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Planning Healthy Places:

A guide for local authorities in Wales for
embedding health in planning policy



November 2025

Planning Health Places: A guide for local authorities in Wales for embedding health in planning policy

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Executive summary

This guidance aims to support those working across urban and rural local authorities in Wales to consider, include and promote health and wellbeing through Local Development Plans (LDPs) and the planning system. It provides evidence and guidance about how this can be achieved and why the links between planning and health are so important. The guide can form the basis of an evidence background paper for LDPs or supplementary planning guidance (SPG) and includes five sections:

Section 1: Introduction

Setting out the aim of the guidance, the intended audience and information about how to use the guidance. It includes information about the importance of creating healthy places, and how spatial planning plays a key part in this. This section outlines why it is important for local development plans to include clearly defined requirements focused on health and wellbeing.

Section 2: National and local planning and health policy context in Wales

Planning and health policies in Wales are implemented at both national and local level. National planning policy has a clear focus on the creation of healthy environments and the influence of the planning system. National health policies recognise the importance of the environment on population health and wellbeing. Local planning and health policies and plans also recognise this importance.

Section 3: Developing health-focused local development plans and policies

LDPs should include clear, evidence based and sound policies which require developers to consider the impacts of the built and natural environment on health and incorporate healthy development principles into their plans and designs. This section provides a summary for what local planning authorities should be considering in plan making and specifying from developers to ensure plans have a clear focus on health and wellbeing.

Section 4: Demographic and population health indicators to inform a LDP

This guidance highlights population health and inequalities data and information that can inform the inclusion of health as a key priority for the LDP and be used in the preparation of a health evidence background paper and/or as part of an integrated sustainability appraisal or a health impact assessment. Local health evidence should help shape policies and subsequently development, and provide contextual information about local health and wellbeing priorities.

Section 5: Principles for planning healthy spaces

This section provides evidence of the links between planning and health, and how considering the elements outlined in the guidance can lead to the creation of healthy spaces and environments. The planning and design principles within this section have been informed by research and practice in the field of planning and health and can be utilised in the development of policies where a specific reference to the enhancing and protection of population health is included. These principles can be applied to the development of local planning policies and inform a health evidence background paper.

Section 6: Horizon scanning

The final section highlights the importance of considering future trends which will have an impact both on the planning system, natural and built environment and population health and inequalities.

1 Introduction

This guide has been created to provide the policy context, population health data and evidence which can support the health and wellbeing strategic objectives of LDPs in Wales and inform policies contained within the plans. It can also be utilised in other aspects of the planning system, for example in the production of Supplementary Planning Guidance (SPG).

This resource is intended to assist with plan-making and addresses the planning-related aspects of wider determinants of health. It seeks to clarify the links between planning and health and demonstrate that effective planning can improve and maintain the health and wellbeing of the population of a local area and reduce health inequalities.

Intended audience and use of the guide

The information in this guide provides the basis for developing a 'health evidence' paper which should be adapted locally to include local area population health evidence and identify opportunities for creating healthy places through planning policy.

Such an evidence paper could be included by local planning authorities as a background paper in the production of LDPs to help inform the plan. The information in this guide can also be used as evidence to inform other planning and health related activity, such as the development of supplementary planning guidance.

The guide is designed to be accessible to everyone involved in plan-making and development management across Wales, from different professional backgrounds. The intended audience is primarily:



Local authority officers including those working in planning policy, development management, transport, housing, environmental health, road safety, parks, and leisure



Health Boards and local public health teams



Elected Members



Public Services Boards (PSBs)



Planning consultants



Developers



How planning links to health and wellbeing

Access to healthcare is only a small part of what enables people to remain healthy throughout their lives. The built and natural environment (buildings, homes, places, streets, routes, land, watercourses, natural habitats) and the activities undertaken in these (living, working, learning, playing, shopping, travelling, moving) determines the health and wellbeing of the population (Public Health Wales, 2018).

Access to green open spaces, healthy food, opportunities for being active, clean air, well designed buildings and houses that promote wellbeing, and supportive services delivered from local facilities all help people and communities to maintain and improve their health and wellbeing (Figure 1) and are known as the wider determinants of health. All these factors can be influenced and shaped by planning and design. For example, the design of a neighbourhood can influence active travel opportunities, physical activity levels, social connectivity and mental and physical wellbeing (Public Health England, 2017c).



Figure 1: The determinants of health and wellbeing (Barton and Grant, 2006)

Many medical conditions have been identified as having a contributing factor related to the built environment including asthma, depression, cardiovascular disease, and some forms of cancer (Chang, M; et al 2022). Many of the major health challenges faced in the UK such as obesity, mental ill health, physical inactivity, social inequality and the needs of an ageing population, can be affected by the built and natural environment (Bird, EL et al, 2024).

Planning is part of a much wider system which impacts upon health and wellbeing and inequalities, but it has an important role in influencing and delivering health outcomes (Welsh Government, 2020) (Public Health England, 2017c) through providing:

- Infrastructure that prioritises walking and cycling
- Road safety measures that reduce vehicle speed and collisions
- Accessible and well-maintained green infrastructure, open green and blue spaces and play spaces for children
- A food growing and retail environment that enhances access to healthy food choices
- Local facilities that enable access to community, healthcare and social care services
- Low levels of air, noise and light pollution
- A range of homes according to population need, that are insulated, warm, naturally lit, energy efficient and well-ventilated and have adequate kitchen facilities, cycle storage and access to outdoor spaces.
- Land for employment and economic development

2

National and local planning and health policy context in Wales

PLANNING POLICY

The national planning system in Wales recognises the importance that planning can play in facilitating accessible and healthy environments where the population can thrive, and health inequalities can be addressed.

