



WLGA Response

April 2025

Health and Social Care Committee Inquiry: Prevention of ill health - obesity.

Introduction

To inform the Health and Social Care Committee's inquiry into the prevention of ill health - obesity, the WLGA were contacted by letter to provide our views on the matters listed in their letter under provided headings and questions.

Introduction to the WLGA

Welsh Local Government Association: We are the Welsh Local Government Association (WLGA); a politically led cross-party organisation that seeks to give local government a strong voice at a national level. We represent the interests of local government and promote local democracy in Wales.

The 22 councils in Wales are our members and the three fire and rescue authorities and three national park authorities are associate members.

We believe that the ideas that change people's lives, happen locally.

Communities are at their best when they feel connected to their council through local democracy. By championing, facilitating, and achieving these connections, we can build a vibrant local democracy that allows communities to thrive.

Our ultimate goal is to promote, protect, support, and develop democratic local government and the interests of councils in Wales.

We'll achieve our vision by

- Promoting the role and prominence of councillors and council leaders
- Ensuring maximum local discretion in legislation or statutory guidance
- Championing and securing long-term and sustainable funding for councils
- Promoting sector-led improvement
- Encouraging a vibrant local democracy, promoting greater diversity
- Supporting councils to effectively manage their workforce.

WLGA response

Welsh Government strategy and consideration of obesity

- 1. What involvement have local authorities had in the Welsh Government's Healthy Weight: Healthy Wales strategy and associated delivery plans and should this involvement be increased?*

Local Authorities have been involved in the Healthy Weight: Healthy Wales strategy and associated delivery plans and there are examples of where this has worked well (examples provided in response to other questions), however, there could be more involvement as part of the prevention agenda.

The wider determinants of health are the social, economic, environmental, and structural factors that affect health, wellbeing, and health inequalities, which include education, fair work, money and resources, housing, transport, and the built and natural environments. Responses to these wider determinants of health are delivered mainly not from health but by Councils working with local communities, families, and individuals.

In the Healthy Weight: Healthy Wales Delivery Plan 2022-2024 some of these wider determinants are included within the seven priority areas:

- Shape the food and drink environment towards sustainable and healthier options.
- Enable active environments and spaces to encourage more movement in daily life.
- Promote and support families to provide the best start in life, from pre-pregnancy to early years.
- Enable our education settings to be places where physical and mental health remains a priority.
- Remove barriers to reduce diet and health inequalities across the population.
- Build on the development of equitable support services for people to become or maintain a healthy weight.
- Enhance the development of the system of prevention which enables leadership at every level.

There is the possibility of more opportunities with the announcement by the Cabinet Secretary for Health and Social Care, at the Sir Mansel Aylward Spring Summit on the 26 March 2025, of wanting Wales to be the first Marmot Nation. The Gwent Region are already working to become a Marmot Region. The Institute of Health Equity states that a Marmot Place is one that is:

- Embedding action across the Marmot Eight Principles.
- Strengthening partnerships between local authorities, communities, public services, businesses, and voluntary sector organisations.
- Monitoring what is happening locally and taking proactive, preventive action.
- Supporting leadership and advocacy on health equity.
- Developing and embedding transformational process to tackle health inequity.

This is done through a focus on the eight Marmot principles:

1. Give every child the best start in life.
2. Enable all children, young people, and adults to maximise their capabilities and have control over their lives.
3. Create fair employment and good work for all.
4. Ensure a healthy standard of living for all.
5. Create and develop healthy and sustainable places and communities.
6. Strengthen the role and impact of ill health prevention.
7. Tackle racism, discrimination, and their outcomes.
8. Pursue environmental sustainability and health equity together.

The current Healthy Weight: Healthy Wales strategy four themes: healthy environments; healthy settings; healthy people; and leadership and enabling change, all appear to fit within the Marmot principles and requirements.

2. What role could local authorities play in lowering obesity rates?

Local authorities can play a pivotal role in coordinating different sectors and services contributing to lowering obesity rates. All local authorities should set out a clear strategy for how they can support their local health board to lower obesity rates, by aligning their policies and services in e.g. education and food in schools, leisure and access to green spaces, active travel, planning policy. It is vital that local authorities work in partnership with Regional Partnership Boards and Public Service Boards, including the local health boards. Local authorities can also play a key role as enablers for grassroot action by schools, leisure settings and local sports clubs to develop innovative ideas or scale existing approaches.

Individuals and communities across Wales are currently facing many challenges due to the housing crisis and the cost-of-living crisis. These on their own or together may limit the opportunities individuals or families have for cooking for themselves, whether due to being in temporary accommodation without cooking facilities or not being able to afford the cost of electricity or gas to run cookers, ovens etc. Without the means to cook healthy food, the options become limited for what they can prepare and eat, even if they can afford to buy the healthier options. Councils work with individuals and families to ensure they are maximising their incomes and to provide appropriate accommodation as they move on from temporary options. Councils also work with third sector providers to provide food banks, food pantries and other local options that provide healthier options at cheaper prices. The issues are greater than obesity but are likely to contribute to healthy food choices being less of an option.

3. How is reducing obesity taken into account in local authority plans and policies and could this be strengthened?

There may be opportunity for reducing obesity to be taken into account, but it should be noted that economic and employment opportunities need to be balanced out with other risks and that a declined planning application can be challenged and overturned against a Councils decision and advice.

Planning developments will frequently include community spaces, but these are often not prioritised by the developers. In one such example, the Vale of Glamorgan Council had to take legal action so that developers of the Barry Waterfront needed to put in place a Consent Order to limit the sale of properties until the delayed community facilities are delivered. When legal action needs to be undertaken this adds to the costs to the council involved.

There are examples of improved engagement between local Public Health Teams based within the Health Boards and Planning and Housing teams in Councils. Where these have developed Public Health are engaged with directly early on in the planning process to identify and potentially mitigate against potential issues of the development(s) being proposed. These opportunities appear to have developed from the increased engagement and integration where joint projects have been undertaken under Capital RIF programmes, whether these developments were the catalyst or not have not been investigated further.

