Over recent years the Department of Health in the West Midlands (DHWM) has led a significant programme of work, in conjunction with national DH nationally and local areas, in support of promoting healthy weight and halting the rise in obesity. Central to our approach has been partnership working at local, sub national and national levels. Collaboration with a range of organisations, individuals and other government departments has supported and enhanced local delivery and encouraged innovative approaches to reducing obesity levels and improving health outcomes. A detailed legacy document has been produced as a comprehensive account of achievements, and as a record of, and reflection on, the work delivered over recent years. This briefing summarises the main points covered in the legacy document with the aim of this learning helping to guide, shape and inform future local Public Health priorities on obesity prevention. Separate briefings are planned for the National Child Measurement Programme; Breastfeeding; Healthy Start and Workplace Health and these will be vailable on the Learning for Public Health website.

Tackling obesity remains a Government priority as “Healthy Lives Healthy People: Update and way forward” has identified that local authorities will deliver the National Child Measurement Programme (NCMP), together with responsibilities for obesity and community nutrition initiatives and increasing levels of physical activity in the local population.

The Scale of the Issue

The percentage of children who are obese in the West Midlands is higher than the national average which suggests that a high proportion of the next generation of adults will also have an obesity problem.

Based on data published by the National Obesity Observatory in September 2011, from the NCMP in the academic years 2007/08 to 2009/10 and at the level of PCT clusters in the region, 10.9% of reception year children in the Black Country cluster are obese (compared to 9.7% England prevalence) and 22.5% of Year 6 children in the same cluster are also obese (18.5% England prevalence).

For adults over 16, the information from the Health Survey for England 2009 shows that an estimated 26.4% are obese compared to an England average of 24.2%.

“Healthy Lives, Healthy People: a call to action on obesity in England”

Published in October 2011, the “Call to Action” announced the Government’s new national ambitions for a downward trend in excess weight in both children and adults by 2020. In order to achieve these ambitions, the “Call to Action” issues a new ‘calorie reduction’ challenge to reduce the population’s calorie intake by 5 billion calories a day.
The document sets out:

• That a wide range of partners working together will be crucial to successfully achieving the ambitions;

• How under the new public health system local authorities will have an enhanced role, supported by a ring-fenced budget, and will bring together local partners, including the NHS, to provide effective interventions;

• To provide and support local areas with the best possible data and evidence;

• A continuing key role for Government to complement this work by leading the Public Health Responsibility Deal and national campaigns such as Change4Life.

The Approach Taken in the West Midlands

The causes of obesity are complex and multifaceted and require a range of different solutions. It is too simple to say that obesity is caused by energy intake exceeding expenditure. A range of factors cause obesity including: metabolic and genetic factors; food intake and activity behaviours; habits, beliefs; the living environment; technology; and opportunities for physical activity. The West Midlands has responded to these many challenges by developing a partnership driven programme of work around healthy weight and obesity across the life course.

The regional work programme acknowledged that it is essential for local authorities, the health sector, the voluntary sector and private sector to work in partnership to tackle obesity on priorities around promoting physical activity and healthy eating. This approach was based on the premise that the prevention and management of obesity is a priority for all, because of the many health benefits of maintaining a healthy weight and the health risks associated with overweight and obesity.

We also know that a number of other areas have a direct and indirect impact on the prevention of obesity including transport and planning, environmental services and food production. Links have been developed with these priority areas and the future Public Health system, led by Local Authorities, provides tremendous scope to continue to expand and influence these areas of work in localities.

Improving Local Delivery: Effectiveness, Evaluation, Audit and Research

A commitment to evidence-based interventions has been central to the West Midlands approach. This included undertaking research to further develop local understanding and ongoing evaluation and audit of our work to improve our effectiveness, efficiency and to enable improvements in delivery in the future. The programme incorporates recommendations from relevant National Institute of Clinical Excellence (NICE) guidance which set quality standards to improve people’s health and prevent and treat ill health. A “Quality, Innovation, Productivity and Prevention” (QIPP) analysis was also undertaken for food, nutrition, breastfeeding and physical activity and reviewed the latest evidence and cost effectiveness evidence available. The Standard Evaluation Framework (SEF) from the National Obesity Observatory (NOO) has been used to structure the evaluation of weight management programmes. A West Midlands wide evaluation of the main family based weight management programmes operating across the West Midlands was also undertaken using the SEF. This evaluation represented the first application of the SEF at a regional level and a number of recommendations for local areas were made including the need to enhance data collection and local evaluation.
Life course Approach:
As well as the focus on children we have worked on:

Maternal and Early Years

A Maternal and Early Years Healthy Weight Service was developed based around the Health Trainer model which provides one-to-one support for clients to change their behaviours through goal setting support in the home environment using practical interventions such as access to activity and cooking classes and ongoing key worker support. The service complemented universal services (clinical services from midwifery and health visiting services and linked with Children’s Centres) and was targeted at women with a pre-pregnancy BMI over 30 who are eligible for Healthy Start, i.e. low income, on benefits, under 18 years. The care pathway included a focus on weight gain during pregnancy; uptake of breastfeeding; take up of Healthy Start vouchers and vitamins; analysis of weight loss in post pregnancy phase and analysis of date of weaning. The care pathway is in line with NICE guidelines. Results were encouraging including: limiting the amount of weight gain during pregnancy; delayed weaning; gestational weight gain in the healthy range; post natal weight loss or maintenance; increased physical activity and an increased knowledge of healthy eating.


