

Working towards a healthy weight in County Durham



2018



Executive Summary

Obesity impacts upon people's lives, it effects our physical and mental health, our quality of life and our risk of developing chronic diseases. Obesity levels are rising nationally and locally; without action, the health of individuals will continue to suffer, health inequalities will remain and economic and social costs will increase to unsustainable levels.

The Health and Social Care Act (2012) gave statutory duties for local authorities to take appropriate steps to improve population health. This included developing interventions focused on healthy weight.

Obesity is a strategic priority for County Durham Health and Wellbeing Board. The Healthy Weight Alliance is accountable to the County Durham Health and Wellbeing Board, and is County Durham's main partnership that is tackling the healthy weight agenda. Our long term vision is that in implementing and embedding this work we will *halt the rise in obesity in County Durham by 2022 and, by focussing resources upon addressing inequalities, see a sustained decline in obesity rates locally to below England national average by 2025.*

Durham County Council is one of four pilot local authorities in England to take part in a national programme, funded by Public Health England and delivered by Leeds Beckett University, to create a whole system approach to obesity. This programme focusses on working with the pilot Local Authorities to explore their experiences and, from these, create a 'route map' that is meaningful and feasible for other Local Authorities. In County Durham, work has identified a need for strategic actions that require multiple partners in order to encourage a system wide response. As a mechanism to progress this work, four strategic themes have been developed leading by example; give every child the best start in life; improving play and engaging the system.

As with teenage pregnancy, no single approach or focus, in isolation, will be effective in tackling obesity. If we are to achieve our long term vision to *halt the rise in obesity in County Durham by 2022 and, by focussing resources upon addressing inequalities, see a sustained decline in obesity rates locally to below England national average by 2025* our whole system ambitions require multi-agency drive and committment.

'Working towards a healthy weight in County Durham 2018 provides an update to and builds upon the 2015 annual Director of Public Health Report 'Obesity. An issue too big to ignore ... or too big to mention? In this report we:

- present an overview of work to address obesity nationally and locally by County Durham Healthy Weight Alliance at a system wide level since 2015
- outline the continuing challenges faced in relation to obesity in County Durham and identify whole systems ambitions.
- set out the national and local context and the evidence base underpinning the need for continued action to address obesity.
- identify key *long term goals* within the system where further and sustained engagement is essential and set out our *short and medium term* goals going forward.



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Foreword

Obesity continues to impact upon people's lives. Across generations it affects our physical and mental health, our quality of life and our risk of developing chronic diseases. Obesity levels are rising nationally and locally, without action, the health of individuals will continue to suffer, health inequalities associated with obesity will remain and the economic and social costs will increase to unsustainable levels. In 2015 the annual Director of Public Health Report – Obesity. An issue too big to ignore ... or too big to mention? set out the challenges faced in County Durham and approaches in place to address obesity. Working towards a healthy weight in County Durham 2018 is a follow up to the 2015 report. This report:

- presents an overview of work developed to address obesity at a national level and locally by County Durham Healthy Weight Alliance at a system wide level since 2015
- outlines the continuing challenges faced in relation to obesity in County Durham and identifies priority areas to focus upon going forward.
- sets out the current national and local context and the evidence base underpinning the need for continued action to address obesity.

<http://www.durham.gov.uk/media/13765/Reducing-Obesity-Director-of-Public-Health/pdf/ReducingObesityDirectorofPublicHealthAnnualReport.pdf>



Introduction

Obesity is not just a public health or health service challenge; it is underpinned by a large number of very different but often interlinked causes. No single measure is likely to be effective on its own in tackling obesity. Globally, the World Health Organisation have identified the need to halt the rise of obesity to match the global rates of 2010 by 2025. Nationally, the UK Government aims to significantly reduce the rate of childhood obesity in England within the ten years to 2025 and is committed to introducing a range of levers from 2018 including a soft drinks industry levy and reducing the sugar content in foods. To have a significant impact, a sustained collaborative approach is needed; everyone needs to get involved - doing nothing is not an option.

Locally the challenge is how we build on national guidance and best practice to bring about real change within our communities. The County Durham Health and Wellbeing Board Healthy Weight Framework 2014 – 2020 aims to develop and promote evidence based multiagency working and strengthen local capacity and capability to achieve a sustained upward trend in healthy weight for children, young people and for adults in County Durham by 2020.