There is an additional challenge when it comes to obesity where the links between weight and mental health can mean that negative messaging around obesity can increase levels of obesity rather than decrease them or can have unintended consequences leading to the development of more eating disorders especially in younger generations. A healthy attitude to food and weight is therefore more likely to achieve results, and as raised in response to the Cabinet Secretary's statement on waiting times by the Fair Treatment for the Women of Wales (FTWW) there is a need to avoid weight stigma which may limit earlier engagement into health by those who feel that they may be judged.

4. Has there been any joint working between local authorities and health boards in relation to reducing the levels of obesity in Wales?

There have been several projects and programmes that are delivered jointly between councils and LHBs to improve the health and wellbeing of individuals and communities across Wales. However, these may not necessarily have been directly about obesity but through improved physical activity and healthy eating there have been improvements towards healthy weight.

QuickChange which is a programme developed by Podiatry and Public Health in Cardiff and the Vale worked with education to collaboratively produce interactive animation enhancing the promotion and encouragement of daily movement, helping to build and maintain strength and balance in children aged 4-6 years old. Whilst the focus is on strength and balance and foot health, it has improved coordination and physical activity and improved health, the longer-term impacts are yet to be seen.

Opportunities for physical activity outdoors

5. What action is being taken to increase the opportunity for safe, active travel and what are the challenges in encouraging the public to take up these opportunities?

While we've seen a substantial increase in capital spend on active travel in local authorities in recent years, there is still a lot of work to do to reach Llwybr Newydd's target of 45% of

journeys to be made by public transport, walking and cycling by 2040. After all, the total sum of investment in active travel across Wales over the course of the past 20 years of devolution is less than the amount we continued to spend on widening 8km of the 'Heads of the Valleys Road' – the A465 – at approximately £321m.

A functioning active travel network is essential to encourage people in Wales to travel actively. The Active Travel Act plays a vital role in this regard, requiring all 22 local authorities to map comprehensive networks of active travel routes across Wales, to improve them and report on progress made. This can include interventions such as new pedestrian crossings, dropped kerbs or even benches. In 2022/23, 90km of routes were created, increasing the active travel network in Wales to 3,129km. This is out of a possible 7,491km (as mapped out by our LAs), which means Wales has the potential to more than double the network over the coming years. 2020-2021: 106km new routes 2021-2022: 71km new routes 2022-2023: 90km new routes. That said, based on current progress, of an average build of 89km per year, it will take almost 50 years to complete it.

With the exception of a small number of pioneering schools, levels of active travel to schools in Wales remain woefully low. The Active Travel Board's Active Travel to School Subgroup, is developing a policy paper that will set out a more strategic approach to the delivery of active travel to schools. Active travel to school needs a more integrated approach with a 'one stop shop' for schools, local authorities, and active travel practitioners: the setting of robust targets and more effective dissemination of good practice.

Public Health Wales (PHW), in collaboration with Swansea University, has also been developing a tool for local authorities and schools to estimate the percentage of the pupil population living within feasible active travel to school distances. PHW has also developed and piloted an active school travel national digital marketing campaign in 2023/24 to test messaging that would help raise awareness of active school travel and its benefits among parents and grandparents of school-age children.

There are many challenges in encouraging the public to take up active travel opportunities. The main reason is 'motornormativity'; our societies being built and based around private car use (road infrastructure, land-use planning, housing, and location of services) and us being so used to it that we hardly think about alternatives. The private car is in fact too convenient for us all. The media and advertising also contribute to our view of the private car as a status symbol and desirable object. Another challenge to convince more people to actively travel is the lack of safe, convenient, continuous, and well-maintained cycling and walking routes that offer people the same door-to-door experience they experience with the car.

There are multiple other challenges, one of which is about personal safety when walking, cycling, and using public transport. This is especially true when it comes to girls and women who can be subjected to intimidation, harassment and even assault if they are out on their own. Community safety and public protection fall under duties for Councils and the Police, and there is a lot of proactive engagement (including awareness campaigns, CCTV, and



patrols) which look to reduce or deter these incidents and make individuals and communities feel safer. However, until there is a wider culture change this is likely to continue to be an ongoing issue that disproportionately impacts on women and girls.

Access is also an area of significant challenge, school children in rural Wales for example who need to walk through unlit country lanes with no footpath are less likely to be encouraged by parents to catch the bus and will instead be taken by car to school or other activities, due to safety concerns. Poorly laid pavements, or inappropriate placement of cycle paths next to bus stops can make access to wheelchair or visually impaired commuters incredibly difficult to navigate, and places them at risk of harm.

Another challenge is that active travel is not always possible for those with mobility issues, and with the number of people on waiting lists for surgeries such as, knee, hip and back operations continuing to be high, the ability of these individuals to access all opportunities is limited and is only improved when surgery and rehabilitation has taken place.

In addition, there is increasing pressure on families and individuals on how they spend their money, and sometimes using public transport can be seen as a more expensive option. We have seen for example an increase of the use of technology for virtual meetings, including health appointments due to the cost savings and ease for all those involved. This has had an impact on the way people live and work and the choice to travel or not has been impacted. As such, keeping costs low is essential to encourage active travel.

