Obesity and Physical Activity

Obesity & Physical Activity

The prevalence of obesity in England is high at all ages; almost two-thirds of adults and one-third of children are either overweight or obese.

Overweight and obesity are major risk factors for disease and mortality including cardiovascular disease, cancer and disability during older age. It contributes to a decrease in life expectancy. Furthermore, obesity is associated with serious chronic conditions such as type 2 diabetes, hypertension, and hyperlipidaemia, which are major risk factors for cardiovascular disease (PHE 2017). Risk factors for some of these conditions start at a relatively low BMI, and this will cause future health service costs to rise significantly.

The rising trend in obesity is one of the biggest threats to the health of the population of Hartlepool. The trend of weight problems in children and young people is of particular concern because of evidence suggesting excess weight in childhood continues into adulthood (Whitaker et al 1997). In addition to the increased health risks in later life, children and young people face immediate health and psychological consequences of obesity including increased risks for elevated blood pressure and type 2 diabetes, low self-esteem, anxiety and depression.

The causes of obesity are complex and relate to a wide variety of societal and behavioural factors which cannot be tackled in isolation. Social determinants have an important impact on the likelihood of becoming obese and they need to be addressed. Deprivation, income and ethnicity all have a bearing on the likelihood of a person becoming overweight or obese. The National Child Measurement Programme (NCMP) has demonstrated that there are higher levels of excess weight among children in more deprived communities. We also know that more deprived areas have higher levels of fast food take-aways.

Changes to the food environment are important ways to reduce obesity. We currently live in an obesogenic environment which encourages unhealthy choices and facilitates unhealthy eating. Strategies and plans for modifying the environment will impact on excess weight. Increased levels of physical activity can assist in tackling many of the important health challenges faced by the UK. It can help in the prevention and treatment of a number of chronic conditions, including coronary heart

disease, stroke, type two diabetes, cancer, obesity, mental health problems and musculoskeletal conditions (Department of Health, 2011). Ensuring people reduce their sedentary behaviour and increase moderate to vigorous physical activity will help reduce risks to their health.

The inequalities, health risks and costs associated with obesity combine to make the prevention of obesity a major public health challenge.

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Excess weight in adults, that is those who are classified as overweight or obese, was at 71% in 2016/17. For every 10 adults in Hartlepool seven of them are overweight or obese. This is an increase on the 2015/16 level of 67.5%. Hartlepool's level of excess weight in adults in 2016/17 is the 2nd highest in the north east region, and the 4th highest amongst Hartlepool's statistical neighbours. Hartlepool's level of excess weight in adults is statistically similar to the north east average, despite its increase in the latest figures.

Excess weight in adults (aged 18+) 2016/17

Proportion - %

Area	Recent Trend	Count	Value		95% Lower Cl	95% Upper Cl
England	-	-	61.3		61.0	61.8
North East region	-	-	66.1	Н	64.9	67.2
South Tyneside	-	-	71.6	H	66.9	76.3
Hartlepool	-	-	71.0	 	66.0	75.9
Gateshead	-	-	69.1	 	64.7	73.5
Redcar and Cleveland	-	-	67.7	<u> </u>	62.7	72.7
Sunderland	-	-	67.7	H	64.3	71.0
County Durham	-	-	67.7	Н	64.5	70.8
Stockton-on-Tees	-	-	65.9	-	61.3	70.
Middlesbrough	-	-	65.4	H	60.5	70.2
Darlington	-	-	65.0		59.9	70.0
Northumberland	-	-	63.8	H	59.9	67.6
North Tyneside	-	-	62.2	H	57.3	67.1
Newcastle upon Tyne	-	-	61.9	H	59.6	64.2

Source: Public Health England (based on Active Lives survey, Sport England)

