP effectively articulates its approach to health considerations by explaining how health-related matters are addressed through complementary plans and policies. Extending on this will better place the role of LDP among other plans and allow end users to find the right strategy for health in this council area.

This LDP would also benefit from clear definitions of Health and the Social determinants of Health, and explicit references to the role of this LDP in addressing the health and deprivation of the LPA. There is also room for further exploration of specific needs of sections of the population and links to the role of the LDP in addressing them.



Background information

This LDP was published in 2016 and is due for renewal in 2026. The replacement LDP is currently underway and covers the period 2021 - 2036.

At the time of publication of this LDP, Cardiff was considered a WHO Healthy City. It no longer holds this status but is referenced as such throughout this document.



Cardiff has a population size of **362,300** (2021 Census).

Population Characteristics and Comments

The LDP outlines a key priority of the plan as being to *“improve effectiveness of our service delivery to vulnerable adults and children and young people”*. There is no further description of what constitutes a vulnerable person or the specific needs of certain groups. It mentions Gypsies, and descriptively mentions the elderly, but there is no further or statistical break down of the population, and no reference to gendered demographics.

They mention *“To provide a range and choice of new homes of different tenure, type and location that meets specific needs such as the provision of affordable housing, family accommodation, housing for the elderly, the disabled and students and pitches for the gypsy and traveller community”* (pg. 29) but no further information on the needs of these populations.

Cardiff Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health.

This Policy aims to improve the health of Cardiff's population by seeking to secure new health facilities in areas most at need, requiring that the built environment fosters healthy lifestyles, and ensuring that health is a key consideration in new developments (pg. 199). This policy reflects the direction that 'health considerations can be material considerations in determining planning applications' and accepts that the effect of development on people's health is a key element of sustainable development, and its consideration will raise any significant issues which need to be taken into account (pg. 105).

There is a separate section on health: C6 Health (under the communities subheading).

There are no explicit indicators or measurements of health in the LDP.

Cardiff LDP understanding of health equity / equality

The Cardiff LDP provides a definition of health inequalities - *“Health inequality – the avoidable difference between the least and most advantaged populations - is thus evident in parts of the population. Opportunities for health are less in disadvantaged areas and health outcomes such as cardiovascular mortality are poorer.”*

The difference in life expectancy between some wards in Cardiff is up to 12 years (pg. 199).

Cardiff LDP discussion of social determinants of health

The Cardiff LDP does not specifically call them the social determinants of health, but they do make mentions and link these back to health, as follows - Cardiff will be made a healthier place to live by seeking to reduce health inequalities through encouraging healthy lifestyles, addressing the social determinants of health and providing accessible health care facilities. This will be achieved by supporting developments which provide for active travel, accessible and useable green spaces, including allotments (pg. 105). Poor air quality can affect people's health, quality of life and amenity (pg. 111). Trees, woodlands and hedgerows offer multiple benefits, including visual amenity, defining a sense of place, providing places for relaxation and recreation, habitats for wildlife, improved health and wellbeing and mitigating the effects of climate change (pg. 146).

Priority in new developments will be given to reducing health inequalities and encouraging healthy lifestyles.

Strategic Health – Health impact assessment

A Health Impact Assessment was carried out to be integrated into the Cardiff LDP. This was a separate document. An Equality impact assessment was also undertaken and is a supplementary document. The LDP also mentions Environmental impact assessment

Reference to the National Wellbeing Goals

The Cardiff LDP does not reference the National Wellbeing Goals. This is likely due to the timing of the document. (Published 2016. Wellbeing Goals created 2015)

Opportunities for Health within the Cardiff LDP

An explicit definition of what health is / isn't and identifying some key health related metrics or indicators would strengthen the documents existing links to health.

The LDP provides a firm understanding of health equity, but further description is required of the specific needs of the population and how the LDP can be utilised to reduced inequalities, and the life expectancy gap.

Carmarthenshire

[Link to LDP >>>](#)



Background information

The replacement LDP for 2018-2033 is currently under examination by Welsh Government and due to be adopted in summer 2025.

Carmarthenshire has a population size of **187,900** (2021 Census).

Population Characteristics and Comments

The LDP discusses an ageing population and the out-migration of the younger population. It provides limited statistics such as - 60% of adults reported as being overweight or obese. Over 1 in 3 households are living in poverty.

There is no further demographic breakdown provided, no gendered demographics and no further mention of marginalised populations and their specific needs. The LDP mentions the use of HIA to determine health impacts of proposals on vulnerable populations (quote below under strategic health).

Carmarthenshire Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health.

A goal of the LDP is that Carmarthenshire 2033 will be a place to start, live and age well within a healthy, safe and prosperous environment (pg. 36).

"Although environmental considerations are central to the principle of sustainable development, it is also about ensuring a strong, healthy and just society, and meeting the needs of all people now and in the future. This includes promoting personal well-being, social cohesion and creating equal opportunities" (pg. 23).

There is no separate section on health, however there is a *"healthy communities"* section under SP8: Infrastructure

There are no explicit indicators or measurements of health in the LDP.

Carmarthenshire LDP understanding of health equity / equality

The LDP does not provide a definition of health equity or equality. But the following quote indicates their understanding - *"There are significant variations across the County in terms of social indicators of deprivation, including access to health, education and community services and facilities, and housing quality. Some communities lack a social hub and/or key facilities to act as a community focus. Others have a range of services and facilities that contribute to vibrant community life. A more equitable distribution is needed. This to some extent reflects the rural character of the County"* (pg. 27).

Carmarthenshire LDP discussion of social determinants of health

See previous quote re: Health equity which addresses the social determinants. *“Community life, education and public services indicate wellbeing in rural areas. Beauty, peace and quiet, open green spaces and fresh air are also contributors to happiness in rural areas. Air Quality Management”* (pg. 34). Proposals for development which provide for active travel, accessible useable green spaces and infrastructure, and which seek to reduce health inequalities through encouraging healthy lifestyles, addressing the social determinants of health and providing accessible health care facilities will be supported (pg. 141).

Strategic Health – Health impact assessment

A Health Impact Assessment was carried out to be integrated into the Carmarthenshire LDP. This was a separate document.

The LDP discusses the role of HIA's in addressing Health Equity. 'HIAs assess the impact of any change or amendment to a policy, service, plan, procedure or programme on the health of the population and on the distribution of those effects within the population, particularly within vulnerable groups. Undertaking a HIA produces information on how negative impacts on health can be reduced and positive health gains can be encouraged. Such evidence on health impacts can help the planning system develop stronger and more coherent approaches towards maximising health and well-being.'

This LDP contains strong references to the HIA Process- *“Health Impact Assessment (HIA) can make a valuable contribution when proposing or making decisions on new development. Evidence on health impacts can help the planning system develop stronger and more coherent approaches towards maximising health and well-being”* (pg. 141). It then goes on to outline the key steps of an HIA.

Reference to the National Wellbeing Goals

The Carmarthenshire LDP made multiple references to the National Wellbeing Goals.

Opportunities for Health within the Carmarthenshire LDP

An explicit definition of health equity and what health is / isn't. The LDP refers to health across the life span (a place to start, live and age well), and would benefit from further exploration of how good health can be attained during various life stages. Health specific indicators or measures would also be beneficial.



Background information

This LDP was published in 2011 and due for renewal in 2022. The replacement LDP is in progress and will cover the period from 2018 – 2033.



Ceredigion has a population size of **71,500** (2021 Census).

Population Characteristics and Comments

The LDP discusses the ageing population and some of their specific needs. *“Ground floor units, for example, may lend themselves as being suitable/attractive to people with disabilities or to the elderly”* It discusses the needs of the Gypsy Population. Other than this there is no major demographic breakdown provided, no gendered demographics and no further mention of marginalised populations and their specific needs.

