

Scottish Parliament's Economy and Fair Work Committee consultation on new realities of retail and ecommerce in Scotland – call for views

**Response from Obesity Action Scotland
Closing date: 16 March 2022**

Keeping town centres alive

Question 6 – how are Scottish high streets and town centres changing? What are strengths and weaknesses of Scotland's town centres?

Town centres are the lifeblood of many communities and are where many people access the services and facilities they need for everyday life. As such, town centres and high streets play an important role in health and wellbeing outcomes of local residents, for example, the influence of the local food environment and local decision making with regards to the types of shops and premises permitted. This is both a strength and a weakness of town centres. Where decisions are taken in a positive way, with a focus on health promoting outcomes, this is a strength; where the decisions taken have a negative impact on health and wellbeing, this is clearly a weakness.

Scotland faces a significant challenge from overweight and obesity, with just under two-thirds of adults in Scotland being either overweight or having obesity¹. Obesity is often described as a normal response to an abnormal environment. Our minds and bodies respond to the environments we live in and unless they allow us to make good physical activity and diet related choices easily, then we are set to put on weight. Town centres form a key part of physical environments and we must create places that are healthy weight environments, that is places which support and facilitate access to attractive shops and premises selling healthy, nutritious sustainable food, and which also promotes physical activity and active travel. In this regard, ongoing processes of town centre action and investment offer a unique opportunity to create physical environments which enable access to healthy food and physical activity. We would like to see this extended beyond new town centres to include renewal of existing town centres. For town centres to support and enhance the lives of people in Scotland, they need to support and enable choices that lead to better health and wellbeing.

Our diet in Scotland is currently poor, and we have consistently missed achieving Scottish Dietary Goals for the last 20 years². This poor diet is the result of many factors. The situation of outlets selling food of poor nutritional quality, and fresh food at much higher prices, has been one such factor in changing our diets. Town centres and the wider distribution of retail outlets currently play a role in creating environments where the circumstances are much more likely to lead to unhealthy food choices, and there is often a significantly greater concentration and clustering of these in more

¹ Scottish Health Survey 2020 edition – telephone survey volume 1 – main report
<https://www.gov.scot/publications/scottish-health-survey-telephone-survey-august-september-2020-main-report/documents/>

² <https://www.foodstandards.gov.scot/publications-and-research/publications/estimation-of-food-and-nutrient-intakes-from-food-purchase-data-in-scotland-between-2001-and-2018>

deprived areas³. Further, evidence suggests that healthy essential food items can cost up to three times more in more deprived areas⁴, and the poorest fifth of UK households would need to spend 40% of their disposable income on food to meet Eatwell Guide costs, compared to just 7% for the richest quintile⁵. These factors combine to exacerbate pre-existing inequalities and can create disproportionately negative health and wellbeing outcomes in more deprived areas.

Accessing a healthy diet and maintaining a healthy weight are key public health preventative measures we must take in Scotland to tackle the challenges we face around non-communicable diseases such as type 2 diabetes and cancer. We note and welcome the Public Health Priorities for Scotland, in particular the priority for diet, physical activity and healthy weight. As a result, all government policies must take steps to address and deliver on the priorities. We would urge any policy decisions regarding town centres, such as in town centre action plans and renewal, to take account of the priorities and any associated actions to support achievement of public health objectives/outcomes.

Food is a fundamental need for public health and ongoing work on proposals to reshape town centres offers a significant opportunity to influence how we access food and what type of food we access. If we are to ensure a healthy, resilient population, we need to ensure the reshaping process plays its role in enabling access to healthy, nutritious food in a variety of ways, including:

- easily accessible and attractive retail and out of home premises offering healthy food choices at a density that reflects the needs of the local population, for example incentivising healthy food retailers to enter low-income areas
- enabling and supporting the supply and sale of affordable healthy nutritious fresh food
- preventing and discouraging oversupply of foods high in fat, sugar and salt, for example through preventing positioning of unhealthy food outlets where children gather.

