

PHB 27

Bil Iechyd y Cyhoedd (Cymru)

Public Health (Wales) Bill

Ymateb gan: Coleg Brenhinol Pediatreg ac Iechyd Plant

Response from: Royal College of Paediatrics and Child Health

## **Health, Social Care and Sport Committee's inquiry into the general principles of the Public Health Wales Bill**

### **Response by the Royal College of Paediatrics and Child Health**

#### **1. Introduction**

1.1 The Royal College of Paediatrics and Child Health (RCPCH) is pleased to contribute to the work of the Health, Social Care and Sport Committee to understand and explore public health issues in Wales and the extent to which the Public Health (Wales) Bill reflects priorities for improving and protecting public health in Wales.

1.2 The RCPCH works to transform child health through knowledge, innovation and expertise. We have over 550 members in Wales and over 17,500 worldwide. The RCPCH is responsible for training and examining paediatricians. We also advocate on behalf of our members, represent their views and draw upon their expertise to inform policy development and the maintenance of professional standards.

1.3 The following response sets out the specific aspects of the Public Health (Wales) Bill that the RCPCH believes will be beneficial to child health. It also highlights three additional areas of public health that we feel are missing from the draft Bill and should be considered. We make a series of proposed recommendations within these areas that we feel, if implemented, would have a significant impact on improving public health in Wales.

#### **2. Summary of RCPCH response**

The RCPCH supports the principles of the Public Health (Wales) Bill and is particularly supportive of the measures which we believe will have a positive impact on child health. These include:

- Restating restrictions on smoking in enclosed and substantially enclosed public and work places
- Placing restrictions on smoking in school grounds, hospital grounds and public playgrounds
- Requiring public bodies to carry out health impact assessments in specified circumstances.

The RCPCH has also identified a number of areas that it feels are missing from the Bill and suggests a series of recommendations covering the following three areas of public health which have a significant impact on child health:

- Women's health before, during and after pregnancy, including the promotion of breastfeeding
- Strengthening alcohol control
- Tackling childhood obesity
- Accident prevention

### **3. Comments on the principles of the Public Health (Wales) Bill**

The RCPCH supports the principles of the Public Health (Wales) Bill, in particular:

- 3.1 We support the Bill's intention to re-state restrictions on smoking in enclosed and substantially enclosed public and work places, giving Welsh Ministers a regulation-making power to extend the restrictions on smoking to additional premises or vehicles.

3.2 We support the proposal to place restrictions on smoking in school grounds, hospital grounds and public playgrounds. This, coupled with sustained public health campaigns about the dangers of second hand smoke, will not only send a strong message that Welsh Government values the health of its children, but will also protect children from the harmful effects of second hand smoke.

3.3 We also welcome the requirement for Welsh Ministers to require public bodies to carry out health impact assessments in specified circumstances. We believe that this part of the legislation could help to prevent children and young people from becoming unwell if, for example, local authority planning decisions included a public health impact assessment to consider the health impact of planning decisions on physical activity and obesity. *However, we would welcome greater detail as to which circumstances are specified and what the requirements will be of the health impact assessments themselves.*

Building on this proposed legislation, we call upon the Committee to:

3.4 Ensure that the legislation will include provisions that all public bodies would be required to ensure that environments encourage physical activity, safe cycling and walking routes and are not obesogenic (for example by minimising the exposure to marketing of food and drink high in sugar, fat or salt).

3.5 Consider, in light of recent reports by the Chief Medical Officer<sup>1</sup> and Public Health Wales<sup>2</sup> highlighting the issue of health inequalities, how these assessments can include the strongest possible provisions to ensure that the most disadvantaged children in Wales are not further disadvantaged.

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<sup>1</sup> <http://gov.wales/topics/health/professionals/cmo/reports/?lang=en>

<sup>2</sup> <http://www.wales.nhs.uk/sitesplus/documents/888/CDR%20patterns%20%2B%20trends%20v1%20EN.pdf>

#### 4. Further recommendations

- 4.1 The Bill cannot address every issue affecting public health in Wales. However, there are a number of key areas that we urge the Committee to consider when ascertaining whether or not the Bill reflects priorities for improving public health.
- 4.2 Whilst some of these proposed measures are not within the legislative powers of the Assembly, we would support the extension of the Assembly's competency to legislate on key public health issues, such a minimum unit pricing for alcohol.
- 4.3 Some of the recommendations would require legislation from the Welsh Government, some would be delivered through Public Health Wales and others would need action at local authority level.