Ceredigion Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health. It outlines the Ceredigion health strategy - Bywyd Da - and makes explicit links between this strategy and the LDP. It states that *“the objective of sustainable development is to improve the health and wellbeing of its communities”* (pg. 37).

There are no explicit indicators or measurements of health in the LDP.

There is no separate section on health.

Ceredigion LDP understanding of health equity / equality

The LDP does not provide a definition of health equity or inequalities. The only time equality is mentioned is in terms of access and connectivity of the county.

Ceredigion LDP discussion of social determinants of health

This LDP does not specifically reference the social determinants of health. It does however discuss *“The rural nature of the County has a significant effect on the provision and delivery of health, social care and well-being, as the cost, both in time and finances, of providing support/ services in rural areas, is much greater and is often dependent on private transport. There are also issues of under-subscription within many of Ceredigion’s schools (Primary and some Secondary), with some rural schools already closed. A review of Ceredigion’s current education system (2008-09) will result in land use implications, such as new school sites, extensions or closures. The plan also discusses infrastructure and equality of access, community and connectivity leading to improved health and wellbeing.”*

Strategic Health – Health impact assessment

No Health Impact Assessment was carried out for the purpose of this plan. It does however reference other types of impact assessments- Community Impact Assessments, Environmental Impact Assessment, Tourism needs and development Impact Assessment, Retail Impact Assessment, Community and Linguistic Impact Assessment, Landscape and Visual Impact Assessment. This indicates the LPA's previous exposure to the Impact Assessment process.

Reference to the National Wellbeing Goals

The Ceredigion LDP does not reference the National Wellbeing Goals. This is likely due to the timing of the document. (Published 2011. Wellbeing Goals created 2015)

Opportunities for Health within the Ceredigion LDP

There is an opportunity for explicit definitions of health and health equity / equality. An explicit definition of the social determinants of health, and the identification of specific needs of the population alongside health-related metrics. The LDP discusses the delivery of health care services in the area, and there is an opportunity for further exploration of the way that the LDP can positively or negatively impact service delivery, and the health outcomes of this.

A strength of this LDP was the way that it links the LDP to the Ceredigion Health Strategy.



Background information

This LDP was published in 2013. It was due for renewal in 2022 and the replacement LDP is currently in progress.



Conwy has a population of **114,800** (2021 Census)

Population Characteristics and Comments

The synopsis of the LDP discusses some population focus areas and projections, and some of the effects that this may have on the local community. These are –

- The number of people aged 65+ is increasing significantly resulting in increased pressure on social care, health facilities and services at the detriment to economic performance;
- The number of children is projected to decrease significantly at the detriment to future economic performance, school pupil levels and community identity;
- The number of people living together in households is projected to decrease resulting in a requirement for new housing to support the existing population and a decline in family sized homes;
- The number of people in-migrating into the Plan Area far exceeds those out-migrating resulting in an increased need for more housing and employment opportunities and;
- The number of people residing in the Plan Area who out-commute to work in locations outside of the Plan Area is unsustainable resulting in a need to increase local employment opportunities.

While it outlines the effect a change in demographics may have on the community, it does not outline the specific needs of these groups, or ways that the LDP can mitigate the effects of demographic shifts. Other than this there is no major demographic or statistical breakdown provided, and no gendered demographics.

Conwy Local Development Plan understanding of and links to health

There is no explicit definition of health. Health is mentioned in terms of infrastructure e.g. facilities, and workers. Improvement in health status is mentioned as a by-product of improved sustainability, alluded to in terms of a healthy more active lifestyle but there is no description of what this means.

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Conwy LDP understanding of health equity / equality

There is no explicit definition of health equity or equality. Only time equality is mentioned is here on page 231 - *"Improving accessibility and reducing car dependence helps to improve equality, reduce congestion and responds to the challenges of climate change and environmental sustainability."*

Conwy LDP discussion of social determinants of health

The Conwy LDP does not specifically mention the social determinants of health. It does however say *"People in Conwy will feel safer and healthier, resulting from accessible, higher quality, energy efficient and well-designed developments that protect and enhance the natural and built environment. Leisure and recreation routes are also an important resource, particularly to improve access to the surrounding countryside as part of a healthy lifestyle"* (pg. 235).

Strategic Health – Health impact assessment

No Health Impact Assessment was undertaken for the creation of this document. The LDP mentions Landscape and Visual Impact Assessment, Environmental Impact Assessment, Welsh Language Impact Assessment, Community and Linguistics Impact Assessment. This indicates the LPA's previous exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Conwy LDP does not reference the National Wellbeing Goals. This is likely due to the timing of the document. (Published 2012. Wellbeing Goals created 2015).

Opportunities for Health within the Conwy LDP

This LDP would benefit from explicit definitions of health, health equity / equality and the social determinants of health. An effort has been made to understand the shifting demographics of the area, but this could be strengthened by understanding the bilateral nature of this shift – that the community will be impacted by these changes, but the community and the LDP can also have an impact on the nature of these changes. Further understanding of the areas projected demographics could increase the effectiveness of the LDP.

Denbighshire

[Link to LDP >>>](#)



Background information

This LDP was published in 2013 and is due for renewal in 2021. The replacement LDP is in progress and will cover the period from 2018 – 2033.



Denbighshire has a population size of **95,800** (2021 Census).

Population Characteristics and Comments

When the LDP describes the “*Big Plan*” for Community strategy, health, social care and wellbeing strategy, they list these populations as focus groups – older people, children and young people’s skills, vulnerable families. However, this is not specifically in relation to this LDP but referenced in relation to another strategy.

There is no reference to the way this LDP is influenced by or can influence various subsets of the population. There is no further statistical or demographic breakdown, and no gendered demographics.

Denbighshire Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health.

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Denbighshire LDP understanding of health equity / equality

No definition of health equity or equality. No mention of equity or equality at all.

Denbighshire LDP discussion of social determinants of health

Without using the phrase social determinants of health, Health is considered under this lens, and the various ways that LDP projects may improve or impact on health are discussed.

“Building sustainable communities is concerned with the provision of housing and employment opportunities along with regeneration, tackling deprivation and adapting to climate change. Housing is one of the key factors that influence people’s health and well-being. Providing opportunities for the right scale and mix of housing to meet the needs of a growing population including the provision of safe and affordable housing are key considerations for the Local Development Plan” (pg. 25). “National guidance recognises the linkages between opportunities for exercise and people’s general health and wellbeing” (pg. 39). “Road traffic significantly contributes to carbon dioxide (CO₂) emissions and air pollutants that have a negative impact on health and well-being of local communities” (pg. 80).

Strategic Health – Health impact assessment

No Health Impact assessment was undertaken for the purpose of this LDP. It does however mention Community and Linguistic Impact Assessment. This indicates that the LPA has previous exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Denbighshire LDP does not reference the National Wellbeing Goals. This is likely due to the timing of the document. (Published 2013. Wellbeing Goals created 2015).

Opportunities for Health within the Denbighshire LDP

The Denbighshire LDP mentions stakeholders in reference to development proposals going forward, but not in preparation of the LDP. They list the key issues facing the county, so the assumption can be made that there has been some form of public consultation however this is not explicitly outlined – so there is an opportunity for this to be mentioned. An opportunity for definitions of health and health equity. Discussion on the way that the LDP can influence health outcomes.



Background information

This LDP was published in 2023 and is due for renewal in 2030.



Flintshire has a population size of **155,500** (2021 Census).

Population Characteristics and Comments

The LDP makes a concerted attempt to look deeper into the requirements of certain vulnerable groups.