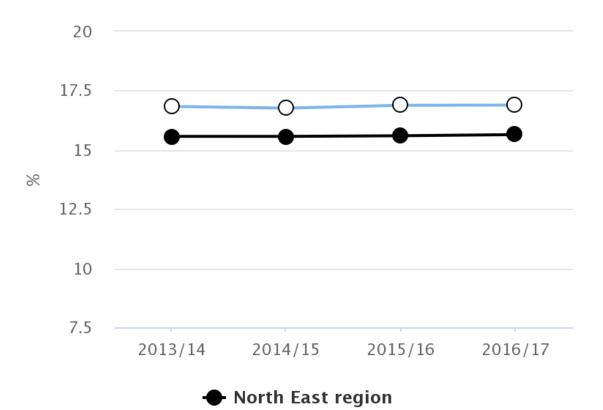
Area	Recent Trend	Neighbour Rank	Count	Value		95% Lower Cl	95% Upper Cl
England	-	-	-	61.3		61.0	61.5
North East Lincolnshire	-	4	-	72.5	 	67.9	77.2
South Tyneside	-	2	-	71.6	H	66.9	76.3
St. Helens	-	15	-	71.3	 	66.7	75.9
Hartlepool	-	-	-	71.0	H-	66.0	75.9
Kingston upon Hull	-	12	-	70.0	H	65.7	74.3
Gateshead	-	6	-	69.1	-	64.7	73.5
Redcar and Cleveland	-	1	-	67.7	 	62.7	72.7
Sunderland	-	5	-	67.7	H	64.3	71.0
Walsall	-	14	-	66.8	H	63.3	70.4
Stoke-on-Trent	-	7	-	66.0	H	62.5	69.3
Stockton-on-Tees	-	9	-	65.9	H	61.3	70.5
Wolverhampton	-	11	-	65.8	H	62.4	69.2
Middlesbrough	-	3	-	65.4	H	60.5	70.2
Blackpool	-	10	-	63.5	H	58.2	68.7
North Tyneside	-	8	-	62.2	H	57.3	67.1
Halton	-	13	-	61.1	-	56.0	66.2

Source: Public Health England (based on Active Lives survey, Sport England)

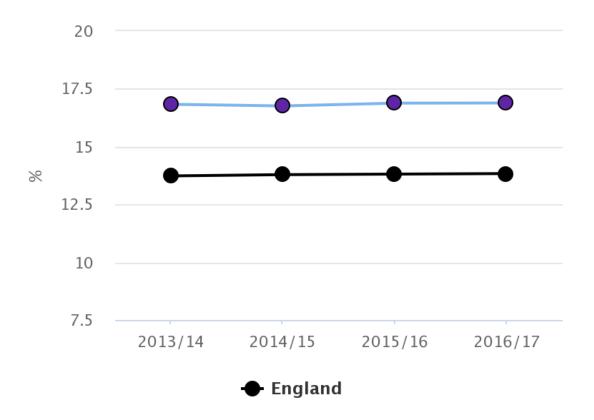
Compared with the England average Hartlepool is statistically worse, with a gap of nearly 10% to the England level of 61.3%. England's level of excess weight has remained stable at 61.3% for the last 2 reporting periods, whilst Hartlepool's has increased from 67.5% to 71.0%.

Obesity and excess weight can be a factor in hypertension, or high blood pressure as it is otherwise known, and here Hartlepool has been consistently higher than the England rate for four years. Hartlepool's level and England's level have both remained relatively stable across the four year reporting period, with both increasing by just 0.1%, however Hartlepool remains 3% above the England level with 16.9% hypertension prevalence, compared to 13.8% for England. Throughout this period the north east average has remained at 15.6%, with Hartlepool slightly higher, tough statistically similar to this level of prevalence.

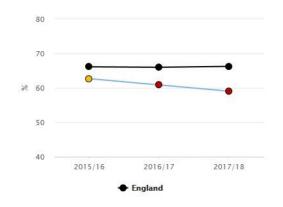
Hypertension: QOF prevalence (all ages) - Hartlepool