Actions to Increase Opportunities for Safe, Active Travel:

1. **Active Travel (Wales) Act 2013:** This legislation mandates local authorities to map and plan for suitable routes for active travel, ensuring that walking and cycling become the most natural and safe choices for short journeys^[1].
2. **Infrastructure Development:** Significant investments are being made to develop and improve infrastructure, including dedicated cycle paths, pedestrian-friendly routes, and safe crossings. Projects such as the Swansea Central Bridge and Llanelli Masterplan are examples of efforts to create accessible and safe active travel routes^[2]. Historical projects such as the regeneration of the Llanelli Coastline to develop the Millennium Coastal Park ([Llanelli & the Millennium Coastal Park - Discover Carmarthenshire](#)) in 2000 has had a huge impact in opening up opportunities for people to walk and cycle on along a stunning 13 mile traffic free path, with 1,000's of users per day. A new development sees the Tywi Valley path (<https://www.carmarthenshire.gov.wales/business/development-and-investment/tywi-valley-path/>) connecting Carmarthen and Llandeilo opening up a 20 mile safe, accessible walking and cycling route.
3. **Safe Routes to Schools:** Prioritising safe routes to schools encourages children and their families to walk or cycle, fostering early adoption of active travel habits^[3]. [Walk to School - Carmarthenshire County Council](#).

4. **Public Transport Integration:** Enhancing links between active travel routes and public transport options makes it easier for people to combine walking or cycling with bus or train journeys[3].
5. **Community Engagement and Education:** Many local authorities run campaigns and educational programs to raise awareness about the benefits of active travel and to encourage community participation[4]. One of the key challenges facing schools is transport to and from activities during the school day e.g. for trips to the local museum, archive, theatre, library, and in particular for primary schools to attend school swimming lessons, especially now that this specific requirement has been removed from KS2 of the curriculum. Carmarthenshire are in the initial stages of exploring alternative models of school transport, including the possibility of strategically placed, electric / hybrid mini busses at secondary schools as hubs to serve their local feeder primary schools and the wider community for out of school hours provision. This could potentially be supplemented by parent / volunteer drivers to minimise costs and make maximum use of these resources, with similar community-based models already existing via groups such as Dolen Teifi Community Transport. <https://www.dolenteifi.org.uk/home>. An all-Wales approach to this challenge would be welcomed, taking account of the need to sustain local bus companies too.

Challenges in Encouraging Public Uptake:

1. **Behavioural Change:** Shifting public habits from car dependency to active travel requires significant behavioural change, which can be slow and resistant to change[5]. The challenges here are quite different in rural v urban communities and a one size fits all approach will not work.
 2. **Safety Concerns:** Perceptions of safety, particularly in urban areas with high traffic volumes, can deter people from choosing active travel options[5].
 3. **Infrastructure Gaps:** While progress is being made, there are still gaps in the active travel network that need to be addressed to ensure continuous and safe routes[5].
 4. **Weather and Topography:** Wales' weather and hilly terrain can be barriers to active travel, making it less appealing compared to other modes of transport[5]. Seasonal challenges are also very real with Winter active travel is much more challenging in terms of light, temperature and safety.
 5. **Funding and Resources:** Ensuring sustained funding and resources for the development and maintenance of active travel infrastructure is a continuous challenge[3]. One of the key challenges here is joining up department and partners to create co-ordinated, integrated solutions. Within local authorities, forward planning, transport, education, and leisure teams need to work closely with external agencies such as Natural Resources Wales, trunk road agencies; Transport for Wales, bus companies and community groups to deliver real change.
6. *How are planning policies ensuring that all communities have equal access to open spaces to encourage regular participation in physical activity and outdoor activities?*

At a very general level, this kind of thing is at the heart of placemaking and ‘good planning,’ regarding location of new developments (and space being secured as part of developments). i.e. allocating new growth within or (worst case) edge of settlements, where that growth is close to opportunities to exercise, and/or where there are transport options readily available for people to get to those opportunities.

‘Equal access’ is probably a slightly problematic concept, as some parts of settlements will always be closer and more accessible than others- possibly a more achievable and realistic aim is that everyone has at least a basic and fundamental opportunity and level of access. Planning includes:

- **Technical Advice Note (TAN) 16:** This guidance ensures that local authorities incorporate sport, recreation, and open space considerations into their planning processes[2]. It emphasises the importance of accessible open spaces for all communities.
- **Local Development Plans (LDPs):** These plans include provisions for the protection and enhancement of existing open spaces and the creation of new ones[2]. Caerphilly CBC and Carmarthenshire CC supplementary planning guidance ([mgConvert2PDF.aspx](#)) ensure that new developments include adequate leisure and open space[6].
- **Open Space Audits:** Regular audits are conducted to assess the availability and quality of open spaces, ensuring that planning policies address any gaps and promote equitable access[1].

7. *What action is being taken to provide safe environments where children can play in the natural environment?*

Councils have to prepare Play Sufficiency Assessments, in relation to which Welsh Government have recently issued revised guidance: [Wales: a Play Friendly Country - Statutory Guidance](#), along with a supporting Toolkit.

As part of their Play Sufficiency duties, local authorities in Wales are taking practical steps to create safe, natural spaces where children can play and explore. For example, under the Duty, authorities such as Carmarthenshire are improving play facilities based on local consultation—Llanboidy’s new park is a direct result of this approach. Councils are also using Local Development Plans to protect and develop green spaces, like in Bridgend, where the Porthcawl waterfront regeneration includes woodland attractions and natural play areas.

Support for outdoor learning is growing too. Bridgend has funded forest schools in eight primaries, while schools like Rhayader Church in Wales Primary in Powys have built outdoor classrooms and forest learning areas. Councils are also investing heavily in upgrading parks.

Swansea, for instance, is spending £7.5 million to improve more than fifty sites with features that encourage creative outdoor play.

8. *How do local authorities ensure that play areas and open spaces are accessible for everyone and how are these areas advertised to the public to make them aware of what is available?*

To make these spaces accessible, councils are implementing traffic calming measures like 20mph zones near parks and schools. Community engagement is central to many of these initiatives. In Flintshire, the council works with local town and community councils through a match-funding scheme, ensuring upgrades reflect what local families want and need. These combined efforts show a clear commitment to creating safe, natural play environments across Wales.

