

# Tackling Obesity in Bury – A Whole System Approach

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# Context

## **Obesity as Public Health Challenge**

Obesity affects all ages and socioeconomic groups, impacting physical and mental health in Bury.

## **Multifaceted Causes**

Obesity is driven by behavioral, environmental, and genetic factors, requiring a broad approach.

## **Coordinated Prevention Strategies**

Bury's strategies focus on prevention, early intervention, and specialized services to reduce obesity.

## **Whole System Approach**

Integrating policies into planning supports healthy lifestyles and improved health outcomes in Bury.

# Local Picture

- Reception prevalence of Overweight (including obesity):
  - **2024-2025 Bury = 22.6% compared to 2023-2024 (21.1%)**
- Year 6 prevalence of Overweight (including obesity):
  - **2024 – 20225 Bury = 38.8% compared to 2023 -2024 (35.5%)**
- Overweight (including obesity) prevalence in Adults = **64.5%**
  - **Bury = 65.3%**
- Percentage of adults eating 5 fruit and vegetables day = **31.3%**
  - **Bury = 27.8%**
- Fast Food outlets per 100,000 population = **115.9**
  - **Bury = 165.7**

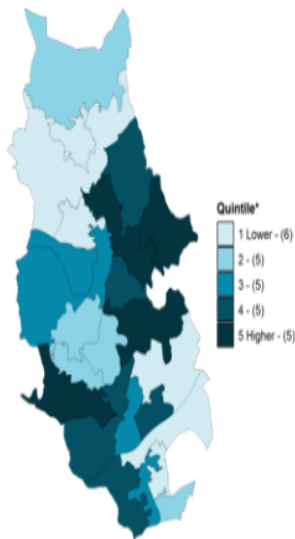
*(Obesity, physical activity and nutrition | Fingertips | Department of Health and Social Care)*

# 2024-2025 NCMP Data Sets

## Prevalence of obesity in Bury MSOAs

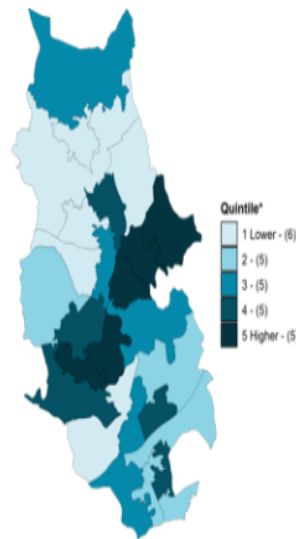
National Child Measurement Programme

Children in reception (aged 4 to 5 years)



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Children in year 6 (aged 10 to 11 years)



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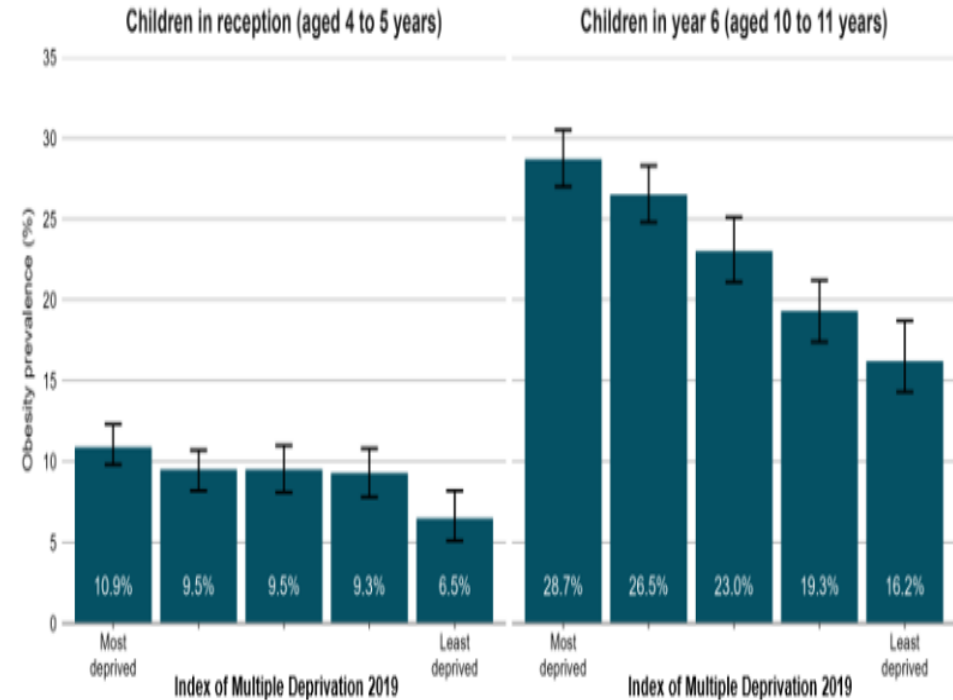
\* Number of MSOAs in each quintile is shown in brackets in the map legends