Hypertension: QOF prevalence (all ages) - Hartlepool



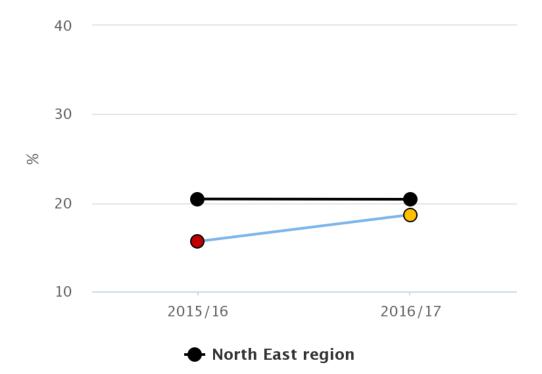
Physical activity is a proven way to reduce both hypertension and excess weight. Hartlepool's level of physical activity amongst its adult population has declined for the last two yaers. Hartlepool's rate of 59.1% is significantly below bth the England and north east regional averages. Hartlepool's 2017/18 rate is the 17th lowest in England and the 2nd lowest in the north east.



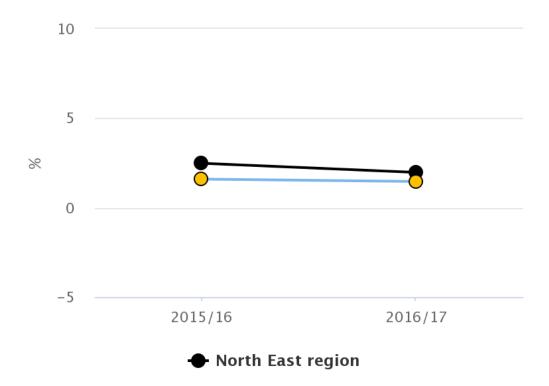
Period	Hartlepool					North East	England
		Count	Value	Lower CI	Upper CI	region	England
2015/16	0	0.00	62.7%	58.3%	66.9%	64.0%	66.1%
2016/17	•	323	60.9%	56.4%	65.2%	64.0%	66.0%
2017/18	•	144	59.1%	54.5%	63.4%	62.7%	66.3%

However, those walking for travel at least three days a week has increased in the latest data release, and is now at a similar level to England, and those cycling for travel at least three days a week has maintained a level similar to England.

Percentage of adults walking for travel at least three days per week - Hartlepool

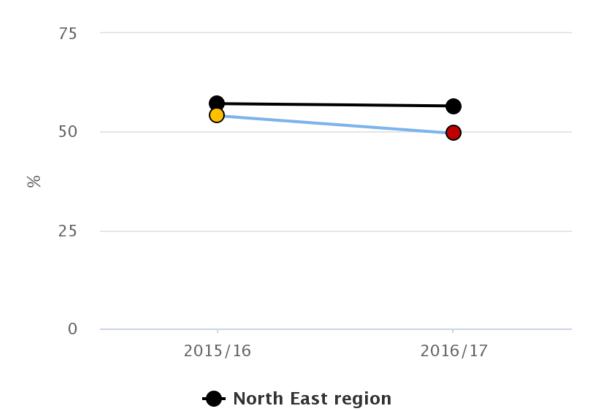


Percentage of adults cycling for travel at least three days per week - Hartlepool

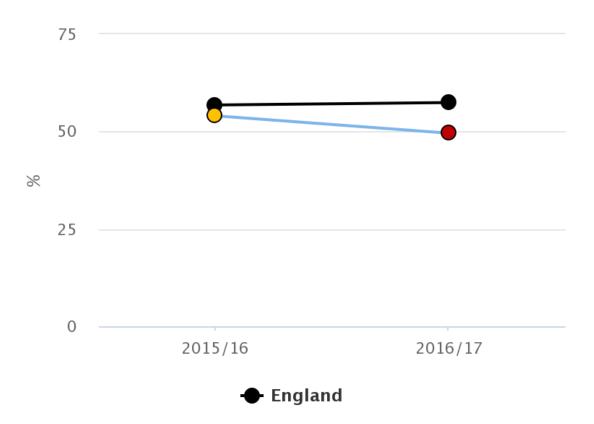


The proportion of Hartlepool adults eating their recommended 5 portions of fruit or vegetables a day has reduced in the latest data release and is now statistically worse than both the England and north east regional averages. Hartlepool's level dropped from 54.0% in 2015/16 to 49.6% in 2016/17. At the same time the north east average fell by 0.6% from 57.1% to 56.5%, and the England average rose by 0.6% from 56.8% to 57.4%. This moved Hartlepool away from the position of statistical similarity it held in 2015/16 to a position of statistical inferiority.

