



# **LOCAL PLAN** for Buckinghamshire

Health and Wellbeing in the Local  
Plan for Buckinghamshire:  
Evidence Study

September 2025



## Contents

1. Introduction .....	3
How can planning influence health and wellbeing? .....	3
National planning policy context .....	4
Local health strategy context .....	5
Vulnerable groups .....	6
Health inequalities .....	7
2. Buckinghamshire's health profile .....	8
Population and demographics .....	8
Life expectancy.....	8
Ethnicity .....	9
Deprivation.....	9
3. Policy SE1: Health Impact Assessments .....	12
National planning policy context .....	12
Health and wellbeing context in Buckinghamshire and evidence to support the policy .....	13
Theme 1: Neighbourhood design .....	14
Theme 2: Healthy homes .....	15
Theme 3: Healthy food environment.....	15
Theme 4: Natural and sustainable environments.....	16
Theme 5: Transport and movement .....	17
Theme 6: Healthy economy .....	18
Monitoring .....	18
4. Policy SE2: Fast food outlets and takeaways.....	19
National planning policy context .....	19
National health policy context .....	19
Definitions and terms.....	20
Health and wellbeing context in Buckinghamshire and evidence to support the policy .....	21
Local policy context.....	22
Local health: fast food exposure .....	22
Local health: Access to healthy food .....	23
Adverse impacts.....	24
Evaluation and monitoring.....	25
5. Policy SE3: Community growing .....	26

National planning policy context .....	26
Health and wellbeing context in Buckinghamshire and evidence to support the policy .....	26
Social isolation .....	27
Design.....	29
References.....	30

# 1. Introduction

## How can planning influence health and wellbeing?

- 1.1. The built and natural environment is a key determinant of health. Research suggests that the environment in which we live is inextricably linked to our health across the life course and that the design of our neighbourhoods can influence physical activity levels, travel patterns, social connectivity, mental and physical health and wellbeing outcomes<sup>i</sup>.
- 1.2. The Health and Social Care Act 2012<sup>1</sup> places a legal duty on local authorities to reduce health inequalities, encouraging planners to consider how housing, transport, and access to services affect vulnerable populations. The Act encourages health-led local planning, requires councils to consider health inequalities in service delivery, supports collaboration between planners and health professionals and makes Directors of Public Health key advisors in planning decisions.
- 1.3. Improving population health, reducing inequalities and supporting the health and wellbeing of Buckinghamshire's current and future residents can be achieved through planning for health. Planning influences the social, environmental and economic conditions, also known as the wider determinants of health, in which people are born, grow-up, live, work, and age. These conditions influence our opportunities for good health, how we think, feel and act, which shapes our physical and mental health and wellbeing.
- 1.4. Planning policy plays a powerful role in shaping employment opportunities and driving economic growth. Economic growth is underpinned by a healthy workforce which is a priority of the draft *Joint Local Health and Wellbeing Strategy – 2035 (2025)*<sup>2</sup>. Good work and employment opportunities which are safe, secure, and supportive can improve health across a person's life and protect against social exclusion, contributing to a thriving local economy and growth. Improving the health of the workforce is a key focus of the *Get Britain Working White Paper*<sup>3</sup>, to drive economic growth, with poor physical and mental health a key reason for economic inactivity. Nationally there are 2.8 million people locked out of work due to long-term sickness.
- 1.5. The Local Plan for Buckinghamshire to 2045 takes an integrated approach to planning and health meeting the statutory duty under the Health and Social Care Act 2012 by recognising that all aspects of development can shape our health and wellbeing. The Local Plan considers the current and future needs of the county, guiding future

---

<sup>i</sup> Public Health England (2017). *Spatial Planning for Health An evidence resource for planning and designing healthier places*. [online] Available at: [link](#) [Accessed 2 September 2025].

development within the built and natural environment. It presents a significant opportunity to support health and wellbeing in Buckinghamshire by creating healthy places that enable people to live healthy, fulfilling lives. Planning policies and decision-making can help address some of the most pressing health challenges faced in Buckinghamshire, such as obesity, mental health issues, physical inactivity, and the needs of an ageing population, which can all be influenced by the quality of our built and natural environment.

- 1.6. This study provides the evidence to support the health policies within the Social Environment chapter of the Local Plan and should be read in conjunction with, and within the context of the relevant policies in the Local Plan for Buckinghamshire.
- 1.7. The study sets out the national planning policy context in relation to health, the local health strategy context and health profile of Buckinghamshire. This is followed by the specific evidence for the inclusion of each policy, SE1: Health Impact Assessments, SE2: Fast food and takeaways and SE3: Community food growing to realise the potential for the Local Plan to directly improve the health of residents.

### **National planning policy context**

- 1.8. The *National Planning Policy Framework (NPPF) (2024)*<sup>4</sup> sets out the Government's planning policies for England and how these should be applied by local authorities. It provides a clear mandate to support health and wellbeing in the Local Plan, highlighting that the planning system has a specific role to play in creating healthy, inclusive and safe places that promote social interaction, are accessible, and that enable and support healthy living through creating opportunities for healthy choices that reduce health inequalities.
- 1.9. Embedding the health needs of Buckinghamshire residents into the Local Plan is essential to providing the foundation for creating healthy places and achieving sustainable developments that promote and enhance physical and mental health and wellbeing.
- 1.10. The *Planning Practice Guidance (PPG)*<sup>5</sup> supports the *NPPF (2024)* and provides further detailed guidance on the implementation of *NPPF (2024)* policies and optimal decision-making for healthier communities. There is a key health focus on achieving healthy, inclusive communities, healthier food environments, green infrastructure and supporting the needs of vulnerable people. The *PPG* states that local health priorities in the *Health and Wellbeing Strategy* and *Joint Strategic Needs Assessment (JSNA)* should inform planning policy and decision-making.

1.11. A healthy place is described in the *PPG* as one which contributes to the prevention of ill health and provides the environmental conditions to support positive health and wellbeing by:

- Providing opportunities for the community to improve their physical and mental health;
- Supporting community engagement and wellbeing;
- Meeting the needs of children and young people; and
- Adapting to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments.
- Promoting social interaction.

### **Local health strategy context**

1.12. Buckinghamshire Council has a strong commitment to supporting health and wellbeing by improving population health and reducing health inequalities to allow residents to live independent, fulfilling lives, within strong, healthy, inclusive, and resilient communities<sup>ii</sup>. The key priorities within the Council's *Corporate Plan 2020-2026*<sup>6</sup> are:

- increasing prosperity;
- strengthening our communities;
- improving our environment; and
- protecting the vulnerable.

1.13. Buckinghamshire Council's *Strategic Vision, Succeeding as a Place: Achieving our Shared Vision for Buckinghamshire to 2050*<sup>7</sup> establishes a commitment to improve the economic, environmental and social health of Buckinghamshire and to engage and deliver a thriving, resilient and successful Buckinghamshire.

1.14. The draft *Joint Local Health and Wellbeing Strategy – 2035 (2025)*<sup>8</sup> sets out the aims for the council and partners to improve population health, reduce health inequalities and ensure sustainability of services. It sets out the priorities across the lifespan, including reducing child obesity, reducing premature mortality, increasing employment through a healthy workforce, reducing social isolation and improving mental health. The strategy recognises the importance of the wider determinants of health including housing, the economy, employment and the environment. It is supported by a range of strategies and action plans including physical activity, tobacco, alcohol and healthy ageing strategies and a whole systems approach to a healthy weight.

1.15. The wider determinants of health, or the 'building blocks of health' are a diverse range of social, economic and environmental factors in which people are born, grow-up,

---

<sup>ii</sup> Buckinghamshire Council (2024). *Corporate plan*. [online] Available at: [link](#) [Accessed 2 September 2025].

work, live and age, and the broader factors shaping the conditions of daily life<sup>9</sup>. The *Marmot Review 'Fair Society, Healthy Lives'*<sup>10</sup> states that action on health inequalities requires action across all of the social determinants of health which include the built and natural environment, education, income, employment, crime and community and social connections<sup>11</sup>. Strengthening these building blocks of health can lead to improvements in the people's mental and physical health, overall health outcomes and inequalities<sup>12</sup>.

- 1.16. Buckinghamshire's JSNA<sup>13</sup> underpins the draft *Joint Local Health and Wellbeing Strategy – 2035 (2025)* and provides a continuous assessment of current and future health, care and wellbeing needs of the local community to inform decision making. It comprises a series of reports, datasets and interactive tools to characterise the health and wellbeing status of the local population, identify inequalities, illustrate trends, describe local community views and highlight key findings, including the needs of an ageing population and the health inequalities within Buckinghamshire.
- 1.17. *Buckinghamshire Healthcare NHS Trust Strategy (2025-2035)*<sup>14</sup> recognises that there are significant inequalities and barriers to good health across Buckinghamshire dependent on where one lives, how much they earn and other factors outside of their control. This Strategy aims to help people live healthier and more independent lives through reducing health inequalities and improving the health of our local population.
- 1.18. *Opportunity Bucks*<sup>15</sup> is a flagship programme within Buckinghamshire Council that seeks to improve everyday life for people in wards where health, work and education outcomes are poorer. It aims to improve health and the wider determinants of health across five themes which can be enhanced through sound place-making:
  - Education and youth engagement;
  - Jobs, careers and skills;
  - Quality of public realm;
  - Standard of living; and
  - Health and wellbeing.

### **Vulnerable groups**

- 1.19. Vulnerable groups are those at the greatest risk of experiencing poor health and wellbeing and health inequalities. They include, but are not limited to older adults, children and young people, ethnic minorities, traveller communities, people with disabilities, people with mental health issues, people living in areas of deprivation or those who can be socially marginalised (for example, people experiencing homelessness or substance abuse or people in contact with the criminal justice system).

- 1.20. Planning policies can address the wider determinants of health across the lifespan, reduce health inequalities, reduce child obesity and create a healthier workforce as outlined in the draft *Joint Local Health and Wellbeing Strategy – 2035 (2025)*<sup>16</sup>. Considering the needs of vulnerable groups through planning policy and decision-making provides the foundation for healthy, inclusive and vibrant communities and supports Buckinghamshire Council's priority to reduce health inequalities by ensuring vulnerable people can access the living conditions, services and opportunities required for daily living and to live a healthy life.