National planning policy: Overview

[Future Wales: the National Plan 2040](#) provides a framework for the provision of new infrastructure and growth and seeks to address key national priorities through the planning system, including improving the health and wellbeing of communities. It includes the following outcomes:

- A Wales where people live and work in connected, inclusive and healthy places
- A Wales where people live in distinctive regions that tackle health and socioeconomic inequality through sustainable growth.

[Planning Policy Wales](#) (PPW) sets out the national land use policies for Wales. It has a clear focus on promoting healthier places and includes facilitating accessible and healthy environments as a key planning principle and as a national sustainable placemaking outcome. Planning Policy Wales must be considered when a local planning authority produces its LDP.

Regional Planning Policy: Strategic Development Plans

The new system of Strategic Development Plans (SDPs) in Wales are being prepared by Corporate Joint Committees (CJCs) at a regional level. These plans will focus on issues that cross Local Planning Authority boundaries. Four regions have been identified in Wales and they will set out plans for how these regions will develop and accommodate growth at the strategic level so are key to the operation of the planning system in Wales as these plans will inform the preparation of the LDP “Lites” (LDPLs) which will eventually replace LDPs in Wales.

Local planning policy: Local Development Plans

LDPs in Wales set out how an area will develop, accommodate growth, and provide services and facilities such as green spaces, housing, community facilities and transport infrastructure so are the key driver in the operation of the planning system in Wales. As the plans form the basis for how planning decisions are made in a local area and thus have an impact on local communities, they provide the opportunity to support a healthy placemaking agenda and maximise the benefits to health and wellbeing through the creation of healthy places and the protection of the existing environment. They can also inadvertently cause unintended negative impacts and widen existing or create new health inequalities.

HEALTH AND WELLBEING POLICY IN WALES

The current national health policy context directly references the role of the built and natural environment on health and wellbeing.

The [Wellbeing of Future Generations](#) (Wales) Act 2015 provides a policy framework centred on the sustainable development principles in Wales and enacts a 'Health in all Policies' approach by making a 'Healthier Wales' a required policy goal for all public bodies in Wales. The Act requires Public Services Boards to undertake local wellbeing assessments and produce a local wellbeing plan every five years. The Wellbeing Plan is a strategic document which should align with other local strategic plans such as LDPs.

The [Socio-economic Duty Equality Act 2010](#) came into force in 2021 in Wales and places a legal responsibility on public bodies to have due regard, when they are making strategic decisions, of the need to reduce inequality of outcome resulting from socio-economic disadvantage.

[Healthy Weight, Healthy Wales](#) (2023) is a long term Welsh Government strategy to prevent and reduce obesity. The strategy includes a focus upon the importance of designing healthy environments in addressing the issue of overweight and obesity.

The [Public Health \(Wales\) Act 2017](#) aims to address specific public health concerns, and to create social conditions that are conducive to good health and where avoidable harms can be prevented. The Act includes legislation to mandate that public bodies carry out Health Impact Assessments (HIA) in specific circumstances (see Appendix 1 for further information about HIAs).



3

Developing health and wellbeing focused LDPs

There are many opportunities to connect planning and health and collaboration between planners and health professionals can strengthen the development of shared evidence, policy actions and shared outcomes (Chang et al., 2016). National planning policy is clear that planning can have an influence on health, so LDPs need to be clear about the expectations at a local level.

LDPs can set out clear requirements in planning policy for developers in relation to their responsibility for creating healthy places and addressing local health priorities. These requirements should be based on clear and robust evidence and define health priorities through use of local data sources. LDPs should have regard to the relevant local wellbeing plans which have been produced for the area and refer to key national and local strategies and design guidance.

A clear definition of health and health inequalities should be provided in an LDP, such as those below. An LDP can include the improvement of health and reduction in inequalities as an objective which can then also be included as an indicator in an Annual Monitoring Report (AMR).

The [World Health Organisation](#) defines health as: ‘a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity’. Health is affected by a wide range of factors (the wider determinants of health).

[Health inequalities](#) are ‘the unfair and avoidable differences in health status seen within and between communities’. Health is shaped by ‘building blocks’ such as safe and warm homes, access to services, and opportunities for healthy behaviours. However, achieving and maintaining good health is becoming increasingly difficult and the differences between communities in their ability to maintain good health (health inequalities) is increasing (Masters R, et al 2025).

An LDP should include local health and inequalities data (see section 4) as this provides the context and evidence to shape local policies. A summary should be included as to how the LDP interpreted and used the data to inform the detail within the plan. Developers should be supported to access data, interpret and use it to inform scheme design and plans, and have access to the evidence of health benefits of the built and natural environment.

It is recommended that local planning authorities conduct a Health Impact Assessment (HIA) when preparing LDPs to help ensure that health and wellbeing and inequalities are fully considered and addressed. A HIA can also be a requirement for development of a certain type or scale within LDP policy. Further information about HIAs is in Appendix 1.

A local authority could develop a background evidence/ technical paper on health to inform the LDP, using the information in this guide.

The table below summarises actions that local planning authorities could take in developing health and wellbeing focused local development plans and signposts to the section in this guide with more information.