2.11i - Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults) - Hartlepool

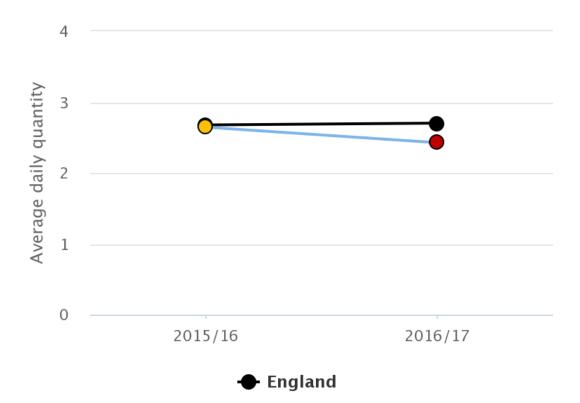


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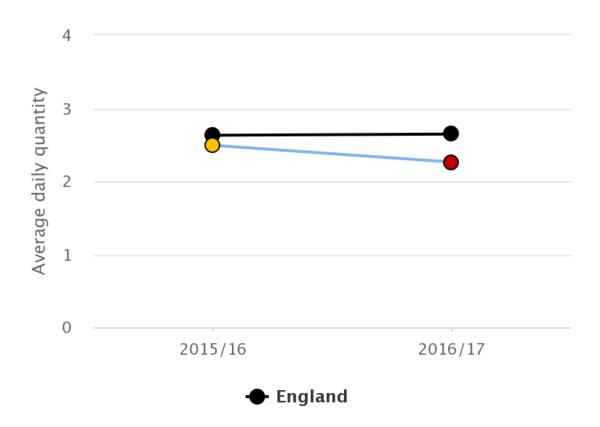


The average number of portions of fruit eaten daily by adults in Hartlepool has fallen from 2.49 to 2.26 in 2016/17, and the average number of portions of vegetables has fallen from 2.64 to 2.43 in the same period. Both of these have moved from a position of statistical similarity with the England and north east averages, to being statistically worse than the England and north east averages.

2.11iii - Average number of portions of vegetables consumed daily (adults) - Hartlepool



2.11ii - Average number of portions of fruit consumed daily (adults) - Hartlepool



Childhood Obesity

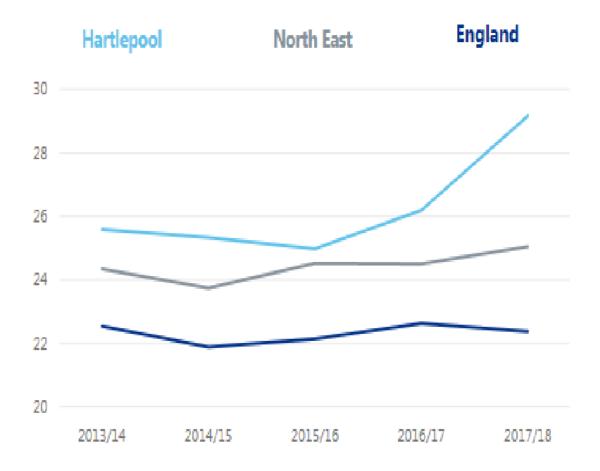
The National Child Measurement Programme (NCMP) looks to measure the BMI levels for children in Reception, aged 4-5, and Y6, aged 10-11, in order to assess the levels of obesity within those populations. These BMI scores are grouped into six categories: underweight, healthy weight, overweight, obese, excess weight (overweight and obese categories combined) and severely obese.

When this is applied across England the prevalence of excess weight in reception is roughly one in five and at year six is roughly one in three. When this is applied to Hartlepool the prevalence of excess weight in Reception increases to roughly one in four, with the prevalence in year six remaining at one in three.

