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<b>Title:</b>	Child Obesity Overview
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<b>Cabinet Member Portfolio:</b>	Councillor Tim Mitchell
<b>Wards Involved:</b>	All
<b>Policy Context:</b>	This report provides an overview of child obesity.
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## 1. Executive Summary

- 1.1. This paper provides an overview of the prevalence of overweight and obese children and adults in Westminster, our local approach over the last 5 years has been and how the Covid-19 pandemic and national policy drivers are influencing this approach.
- 1.2. The infographic in appendix A and section 3.7 and 4 provide an overview of the number of residents who have been engaged and the outcomes they have achieved with support from local services. Section 3.7 also gives examples of the whole systems policy work completed to create healthy environments. The Tackling Obesity Together pilot project, which formed the basis of the current local service provision, helped to reduce obesity amongst children living in the local area by 2 per cent demonstrating that a focused place-based approach can help to achieve positive outcomes and reduce inequalities.

## 2. Background

- 2.1. Obesity is associated with reduced life expectancy, a risk factor for a range of chronic diseases, and is known to impact children's mental health and self-esteem.
- 2.2. Obesity is complex: there is no single cause or solution: cultural, environmental, and socio-economic factors, genetic and cultural drivers have a large influence. For impact, actions must be multi-organisational and multi-sectoral to help create healthier environments, making the *healthier* choice is the *easier* choice. Approaches to tackle obesity are integrated with wider corporate priorities such as climate change and air pollution e.g., promoting sustainable and active travel.
- 2.3. The Covid-19 pandemic has disproportionately affected those living in areas of higher deprivation, emphasising pre-existing inequalities. It has impacted children and young people's health and wellbeing, from increased sedentary behaviour and screen time, to limiting social interaction during national restrictions. Obesity is identified as a significant risk factor for serious illness associated with Covid-19.
- 2.4. Obesity has been identified as the key priority for the NWL Integrated Care Partnership and therefore it is recommended that partners leading this work are invited to present the strategic approach for the region in six-months' time.
- 2.5. To address such a large-scale issue such as obesity, national policy drivers such as reformulation (which put less onus on individual's "choice") are essential. Arguably the most well-known in recent years is the "Sugar tax". [Government's Child obesity: A plan for Action](#) sets the ambition to halve childhood obesity by 2030 and significantly reduce the gap in child obesity between the most and least deprived. A key part of the plan is sugar reduction: the soft drinks industry levy "sugar tax".

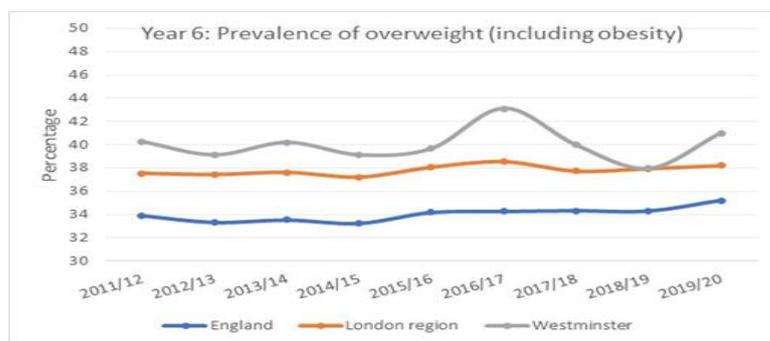
205 (21%) children aged 4 to 5 are overweight (including obesity)



455 (41%) children aged 10 to 11 are overweight (including obesity)



- 2.6. There are 50,701 children below 18 living in Westminster, with 73% of live births in 2019 being to Live births to non-UK-born mothers (Office of National Statistics). In Westminster, in the reception year at school 21.2% of children are overweight and obese (205 children) and this figure rises to 41% in year 6 (455 children) with 44% of adults being overweight or obese. Based on survey data the information we have on adults is less reliable than the National Child Measurement Programme which can pose a challenge for targeted programmes.
- 2.7. Boys are more likely to be overweight or obese than girls with the trend continuing into adulthood. Children from black and minority ethnic families are more likely than children from white families to be overweight or obese; in Westminster over the last three years 39% of year 6 Asian pupils are overweight or obese, compared to 28% of year 6 white.
- 2.8. Obesity is a health inequality associated with deprivation. [The Race Disparity Audit Report](#) shows that Asian and Black households and those in the Other ethnic group are more likely to be in persistent poverty. Households of Bangladeshi, Pakistani, Black, Mixed and Other backgrounds are more likely to receive income-related benefits and tax credits than those in other ethnic groups. The ethnic minority population is more likely to live in areas of deprivation, especially Black, Pakistani and Bangladeshi people.
- 2.9. Children living in the most deprived communities are twice as likely to be overweight as those in the least deprived areas. Children and families on low incomes can face multiple barriers that make it more difficult for them to access a healthy diet and have sufficient opportunities to be physically active. This includes the relative cost and availability of healthy food relative to cheap convenience food, time constraints, limited education about healthy eating and cooking skills and facilities. Children living in deprived areas are less likely, than their more affluent peers, to have access to gardens and safe places to play and be active. The costs often associated with organised sports and physical activity are also important factors.
- 2.10. There has been signs of a decline in rates of obesity amongst reception aged children, but we need to see more steady decreases to be confident in saying that this is a consistent trend. While prevalence rates for childhood obesity in Westminster are lower than the London and England averages in Reception Year, this picture changes for children in Year 6, with above the England and London averages.



