CITY AIRPORT DEVELOPMENT PROGRAMME (CADP1) S73 APPLICATION

ENVIRONMENTAL STATEMENT

VOLUME 2: APPENDICES

DECEMBER 2022

Pell Frischmann

City Airport Development
Programme (CADP1) S73
Application

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Appendix 12.1 Health Policy

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APPENDIX 12.1 Health Policy and Priorities

1.1 Policy and Legislative Context

National Policy

1.1.1 The National Planning Practice Guidance (NPPG) (Department for Levelling Up, Housing and Communities and Ministry of Housing, Communities & Local Government, 2014) supports the NPPF and provides guidance across a range of topic areas. As stated in the NPPG for Healthy and Safe Communities:

*"The first point of contact on **population health and wellbeing** issues, including health inequalities, is the Director of Public Health for the local authority…".*

"A healthy place is one which supports and promotes healthy behaviours and environments and a reduction in health inequalities for people of all ages. It will provide the community with opportunities to improve their physical and mental health, and support community engagement and wellbeing".

*"It is helpful if the Director of Public Health is consulted on any planning applications (including at the pre-application stage) that are **likely to have a significant impact on the health and wellbeing of the local population or particular groups within it**. This would allow them to work together on any necessary mitigation measures. **A health impact assessment is a useful tool** to use where there are expected to be significant impacts".*

1.1.2 Flightpath to the Future (FttF) (Department for Transport, 2022) is a strategic framework that highlights the Government's continued commitment to the sustainable growth of the aviation sector. It recognises aviation's vital importance to the UK, in terms of economic contribution, jobs, and the personal value it provides to individuals throughout our regions and nations.

*"The Government is **committed to growth in demand** and working with industry to ensure we enable the sector to recover. We want **the aviation sector to build back better**, alongside supporting a greener future, and **more sustainable growth**. Central to this will be **working closely with industry, the CAA, public health bodies**, and the global aviation community."*

*"The future of aviation rests on **embracing new opportunities**, including the critical challenge of **delivering Jet Zero** – aviation's contribution to the UK's net zero target by 2050. … We will also continue to work with the sector to **reduce the localised impacts of aviation from noise and air pollution**."*

*"Achieving Jet Zero necessitates action across a series of measures: **increasing the efficiency of the existing aviation system** – our aircraft, airports and airspace; **accelerating the take up of sustainable aviation fuels (SAF)**; …"*

*"**Aviation also has a central role in delivering local benefits** across the UK. This includes championing the **levelling up agenda,** strengthening union connectivity, **boosting economic success, and supporting local jobs.** It is important to recognise the role our extensive airport, airfield and aviation infrastructure network plays in **providing benefits to local communities**, as well as supporting associated supply chains and the aerospace industry."*

*"**Airport expansion has a key role to play in realising benefits for the UK through boosting our global connectivity and levelling up**. We continue to be supportive of airport growth where it is justified, and our existing policy frameworks for airport planning provide a robust and balanced framework for airports to grow sustainably within our strict environmental criteria[1]. In addition, implementing our General Aviation Roadmap will further underpin aviation's local impact".*

*"In addition to being committed to delivering a green sector for the future, the Government also needs to **tackle the more localised impacts of aviation**. Air quality emissions and noise from aviation can have detrimental*

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[1] Beyond the horizon – The future of UK aviation: Making best use of existing runways (2018) and Airports National Policy Statement: new runway capacity and infrastructure at airports in the South East of England (2018) are relevant policy on planning for airport development.

impacts on local communities, and addressing these impacts is an important aspect of a sustainable future for the sector".

1.1.3   Beyond the horizon – The future of UK aviation: Making best use of existing runways (HM Government, 2018) remains part of the framework for airport planning.

*"**The government recognises the impact on communities living near airports and understands their concerns** over local environmental issues, particularly noise, air quality and surface access. **As airports look to make the best use of their existing runways**, it is important that communities surrounding those airports **share in the economic benefits** of this, and that **adverse impacts such as noise are mitigated where possible**". [paragraph 1.22, emphasis added]*

*As part of any planning application airports will need to demonstrate how they will **mitigate against local environmental issues, taking account of relevant national policies**…". [paragraph 1.26, emphasis added]*

*"… [The Government] recognise that the **development of airports can have negative as well as positive local impacts**, including on noise levels. We therefore consider that any proposals should be judged by the relevant planning authority, taking **careful account of all relevant considerations, particularly economic and environmental impacts and proposed mitigations...**" [paragraph 1.29, emphasis added]*

1.1.4   Airports National Policy Statement: new runway capacity and infrastructure at airports in the South East of England (Department for Transport, 2018) remains part of the framework for airport planning. The policy is focused on expansion at Heathrow, but has some wider points that are relevant.

