

# Central Bedfordshire Health and Wellbeing Board

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## Overview of actions proposed to reduce excess weight

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## Public

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### Purpose of this report

This report outlines the actions and timelines for a 'whole systems approach' to tackling obesity in Central Bedfordshire, as part of the Joint Health and Wellbeing Strategy objective "Enabling people to optimise their own and their family's wellbeing".

### RECOMMENDATIONS

The Health and Wellbeing Board is asked to:

- 1 Recognise the importance of tackling obesity in Central Bedfordshire for all partner organisations.**
- 2 Endorse the proposed universal 'whole systems approach', incorporating focused efforts on a geographical area of higher need.**

### Issues

#### The importance of tackling obesity

1. Obesity is one of the most serious public health challenges of the 21<sup>st</sup> century. It is having an impact on people's lives now, across the generations, in terms of quality of life, the risk of developing chronic diseases such as type 2 diabetes and its association with common mental health disorders.
2. Without action, the health of individuals will continue to suffer, health inequalities associated with obesity will persist and the economic and social costs will continue to increase.

3. Obesity is a complex problem with a large number of different but often interlinked causes, including personal, familial, societal and environmental factors. No single measure in isolation is likely to be effective in tackling obesity.
4. A system that supports people to maintain a healthy weight can improve workforce health, reduce sickness absence and contribute to a stronger local economy. It also serves to reduce social care costs<sup>1</sup>.

### **The local picture for obesity**

5. Despite emerging national policies and local action, 1 in 5 Reception age children are overweight or obese and this rises to nearly 1 in 3 by the time they leave primary school.
6. In Central Bedfordshire in 2017/18 19.3% of 4-5 year olds (663 children) were found to be overweight or obese. This is lower than the national average and is similar to the average of local authorities with a similar level of deprivation (i.e. the least deprived 10% of local authorities in England). The proportion of 4-5 year olds in Central Bedfordshire who are overweight or obese has remained stable since the records were first collected in 2006/07.
7. The proportion of 10-11 year olds who were found to be overweight or obese was 29.5% (874 children). This is lower than the national average and similar to local authorities with a similar level of deprivation. This proportion has also remained relatively stable since 2006/07.
8. Levels of obesity are disproportionately higher in more deprived socio-demographic groups and in some ethnic minority groups. Nationally, there is an almost linear relationship between excess weight prevalence in children and adults and the Index of Multiple Deprivation score for the area where they live. In Central Bedfordshire, for 4-5 year olds there is a 16.8% difference between the ward with the highest obesity rate (Tithe Farm) and the ward with the lowest (Shefford). For 10-11 year olds there is a 18.4% difference between the highest (Parkside) and the lowest (Ampthill).
9. For adults, the data is self-reported and should be interpreted cautiously, but in 2016/17 64% of adults in Central Bedfordshire were estimated to be overweight or obese; which was similar to the England average but higher than local authorities with a similar level of deprivation.

### **Building on foundations**

10. Central Bedfordshire has had an Excess Weight Strategy in place since 2016 with four key aims:
  - Creating healthy environments which actively promote and encourage a healthy weight.

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<sup>1</sup> Economic costs of obesity and the case for government intervention, Department of Health, 2007.

- Giving all children and families the best start in life and supporting them in achieving a healthy weight and lifestyle.
  - Empowering adults and older people to achieve and maintain a healthy weight.
  - Enabling practitioners working in Central Bedfordshire to have a meaningful discussion about weight in a confident and effective manner.
11. As part of this strategy, there are interventions and pathways in place to promote a healthy weight and manage excess weight. These include:
- Weight management services for children, young people and their families, as well as an adult service.
  - Active lifestyle service for those with certain health conditions.
  - Active travel schemes such as Bikeability in schools and health walks.
  - A 'Healthier Options Award' for local food businesses that meet certain criteria.
  - 'Raising the Issue of Weight' training for health professionals.

### **Why do we need to approach obesity differently?**

12. There is already a lot of local activity and commitment from partners, and while we can evidence the positive impact of some of the local interventions on individuals and families, it has not yet been possible to achieve population-level change, and inequalities persist.
13. Whilst weight management services are an effective, evidence-based intervention for individuals and families, and an important component of a wider strategy to prevent obesity, they will never have sufficient scale to deliver population-level impact.
14. 'Upstream' interventions that address the physical and social conditions in which we live, learn and work have greater potential to deliver population-level change.