“Improve housing-related services and support, particularly for vulnerable people and people from minority groups” (pg. 87). “Ensure communities have access to a mix of services and facilities, such as education and health, to allow community life to flourish, and meet the needs of particular groups such as the elderly” (LDP Objective 1). Create places that are safe, accessible and encourage and support good health, well-being and equality (LDP Objective 7). “Annex accommodation can play a useful role as part of a flexible housing stock, by enabling elderly relatives or older children to remain living at the family home, whilst enjoying a degree of independence” (pg. 157).

However, it does not provide a breakdown of the demographics of the area and specific and measurable objectives for the LDP to improve health outcomes.

Flintshire Local Development Plan understanding of and links to health:

There is no definition of health and no dedicated section on health, however health is successfully integrated into most sections of the paper.

There are no explicit indicators or measurements of health in the LDP.

Flintshire LDP understanding of health equity / equality

No definition of equity or equality, however equality is discussed a handful of times in relation to the distribution of SDH. Mentions equalities impact assessment (pg. 270).

The LDP Objectives discuss equality - Create places that are safe, accessible and encourage and support good health, well-being and equality (LDP objective 7). *“Ensure communities have access to a mix of services and facilities, such as education and health, to allow community life to flourish, and meet the needs of particular groups such as the elderly” (pg. 67). “Create and protect green spaces and open space / play environments that encourage and support good health, well-being and equality” (pg. 97).*

Flintshire LDP discussion of social determinants of health

PPW11 highlights that *“the built and natural environment is a key determinant of health and well-being”* (para 3.19). It then goes further by specifically referencing the ways that social determinants influence health - *“The LDP is important to the health and well-being of Flintshire’s residents as it directly shapes the natural and built environment which subsequently influences the social, economic, environmental and cultural factors which impact on health well-being. The LDP seeks to promote sustainable development which enhances the health and well-being of Flintshire’s residents through the creation of new employment opportunities, affordable housing options and the provision of high-quality open spaces and green infrastructure. All these elements combined can positively influence the health and well-being of communities. The LDP will achieve this by ensuring that the right type of developments take place in the most sustainable locations with the necessary infrastructure in place to support the new and existing community. In addition to this, the LDP can protect communities from inappropriate developments that would have a detrimental impact upon the health and well-being of residents”* (pg. 35). *“Walking and cycling routes will also assist in creating healthy lifestyles and will have health benefits”* (pg. 63). *“Housing is central to people’s lives. Quality, affordable housing contributes directly to community cohesion and sustainability, and to people’s health and well-being”* (pg. 87).

Strategic Health – Health impact assessment

A Health Impact Assessment was carried out to be integrated into the Flintshire LDP. This was a separate document. The LDP also mentions Strategic environmental Impact Assessment, Health Impact Assessment, Retail Impact Assessment, Landscape Impact Assessment, Heritage Impact Assessment, Environmental Impact Assessment.

Reference to the National Wellbeing Goals

The Flintshire LDP made multiple references to the National Wellbeing Goals.

Opportunities for Health within the Flintshire LDP

There is wide acknowledgement of SDH – it would be useful to provide a definition of what this is, a definition of health and health equity, and strengthen the links between the SDH and health outcomes, and how the LDP can be utilised to improve the health of the Flintshire population.



Background information

This LDP is the “*replacement LDP*”. Published in 2020 it is due for renewal in 2031.



Merthyr Tydfil has a population size of **58,839** (2021 Census).

Population Characteristics and Comments

This LDP notes the following in 4.7 regarding identified growth levels – *“An increase in the number of school age children at a level, which could be more readily accommodated, without the need for new schools. A significant increase in the proportion of elderly people living in the County Borough. Catering for this demographic will be a key issue for service providers across the public and private sectors.”*

There is no further mention of vulnerable populations. Mentions elderly and children in terms of population growth and solutions required but does not identify the specific needs of these cohorts.

Merthyr Tydfil Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health. Health is discussed as something to be attained and strived for but with no outline of exactly what this means or how to attain good health.

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Merthyr Tydfil LDP understanding of health equity / equality

The LDP provides no definition of health equity or equality. No mention of equity or equality at all. There is limited discussion on improving the health or equality of the population.

Merthyr Tydfil LDP discussion of social determinants of health

The Merthyr Tydfil LDP does not explicitly name the social determinants of health, but discusses - The planning, design, management and maintenance of the built environment and its interaction with the natural environment, has a long-term impact upon people and communities. It is widely acknowledged that our quality of life, prosperity, health and wellbeing are heavily influenced by the ‘place’ in which we live or work. Open spaces which are accessible, well-designed and maintained make a significant contribution to our local well-being objective for children and adults to have good physical and mental well-being. (pg. 50).

Strategic Health – Health impact assessment

There has been no Health Impact Assessment carried out in preparation of this LDP. The LDP does however mention Heritage Impact Assessment, Environmental Impact Assessment, ecological impact assessments, Landscape and Visual Impact Assessment, Retail impact assessment, Social Impact Assessment, Ecological Impact Assessment – this indicates the LPA's previous exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Merthyr Tydfil LDP does not mention the National Wellbeing Goals.

Opportunities for Health within the Merthyr Tydfil LDP

There are multiple opportunities for health to be integrated and further considered throughout this document particularly in relation to explicit health definitions, equity considerations, populations considerations and needs, and measurable outcomes.

Monmouthshire

[Link to LDP >>>](#)



Background information

This LDP was published in 2014 and was due for renewal in 2021. The replacement LDP is underway and is for the period from 2018-2033



Monmouthshire has a population size of **93,000** (2021 Census).

Population Characteristics and Comments

Any mention of populations is purely descriptive. For example- low gypsy and traveller population (section 6.1.27 pg. 99), Low population that read, write or speak Welsh (Section 1.25 pg. 6), Older / lower age groups (section 3.3), 74% households owner occupied (3.36) or 62.8% employed. The LDP references “migration” in relation to birds. The only mention of disability is for parking. The LDP does not mention any population groups that require additional policy focus.

Monmouthshire Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health, but health is mentioned in the strategy 60 times. Section 3.46 mentions that *“the health of Monmouthshire’s population is generally better than the wealth average with greater life expectancy and higher proportion of residents classing themselves as being in good health.”* *“While Monmouthshire performs relatively well on indicators relating to health, there is a need to promote opportunities for healthy living and access to health care, particularly in the context of an ageing population.”*

There is no separate section on health but section on the linked but separate “*health, social and wellbeing strategy*” which sets out a continued commitment to improve health and wellbeing throughout the county.

There are no explicit indicators or measurements of health in the LDP.

Monmouthshire LDP understanding of health equity / equality

There is no explicit definition of health equity. The only mention of equality is a “*fair and equal society*” which is mentioned in the social justice section on page 14. It also discusses housing affordability.

Monmouthshire LDP discussion of social determinants of health

Determinants are mentioned within the document; however, they are not defined as social determinants of health. They are predominately referenced via other acts or policies (i.e. the health, social care and wellbeing strategy (pg. 16) and the regional transport plan (pg. 11-12) Climate change and flooding represent a risk to human health and property (pg. 42). To improve access to recreation, sport, leisure activities, open space and the countryside and to enable healthier lifestyles. To ensure that appropriate infrastructure (to include community and recreational facilities, sewerage, water, transport, schools and health care etc.) is already in place or can be provided to accommodate new development (both pg. 45).

Strategic Health – Health impact assessment

No health impact assessment was undertaken for the creation of the LDP. Landscape Impact Assessment and Environmental Impact Assessment are mentioned, indicating the LPA's prior exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Monmouthshire LDP does not reference the National Wellbeing Goals.