Adult Weight Management

Local areas have shared effective practice around commissioning for adult weight management interventions. Public health practitioners and commissioners shared a range of different approaches and took information away to draw on to inform the content of their local business cases for investing in the adult obesity agenda and to inform commissioning intentions.
The Priorities

The Focus on Physical Activity

The aim was to achieve joined up approaches to decreasing sedentary behaviour and increasing participation in physical activity to enable the reduction of health inequalities and increasing community participation. The programme supported the delivery of a number of national, regional and local priorities and policies including supporting work for 2012. The programme worked with the NHS Health Checks programme and “Let’s Get Moving”, which is an evidence-based behaviour charter model to encourage local commissioning of physical activity interventions into primary care. A key partner was the County Sports and Physical Activity Partnerships (CSPAPs) who support delivery and increased investment in physical activity in localities. The first UK-wide physical activity guidelines ‘Start active, stay active’ were published in 2011. These guidelines have been produced in the UK for early years (under fives) as well as sedentary behaviour, for which there is now evidence that this is an independent risk factor for ill health.

The Focus on Food

The Food and Health Programme in the West Midlands was commended by the School Food Trust as an excellent example of strategic leadership and networking opportunities. The programme supported increasing the take up of school lunches work with the Central England Trading Standards Authority (CEnTSA) in developing a School Food Audits and Inspections Toolkit; Healthy Schools; Children’s Centres and targeted work on “Eating Well for Looked After Children” and food in Special Schools. Training packages for school governors on school food, nutrition and health, were developed and Breakfast Club training was delivered across the West Midlands for primary and secondary schools.

Change 4 Life

Change 4 Life is a national campaign providing information and resources to support a healthier lifestyle. The West Midlands regional DH team provided leadership and support to localities across an extensive portfolio of high profile activity; media coverage; events and campaigns in support of Change4Life and associated sub-brands. This work was supported by a range of partners. Campaigns included “Walk to School Week” in collaboration with transport colleagues; work with Radio WM on getting fitter and adopting healthier lifestyles, including choosing healthier food options, improving cooking skills and looking at different types of diet; “Play4Life” a celebration of children’s right to and the importance of play and being physically active in helping to promote healthier, happier lifestyles and tackling childhood obesity. Work with the private sector has included working with convenience stores to help them work with the local NHS to promote healthier eating in their communities and help them sell more fruit and vegetables. Each store had a fruit and vegetable makeover, enabling them to stock a wide range of fruit and vegetables, display Change4Life posters and appointing a member of staff to champion fresh fruit and vegetables in store.

Details of the three year marketing strategy (2011-14) for the Change4Life programme were published in October 2011, describing how the programme will support the achievement of the “Call to Action”, as well as promoting other, broader, lifestyle changes.
Conclusions and Recommendations

Regionally led work undertaken in recent years has supported a range of partner organisations and local areas in tackling healthy weight priorities and obesity challenges. Local areas have worked jointly with DH to drive up performance and meet the requirements of national policy. The results of these joint efforts are evidenced in this briefing and the comprehensive legacy report (available at WMPHO ) which highlights numerous examples of the benefits of this joint working. We have measurable evidence of significant progress made and a good understanding of what we can build on in the future. There is a solid foundation for future local work.

Based on our past experience we encourage local areas to adopt the following recommendations. Where possible these are cross referenced both to the Government’s “Call to Action” and ‘Healthy Lives, Healthy People: update and way forward’:

• Manage the NCMP (“Call to Action” sections 5.4 – 5.7/’Way Forward’ section 2.20);
• Further enhance local partnership working to tackle obesity and take a strategic, multi faceted approach (“Call to Action” Chapters 4 and 5/’Way Forward’ Annex A – proposed commissioning responsibilities for public health);
• Continue to tackle healthy weight and obesity across the life course using approaches and learning in this report for pre conception; early years; children; older children; adults and older adults (“Call to Action” sections 3.3 and 3.4/’Way Forward’ section A.10);
• Continue to see obesity as a health inequalities issue and to focus on specific groups and needs as identified at local level (“Call to Action” sections 1.6 to 1.8);
• Continue to use the existing and further build the evidence base and improve evaluation of weight management services and interventions using the SEF (“Call to Action” sections 5.16 to 5.20);
• Continue to work in key settings including Children’s Centres, schools and workplaces (“Call to Action” Chapter 6);
• Continue to work with industry and other partners to use Change4Life as an important tool to enable behaviour change and promote lifestyle improvements (“Call to Action” sections 6.37 to 6.43);
• Develop local mechanisms to continue to share effective work and learning through joint commissioning; clustering of activity; networking and joint CPD (“Call to Action” Chapter 4).

Websites: for Further Information

• West Midlands Obesity Website www.obesitywm.org.uk
• West Midlands Public Health Observatory www.wmpho.org.uk/
• Change4Life www.nhs.uk/change4life/Pages/change-for-life.aspx
• National Obesity Observatory www.noo.org.uk/
• Obesity Learning Centre www.obesitylearningcentre-nhf.org.uk/welcome/
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