



Classification	Item No.
Open / Closed	

Meeting:	Bury Health and Wellbeing Board
Meeting date:	December 2021
Title of report:	Health related behaviour: Obesity (food and physical activity)
Report by:	Jon Hobday (Consultant in Public Health)
Decision Type:	For information
Ward(s) to which report relates	All wards

1.0 SUMMARY

1.1 Obesity is a major public health issue that has significant associated impacts and costs locally and nationally. Obesity does not impact society equally, with people in the most deprived groups much more likely to be obese and to be admitted to hospital for obesity related health problems. Evidence suggests these inequalities have been growing in recent years and are further exacerbating wider health inequalities. In Bury around 63% of adults and 30 % of year 6 children are overweight and obese, which is slightly lower than national levels. In contrast, obesity levels in Reception age children in Bury increased significantly in 2020/2021 to 41.9%, well in excess of the national average of 27.7%. This is a concerning trend and the reasons for this increase are not yet fully understood, however the lock down of COVID is being suggested as a key driver. In response to addressing obesity Bury has developed a food and a physical activity strategy both of which aim to support Bury residents to achieve and maintain a healthy weight and reduce the risk of obesity. Significant steps have been taken locally to try and take a system approach to address this issue, and we continue to monitor our impact and tailor our approach for maximum impact locally.

2.0 MATTERS FOR CONSIDERATION

2.1 Key questions for consideration are

- Are we doing enough locally to address obesity?
- What more could we be doing?
- How do we reduce obesity inequalities?

3.0 BACKGROUND

3.1 The World Health Organisation defines overweight and obesity as

'Abnormal or excessive fat accumulation that presents a risk to health. A body mass index (BMI) of over 25 is considered as overweight, and over 30 is obese.'

It's very important we take steps to tackle obesity because as well as causing physical changes, it can put individuals at an increased risk of a number of serious and in some cases potentially life-threatening conditions including type 2 diabetes, coronary heart disease, some types of cancer (including breast and bowel), stroke and musculo-skeletal issues. There is also evidence to show that obesity can also affect quality of life and lead to psychological problems, such as depression and low self-esteem.

3.2 Obesity is generally caused by consuming more calories, particularly those in fatty and sugary foods, than you burn off through physical activity. The excess energy is stored by the body as fat. At a population level the causes of obesity are complex and multifaceted: however it is now generally accepted by health and other professionals that the current prevalence of obesity is caused by energy imbalances primarily created by changing environments that include more sedentary lifestyles and increased dietary abundance.

3.3 The 2007 foresight report stated that "People in the UK today don't have less willpower and are not more gluttonous than previous generations. Nor is their biology significantly different to that of their forefathers. Society, however, has radically altered over the past five decades, with major changes in work patterns, transport, food production and food sales."

3.4 Another key public health consideration is that obesity does not impact society equally. Analysis from the Kings Fund (2021) highlights a significant increase in

obesity in the most deprived communities in England in recent years, leading to a widening gap between the richest and poorest parts of the country. The analysis found people in the most deprived areas are also more than twice as likely to be admitted to hospital for obesity-related health problems. The obesity prevalence gap between women from the most and least deprived areas is currently 17 percentage points and for men it is 8 percentage points, up from 11 percentage points for women and 2 percentage points for men in 2014.

3.5 Childhood obesity has followed a similar pattern with a significant increase in inequalities in 2021/2022. For children in year six there was a 16.6-percentage-point gap in obesity rates between the most and least deprived children in 2020/21, up by 8 percentage points since 2006. For reception children there was a 10.7 percentage point gap between the least and most deprived children, up over 6 percent since 2006. In addition, differences in obesity rates translate to worse health outcomes for people in more deprived areas and contribute to health inequalities. Rates of obesity-related hospital admissions in the most deprived areas of England are 2.4 times greater than in the least deprived areas.

4.0 BODY OF THE REPORT

What is the picture in Bury

4.1 The most recent figures from 2019/2020 suggest the percentage of adults who are overweight and obese in Bury is 63% (this equates to around 84,000 adults who are overweight or obese in Bury). This is an increase of 4% when compared to 2018/2019. Bury does have lower levels of overweight and obesity than the North West region where the average is 66.5% with some areas within the North West are as high as 78%.

4.2 In regard to children the most recent data available from the national childhood measurement programme (NCMP) for 2020/2021 shows the percentage of overweight and obese children in reception and year 6 in England is 27.7% and 40.9% respectively. This is a significant increase for both years when compared to 2018/2019 data. Prior to 2021/2022 data the levels of overweight and obesity have remained relatively stable over the previous 5 years with some small fluctuations. The national increases in overweight and obesity levels in reception are reflected in Bury's results where we have seen a 77% increase in overweight and obese children between 2018/2019 and 2020/2021 (from 23.6% to 41.9%). However, in contrast to national trends - Bury has seen a decrease in overweight and obesity in year 6 children (from 34.9% in 2018/2019 to 29.9%) in 2020/2021. It is currently unclear

what factors have contributed to these significant variations but more work is underway to better understand the data.

What are we currently doing to prevent and address obesity

4.3 The evidence from both the foresight report and subsequent research has shown that to effectively address the issue of obesity, local and national responses need to be centred around two key drivers – abundant diets and sedentary lifestyles. Our local approach aims to focus on abundant diets through the food strategy and the sedentary lifestyles through the physical activity strategy.

