

Children's Services and Education Scrutiny
16th November 2010

Background Report
Review of childhood obesity and sports provision for secondary and primary children

Content

Summary

1. Southwark context
2. Why is it of concern?
3. What can we do that is effective?
 - Evidence for the prevention and management of obesity
 - Evidence for promoting physical activity
4. What are we doing?
5. Next steps

Appendices

Appendix 1 Initial responses to Scrutiny scoping questions

Appendix 2 Southwark Physical Activity Strategy

Appendix 3 Southwark Healthy Weight Strategy

Appendix 4 Bacon's College Sports Partnership

Appendix 5 Summary list of relevant documentation

Summary

- Southwark has very high levels of childhood obesity. The Childhood Measurement Programme measure Reception Year and Year 6 pupils. We have had nationally the most obese Year 6 pupils for the past 3 years and despite a small reduction, we are likely to have the highest percentage again for 09/10.
- There is a multi agency Southwark Healthy Weight Strategy which sets out the key areas of work. The priorities involve a range of settings and different professionals and communities and focus on prevention in early years; 'shifting the curve' (ie prevention at a population level); targeting population groups 'at greater risk' of obesity; and weight management. The strategy is informed by national guidance, best practice and evidence of what works. For interventions to be effective, they have to be multi-component (ie inputs to include nutrition, physical activity and mental health).
- There is a recognition that we operate in a financially restrained context and that we will not be able to do everything. The emphasis must be on making the most difference (ie 'shifting the curve' at a population level) and whenever opportunities arise, creating synergy and added-value. A key Council priority is the introduction of universal Free School Meals (FSM) for primary school pupils. Evaluations of FSM nationally have indicated that a whole school approach is essential if unhealthy eating behaviour is to be changed. A whole school approach is one that builds on the Healthy Schools Standards (for eg ensuring that health and healthy eating are incorporated into the school curriculum, there are healthy eating policies and pupils, parents, teachers and governors are engaged in the health agenda). Additionally, the 'obesogenic' environment must be addressed ie opportunities for physical activity encouraged (eg walking to school as part of the school transport plan; access to green space) and the proliferation of unhealthy fast food outlets tackled.
- In Southwark, the MEND programme (family based weight management intervention) was run for almost 4 years funded through Big Lottery, various sources of research funding and LPSA pump priming. The programme has been nationally evaluated and locally it has delivered the LPSA 'stretch targets'. With the current resource constraints, the challenge for us is to now incorporate the lessons into on-going programmes such as the Southwark Community Games (SCG), Superstars Challenge obesity programme and the School Sports Partnership's Family Wellbeing programme.
- The central funding for the Healthy Schools Programme is also finishing at the end of March. Current discussions are taking place with schools to develop a locally agreed enhancement model to ensure further work on health and education is taking place and is being evaluated for behavioural

impact on our children and young people. This shall be launched in the Spring term.

- Southwark Leisure and Well Being Team are continuing to provide a host of programmes, through Southwark Community Games and SCG Superstar Challenge Programme, Sport Unlimited and a Young People with Disabilities programme. The funding for the School Sports Coordination is coming to an end at the end of March 2011. The current economic climate is raising a host of questions regarding on going provision and discussions are underway regarding budget pressures and further delivery.
- Leisure centres are currently undergoing major refurbishment: there is investment spread across all the council owned facilities.
- It is clear that there is a strong association between obesity and ethnicity. Further work needs to take place to address this.

1. Southwark context

The national Health Survey for England suggests that the prevalence of childhood obesity is increasing in Southwark across all ages. Local measurements of Reception Year (4 – 5 years old) and Year 6 children (10 – 11 years old) confirm this: for the last 3 years (06/07, 07/08, 08/09) Southwark had the highest obesity rates for Year 6 and the second highest for Year R for the last 2 years (07/08, 08/09). The latest childhood obesity measurements (09/10) indicate 25.7% (Year 6) and 14.8% (Year R) of pupils are obese: there is a slight decrease in obesity in Year 6.

There is an association between children from minority ethnic groups and excess weight: this is reflected both locally and nationally. Obesity levels are highest in deprived, inner-city areas, and among black and minority ethnic groups.