### **Taking a 'whole systems approach' to tackling obesity**

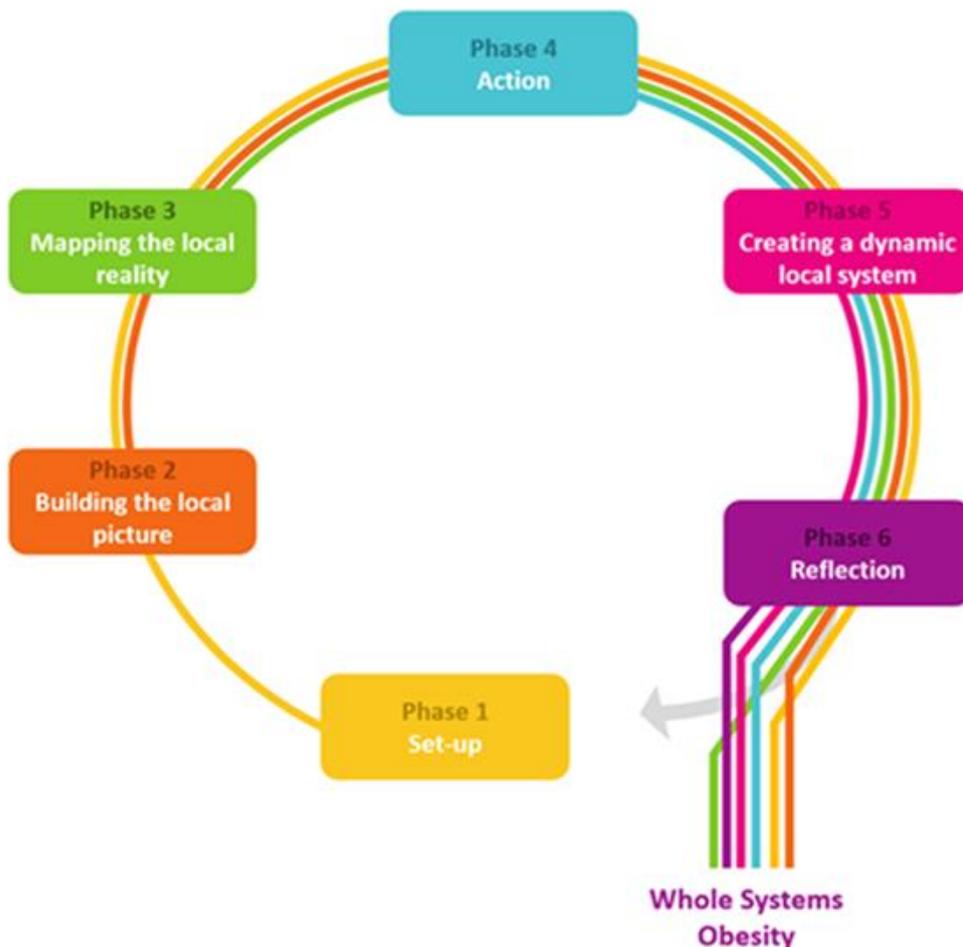
15. With the support of leaders and commitment of local partners we are reviewing the local excess weight strategy, identifying further opportunities to influence health behaviours, for example through further collaboration with planning and environmental health services and by improving the local maternal obesity pathway. This work will be framed as a 'whole systems approach' (WSA) using a nationally tested model.
16. A WSA seeks to address many of the influencing factors on obesity and requires coordinated action from multiple sectors including health, social care, planning, housing, transport and business to bring about a population-level change. This approach will require careful monitoring for impact and unintended consequences.

## PHE whole systems toolkit

17. The Public Health England Whole Systems Approach to Obesity (WSO) toolkit aims to help local authorities and their partners deliver coordinated actions, involving stakeholders across the whole local system.
18. A key objective of the approach is to identify synergies and win-wins for local partners and co-benefits for communities and residents. For example, limiting the number of unhealthy food outlets in a local area could result in less littering and a more diverse high street, in addition to meeting the core objective of delivering a healthier local food environment.
19. At the same time, by working collaboratively to develop a range of actions across sectors, negative unintended consequences of individual actions are more likely to be anticipated and avoided. For example, if increasing activity levels in adults and children leads to increased use of leisure centres, the outcome could be undermined if parallel action is not taken to encourage healthier catering and vending within these facilities.

## What the approach will look like

20. Public Health England have developed a route map to support local implementation of the whole systems approach (**Figure 1**). This will be used as a template but will be adapted to meet the needs of Central Bedfordshire, particularly in the latter phases.