Addressing obesity through the food strategy

4.4 In November 2020, following around 12 months of engagement with key partners Bury launched its first food strategy. This was formally approved and adopted by the Health and Wellbeing board. The Bury Food Strategy aims to dovetail with the national and regional approaches to the food system and tailor these to suit our local population, it has a focus on a collaborative working to improving our food environment.

4.5 The Bury Food Strategy Vision is:

'For Bury to be at the forefront of promoting and celebrating good food for all, through a knowledgeable, connected, supported and vibrant food culture.' The priorities of the Bury Food Strategy are that food in Bury is:

- Promoted and Celebrated
- Accessible to All
- Built on Education
- Vibrant and Resilient
- Resourced and Sustainable
- Connected and Collective

4.6 These priorities are based on the Sustainable Food Places Framework identifying 6 key areas across the whole food system. The full strategy can be found here (<https://councildecisions.bury.gov.uk/documents/s25025/Bury%20Food%20Strategy.pdf>)

4.7 One of the first key developments following the food strategy launch was the set up a Food Partnership in Bury. This was formed from a wide range of stakeholders to drive the food agenda forward and deliver on the Action Plan. This was an essential step to ensure a system wide approach to addressing the food agenda - some of the key actions being worked on include

- Working towards the food for life catering award in schools
- Working with planners around policies which support healthy environments
- Working with adult learning to promote healthy eating information and support in developing community cooking skills courses
- Working with families as part of the 'fit and fed' programme to educate around healthy eating and physical activity
- Working with Bury art museum creating bags for adults and younger people with creative activities around themes of food and health

Addressing obesity through the physical activity strategy

4.8 In September 2020 we launched the Bury Moving Strategy, which is a strategy outlining our vision for getting people in Bury moving more (<https://councildecisions.bury.gov.uk/documents/s20020/Bury%20physical%20activity%20strategy%20FINAL%20VERSION%202%20for%20SCB%20PDF.pdf>). The overarching aim of the strategy is to get 75% of the population active by 2025. The strategy outlines the four strategic objectives which will help us to achieve this, these include;-

1. Create and active society
2. Create active environments
3. Enable active people
4. Create active systems

4.9 The strategy outlines how we need to take a whole system approach. It also reinforces that to make meaningful changes in the amounts of physical activity people in Bury do we need to influence change at a number of levels including individual, social environments, organisations and institutions, physical environments and policy.

4.10 Since the launch of the strategy a range of work has been taking place including;-

- Adapting the live well service offer to provide online lessons and support

- Refreshing the Bury Directory to ensure key information on all types of physical activities available is up to date along with ensuring positive health messages around physical activity had been promoted
- Delivery of our Local Pilot to increase the physical activity levels of those out of work
- Creating a walking a cycling forum
- Obtaining funding and investing in a range of infrastructure changes to promote active travel with a focus on walking and cycling

4.11 These developments are in addition to all our business as usual work which currently goes on at a community level to get people active, including; -

- Health and social care professionals consistently promoting physical activity
- Physical activity promoting school and educational settings
- Extensive local sport and leisure offers
- Ongoing investment in transportation infrastructure which promote walking and cycling
- Excellent parks and green spaces
- Support for organisations to become physical activity promoting workplaces
- Strong local communications and marketing promoting the benefits of physical activity

What are we doing to support those who are overweight and obese

4.12 As the statistics support the majority of adults in Bury are already overweight or obese and for those individuals it is essential support is available to assist people to lose weight should they want to. Bury offers a range of provision to support those who are overweight or obese and have or at risk of health problems. This allows individuals to receive appropriate support to get them back to a healthy weight. Specific support in Bury includes

- Young person weight management offer
- Exercise on referral
- Tier 2 weight management support
- Health Trainer service
- National Diabetes Prevention Programme

4.13 It is worth noting that while the National Institute for Health and Care and Excellence (NICE) guidance broadly supports the use of weight management, programmes which include addressing diet, physical activity and behaviour change - the evidence is mixed. It is broadly acknowledged through the evidence that the long term effectiveness of these programmes is limited. In addition due to the nature of the courses and how resource intensive they are, only small numbers usually benefit

from the programmes therefore these programmes will have a limited impact on obesity at a population level.

5.0 CONCLUSION

5.1 Obesity is a key public health issue that has a huge impact on mortality and morbidity both locally and nationally. Obesity disproportionately affects some groups more than others, and for those groups they are much likely to have obesity related ill health. With the recent significant rises in childhood obesity, it is essential we focus on supporting children, young people and their families to achieve healthy weights. To effectively address obesity locally and reduce inequalities we need to continue to take a system wide approach which creates local environments which make it easier for people to eat healthily and be more physically active. In addition, we need to target our resources proportionately to ensure those groups most at risk of obesity and obesity related illness are supported most. By working towards our local food and physical activity strategy we are moving in the right direction to both prevent and address obesity.

List of Background Papers:-

Bury Food Strategy

Bury Moving Strategy

Foresight Report (2007)

Kings Fund Report (2021)

National Child Measurement Programme paper (2021)

Contact Details:-

Jon Hobday – j.hobday@bury.gov.uk

Equality Impact and considerations:

Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;*
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;*
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.*

The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.

Equality Analysis	<i>Please provide a written explanation of the outcome(s) of either conducting an initial or full EA.</i>

**Please note: Approval of a cabinet report is paused when the 'Equality/Diversity implications' section is left blank and approval will only be considered when this section is completed.*

Legal Implications:

To be completed by the Council's Monitoring Officer

Financial Implications:

To be completed by the Council's Section 151 Officer

Report Author and Contact Details:

- Jon Hobday (Consultant in Public Health): j.hobday@bury.gov.uk