Action for LDP	Detail	Planning Health Places guide section
Include references to national (Wales and UK) and local guidance, standards and strategies, in relation to planning and health	National strategies and policies are clear in setting a framework for creating healthy places and local strategies set the direction for relevant policies in the LDP so should be referenced	2
Include a definition of health and health inequalities	Use clear language to define the terms and reference sources for the definitions	3
Include references to local health and inequalities data	A local profile should highlight key health, wellbeing and inequality data and evidence should inform and shape policy and development proposals. Developers should be provided with guidance on how to take account of and address local health needs and inequalities in their proposals.	4
Include healthy places principles in planning policy	Include policies in LDPs and guidance for developers around the specific built environment attributes that have health benefits from a robust and clear evidence base	5
Include healthy places principles in planning policy	It is recommended that local authorities undertake a HIA as part of the preparation of a LDP, and consider a rapid participatory stakeholder HIA in addition to a HIA within an integrated assessment	Appendix 1

4 Demographic and population health indicators to inform an LDP

It is important to consider the demographics of a local population and evidence of their health needs when developing local planning policies. Areas and communities are diverse and the impacts of plans and developments on different population groups and their health will not be the same. Developers should be considering how to address baseline local health data and trends, such as levels of obesity, an ageing population, or rising levels of dementia amongst the population.

The demographics and population health needs for a local area can be used to create a local profile that should inform decisions about planning and design. This profile should form part of a background evidence paper on health for a LDP and can be used as part of a planning application process, for example by being included in a Health Impact Assessment (HIA) (see Appendix 1).

Regional Partnership Boards in Wales undertake [Population Needs Assessments](#) which include information about local population health need, and a LDP should make reference to the local area [Public Service Board's](#) latest wellbeing needs assessment and wellbeing plans. Assessments of local wellbeing needs are required every five years under the Wellbeing of Future Generations Act 2015 and provide some key health indicators for the local population. Some areas may also have a joint strategic health needs assessment which provides further key indicators for population health and wellbeing, such as in [Gwent](#).

Each of the sections below includes references to key demographic and population health and inequalities indicators and the data sources for these. Each section includes an example of how the data may be referenced in a local profile.

For further information on how to access and use data and evidence referred to in this section contact the Wales Health Impact Assessment Support Unit (WHIASU). WHIASU.PublicHealthWales@wales.nhs.uk.



POPULATION DEMOGRAPHICS

Any local profile included as part of a background evidence paper for an LDP should include key local population demographic details, for example whether there is a growing and/or ageing population; if there are high proportions of ethnic minority communities; a large veteran or student population etc; and details around health inequalities and where areas of high deprivation are located. This information is important to help shape the policies or proposals to address local need.

Commonly in Wales, a demographic profile will highlight that a local population is ageing, with increasing numbers of people in older age groups. Creating healthy environments and opportunities for older people enables good health and wellbeing and can support older people to live healthy independent lives and reduce the need for health and care services in older age. Improvements in transport, access to places of leisure and exercise, and housing, support the population to age well. Creating spaces and places which benefit older people benefits the population in general, for example a dementia friendly environment which is easy to navigate will be beneficial for everyone.

Figure 2: Example of how population demographic data could be outlined in a local profile

- The population of [local area] has [increased/decreased] steadily over the last 20 years and projections indicate that the population will continue to experience growth/decline of [x%] up to [year].
- Between [year] and [year], there was an [increase/decrease] of [...%] people aged 65 years and over, an [increase/decrease] of [...%] people aged 15 to 64 years, and an [increase/decrease] of [...%] children aged under 15 years.
- By [year], the number of people aged 65 to 84 is projected to increase by [...%] and the number of those aged 85+ is projected to increase by [...%].

Data sources for population demographics

- Population demographics and trends: Office for National Statistics. Census 2021. [How the population changed where you live](#) (each local authority can be selected in the drop-down box)
- Population projections by local authority/age: Welsh Government, Stats Wales [Population Projections](#)

INEQUALITIES

Health inequalities

Health inequalities have been a longstanding issue in Wales. Life expectancy and mortality rates in Wales have shown little change or improvement since 2011. The gap in life expectancy between the least and most deprived has been generally increasing in recent years for males and females, suggestive of growing inequality (Public Health Wales, 2022).

Inequalities in health can be identified through local data, but also through health impact assessments which consider specifically potential impact on vulnerable population groups. Recommendations in a HIA can support local authorities and developers with understanding what actions can be undertaken to avoid and tackle inequity.

Figure 3: Example of inequalities data for a local profile

There are clear inequalities across [local area] as shown in figure [x] (Insert an image of the local area section of the [Wales Index of Multiple Deprivation map](#) of the health deprivation domain to illustrate the areas of deprivation).

- The life expectancy gap between the most and least deprived areas of [local area] was [no. of years] for men and [no. of years] for women in [year]
- The gap in healthy life expectancy at birth (comparing least to most deprived fifth) ie years lived in good health, for males was [no. of years] and for females [no. of years] in [year].

Data sources for health inequalities

- Inequalities / Deprivation: Welsh Government.
- Life expectancy and healthy life expectancy: [Public Health Wales Observatory. Public Health Outcomes Framework - Public Health Wales \(Local authority and health board level data\)](#)

Environmental Inequalities

Environmental inequalities impact on health and wellbeing and reinforce health inequalities (Institute of Health Equity, 2021) where poor environmental conditions such as air quality or poorer quality housing combine with other factors such as poorer access to services which influence health. There is a gradient in the distribution of environmental disadvantages, with those living in the most deprived neighbourhoods more exposed to environmental conditions that negatively affect health, for example, air pollution, damp and poorly insulated housing, flooding, living near major roads, and lack of green spaces.

Additionally, the unhealthiest high streets, for example with the highest number of fast food outlets, betting shops, more littering and fouling, noise and air pollution, unhealthy retail outlets, crime and fear of crime and road traffic collisions are likely to be located in more deprived areas (Marmot et al., 2020).