### **Health inequalities**

- 1.21. Health inequalities are avoidable, unfair and systematic differences in health between different groups of people. The conditions in which we are born, grow-up, live, work and age influence our opportunities for good health, and how we think, feel and act, and this shapes our mental health, physical health and wellbeing<sup>17</sup>.
- 1.22. Socioeconomic and physical environments determine 60% of health outcomes<sup>18</sup>. The unequal distribution of social, economic and environmental factors accounts for between 40% and 50% of the variation in health outcomes, and health inequalities between the most and least deprived areas<sup>19</sup>. Poor health and health inequalities in England are estimated to cost the NHS an extra £4.8 billion a year from the greater use of hospitals by people in deprived areas<sup>20</sup> and cost the UK £31-33 billion a year in lost productivity<sup>21</sup>.
- 1.23. Buckinghamshire's population generally experiences better health and wellbeing compared to other areas in England; however, this is not shared equally by residents across the county. Significantly poorer health outcomes are experienced by vulnerable groups and people living in areas of deprivation or in challenging conditions such as poor quality or insecure, overcrowded housing, in areas with poor air quality, lack of access to green space or unhealthy food environments<sup>22</sup>.
- 1.24. The main causes of premature death in Buckinghamshire are cardiovascular disease and some cancers<sup>23</sup>. The primary modifiable lifestyle risk factors for poor health and premature death in Buckinghamshire are diet, physical inactivity, smoking and alcohol consumption which are influenced by the built and natural environment <sup>2425</sup>.



## 2. Buckinghamshire's health profile

- 2.1. In Buckinghamshire many residents experience better health than the national average, including a higher life expectancy. However, many still spend over a decade in poor health, and there are significant health inequalities within the county.
- 2.2. This profile provides an overview of the health of Buckinghamshire residents. It uses the most readily available data from a range of sources, including the Office for National Statistics (ONS), Office for Health Improvement and Disparities (OHID) (formerly Public Health England), and the Local Government's English Indices of Deprivation 2019.
- 2.3. The *JSNA* provides the most current health and wellbeing needs in Buckinghamshire. For planning and decision-making, caution should be used when using county level data in the *JSNA* as the good health experienced by many residents, masks inequalities within Buckinghamshire.

### Population and demographics

- 2.4. Approximately 578,872 people live in Buckinghamshire with roughly equal proportions of males and females<sup>26</sup>.
- 2.5. The population of Buckinghamshire is growing and is expected to increase by 10.8% between 2024 and 2044. This means that around 54,100 more people will live in the County in 2044, taking the total population from around 578,700 in 2024 to 632,800 in 2044<sup>27</sup>. The new housing need for Buckinghamshire is based on a statistical formula set out by government, which requires 4,332 dwellings per annum, or around 95,000 new homes (with a 5% buffer) over the plan period to 2045 for Buckinghamshire. In Buckinghamshire this would mean planning for an additional population growth of around 133,300 people.
- 2.6. Buckinghamshire has an ageing population, over the next 20 years (2024 – 2044) the number of people aged 65 and over living in Buckinghamshire is projected to increase by 33%, around 36,200 people. At the same time the number of people aged over 90 is projected to more than double from 5,800 in 2023 to 12,300 in 2043<sup>28</sup>. As the population of older residents increases, so will the prevalence of chronic health conditions such as heart disease, diabetes, arthritis and mental health conditions and pressures on services<sup>29</sup>.

### Life expectancy

- 2.7. Life expectancy in Buckinghamshire is greater than the national and regional averages. A man born in Buckinghamshire between 2021-23 can expect to live to 81.2 years (1.2

years greater than the England average) and a woman can expect to live to 84.9 (1.8 years greater than the England average)<sup>30</sup>.

2.8. People living in the most deprived areas of the county live on average for 5.4 years less than those living in the least deprived areas and spend a greater proportion of their lives in poor health (data from 2019-2021)<sup>31</sup>.

2.9. The healthy life expectancy<sup>iii</sup> of females at birth in Buckinghamshire is 65.9 years, compared to 65.1 years for males at birth<sup>11</sup>. Both are higher than the national average for both sexes (60.7 in females, 60.6 in males) however, healthy life expectancy has decreased for both males and females in recent years. This means that people are spending more of their lives in poor health with many experiencing ill health before reaching state retirement age.

2.10. Males in Buckinghamshire in 2021-23 spent 19 years living in poor health, an increase from 13.9 years in 2013-15. Females on average spent 16.1 years in poor health in 2021-23, an increase from 12.1 years in 2013-15<sup>32</sup>.

## **Ethnicity**

2.11. The largest ethnic group in Buckinghamshire is White British (79%). This is followed by 12.4% of the population identifying as Asian, 3.5% as mixed ethnicity, 2.6% as black and 1.6% as other ethnic groups<sup>33</sup>.

## **Deprivation**

2.12. Deprivation is a significant driver of health inequalities with people living in deprived areas often facing worse health outcomes than those living in the less deprived areas. The Indices of Multiple Deprivation (IMD) 2019 are the official measure of relative deprivation for small areas in England called lower-layer super output areas<sup>34</sup>. They're used to understand which neighbourhoods face the greatest challenges across a range of social and economic factors.

2.13. Buckinghamshire is one of the least deprived local authorities in England ranking 7th least deprived out of 151<sup>35</sup>. However, there are significant inequalities in levels of deprivation within the county as outlined in Figure 1, with pockets of deprivation concentrated in Aylesbury, High Wycombe, Burnham, Chesham, and Denham<sup>36</sup>. Some more rural areas, particularly in the north of Buckinghamshire, also have relatively high

---

<sup>iii</sup> Healthy life expectancy is defined by the [World Health Organization](#) as the "average number of years that a person can expect to live in "full health" by taking into account years lived in less than full health due to disease and/or injury".

levels of deprivation which is likely to be influenced by barriers related to the built and natural environment.

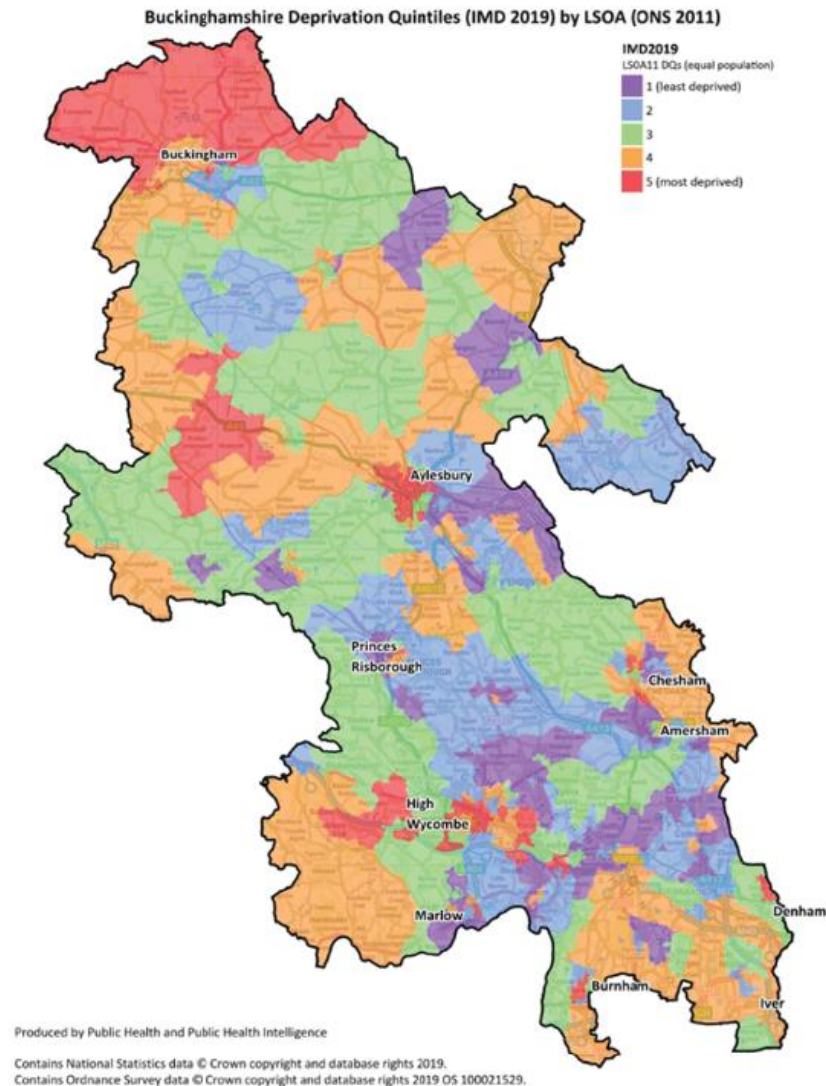


Figure 1: Deprivation in Buckinghamshire, by the Buckinghamshire deprivation quintiles (based on IMD 2019).

## Health

2.15. Long-term conditions are a key indicator of population health. While many of these conditions, such as diabetes, heart disease, and respiratory illnesses can be managed, they often persist and may impact individuals throughout their lives. As people age, the likelihood of developing one or more long-term conditions increases<sup>37</sup>.

2.16. There is an increasing prevalence of many long term conditions in Buckinghamshire, a trend which is expected to increase as the population ages. The prevalence of diabetes has increased from 5.4% in 2012/13 to 6.8% in 2023/24<sup>38</sup> and the prevalence of hypertension, more commonly known as high blood pressure, has increased from 13.1% in 2012/2013 to 14.8% in 2023/24<sup>39</sup>. Child obesity in Buckinghamshire is high, with almost one in five (18.6%) children in Reception and one in three (29.9%) children

in Year 6 children being overweight or obese. There are significant disparities within Buckinghamshire with 42% of Year 6 children with excess weight in the most deprived areas compared with 23% in the least deprived areas<sup>40</sup>.