In addition to actions to make play environments safe councils respond through waste management to clear up discarded substance misuse (drug and alcohol) paraphernalia from areas to keep them clean and safe. As well as the provision of CCTV and other activities to limit anti-social behaviour which may have a negative impact on children being able to use the areas for play as designed.

Ensuring Accessibility and Advertising Play Areas:

- **Inclusive Design:** Local authorities follow guidelines to create accessible play spaces that cater to children of all abilities^[8]. This includes providing equipment and environments that support inclusive play. The toolkit developed by Play Wales and Alison John & Associates offers practical guidance on creating accessible play spaces^[9].
- **Community Engagement:** Authorities engage with communities to understand their needs and preferences, ensuring that play areas are designed to be welcoming and accessible^[8].
- **Advertising and Awareness Campaigns:** Local authorities use various channels, including social media, community newsletters, and local events, to advertise play areas and open spaces^[10]. The Playful Childhoods campaign also helps raise awareness about available play spaces^[7].

References

- [1] [Active Travel in Wales Annual Report](#)
- [2] [66 active travel projects to benefit from £14.5 million of funding](#)
- [3] [Active travel delivery plan 2024 to 2027 - GOV.WALES](#)
- [4] [New life for community spaces across Wales](#)
- [5] [Local Places for Nature Programme - GOV.WALES](#)
- [6] [Protecting Open Spaces in Wales - Open Spaces Society](#)
- [7] [Projects and campaigns - Play Wales](#)

[8] [Public Access In Wales | Our Work - The Open Spaces Society](#)

[9] [Creating accessible play spaces - Play Wales](#)

[10] [Spaces for playing - Play Wales](#)

Leisure and recreation facilities

9. *What are the challenges for local authorities in maintaining and expanding leisure and recreation facilities, such as leisure centres, in communities, and what is being done to overcome these challenges?*

There are several challenges facing local authorities:

- a. **Financial Constraints:** Local authorities face significant financial pressures, which impact their ability to maintain and expand leisure facilities. The costs associated with operating and upgrading these facilities can be substantial^[1]. Collaboration is the key here. Accessing grants through the Local Health board, Education sector (School modernisation programmes / Community Funded Schools initiative) [Community Focused Schools \[HTML\] | GOV.WALES](#); and the Green sector via energy reducing grants etc are key (Leisure Centres are typically amongst the highest energy using buildings across a local authority portfolio). [97 Sports Clubs in Wales supported with Energy Saving Grants | Sport Wales](#)
- b. **Aging Infrastructure:** Many leisure centres are housed in aging buildings that require extensive maintenance and upgrades to meet modern standards^[2]. Making the best use of resources is key, given these and staffing costs are the two main costs associated with providing leisure infrastructure. Whilst this is not possible to completely eradicate (you need a swimming pool to swim), lots of physical activity can be provided at low costs: where and when people want to access it. This could be at home; outdoors; in a local community facility / school, or a leisure facility. It can also be delivered in person or digitally or hybrid. The audience can be individual, or group (small or large). All come with pros and cons and user preference, with benefits to ease of individual access as there is for social interaction and connection with group / team activity.
- c. **Operational Costs:** High operational costs, including energy expenses and staffing, pose ongoing challenges^[2]. The use of Artificial Intelligence may help in this regards, and local authorities and leisure trusts across Wales are already embarking on this journey. Some examples of its application are listed below for reference:

Predictive Maintenance: AI can monitor equipment and facilities to predict when maintenance is needed, reducing downtime and preventing costly repairs. For instance, AI systems can analyse data from sensors on gym equipment to forecast potential failures and schedule maintenance before issues arise^[1].

Energy Management: AI can optimise energy usage by adjusting heating, cooling, and lighting based on real-time occupancy and weather conditions. This

can lead to substantial savings on energy bills. For example, AI-powered systems can automatically dim lights or adjust HVAC settings when areas of the leisure centre are not in use[2].

Automated Customer Service: AI chatbots can handle routine inquiries, bookings, and feedback, freeing up staff to focus on more complex tasks. These chatbots can provide 24/7 support, improving customer satisfaction while reducing the need for additional staffing[1].

Dynamic Pricing: AI can implement dynamic pricing strategies for memberships and services based on demand, time of day, and other factors. This ensures optimal pricing, maximises revenue, and attracts more customers during off-peak times[3].

Staffing Optimization: AI can predict staffing needs by analysing historical data, real-time inputs, and market trends. This helps in scheduling staff more efficiently, reducing unnecessary overtime and staff costs. For example, AI can forecast busy periods and adjust staffing levels accordingly[4].

Personalized Marketing: AI can analyse customer data to create personalised marketing campaigns, targeting individuals based on their preferences and behaviours. This increases engagement and retention, reducing the need for extensive marketing efforts[2].

Operational Efficiency: AI can automate administrative tasks such as inventory management, scheduling, and payroll processing. This reduces the workload on staff and minimises errors, leading to more efficient operations[1].

References

[1] [Embracing AI in the Leisure Sector: Enhancing Experiences ...](#)

[2] [How Artificial Intelligence \(AI\) is Reinventing the Leisure Experience ...](#)

[3] [Make AI your friend: How to use AI in the Leisure Industry? - Convivous](#)

[4] [AI's Role in Predicting Labor Needs & Workforce Trends](#)

Post-COVID Recovery: The COVID-19 pandemic has exacerbated financial and operational challenges, with many facilities experiencing reduced usage and income[2], however, most are on the way to full recovery now with many lessons learnt in terms of changing working habits and patterns, resilience models, the value of leisure infrastructure for emergency response situations; and new ways of user engagement (a significant shift in terms of more digital engagement via booking APPs, smart technology and streamed content).

Actions to overcome challenges:

- a. **Alternative Funding Models:** Exploring alternative funding models, such as public-private partnerships and leisure trusts, to secure additional resources[2].