Opportunities for Health within the Monmouthshire LDP

There is an opportunity for health to be explicitly mentioned, defined and linked to the document via the social determinants of health. There are actions in other plans and acts mentioned within this document but not specific to this document – so there could be benefit in an outline of the specific health related measurements of the LDP.

Neath Port Talbot

[Link to LDP >>>](#)



Background information

This was published in 2016 and is due for renewal in 2026.



Neath Port Talbot has a population size of **142,300** (2021 Census).

Population Characteristics and Comments

The LDP discusses *“Due to their topography and distance from the main centres of population the valley communities have suffered from decline and a lack of investment. There are communities that are vulnerable to further economic decline, deprivation and out migration. The LDP therefore seeks to encourage a more flexible approach to development in the valleys to build sustainable, resilient communities with an aim to halt the process of depopulation and decline.”*

Though not describing the demographics of the population, vulnerable communities were considered geographically, this was one of the best descriptions of the role of the LDP in supporting vulnerable communities.

Neath Port Talbot Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health. However, Neath Port Talbot LDP views health as a *“matter of primary importance for the whole county borough”* (pg. 35). *“Health is considered to be an overarching topic area as it will be addressed through a range of policies and interventions which can have positive health benefits”* (pg. 36). *“Residents in Neath Port Talbot experience some of the worst health in Wales”* (pg. 18). *“Poor health is identified as a key issue for Neath Port Talbot. The strategy supports a number of principles that will help to foster healthier, more active lifestyles and looks at measures to help improve access to employment, services and facilities whilst encouraging more active travel.”*

The LDP discusses the outcomes of the *“Single integrated plan”*- to be Healthier: Children and young people in Neath Port Talbot are physically and emotionally healthy; adults of working age in Neath Port Talbot are physically and emotionally healthy; and older people are independent and enjoy a good quality of life. This outcome aims to improve the health and well-being of Neath Port Talbot residents through:

- Encouraging healthier lifestyles;
- Embed health improvement into policy making and service delivery arrangements;
- Remodel and integrate health and social care services.

There is a separate section on health- Strategic Policy 2 under overarching policies
There are no explicit indicators or measurements of health in the LDP.

Neath Port Talbot LDP understanding of health equity / equality

The LDP does not provide a definition of health equity or equality. Mentions equity sharing schemes in relation to housing. Does mention the regions inequality in the following way (not health specific) – *“The LDP provides a modern, clear and ambitious vision of what we want to see happen in Neath Port Talbot over the next decade – a County Borough where we can provide a better, fairer future for everyone who lives, works, visits or invests here – whilst also underlining the wider role that we can play in increasing prosperity and reducing poverty and inequality across the region”* (pg. 1).

Neath Port Talbot LDP discussion of social determinants of health

Specifically mentioned the *“determinants of poor health”* however does not define this or outline what these determinants are.

Objective 2 - OB 2: Reduce people’s exposure to the determinants of poor health and provide an environment that encourages healthy, active and safer lifestyles (pg. 19).

In the Health section, though they do not specifically call them the SDH, they discuss *“the measures outlined to address health issues will be implemented through a number of the Plan policies and proposals: Sustainable settlements, housing allocations, protection of community facilities, provision and protection of open spaces, accessibility, employment, environment”* (pg. 36).

Strategic Health – Health impact assessment

No Health Impact Assessment was undertaken in the creation of this document. However, HIA is mentioned – *“In accordance with national planning policy a Health Impact Assessment (HIA) will be required, where appropriate. This is likely to form part of any Environmental Statement submitted with any proposal”* (pg. 76). The LDP also mentions Welsh Language Impact Assessment (pg. 88), Traffic Impact Assessment (pg. 137), indicated the LPA’s exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Neath Port Talbot LDP did not reference the National Wellbeing Goals. This is likely due to the timing of the document. (Published 2016. Wellbeing Goals created 2015).

Opportunities for Health within the Neath Port Talbot LDP

This was the first LDP that seemed to understand and highlight the ways that the LDP could assist in supporting vulnerable communities. However, these populations were described purely geographically. It would strengthen the links between community needs and the LDP’s to provide further information on the demographics of the population and the specific needs of vulnerable groups, or across the lifespan.

There is a lot of rhetoric around objectives and aims and strategies employed, however the LDP is lacking in specific and measurable actions. The LDP recognises that NPT has some of the worst health in Wales but no further information on why that is- further descriptions here would be good alongside links to how the LDP can be used to improve health and wellbeing in the area.

Newport

[Link to LDP >>>](#)



Background information

This LDP was published in 2015 and was due for renewal in 2026.



Newport has a population size of **159,600** (2021 Census).

Population Characteristics and Comments

The LDP mentions an ageing Population and that the needs of the elderly will need to be considered in future development but does not mention any other population characteristics. Mentions gypsy and traveller families- There are indicators on the number and need of gypsy and traveller sites.

Newport Local Development Plan understanding of and links to health:

This LDP mentions health 56 times throughout the document, many times in appropriate ways - i.e. how the LDP and its actions could affect or improve health. An underlying theme of concern for the health and wellbeing of the population. There is however no definition of health or specific measurable indicators of exactly what health means.

There is a separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Newport LDP understanding of health equity / equality

There is no explicit definition of health equity or equality. Environmental equality for further generations is the only mention of equality.

Under general development principles is written - Access arrangements should be considered early in the design process to ensure that developments and the surrounding area allow all users to have equal and convenient access to it.

Newport LDP discussion of social determinants of health

There are a number of quotes regarding social determinants of health, and these have been explicitly named as such.

Under the strategic policy of health, it outlines *"There are many determinants of health that can be influenced by the policy in this Plan. Adaptation measures for climate change will feature highly in this respect as they have many public health benefits"* (pg. 19). *"It is reasonable to assume that where developments are located in locations that are only accessible by the car then the likelihood of people walking to destinations is greatly decreased. This is therefore likely to lead to more inactivity in the local population"* (pg. 18).

"In addition, it will support healthier lifestyles and well-being, for example, by protecting and enhancing our highly successful world class sport and leisure facilities" (pg. 4)

Strategic Health – Health impact assessment

A health impact assessment was undertaken to complete this LDP.

The LDP also mentions - Subject to relevant statutory provisions, Environmental Impact Assessment, Health Impact Assessment, and/or Preliminary Risk Assessment of proposals may be required so that the environmental and health implications of proposed developments can be fully considered before any planning application is determined (pg. 54).

Reference to the National Wellbeing Goals

The Newport LDP does not reference the National Wellbeing Goals.

Opportunities for Health within the Newport LDP

There is an opportunity for health to be explicitly defined. The social determinants of health are mentioned but not clearly defined. Though this LDP shows some understanding of health and discusses it in ways that seem appropriate for an LDP, these links between planning and health could be strengthened.

Pembrokeshire

[Link to LDP >>>](#)



Background information

This LDP was published in 2013 and was due for renewal in 2021. The replacement LDP is currently in process.



Pembrokeshire has a population size of **123,400** (2021 Census).

Population Characteristics and Comments

This LDP is the only one where the “*health based*” accommodation needs of the elderly are discussed. “Pembrokeshire has the second highest proportion of older people in its population in Wales, with the population over 65 estimated to be 26% by 2021¹⁰⁹. This policy, therefore, aims to provide accommodation for the special needs of various groups, particularly the elderly (but also other groups) for sheltered accommodation, residential care, extra and domiciliary care, or respite, palliative or hospice care (Class C2 of the Use Classes Order 1987 as amended).

The plan identifies specific housing needs of “*vulnerable people*” but does not define what makes a person or group vulnerable or offer solutions other than that housing needs to be affordable.