- 2.11. Obesity rates are highest in areas of higher deprivation in Westminster; 50% of 10-11 year old children in Church Street are overweight in comparison to 33% of children in the wealthier wards of Bryanston and Dorset Square. Initiatives that focus on community engagement, co-design and health campaigns in more deprived wards are therefore integral.
- 2.12. Tooth decay is also of concern and very much linked to child obesity: in Westminster, 30.3% of children suffer from tooth decay; this is the eight highest in London and higher than both the

London and England average. Interventions that reduce sugar can have a positive impact on obesity and tooth decay.

- 2.13. Public Health works in partnership with NHS and the Oral Health Promotion Team (OHP) to deliver a range of interventions including workforce training, supervised toothbrushing in early years settings and schools and resources for families. Oral Health is integrated within the health visiting service, the healthy schools and healthy early years programmes and the Change4Life programme and service.
- 2.14. The OHP Team also support work with looked after children (LAC), Early Help, Family Hubs, and children with special educational needs. Looked after children have oral health included as part of their health plans. Supporting work with LAC, Early Help, Children's Centres, special educational needs provision is delivered through staff training and the development of oral health programmes for the settings. The oral health training is offered to all health staff who work with children with physical and learning disabilities.

### 3. Local Services and programmes

- 3.1. In 2014, Public Health launched the Tackling Childhood Obesity Together programme which demonstrated that a place-based approach is required and formed the basis of our current Change4Life Programme.
- 3.2. In 2014 Westminster invested significant resource in the Tackling Childhood Obesity Together (TCOT) programme which set out to promote children's health, with a key objective to halt and reverse rising trends of obesity amongst children in the borough. Local statistics indicated that TCOT largely achieved its aim of halting and stabilising rising rates of childhood obesity especially in Year 6 children.
- 3.3. The programme involved commissioning and delivery of new prevention and treatment services and a cross-council action to create healthier local environments. Positive outcomes include collaborative work across the council to embed Public Health outcomes such as promoting food growing, Healthier Catering Commitment Awards and Play Streets. Commissioning of healthy lifestyle interventions in targeted schools, workforce training, and community weight management programmes, and the development of oral health promotion initiatives were also core components.
- 3.4. Building on the learning and successes of the TCOT programme and the Go Golborne pilot in RBKC, in 2019 Public Health designed and implemented the Change4Life Programme to promote healthy weight and the wider wellbeing of local children and families. It is linked to the national Change4Life campaign run by Public Health England, which enables us to use a well-recognised branding by families as well as to have consistent health messages.
- 3.5. The Change4Life Programme is a whole system approach. It takes a life course approach to effectively address child obesity, acknowledging the impact adult obesity has on child obesity by designing and implementing the provision of wider services such as One You (adult healthy lifestyle service) and the Health Visiting service (supporting families with very young children).
- 3.6. The 2019 whole system approach outlined in Appendix A, which includes universal prevention services and targeted treatment services, is based on three strands:
  - Community – co-design and co-production of local initiatives and implementation of targeted neighbourhoods' projects in socially deprived areas
  - Healthy weight and wellbeing support service – procurement and delivery of an evidence-based innovative service to support children, young people and families lead healthier lives called Change4Life Service
  - Healthier environment – collaborative work across Council departments, stakeholders and partners to ensure the healthier choice is the easier choice.
- 3.7. Public Health works collaboratively with departments across the Council and with a range of partners to identify how we can make changes to the physical environment in order to make the healthier choice, the easier choice. **Key achievements** to date of the new model include:
  - The launch of a the Change4Life Service in July 2020, a key component of the Change4Life programme, which delivers a range of new and exciting services supporting children, young people and families to lead healthier and happier lives.