Data combined 3-years, (2022 to 2023, 2023 to 2024, and 2024 to 2025), see note on slide 16  
Middle Layer Super Output Area (MSOA) boundaries 2021

Source: NCMP, Fingertips, 2024-2025

## Obesity prevalence by deprivation and age in Bury

National Child Measurement Programme



Data combined 5-years, (2019 to 2020, 2021 to 2022, 2022 to 2023, 2023 to 2024, and 2024 to 2025), see note on slide 16  
95% confidence intervals are displayed on the chart

## Year 6 (Overweight and Obesity) breakdown via area



Source: NCMP, Fingertips, 2023-2024

# Childhood Obesity



## Rising Childhood Obesity Rates

Overweight and Obese levels **have increased** in both reception and year 6

***2nd compared with statistical neighbours in year 6***

*Higher levels in those area's defined as most the most deprived and **Higher in Asian, Black and mixed ethnic groups***



## Healthcare Service Gaps

Bury lacks Tier 3 weight management services for children, worsening access to necessary specialized care.



## Need for Comprehensive Interventions

Addressing childhood obesity requires community, school-based actions, and improved access to any \*specialised weight management care\*

# Adult Tiered Service Overview

## **Obesity Prevalence in Bury**

65.3% of adults in Bury are classified as obese

Obesity, physical activity and nutrition | Fingertips | Department of Health and Social Care

