Submission to Department of the Environment, Community and Local Government

A Framework for Sustainable Development for Ireland Public Consultation

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Introduction

The Institute of Public Health in Ireland

The remit of the Institute of Public Health in Ireland (IPH) is to promote cooperation for public health between Northern Ireland and the Republic of Ireland in the areas of research and information, capacity building and policy advice. Our approach is to support Departments of Health and their agencies in both jurisdictions, and maximise the benefits of all-island cooperation to achieve practical benefits for people in Northern Ireland and the Republic of Ireland.

The work of IPH (www.publichealth.ie) includes health impact assessment, building and sharing evidence for public health development, developing Ireland and Northern Ireland's population health observatory (INISPHO www.inispho.org), and providing public health policy advice in areas such as health inequalities, obesity, fuel poverty and food poverty.

Health is influenced by a wide range of social determinants, including economic, environmental, social and biological factors. Poverty is a significant contributor to environmental health inequalities. A recent WHO publication highlights these social determinants of poor environmental health and provides 14 baseline indicators to measure environmental health inequalities in Europe [1].

IPH has published reports building the evidence base linking sustainable development, health and equity. Relevant work includes papers on climate change and health, and food security and health; reviews on the health impacts of the built environment, and the health impacts of transport; research on fuel poverty, and input into fuel poverty policy development including the Affordable Energy Strategy. The Department of the Environment, Community and Local Government has been involved in the development of the Affordable Energy Strategy through their representation on the Interdepartmental Group on Affordable Energy.

IPH welcomes the opportunity to comment on the Framework for Sustainable Development for Ireland (hereafter; the Framework) and is particularly encouraged by the section on public health. In addition, IPH welcomes the recognition of social inclusion as an integral element of sustainable development, as well as the realisation that interdepartmental working is key to implementation and success.

Key points

 Health inequalities and particularly the wider social determinants of health are acknowledged in this Framework as integral to the sustainable development agenda which is to be commended. These wider determinants of health are governed by policies outside the Department of Health, and it is essential that interdepartmental and cross sectoral working truly occurs and is not merely paid lip service. Ideally this Framework should be signed up to by multiple departments to guarantee full cooperation and coordination. In this vein, the Department of the Environment, Community and Local Government should fully acknowledge their responsibilities and opportunities to tackle health inequalities.

- Environmental sustainability and health agendas are closely aligned and there are many co-benefits to action in these areas. The UK's Sustainable Development Commission (2010) particularly noted the co-benefits in four sectors; food, transport, green space and the built environment [2]. The challenge for the Framework will be to engage sectors which do not always align with these agendas and ensure that conflicting policies do not negate each others interests.
- Health and wellbeing considerations must be integral to regional and local planning processes.
- The Framework should be accompanied by an implementation plan with clearly laid out actions, timelines and responsibilities. Monitoring and evaluating mechanisms for the Framework must exist across departments and at local authority level. The Framework references Northern Ireland's Sustainable Development Strategy (2010) and the IPH supports the exploring of synergies between these strategies' implementation plans.
- Despite health inequalities being identified in the Framework in terms of behaviours and lifestyles, it must be highlighted that health inequalities and the wider determinants of health stem from social, economic and cultural inequities [3]. It should also be noted that health outcomes may be shared across different population groups but different groups may need to be targeted in different ways; for example, obesity among adults is specified in the Framework's Public Health section, but Irish children are not mentioned except in terms of sedentary lifestyles. Ireland's longitudinal study of children, *Growing Up in Ireland*, has shown that one in four three-year old children are overweight/obese [4].
- Although social inclusion and improved health equity among people at the most extreme end of the gradient such as Travellers is essential, proportionate universalism is also needed [5]. In other words, health inequalities must be addressed across the entire gradient to ensure all sectors of the population benefit as needed. It is not just a case of focusing on the most disadvantaged in our community.
- The Framework states that all tax reforms should be based on the principles of equity and IPH supports this principle. It is imperative that this principle is adhered to when measures such as the carbon tax, which have the potential for disproportionate impact on poorer households, and water charges are introduced and implemented. In addition water supply should be considered part of Ireland's strategic infrastructure and not privatised. The State should ringfence monies raised in this area for community use. For example, water charges should be used to repair the considerable leakages to the system as mentioned in the Framework.

• The Framework makes reference to the need for "increased policy" for a health in all policies approach. It is important that policy-making processes should be consultative, capitalise on existing strategies and be evidence informed. The IPH endorses the use of Health Impact Assessment as a method of facilitating better decision-making for policy, and for detecting potential positive and negative impacts on health, as deemed necessary by the Framework.

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References

- [1] World Health Organisation (2012) *Environmental health inequalities in Europe* WHO European Centre for Environment and Health Regional Office for Europe [http://www.euro.who.int/__data/assets/pdf_file/0010/157969/e96194.pdf] (accessed 27 February 2012).
- [2] Sustainable Development Commission (2010) *Sustainable development: The key to tackling health inequalities* [http://www.sd-commission.org.uk/publications.php?id=1053] (accessed 27 February 2012).
- [3] Fair Society, Healthy Lives; Strategic review of health inequalities in England post-2010 The Marmot Review.

 CSDH (2008) Closing the gap in a generation: health equity through action on the social determinants of health Final Report of the Commission on Social Determinants of Health. Geneva, World Health Organisation.
- [4] Full publications available: www.growingup.ie (accessed 27 February 2012).
- [5] Proportionate universalism refers to the need to reduce the steepness of the social gradient in health through applying universal actions on a scale and intensity that is proportionate to the level of disadvantage.