The Healthy Weight Alliance is accountable to the County Durham Health and Wellbeing Board and is County Durham's main partnership that is tackling the healthy weight agenda and taking forward the objectives of the Healthy Weight Framework. Our work so far makes it clear that unhealthy weight impacts on every aspect of the work of the council and our stakeholders – on the environment, on local business, on how people use our public spaces, on individuals, their families and their communities. The overarching purpose of the Healthy Weight Alliance is to develop and improve strategic system wide partnerships that are committed to reducing the prevalence of obesity in County Durham.

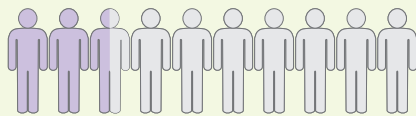
The National Institute for Health and Care Excellence [NICE] propose that obesity needs to be tackled as a whole system. In December 2015, The Healthy Weight Alliance submitted a bid to take part in a major national pilot, funded by Public Health England and delivered by Leeds Beckett University, which aims to create an improved, comprehensive approach to tackle obesity - a whole system approach. Durham County Council was successful in being selected as one of only four pilot local authorities in England. As well as underpinning ongoing work to address obesity within County Durham, the combined learning from this pilot programme will inform the development of a whole system approach toolkit to address obesity that will be available to support other local authorities across the UK.

Our long term vision is that in implementing and embedding this work we will halt the rise in obesity in County Durham by 2022 and, by focussing resources upon addressing inequalities, see a sustained decline in obesity rates locally to below England national average by 2025.

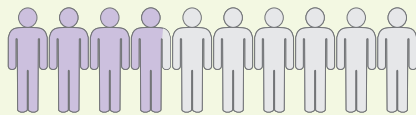
The current local context

England, along with the rest of the UK, has an unenviable position as a world leader in excess weight. Obesity levels are rising both nationally and locally. This will have profound long term consequences for the health and wellbeing of our communities in County Durham. The World Health Organisation regard childhood obesity to be one of the most serious global health challenges of the 21st century. Every year, as part of the National Child Measurement Programme (NCMP), schoolchildren in reception (4-5 years) and year 6 (10-11 years) are weighed and measured to inform the planning and delivery of local services for children. Each year around 11,000 County Durham children are included in the programme. Whilst in County Durham, rates of excess weight and obesity in children largely follow national trends, our starting point was higher and our rates remain significantly worse than those for England.

Figure 1: Excess weight in children, age 4-5 and 10-11, County Durham, 2016/17. Source: NHS Digital, NCMP.



24% 4-5 year olds in County Durham have excess weight (around 1,400 children or 46 classrooms across the county).



38% 10-11 year olds in County Durham have excess weight (around 2,000 children or 67 classrooms across the county).

Figure 2: Prevalence of excess weight and obesity in children aged 4-5 years and 10-11 years, County Durham and England, 2016/17.

	4-5 years				10-11 years			
	Number excess weight	% excess weight	Number obese	% obese	Number excess weight	% excess weight	Number obese	% obese
England		22.6%		9.6%		34.2%		20.0%
County Durham	1,381	24.1%	590	10.3%	2,024	37.7%	1,214	22.6%