### 3. Policy SE1: Health Impact Assessments

#### National planning policy context

- 3.1. The *NPPF (2024)* requires planning policies and decisions to enable and support healthy lives, through both promoting good health and preventing ill-health, especially where this would address identified local health and wellbeing needs<sup>iv</sup>. The *NPPF (2024)* also highlights that the creation of high quality, beautiful and sustainable buildings and places is a key design aspect of sustainable development and fundamental to the aims of the planning and development process.
- 3.2. The *PPG* guidance on Health Impact Assessments (HIA) is set in the context of meeting *NPPF (2024)* requirements for the consideration of health and wellbeing. The *PPG* refers to the use of a HIA as a tool to assess the impact of a proposed development on the health and wellbeing of a local population and vulnerable groups within it<sup>41</sup>.
- 3.3. Emerging from the World Health Organization in 1999, HIAs are becoming increasingly used tools to assess the health implications of development proposals<sup>42</sup>. In 2020, Public Health England produced guidance<sup>43</sup> on the use of HIAs in the planning system and their role as a powerful lever to improve public health and wellbeing to reduce inequalities. The guidance outlines how bringing health considerations to the fore through an HIA can add value to the planning process to help developers and decision makers make choices about actions to best prevent ill-health, promote good health and reduce health inequalities<sup>44</sup>.
- 3.4. The *Building for a Healthy Life (2020)*<sup>45</sup> design toolkit is referenced in the *NPPF (2024)* as a framework for improving the quality of new housing developments in England. It provides an integrated health approach to creating places that support wellbeing, sustainability and community through 12 design considerations that are grouped into integrated neighbourhoods, distinctive places and streets for all (Figure 2).

14 INTEGRATED NEIGHBOURHOODS	38 DISTINCTIVE PLACES	62 STREETS FOR ALL
Natural connections	Making the most of what's there	Healthy streets
Walking, cycling and public transport	A memorable character	Cycle and car parking
Facilities and services	Well defined streets and spaces	Green and blue infrastructure
Homes for everyone	Easy to find your way around	Back of pavement, front of home

Figure 2: 12 design considerations of *Building for a Healthy Life*.

<sup>iv</sup> Ministry of Housing, Communities and Local Government (2024). *National Planning Policy Framework*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].

## Health and wellbeing context in Buckinghamshire and evidence to support the policy

- 3.5. As health inequalities continue to widen in England<sup>46</sup>, there is a need to better identify and address the health impact of planning decisions. To support this, the HIA policy requires major development applications to consider how a proposal will impact on the health and wellbeing of the local population.
- 3.6. HIAs align with addressing many of the challenges that are constraining Buckinghamshire's future prosperity as outlined in the Council's *Corporate Plan*<sup>47</sup> and *Strategic Vision for 2050*<sup>48</sup>, including:
- Spatial concentrations of health inequalities and a difference in life expectancy between those in the most and least deprived quintiles;
  - Challenges of an ageing population;
  - A lack of available housing, particularly affordable, accessible and specialist homes; and
  - High levels of traffic congestion<sup>49</sup>.
- 3.7. A HIA could also address economic inactivity due to long term sickness, a key factor linking poorer health outcomes to work and health as outlined in the draft *Joint Local Health and Wellbeing Strategy – 2035 (2025)*<sup>50</sup>.
- 3.8. HIAs and HIA policies have been effectively implemented across a number of local authorities, from district to city councils, to address health inequalities and improve health outcomes<sup>51</sup>. Taking this into account, this policy requires that a HIA is conducted for residential development proposals of 100 dwellings or more, or non-residential development proposals of 1000+ sqm. These thresholds were selected based on similar policies in existing Local Plans for Bristol City Council<sup>52</sup>, Oxford City Council<sup>53</sup>, South Cambridge District Council<sup>54</sup> and Epsom and Ewell Borough Council<sup>55</sup>. The policy also includes a requirement for a HIA for developments falling within uses for education, health and social care, residential care homes, leisure, community, fast food outlets and *sui generis* uses. These are uses that can generate significant health implications for vulnerable population groups.
- 3.9. Considering and detailing the needs of vulnerable groups through a HIA<sup>56</sup> provides the foundation for ensuring that planning proposals are designing and delivering healthy, inclusive and vibrant communities and supporting Buckinghamshire Council's priority to reduce health inequalities.
- 3.10. To be impactful, HIAs should be conducted at the earliest opportunity of a proposed development, often at pre-application stage, to identify the positive health impacts, and minimise the negative health impacts, while maintaining a focus on addressing health inequalities. It will also inform design and detail and include early involvement

of public health, planning officers and applicants<sup>57</sup>.

3.11. A supporting toolkit provides a framework in which to undertake a HIA assessment to identify the positive health impacts and minimise the negative health impacts of a development on population health, whilst maintaining a focus on addressing health inequalities. The HIA should:

- identify vulnerable groups that may be affected by the proposal;
- identify health needs related to the geographical area;
- involve stakeholder engagement to engage effectively with the local community;
- assess the proposal against six key themes: neighbourhood design, healthy homes, healthy food environment, natural and sustainable environments, transport and movement and healthy economy;
- outline recommendations to inform amendments to the proposal to ensure greater consideration of health and wellbeing; and
- detail how to implement the recommendations and monitor the health outcomes.

3.12. The proposal should consider the positive and negative health impacts in relation to the six key themes, detailing how the positive impacts can be maximised and negative impacts reduced.

### **Theme 1: Neighbourhood design**

3.13. High quality neighbourhood design is key to preserving and enhancing the quality of the built environment and delivering successful new places that are sustainable, distinctive and fit for purpose. A design-led approach respects, maintains and enhances the character of towns, villages and the countryside, whilst introducing innovative and creative design solutions.

3.14. Healthy neighbourhoods are holistic, health-supporting environments that are easy to navigate, enable engagement in healthy behaviours and are inclusive of the needs of different groups. Being age-friendly enables people to age well and live a good later life by supporting people to remain in their homes, move around and participate in society and in the activities they value. This requires good physical infrastructure, such as age-friendly homes, transport and business premises, and good social infrastructure, such as services and activities.

3.15. Adopting neighbourhood design principles to promote complete, compact and connected developments, where the provision of, and proximity to, services and facilities to support daily life are within a short distance from their homes. Including

active frontages, natural surveillance and legible streets will promote active travel from a perceived safety perspective. This is important to ensure connectivity between infrastructure is safe and efficient and that different parts of a neighbourhood, such as housing, green spaces and the local centre are connected to encourage these behaviours.

- 3.16. Research shows that individuals who are socially isolated are between 2-5 times more likely than those who have strong social ties to die prematurely<sup>v</sup>. Ensuring social inclusion within the built environment by designing neighbourhoods for social interaction, through mixed use developments, open public spaces, inclusive design and community spaces, will provide opportunities for different ages, cultures and vulnerable groups to interact and feel included within their community. This is important in fostering community cohesion, resilient, connected and equitable communities.

## **Theme 2: Healthier homes**

- 3.17. Quality new homes that are fit for purpose across the lifespan, include a range of types, sizes and tenure, are adaptable to the changing needs of a diverse range of people and a growing and ageing population and take account of groups with specific needs and cultural differences to reduce inequalities.
- 3.18. Poor housing conditions are associated with a higher risk for a range of physical and mental conditions including cardiovascular diseases, respiratory diseases, depression and anxiety<sup>58</sup>. Homes should be energy efficient, protecting from the warm and cold, with good ventilation and natural light, providing a comfortable, warm and safe environment to live, grow-up and age.
- 3.19. Ensuring equitable access to quality and affordable housing for all is one of the building blocks for health. The policy supports Buckinghamshire's *Housing Strategy (2024-2029)*<sup>59</sup> which emphasises the importance of three priorities:
- Responding to the needs of Buckinghamshire's diverse population;
  - Better homes that are good quality, sustainable and matched to need; and
  - New homes that are affordable, accessible and appropriate.

## **Theme 3: Healthy food environment**

- 3.20. Local food environments influence what people buy and eat. People need an environment that provides access to affordable healthy food and supports healthy

---

<sup>v</sup> Foot, J. and Hopkins, T. (2010). *A glass half-full: how an asset approach can improve community health and well-being Acknowledgements*. [online] Available at: [link](#) [Accessed 4 September 2025].



food choices. Local environments include local shops, cafes, restaurants, food advertising and local food growing spaces. Local food environments are influenced by and contribute to wider food systems which impact on food security, the economy, biodiversity and climate change.

- 3.21. *Buckinghamshire's Whole Systems Approach to a Healthy Weight* refers to fostering and enabling access to healthy, affordable food<sup>60</sup> which supports the *UK government food strategy for England, considering the wider UK food system (2025)*. This state that the food economy should pivot towards healthier, affordable and sustainable food offering more balanced diets for all, higher in fruit, vegetables and wholegrains and lower in calories, saturated fat, sugar and salt<sup>vi</sup>. Addressing access to food can in turn reduce high rates of child obesity and the large disparity in obesity rates between areas of high and low deprivation<sup>61</sup>.

#### **Theme 4: Natural and sustainable environments**

- 3.22. Access to, and engagement with, the natural environment is essential for promoting mental and physical health and wellbeing through fostering a connection to nature which reduces stress, encourages physical activity and promotes social interaction. Reducing exposure to environmental hazards by integrating green spaces, improving air and water quality, and implementing resilient infrastructure, supports adaptations to climate change and safeguards communities from climate-related health risks.
- 3.23. Access to green spaces can provide physical and mental health benefits, opportunities for physical activity and enhancing social connections, climate change mitigation and adaptation<sup>62</sup>.
- 3.24. Within England, access to green space is not equal amongst population groups. Those with lower access include:
- People who live in more deprived areas;
  - People from ethnic minority groups, particularly black, black British, Caribbean or African people, and people from an Asian or Asian British background; and
  - People aged 25 to 34-year-olds<sup>63</sup>.
- 3.25. Interventions which increase access to green spaces show most benefits for people living in deprived areas<sup>64,65</sup>.

---

<sup>vi</sup> Department for Environment Food & Rural Affairs (2025). *A UK government food strategy for England, considering the wider UK food system*. [online] Available at: [link](#) [Accessed 2 September 2025].