2. Why is it of concern?

Being overweight or obese can increase the risk in adulthood of developing a range of other health problems such as coronary heart disease (CHD), type 2 diabetes, stroke and reduced life expectancy (see Table 1)

The consequences of obesity are not limited to the direct impact on health. Overweight and obesity also have adverse social consequences through discrimination, social exclusion and loss of or lower earnings, and adverse consequences on the wider economy through, for example, working days lost and increased benefit payments.¹

There is also evidence that obese children experience more illness and health related problems in childhood as well as more school absenteeism.²

	Relative risk - women	Relative risk – men
Type 2 diabetes	12.7	5.2
Hypertension	4.2	2.6
Myocardial infarction	3.2	1.5
Colon cancer	2.7	3.0
Angina	1.8	1.8
Gall bladder disease	1.8	1.8
Ovarian cancer	1.7	---
Osteoarthritis	1.4	1.9
Stroke	1.3	1.3

Source: National Audit Office (NAO, 2001) Tackling Obesity in England.
London: The Stationery Office

Table 1: Estimated increased risk for the obese of developing associated diseases

¹ National Obesity Observatory (June 2010) The Economic Burden of Obesity

² Wijga Ah et al Comorbidities of obesity in school children: a cross-sectional study in the PIAMA birth cohort BMC Public Health. 2010; 10: 184

A report by the Royal College of Physicians (1998)³ states that if a person who weighs 100kg loses 10% of their weight, they would see:

- a substantial fall in blood pressure
- a fall of 10% in cholesterol
- a greater than 50% reduction in their risk of developing diabetes
- a 30-40% fall in diabetes related deaths
- a 40-50% fall in obesity related cancer deaths
- a 20-25% fall in total mortality.

3. What can we do that is effective?

The National Institute for Health and Clinical Excellence (NICE) reviews the effectiveness of interventions and produces guidance and recommendations covering the NHS, local authorities and partners, early-years settings, schools, workplaces, self-help, commercial and community settings.

Guidance relevant to childhood obesity include:

[Weight management before, during and after pregnancy](#) Jul 2010

[Prevention of cardiovascular disease](#) Jun 2010

[Promoting physical activity for children and young people](#) Jan 2009

[Maternal and child nutrition](#) Mar 2008

[Physical activity and the environment](#) Jan 2008

[Four commonly used methods to increase physical activity](#) Mar 2006

[Behaviour change](#) Oct 2007

Evidence for prevention and treatment of obesity

In summary, evidence of effectiveness for the prevention and treatment of obesity in children includes:

- Lifestyle programmes can be successful as a primary treatment.
- Programmes which set realistic weight goals; focus on lifestyle changes; address diet and physical activity; offer a variety of approaches; include a component of behaviour change; offer follow up support.
- Drug treatment in adults and children over 12 years who have a significant co-morbidity
- Maintaining a healthy weight through reducing sedentary behaviours.
- Maintaining a healthy weight through a low fat diet, increased consumption of fruit, vegetables and fibre and decreased consumption of sugary drinks, take away food and alcohol.
- Focusing on parental obesity to reduce the risk of obesity and overweight in children.
- Multi-component interventions which included a public health media campaign to increase awareness of what constitutes a healthy diet

³ Royal College of Physicians of London (1998). Clinical Management of Overweight and Obese patients, with particular reference to the use of drugs. London: Royal College of Physicians

- Using social marketing interventions to improve outcomes associated with diet, e.g. fruit and vegetable intake, fat consumption.
- Family-based interventions that target improved weight maintenance in children and adults, focusing on diet and activity, can be effective, at least for the duration of the intervention

Recent guidance also highlights the importance of addressing the proliferation of fast food outlets⁴.

There is also guidance covering drug treatment and surgical intervention⁵:

- Drug treatment should only be considered;
 - after dietary, exercise and behavioural approaches have been started and evaluated
 - in patients who have not reached their target weight loss or have reached a plateau using dietary, activity and behavioural changes alone and surgical interventions
- Bariatric surgical interventions only in very exceptional circumstances to very severely obese adolescents with serious co-morbidities where other interventions have failed.

Since 1999, the number of under-18s on the obesity drug treatments has risen 15-fold across the UK. Drug treatment is not recommended to under 12s, reviews have identified limitations and side effects.⁶

Evidence for promoting physical activity

The evidence relating to physical activity can be categorised into 3 broad areas: evidence of what works to promote physical activity, evidence of the important role that the physical environment plays, and evidence for behavioural change.

Promoting physical activity NICE has produced a detailed review of the evidence supporting the promotion of physical activity for children and young people⁷. The key recommendations relate to

- Promoting the benefits of physical activity and encouraging participation at national and local levels
- Ensuring high-level strategic policy planning for children and young people supports the physical activity agenda
- Consultation with, and the active involvement of, children and young people

⁴ NICE [Prevention of cardiovascular disease](#) Jun 2010

⁵ NICE [Obesity: the prevention, identification, assessment and management of overweight and obesity in adults and children](#) <http://guidance.nice.org.uk/CG43>

⁶ Viner, R.M., Hsia, Y., Neubert., and Wong, I.C.K; Rise in anti-obesity drug prescribing for children and adolescents in the UK: a population-based study. *British Journal of Clinical Pharmacology*. (2009).