Figure 4: Example of environmental inequalities data for a local profile

Figure [X] illustrates that there are clear inequalities in terms of the physical environment across [local area], with particular areas / wards experiencing the most environmental disadvantage. (Insert an image of the local area section of the [WIMD map](#) of the physical environment deprivation domain)

Data source for environmental inequalities:

- Welsh Government, StatsWales. [WIMD map](#)

POPULATION HEALTH AND WELLBEING

There are some key health concerns which are impacted by the planning and design of the local environment (Public Health England, 2017b), (Public Health Wales, 2018): obesity, diabetes and mental health (including dementia). However, there are many other health conditions which could be highlighted in a local area profile, such as heart disease, cancers and lung disease if required to illustrate the local population health needs.

The prevalence of health conditions will vary across Wales and within local areas, so it is important to identify the data which is specific to an area, as this can help to provide evidence for planning policy, plan and development decisions. For example, in an area where high levels of obesity are prevalent, LDPs can use this evidence to strengthen policies such as managing the food environment and enhancing access to physical activity opportunities.

Obesity

Obesity is a significant public health challenge. The prevalence of adults living with obesity in Wales increased by 44% in the last 20 years (National Survey for Wales 2016-17 to 2022-23) (Public Health Wales, 2024a).

Being overweight or obese significantly increases the risk of developing chronic diseases including cardiovascular disease, cancers, diabetes, musculoskeletal illnesses and chronic respiratory disease (Public Health Wales, 2019). Rates of overweight and obesity are rising across Wales, with higher rates in areas of high deprivation (Masters R, et al 2025).

In Wales in 2021-22, the [National Survey for Wales](#) reported 62% of adults were overweight or obese, of which 25% were obese. Nearly one in three children across Wales in 2023 were overweight or obese by the time they started primary school (Welsh Government, 2023).

In most cases overweight and obesity is a multifactorial disease influenced by obesogenic systems and environments, lifestyle choices (food and drink consumption, physical inactivity, psycho-social factors), medical conditions and genetic variants (National Institute for Health and Care Excellence, 2025). A large majority of school aged children in Wales do not meet physical activity level guidelines, with just 23% of boys and 14% of girls in 2023 meeting guidelines. There are inequalities gaps in fruit and vegetable consumption, with 53% of pupils from high affluence families reporting eating at least one portion per day in 2023, compared to 36% from low affluence families (Public Health Wales, 2024c).

An obesogenic environment limits the availability of healthy sustainable food at locally affordable prices, limits access to facilities, services and shops by walking, cycling or wheeling and public transport and reduces social connectivity between and within communities (The Lancet, 2025).

Figure 5: Example of obesity data for a local profile

- In [local area] [...%] of children (aged 4 to 5) were living with overweight or obesity in [year/s], compared to [...%] in Wales
- In [year/s], in [local area], [...%] of working age adults were a healthy weight, compared to [...%] in Wales

Data sources:

- Children: Public Health Wales. Child Measurement Programme for Wales [Child Measurement Programme](#) [Public Health Wales](#)
- Adults: Public Health Wales Observatory. [Public Health Outcomes Framework](#) - Public Health Wales

Diabetes

There has been a steady increase in the number of adults with diabetes in Wales, mostly due to an increase in Type 2 diabetes (Public Health Wales, 2023). Being overweight or obese is the main risk factor for type 2 diabetes.

Approximately 10% of the total NHS Wales budget is spent on treating people with diabetes. Wales has the highest percentage of people living with diabetes in the UK (Future Generations Commissioner for Wales, 2025), and numbers are rising. Between 2009-10 and 2022-23 there was an increase of almost 40% in adults aged 17+ living with diabetes in Wales (Public Health Wales, 2023).

Despite growing prevalence, most Type 2 diabetes cases are preventable. Planning healthy places can enable people to be more active and access healthier food options, supporting management of weight and lowering obesity levels.

Figure 6: Example of diabetes data and evidence for a local profile

In [year/s] [...%] of registered patients aged 17+ years in [Health Board area] had a diagnosis of diabetes, compared to [...%] in Wales

Data source:

- Public Health Wales (2023) [Diabetes prevalence – trends, risk factors, and 10-year projection](#)

Mental health

11% of adults in Wales reported a mental health condition in [2021-22](#). In 2021, 28% of children aged 11-16 in Wales reported experiencing depressive symptoms (Masters R, et al 2025).

Where someone lives can have an impact on their mental health, with the quality of the built environment being a determining factor (Royal Town Planning Institute, 2024).

Becoming unable to heat a home doubles the risk of adults developing new mental health conditions and triples the risk of these getting more severe if people already have mild mental health conditions, even after controlling for other socio-economic variables (Donkin and Marmot, 2024). People living in cold homes are at increased risk of mental health distress (Hill R, et al 2024).

The quality of the wider built environment is a determining factor for mental health, with noise, pollution levels, quality of greenspace and access to services having an impact (Royal Town Planning Institute, 2020). Planning and design has a key role to play in creating environments which support, benefit and enhance mental health, such as by creating dementia friendly environments. The Royal Town Planning Institute published a [Dementia and Town Planning](#) guide for planners in 2017 (updated in 2020).

Figure 7: Example of mental health data for a local profile

- In [local area], [...%] of the adult population reported a mental health condition in [year/s] compared with [...%] in Wales
- [...%] of adults in [area] rated their satisfaction with life as 7 out of 10 or higher in [year], compared to [...%] in Wales. This was the highest / lowest of all local authorities in Wales.

Data source:

- StatsWales: [Adult general health and illness](#) by local authority and health board
- Public Health Wales Observatory: [Public health outcomes framework](#) : life satisfaction among working age adults



5 Principles for Planning Healthy Spaces

This section outlines how key design and planning principles can impact on health and address some of the health concerns outlined in earlier sections and achieve positive health outcomes. The principles in this section have been informed by research and practice in planning and health and can be used to guide the development of local planning policies or strategies.