- 3.26. Man-made air pollution is a significant public health risk and is estimated to contribute to up to 36,000 deaths in the UK each year and exposure to high levels of air pollution has been associated poor health outcomes including low-birth weight babies, asthma, childhood respiratory infections, cardiovascular disease, diabetes, lung cancer and dementia<sup>66</sup>. It is estimated that between 2017 and 2025 the total cost to the NHS and social care system of air pollutants (fine particulate matter and nitrogen dioxide), for which there is more robust evidence for an association, will be £1.6 billion<sup>67</sup>.
- 3.27. Buckinghamshire's *Climate Change and Air Quality Strategy (2021)*<sup>68</sup> highlights that air quality is assessed against levels of specific air pollutants and is recognised as a major environmental factor that can affect human health. People are not affected equally by air pollution with those living in more deprived areas or those with weaker or developing respiratory and circulatory systems being typically more affected.
- 3.28. The council's *Annual Status Report 2024*<sup>69</sup> has identified that road traffic is a main source of air pollution in Buckinghamshire with poor air quality increasing the risk of cardiovascular and respiratory disease and being a cause of premature death.
- 3.29. Noise pollution can contribute to an increased risk of developing more serious health problems such as cardiovascular disease and type 2 diabetes<sup>70</sup> and whilst artificial lighting can improve sense of safety and use of the public realm, light pollution has been associated with changes to melatonin production and circadian rhythms, contributing to sleep disorders, mental illness, obesity, cancer, and cardiovascular disease<sup>71</sup>.

## **Theme 5: Transport and movement**

- 3.30. Transport facilitates the movement of people between their home, work, services and facilities, including education, across Buckinghamshire and beyond. It supports sustainable growth opportunities, inward investment, regeneration and contributes towards the delivery of sustainable development. The way we move also affects our health as individuals and as a community. Prioritising connectivity with safe and efficient transport infrastructure to promote active travel including walking, cycling and wheeling, and the use of public transport, enable mobility for all ages within, and between neighbourhoods. This is essential to promote social interaction and reduce social isolation, particularly among the most vulnerable.
- 3.31. *Buckinghamshire's Physical Activity Strategy (2024-2029)*<sup>72</sup> identifies the need to design physical activity into people's lives from the early planning stages and supports the principles of healthy neighbourhood design to ensure that pedestrians and cyclists are prioritised when developing or maintaining neighbourhoods, streets, roads and

community spaces.

3.32. Within Buckinghamshire:

- Over half (51.9%) of children and young people are physically active (2023/24), above the England average of 47.8%<sup>73</sup>.
- 73.7% of adults are physically active (2023/24), higher than the England average of 67.4%<sup>74</sup>.
- 16.5% of adults are physically inactive, lower than the England average of 22%<sup>75</sup>.

3.33. Active Travel England<sup>76</sup> is a national government agency with an objective of making walking, wheeling, and cycling the preferred choice for everyday local journeys. The Council's *Local Cycling and Walking Infrastructure Plan* supports this by recommending ways to create a network of safe, direct, attractive, comfortable and coherent active travel infrastructure. Investment in active travel supports progress on the Council's policy objectives, offering benefits including improving public health, air quality and road safety, reducing congestion, boosting the local economy, supporting leisure and tourism and tackling climate change<sup>77</sup>.

3.34. To promote active travel that encompasses accessibility, connectivity and ease of movement, neighbourhoods should be designed to prioritise people and active modes of travel, including walking, cycling and wheeling, over car dependency. Living in an active neighbourhood can provide up to 59% of weekly activity<sup>78</sup> and so designing in walkability features such as wide pavements, cycle lanes, safe road crossings and secure cycle parking are important measures to encourage physical activity.

## **Theme 6: Healthy economy**

3.35. Creating accessible, vibrant places with a diverse and healthy retail offer is essential to ensuring the vitality, viability, character and public realm of town centres, encouraging people from diverse backgrounds to visit and spend time. Providing a range of the right employment opportunities is also important to reduce socioeconomic inequalities and promote good health outcomes to support physical and mental health and wellbeing.

## **Monitoring**

3.36. The success of HIAs will be monitored based on the number of assessments submitted and carried out at the planning application stage so that it can inform decision-making<sup>79</sup>.

## 4. Policy SE2: Fast food outlets and takeaways

### National planning policy context

4.1. The *NPPF (2024)* explicitly states that Local planning authorities should refuse applications for hot food takeaways and fast food outlets:

- a) within walking distance of schools and other places where children and young people congregate, unless the location is within a designated town centre; or
- b) in locations where there is evidence that a concentration of such uses is having an adverse impact on local health, pollution or anti-social behaviour<sup>vii</sup>.

4.2. The *PPG* outlines the role of planning in influencing health and reducing obesity and excess weight in local communities by creating healthier food environments. In creating healthier food environments, the *PPG* states that planning policies can, where justified, seek to limit the proliferation of particular uses where evidence demonstrates this is appropriate and where such uses require planning permission<sup>80</sup>. The *PPG* states that planning policies and proposals may need to have particular regard for the following issues:

- proximity to locations where children and young people congregate such as schools, community centres and playgrounds.
- evidence indicating high levels of obesity, deprivation, health inequalities and general poor health in specific locations.
- over-concentrations of certain uses within a specific area.
- odours, noise and traffic impact; and
- managing litter caused by fast food outlets<sup>viii</sup>.

### National health policy context

4.3. The government's *Fit for the future: 10 Year Health Plan for England (2025)* seeks to empower people to make healthy choices with a focus on improving the food environment to reduce obesity through a shift from 'sickness to prevention'<sup>81</sup>. Obesity is a leading cause of multiple long-term conditions and is estimated to cost the NHS over £11.4 billion every year, with overall societal costs estimated at £98 billion per year, including losses from economic inactivity<sup>82</sup>.

4.4. Planning policy restrictions on fast food outlets forms part of the national food strategy: *A UK government food strategy for England, considering the wider UK food system (2025)*. Local Authority powers to block new fast food outlets near schools is

---

<sup>vii</sup> Ministry of Housing, Communities and Local Government (2024). *National Planning Policy Framework*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].

<sup>viii</sup> Ministry of Housing, Communities and Local Government (2024). *Planning Practice Guidance. Healthy and safe communities* [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].

listed as one of thirteen existing national initiatives that aims to achieve an improved food environment that supports healthier and more environmentally sustainable food sales<sup>ix</sup>. The strategy identifies the importance of a healthier food system to improve health, reduce obesity and support economic growth. It states that healthier diets result in a healthier and more productive population, with improved wellbeing, reduced burden on the NHS and a stronger foundation for growth across the economy. It seeks to create a 'good food cycle', pivoting the food economy towards healthier, affordable, sustainable food with businesses supporting more balanced diets for all, higher in fruit, vegetables and wholegrains and lower in calories, saturated fat, sugar and salt<sup>x</sup>.

## Definitions and terms

### *Fast food outlet and takeaways*

- 4.5. Fast food is defined by OHID as food that is energy dense (calories, kcal per gram of food) and available quickly, usually via a counter service or through online delivery services, delivery apps or websites for consumption on or off the premises. This includes a range of outlets selling fast food including, but not limited to burgers, pizza, kebabs, chicken, Indian takeaway, Chinese takeaway, fish and chips<sup>xi</sup>.
- 4.6. Fast food outlets and takeaways can be considered a *sui generis* use class, where the sale of hot food, and consumption of that food is mostly undertaken off the premises<sup>xii</sup>. A change of use to *sui generis* requires planning permission. Fast food outlets may also fall under Class E which includes uses for the sale of food and drink for consumption mostly on the premises<sup>xiii</sup>. Changes within Class E do not require planning permission but there may be other conditions in which these proposals require planning permission such as external building work or drive-through services. This policy also requires consideration of mixed use proposals that include an element of hot food takeaway (*sui generis*) and fall under Class E.

### *Walking distance of schools and where children congregate*

- 4.7. OHID's guidance<sup>83</sup> states that limiting the availability of fast food outlets and takeaways within walking distance of schools can contribute to tackling the rising

---

<sup>ix</sup> Department for Environment Food & Rural Affairs (2025). *Annex B: Summary of existing or ongoing UK government policy across the outcomes*. [online] Available at: [link](#) [Accessed 2 September 2025].

<sup>x</sup> Department for Environment Food & Rural Affairs (2025). *A UK government food strategy for England, considering the wider UK food system*. [online] Available at: [link](#) [Accessed 2 September 2025].

<sup>xi</sup> Office for Health Improvement & Disparities (2025). *Wider Determinants of Health: statistical commentary, February 2025*. [online] Available at: [link](#) [Accessed 3 September 2025].

<sup>xii</sup> UK Legislation (2020). *The Town and Country Planning (Use Classes) (Amendment) (England) Regulations 2020*. [online] Available at: [link](#) [Accessed 3 September 2025].

<sup>xiii</sup> Planning Portal (2020). *Use Classes - Change of use - Planning Portal*. [online] Available at: [link](#) [Accessed 3 September 2025].

levels of obesity and other health impacts. It suggests a walking distance of 400 metres, which equates approximately to a 5-minute walk, as an accepted standard distance. The 400m distance is also recognised as a reasonable walking distance within the *Urban Design Compendium 2*<sup>84</sup>. Whilst OHID's guidance proposes a 400m radius as an accepted standard, it indicates local topography and context, such as natural or man-made barriers e.g. motorways or rivers that may limit accessibility from schools, should be considered. There may also be instances where adverse impacts may occur beyond 400m if it is on a main walking route to school.

- 4.8. There is no specific definition of 'where children congregate' in the NPPF. The PPG provides the examples of community centres and playgrounds as places where children and young people congregate<sup>85</sup>. OHID's guidance, *Healthy weight environments: using the planning system*<sup>86</sup> also identifies parks and leisure centres as common places of congregation.

#### **Health and wellbeing context in Buckinghamshire and evidence to support the policy**

- 4.9. This policy allows the council to assess planning applications for fast food outlets and takeaways based on proximity to schools and adverse local health needs, pollution and anti-social behaviour. It enables the council to support the health and wellbeing of residents and reduce health inequalities by ensuring fast food and takeaway proposals are not located near schools or other places where children and young people congregate (outside of town centres) or do not have adverse impacts on local health, pollution or anti-social behaviour. This enables the council to consider the impact of proposals on the amenity of residential areas and the quality of public realm in local retail environments.
- 4.10. The local food environment influences what people buy and eat and impacts on local population health<sup>87</sup>. Access to supermarkets and shops selling groceries, limited access to fast food, higher income and higher education level are independently associated with higher consumption of fresh fruits and vegetables, lower consumption of fast food and high sugar drinks, and lower risk of overweight and obesity<sup>88</sup>. There is a growing evidence base which shows that children and adults exposed to fast food outlets and takeaways in local neighbourhoods, near schools and on commutes are more likely to eat fast food more often, have poor diets and be at a higher risk of obesity and diet-related diseases, with deprivation amplifying these effects<sup>89,90,91,92,93,94</sup>.
- 4.11. Research shows that eating fast food once a week or more puts people, including children and young people, at risk of poor diet, obesity and diet-related disease<sup>95</sup>. A national study showed that 99% of meals commonly sold by fast food outlets and takeaways exceeded the recommended calories per meal (600 kcal), 57% exceeded

double the average recommended daily intake per meal (1,200 calories), and 2% exceeded our average recommended daily intake (2,250 calories)<sup>96</sup>. Excess calorie intake from foods and drinks unhealthy, processed foods high in fat and sugar is the primary driver of obesity<sup>97</sup>.