The latest nationally released NCMP figures show Hartlepool's excess weight prevalence at reception in 2017/18 was 29.2%, which is an eleven year high both in

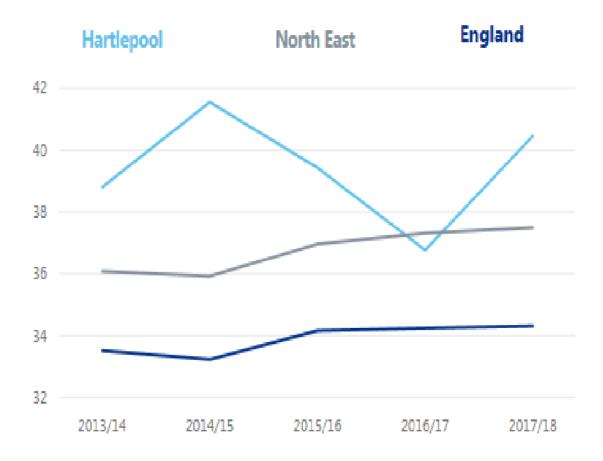
terms of proportion of the Hartlepool population and the gap between Hartlepool's prevalence and the England average. The gap between Hartlepool and England now sits at 6.8%, which compares with a gap of 3.6% in 2016/17 and a gap of 1% in 2011/12. Regionally Hartlepool has the highest prevalence of excess weight at reception, and is above the north east regional average of 25.0%. The gap between Hartlepool and the north east region is 4.2%, which is an eleven year high.

Reception: Prevalence of overweight (including obese) - Hartlepool



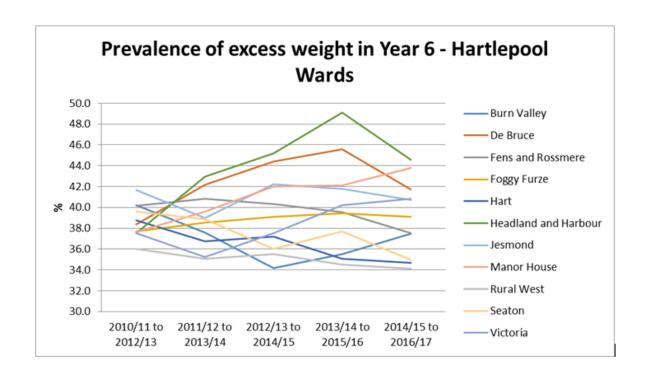
When prevalence of excess weight at year 6 is examined a similar picture for Hartlepool emerges. For Year 6 Hartlepool's prevalence in 2017/18 is 40.5%, which had preceded by two years of reduction. Hartlepool's rate is back up to a level not seen since 2014/15. The gap between Hartlepool and the north east region 3%, and the gap between Hartlepool and the England average is 6.2%, these are both a 3 year high, and follow from 2016/17 where the gaps were at their smallest in the reporting period. Hartlepool has the 2nd highest rate in the north east.

Year 6: Prevalence of overweight (including obese) - Hartlepool



If we start to examine the differences within Hartlepool, we can see that, at ward level for year six excess weight the difference between the best performing wards and the worst performing wards has increased.

In 10/11 to 12/13 the range of prevalence between wards was 5.7%, by 14/15 to 16/17 this has increased to 10.5%. In four years the difference between the highest prevalence ward and the lowest prevalence ward has nearly doubled. This shows that where they live affects a child's chances of excess weight in year 6 more now than four years ago.



At reception age this geographical factor is of less importance, as the difference between the highest and lowest prevalence wards has actually decreased by 0.7%.

Current Services

Having a healthy weight has been prioritised by the Health and Wellbeing board and in 2015, a Healthy Weight Strategy was approved. This has a 10 year action plan focusing on:

Strategic Theme 1: Universal – To transform the environment so that it supports healthy lifestyles (Primary Prevention)

- a. Planning and retail: Work with partners to improve access to healthy food options and remove barriers to adopting a healthy diet.
- b. Physical activity: improve access to green spaces for health and exercise reasons
- c. Travel and infrastructure: create a more supportive environment for cycling and walking to improve rates of active travel in schools, workplaces and communities

Strategic Theme 2: Preventative – Making Healthier Choices Easier by providing information and practical support (Secondary Prevention)