Spatial planning provides opportunities to create places and spaces that promote better health and wellbeing for individuals and communities together with reducing health inequalities. The characteristics of the environment and design and planning principles impacting on health and wellbeing are all linked as illustrated in Figure 8.

Figure 8: Associations between design and planning principles and health and wellbeing



Source: McKinnon et al. *BMJ* 2020;369:m795. Adapted from Public Health England's *Spatial planning for health* (Public Health England, 2017b)

NEIGHBOURHOOD DESIGN

A healthy neighbourhood supports health and wellbeing in a holistic way, encompassing physical, mental and social health benefits. Healthy neighbourhood design creates environments that can protect and promote health and wellbeing.

Healthy neighbourhood design creates spaces that are accessible, convenient, encouraging of healthy behaviours and meet the needs of different ages, cultures and abilities. Being physically active is an evidence based, effective way of improving and maintaining health (NHS, 2024) and the design of a neighbourhood is key to enabling movement and activity.

People need to be able to access a choice of everyday facilities such as shops, schools and community activities locally, ideally through walking/cycling (Bird, EL. et al, 2024). This everyday activity supports health and wellbeing and helps people to feel part of a community. Being able to meet others and make connections is important for reducing loneliness and isolation and improving mental wellbeing.

Access to high quality opportunities for play is critical for the health and wellbeing, enablement of physical activity and the development of children. Play can improve community relationships and increase social connections, improve cardiovascular health and decrease risk of heart disease, and improve mental wellbeing (Hartt, M., et al 2023).

[Play Wales research](#) has revealed there has been a decline in children's freedom of movement and associated ability to play in their neighbourhoods, with long term trends showing that children's time is less devoted to play. Traffic remains a major barrier to safe play space for children. Children often make use of public spaces in order to play, even if they are not formally designated 'play areas'. There is a need to consider public spaces as providing opportunities for play, as well as the provision of play specific spaces.

Provision for teenagers in parks and public spaces is often considered in terms of skate parks, multi-use game areas and other pitches. Recent data indicates that 85% of skateboarders are male, 15% are female and multi-use games areas (MUGAs) are used more by boys and men (Make Space for Girls, 2023). This inadvertent absence of provision for play for teenage girls impacts on the rights of girls for play and on their sense of belonging, on activity levels and the consequential impact on physical and mental health.

Creating an [age-friendly environment](#) through planning and design can enable current and future generations of older people to live independently, have fulfilled lives and have good health and wellbeing.



Guidance for creating healthy neighbourhoods

- Where new facilities are not provided on site, connect new development to existing community services and facilities, within walking or cycling distance
- Provide opportunities for social connection
- Enhance public realm through provision of adequate lighting to improve safety, environmental improvements to reduce fear of crime
- Mixed use tenures and co-location of facilities
- Enable access to nature and green and blue infrastructure
- Enable walkability, permeability and active travel opportunities
- Design in opportunities for informal play throughout a development, in addition to designated play spaces
- Design play and leisure/sport opportunities to meet a range of local population needs – consider designing for different age groups, genders, abilities and cultures
- Provide safe spaces for play, especially for girls and women, by considering location (overlooked by housing), accessibility, and type of provision (research shows that MUGAs can be intimidating spaces for girls and women)



HOUSING

Housing is one of the building blocks for a healthy life and has a fundamental impact on physical and mental wellbeing.

Poor quality housing can lead to issues such as mould and damp, lack of warmth, energy inefficiency, fuel poverty, overcrowding, noise and lack of access to green spaces, and these in turn are linked to ill-health. Children's lung function and brain development can be negatively impacted by living in a cold home, resulting in impaired cognitive development and lower school attainment. Damp or mouldy homes increase the risk of developing lung conditions such as asthma by 30-50%, particularly amongst children (Watson I, et al 2019).

Living in cold homes increases blood pressure, the risk of a heart attack, and the risk of developing winter infections and respiratory problems. Recent research demonstrated that living in a home where the temperature is lower than 18 degrees is associated with negative impacts on health and wellbeing, particularly for older people or those with health conditions who typically spend more time indoors (Janssen H, et al 2022). Arthritis, grip strength and sickle cell anaemia can all be made worse by living in cold conditions and a reduction in dexterity leads to an increased risk of falls in the home.

Local planning policies are best placed to focus on the quality and provision of secure, affordable and diverse homes to meet the needs of the population for example in relation to age, culture and mobility.

Local authorities may choose to embed the Healthy Homes Principles identified by the Town and Country Planning Association (TCPA 2024) within LDP policies.

Figure 10: Healthy Homes Principles



Source: Healthy Homes Principles, TCPA (2024) <https://www.tcpa.org.uk/resources/healthy-homes-principles/>

Guidance for healthy housing

- Provide warm, affordable, energy efficient homes
- Ensure homes have natural lighting and good ventilation
- Provide safe, accessible housing for those with sensory or physical impairments and/or limited mobility, and for families with young children
- Provide age-friendly, culture and faith sensitive and dementia friendly homes
- Embed inclusive, age-friendly and accessible (particularly for those with disabilities or low mobility) design in regeneration plans and schemes
- Provide new homes linked to walking and cycling infrastructure
- Maximise access to and use of green infrastructure opportunities
- Provide parking/storage for a range of cycle types and/or mobility scooters, as required
- Provide public open space on-site, in proportion to the scale of development

FOOD ENVIRONMENT

Access to a food environment that promotes healthy choices is an essential part of a multi-component approach to reducing levels of overweight and obesity.