### Local policy context

- 4.12. The policy aligns with Buckinghamshire Council's *Corporate Plan* to strengthen our community, improve health and wellbeing, reduce gaps in health outcomes, promote healthy lifestyles and support existing business communities, particularly small to medium enterprises, to grow and flourish<sup>98</sup>. The policy supports priorities in the draft *Joint Local Health and Wellbeing Strategy – 2035 (2025)* to improve population health, reduce health inequalities, reduce child obesity, and create a healthier workforce<sup>99</sup> which also supports Buckinghamshire's economic and growth plans<sup>100</sup>. The *Get Britain Working White Paper*<sup>101</sup> identifies obesity as a significant driver and key risk factor driving health-related economic inactivity.
- 4.13. The policy contributes to *Buckinghamshire's Whole System Healthy Weight Action Plan* which sets out council and partner actions to create a local environment where residents are living healthier, happier and more active lifestyles, free from obesity<sup>102</sup>. The action plan is part of a suite of initiatives to help shape local healthier food environments which reduce the availability and promotion of high fat, sugar and salt foods in favour of healthier options.

### Local health: fast food exposure

- 4.14. *The Fast Food Report: Understanding the exposure of fast food outlets on the health of Buckinghamshire residents*<sup>xiv</sup> investigated the impact of fast food outlet exposure on the health and wellbeing of Buckinghamshire residents. The report maps fast food outlets in Buckinghamshire in relation to child obesity and deprivation and analyses their proximity to schools. It focuses on Opportunity Bucks wards which experience high levels of deprivation, child obesity and health inequalities. The report concluded that fast food exposure is a significant public health concern in Buckinghamshire particularly in deprived areas and near schools. Children in Opportunity Bucks wards are disproportionately affected by fast food outlet exposure. Evidence suggests fast food outlet exposure contributes to poor diet, child and adult obesity and diet-related diseases and is likely to reinforce and exacerbate health inequalities. Key report findings are outlined below:

---

<sup>xiv</sup> Buckinghamshire Council (2023). The fast food report: Understanding the exposure of fast food outlets on the health of Buckinghamshire residents. Last updated 2025. Available at [link](#). Accessed 4/9/25.

### *Proximity to school*

- 4.15. In Buckinghamshire, approximately one third of primary schools and secondary schools in Buckinghamshire had at least one fast food outlet or takeaway within 400m of their school.
- 4.16. Significantly more schools in Opportunity Bucks wards had fast food outlets within 400m compared to other schools. For example, four times as many primary schools had a fast food outlet or takeaway within 400m in an Opportunity Bucks wards<sup>103</sup> (65%) compared to non-Opportunity Bucks wards (16%).

### *Child obesity and deprivation*

- 4.17. Fast food outlets and takeaways were not equally distributed in Buckinghamshire. A higher density of fast food outlets and takeaways per 100,000 people in town centres and wards within Aylesbury and High Wycombe, areas which also have higher levels of deprivation and Year 6 child obesity prevalence.
- 4.18. Localised concentrations of fast food outlets were identified in areas with high levels of deprivation and year 6 child obesity prevalence.

### *Fast food consumption*

- 4.19. In 2023/24, over one third of pupils in primary schools (35.4%) and secondary schools (34.3%) consumed fast food at least once or twice a week for their main meal. Primary and secondary school children also reported eating fast food regularly on the way to and from school, at school lunchtime, at home and for extra snacks and meals. Eating fast food once a week or more is a risk factor for poor diet, child obesity, adult obesity and diet-related disease.
- 4.20. The proportion of children eating fast food frequently was much higher among children attending primary schools in Opportunity Bucks wards.

### **Local health: Access to healthy food**

- 4.21. Food insecurity is a complex problem driven by poverty, lack of access to supermarkets and grocery stores and rising costs of food<sup>104</sup>. Food insecurity risk is not spread evenly across Buckinghamshire with higher food insecurity across parts of Aylesbury, High Wycombe and other pockets across the county<sup>105</sup>. Adverse impacts on food security may arise if new fast food outlet proposals displace other food retailers, particularly in areas of deprivation or with low car ownership and in rural areas where there is high reliance on these local shops<sup>106,107</sup>.



## **Adverse impacts**

### *Air, noise and light pollution*

4.22. Air, noise and light pollution can adversely impact on physical and mental health as well as reduced enjoyment of public spaces and the decline of residential amenity<sup>108</sup>. Health impacts include:

- Poor air quality increases risk of cardiovascular and respiratory disease and is a key cause of premature death and health inequalities in the UK<sup>109</sup>.
- Local noise pollution can cause sleep disruption and contribute to increased risk of developing more serious health problems such as cardiovascular disease and type 2 diabetes<sup>110,111</sup>.
- Artificial light at night in outdoor areas is a growing problem with studies showing health impacts on circadian rhythm associated with sleep disorders, endocrine diseases, cardiovascular disease, cancer, immune impairment, depression, anxiety and cognitive impairments<sup>112</sup>.

4.23. Proposals with an impact on pollution should be assessed by the Environment Health team and the Highways team as part of the statutory consultation process.

### *Anti-social behaviour*

4.24. Anti-social behaviour is defined as behaviour that is likely to cause harassment, alarm or distress, which includes fear of crime, concern for public safety, public disorder and public nuisance, to one or more people not in the same household<sup>113</sup>. Tackling anti-social behaviour is a priority for Buckinghamshire<sup>114</sup>. Anecdotal evidence of anti-social behaviour associated with fast food outlets was raised in the Buckinghamshire Fast Food Report<sup>115</sup>. Littering is a form of anti-social behaviour. Many fast food outlets and takeaways generate substantial litter in an area well beyond their immediate vicinity with discarded food waste and litter attracting foraging animals and pest species<sup>116</sup>.

4.25. Conditions imposed on proposals can mitigate adverse impacts of anti-social behaviour affecting residential amenity. This may include restricting opening hours, undertaking litter picking on and off the premises and additional bins and advisory signage<sup>117</sup>. It is recommended that the Council should ensure applicants are aware of powers within the *Code of Practice on Litter and Refuse*<sup>118</sup>, *Anti-social Behaviour, Crime and Policing Act 2014*<sup>119</sup> and the *Licencing Act 2003*<sup>120</sup> to emphasise the importance of ensuring appropriate measures are put in place to avoid non-compliance with standards and obligations<sup>121</sup>. Mitigation to offset adverse health impacts cannot be applied to circumvent the policy restrictions for proposals including those that fall within walking

distance of schools and where children congregate and where they may cause adverse impacts on local health, pollution or anti-social behaviour.

### **Evaluation and monitoring**

4.26. Fast food outlet and takeaway policies have been evaluated through peer-reviewed research.

- *Precedence:* These policies are widely adopted in the UK with approximately 50% of councils having implemented policies to promote a healthier food environment by 2018, prior to the new NPPF requirements<sup>122</sup>.
- *Effective:* When supported by local evidence, these policies can prevent new fast food outlets and takeaways in targeted areas such as near schools and to reduce over-concentrations and clustering<sup>123,124</sup>.
- *Beneficial:* Modelling, based on policy effectiveness, suggests these policies lead to both health and net economic benefits. Estimated net economic benefits were found for local authorities, national government and the NHS. Projected health benefits including reductions in population obesity and diseases including diabetes<sup>125</sup>.
- *Acceptable:* Research shows these policies were seen as acceptable and necessary by local communities. A study of 3,323 adults found high acceptability with over half supportive, over a third neutral and less than 10% opposed. Over 70% believed they would help young people eat better. One third of 16-17 year olds thought this would mean they would consume less fast food<sup>126</sup>.

4.27. Buckinghamshire's fast food outlet and takeaway policy should be monitored through the number of fast food outlet and takeaway planning applications received, approved and refused.

## 5. Policy SE3: Community food growing

### National planning policy context

- 5.1. The *NPPF (2024)* identifies community food growing and access to healthier food in supporting healthy lives, with allotments specifically referenced<sup>127</sup>. Ensuring access to community food growing spaces aligns with the *NPPF*'s goal of fostering healthy, inclusive environments that promote social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other<sup>xv</sup>. These spaces create opportunities for people to connect, including those who might not typically engage with one another.
- 5.2. The *PPG* states that Local planning authorities can have a role by supporting opportunities for communities to access a wide range of healthier food production and consumption choices<sup>xvi</sup>. The *National Design Guide* incorporates community food growing in planning which should provide attractive open spaces in locations that are easy to access, with activities for all to enjoy, such as play, food production, recreation and sport, so as to encourage physical activity and promote health, wellbeing and social inclusion<sup>xvii</sup>.
- 5.3. The *UK government food strategy for England, considering the wider UK food system (2025)* identifies 10 priority outcomes needed to deliver the benefits of a more affordable, sustainable and resilient food system. In relation to community growing, creating better access for all to safe, affordable, healthy, convenient and appealing food options within a vibrant food culture where people feel connected to their food systems can support more affordable, healthier and more balanced diets for all, higher in fruit, vegetables and wholegrains and lower in calories, saturated fat, sugar and salt<sup>xviii</sup>.

### Health and wellbeing context in Buckinghamshire and evidence to support the policy

- 5.4. Community food growing opportunities present a wide range of social and health benefits to residents and local communities, aligning with Buckinghamshire's priorities and strategies to improve health and wellbeing. This includes the *Corporate Plan* to strengthen communities, enabling residents to live independent, fulfilling lives, within

---

<sup>xv</sup> Department for Environment Food & Rural Affairs (2025). *Annex B: Summary of existing or ongoing UK government policy across the outcomes*. [online] Available at: [link](#) [Accessed 2 September 2025].

<sup>xvi</sup> Ministry of Housing, Communities & Local Government (2024). *Planning practice guidance – healthy and safe communities* [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].