Significantly worse than England



Not significantly different to England

Children aged 4-5

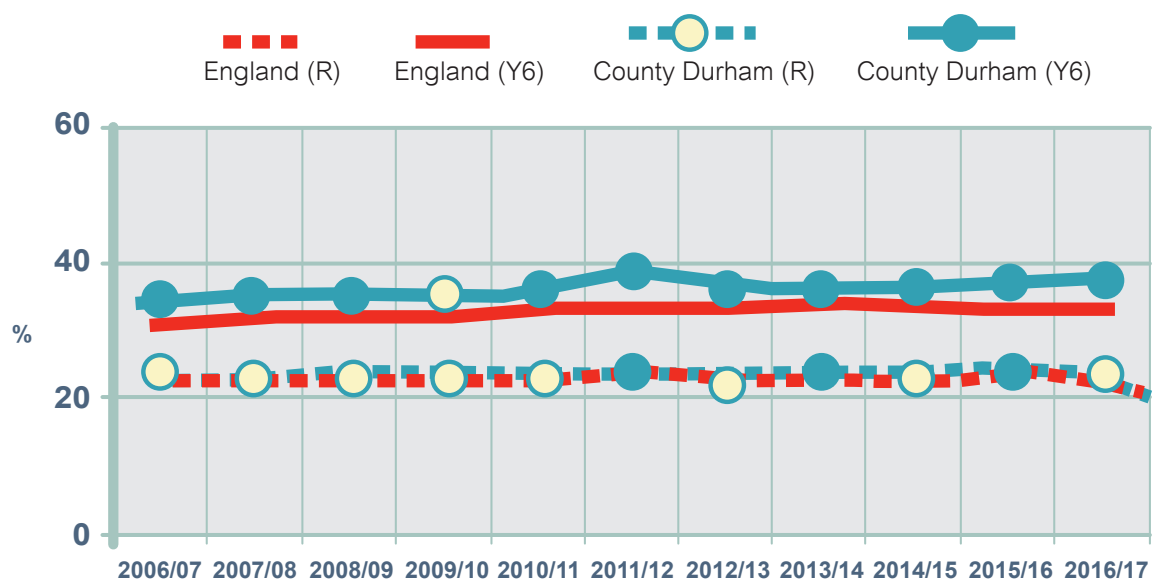
- Almost a quarter of children in County Durham aged 4-5 (24.1%) were measured as having excess weight in 2016/17 (figure 1 and 2). That is almost 1,400 children or 46 classrooms. Over 10% were measured as obese. That is almost 600 children or 20 classrooms (figure 2).
- Excess weight in children of reception age in County Durham is statistically significantly higher than England (figure 2).
- There has been little change in excess weight for 4-5 year olds over time locally (0.8%) compared to a slight decline nationally (-1.2%) (figure 3).

Children aged 10-11

- Over a third of children in County Durham aged 10-11 (37.7%) were measured as having excess weight (figure 1 and 2). That is over 2,000 children or 67 classrooms. Over 22% were measured as obese (figure 2). That is over 1,200 children, or 40 classrooms.
- Excess weight in children aged 10-11 in County Durham is statistically significantly worse than the England (figure 2).
- There has been a gradual increase in excess weight over time in County Durham (8.0%) and England (9.3%) (figure 3).

Figure 3: Prevalence of excess weight in children at reception and year 6, County Durham and England, 2006-07 to 2016-17.

Source: NHS Digital, NCMP.



¹ Excess weight refers to a combined population above the healthy weight range – excess weight = overweight + obese

As we know, there are many factors that contribute towards overweight and obesity. Other key indicators highlight the challenge of preventing this issue within County Durham.

Figure 4: Selected indicators related to excess weight in children.

Source: Child Health Profiles, Fingertips, PHE.

		County Durham	North East	England
Low birth weight of term babies	2015	2.8	2.8	2.8
Breastfeeding initiation	2014/15	57.6	60.1	74.3
Breastfeeding prevalence 6/8 weeks	2015/16	28.1	31.4	43.2
Children in poverty (under 16s)	2014	23.9	24.9	20.1
Children with one or more decayed, missing or filled teeth	2014/15	35.1	28.0	24.8

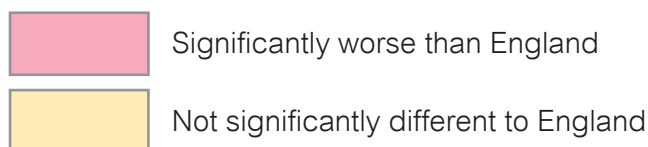
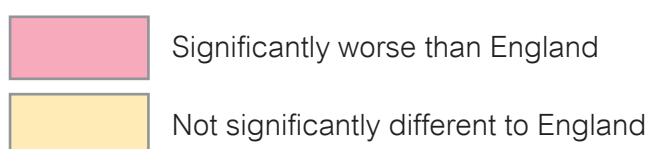


Figure 5: Selected indicators on self-reported health behaviours of 15 year olds.

Source: Health behaviours in young people – What About YOUth ? survey, Fingertips, PHE.