⁷ [PH17 Promoting physical activity for children and young people: guidance](#) Jan 2009

- The planning and provision of spaces, facilities and opportunities
- The need for a skilled workforce
- Promoting physically active and sustainable travel

Physical environment There are evidence-based recommendations on how to improve the physical environment to encourage physical activity. They are for NHS and other professionals who have responsibility for the built or natural environment. This includes local transport authorities, transport planners, those working in local authorities and the education, community, voluntary and private sectors. The recommendations cover strategy, policy and plans, transport, public open spaces, buildings and schools.⁸ They include:

- Ensure planning applications for new developments always prioritise the need for people (including those whose mobility is impaired) to be physically active as a routine part of their daily life.
- Ensure pedestrians, cyclists and users of other modes of transport that involve physical activity are given the highest priority when developing or maintaining streets and roads.
- Plan and provide a comprehensive network of routes for walking, cycling and using other modes of transport involving physical activity.
- Ensure public open spaces and public paths can be reached on foot, by bicycle and using other modes of transport involving physical activity.

Behaviour change For behaviour change to be effective, the recommendations include⁹:

- To base interventions on a proper assessment of the target group, to understand where they are located and their characteristics
- To work with other organisations and the community itself to decide on and develop initiatives
- To build on the skills and knowledge that already exists in the community, for example, by encouraging networks of people who can support each other
- To take account of – and resolve – problems that prevent people changing their behaviour (for example, the costs involved in taking part in exercise programmes or buying fresh fruit and vegetables, or lack of knowledge about how to make changes)
- To train staff to help people change their behaviour.

4. What are we doing?

Southwark Healthy Weight Strategy

The Southwark Healthy Weight Strategy has set out objectives for 2009-2012.

⁸ [PH8 Physical activity and the environment: guidance](#) Jan 2008

⁹ [PH6 Behaviour change: guidance](#) Oct 2007

There are four strands within the strategy, there are actions for children and young people in each of the strands:

Strand 1: Early intervention

Strand 2: Shifting the curve

Strand 3: Targeting those at risk

Strand 4: Effective treatment

Actions for Early Intervention

- Development and implementation of training programme on delivery of breastfeeding, weaning and nutritional advice to expectant/new mothers
- Using NCMP data to target programmes of support to schools and to potentially expand the SCG Superstars Challenge Programme
- Development of support for secondary schools for the implementation of nutrient based standards
- Ongoing support on implementation of nutrient based standards for school meals to primary schools
- Implementation of Universal Free School Meal (FSM) pilot and extension to all primary schools
- Ensuring a whole school approach to implementing FSM ie ensuring healthier eating is part of the school curriculum, school policies and work with parents, pupils, teachers and governors
- Supporting parents in choosing healthy lifestyles, developing and maintaining Healthy Weight through healthy weight workshops
- Development of healthy eating policy in Sure Start children centres sessions and coordination of healthy schools, extended services and SSCC policies on nutrition
- To ensure that 10% of schools with Healthy School Status (HSS) work towards enhanced HSS for Healthy Eating/Physical Activity (this has been achieved)

Progress for Early intervention

Breastfeeding and Early Years

- Currently all newly qualified and newly appointed Health Visitors receive 2 day training in breastfeeding in 1st yr. Annual update training is given thereafter.
- Breastfeeding mini lectures for students from Kings and Southbank commence on the 11th November 2010.
- There is also breastfeeding awareness training which is geared towards child-minders, support workers, early years staff and health visitor assistants
- Five breastfeeding cafes operate in various community settings in Southwark: two in children centres, one in a family centre, one in a health centre, one in a library. The cafes act as a resource for professionals, antenatal clients and the community.
- 52 volunteer breastfeeding mothers (peer counsellors) have completed the La Leche League peer counsellor-training programme to support other breastfeeding mothers. Most of these volunteers live in most deprived

neighbourhoods and are from different ethnic backgrounds. They are involved in the breastfeeding sessions at the majority of ante natal classes in the trust.

- Ante natal flyers are included in the antenatal packs. Start4life 'Off to the best start' booklets are included in new birth packs. Guys and St Thomas', Kings and Lewisham hospitals include information on the cafes in maternity discharge packs.