Question 8 – how can equality and diversity issues be addressed in policies that create and sustain resilient town centres?

Promoting equality and diversity in policies to create and sustain resilient town centres is very important. Ensuring appropriate opportunities for participation in decision-making processes around town centres can be an important step in addressing these issues and ensuring town centres are resilient. This needs to go beyond basic consultation processes to promote co-creation and community empowerment, such as through focus groups, workshops, and local citizen assembly models for example, to build in lived experience to decisions and decision-making processes.

Specifically, with regards to obesity, when promoting and creating opportunities for participation, it is important to be sensitive to diverse cultural practices and to be mindful of language used, to avoid stigmatisation. Weight stigma is a significant barrier to participation and access to services for many people, with profound effects on their mental and physical health, and overall sense of wellbeing. Such stigma can worsen inequalities and leave individuals feeling even more marginalised⁶. Whilst often cited as a barrier in relation to participation in and access to services, it is also relevant here to discussions on addressing issues of equality and diversity to create and sustain resilient town centres. Where participation opportunities are offered, such as those outlined above, there is a need to ensure that no one feels excluded from participating because of their weight. Further, there are practical things that can be done for participation opportunities and in town centres, to show they are not stigmatising, including provision of street furniture that is size inclusive, and avoiding

³ Macdonald, L, Olsen J. R, Shortt, N. K and Ellaway, A (2018) Do ‘environmental bads’ such as alcohol, fast food, tobacco, and gambling outlets cluster and co-locate more in deprived areas in Glasgow City, Scotland? Health and Place 51, 224 – 231

⁴ <https://www.smf.co.uk/wp-content/uploads/2018/10/What-are-the-barriers-to-eating-healthy-in-the-UK.pdf>

⁵ Food Foundation (2021) The Broken Plate. The State of the Nation’s Food System

⁶ World Health Organisation (2017) Weight bias and obesity stigma: considerations for the WHO European Region https://www.euro.who.int/__data/assets/pdf_file/0017/351026/WeightBias.pdf

inappropriate language, for example. Such practices can help to address issues of diversity and equality and put in place practices to ensure resilient town centres can be sustained over the longer term.

The Place Standard Tool⁷ is often referenced as a design tool which can be used to encourage participation in place design processes and to ensure places reflect the desires and needs of those living there. The use of such tools can help to overcome and address equality and diversity issues. Through previous engagement in planning and town centre action/review consultation processes, we understood that the Place Standard Tool was being considered as the most useful mechanism for integrating health and place issues with planning and town centre considerations. In relation to the tool, we have previously commented⁸ on the need for caution against the wholesale transference of the themes within the tool alone, on an assumption that it presents a comprehensive mechanism for tackling health and wellbeing and for decisions on high streets and town centres.

Whilst we agree with and advocate policy coherence, the use of only the current place standard headings in decision making and participation processes would leave some significant gaps. At the time of development of the place standard, the understanding of the complexity of the food system and the concept of “food environment” were not fully developed and it is therefore significantly lacking in this area. It is also designed as a mechanism for framing conversations and action at local level, and is useful in this regard, but would still need continuing development to provide a useful tool to town planners and decision-makers to enable strategic and operational decisions to be made.

Further, we note the Town Centre Toolkit has been introduced, with the aim to “put Scotland’s policy approach to town centres into practice”⁹. The Toolkit is for anyone who wishes to have a say in making their town better, including community groups, local authority officers, town centre businesses, and elected representatives. It is welcome that the Toolkit has been introduced and it can make a positive contribution to addressing issues of equality and diversity in town centres, by giving a wide range of stakeholders to have their voices heard. As with the Place Standard, we feel the Toolkit can make a contribution to enhancing and improving participation opportunities for communities but should not be used as the only tool in decision-making, as it would leave some significant gaps.

Question 11 – who or what can drive change in Scottish town centres?

Change in town centres can be driven in number of ways.