		County Durham	North East	England
% who eat 5 portions or more of fruit and veg per day	2014/15	44.7	46.8	52.4
% physically active for at least one hour per day seven days a week	2014/15	14.0	14.2	13.9
% with a mean daily sedentary time in the last week over 7 hours per day	2014/15	75.4	75.2	70.1
% who think they're the right size	2014/15	52.7	51.9	52.4
% reporting low life satisfaction	2014/15	13.0	13.1	13.7



To complement to the national survey data presented above, figures 6 and 7 below present local data gathered from the County Durham Student Voice Survey for Primary and Secondary Schools (2017)

Figure 6: Selected local data relevant to excess weight in primary school children (Years 5 and 6).

Source: Primary Student Voice Survey 2017.

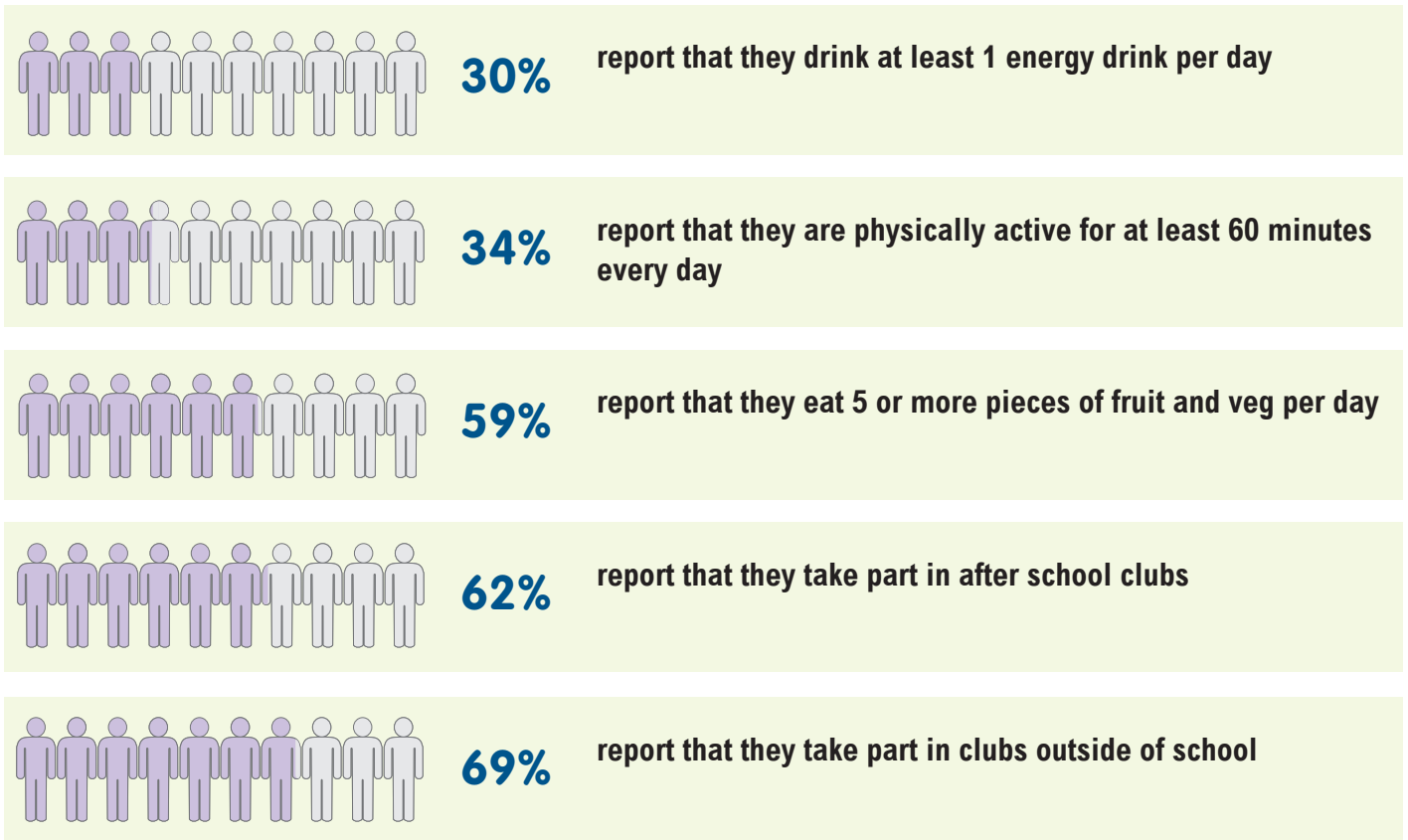
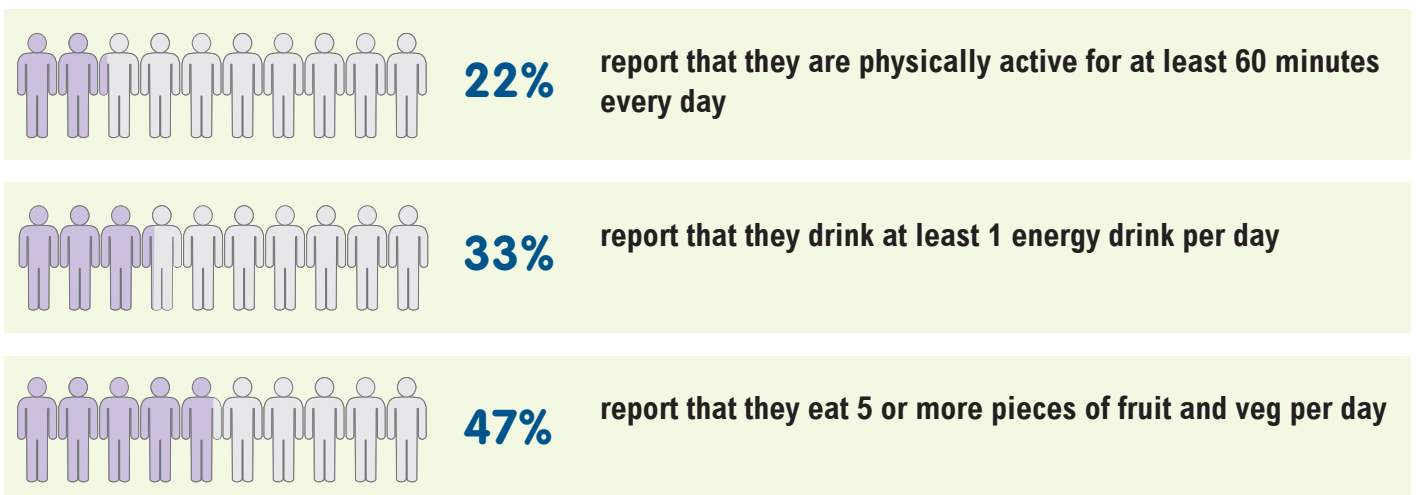