*"The construction and **use of airports infrastructure has the potential** to … have **direct impacts on health** because of traffic, noise, vibration, air quality and emissions, light pollution, community severance, dust, odour, polluting water, hazardous waste and pests". [paragraph 4.70, emphasis added]*

*"New or enhanced airports infrastructure may also have **indirect health impacts**, for example if they affect access to key public services, local transport, opportunities for cycling and walking, or the use of open space for recreation and physical activity. It should also be noted, however, that the **increased employment stemming from airport expansion may have indirect positive health impacts**". [paragraph 4.71, emphasis added]*

*"… any **environmental statement should identify and set out the assessment of any likely significant health impacts**". [paragraph 4.72, emphasis added]*

*"The applicant should **identify measures to avoid, reduce or compensate for adverse health impacts as appropriate**. …". [paragraph 4.73, emphasis added]*

*"The Government wants to **strike a fair balance** between the negative impacts of noise (on health, amenity, quality of life and productivity) and the positive impacts of flights. There is **no European or national legislation which sets legally binding limits on aviation noise emissions**…. Operational noise, with respect to human receptors, should be assessed using the **principles of the relevant British Standards and other guidance**." [paragraph 5.47 and 5.53, emphasis added]*

*"The Government recognises that **aircraft noise is a significant concern to communities** affected and that, as a result of additional runway capacity, noise- related action will need to be taken. Such **action should strike a fair balance between the negative impacts of noise and positive impa cts of flights**". [paragraph 5.55, emphasis added]*

1.1.5   Noise Policy Statement for England (NPSE) (DEFRA, 2010) describes the Government's policy position on noise management decisions.

*"**Noise is an inevitable consequence of a mature and vibrant society**". [paragraph 2.1, emphasis added]*

*"… the application of the NPSE should enable **noise to be considered alongside other relevant issues and not to be considered in isolation**. In the past, the wider benefits of a particular policy, development or other activity may not have been given adequate weight when assessing the noise implications. [paragraph 2.7, emphasis added]*

*"…Unlike many other pollutants, noise pollution depends **not just on the physical aspects of the sound itself, but also the human reaction to it**…." [paragraph 2.9, emphasis added]*

*"The first aim of the Noise Policy Statement for England: **Avoid significant adverse impacts on health** and quality of life from environmental, neighbour and neighbourhood noise **within the context of Government policy on sustainable development**." [paragraph 2.22, emphasis added]*

*"The vision and aims of NPSE should be interpreted by having regard to the set of shared UK principles that underpin the Government's sustainable development strategy. … [These include:] Ensuring a Strong Healthy and Just Society – **Meeting the diverse needs of all people** in existing and future communities, promoting personal wellbeing, social cohesion and inclusion, and creating equal opportunity for all. … Achieving a Sustainable Economy – **Building a strong, stable and sustainable economy which provides prosperity and opportunities for all**, and in which environmental and social costs fall on those who impose them (polluter pays), and efficient resource use is incentivised". [paragraph 1.8, emphasis added]*

*"There is a need to **integrate consideration of the economic and social benefit** of the activity or policy under examination with proper consideration of the adverse environmental effects, including the impact of noise on health and quality of life. This should **avoid noise being treated in isolation** in any particular situation, i.e. not focussing solely on the noise impact without taking into account other related factors". [paragraph 2.18, emphasis added]*

1.1.6   Air Quality Strategy for England, Scotland, Wales and Northern Ireland (DEFRA, 2011) sets air pollution standards to protect people's health and the environment. The Strategy sets out the National Air Quality Objectives (AQOs) and Government policy on achieving these objectives.

*"The UK Government's and devolved administrations' primary objective is to ensure that **all citizens should have access to outdoor air without significant risk to their health, where this is economically and technically feasible**. This strategy is based on standards from expert recommendations **representing levels at which no significant health effects would be expected in the population as a whole** and on the standards and principles of better regulation". [paragraph 15, emphasis added]*

*"…The standards are **based on assessment of the effects of each pollutant on human health including the effects on sensitive subgroups …". [paragraph 17, emphasis added]*

*The Government define the statutory air quality standards as "concentrations recorded over a given time period, which are **considered to be acceptable in terms of what is scientifically known about the effects of each pollutant on health** and on the environment" (DEFRA, Online) (emphasis added).*

Local Health Priorities

1.1.7   The following health and wellbeing strategies have been reviewed, which set public health priorities for this population.