“Priorities identified include maximising the delivery of affordable housing, particularly in rural areas, to help sustain communities; increasing the delivery of affordable housing through the planning system; providing a wide range of housing options for vulnerable people; housing options for older people; improving the condition of Pembrokeshire’s housing stock; regenerating neighbourhoods and encouraging environmentally friendly new and renovated housing. This Plan reflects these priorities with an emphasis on delivery of affordable housing, particularly in rural areas and a focus on good, sustainable design.”

Pembrokeshire Local Development Plan understanding of and links to health:

This LDP does not explicitly define health. It outlines life expectancy and percentage of population identifying with long term illness and health classified as “*not good*” compared to the Welsh average. Health is seen as a bit of an abstract or “*other*” concept that is not clearly discussed or defined.

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Pembrokeshire LDP understanding of health equity / equality

No definition of health equity or inequality. Mentions equality in terms of sustainable development which *"This must be done in ways which promote social justice and equality of opportunity"* (pg. 153).

Identifies *"Health or social inequalities"* as a key issue for the area under sustainable communities (pg. 26).

Pembrokeshire LDP discussion of social determinants of health

Mentions *"Structural changes to health/social care provision"*. *"Use of more sustainable and healthier modes of transport"* (pg. 16). *"Impact of pollution on the environment and people's health and well-being"* (pg. 33). Where there are concerns that a proposal would cause harm to health and safety through contamination, adverse impact on air quality, land instability, flooding or erosion, professional advice will be sought from the relevant authority (pg. 78).

Strategic Health – Health impact assessment

A health impact assessment was not undertaken to complete this LDP. A retail impact assessment and environmental impact assessment is mentioned in the document indicating the LPA's exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Pembrokeshire LDP does not reference the National Wellbeing Goals. This is due to the timing of the document.

Opportunities for Health within the Pembrokeshire LDP

There are a number of opportunities for health. Explicit definitions of health, health equity and the impact of social determinants on health outcomes would be an appropriate step attached to the discussion of life expectancy and general health comparatively to the rest of the Welsh population.



Background information

This LDP was published in 2018 and is due for renewal in 2026.



Powys has a population size of **133,200** (2021 Census).

Population Characteristics and Comments

This LDP lists the priorities of the one Powys plan (separate plan) - They mention elderly people and vulnerable families- The needs of vulnerable children, babies and their families are identified as early as possible so that they can enjoy safe and fulfilled lives. This plan also mentioned the wellbeing of caregivers.

Though a good description there of some vulnerable groups, it is in relation to another plan, and there is no further elaboration on what constitutes vulnerability or examples of specific needs of these groups.

Powys Local Development Plan understanding of and links to health:

This LDP does not explicitly define health but outlines that *"The LDP contributes to the commitment to Mental Health and Well-being and Healthy Living through open space policies, preventing the loss of important community facilities and services unless mitigated against and by being supportive of well-designed and well located recreational and leisure facilities."*

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Powys LDP understanding of health equity / equality

No definition of health equity or inequality. Mentions equality impact assessments twice.

No real mention of improving health or equality in the area except surface level mentions such as when it comes to some provision of affordable housing.

Powys LDP discussion of social determinants of health

Only reference is: *"The Wales Spatial Plan (2008 update) highlights that good access to services across the Central Wales area is a key determinant of quality of life, particularly in tackling the significant geographical and social inequalities of health, social care and well-being in the predominantly rural area"*. (pg. 118).

Strategic Health – Health impact assessment

A health impact assessment was not undertaken to complete this LDP. An Equalities Impact Assessment, Landscape and Visual Impact Assessment, Welsh Language Impact Assessment, Environmental Impact Assessment, and Heritage Impact Assessment are mentioned in the document - indicating the LPA's exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Powys LDP does not reference the National Wellbeing Goals.

Opportunities for Health within the Powys LDP

There are a number of opportunities for health.

As with all others there needs to be an explicit definition of health, health equity and the social determinants of health.

A number of quotes regarding health, equity and SDH are simply through their description of other plans. A clear outline of the LDP and ways that it is or can be linked to health would be beneficial.

Rhondda Cynon Taf

[Link to LDP >>>](#)



Background information

This LDP was published in 2011 and was due for renewal in 2021. The replacement LDP is in progress which covers the period from 2022 -2037.



Rhondda Cynon Taf has a population size of **237,700** (2021 Census).

Population Characteristics and Comments

This LDP mentions children and families in the context of the children and young people plan (separate plan) and identifies some needs of Gypsy's and travellers. It mentions the following in social trends *"The highest overall concentration of deprivation in Rhondda Cynon Taf is located in the central and northern valleys (Welsh Index of Multiple Deprivation 2008). 27% of residents in Rhondda Cynon Taf suffer with a limiting long-term illness compared with a Welsh average of just 23% (Office of National Statistics). 41% of residents in Rhondda Cynon Taf have no academic qualifications compared with a Welsh average of 33% (Office of National Statistics)"* (pg. 17).

These statistics provide a snapshot of the needs of the area, however, are mostly descriptive. There is not a lot of depth to what makes certain groups vulnerable, or the varied needs of the community, and the links of vulnerabilities to health

Rhondda Cynon Taf Local Development Plan understanding of and links to health:

This LDP does not explicitly define health, and there is no separate section on health.

An aim of the plan is to *"deliver a better quality of life by ensuring our communities are vibrant, healthy and safe, provide access to a range of cultural, commercial and leisure activities and protect our natural heritage and built environment"*.

There are no explicit indicators or measurements of health in the LDP.

Rhondda Cynon Taf LDP understanding of health equity / equality

No definition of health equity or inequality. Health inequality is mentioned in a descriptive way under a description of the Health Care and Social Wellbeing strategy, but no link to this document or what it means

Rhondda Cynon Taf LDP discussion of social determinants of health

The following are mentioned under the children and young people's plan (so not specifically the LDP) (pg. 12). *"Have a comprehensive range of education and learning opportunities; Enjoy the best possible health and freedom from abuse, victimisation and exploitation; Are not disadvantaged by poverty."*

The plan also discusses *"Providing safe and convenient walking and cycling environments will help tackle health problems associated with physical inactivity, and social exclusion factors arising from car dependency, poor access to services and public transport facilities"* (pg. 51). *"Open spaces, whether formal sports areas, informal public open spaces or natural green spaces, have been acknowledged as playing a significant role in improving and maintaining peoples physical and mental health and well-being"* (pg. 53). *"Pollution may cause significant damage to human health, quality of life and residential amenity"* (pg. 59).

As above the plan mentions social determinants of health but does not define them as such or explain exactly what this means.

Strategic Health – Health impact assessment

A health impact assessment was not undertaken to complete this LDP. No other impact assessments were mentioned. This may be due to the age of the document, rather than the current LPA's exposure to the impact assessment process.

Reference to the National Wellbeing Goals

The Rhondda Cynon Taf LDP does not reference the National Wellbeing Goals. This may be due to the age of the document.

Opportunities for Health within the Rhondda Cynon Taf LDP

There are a number of opportunities for health.

As with all others there needs to be an explicit definition of health, health equity and the social determinants of health. Discussion of the explicit needs of the community and how the demographic profile of Rhondda Cynon Taf may have further impact on the health of its inhabitants.



Background information

This LDP was published in 2019 and was due for renewal in 2025. The replacement LDP is in progress which covers the period from 2023 -2038.



Swansea has a population size of **238,500** (2021 Census).

Population Characteristics and Comments

There is a reasonable amount of discussion on the varying needs of children and families (particularly in relation to play and open spaces, and size of housing), but nothing further.

The LDP states that in terms of public access *“standards of design on the PROW network must take into account people with mobility difficulties, the young and the elderly.”*

This indicates Swansea’s attempt at understanding the varying needs of its population, however there is an opportunity for further characteristics to be defined.