A whole system approach to healthy weight (including individual behaviour change, food preparation and food served in schools, workplaces and NHS settings) is required to address such a complex issue, as recognised by Welsh Government's long term healthy weight strategy ([Healthy Weight, Healthy Wales](#)). Local planning policies have a key role to play in creating places that can support people to make healthy choices with food. Local policies can focus on controlling hot food takeaways, enabling good home design (with adequate kitchen facilities) and neighbourhood design incorporating food growing opportunities.

A Supplementary Planning Guidance [template](#) for healthy-weight environments is available from Public Health Wales which can be adapted by local authorities in Wales. The template includes evidence-based policy considerations for healthy-weight environments.

Hot food takeaways and out of home food consumption

Typically, meals purchased out of home are higher in calories, fat, salt and sugar than meals prepared at home and the consumption of meals from out-of-home sources is linked to weight gain (Goffe et al., 2017). A diet high in fat, salt and sugar contributes to the risk of developing health conditions such as obesity (which is also linked to diabetes type 2) and cardiovascular disease.

Research suggests that the concentration or clustering of takeaways in centres can dominate the retail environment, limiting the number of units available for healthier food choices and resulting in an over-exposure of takeaway uses which may influence behaviour. There is strong evidence that higher concentrations of hot food takeaways are present in areas of higher deprivation (Public Health England, 2017a). Children who spend time in deprived neighbourhoods tend to eat more food from takeaways and are more likely to be overweight or obese (Turbutt et al., 2018).

There is evidence around the association between exposure to hot food takeaways and obesity. A cohort study in 2022 found that individuals living within 1km of two or more hot food outlets in an urban area, or 5 or more outlets in rural areas, typically had higher than average Body Mass Index (BMI) compared to those living further away from such outlets (van Erpecum et al., 2022). Another study demonstrated that proximity to hot food takeaway outlets has an association with higher levels of obesity (Pineda et al., 2024).

Hot food takeaways are often co-located with other potentially less healthy land uses, such as betting shops, shisha bars and the availability of alcohol; these factors can influence the health of local communities and add to inequalities in health in areas of deprivation.

Food growing

There is growing [evidence](#) of the benefits of food growing to health and wellbeing. Gardening and food growing can reduce stress and stress related conditions and help to achieve and maintain a healthy weight. Access to allotments and adequate garden space appears to result in numerous positive physical, mental and social health related impacts and outcomes (Johnson, T and Green, L, 2021).

Guidance for a healthy food environment

- Avoid over-concentration and high density of hot food takeaways in town centres or high streets, particularly in areas of deprivation
- Ensure shops/markets that sell a diverse offer of food choices are easy to access by walking, cycling or public transport
- Safeguard, and where appropriate provide households with, access to space to grow food – for example gardens, roof or communal gardens, and allotments.
- Ensure kitchens are adequately sized for preparing and eating meals, and for storage of kitchen appliances and food

NATURAL AND SUSTAINABLE ENVIRONMENT AND CLIMATE CHANGE

Good quality green and blue spaces are strongly evidenced to enhance health and wellbeing, both physically and mentally.

Local planning policies can provide opportunities to include good quality green spaces that are inclusive and equitable, increase the amount of green infrastructure within public spaces and buildings (such as rain gardens or living roofs/walls), promote healthy streets, and link areas of greenspace for active travel opportunities (Bird, EL et al, 2024).

Planning policies can help to reduce the impact of climate change on health, for example by including requirements to reduce people's exposure to extreme weather. Extreme weather impacts refer not just to flooding risks, but other climate related risks such as heat exposure, drought or extreme temperatures. Risks can be reduced through building and street design, energy and water efficiency, ventilation measures and green infrastructure provision.

Environmental hazards and impacts

Air pollution is a major cause of avoidable ill health and deaths with the people most at risk from poor air quality being the very young, the very old and those already suffering with ill health (Public Health England, 2018).



Analyses of local air pollution, multiple deprivation and health data in Wales has found that air pollution concentrations (notably Nitrogen Dioxide) are highest in the most deprived areas. This is exacerbating health inequalities and contributing to an increased prevalence of pollution-related health problems, such as lung disease and lung cancer, heart disease and stroke both for people living in these areas and those travelling through them (Grey C, et al 2018).

Evidence indicates that living in an area with clean air can lead to positive changes in people's health behaviour. Green spaces can help mitigate against air pollution, which helps tackle climate change and reduce health impacts including cardiovascular and respiratory disease (Public Health Wales, 2024) and support social integration.

Noise pollution, particularly from transportation, is a key contributor to poor health, including sleep disturbance, heart disease, stroke and diabetes (Jephcote et al., 2023). The World Health Organisation has recognised that after air pollution, noise pollution is the second largest environmental cause of health problems. Light pollution similarly has a negative impact on health and wellbeing, primarily through disturbing sleep patterns (Town and Country Planning Association, 2024).

Access and engagement with the natural environment

Being physically active in green outdoor environments and living near and having access to green spaces can improve health, regardless of social class. A systematic review in 2025 identified positive benefits of green space exposure specifically on maternal and neonatal health (Khalaf et al., 2025), and the impacts are positive at a whole population level (Markevych et al., 2017).

Access to recreational infrastructure, such as parks and playgrounds is associated with reduced risk of obesity among adolescents and increase in physical activity (Public Health Wales, 2018). Green spaces are also associated with social interaction and improved social networking (Markevych et al., 2017), but individuals and communities across Wales do not have equal access to green and open spaces, with those in the most disadvantaged areas having the least access (Public Health Wales, 2024).

There is also strong evidence to suggest that green space is associated with better mental health (Geary, R. et al, 2023). A large-scale longitudinal study found that people living in greener or bluer areas in Wales are less likely to seek medical help for a common mental health disorder, particularly those living in disadvantaged areas.