Healthy Schools Partnership

- The Healthy Schools Partnership has been working in all schools to develop policy and practice on a range of PSHE related activities, including healthy eating and physical activity. In order to achieve Healthy School status, schools have to provide evidence against a set of National Standards. Currently 86% of schools in Southwark have achieved Healthy School status with a further 25% of schools working on enhanced status.

Sports and Physical activity

- Schools have been involved in the Southwark Community Games, providing additional support to schools (currently 51 schools) and other educational settings in the development of physical activity.
- The Council's community sports team and the PCT's public health team are working together on a pilot project called 'Southwark Superstars Challenge'. So far six schools with the highest obesity rates have been recruited to the programme. The programme introduces intensive physical activity in yr 5 (age 9-10). The 10 week programme runs three times a week for 45 - 50 minutes of physical activity and 10 minutes of nutrition education. At the start and end of the programme children do a fitness test and have their measurements taken. School staff and heads have been very enthusiastic about the programme so far.
- The Community Sports Team are also working with partners on 'Sport Unlimited' which is a programme aimed at children in yr 9 and 10 (age 13-15) to increase their level of participation in sport and physical activity.
- The School Sports Partnership has been working in all maintained schools in Southwark providing advice and guidance on physical activity for the past six years. The two partnerships have been operating out of Bacon's College and Harris Girls Academy East Dulwich. Bacon's College physical activity levels have shown a year on year increase (Appendix 4).
- Dance Challenge 2010 offers training for dance leaders and teachers and developmental support for groups registering for the competition. Dare2Dance will be offering two empowerment days and after school classes in street dance for teenage girls in Southwark during 2011.
- A Healthy Eating policy for children's centres has been developed. This now requires further follow up to ensure centre managers are aware of how to implement it. Audit on healthy eating guidelines carried out in April 2010 and representatives (12 out of 21 Southwark Children Centres) attended a training day on policy development. Level 1 healthy weight training for under 5's will be scheduled for March 2011. A co-ordinated effort is essential to promote the session and increase uptake from key children's centre staff and Early Years workers.
- Work is taking place in schools to support them to use the Change4life campaign. Four networking events have taken place, 68 attendees (30% from schools)

Promoting healthier school meals

- Healthy Schools is supporting the development of a whole school approach to sustainable food. 18% of schools are participating in the Million Meals campaign to increase uptake of school meals (13 primary and 4 secondary).
- Free training and 1:1 support sessions for school cooks are provided with involvement of a food consultant (funded until March 31st). Guidance is currently available for school governors on selecting nutrient analysis software to ensure school lunch menus are compliant with food and nutrient based standards.
- Pooled funding from the PCT and Council has enabled four Change4life networking and workshop events to set up and promote school based community health activities among PSHE and headteachers, extended services, school nurses, school sports coaches, school children, parents and early years.
- Let's get cooking clubs are operating in several primary and secondary schools
- Information and co-ordinated support to raise awareness of healthy schools and services for young people is regularly provided at family fun days and health events throughout the year.

Free School Meal Pilot

- The Southwark Free Meal programme is going to be piloted in 10 schools from January 2011. All reception and Yr 1 pupils in these schools will have a free school meal. The pilot will be evaluated and implications for a wider roll out will be addressed with a view to ensuring that all primary age pupils receive a free nutritional meal by 2014.
- There is an audit taking place that will inform the development of the universal FSM programme. This audit will also consider the level of support that is required for a whole school approach to healthier eating.

Actions for Shifting the Curve

- Link the strategy to other current strategy documents particularly Sport & Physical Activity, Southwark Food, Play, and Mental Health.
- Increase the training/education opportunities around healthy lifestyles for those who work with families and in the community, with a follow-up process for progress.
- Link with National Social Marketing Campaigns to deliver borough specific messages e.g. Change4Life.

Progress for Shifting the Curve

- There has been significant health input to the development of sports and physical activity strategy for the borough. A needs assessment was carried out involving consultation with local people. Recommendations include support for walking activities, developing and piloting more family based programmes and using the new SSF schools as a focus for healthy living themed programmes, undertaking wider survey work to identify key

motivators and barriers in population, completing an audit of potential voluntary sector providers.

- The PCT is contributing to the revision of the Play Strategy for the borough.
- Three sets of child obesity training were trialled in 2009/10
 - Two one-day sessions on 'An introduction to obesity' were delivered using the MEND training package for staff, facilitated by public health. 37 people attended.
 - Two one-day brief intervention training sessions were delivered locally by London Teaching Public Health Network for people from a wide range of occupational/organisational backgrounds. 40 participants were trained mainly from voluntary and community sector organisations.
 - Two one-day child obesity training sessions were designed and delivered by public health and children's centre nutritionists. These focused on obesity for 'under 5 yrs and pregnant women' and 'over 5yrs'. The courses introduced the topic, and developed staff's knowledge and skills to support families and signpost them to local opportunities. 37 people were trained over the two dates.

