Dear Chair

Response from the Royal College of Psychiatrists in Wales to the Public Health (Wales) Bill: Call for feedback on the general principles of the Bill

Thank you for giving us the opportunity to respond to the Committee’s consultation on the Public Health (Wales) Bill.

The Royal College of Psychiatrists in Wales supports the need for a Public Health Bill for Wales. We responded favourably to the Green Paper in 2013 and the White Paper in 2014. We now look forward to the debates during the legislative process and we plan to contribute at all stages.

The general health of the population of Wales is poor compared with other parts of the UK.
The levels of obesity in adults and in children are comparatively high and continue to rise (58%\(^1\) and 35%\(^2\)).

- Alcohol contributes to 20 deaths per 100,000 per year\(^3\) and can result in over 60 different medical conditions including depression\(^4\).

- Smoking levels have fallen but remain at 20% of the adult population\(^5\).

- The pregnancy rate of teenagers is 25 per 1000, which has decreased but is still amongst the highest in Europe (after Bulgaria, Romania and Slovakia)\(^6\).

- There are many areas of deprivation in Wales. Rates of unhealthy lifestyles are considerably higher in deprived areas than in affluent areas.

The NHS in Wales is struggling to meet the needs of those with physical and mental health problems caused by poverty and unhealthy lifestyles and we feel that the Bill will go someway in tackling this. Although the Bill lacks a public mental health perspective, the provisions in the Bill will impact positively on mental health and well being, for example regulating tobacco may achieve more in improving health and reducing mortality in people with serious mental illness than other sections of the population.

We are concerned that the Bill’s principles assume that making healthy lifestyle choices is understood and can be embraced by all. It is well evidenced that poor mental health is associated with poor lifestyle. People with poor mental health have higher rates of obesity, substance and alcohol misuse and are more likely to smoke compared with the general population. They are also more likely to suffer from inequalities in employment, living standards, education and health provision.

This link between poor mental health and lifestyle must be supported and reinforced in the Bill. We suggest that the Bill include the following:

- Principles that promote a positive approach to public health rather than exclusively negative actions and restrictions.

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• The statutory duty of public bodies to carry out Health Impact Assessments when developing policy. This proposal was set out in the Green Paper and was favoured by most stakeholders and respondents. We would urge that this is included in the Bill and that assessments include the impact on mental health and wellbeing as well as the physical health of the population. The focus must be on health inequalities and those in deprived communities who are more likely to suffer poor mental and physical health.

• A provision in the Bill to regulate nutritional standards in public settings such as schools and hospitals. This proposal was featured in the White Paper and was endorsed by respondents. Hospitals and schools are institutions that promote health and wellbeing and nutritional standards relay a clear message of healthy living and good diet.

• Widening the smoking ban to secure units, hospital grounds and public play areas. This promotes health and wellbeing in environments where health and activity are promoted and supported. Smoking in secure units and on hospitals grounds is inappropriate and sends the wrong message that the NHS facilitates this behaviour. We would welcome legislation in this area provided there are effective smoking cessation services available to patients and proper training for staff.

Yours sincerely,

Professor Rob Poole
Chair, Royal College of Psychiatrists in Wales