<sup>xvii</sup> Ministry of Housing, Communities and Local Government (2021). *National Design Guide*. [online] Available at: [link](#) [Accessed 2 September 2025].

<sup>xviii</sup> Department for Environment Food & Rural Affairs (2025). *A UK government food strategy for England, considering the wider UK food system*. [online] Available at: [link](#) [Accessed 2 September 2025].

strong, healthy, inclusive, and resilient communities<sup>128</sup> and the *Joint Local Health and Wellbeing Strategy – 2035 (2025)* priorities across the lifespan including improving mental health and reducing social isolation<sup>129</sup>. The *Healthy Ageing Strategy 2024-2029* also outlines reducing social isolation and loneliness as a priority<sup>130</sup> and the Whole Systems Approach to a Healthy Weight refers to fostering and enabling access to healthy affordable food<sup>131</sup>.

## Social isolation

5.5. Community growing is a means of building social capital and social structures to address national concerns on social cohesion<sup>132</sup>, and international and local concerns about the impact of loneliness and social isolation on health and wellbeing<sup>133</sup>. Social cohesion is the glue that binds communities. Higher levels of social cohesion support communities that are healthier, more resilient to external shocks and crises, and experience higher economic growth<sup>xix</sup>.

5.6. In Buckinghamshire:

- Loneliness has increased, from 18% reporting feeling lonely sometimes or often in 2019/20 to 24% in 2020/21<sup>134</sup>. Loneliness and social isolation impacts on mental and physical health problems, increasing risk of heart disease, stroke, depression, anxiety, dementia and premature death<sup>135</sup>. It can also result in poor school and work performance, and costs economies<sup>136</sup>.
- Some residents experience high food insecurity, including parts of Aylesbury, High Wycombe, and pockets within most towns<sup>137</sup>. Food insecurity increases stress and puts people at risk of poor mental health<sup>138</sup>. It also increases risk of poor diet and obesity<sup>139</sup>.
- In Buckinghamshire, data suggests the proportion of adults eating the recommended '5 a day' of fruit and vegetables is declining with only 28.7% of adults eating the recommended five portions<sup>140</sup>.

5.7. There is evidence that community growing opportunities are associated with improved mental and physical health and provide opportunities to access affordable healthy food. Community growing improves social connections and community cohesion by bringing diverse groups of people together around a common interest<sup>141</sup> with opportunities to be active, meet others and participate in society<sup>142,143</sup>. They have been shown to improve mood and reduce stress, tension, depression, anger and confusion<sup>144</sup> and can also provide relief for households on food costs<sup>145</sup>.

---

<sup>xix</sup> United Nations (2023). *Social Cohesion Concept and Measurement*. [online] Available at: [link](#) [Accessed 2 September 2025].

- 5.8. These spaces present benefits to economic development, supporting knowledge and skill development in food production, distribution, preparation and waste, and support cooking initiatives and educational opportunities for residents, schools and colleges<sup>146</sup>.
- 5.9. Community food growing can improve the public realm and increase biodiversity, turn barren spaces into green productive areas and provide opportunities to regenerate derelict or underused urban spaces into high quality, safe, social public spaces<sup>147</sup>.
- 5.10. For the purposes of this policy, the definitions of community food growing are as follows:
- **Community gardens** are local spaces where residents or community groups come together to grow food<sup>148</sup>.
  - **Allotments** are small plots of land let to individuals for food growing purposes<sup>149</sup>.
  - **Community orchards** are places for people to come together to plant and cultivate fruit trees or nut trees<sup>150</sup>.
- 5.11. Nationally there are large waiting lists for allotments. A *Buckinghamshire Community Food Growing Strategy (2021)*<sup>151</sup> shows that there is a strong culture and practice of community food growing across Buckinghamshire with places and projects across the county, in schools, nurseries, colleges, parks and gardens, allotments and community buildings and settings. The report found a need for further access to growing spaces with:
- 35% of parish councils interested in exploring having a community orchard.
  - 28% of allotments would like more access to land to respond to demand and increases in population.
- 5.12. To address this, the policy seeks to protect existing spaces and provide new spaces to grow food. Protecting existing spaces community gardens, allotments and orchards. Planning policy and decision-making should ensure legal duties of the council in relation to allotments. Allotments are defined in legislation, and the provision and conservation of parish and council-owned allotments are protected under the *Small Holdings and Allotments Act 1908* and the *Allotments Act 1925* as amended by subsequent legislation<sup>152,153</sup>.
- 5.13. Enabling new provision of community gardens, allotments and orchards. Planning and decision-making should support proposals that enable provision of new community growing spaces. Land that may be available for community growing include communal land on a housing estate, waste ground and derelict sites, land within parks, land

awaiting development, rooftops, hospital grounds, school grounds and allotment plots<sup>154</sup>. New growing spaces may include spaces within regeneration projects, new or existing buildings adaptations (e.g. rooftop gardens, grass roots) vertical gardens, temporary use of disused land and housing developments.

- 5.14. The policy requires all new developments where 50 to 99 dwellings are proposed to include a 150m<sup>2</sup> plot of land and where 100 dwellings or more are proposed to include a 300m<sup>2</sup> plot for the provision of a community garden, allotment or orchard. Similar thresholds have been successfully implemented in other Local Plans for example Bristol City Council<sup>155</sup>. The location of the space should be included within initial proposals.

## Design

- 5.15. Community food growing spaces should contribute to high quality design and the provision of a good standard of amenity for existing and future residents within communities and new housing developments. Decision-making on community growing should consider:

- **Benefits:** to mental and physical health from eating fresh food and being physically active outdoors, community cohesion, potential for economic development through developing new skills, improved education outcomes and environmental benefits including rainwater management and increased biodiversity<sup>156</sup>.
- **Land suitability:** consideration should be given to issues such as exposure to the elements, drainage, soil quality, contamination and depth, solar orientation and overshadowing, water supply and the appropriateness of species planted<sup>157</sup>. There is some evidence that growing food in contaminated soil may pose health risks from exposure to toxins present in the fruit and from direct contact with contaminated soil<sup>158</sup>. As a precaution, food and fruit growing should not be placed on roadsides and verges.
- **Accessibility:** to food growing spaces should be located close to residential areas, public transport, and be inclusive in design for all users<sup>159</sup>. Growing sites can be made more accessible, particularly to older and vulnerable groups such as by ensuring toilet facilities, seating, storage provision and shelter from the elements are provided.<sup>160</sup>
- **Management and maintenance:** of spaces should be detailed in the proposals management plan<sup>161</sup>.

## References

---

- <sup>1</sup> UK Government (2012). *Health and Social Care Act 2012*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>2</sup> Buckinghamshire Council (2025). *Health and Wellbeing Board Agenda – Draft Joint Local Health and Wellbeing Strategy – 2035 (item 9)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>3</sup> GOV.UK (2024). *Get Britain Working White Paper*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>4</sup> Ministry of Housing, Communities and Local Government (2024). *National Planning Policy Framework*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].
- <sup>5</sup> Ministry of Housing, Communities & Local Government (2024). *Planning practice guidance*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].
- <sup>6</sup> Buckinghamshire Council (2024). *Corporate plan*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>7</sup> Buckinghamshire Council (2024). *Buckinghamshire’s strategic vision for 2050*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>8</sup> Buckinghamshire Council (2025). *Health and Wellbeing Board Agenda – Draft Joint Local Health and Wellbeing Strategy – 2035 (item 9)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>9</sup> Public Health England (2018). *Chapter 6: Wider Determinants of Health*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>10</sup> Marmot, M. et al (2010). *Fair Society, Healthy Lives: The Marmot Review*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>11</sup> Public Health England (2018). *Chapter 6: Wider Determinants of Health*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>12</sup> Health Foundation What builds good health. Available at: [link](#). [Accessed 4 September 2025]
- <sup>13</sup> Buckinghamshire Council (2025). *Joint Strategic Needs Assessments (JSNA)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>14</sup> Buckinghamshire Healthcare NHS Trust (2025). *Trust Strategy 2025-2035 - Buckinghamshire Healthcare NHS Trust*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>15</sup> Buckinghamshire Council (2022). *Opportunity Bucks*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>16</sup> Buckinghamshire Council (2025). *Health and Wellbeing Board Agenda – Draft Joint Local Health and Wellbeing Strategy – 2035 (item 9)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>17</sup> Public Health England (2021). *Place-based approaches for reducing health inequalities: main report*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>18</sup> Department of Health and Social Care (2019). *Advancing our health: prevention in the 2020s – consultation document*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>19</sup> Public Health England (2021). *Inclusive and sustainable economies: leaving no one behind (executive summary)*. [online] Available at: [link](#) [Access 2 September 2025].
- <sup>20</sup> Asaria M, Doran T, Cookson R., (2016), The costs of inequality: whole-population modelling study of lifetime inpatient hospital costs in the English National Health Service by level of neighbourhood deprivation. 2016;70(10):990-6.
- <sup>21</sup> Marmot, M. et al (2010). *Fair Society, Healthy Lives: The Marmot Review*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>22</sup> Public Health England (2021). *Place-based approaches for reducing health inequalities: main report*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>23</sup> NHS. (2024) Mortality Profile. Available at [link](#). Accessed 2 September 2025)
- <sup>24</sup> Argentieri, M.A., Amin, N., Nevado-Holgado, A.J. et al. Integrating the environmental and genetic architectures of aging and mortality. *Nat Med* **31**, 1016–1025 (2025). <https://doi.org/10.1038/s41591-024-03483-9>. Available at: [link](#). [Accessed 2 September 2025].
- <sup>25</sup> Buckinghamshire Council (2025). Director of Public Health Annual Report Preventing Heart Disease and Stroke. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>26</sup> ONS (2023). *Population estimates - Office for National Statistics*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>27</sup> ONS (2022). *Population projections - Office for National Statistics*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>28</sup> ONS (2022). *Population projections - Office for National Statistics*. [online] Available at: [link](#) [Accessed 2 September 2025].