Local planning policies can ensure that new, good quality green space is provided, and it is accessible and equitable. Green infrastructure statements as required in Planning Policy Wales enhance this potential and securing net benefits for biodiversity provide opportunities for increasing and improving green spaces.

Adaptation to climate change

Climate change is affecting the health and wellbeing of the population in Wales, in both a positive and a negative way (Edmonds, N., and Green, L, 2023). Positively it can impact on increases in active travel and outdoor activity, reduction in emissions and the creation of new industry, skills and jobs. Negative impacts include food insecurity and reduced access to healthy food, and increased heat leading to health issues. Climate change has the potential to have major impacts across a number of determinants and is likely to affect some population groups in a disproportionate way.

Heat and heatwaves are having a clear impact on public health. The impact of heat on individuals varies according to vulnerabilities such as age, physical health, pregnancy, environmental factors such as living in an urban area, housing conditions, and socio-economic status (Mehrhof and Bunn, 2024).

Mitigation measures are essential to reduce future heat stress in Welsh cities and towns and can be influenced through planning policy. These include interventions such as green and blue infrastructure, choice of trees and artificial shading, choice of both artificial surface materials and vegetation cover, and street layout with proper orientation and aspect ratio (Huang et al., 2024).

Urban communities require trees as essential infrastructure to support public health and climate resilience. The [Tree Equity Score](#) tool illustrates access in urban areas across the UK to tree cover, and highlights disparities where people may be more at risk of environmental hazards like extreme heat and pollution. The lower the score, the greater the priority for tree planting.

Guidance for creating natural and sustainable environments and addressing climate change

- Require new development to protect, manage, maintain and enhance existing green and blue infrastructure
- Require major development to deliver and/or contribute to new green and blue infrastructure, ensuring it is central to designs, meets the needs of the community and is accessible
- Increase green infrastructure in public spaces eg through living walls/roofs, rain gardens and healthy streets
- Reduce or eliminate noise and light pollution from development
- Ensure provision of trees and shading to reduce heat exposure in spaces where people are likely to gather or use for activity to make them attractive and safe to use
- Consider street layout, orientation and aspect in relation to reducing heat stress
- Require all development to take a proactive approach to climate change mitigation and adaption

HEALTHY TRANSPORT AND ACTIVE TRAVEL

Transport, and the ability to move around, are fundamental aspects of people's lives, affecting where people live, work, interact with others, take part in leisure activity and access services and facilities. Local planning policies play a key role in creating high quality infrastructure that prioritises active travel that is safe, accessible and in appropriate locations, and ensuring connectivity to services and amenities (Bird, EL. et al, 2024).

Improving connectivity through the provision of high quality, safe, appropriately located and accessible walking and cycling routes and improving access to public transport increases the opportunity and ease for people to use these as their first option (Public Health England, 2017b). Walking and cycling is evidenced to reduce risk of premature mortality, benefit mental health and maintain a healthy weight (Laird, Y. et al, 2018).

Alternatives to using a car need to be attractive, easy and safe. Clear, designated cycle lanes and pedestrian routes are important, but other elements of street design also contribute to the promotion of walking and cycling, such as quality footpaths and pavements with tactile surfacing, safe pedestrian crossings (with timings that account for people with more limited mobility), and traffic calming measures such as raised intersections.



Supportive infrastructure that includes inclusive, well-designed and connected trails leading to workplaces, schools, recreational centres and social amenities, with pavements, safe crossings and attractive sights in areas have been found to be effective in supporting active travel (Public Health Wales, 2018).

Initiatives that improve conditions for walking and cycling through reducing speed limits to 20 mph, implementing traffic calming and designating streets as home zones where pedestrians take priority, also contribute to improving road safety.

The provision of public transport is key in reducing reliance on cars and in improving physical and mental wellbeing. Provision of high-quality public transport is associated with higher levels of active travel among children while for older adults, areas with low pollution levels support increased physical activity levels (Public Health England, 2017c). Public transport also facilitates access to services, including health services; access to education and employment; supports social interactions and promotes social inclusion, particularly for vulnerable groups and older people.

Strategic and policy guidance for healthy transport

- Provide active travel routes that are direct, well lit, safe and attractive to use
- Prioritise the retention, development and maintenance of the green infrastructure within route design and development
- Recognise that streets are for people as well as vehicles and prioritise the pedestrian over motorised transport by, for example, implementing 20mph zones, making use of a variety of methods to reduce and control traffic speed (signage, road materials, design, layout, shared surfaces)
- Provide cycle ways and cycle paths that are safely separated from motorised traffic and reduces conflict between street and road users
- Ensure the transport infrastructure supports people with limited mobility and the use of adaptive cycles
- Require the design of new development to enable and encourage children to safely walk, cycle and play in their local environment



6 Horizon scanning

It is essential that planners, health boards and public health officers consider current and future trends which are having and will have an impact both on the planning system, natural and built environment and population health and inequalities.

These include:

- The proliferation of 'dark' or 'ghost' kitchens (kitchen facilities which are often located in industrial units, used by companies to produce and then deliver food ordered online or by phone, rather than a premises where customers go themselves)
- The rise in the move to electrical vehicle (EV) infrastructure
- The proliferation and increased siting of data centres to facilitate increased use of cloud based networks, Artificial Intelligence (AI) and social media
- Home working and the impact of this for road and travel infrastructure, design of homes and the environment
- The increase in delivery services and home shopping and the impact on retail facilities and high streets

All of these have an impact on health and equity and have a place in the planning system.

Actions to enable a better consideration of health and wellbeing when thinking these through could be:

- the increased collaboration between planners and local Health Boards
- the development of specific SPGs for health related topics
- the use of HIA when developing LDPs and replacement Plans, policies and renewing existing or developing new SPGs.