National Planning Framework 4

One of these ways is linking in with other policy areas, specifically planning and the draft National Planning Framework 4, which is currently being consulted upon by the Scottish Government and has already been consulted on by the Scottish Parliament’s Rural Affairs, Islands and Natural Environment (RAINE) committee. Specific policies on retail and town centre living feature in NPF4 and this presents an opportunity to drive change in town centres.

With regards to town centre living, as outlined earlier in our response, town centres are the lifeblood of many communities and we support the proposal in policy 27 in draft NPF4 which states that town centre living should be supported and encouraged. In this regard, it is important that a coherent approach is taken, taking account of the wide range of factors which influence physical environments in town centres. The Lancet series in 2011 urged us to create a systems approach to tackling obesity, arguing that ‘business as usual’ was no longer acceptable in terms of its cost on population health¹⁰. Such an approach requires all sectors to be involved, including programmes

⁷ <https://www.placestandard.scot/>

⁸ <https://www.obesityactionsotland.org/media/1449/oas-npf-4-consultation-response-final.pdf>

⁹ <https://towntoolkit.scot/>

¹⁰ <https://www.thelancet.com/series/obesity-2011>

such as town centre renewal and investment. Policy coherence has been identified as a key factor in influencing food systems¹¹. We must ensure that all policies reinforce each other and where we have commitments from Scottish Government to tackle overweight and obesity and improve diet, we must ensure that policies elsewhere in Scotland reinforce, rather than undermine, that commitment.

The retail environment on high streets in recent years has changed significantly, with poor quality design creating healthy food deserts¹². One area of particular concern and frustration reported by local authorities is a perceived lack of power to control the location and density of hot food takeaways and other potentially unhealthy food outlets in their area. It is currently the case in Scotland that clustering and density of hot food takeaways is controlled for other reasons, including anti-social behaviour and town centre viability, but crucially not for health reasons¹³. Conversely in England, some planning authorities have done this on the basis of health by introducing appropriate policies and guidance. To overcome this, we advocate for health to be included as both a material planning consideration and a core principle of the planning system. It is our understanding that these material considerations are the only things that can be considered in relation to a planning application i.e. the grounds on which to approve or refuse an application. It is therefore essential that health is added to the list of material considerations for the planning system in Scotland, to ensure health is at the heart of decision-making processes in town centres. We called for this in our response to the RAINE committee's call for views¹⁴, and will also do so in our response to the Scottish Government's consultation. We echo this call here.

The above examples demonstrate that draft NPF4 can be a driver of change in town centres, where appropriate additions are made, and highlights the importance of taking a cohesive approach to decision-making, accounting for multiple influencing factors. Ensuring health is a primary consideration in the planning system will empower decision-makers in town centres to make decisions that drive positive change, and create town centres which support and promote health as the primary consideration i.e. a health-first approach in all decision-making. NPF4 provides a unique opportunity to create healthy weight environments that can have a positive impact on the health of our nation. For this to happen, health must be a core and primary objective of the planning system, with a health-first position adopted for all decision-making processes.

Covid-19 pandemic

The Covid-19 pandemic has highlighted how important healthy weight is to the overall health of the population and for our response to this and future pandemics. A healthy diet is key for improving immunity, and the interconnectedness between the pandemic (outcomes) and the food system cannot be ignored. This was recognised in the House of Lords report 'Hungry for Change', which concluded "*The Covid-19 pandemic has reinforced the need, and provided the opportunity, for the government to act now with commitment and focus to deliver the improvements to the food system, public health and environmental sustainability that are so urgently required*"¹⁵. Therefore, the response to Covid-19 must include actions to help people in Scotland eat healthier diets, and this includes action to make town centre environments healthier. Town centres provide an important opportunity in this regard.