- 
- <sup>29</sup> The Health Foundation (2023). *2.5 Million More People in England Projected to Be Living with Major Illness by 2040*. [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>30</sup> Department of Health & Social Care (2025). *Fingertips | Department of Health and Social Care*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>31</sup> Buckinghamshire Council (2024). *Buckinghamshire Inequalities by deprivation life course, April 2024*. [online] Available at: [link](#) [Accessed 15 July 2025].
- <sup>32</sup> Office for Health Improvement and Disparities (2025). *Public Health Outcomes Framework: Profile*. [online] Available at: [link](#) [Accessed 21 August 2025].
- <sup>33</sup> ONS (2021). *How life has changed in Buckinghamshire: Census 2021*. [Online]. Available at: [link](#) [Accessed 9 July 2025].
- <sup>34</sup> Ministry of Housing, Communities & Local Government (2019). *English Indices of Deprivation 2019*. [online] Available at: [link](#) [Accessed 9 July 2025].
- <sup>35</sup> Buckinghamshire Council (2024). *Deprivation and Child Poverty*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>36</sup> Bucks Data Exchange (2022). *Indices of Multiple Deprivation (2019)* [online]. Available at: [link](#) [Accessed 2 September 2025].
- <sup>37</sup> WHO (2024). *Ageing and health*. [online]. Available at: [link](#) [Accessed 3 September 2025].
- <sup>38</sup> Department of Health & Social Care (2025). *Fingertips | Department of Health and Social Care*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>39</sup> Department of Health & Social Care (2025). *Fingertips | Department of Health and Social Care*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>40</sup> Buckinghamshire Council (2025). *Analysis summary National Child Measurement Programme Buckinghamshire, 2023/24 Reception (4 to 5 year olds)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>41</sup> Ministry of Housing, Communities & Local Government (2024). *Planning practice guidance*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].
- <sup>42</sup> Local Government Association (2024). *Empowering healthy places: Unveiling the powers and practices of local councils in fostering healthy neighbourhoods*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>43</sup> Public Health England (2020). *Health Impact Assessment in spatial planning A guide for local authority public health and planning teams*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>44</sup> Public Health England (2020). *Health Impact Assessment in spatial planning A guide for local authority public health and planning teams*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>45</sup> Birkbeck D and Kruczkowski S et al (2020). *Building for a Healthy Life*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>46</sup> Marmot, M., Allen, J., Boyce, T., Goldblatt, P. and Morrison, J. (2020). *Health Equity in England: the Marmot Review 10 Years On*. [online] Institute of Health Equity. Available at: [link](#) [Accessed 2 September 2025].
- <sup>47</sup> Buckinghamshire Council (2024). *Corporate plan*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>48</sup> Buckinghamshire Council. (2024). *Buckinghamshire's strategic vision for 2050*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>49</sup> Buckinghamshire Council. (2024). *Buckinghamshire's strategic vision for 2050*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>50</sup> Buckinghamshire Council (2025). *Health and Wellbeing Board Agenda – Draft Joint Local Health and Wellbeing Strategy – 2035 (item 9)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>51</sup> Bird, E L & Hyde, G et al. 2024. *Planning for healthy places: a practical guide for local authorities on embedding health in Local Plans and planning policies in England*.
- <sup>52</sup> Bristol City Council (2023). *Bristol Local Plan Publication Version*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>53</sup> Oxford City Council (2020). *Oxford Local Plan 2036*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>54</sup> South Cambridgeshire District Council (2018). *South Cambridgeshire Local Plan*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>55</sup> Epsom & Ewell Borough Council (2024). *Proposed submission Epsom & Ewell Local Plan*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>56</sup> Public Health England (2020). *Health Impact Assessment in spatial planning A guide for local authority public health and planning teams*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>57</sup> Bird, E L & Hyde, G et al. 2024. *Planning for healthy places: a practical guide for local authorities on embedding health in Local Plans and planning policies in England*.



- 
- <sup>58</sup> Kulakiewicz, A. (2022). *Housing and health: a reading list*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>59</sup> Buckinghamshire Council. (2024). *Housing strategy and policy*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>60</sup> Buckinghamshire Council (2025). *Whole Systems Approach to a Healthy Weight*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>61</sup> Buckinghamshire Council (2025). *Analysis summary National Child Measurement Programme* [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>62</sup> The Health Foundation (2024). *Inequalities in access to green space*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>63</sup> The Health Foundation (2024). *Inequalities in access to green space*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>64</sup> Geary RS, Thompson D, Mizen A, et al. Ambient greenness, access to local green spaces, and subsequent mental health: a 10-year longitudinal dynamic panel study of 2.3 million adults in Wales. *Lancet Planet Health*. 2023;7(10):e809-e818. doi:10.1016/S2542-5196(23)00212-7
- <sup>65</sup> Lovell, R., White, M.P., Wheeler, B., Taylor, T., Elliott, L. (2020) A rapid scoping review of health and wellbeing evidence for the Green Infrastructure Standards. European Centre for Environment and Human Health, University of Exeter Medical School. For: Natural England, Department for the Environment, Food and Rural Affairs, Public Health England, and Ministry for Housing, Communities and Local Government, England.
- <sup>66</sup> Office for Health Improvement & Disparities (2022). *Air pollution: applying All Our Health*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>67</sup> Office for Health Improvement & Disparities (2022). *Air pollution: applying All Our Health*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>68</sup> Buckinghamshire Council (2021). *Air Quality*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>69</sup> Buckinghamshire Council. (2025). *Air quality management reviews and annual reports*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>70</sup> UK Health Security Agency (2023). *Noise pollution: mapping the health impacts of transportation noise in England*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>71</sup> Garavito, G., Bennin, F., Barnett, P. and Vindrola-Padros, C. (2023). *WHAT ARE THE EFFECTS OF ARTIFICIAL LIGHT ON HUMAN HEALTH? AN EVIDENCE BRIEF*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>72</sup> Buckinghamshire Council (2024). *Moving More Buckinghamshire Physical Activity Strategy*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>73</sup> Department of Health & Social Care (2025). *Fingertips | Department of Health and Social Care*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>74</sup> Department of Health & Social Care (2025). *Fingertips | Department of Health and Social Care*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>75</sup> Department of Health & Social Care (2025). *Fingertips | Department of Health and Social Care*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>76</sup> Active Travel England (2025). *About us*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>77</sup> Buckinghamshire Council. (2024). *Local Cycling and Walking Infrastructure Plans*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>78</sup> Public Health England (2014). *Identifying what works for local physical inactivity interventions*. Available at: [link](#) [Accessed 2 September 2025].
- <sup>79</sup> Bird, E L & Hyde, G et al. 2024. *Planning for healthy places: a practical guide for local authorities on embedding health in Local Plans and planning policies in England*.
- <sup>80</sup> Ministry of Housing, Communities & Local Government (2014). Planning Practice Guidance. *Health and safe communities* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>81</sup> Department of Health and Social Care (2025). *Fit for the future: 10 Year Health Plan for England - Executive Summary*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>82</sup> Bradshaw, A. and Dace, H. (2023). *Unhealthy Numbers: The Rising Cost of Obesity in the UK*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>83</sup> Public Health England (2020). *Using the planning system to promote healthy weight environments Guidance and supplementary planning document template for local authority public health and planning teams*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>84</sup> Roger Evans Associates (2007). *Urban Design Compendium 2*. London: English Partnerships. Available at: [link](#) [Accessed 4 September 2025].

- 
- <sup>85</sup> Ministry of Housing, Communities and Local Government (2024). *National Planning Policy Framework*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].
- <sup>86</sup> Public Health England (2020). *Using the planning system to promote healthy weight environments Guidance and supplementary planning document template for local authority public health and planning teams*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>87</sup> Pitt, E., Gallegos, D., Comans, T., Cameron, C. and Thornton, L. (2017). Exploring the influence of local food environments on food behaviours: a systematic review of qualitative literature. *Public Health Nutrition*, [online] 20(13), pp.2393–2405. doi: <https://doi.org/10.1017/s1368980017001069>.
- <sup>88</sup> Althoff, T., Nilforoshan, H., Hua, J. and Leskovec, J. (2022). Large-scale diet tracking data reveal disparate associations between food environment and diet. *Nature Communications*, 13(1). doi: <https://doi.org/10.1038/s41467-021-27522-y>.
- <sup>89</sup> Engler-Stringer, R., Le, H., Gerrard, A. and Muhajarine, N. (2014). The community and consumer food environment and children's diet: a systematic review. *BMC Public Health*, 14(1). doi: <https://doi.org/10.1186/1471-2458-14-522>.
- <sup>90</sup> Burgoine, T., Forouhi, N.G., Griffin, S.J., Brage, S., Wareham, N.J. and Monsivais, P. (2016). Does neighborhood fast-food outlet exposure amplify inequalities in diet and obesity? A cross-sectional study. *The American Journal of Clinical Nutrition*, [online] 103(6), pp.1540–1547. doi: <https://doi.org/10.3945/ajcn.115.128132>.
- <sup>91</sup> Burgoine, T., Forouhi, N.G., Griffin, S.J., Wareham, N.J. and Monsivais, P. (2014). Associations between exposure to takeaway food outlets, takeaway food consumption, and body weight in Cambridgeshire, UK: population based, cross sectional study. *BMJ*, [online] 348(mar13 5), pp.g1464–g1464. doi: <https://doi.org/10.1136/bmj.g1464>.
- <sup>92</sup> Burgoine, T., Sarkar, C., Webster, C.J. and Monsivais, P. (2018). Examining the interaction of fast-food outlet exposure and income on diet and obesity: evidence from 51,361 UK Biobank participants. *International Journal of Behavioral Nutrition and Physical Activity*, [online] 15(1). doi: <https://doi.org/10.1186/s12966-018-0699-8>.
- <sup>93</sup> Althoff, T., Nilforoshan, H., Hua, J. and Leskovec, J. (2022). Large-scale diet tracking data reveal disparate associations between food environment and diet. *Nature Communications*, 13(1). doi: <https://doi.org/10.1038/s41467-021-27522-y>.
- <sup>94</sup> Althoff, T., Nilforoshan, H., Hua, J. and Leskovec, J. (2022). Large-scale diet tracking data reveal disparate associations between food environment and diet. *Nature Communications*, 13(1). doi: <https://doi.org/10.1038/s41467-021-27522-y>.
- <sup>95</sup> Pereira, M.A., Kartashov, A.I., Ebbeling, C.B., Van Horn, L., Slattery, M.L., Jacobs, D.R. and Ludwig, D.S. (2005). Fast-food habits, weight gain, and insulin resistance (the CARDIA study): 15-year prospective analysis. *The Lancet*, 365(9453), pp.36–42. doi: [https://doi.org/10.1016/s0140-6736\(04\)17663-0](https://doi.org/10.1016/s0140-6736(04)17663-0).
- <sup>96</sup> Nesta (2024) *Technical Appendix - Testing the calories of the UK's favourite takeaway foods* [online] Available at [link](#) [Accessed 3 September 2025].
- <sup>97</sup> Public Health England (2018). *Calorie reduction: The scope and ambition for action*. [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>98</sup> Buckinghamshire Council (2024). *Corporate plan*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>99</sup> Buckinghamshire Council (2025). *Health and Wellbeing Board Agenda – Draft Joint Local Health and Wellbeing Strategy – 2035 (item 9)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>100</sup> Buckinghamshire Council. (2024). *Buckinghamshire's strategic vision for 2050*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>101</sup> GOV.UK (2024). *Get Britain Working White Paper*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>102</sup> Buckinghamshire Council (2025). *A Whole System Healthy Weight Action Plan* [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>103</sup> Buckinghamshire Council (2022). *Opportunity Bucks*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>104</sup> The Food Foundation (2025). *The Broken Place 2025. The State of the Nation's Food System*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>105</sup> University of Southampton (2022). *New Index Shows Regions In The North Have Higher Risk Of Food Insecurity* [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>106</sup> Fletcher, I. and Bruce, A. (2025). Producing but Not Consuming? Food Provisioning in Remote, Rural Areas of the UK. *Rural Sociology*, 90(2), pp.326–346. doi: <https://doi.org/10.1111/ruso.70006>.