- b. **Energy Efficiency Initiatives:** Implementing energy efficiency measures to reduce operational costs and improve sustainability[2]. Here are some examples of local authorities in Wales that have invested in carbon-reducing technology across their leisure portfolios:

Cardiff Council: Cardiff Council has implemented energy-efficient measures in its leisure centres, including the installation of solar panels and LED lighting. The Cardiff International Pool, for example, uses solar thermal panels to heat the pool water, significantly reducing energy consumption[1].

Swansea Council: Swansea Council has invested in various carbon-reducing technologies, such as combined heat and power (CHP) systems in its leisure centres. The LC Swansea leisure centre uses CHP to generate electricity and heat simultaneously, improving energy efficiency and reducing carbon emissions[2].

Conwy County Borough Council: Conwy Council has undertaken several initiatives to reduce the carbon footprint of its leisure facilities. The council has installed biomass boilers in some of its leisure centres, which use renewable wood pellets to provide heating, thereby reducing reliance on fossil fuels[3].

Pembrokeshire County Council: Pembrokeshire Council has focused on improving the energy efficiency of its leisure centres by upgrading insulation, installing energy-efficient lighting, and incorporating renewable energy sources such as solar panels.

References

[1] [Technical advice note - GOV.WALES](#)

[2] [Local Authorities Adopt Smart Town Technologies to ... - GreenEconomy.Wales](#)

[3] [Smarter, greener local energy projects get Welsh Government funding ...](#)

10. *In areas where leisure facilities have closed, to what extent is the health of the population taken into account in the decision-making process?*

The following are taking into consideration:

- a. **Health Impact Assessments (HIAs):** Local authorities conduct HIAs to evaluate the potential health impacts of closing or developing leisure facilities. These assessments consider the effects on physical and mental health, particularly for vulnerable groups[3]. A good example would be the Health Impact Assessment undertaken as part of the Pentre Awel development in Llanelli. [Pentre Awel - Carmarthenshire County Council](#)
- b. **Community Consultations:** Engaging with the community to gather feedback and understand the potential health implications of facility closures[4].
- c. **Mitigation Strategies:** Implementing mitigation strategies, such as enhancing access to alternative facilities or outdoor spaces, to minimise negative health impacts[3].

11. What measures are put in place to ensure equitable access to leisure and recreation facilities for all communities?

When ensuring equitable access the following are considered:

- a. **Inclusive Design:** Designing facilities to be accessible to people of all abilities, including those with disabilities[5].
- b. **Subsidised Access:** Providing subsidised access or membership schemes for low-income individuals and families to ensure affordability[5].
- c. **Geographic Distribution:** Ensuring that facilities are geographically distributed to serve all communities, including rural and underserved areas[6].
- d. **Community Outreach:** Conducting outreach programs to raise awareness about available facilities and encourage participation from diverse community groups[5].

12. How are healthy options for food and drink provided and promoted in local authority owned leisure and recreation facilities?

When promoting healthy food and drink options the following are considered:

- a. **Government Standards:** Adhering to government standards for healthy food and drink options, such as the Government Buying Standards for Food and Catering Services (GBSF)[7]. Carmarthenshire are following a model of supporting locally sourced products and supply chains, and an Australian based traffic light system to nudge people towards healthier choices.

The **traffic light system** is used to nudge people towards healthier food choices by categorizing foods and drinks based on their nutritional value. This system is part of the Victorian Government's Healthy Choices guidelines[1][2].

Categories:

GREEN (Best Choices): Foods and drinks in this category are the healthiest options.

AMBER (Choose Carefully): These items should be consumed in moderation.

RED (Limit): Foods and drinks in this category are not essential and should be limited.

Implementation and Impact:

- **Health Services and Workplaces:** The traffic light system is used in health services, workplaces, and sport and recreation settings to promote healthier choices[1].
- **Consumer Behaviour:** Studies have shown that consumers are more likely to correctly identify healthier products using traffic light labels compared to other labelling systems[3].

This approach helps consumers make informed decisions quickly and encourages healthier eating habits.

References

- [1] [Traffic light system - Healthy Eating Advisory Service](#)
- [2] [Healthy Choices Traffic Light System - Healthy Eating Advisory Service](#)
- [3] [Traffic Light Labelling - AMA](#)

- b. **Healthy Vending Initiatives:** Implementing healthy vending initiatives to ensure that vending machines offer nutritious options, such as fruits, nuts, and low-sugar beverages[7]. Here are some examples of healthy vending and catering approaches across leisure sites in Wales:

Cardiff Council: Cardiff Council has implemented healthy vending initiatives in its leisure centres, ensuring that vending machines offer nutritious options such as fruits, nuts, and low-sugar beverages. The council also promotes healthy eating through its café menus, offering balanced meals and snacks[1].

Swansea Council: Swansea Council has adopted healthy eating standards in its leisure facilities, including the LC Swansea leisure centre. The café at LC Swansea offers a range of healthy food options, including salads, whole grain sandwiches, and smoothies[2].

Conwy County Borough Council: Conwy Council has introduced healthy vending machines in its leisure centres, providing options that meet nutritional guidelines. The council also runs educational campaigns to promote healthy eating habits among facility users[3].

Pembrokeshire County Council: Pembrokeshire Council has focused on providing healthy food and drink options in its leisure centres. The council's leisure facilities offer menus that prioritize fresh, locally sourced ingredients and balanced meals[2].

References

- [1] [Health Promoting Hospital Vending Guidance - GOV.WALES](#)
- [2] [Healthy Eating Standards for Hospital Restaurant and Retail Outlets](#)
- [3] [Think Healthy Vending – business, Senedd. Wales](#)

- c. **Café and Concession Policies:** Establishing policies for cafés and concessions within leisure facilities to prioritise healthy menu options and reduce the availability of unhealthy foods[7].
- d. **Educational Campaigns:** Running educational campaigns to promote healthy eating habits among facility users, including workshops, posters, and social media outreach[7].