¹¹ https://www.city.ac.uk/__data/assets/pdf_file/0018/504621/7643_Brief-5_Policy_coherence_in_food_systems_WEB_SP.pdf

¹² Public Health England (2018) Healthy High Streets: Good place-making in an urban setting https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/699295/26.01.18_Healthy_High_Streets_Full_Report_Final_version_3.pdf

¹³ Scottish Government (2018) Research Project: To Explore the Relationship Between the Food Environment and the Planning System

¹⁴ <https://www.obesityactionsotland.org/media/1688/oas-response-npf4-local-gov-committee-jan-2022.pdf>

¹⁵ House of Lords Select Committee on Food, Poverty, Health and Environment Report of session 2019-20.

Hungry for change: fixing the failures in food

<https://publications.parliament.uk/pa/ld5801/ldselect/ldfphe/85/85.pdf>

Building and promoting healthy weight environments, facilitated by changes to our town centres, is now more important than ever and must be considered in the context of recovery from Covid-19. Evidence from research conducted during the Covid-19 pandemic shows a consistent association between obesity (and related underlying conditions, such as type 2 diabetes) and worse outcomes in those with Covid-19. An association between deprivation and ethnicity is also present; obesity prevalence increases across the social gradient and amongst certain ethnicities, exposing widening health inequalities. The Scottish Government champions the building back of a ‘wellbeing economy’, recognising the unequivocal importance of resilient populations and reduction of health inequalities as being vital for a sustainable economy¹⁶. Health and social care costs, workforce resilience, worker wellbeing and days lost to illness can all be improved through better population health and wellbeing, positively impacting on Scotland’s economy: a crucial opportunity for improvement following the economic impact of the Covid-19 pandemic. This required and vital improvement in population health begins with healthy weight environments, including high streets and town centres, that promote physical activity, sustainable and active travel, and access to healthy nutritious food for all.

Further evidence from the Covid-19 pandemic highlights how a changed or modified environment can change people’s behaviours, and town centres and high streets are central to this. To better understand the impact of the pandemic on people’s food consumption behaviours, we commissioned polling in May 2020, and found a clear indication that the pandemic had changed the lifestyles of people in Scotland in both positive and negative ways. The survey found that although 43% reported cooking from scratch more often and 44% purchased fewer takeaways, 54% reported eating more out of boredom, with people reporting more snacking on cakes and biscuits (49%), confectionery (47%) and savoury snacks (48%)¹⁷. These changes demonstrate how quickly a modified environment can change people’s behaviours, and the impact that unhealthy social environments can have on health outcomes. Obesogenic environments are a powerful driver of high obesity levels in Scotland, causing unhealthy circumstances and lifestyles to become the default option.

Question 13 – if not covered elsewhere, what other policy interventions would you like to see to create living and resilient town centres?

An intervention we feel is of relevance which has not already been covered is 20-minute neighbourhoods. These neighbourhoods are proposed in draft NPF4, as a policy intervention to help create liveable places¹⁸. It is welcome that they are acknowledged and introduced into discussions on planning, and can help to create living and resilient town centres. Ensuring the provision of healthy food environments needs to be considered as a core and essential part of these neighbourhoods, prioritising easy access to locally available healthy, nutritious and sustainable food, to ensure they support the creation of places which support health and wellbeing.

It is important to note that a one-size-fits-all approach will not be appropriate for 20-minute neighbourhoods, and local authorities and areas must have the flexibility to adapt and utilise these in a way which is appropriate and will create the best outcomes for their area. In many cases, town centres and high streets will be integral parts of 20-minute neighbourhoods and as such there is a need to ensure that these town centres and high streets are as healthy as possible to achieve optimal outcomes.

¹⁶ The Scottish Government (2020) Economic Recovery Implementation Plan. The Scottish Government’s response to the Advisory Group on Economic Recovery

¹⁷ Obesity Action Scotland (2020) Healthy Diet, Healthy Weight and Resilience
<https://www.obesityactionscotland.org/media/1497/resilience-oas-final.pdf>

¹⁸ <https://www.gov.scot/publications/scotland-2045-fourth-national-planning-framework-draft/documents/>

About us

Obesity Action Scotland provide clinical leadership and independent advocacy on preventing and reducing overweight and obesity in Scotland.

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