- 
- <sup>107</sup> Wise, J. (2018). Britain's deprived areas have five times as many fast food shops as rich areas. *BMJ*, p.k4661. doi: <https://doi.org/10.1136/bmj.k4661>.
- <sup>108</sup> Public Health England (2014). *Healthy people, healthy places briefing Obesity and the environment: regulating the growth of fast food outlets*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>109</sup> Public Health England (2018). *Health matters: Air Pollution*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>110</sup> UK Health Security Agency (2023). *Noise pollution: mapping the health impacts of transportation noise in England - UK Health Security Agency*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>111</sup> UK Health Security Agency (2023). *Noise pollution: mapping the health impacts of transportation noise in England - UK Health Security Agency*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>112</sup> Lei, T., Hua, H., Du, H., Xia, J., Xu, D., Liu, W., Wang, Y. and Yang, T. (2023). Molecular mechanisms of artificial light at night affecting circadian rhythm disturbance. *Archives of Toxicology*. doi: <https://doi.org/10.1007/s00204-023-03647-5>.
- <sup>113</sup> Buckinghamshire Council (2025). *Anti-social behaviour* [online]. Available at [link](#) [Accessed 3 September 2025].
- <sup>114</sup> Safer Buckinghamshire Partnership (2023). *Safer Buckinghamshire Partnership Strategy 2023-2026*. [online] Available at [link](#) [Accessed 4 September 2025].
- <sup>115</sup> Buckinghamshire Council. (2018). *Healthy places (JSNA): The Fast Food Report 2025* [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>116</sup> Public Health England (2014). *Healthy people, healthy places briefing Obesity and the environment: regulating the growth of fast food outlets*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>117</sup> Ministry of Housing, Communities & Local Government (2024). *Planning practice guidance*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].
- <sup>118</sup> Department for Environment, Food & Rural Affairs (2013). *Litter and refuse: code of practice*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>119</sup> UK Legislation (2014). *Anti-social Behaviour, Crime and Policing Act 2014*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>120</sup> UK Legislation (2003). *Licensing Act 2003*. [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>121</sup> Ministry of Housing, Communities & Local Government (2024). *Planning practice guidance*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].
- <sup>122</sup> Keeble M, Burgoine T, White M, et al. How does local government use the planning system to regulate hot food takeaway outlets? A census of current practice in England using document review. *Health Place* 2019;57:171–8.
- <sup>123</sup> Brown, H., Xiang, H., Albani, V., Goffe, L., Akhter, N., Lake, A., Sorrell, S., Gibson, E. and Wildman, J. (2022). No new fast-food outlets allowed! Evaluating the effect of planning policy on the local food environment in the North East of England. *Social Science & Medicine*, 306(115126), p.115126. doi: <https://doi.org/10.1016/j.socscimed.2022.115126>.
- <sup>124</sup> Rahilly, J., Amies-Cull, B., Chang, M., et al (2024). Changes in the number of new takeaway food outlets associated with adoption of management zones around schools: A natural experimental evaluation in England. *SSM, population health*, 26, pp.101646–101646. doi: <https://doi.org/10.1016/j.ssmph.2024.101646>
- <sup>125</sup> Hassan S, Burgoine T, Cummins S et al (2024). Managing takeaways near schools: a toolkit for local authorities. *Zenodo*. [online] doi: <https://doi.org/10.5281/zenodo.13341617>.
- <sup>126</sup> Hassan S, Burgoine T, Cummins S et al (2024). Managing takeaways near schools: a toolkit for local authorities. *Zenodo*. [online] doi: <https://doi.org/10.5281/zenodo.13341617>.
- <sup>127</sup> Ministry of Housing, Communities and Local Government (2024). *National Planning Policy Framework*. [online] GOV.UK. Available at: [link](#) [Accessed 2 September 2025].
- <sup>128</sup> Buckinghamshire Council (2024). *Corporate plan*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>129</sup> Buckinghamshire Council (2025). *Health and Wellbeing Board Agenda – Draft Joint Local Health and Wellbeing Strategy – 2035 (item 9)*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>130</sup> Buckinghamshire Council (2024). *Healthy Ageing Strategy 2024-2029* [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>131</sup> Buckinghamshire Council (2025). *A Whole System Healthy Weight Action Plan* [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>132</sup> Coleman, C. (2024). *The importance of social cohesion and communities*. [online] Available at: [link](#) [Accessed 3 September 2025].

- 
- <sup>133</sup> World Health Organization (2025). *From loneliness to social connection: charting a path to healthier societies*. [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>134</sup> Buckinghamshire Council (2024). *Healthy Ageing Strategy 2024-2029* [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>135</sup> World Health Organization (2025). *From loneliness to social connection: charting a path to healthier societies*. [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>136</sup> World Health Organization (2025). *From loneliness to social connection: charting a path to healthier societies*. [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>137</sup> University of Southampton (2022). *New Index Shows Regions In The North Have Higher Risk Of Food Insecurity* [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>138</sup> Myers, C.A. (2020). Food Insecurity and Psychological Distress: a Review of the Recent Literature. *Current Nutrition Reports*, 9(2). doi: <https://doi.org/10.1007/s13668-020-00309-1>.
- <sup>139</sup> Carvajal-Aldaz, D., Cucalon, G. and Ordonez, C. (2022). Food insecurity as a risk factor for obesity: A review. *Frontiers in Nutrition*, [online] 9. doi: <https://doi.org/10.3389/fnut.2022.1012734>.
- <sup>140</sup> Bucks Data Exchange (2024). *Healthy eating rates in Buckinghamshire* [online] Available at: [link](#) [Accessed 4 September 2025].
- <sup>141</sup> Sustain (2025). *Planning sustainable cities for community food growing* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>142</sup> Lampert, T., Costa, J., Santos, O., Sousa, J., Ribeiro, T. and Freire, E. (2021). Evidence on the contribution of community gardens to promote physical and mental health and well-being of non-institutionalized individuals: A systematic review. *PLOS ONE*, [online] 16(8), p.e0255621. doi: <https://doi.org/10.1371/journal.pone.0255621>.
- <sup>143</sup> Hume, C., Grieger, J.A., Kalamkarian, A., D'Onise, K. and Smithers, L.G. (2022). Community gardens and their effects on diet, health, psychosocial and community outcomes: a systematic review. *BMC Public Health*, [online] 22(1). doi: <https://doi.org/10.1186/s12889-022-13591-1>.
- <sup>144</sup> Wood, C.J., Pretty, J. and Griffin, M. (2015). A Case–Control Study of the Health and Well-being Benefits of Allotment Gardening. *Journal of Public Health*, 38(3), pp.e336–e344. doi: <https://doi.org/10.1093/pubmed/fdv146>.
- <sup>145</sup> Dobson, M.C., Reynolds, C., Warren, P.H. and Edmondson, J.L. (2020). ‘My little piece of the planet’: the multiplicity of well-being benefits from allotment gardening. *British Food Journal*, ahead-of-print(ahead-of-print). doi: <https://doi.org/10.1108/bfj-07-2020-0593>.
- <sup>146</sup> Edible Estates. (n.d.). *Benefits of Community Growing*. [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>147</sup> Garnett, T (1999) *City Harvest – The feasibility of growing more food in London*, London: Sustain
- <sup>148</sup> Productive Parks (n.d.). *Developing and Maintaining a Community Garden* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>149</sup> RHS (2024). *Allotment basics*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>150</sup> Communities and Local Government (2011). *Community orchards: How to guide* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>151</sup> Buckinghamshire Food Partnership and Heart of Bucks (2021). *Buckinghamshire Community Food Growing Strategy* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>152</sup> UK Parliament (2025). *House of Commons - Environment, Transport and Regional Affairs - Fifth Report*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>153</sup> The National Allotment Society (2025). *Are There Laws Governing Allotments?* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>154</sup> Sustain (2025). *Planning sustainable cities for community food growing* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>155</sup> Bristol City Council (2023). *Bristol Local Plan Publication Version*. [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>156</sup> Health Equalities Group (2025). *Topic 1.2 Allotments and Community Gardens* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>157</sup> Health Equalities Group (2025). *Topic 1.2 Allotments and Community Gardens* [online] Available at: [link](#) [Accessed 2 September 2025].
- <sup>158</sup> UK Health Security Agency (2024). *Contaminated land in residential settings: factsheet*. [online] Available at: [link](#) [Accessed 3 September 2025].
- <sup>159</sup> Health Equalities Group (2025). *Topic 1.2 Allotments and Community Gardens* [online] Available at: [link](#) [Accessed 2 September 2025].

---

<sup>160</sup>Centre for Better Ageing (2025). *Age-friendly Communities: a handbook of principles to guide local policy and action* [online] Available at: [link](#) [Accessed 4 September 2025].

<sup>161</sup> Health Equalities Group (2025). *Topic 1.2 Allotments and Community Gardens* [online] Available at: [link](#) [Accessed 2 September 2025].