These actions have been used successfully in Wales to benefit both population health and planning at a local level. Some examples are provided below.

- An LDP Reference Group established in Cardiff and Vale University Health Board area with Cardiff and Vale of Glamorgan local authorities to monitor residential growth and consider impacts on health services, and for local authorities to gain insight into the Health Board's strategic planning process.
- Planning for Health and Wellbeing [Supplementary Planning Guidance](#) produced by Cardiff Council (2017)
- Bridgend Replacement Local Development Plan 2018-2033 included a [Health Impact Assessment](#) – Bridgend County Borough Council
- Vale of Glamorgan Replacement Local Development Plan 2021-2036 also included a [Rapid Participatory HIA](#) of the Preferred Strategy – Vale of Glamorgan Council (2023)
- Denbighshire County Council undertook an Open [Space SPG HIA](#) (2017)

7

Closing Note

Spatial planning has a crucial role to play in ensuring the built and natural environment supports health and wellbeing and reduces health inequalities. This guide has presented data, information and practical examples of design and planning principles and policies which can be utilised to inform local planning policy and future developments.

It is recognised that this guide does not cover every potential planning policy area that a local planning authority may wish to consider through a health lens, and that every area in Wales is different, with different challenges and needs. The data in the guide provides a snapshot of population health at a moment in time, and the evidence base for planning and health will be updated over time. This guide provides a basis for planning authorities to take a clear focus on creating healthy places through their local development plans and the planning system. [Quality Assurance Review Framework](#)



Appendix 1

Health Impact Assessments (HIAs)

The Health Impact Assessment (HIA) process enables the assessment of a proposed policy, plan, proposal or development project to identify the potential positive, or impact of unintended negative consequences, upon the health and wellbeing of the population, and specifically on vulnerable groups and health inequalities. HIAs are scalable and systematic and in relation to planning HIAs can be undertaken as part of the LDP preparation, the development of transport, waste or housing plans and policies and also for specific development proposals.

Examples of HIAs and guidance on carrying them out is available on the Wales Health Impact Assessment Support Unit (WHIASU) [website](#). This includes 'Health Impact Assessment (HIA) and Local Development Plans (LDPs): a [toolkit](#) for practice' and many checklists, evidence reviews and templates which can provide assistance to those who are carrying out or commissioning a HIA. A Quality Assurance Review Framework is also available to ensure that any commissioner or developer can critique a HIA to make sure it fulfils a commissioned brief.

Planning Policy Wales recognises that HIA can make a 'valuable contribution towards plan making' and can ensure that health and wellbeing is maximised for the local population.

Within the planning system there are several opportunities for embedding HIA into planning policy and decision making to ensure that health and wellbeing, and health inequalities, are considered and addressed, resulting in the creation of healthy places. One of the key areas is in the production of LDPs, when HIA is commonly integrated into an Integrated Sustainability Appraisal. A rapid participatory stakeholder HIA undertaken in addition can add key stakeholder opinion and expertise to the consideration of health impacts on the local population and determinants of health.

Local authorities may include a requirement within LDP policy for certain major development proposals for a HIA to be undertaken as part of the planning application, and specify that the HIA should be done at an early stage in the process. Applicants should be able to demonstrate how the findings and recommendations from the HIA have informed the design of a scheme.

[TRUUD](#) (Tackling Root Causes Upstream of Unhealthy Urban Development) have created a series of films about using HIA in planning and development, giving practical illustrations of how HIAs are being used in policy and practice.

Glossary

Term	Definition
Active travel	Getting around in a way that means you are physically active, for example walking or cycling
Annual monitoring reports (AMR)	Local planning authorities are required to produce reports to monitor the implementation and effectiveness of the Local Development Plan
Corporate Joint Committee (CJC)	Established in 2021, responsible for regional coordination between local authorities and for preparing SDPs
Green infrastructure Green and blue spaces	Parks, open spaces, playing fields, woodlands, wetlands, road verges, allotments and private gardens are examples of green infrastructure and spaces. Rivers, lakes, drainage systems and ponds are example of blue spaces
Health Impact Assessment (HIA)	A combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population (WHO, 1999)
Hot food takeaway	An establishment preparing food to be consumed off the premises
Local Development Plans (LDPs)	A plan which specifies and determines the use of land over a set period of time, serving as a framework for local planning decisions
Local Planning Authority (LPA)	LPAs produce Local Development Plans and have responsibility for implementing the local planning system, making decisions on planning applications and ensuring development is in accordance with local policy
Local well-being plans	Produced by Public Service Boards for local authority areas, focused on the collaboration of public bodies to improve the wellbeing of the local population
PHW	Public Health Wales
Population needs assessment (PNA)	A formal evaluation carried out by a PSB on the care and support needs of a local population and consider the level of services required to meet the need
Public Services Board (PSB)	PSBs are statutory boards responsible for assessing and addressing the wellbeing needs of the population within a local authority area. Members include local authorities, health boards and other public bodies
Regional Partnership Board (RPB)	A collaborative body consisting of health boards, local authorities and the third sector, to improve how health and care services are provided to meet community needs in a region
Spatial Planning	Management and allocation of space and resources, through the creation of a plan which can be at national, regional or local level
Strategic Development Plan (SDP)	A development plan for each of four regions in Wales: North Wales, Mid Wales, Southeast Wales and Southwest Wales, addressing cross-boundary issues between local authorities
Supplementary Planning Guidance (SPG)	SPGs support local development plans by providing detailed planning advice on a range of specific topics, and expand on LDP policies
Sustainable development	Process of improving the economic, social, environmental and cultural wellbeing of Wales, and is a founding principle of the Wellbeing of Future Generations (Wales) Act 2015
WHIASU	Wales Health Impact Assessment Support Unit

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