References

- [1] [The Guide to Tackling Parks and Recreation's Biggest Issues](#)
- [2] [Local Authority Sports and Leisure provision – Challenges Post-Covid19](#)
- [3] [A Health Impact Assessment of potential leisure centre closures in ...](#)
- [4] [Future of Leisure Centres under review - South Wales Chronicle](#)
- [5] [Equity | Impacting Communities | National Recreation and Park ...](#)
- [6] [Parks, Recreation, and Green Spaces | Active People, Healthy Nation - CDC](#)
- [7] [ukactive to drive government strategy for healthy leisure venues](#)

Local food environment and local planning policies

13. What powers do local authorities currently have to control the number and location of fast-food outlets in a particular area and to encourage the availability of healthier options?

Arguably a Local Planning Authority (LPA) may have powers *if* a policy existed on that matter, currently we are only aware of one which is relation to proximity to schools. A difficulty for Planning in trying to control this kind of matter is that Planning will typically control nature of uses- A1, A2, A3 etc. While a raft of A3 uses undoubtedly would fall within the unhealthy category, there is nothing intrinsic to A3 that says this must be the case- i.e. you could have a healthy A3 takeaway in principle (noting, again that this is not overly common). It would be exceedingly difficult for an A3 consent to be specific about food content- cooking methods, nutritional levels etc.

14. What action can be taken when there is a saturation of fast-food outlets and would further powers for local authorities be beneficial?

No action can be taken from a planning perspective if those uses are authorised. Regarding- future action, policies could potentially be crafted to resist further A3 uses, but linked to the answer to question 13, that is most easily justified in terms of vibrancy of a retail/commercial area, than for health reasons. i.e. where A3 uses do not contribute to daytime activity, etc.

15. Is health and wellbeing taken into account as part of the planning application for new fast-food establishments? Should this be strengthened?

There is already consideration given and there are already planned changes which will increase the need to take account of health and wellbeing and take mitigating actions. The Health Impact Assessment (HIA) (Wales) Regulations under the Public Health (Wales) Act 2017 were consulted on in early 2024 and the outcome is still awaited but with the introduction of either a separate HIA or combining it with other Impact Assessments this will be strengthened. It may be appropriate to leave an appropriate length of time and then to see what impact the HIA have once regulations are in place. Please note: It is envisaged that HIAs will be applicable on major schemes, not on slight changes of use of individual units.

Often when planners receive an application for a change of use to A3 there is a prospective owner in mind, but there is no reasonable obligation to specify an operator at the time of an application, and so a proposal would be assessed based on the principle of a takeaway unit.

In the past there have been instances where there have been limitations on the kind of products prepared, but that is linked to the means of cooking and what the proposed fume and odour extraction is rather than potential wider health implications.

16. What is the current planning policy in relation to fast food outlets in close proximity to schools and colleges and avoiding an excess supply of such outlets?

Wrexham Council is the only Council in Wales that has recently changed its planning policy around the location of new fast-food outlets within 400m of a school.

Cardiff Council does have supplementary planning guidance (SPG), *Planning for Health and Wellbeing* that is linked to their adopted Local Development Plan (LDP). Although the guidance is now seven years old there is reference to consideration of the positioning of hot food takeaways, but this is directed towards developers submitting proposals rather than planners receiving them.

17. What action is taken to ensure there is not a disproportionate number of fast-food outlets in deprived areas and to encourage equitable access to affordable, healthy food?

We are not aware of examples of this factor being used as an evidence base for such a policy. It may be an area where SPG is or could be used to prevent disproportionate numbers of unhealthy fast food outlets in deprived areas.

18. It has been highlighted to the Committee those local authorities from across the UK, including Cardiff and the Vale of Glamorgan, are progressing the development of healthier advertising policies on assets that local authorities own and control (such as bus stops and billboards). Are there plans for other local authorities to take a similar approach, and would there be any barriers to implementation?

We are not aware of any plans to do this elsewhere in Wales.

Additional feedback

Whilst we have focused on questions as set out by the Committee in our response, there are some areas that appear to be overlooked and therefore we are including outside of the questions.

There are examples from Councils and partners working towards improving the access to healthy foods for both individual and community health but also for the benefit of the environment. One such example is [Food Vale](#), where rather than focusing on targeting fast food there is a focus on the availability of local healthy food choices. A partnership led by the Council and the Cardiff and Vale University Health Board's Public Health Team and the third



sector to build a thriving, healthy and sustainable food system in the Vale of Glamorgan, where everyone has a good meal every day, where there are thriving local food businesses to deliver the healthy options.

Social prescribing is carried out by GPs to empower individuals to access local activities and services in the community, these can include activities that improve physical activity or that enable the opportunity to grow fruit and vegetables, or that support mental health and decrease loneliness. All of these activities have the potential to have a positive impact for more healthy decisions which can have a positive impact on an individual's weight. Councils have been engaged in their own version of social prescribing for a long time, with engagement into local groups being part of social services empowering individuals to be able to follow their own interests for their own outcomes, as well as for social cohesion purposes. The main reason may not be to reduce obesity, but the outcome can include improved weight management alongside better health.

A change in behaviours that lead to or maintain obesity levels is unlikely to be achieved by removing access to fast food or ensuring access to green spaces and leisure facilities, it will need a wider behavioural science approach that is holistic and looks at the needs of the whole person and provides the right environment for the healthy options to be taken without them having a negative impact on other aspects of their lives. People need to know that it is a choice that they have and understand the reasons they have for the choices they make. The restrictions during the pandemic demonstrated the negative impact on wellbeing from removing choice, and which could lead to an increase in obesity or eating disorders due to the feeling of helplessness.

Any messaging around obesity needs to be carefully managed so that it does not lead to additional stigma and harassment of individuals which is likely to work against any obesity reduction programmes or could lead to the development of eating disorders such as anorexia and bulimia which include unhealthy attitudes and relationships with food.