Swansea Local Development Plan understanding of and links to health:

Swansea is a WHO Healthy City. However, this LDP still does not explicitly define health. There is a separate section on health. Health is mentioned 182 times. Many times, it seems as though health is seen as a way to increase the areas desirability and economic competitiveness. *“The Plan’s objectives of creating desirable, healthy and sustainable places to live”* (pg. 82).

There are no explicit indicators or measurements of health in the LDP.

Swansea LDP understanding of health equity / equality

No definition of health equity or inequality.

The LDP lists a strategic objective that is to *“create environments that encourage and support good health, well-being and equality”*. Views the role of placemaking and planning as *“An integral part of Placemaking and holistic planning is to create and manage places that seek to ensure social inclusion, equality of opportunity and access for all”* (pg. 47) and mentions that *“Health inequalities will be reduced and healthy lifestyles encouraged by ensuring that development proposals”* follow a number of objectives referenced in a later column.

Swansea LDP discussion of social determinants of health

The Swansea LDP discusses the following social determinants of health but does not define them as such.

- Making Active Travel for transit and leisure a more attractive prospect will ensure improved health and well-being outcomes in addition to contributing to lower levels of traffic” (pg. 115).
- Development will not be permitted that would result in significant risk to: life; human health and wellbeing; property; controlled waters; or the natural and historic

environment, particularly in respect of: i. Air, noise or light pollution; ii. Flood risk; iii. The quality or quantity of water resources; iv. Land contamination; v. Land instability or subsidence; vi. Sustainable development of mineral resources; and vii. Sustainable waste management.

Strategic Health – Health impact assessment

A health impact assessment was carried out supplementary to this LDP.

The LDP also mentions - Heritage impact assessment, Environmental impact assessment, Welsh language impact assessment, Retail impact assessment, Landscape impact assessment, arboriculture impact assessment, Tourism needs and development impact assessment. These mentions indicate the LPA's familiarity with the impact assessment process.

Reference to the National Wellbeing Goals

The Swansea LDP references the National Wellbeing Goals.

Opportunities for Health within the Swansea LDP

There are a number of opportunities for health. Particularly given its status as a WHO Healthy City, the Swansea LDP has an opportunity to be an exemplar of how to integrate health into all aspects of planning and policies.

As with all others there needs to be an explicit definition of health, health equity and the social determinants of health. Outlining monitoring indicators of health and social determinants would further strengthen the document and the links between LDP Planning and health.



Background information

This LDP was published in 2013 and was due for renewal in 2021. The replacement LDP is in progress which covers the period from 2022 -2037.



Torfaen has a population size of **92,300** (2021 Census).

Population Characteristics and Comments

The LDP does not provide a detailed breakdown of the Torfaen population or its characteristics.

It mentions vulnerable groups, but this is in relation to a separate social care and wellbeing strategy *"The shared priorities for 2008-2011 in the Strategy focus on education; skills & training; substance misuse; healthy living; vulnerable adults & carers; promoting independence & choice; long-term limiting illness and inequalities"* (pg. 21).

It also mentions the provision of children's play areas and open spaces.

Torfaen Local Development Plan understanding of and links to health:

There is no explicit definition of health. The LDP mentions health 79 times. It discusses a new critical care centre- *"This development would have significant beneficial effects on health, employment and housing for the wider area and also represents an opportunity to improve services and the connectivity of the Llanfrechfa community to Cwmbran."* It then continues to discuss health in terms of infrastructure / care facilities etc.

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Torfaen LDP understanding of health equity / equality

No definition of health equity or inequality.

The LDP mentions inequalities when discussing the objectives of the health, social care and wellbeing strategy (separate strategy). It mentions inequalities in the core strategy of the LDP - The network of integrated communities that *"Improvements to existing facilities will be sought to reduce disparities between settlements and improvements in accessibility to key services will be sought to ensure access for all. This will assist in reducing social inequality and make communities more self-sufficient."*

The LDP also outlines - *"It is important that the accessibility of settlements to green space, open spaces, areas of biodiversity and the countryside is promoted, which will be important in contributing to people's health and well-being and providing opportunities for outdoor recreation and leisure"* (pg. 68).

Torfaen LDP discussion of social determinants of health

The Torfaen LDP does not explicitly define or label the social determinants of health. The following quotes indicate the LPA's understanding of the links of wider determinants to health outcomes, but more could be done to further define and link these

- *"A history of employment in traditional industries, poor housing, an ageing population and lower educational attainment has also contributed to higher-than-average levels of poor health indicators. Community facilities in the County Borough are deficient both in numbers and quality and the provision of additional facilities and protection of existing facilities will be a key priority over the plan period"* (pg. 26).
- *"The principal issues are that socially Torfaen has poor educational performance, a significant need for new housing and affordable housing in particular, high deprivation levels particularly in the Northern and Central Cwmbran areas, poor human health compared to the Welsh average and an increasingly ageing population with a low overall increase in the population of Torfaen forecast over the Plan Period"* (pg. 27).
- *"To promote health and well-being through the provision of development including community facilities, leisure and outdoor recreational opportunities, accessible to all."* LDP Objective (pg. 30).

Strategic Health – Health impact assessment

No health impact assessment was alongside this LDP.

However- *"the Council will normally require a Health Impact Assessment (HIA) to accompany a minerals planning application."* It also mentions traffic impact assessment, retail impact assessment. This indicates the council's exposure to the Impact Assessment process

Reference to the National Wellbeing Goals

The Torfaen LDP does not reference the National Wellbeing Goals.

Opportunities for Health within the Torfaen LDP

There is opportunity in this LDP for further and more explicit definitions to be made regarding health, health equity, social determinants of health. The LDP would also benefit from a demographic breakdown of the population and an outline of the population's specific needs- particularly that of vulnerable populations.

Links to existing policies (i.e. the aforementioned health, social care and wellbeing policy) and exactly how the LDP can support health related goals would provide synergy between the councils plans and policies.

Wrexham

[Link to LDP >>>](#)



Background information

This LDP is the “replacement LDP”. Published in 2023 it is due for renewal in 2028.



Wrexham has a population size of **135,100** (2021 Census).

Population Characteristics and Comments

The LDP recognises “that the County Borough has an ageing population”. It discusses “helping vulnerable people, people with mobility issues, older people, and Gypsy & Travellers”. It also discusses the legislative requirements (The Housing Wales Act 2014) that all local authorities in Wales identify the housing needs of Gypsies and Travellers and make provision for any needs identified. Other than this there is no major demographic breakdown provided, no gendered demographics and no further mention of marginalised populations and their specific needs.

Wrexham Local Development Plan understanding of and links to health:

This LDP does not contain an explicit definition of health. Wrexham’s understanding of health is outlined on page 63 - “Health and wellbeing needs to be understood holistically, recognising that the issues are complex and cross cutting throughout the Plan and recognising that planning is just one of many influencing but enabling factors.” Health is integrated into or mentioned within most sections of the plan.

There is a separate section on health- SP13 Health and Wellbeing, under key strategic housing sites. This policy “accords with the Plan’s strategic objective to promote and encourage a healthy, active and safe lifestyle within the County Borough. It reflects the direction in National Planning Policy and Guidance that health is a material consideration in determining planning applications for new developments and is recognised as an essential element in delivering sustainable development.” (pg. 63).

There are no explicit indicators or measurements of health in the LDP.

Wrexham LDP understanding of health equity / equality

The LDP provides a definition of health inequalities - “Health inequalities can be defined as differences in health status or in the distribution of health determinants between different population groups. For example, differences in mobility between elderly people and younger populations or differences in mortality rates between people from different social classes. Health, in this context, includes mental health.” (pg. 63).