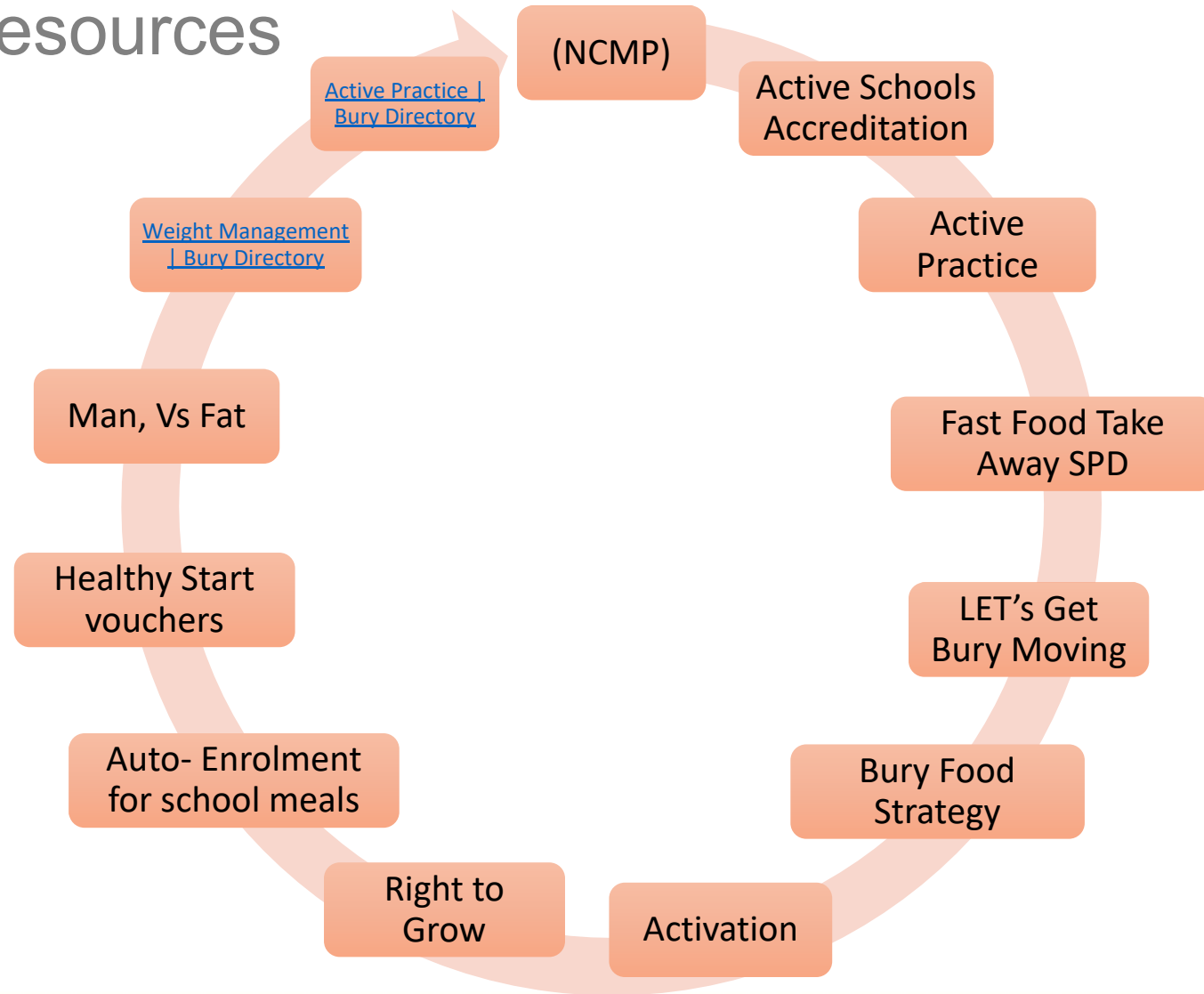
## **Weight Management Eligibility**

Over 228,000 adults in Greater Manchester qualify for advanced weight management services based on BMI criteria.

## **Need for Targeted Interventions**

Urgent interventions include multidisciplinary care and pharmacological treatments tailored to those with obesity.

# Universal Resources





# Specialist Weight Management & GLP-1's

- Specialised weight management provision is delegated to localities and varies across the 10 GM LAs. Three localities do not have provision. Demand far outstrips the commissioned capacity with significant waiting times.
- Specialist Weight Management Group within the ICB has been reviewing current provision and eligibility criteria - see below two published documents from the ICB. Tirzepatide can only be prescribed if individuals meet the strict eligibility criteria in cohort 1 this year.
  - [Tirzepatide-for-weight-management-in-adults-commissioning-statement-for-GM-V1.2-for-GMMM-G-website.pdf](#)
  - [Weight management in Greater Manchester | Greater Manchester Integrated Care Partnership](#)
- None eligible patients for SWMs or those on waiting lists currently can be signposted to NHS Digital WM or locality service offers currently.
- GM currently doesn't utilise all availability for the national digital weight management service- a scoping exercise is underway to understand barriers to referral and retention.
- Work continues with Health Innovation Manchester to 'Reimagine' Obesity and Weight management services with a view that GM will be putting in a submission for the [Obesity Pathway Innovation Programme : Strand 3](#).
- Ongoing work through Population Health/Public Health network to look at a city-region wide approach to food and healthy weight. Hopefully this will result in a preventative action framework which will halt/reduce the rise in obesity prevalence in GM.

# Engagement and Commitment

## **Multi-sector Stakeholder Engagement**

Bury's obesity landscape involves active participation from health, education, planning, and community sectors.

## **Prevention and Early Intervention**

Investing in prevention and early intervention reduces obesity's long-term impact and improves public health.

## **Collective Responsibility Call**

Encouraging collective responsibility and sustained commitment supports a whole system approach to obesity.

**Next Steps:** The creation of a local obesity working group.

Thank You & Any Questions

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