Questions and answers to the Senedd's Health and Social Care Committee inquiry into the prevention of ill health – obesity

07 April 2025

In preparation for the [Senedd's Health and Social Care Committee meeting on 02 April 2025](#) the following questions were shared with representatives from councils' catering services and the WLGA's Food in Schools Manager.

A representative from the WLGA's Food in Schools Team was not available to attend this meeting due to a Regional Food in Schools Meeting. To make up for this, the WLGA's Food in Schools Manager has prepared answers to some of the questions asked below.

Q2. How is compliance with the [food and drink standards and] nutritional standards for school food monitored? Are any improvements needed?

Under the [Healthy Eating in Schools \(Wales\) Measure 2009](#) ('Measure'), councils or governing bodies must ensure compliance with [The Healthy Eating in Schools \(Nutritional Standards and Requirements\) \(Wales\) Regulations 2013](#) ('Regulations'), depending on who organises the food and drink provision.

Councils typically organise school breakfast and lunch provision in most schools in Wales, usually through in-house catering services, and they understand their duty regarding compliance. On the other hand, governing bodies organise these provisions in a minority of schools, often through contract caterers or catering staff directly employed by the school. Governors generally have a poor understanding of their compliance duties.

Support from councils for governing bodies that organise their own catering services varies but may include service level agreements, audits, governor training and support as part of the Welsh Network of Health and Well-being Promoting Schools.

The WLGA supports and advises councils, contract caterers, and schools to achieve and maintain compliance with the Regulations. They procure nutritional analysis software for most councils in Wales to enable them to undertake nutritional analysis of an average school lunch.

The WLGA offers a voluntary [Certificate of Compliance process](#) to councils and governing bodies for primary schools, issuing certificates per menu change after verifying the accuracy and compliance of the menu and nutritional analysis. Currently, all twenty-two councils and all 7 primary schools that organise their own catering services engage with the WLGA.

For secondary schools, the WLGA periodically gathers menus and price lists from councils, contract caterers, and schools, providing feedback and guidance on compliance with food and drink standards.

Compliance is generally better in primary schools than secondary schools and better among councils than schools that organise their own catering services.

Estyn, under the Measure, has a duty to keep the Welsh Ministers informed about actions taken at maintained schools to promote healthy eating and drinking. During inspections, Estyn may note obvious breaches of the Regulations, speak to pupils and governors, and check that governors' reports include information about actions taken to promote healthy eating and drinking. Sometimes inspection reports indicate whether a school has made appropriate arrangements to promote healthy eating, which could affect overall judgments for leadership and care, support, and guidance.

Estyn's approach to inspecting and reporting on schools' actions to promote healthy eating is broader than compliance with the Regulations and is widely considered insufficient. The WLGA has provided Estyn with a resource document to help inspectors identify obvious breaches, inconsistent messages, and good practices relating to healthy eating in schools. The WLGA's Certificate of Compliance can be used as evidence during Estyn inspections.

The Welsh Network of Health and Well-being Promoting Schools, previously known as the Welsh Network of Healthy School Schemes, is in the process of being revised. Historically, local practitioners may provide general feedback and guidance on promoting healthy eating and drinking throughout the school day if the school is focusing on the food and fitness topic. The WLGA's Certificate of Compliance can be used as evidence during National Quality Award assessments.

Several improvements are needed. The Welsh Government's School Governors' guide to the law does not reference healthy eating but should and needs updating. The WLGA's feedback and guidance processes could be enhanced by school audits. Estyn's approach to inspecting and reporting on schools' actions to promote healthy eating needs to be strengthened, considering a whole-school approach and being more explicit about compliance with the Regulations. Effective practice case studies would also be useful. It is acknowledged that Estyn may not have the resources to undertake the above, but they provide the feedback and guidance that schools value the most and have a duty under the Measure.

Q3. What action is taken against [councils and] schools that don't comply with the expected [food and drink standards] and nutritional standards?

Where councils offer support to schools that organise their own catering services, they may provide feedback and guidance regarding compliance. Councils and schools that engage with the WLGA receive periodic feedback and guidance on compliance and may receive a Certificate of Compliance. However, compliance issues are rarely highlighted by Estyn inspections. Local Welsh Network of Health and Well-being Promoting Schools practitioners may highlight compliance issues. Councils and governing bodies are at risk of a judicial review if they are not compliant with the Regulations, but this has never occurred in relation to healthy eating in schools.

Q4. Are the portion sizes of school meals evaluated?

The Regulations and [Healthy eating in maintained schools: statutory guidance for local authorities and governing bodies](#) ('Statutory Guidance') outlines the nutritional standards for school lunches in Wales. For primary schools, the standards are based on 40% of the nutritional requirements for children aged 4 to 6 years and 60% for children aged 7 to 10 years, reflecting the age distribution in primary schools. In secondary schools, the standards are based on 70% of the nutritional requirements for children aged 11 to 14 years and 30% for children aged 15 to 18 years.

Nutritional analysis involves evaluating a single portion size to meet these standards, with larger portion sizes in secondary schools. The Statutory Guidance suggests portion sizes but does not account for variability within each school sector, leading to potential issues with portion sizes being too large for younger children and too small for older children. Additional bread is recommended for pupils with larger appetites.

The review of the Regulations is considering these issues and updated nutritional recommendations, particularly regarding energy, free sugar, and fibre.

Research and feedback from pupils over the past 15 years indicate dissatisfaction with portion sizes, particularly among older children in primary schools. This dissatisfaction may be due to the food and drink standards and nutritional analysis being based on the offer of food and drink that children could take up. If pupils do not take up all the elements of the school lunch offered, their meal may not be nutritionally adequate. Additionally, the food and drink that children do take up is often not fully consumed, possibly due to limited time and space to eat.