Wrexham LDP discussion of social determinants of health

The Wrexham LDP makes a concerted effort to discuss the Social Determinants of Health and names them as such. It labels examples of determinants but does not provide an explicit definition of health. Any indicators that are related to the determinants of health are not explicitly mentioned as such, and there is no clear linkage between the various determinants and health related outcomes.

"The Council will seek to meet the health and wellbeing needs of our residents by addressing the key determinants of health including deprivation, physical environment and encouraging active lifestyles."

"All development should seek to reduce health inequalities and provide opportunities for healthy lifestyles and improving health and well-being, including mental health, by addressing the physical, economic and social determinants of health"

"The Council will seek to meet the health and wellbeing needs of our residents by addressing the key determinants of health including deprivation, physical environment and encouraging active lifestyles" (pg. 63).

Strategic Health – Health impact assessment

A Health Impact Assessment was carried out to be integrated into the Wrexham LDP. This was a separate document. An Equality impact assessment was also undertaken and is a supplementary document. The LDP also mentions Landscape Visual Impact Assessment, Welsh Language Impact Assessment and Retail impact Assessment.

Reference to the National Wellbeing Goals

The Wrexham LDP made multiple references to the National Wellbeing Goals.

Opportunities for Health within the Wrexham LDP

An explicit definition of what health is / isn't and identifying some key health related metrics or indicators would strengthen the documents existing links to health.

Vale of Glamorgan

[Link to LDP >>>](#)



Vale of Glamorgan has a population size of **131,900** (2021 Census).

Background information

This LDP was published in 2017 and was due for renewal in 2026. The replacement LDP is in progress.

Population Characteristics and Comments

Section 3 of the Plan identifies the key socio-economic and environmental issues in the Vale of Glamorgan. The issues have been identified through consultation and the analysis of the research contained in the LDP evidence base. The gender profile is 49% males and 51% females, and the age of the population shows a projected increase of 8% in children under 18 and 37% in people of retirement age.

the LDP does mention some specific needs of certain groups.

The elderly are mentioned *"Older people are valued and empowered to remain independent, healthy and active. They have equality of opportunity and receive high quality services to meet their diverse needs."* The LDP also mentions that children require open spaces and a new school to be developed in the area.

The LDP outlines that *"The Council will consider the suitability of any future adaptations or extensions where required by an occupant with disabilities or to accommodate appropriate extensions for family growth."*

Vale of Glamorgan Local Development Plan understanding of and links to health:

There is no explicit definition of health.

The LDP lists that "Our Vision for the Vale of Glamorgan is a place:

- That is safe, clean and attractive, where individuals and communities have sustainable opportunities to improve their health, learning and skills, prosperity and wellbeing; and
- Where there is a strong sense of community in which local groups and individuals have the capacity and incentive to make an effective contribution to the future sustainability of the area."

There is no separate section on health.

There are no explicit indicators or measurements of health in the LDP.

Vale of Glamorgan LDP understanding of health equity / equality

No definition of health equity but does attempt to define health inequality - at least in terms of life expectancy. *"In terms of health inequalities, figures from the Public Health Wales Observatory show that life expectancy in the Vale of Glamorgan, as in Wales in general, is increasing. However, this improvement is not experienced equally across all areas with inequality gaps existing between the most and least deprived areas for life expectancy. There are also inequalities in the quality of life relating to healthy life expectancy and disability-free*

life expectancy. The Slope Index of Inequality (SII) for the Vale of Glamorgan shows, for example, that the gap in life expectancy in males between the most and least deprived fifth is about 8 years. When considering healthy life expectancy, the gap is even greater at around 20 years."

It also mentions that - *"The Vale of Glamorgan exhibits considerable socio-economic diversity containing some of the most affluent and the most deprived communities in Wales".* The LDP outlines a priority of the community strategy as - *"Health inequalities are reduced, and residents are able to access the necessary services, information and advice to improve their wellbeing and quality of life."* and notes the LDP works to meet this priority (among others).

Vale of Glamorgan LDP discussion of social determinants of health

Whilst the LDP does not define the social determinants of health and the health impacts of inequality, it does have a relatively extensive amount of discussion surrounding the ways that the LDP will address inequality and the social determinants (without calling them as such)-

- *"Proposals which promote healthy living and address health inequalities will also be favoured. This includes designing environments which encourage physical activity and considering the health and healthcare needs of future residents through the design of buildings or the multi-use of community facilities, particularly where this enables people to retain their independence and remain within the local community" (pg. 39).*
- *"Providing safe and convenient walking and cycling environments will help tackle health problems associated with physical inactivity and social exclusion factors arising from car dependency, poor access to services and public transport facilities" (pg. 101).*
- *"As well as ensuring healthy and active environments consideration should also be given to the impact on the health and wellbeing of future users in the design of buildings, use of materials and access to light and quiet areas. The provision of features or the shared use of community facilities for health care needs which enable people to retain their independence and remain in the local community will be favoured where considered appropriate" (pg. 101).*
- *"The quality, accessibility and range of community infrastructure available to meet the needs of new developments is vital to the creation of sustainable communities" (pg. 104).*

Strategic Health – Health impact assessment

No Health Impact Assessment has been carried out in conjunction with this LDP.

The LDP does however mention Highway impact assessment, Landscape and visual impact assessment, Environmental Impact assessment.

Reference to the National Wellbeing Goals

The Vale of Glamorgan LDP does not mention the National Wellbeing Goals.

Opportunities for Health within the Vale of Glamorgan LDP

There is a good section of socio-economic profile of the area, with some information on health and lifespan inequalities. The inclusion of this in the plan adds value to the content and clarity of the LDP's goals, and this section could be used as an example for other LDP's. This section could be further linked to health and would be a good spot for further definitions and reference to SDH.

Eryri National Park

[Link to LDP >>>](#)



Eryri National Park has a population size of **25,400** (2021 Census).

Eryri National Park's residents reside in the LPA's of both Gwynedd and Conwy, with **84% living in Gwynedd** and the remaining **16% in Conwy**. (as at mid-2018)



Background information

This LDP is the replacement LDP and is due for renewal in 2031.

Population Characteristics and Comments

Comparatively to other LDP's- Eryri National Park gives extensive consideration to the explicit housing needs of its residents.

"Like many rural areas, Eryri has an ageing population and trends indicate that life expectancy will rise resulting in increasing demand for health and care facilities and for housing that can accommodate or be adapted to meet the needs of the elderly" (pg. 21). Great emphasis must be placed on providing housing opportunities to meet the needs of the local community particularly those of young people and the elderly, through increasing residents' wealth alongside housing availability and cost reductions (pg. 21). Housing need definition - The future occupier cannot afford to rent or buy 'open market' accommodation in the locality and conforms to one of the following criteria:

- currently homeless.
- establishing a new household for the first time. Has been living in rented accommodation for at least three years.
- their current house is deemed by the Housing Authority to be in sub-standard condition and it can be proven that the current house cannot be converted or upgraded to meet their need.
- their existing house is too small for the family and it can be proven that the present home cannot be converted or upgraded to meet their need.
- has an essential need to live close to another person who has a minimum of 10 years permanent and continuous residence in the qualifying area, the essential need arising from proven age or medical reasons.
- has specific requirements (the elderly or disabled).
- Is providing key work or service and has a full time permanent job offer in the qualifying area.
- Is leaving tied housing on retirement.
- That no suitable accommodation is available in the locality and the person wishes to stay within the local community for economic or cultural reasons."

Eryri National Park Local Development Plan understanding of and links to health:

This LDP does not explicitly define health- Health is considered as an abstract concept, in terms of sustainability, and access to greenspaces and sustainable modes of transport.