For 2010/11 two levels of obesity training have been developed and refined for children as part of the local Health Promotion Training brochure

- Level 1 healthy weight training supports staff working with children and families to explore the causes and consequences of obesity, local care pathways and ways of raising the issue including use of Change 4 Life campaign messages. 17 health professionals have attended this year (health visitors, schools nurses and staff from local community groups).
- Level 2 healthy weight training supports staff to further enhance their skills in providing personalised advice to families, using motivational interviewing techniques and being improving knowledge of nutrition, physical activity and behaviour change.

Action for Targeting those at risk of obesity

- Awareness raising activity with at risk BME groups
- Develop appropriate training options for those working with at risk BME groups
- Identify appropriate interventions for different at risk communities within Southwark
- Enhance primary care response to obesity
- Develop training for primary care on weight management

Progress for Targeting those at risk of obesity

Early in 2009 Southwark supported the voluntary sector to run CHALK (a community based intervention for families with children aged 4-7years) targeting at risk BME groups. Community Action Southwark ran cascade training (developed by London Teaching Public Health Network) for 8 individuals from community groups to deliver the programmes in First Place Children's Centre and Peckham Pulse for their own communities.

Approximately 20 families attended. With funding, CAS would like to run more programmes targeting single fathers through churches.

In late 2009 the National Change4Life team worked with Southwark and Lambeth PCTs to deliver two campaign launch events, one for community leaders and another for staff working with West African groups. Culturally appropriate materials, case studies and recipes were explored and attendees were encouraged to further promote the campaign to their West African communities. As a result of the interest shown and networking, further work has taken place to devise local healthy weight training with an African flavour and has been very well received 23 attended (17 on waiting list).

Public Health delivered a two-day training session on healthy weight for the Somali Refugee Council in November 2009. Subsequent follow-up events have included training up walk leader volunteers.

Online obesity care pathways for adults and children are being promoted to GPs, practice nurses, school nurses, health visitors and child development workers. Pathways ensure up-to-date clinical guidance is embedded as well as local opportunities and contacts for interventions and self help.

Actions for Treatment of Obesity

- Adapt MEND to the needs of the local community, including extending the age range for participants (5-13 yrs old) or develop evidence-based, sustainable nutrition and physical activity interventions for children age 5-13 yrs old. To use lessons to inform development of Superstars Challenge and Family Sports Partnership
- Develop evidence-based, sustainable nutrition and physical activity interventions for children age 14-16 yrs old.
- Develop training for children's workforce, e.g. school nurses, child development workers.
- Scope and cost evidence-based, sustainable nutrition interventions for children with disabilities including providing training for front line staff, e.g. physiotherapists.

Progress for Treatment of Obesity

Public health in partnership with the leisure and wellbeing team successfully delivered the MEND programme (family based weight management intervention) for almost 4 years. The programme evaluated well and helped to meet LPSA 'stretch targets'. Without ongoing funding from external sources the challenge is to now embed what worked well within on-going programmes such as the Southwark Community Games (SCG), Superstars Challenge obesity programme and the School Sports Partnership's Family Wellbeing programme.

On-line child obesity pathway has been promoted across the borough and outreach demonstrations have been targeted to 10 GP practices and 3 locality forums for school nurses, child development workers and health visitors.

See above for training delivered.

A training needs assessment survey has been developed to assess training needs of health professionals on obesity. This will be sent out in Spring 2011 to allow us to target and design training better for 2011/12.

There is now agreed follow-up by school nurses of children with very unhealthy (over and under) weight.

5. Next steps

With tighter resources available, we have to prioritise what's possible, where there is most added value and where there is 'greatest good to the greatest number'. With that in mind, our key priorities (10/11, 11/12) are:

- Draw out the implications of the NICE review of evidence for maternity services to inform commissioning
- Supporting the whole school approach in implementing universal Free School Meals
- Addressing key aspects of the obesogenic environment (fast food outlets and physical environmental factors affecting physical activity levels)
- Using the lessons from MEND to inform the development of Superstars Challenge and Family Sports Partnership
- Improving our understanding of what works with population groups at greater risk
- Consider resource implications for sports and physical activity promotion
- Consider resource implications for Healthy Schools Partnership
- Supporting work on funding (Mayor's Fund , GSTT & Olympics Legacy Fund)