To inform the review of the Regulations and develop an example primary school lunch menu that meets the proposed standards, the WLGA has gathered and analysed portion size data from councils. While there is some variability between councils, the average portion sizes usually fall within the range suggested in the Statutory Guidance. The WLGA, along with Public Health Wales, public health dietitians, and academics, is using this information and updated dietary recommendations to develop guidance on portion sizes for pupils aged 4 to 6 years and 7 to 10 years.

Q6. Is enough direction and support given by the Welsh Government in formulating menus and ensuring that the nutritional standards for school food are met?

In 2013/2014, the Appetite for Life Grant, which provided ring-fenced funding for healthy eating initiatives in schools, was transferred to the Revenue Support Grant, and this funding was no longer ring-fenced for councils. At the same time, Welsh Government funding for the WLGA's Food in Schools Team ceased. However, due to demand, the WLGA continues to fund this team.

In 2014, the Welsh Government published the Statutory Guidance to provide direction and support to councils and governing bodies in formulating menus and ensuring that the nutritional standards for school food are met. This document explains the food and drink

standards and nutritional standards, provides practical advice to achieve these standards, and suggests portion sizes.

Since 2014, no further direction and support have been given by the Welsh Government in relation to formulating menus and ensuring that the nutritional standards for school food are met. However, updated Statutory Guidance is in development, alongside partners including the WLGA and Public Health Wales.

Since 2014, the WLGA has provided significant direction and support in relation to formulating menus and ensuring that the nutritional standards for school food are met. This includes publishing a Nutritional Analysis Guide, procuring nutritional analysis software for councils and schools, providing training on nutritional analysis, publishing an Evidence Guide and Toolkit, providing feedback and guidance on menu development and nutritional analysis, offering a voluntary Certificate of Compliance process to councils and governing bodies, developing an example primary school lunch menu that meets the proposed food and drink standards and nutritional standards, and providing recommendations for achieving the proposed primary school lunch.

Q7. What should the Welsh Government take into consideration as part of its review of the regulations on school food nutrition.

The review of the Regulations should consider up-to-date scientific guidance, practical considerations, and financial considerations across several themes.

Food and drink standards should relate to vegetables, fruit, wholegrain varieties of starchy carbohydrates, oily fish, potatoes cooked in fat or oil, deep-fried or flash-fried foods, red meat, processed meat, processed alternatives to fish and meat, cheese-based main courses for vegetarians, sweetened baked products and desserts, pastry and pastry products, fruit juice, and no added sugar drinks.

Nutritional standards should address energy, free sugar, fibre, average lunch per menu cycle rather than per week in primary schools, per recipe or product rather than per average lunch in secondary schools, and variable portion sizes for different ages within primary schools.

A whole-school approach is essential, addressing inconsistent exemptions, links to the new curriculum, educating parents and carers, timing and duration of lunchtime (particularly in secondary schools), space to sit and eat (particularly in secondary schools), school policies for leaving the school premises at lunchtime (secondary schools), staggered lunchtimes, and the absence of morning break in some secondary schools, asymmetric school weeks (finishing school at lunchtime) in some primary schools, access to free school lunch allowances in secondary schools at breakfast and morning break, breakfast provisions, and morning break provisions in secondary schools.

Engaging schools and consumers involves consultation with schools, parents, and pupils, clarification of governor and school responsibilities, support and guidance for governing bodies, communications to parents, and school councils or school nutrition action groups.

Monitoring compliance and impact involves the roles of councils and governing bodies, Estyn, the WLGA, the Welsh Network of Health and Well-being Promoting Schools, and Public Health Wales. It also includes implications of non-compliance and measuring the impact of the Regulations (provision vs. take-up vs. consumption).

Procurement and sustainability considerations include fish, meat, processed foods, scratch cooking, the Welsh food on Welsh plates agenda, increasing price reducing availability of school-specific products, reducing plastic (particularly drinks bottles in secondary schools), and budgetary impact.

Funding considerations include welfare service in primary schools (if fully funded), review of universal primary free school meals unit rate, business and welfare service in secondary schools (free school lunches and paying customers), income to maintain service viability, funding to pilot and implement proposed changes, ring-fenced funding, review of funding for free breakfast in primary schools, demand for free breakfast in secondary schools, meal deals and constructing meals for the value of the free school lunch allowance in secondary schools, school meal debt, and discretionary funding in secondary schools.

Special diets considerations include increasing demand, increasing complexity, medical evidence, support for learners with healthcare needs, additional learning needs, need for nutritionists and dietitians, support from local health boards, sharing nutritional information with consumers, and special schools.

Conflicting demands include improving health and sustainability of secondary school food while lunchtimes are reduced (encouraging less nutritious and packaged hand-held items) and maintaining income (bottled drinks are integral to catering services business models). The wider healthy eating agenda acknowledges that school food is only part of the solution, with more preventative work needed outside of school, food and drink provided by local food businesses (particularly secondary schools), and planning permission for local food businesses (particularly secondary schools).

The review of the Regulations should allow councils and schools the opportunity to pilot proposed standards to provide informed feedback and evidence during the public consultation. The review will be significantly more challenging in secondary schools due to the different context.

Q9. How is healthy eating and drinking in schools encouraged and supported, particularly in secondary schools?

Under the Measure, councils and governing bodies must take action to promote healthy eating and drinking by pupils. Additionally, governing bodies must include in a governors' report information about the action taken to promote healthy eating and drinking by pupils.

Promoting healthy eating and drinking in schools is much more than simply providing healthy food and drink. Without a whole-school approach, particularly in secondary schools, or robust monitoring of compliance, the achievability and impact of the Regulations are limited.

WLGA Response

April 2025



Limited time and space in secondary schools is of particular concern, as highlighted by the WLGA's 2019 report [Healthy eating implications of school breaktimes for 11 to 19-year-olds in Wales](#). Since then, partly as a legacy of COVID-19 mitigation measures, some secondary schools have removed morning break provisions and more secondary schools have introduced shorter staggered lunchtimes. Such measures are not conducive to promoting healthy eating and drinking, socialising, or physical activity.