- Developed a local network of over **250 organisations** committed to supporting local children, young people and their families becoming healthier, happier and more resilient, including schools, family hubs and local voluntary and community groups
- Proactively engaged over **500 children, young people and 130 families** in activities supporting behaviour change via healthy eating and physical activity initiatives
- Facilitated **38 community-led, evidence-based** projects via Change4Life small grants scheme such as the '*Positive Women Project- Covid19*' run by the Hear Women Group, which delivered nutrition and sugar-free online classes for BAME women during the lockdown, reaching **151 families**.
- Installed **water fountains** in entrance foyers that are accessible to the public and has banned price promotions on sugary drinks. Work continues to install in all WCC libraries.
- **Playstreets**, a scheme that allows local children and families to reclaim their neighbourhoods by closing selected streets to through traffic and turning them into temporary play streets, have been introduced to encourage active play. Westminster council has a strong strategic narrative around this, outlined in the Active Westminster strategy.
- Removal of restrictive signage: Many WCC "**No ball games**" signs have been removed encouraging active play and physical activity.
- Sport and Leisure colleagues have supported schools to implement the Daily Mile initiative: around **50% of primary schools** in Westminster are now actively participating. There is a national ambition outlined in the Governments' Child Obesity Plan for action for all primary schools to adopt a similar initiative.
- Public Health designed and implemented the **Naturally Active** Campaign in 2020 to address the impacts of Covid-19 sedentary behaviours locally and support families to be active utilising their local environment and green spaces.
- Introduced measures to **limit advertising** of unhealthy food and drink via council-owned advertising space. This has included refusing a license for Coca Cola to bring its Christmas truck to Leicester Square.

#### 4. Local Services for Adults

- 4.1 The offer for adults includes the One You integrated healthy lifestyle service. This service is for adult residents who are obese or have another long-term condition or 2 or more risk factors such as dietary concerns or lack of physical activity. **500 people each year in Westminster** are supported to eat well, move more and lose weight to reduce their risk of cardiovascular disease. In 2020, **75%** of those using the service are living in the most deprived areas of the borough and **60%** are from BAME backgrounds. **71%** of those attending their health behaviour journey lost more than 3% weight of their body weight.
- 4.2 There are a variety of options residents can access which have largely been available online or over the phone during the pandemic. As Covid-19 restrictions are eased the face-to-face delivery is re-starting and residents will be able to attend Adult Weight Management (AWM) courses, cook and eat, walking groups, subsidised gym memberships, access to one-to-one Care Planning interventions, stop smoking programmes within primary care locations and at various locations throughout the borough.
- 4.3 In addition to the One You service, NHS Diabetes Prevention Programme has been established to support people to maintain a healthy weight and be more active to significantly reduce risk of developing diabetes by joining group sessions with an experienced coach or through digital support including online peer support groups.
- 4.4 Westminster Social Prescribers programme started in April 2020 and is managed by One Westminster. It supports adult residents to improve their health and wellbeing, manage, prevent, and cope. The seven social prescribers are based in GP surgeries.
- 4.5 In response to the pandemic, the Public Health team increased investment to enhance the targeting of health checks, so those at higher risk including ethnic minority groups were called and supported to take up a health check. We commissioned an additional worker to operate within the 'One You' adult lifestyle service, to make phone calls to all residents who had not taken up a health check who may be at higher risk. The focus was particularly on reaching minority ethnic groups based on early findings of disproportionate Covid-19 impact. We also increased

investment in adult weight management services – particularly services available online in response to the change in ability to meet face to face. The additional AWM services will offer original core delivery options as well as incorporate new aspects such as Gloji – a new digital weight management programme, MAN v FAT Challenge – which will help men with a high BMI to lose weight for good and get active and a voluntary sector referral incentive to increase sustained engagement from ethnic minority groups and men.

## **5 Next Steps**

- 5.1 Public Health are currently reviewing the Association of Directors of Public Health (ADPH) thematic child obesity framework, originally carried out in 2015, to gain insights into what is working well and areas for improvement in Westminster. This includes reviewing the impact of Covid-19 as well as holding ourselves accountable on our approach to equality and inclusion. As part of this review, we have already identified that there is an opportunity to codesign and implement a service for teenagers.
- 5.2 A further significant area of development is in tackling health inequalities by continuing to work to create healthier environments and continuing to listen to the community to shape activities for families and to provide physical activity and healthy eating initiatives to BAME groups, young girls and CYP with SEND.
- 5.3 We wish to strengthen the child, young people and adult healthy weight pathways: enhance integration between Change4Life and OneYou services and ensure we meet the needs of all age groups particularly teenagers and older adults.
- 5.4 We will respond to the strategic direction that the NWL ICP provides on tackling obesity. The focus of the ICP will be on tackling health inequalities in relation to obesity with a lifelong approach and promoting innovative ways to support those most at risk. We recommend partners lead a further discussion once this strategy is defined in six months' time.

## Appendix A - Westminster's Whole System Approach

The infographic below illustrates the current whole system approach in Westminster, integrating the healthy weight management programmes Change4Life and One You alongside working with partners to create healthier environments.