"Capitalising on the region's outstanding environment, including the coast, ecological and historical heritage, and strong cultural identity to promote and develop healthier communities

and build higher-value sustainable tourism” (pg. 15).

An aim of the plan is to *“deliver a better quality of life by ensuring our communities are vibrant, healthy and safe, provide access to a range of cultural, commercial and leisure activities and protect our natural heritage and built environment”.*

There are no explicit indicators or measurements of health in the LDP.

Section 5 of the LDP is *“promoting health and sustainable communities”.*

Eryri National Park LDP understanding of health equity / equality

No definition of health equity or inequality. There are a number of mentions made to the wellbeing goal *“a more equal Wales”* but no indication of what this means and how the LDP can be used to promote equity or equality and the links of these to health outcomes.

Eryri National Park LDP discussion of social determinants of health

The LDP makes a few mentions of Social Determinants without naming them as such or linking to health -

- The Once Conwy Community Strategy is founded on seeking eight outcomes where the people of Conwy: are educated and skilled; are safe and feel safe; live in a safe appropriate housing; are healthy and independent; live in a county which has a thriving economy; live in a sustainable environment; live in a county where heritage, culture and the Welsh language thrive; are informed, included and listened to (pg. 16). (This is a separate strategy, and only 14% of the population live in the Conwy LPA)
- A healthy and safe living environment is essential, through good building design, the provision of good public recreational and open space and noise reduction measures and good management, enhancement, promotion and safeguarding of rights of way and access to open country (pg. 21).
- Section 7 is on *“promoting accessibility and inclusion”* and is mainly discussing traffic

Strategic Health – Health impact assessment

A health impact assessment was not undertaken to complete this LDP. The LDP does mention Community and Linguistic Impact Assessment, and Landscape and Visual Impact Assessment.

Reference to the National Wellbeing Goals

The Eryri National Park LDP makes multiple references to the National Wellbeing Goals.

Opportunities for Health within the Eryri National Park LDP

A strength of this LDP is the description of what constitutes housing needs, and the specific needs of vulnerable population in terms of housing. However, this LDP goes a step further than most of the LDP's who have been simply descriptive.

The LDP would benefit from definitions of health, health equity/equality, social determinants of health and links between this plan and health outcomes.

The LDP would also benefit from an explicit outline of the way that it links to the existing plans of both councils, and the way that it balances any conflicting priorities between the two areas.

Pembrokeshire Coast National Park

[Link to LDP >>>](#)



Pembrokeshire Coast National Park has a population size of **22,400** (2021 Census).

Pembrokeshire Coast National Parks residents reside in the **Pembrokeshire LPA**.



Background information

This LDP is the replacement LDP. It was published in 2020 and is due for renewal in 2031.

Population Characteristics and Comments

The LDP outlines – *“In the formative stages of our policies, procedure, practice or guidelines, the Authority needs to take into account what impact its decisions will have on people who are protected under the Equality Act 2010 (people who share a protected characteristic of age, disability, gender (sex), gender reassignment, marriage/civil partnership, pregnancy and maternity, race, religion or belief, sexual orientation)”* (pg 12).

This is a comparatively extensive list of vulnerable populations, however still no indication of what this means for these particular populations.

Pembrokeshire Coast National Park Local Development Plan understanding of and links to health:

This LDP does not explicitly define health- Health is discussed as something to be mitigated against harm, not something that can be enhanced or improved. *“This policy aims to ensure that public health or safety is not put at risk by development in proximity to sites using or storing hazardous substances”* (pg. 73).

There is no separate section on health and no specifically health related indicators.

Pembrokeshire Coast National Park LDP understanding of health equity / equality

No definition of health equity or inequality. The LDP does reference an equality impact assessment- indicating that an effort has been made to recognise inequality in the area

Pembrokeshire Coast National Park LDP discussion of social determinants of health

The LDP does not discuss the social determinants of health.

Strategic Health – Health impact assessment

A health impact assessment was not undertaken to complete this LDP. The LDP does mention Equalities impact assessment, Environmental Impact Assessment, Language Impact Assessment, Traffic Impact Assessment.

Reference to the National Wellbeing Goals

The Pembrokeshire Coast National Park LDP does not mention the National Wellbeing Goals. This is an interesting omission as the document was published in 2020.

Opportunities for Health within the Pembrokeshire Coast National Park LDP

A strength of this LDP is the consideration explicitly given to potentially vulnerable populations. However, this could be strengthened further with further outline of the populations and their explicit needs, and the way that the LDP can be used to increase equality and improve health outcomes.

There is opportunity for the social determinants of health to be discussed, and further definitions and links to health to be made.

Bannau Brycheiniog National Park

[Link to LDP >>>](#)



Bannau Brycheiniog National Park has a population size of **33,800** (2021 Census).

The national park lies within multiple local authorities, with varying proportions of the population. The local authorities included in the Bannau Brycheiniog National Park area are: **Powys, Carmarthenshire, Neath Port Talbot, Rhondda Cynon Taf, Merthyr Tydfil, Caerphilly, Blaenau Gwent, Torfaen, Monmouthshire**



Background information

This LDP was published in 2013 and is due for renewal in 2022. The replacement LDP is currently in progress.

Population Characteristics and Comments

There is very little focus on people and populations at all (only in the previous health in the definition of health equity section). This LDP has a focus on the natural biodiversity of the national park.

The LDP does however mention that *“A wide range of people will live and work within Brecon, and new housing will cater for this diverse range of people. Affordable housing and intermediate low-cost homes provision will be improved and those inappropriately housed will be reduced to minimal levels”* (pg. 53 - Brecon 15-year vision).

Bannau Brycheiniog National Park Local Development Plan understanding of and links to health:

This LDP does not explicitly define health. Human health does not seem to be an explicit consideration of this plan. It does however mention the following-

- *“The vision for the National Park⁵² includes healthy and socially inclusive communities and a sustainable, thriving economic, social and cultural life, in accordance with the statutory duty”* (pg. 114).
- Appendix 2 lists a special quality of the national park as - *“A feeling of vitality and healthfulness that comes from enjoying the Park’s fresh air, clean water, rural setting, open land and locally produced foods”* (pg. 208).

There is no separate section on health and no specifically health related indicators.

Bannau Brycheiniog National Park LDP understanding of health equity / equality

No definition of health equity or inequality. There is a quote from the Planning Policy Wales regarding the promotion of social justice and equality of opportunity (pg. 10) – *“The disparity in wealth and deprivation levels in some parts of the town will be counteracted through strong local action to provide a wider range of employment options and to address the standard of residential accommodation.”*

Bannau Brycheiniog National Park LDP discussion of social determinants of health

The LDP mentions housing affordability (pg. 66) and improving standards of living but there are no links to health, and social determinants of health are not explicitly referenced or defined.

Strategic Health – Health impact assessment

A health impact assessment was not undertaken to complete this LDP. The LDP does mention Environmental impact assessment, Traffic Impact Assessment, Welsh Language Impact Assessment.

Reference to the National Wellbeing Goals

The Bannau Brycheiniog National Park LDP does not mention the National Wellbeing Goals.

Opportunities for Health within the Bannau Brycheiniog National Park LDP

There are multiple opportunities for health to be integrated into this report. For example, acknowledgement of the local inhabitants, and their demographics, alongside an explicit definition of health.



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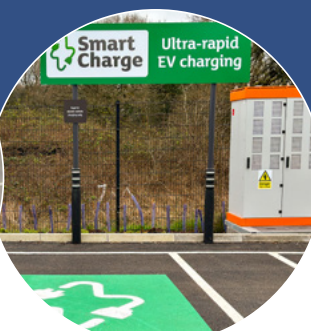
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