Newham

Health and Wellbeing Strategy 2020- 2023

1.1.8   Priorities relevant to the health assessment (London Borough of Newham, 2020)

➢   Supporting our young people to be healthy and ready for adult life
➢   Supporting people around the determinants of their health
➢   Meeting the needs of those most vulnerable to the worst health outcomes
➢   Supporting active travel and improved air quality
➢   Creating an active borough
➢   Supporting a Newham of communities where people are better connected and supported
➢   Building an inclusive economy and tackling poverty

Joint strategic needs assessment

1.1.9   Relevant population groups and public health issues identified and taken into account (London Borough of Newham, 2016)

- Newham has one of the youngest populations in England, with a median age of 32.3 years compared to 35.6 in London and 40.3 years in the UK. 0-25 year-olds account for 37% of the Newham population.
- Deprivation in Newham is high, with the overall Index of Multiple Deprivation score in 2019 showing Newham as the 3rd most deprived London borough overall. 27% of residents in Newham are paid below the London Living wage, which accounts for around 36,000 residents. 1 in 5 adults with children in Newham are over-indebted, which rises to 1 in 4 where there are 3 or more children in the family.
- Newham has a diverse ethnic population, with a high proportion of Black African, Pakistani, Indian and Bangladeshi residents compared to London. Asian, as well as Black African, Middle-Eastern, Black Caribbean and mixed-race ethnic groups, have a higher obesity related risk of Type II diabetes and cardiovascular disease.
- The most common causes of premature death and long term illness: heart disease, mental illness, lung and breathing diseases, cancers. The causes of these diseases are a range of other long term illnesses (such as diabetes and hypertension), risk factors (such as obesity and low physical activity) and exposures to harmful agents (such as tobacco, alcohol, air pollutants and infectious diseases.) Newham has the 3rd highest smoking rate out of 33 London boroughs (1 in 4 men are smokers), high levels of childhood and adult obesity, and significantly lower physical activity levels than London and England rates.
- There is a rich diversity of over 200 different languages spoken in Newham, however this can present problems such as access to services and awareness of what is available. The 3 most common languages (other than English) spoken in Newham are Bengali, Urdu and Gujarati.
- Childhood obesity is a major public health issue in Newham. Despite the national picture highlighting that activity levels are on the rise, only 28% of children and young people in Newham are active on average at least 60 minutes or more a day across the week compared to 46% across London and 47% across England. Children and young people in Years 3-6 and 7-11 (ages 7-16) with a disability or long term health condition are more likely to be less active than those without. Black (34%) and Asian (35%) children and young people are more likely to be less active than those from other ethnic groups.
- Adolescents who are not in education, employment or training (NEET) often have multiple barriers including low literacy and numeracy skills, SEN, behavioural needs, young parents and involvement in the care or youth justice system. Time spent NEET can have a detrimental effect on physical and mental health, increasing the likelihood of unemployment, low wages or low quality of work later in life. Rates of NEET nationally and locally have reduced significantly over the last decades. Nonetheless, 5% (n=430) of young people aged 16-17 in Newham are NEET.
- Good quality employment is a significant determinant of health and wellbeing, leading to a sense of identity and purpose, income and material resource, and better health. Newham is young, diverse, and highly deprived. Residents experience a number of barriers to employment, in particular English language skills, caring and childcare responsibilities, the legal right to work, and barriers due to mental or physical health, lack of confidence/ self-esteem.

Greenwich

Health and Wellbeing Strategy

1.1.10   Priorities relevant to the health assessment (Royal Borough of Greenwich, 2018)

- Improving Mental Health and Wellbeing in the Royal Borough of Greenwich, "*the three biggest barriers to being happier that people highlighted were money (23% of issues mentioned), community, connection and loneliness (15%) and having a safe and pleasant environment (13%).*"
- Improving Healthy Weight, "*the biggest perceived barriers to maintaining healthy weight were availability to unhealthy food and the relative cost of healthy food*".
- Live Well Greenwich – embedding a prevention approach, "At a population level…working with transport, planning and regeneration stakeholders to create healthy public places; with employment skills stakeholders to improve employment…".

Joint strategic needs assessment

1.1.11   Relevant population groups and public health issues identified and taken into account (Royal Borough of Greenwich, n.d.)

- Young people (aged 0-19 years) make up 26% of the population compared to 25% regionally and 24% nationally.
- Greenwich is a diverse borough with people from a wide range of ethnicities and backgrounds. One in two (52.3%) are from a 'white British' background, compared to the national figure of four in five (79.8%). There are over 90 languages spoken. 19% of households do not speak English as a first language. In 2017 just over half (59%) of Greenwich's population was of white ethnicity, a quarter (24%) black (African or Caribbean), a fifth Asian (14%) or other (3%) ethnicities.
- Greenwich is the 50th most deprived Local Authority in England (rank out of 326 authorities) placing the borough district in the top 20% most deprived authorities.