- a. Develop a social marketing and communications plan for Hartlepool to promote and facilitate a healthy weight and lifestyle
- b. Ensure obesity is tackled by early intervention through improved training and awareness for front line staff and in communities
- c. Ensure that tackling obesity is a key priority as part of the planning and implementation process for the Hartlepool Vision

Strategic Theme 3: Services – To secure the services needed to tackle excess weight (Tertiary Prevention)

- a. Create an integrated pathway of support to improve accessibility into healthy weight services (driven by GPs and Primary Care)
- b. Support schools and children's centres to develop a 'Curriculum for Life' which promotes a healthy weight and lifestyle from an early age
- c. Ensure healthy weight services are part of the vision for the provision of a Hartlepool 'Health and Social Care Plan'

Activities to support this have included:

- Hartlepool Borough Council have established a Policy as part of the local plan which
 imposes restrictions on planning applications for Hot Food Takeaways specifically in
 areas of high concentration and close to schools.
- Hartlepool Borough Council have achieved Maintaining Excellence status as part of
 the Better Health at Work Awards and also support other local businesses to fulfil
 assessment criteria to achieve Better Health at Work status. This includes advice
 and support around lifestyle programmes and increasing opportunities for an active
 and healthy environment.
- Sustainable transport campaigns and programmes are available and actively
 promoted across the Borough. Go Tees Valley has been established as the
 overarching brand for this work and supports individuals to integrate more active
 travel into their day.

- Poolie Bike Scheme has been established to provide bike hire opportunities to individuals and improved secure areas have been established for bike storage.
- Hartlepool Borough Councils Playing Pitch Strategy has been revised and will support management and retention of recreational areas of Hartlepool.
- Delivery of FiiT Hart (Families in it Together Hartlepool) family weight management initiative to support families through lifestyle changes and encouraging whole family change for the benefit of improved health and wellbeing.
- Secured £280,000 from Sport England to be one of 22 projects nationally to work
 with families and use physical activity and sport as a vehicle to improved outcomes
 for mental, physical and social health and wellbeing.
- Delivery of EDAN (Escape Diabetes Act Now) programme to support individuals at risk of Type 2 Diabetes to make positive lifestyle changes. 100% of those who have participated in the programme have reduced or removed the risk factors therefore preventing or reducing the risk of becoming Diabetic.
- New weaning programme has been established and obesity training has been provided to a broad range of staff.
- Breastfeeding workshops have been delivered to improve breastfeeding rates and events such as 'The Big Latch' on have brought together mum's and babies to showcase the positives about Breastfeeding.
- Filling the Gap Holiday programmes have been delivered and continue to be available to support those most in need to access food, advice, guidance and incentives preventing malnutrition or poor nutrition of children during holiday periods.
- Hartlepool Community Hubs continue to provide a comprehensive wellbeing offer supporting people to access advice, services, programmes and events. Community Hub South have recently launched a Community Kitchen providing local people with a hot meal once a week. Community Connectors are supporting groups and individuals to address specific issues including weight management, long term limiting conditions, reducing social isolation and signposting to other services as needed.
- Hartlepool Cycle Hub at Summerhill provide a cycle maintenance and repair service and also empower individuals to take part in cycle maintenance workshops to empower them to maintain their own bike which helps to sustain their participation in cycling whether it is for travel, leisure or sport.
- Delivered Hartlepool Free Swims programme to children and Young People and engaging them in positive activity during summer holidays.

Future intentions

It is recognised that if we focus on individual behaviour change without looking at the wider environmental causes of obesity, we will not be able to reduce the increase in excess weight in the population. As a result, the council is working with partners to develop a new way of working. This new way of working utilises a Whole Systems approach to develop integrated ways of working which will address the wider determinants of obesity. We are bringing together a wide range of partners to work together to ensure that these determinants are addressed. We will do this through establishing a new network to develop interventions and new ways of working to ensure we remove the obesogenic influences in the environment whilst ensuring services provide appropriate support to people.

Refs

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PHE (2017) Health matters: obesity and the food environment [online] *PHE* [Accessed 09/07/19] Available from https://www.gov.uk/government/publications/health-matters-obesity-and-the-food-environment/health-matters-obesity-and-the-food-environment--2

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