**Figure 1.** Public Health England Route Map; Whole Systems Approach to Obesity

21. In addition to the universal whole systems approach, we will focus efforts on a geographical area of higher need in Central Bedfordshire. This area will be identified using a range of indicators including deprivation and obesity data, and will be agreed by the Health and Wellbeing Board as part of a broader community-based approach to improving health and wellbeing. It is anticipated that this focused work should incorporate areas of established and new development. This will enable a wider range of planning, policy and asset-based interventions to be implemented.
22. After consultation with local stakeholders, principles from the European EPODE model will be applied. EPODE is a community-based approach which has been implemented in more than 500 communities across six countries and has achieved reductions in health inequalities related to nutrition and physical activity, and decreases in the prevalence of obesity.<sup>2</sup>

*Step 1. Creating the conditions for change, January-April 2019*

23. We will build on work so far to understand of the context of obesity in Central Bedfordshire and its impact. We have begun to collect and analyse relevant data to inform the programme, and meetings are scheduled to build on existing relationships with key stakeholders across the Council and its partners.

*Step 2 - Understanding local causes and linkages, February-May 2019*

24. Once preparation has been undertaken, interviews will be conducted with system partners and community stakeholders. This will help add to current understanding of issues and actions that are currently being undertaken in the local area. This system map will be the basis for the future action plans.

*Step 3 - Identifying opportunities to disrupt the system, building and aligning actions around key objectives, targeted workshops delivered from July-September 2019*

25. 'Disrupting the system' involves partners collectively identifying the most likely and productive areas of activity where the local health and wellbeing system in partnership with local communities can take action. It is anticipated that priorities will be creating a healthier food environment, working with children and young people as well as maternity services. These priority areas will relate to relevant resources and relationships, the extent of existing activities and the strength of the evidence base.
26. Collectively we will identify and develop actions around the identified areas. For example, if increasing healthy food consumption is a priority area of activity, actions would include incentivising local fast food outlets to provide a healthier food offering, tighter planning around fast food outlets, encouraging implementation of government buying standards for food and catering services across the wider public sector and catering guidance available to support this; working with schools to promote healthier school food approaches.

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<sup>2</sup> EPODE, Ensemble Prévenons l'Obésité Des Enfants' (Together Let's Prevent Childhood Obesity).

27. The approach will be coordinated by the Senior Public Health Officer who will work across sectors and organisations to ensure that action in one area is not undermined by lack of action in another. The Officer will also coordinate the targeted, place based work.
28. It is also important to consider all local policies, programmes and activities that may impact on obesity. For example, strategies to promote road safety such as 20 mph speed limits in urban zones may also increase the number of children walking to school.

*Step 4 - Creating and maintain a dynamic system to promote healthy weight, September 2019 onwards*

29. Actions and efforts will be aligned, and action plans will remain flexible to accommodate changes in the local system, that may impact on the effectiveness of actions.
30. Stakeholders will meet regularly to discuss their progress towards the agreed goals and adjust activities where necessary.

*Monitoring and Evaluation*

31. Sufficient time will be allocated annually for partners to reflect on the functioning and effectiveness of the whole systems approach.
32. In the short term, the success of the approach will be monitored through a range of proxy measures, for example measures of stakeholder engagement and achievement of agreed actions, the reach of social marketing and the numbers of people receiving and successfully completing interventions.
33. In the long term, obesity levels and inequalities will be monitored via routine data collections, specifically the National Child Measurement Programme and the Active Lives Survey.

## **Financial and Risk Implications**

34. It is anticipated that the majority of the work will be undertaken using existing local and national resources, however any additional funding will be sought through external sources for example, an application was recently made for the national Childhood Obesity Trailblazer programme.

## **Legal Implications**

35. There are no direct legal implications arising from this report.

## **Governance and Delivery Implications**

36. We will set up a clear structure to implement and monitor the WSA effectively; there will be a core working group who will meet regularly and will be responsible for initial implementation. There will be a wider systems network of stakeholders responsible for sustained implementation of the WSA.

37. Progress will be reported to the Health and Wellbeing Board.

## **Equalities Implications**

38. Central Bedfordshire Council has a statutory duty to promote equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
39. Reducing health inequalities is central to the proposed WSA. There will be a combined universal and targeted approach, and the targeted work will be piloted in an area with a higher level of social deprivation and higher prevalence of obesity.
40. As well as considering inequalities between geographical areas, the targeted work will seek to understand and address the needs of groups who may experience worse health physical and mental health outcomes than the rest of the population. These groups will be identified during the community engagement phase.

## **Implications for Work Programme**

41. An update to the Health and Wellbeing Board will be provided in phase 4 of the WSA in October 2019.

## **Conclusion and Next Steps**

42. Obesity is a major public health challenge with complex causes and significant consequences for individuals and communities. The proposed 'whole systems approach' draws together and builds upon work to date, and provides the basis for achieving population-level impact on obesity in Central Bedfordshire.
43. The next steps, as described above, are to meet with local stakeholders and begin to create the conditions for change, identifying local challenges and opportunities.

## **Appendices**

44. None

## **Background Papers**

45. None