Tower Hamlets

Health and Wellbeing Strategy

1.1.12   Priorities relevant to the health assessment (Tower Hamlets Health and Wellbeing Board, 2021)

- Access safe, social spaces near our homes:
    - Reduce traffic, and with it sound and air pollution, across the borough.
    - Make use of unused open spaces, such as small green spaces on estates, rooftops or unused land.
    - Ensure that all open space is safe, accessible for all, and actively used by the communities in the vicinity.
- Children, teenagers and families are healthy, happy, and confident:
    - Drive increase in activity levels in children.
- Young adults have the opportunities, connections and local support they need to live healthy, fulfilling lives:
    - Work with employers across the borough to improve the health of current employees and workplaces, and to advise on tackling health inequalities in recruitment.

Joint strategic needs assessment

1.1.13   Relevant population groups and public health issues identified and taken into account (London Borough of Tower Hamlets, n. d.)

- Healthy life expectancy is considerably lower than the national average. The population is young, ethnically diverse, and mobile. There is widespread deprivation, and many residents will be adversely affected by changes to the welfare system. Air quality is poor across the borough, particularly around the main thoroughfares. There is a lack of open and green space.
- A higher proportion of children live in poverty than anywhere else in England. Around two fifths of children are overweight or obese at the end of primary school. The proportion of young people NEET locally is higher than in London but lower than in England.
- There are generally high mortality rates from cardiovascular disease, respiratory disease, and cancers. Obesity, smoking, alcohol and drug use, and infectious diseases are all significant problems in the borough. The three major causes of premature death in Tower Hamlets (cancer, cardiovascular disease and chronic lung disease) are strongly linked to socioeconomic deprivation as well as gender and ethnicity.

- In the current economic climate, the impact of unemployment, poverty, housing conditions on these conditions and on mental health (which in turn is linked to physical health) will potentially worsen health outcomes or slow the improvement we have seen over the past year.
- Maintaining income, providing opportunities for skills developing, sustaining good quality employment … are in themselves critical health interventions. In addition, providing a healthy environment and supporting communities to take action to create better health and wellbeing for themselves are of vital importance.

Other Guidance

1.1.14   This health assessment report was conducted so as to meet any applicable requirements of health impact assessment (HIA) and health in environmental impact assessment (EIA). Regard has therefore been

had to both EIA and HIA guidance and requirements. Regard has therefore been given to the guidance set out in **Table Error! No text of specified style in document.**-1.

Table Error! No text of specified style in document.**-1: Health guidance**

Guidance	Description
Institute of Environmental Management and Assessment (IEMA) 2022 guidance on health in EIA series, effective scoping (Pyper, et al., 2022a) and determining significance (Pyper, et al., 2022b).	Practitioner guidance on the coverage of human health in EIA for England, Wales, Scotland, Northern Ireland and the Republic of Ireland. This includes methods for determining population health sensitivity, magnitude and significance. This is the key methods citation.
Institute of Public Health (IPH), Guidance, Standalone Health Impact Assessment and health in environmental assessment, 2021 (Institute of Public Health, 2021).	Sets current good practice for the assessment of human health in EIA, including assessment methods. This updates the 2009 guidance from the IPH. This guidance for Northern Ireland and Republic of Ireland can be applied more broadly in the UK.
International Association for Impact Assessment (IAIA) and European Public Health Association. A reference paper on addressing Human Health in EIA (Pyper, et al., 2022a; Pyper, et al., 2022b)	This international consensus piece informed the IPH 2021 guidance. The publication explains EIA for public health stakeholders and sets out transparent assessment approaches adopted by the IPH.
International Association for Impact Assessment. Health Impact Assessment International Best Practice Principles, 2021 (Winkler, et al., 2021).	Confirms the relationship between HIA and EIA. Confirms the application of HIA principles when undertaking health in EIA.
Public Health England, Health Impact Assessment in spatial planning 2020 (Public Health England, 2020)	The guidance confirms that where EIA is undertaken the requirements for HIA should be met through the EIA health chapter. "*First, establish whether the project is subject to EIA. If yes, follow health in EIA process*". (page 28 final paragraph)

Further topic specific guidance is set out in **Chapter 7** – Socio-economics, section 7.2; **Chapter 8** – Noise and Vibration, section 8.2; **Chapter 9** – Air Quality, section 9.2; **Chapter 10** – Surface Access, section 10.2; and **Chapter 11** – Climate Change, section 11.2. For example, **Chapter 8** and **Chapter 9** set out relevant World Health Organization (WHO) guidelines (Berglund, Lindval, Schwela, & Organization, 1999; WHO, 2009; Basner & McGuire, 2018; WHO, 2018; WHO, 2021) that have been taken into account by those assessments and by the health assessment.

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