4.3. We believe it would be a missed opportunity if the Bill did not include the following measures:

#### 5. Maximising women's health before, during and after pregnancy

- 5.1 Maternal health and wellbeing has a profound impact on the health of children. Being a healthy weight, breast feeding and stopping smoking all improve health outcomes for both mothers and infant.

**We therefore recommend that:**

- 5.2 **The Welsh Government** should develop a national strategy on infant feeding.
- 5.3 **The Welsh Government** should require NHS Wales to ensure all maternity services achieve and maintain UNICEF UK Baby Friendly Initiative Accreditation

- 5.4 **The Welsh Government** should set and monitor targets for increasing breastfeeding and reducing smoking in pregnancy and early childhood.
- 5.5 **Public Health Wales** should undertake a targeted awareness campaign promoting smoking cessation, breastfeeding, healthy weight in women of childbearing age and safe sleeping practices for babies.
- 5.6 **Public Health Wales and Health Boards** should provide local breastfeeding support that is planned and delivered to mothers in the form of evaluated, structured programmes.

## **6. Strengthen alcohol and tobacco control**

- 6.1 In Wales, 7% of fifteen year old boys and 9% of fifteen year old girls are regular smokers. Numbers have dropped since 1998, but not to the levels of other European countries. In addition to the proposed tobacco control legislation in the Public Health (Wales) Bill , we believe a public health campaign is required to further highlight the dangers of second hand smoke. Although rates of teenage drinking have dropped, they are still only average within Europe. 13% of fifteen year olds in Wales admit to drinking alcohol once a week and the negative health consequences of drinking alcohol are well established.

**We therefore recommend that:**

- 6.2 **The Welsh Government** should pursue responsibility to implement Minimum Unit Pricing on alcohol.
- 6.3 **Public Health Wales** should undertake sustained public health campaigns about the dangers of second hand smoke.
- 6.4 **Public Health Wales** should protect services that help pregnant women stop smoking and ensure they are accessible to all

## 7. Tackle childhood obesity

7.1 The Child Measurement Programme for Wales reports that “26.2% of children in Wales are overweight or obese, compared to 21.9% in England in this age group”<sup>3</sup>. This is a crisis not just for the individuals involved but for the NHS and social care in Wales because obese or overweight children are very likely to become overweight or obese adults with the associated rises in rates of Type 2 Diabetes, heart disease and certain cancers.

7.2 There must be a comprehensive package of measures from the Welsh Government to tackle obesity. The Child Measurement Programme includes four- five year olds but it does not measure 10.5 –11.5 year olds, creating a barrier to reducing childhood obesity. As well as preventative measures, children and young people who already have overweight or obesity must be able to access the support and treatment they need to reduce their weight.

7.3 Many of the key policy initiatives which will go furthest to reverse current trends (advertising bans and fiscal measures, for example) are the responsibility of Westminster Government, but we believe that there are some key areas where the Welsh Government can take action.

### **We therefore recommend that:**

7.1 **The Welsh Government** should develop and implement an evidenced-based childhood obesity strategy for tackling the current crisis and preventing further escalation.

7.2 **The Welsh Government** should implement a package of measures to reduce the factors that collectively create an obesogenic environment.

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<sup>3</sup> <http://www.wales.nhs.uk/sitesplus/888/page/67795>

This should include an audit of local authority licensing and catering arrangements with the intention of developing formal recommendations on reducing the proximity of fast food outlets to schools, colleges, leisure centres and other places where children gather, as well as urging local authorities to include a public health impact assessment in all planning decisions and to introduce 20 mph speed limits in built up areas, to create safe places for children to walk, cycle and play.

7.3 **Public Health Wales** should expand the Child Measurement Plan for Wales to measure children after birth, before school and in adolescence.

## 8. Accident prevention

8.1 A large proportion of preventable deaths during childhood and adolescence occur in the context of children and young people's interaction with their external environments. A number of these are preventable by changes in policy and the need to better equip children and families with the knowledge, resources and appropriate public spaces in order to facilitate safety in the home and in the community and reduce the incidence of unintentional injury.

**We therefore recommend that:**

8.2 **Public Health Wales** should deliver health visiting services and home safety equipment schemes which educate and equip parents and carers to keep their children safe, with a focus on water safety, pet safety, blind cord injury prevention and safe sleeping.

8.3 **The Welsh Government** should call on the UK Government to implement Graduated Driving Licences to address the issue that young drivers make up 2% of licence holders but are involved in 12% of accidents in Great Britain.

## 9. Further information

For further information on any of the content of this paper, please contact Gethin Jones, External Affairs Manager for Wales: [REDACTED] or [REDACTED]