Figure 7: Selected local data relevant to excess weight in secondary school children (Year 7, 9, 11 and 13).

Source: Secondary Student Voice Survey 2017.



There is concern about the rise of childhood obesity and the implications of such obesity persisting into adulthood.

Childhood obesity plan

What is happening nationally to address obesity;

Obesity is a national challenge and, if we are to make a difference, one that requires action from all parts of society.

Nationally Government agencies are taking a variety of approaches to impact upon this agenda.

HM Government have set ambitious plans to significantly reduce England's rate of childhood obesity within the next ten years. This plan sets out clear goals that represent *'the start of a conversation, rather than the final word'*. These goals are:

- Introducing a soft drinks industry levy
- Taking out 20% of sugar in products
- Supporting innovation to help businesses to make their products healthier
- Developing a new framework by updating the nutrient profile model
- Making healthy options available in the public sector
- Continuing to provide support with the cost of healthy food for those who need it most
- Improving the co-ordination of quality sport and physical activity programmes for schools
- Creating a new healthy rating scheme for primary schools
- Making school food healthier
- Clearer food labelling
- Supporting early years settings
- Harnessing the best new technology
- Enabling health professionals to support families

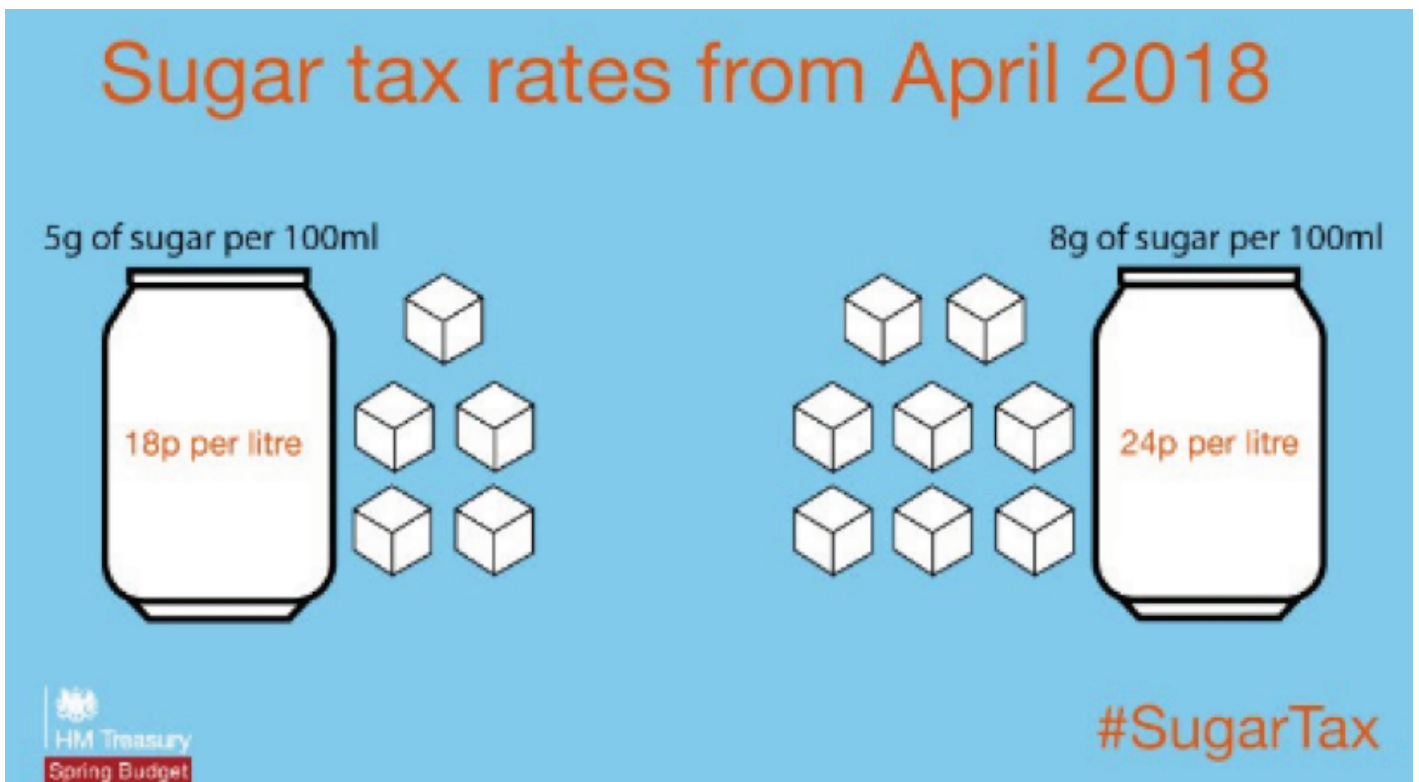
Sugar reduction and product reformulation

A key commitment in the childhood obesity plan was to launch a broad, structured sugar reduction programme to remove sugar from everyday products. All sectors of the food and drinks industry are challenged to reduce overall sugar across a range of products that contribute most to children's sugar intakes by at least 20% by 2020, including a 5% reduction in the first year of the programme. This can be achieved through reducing sugar levels in products, reducing portion size, or shifting purchasing towards lower sugar alternatives.

Nationally sugar intakes of all population groups are above the recommend levels, contributing between 12 to 15% of energy. Consumption of sugar and sugar sweetened drinks is particularly high in school age children. Sugar consumption tends to be highest among the most disadvantaged who also experience a higher prevalence of tooth decay and obesity and its health consequences. A tax on sugary soft drinks will be introduced in 2018.

This levy is aimed at producers and importers of added-sugar soft drinks and is designed to encourage reformulation of overall product ranges by reducing added sugar content, helping customers choose low/no added-sugar products and by reducing portion size. Pure fruit juices will be exempt as they do not contain added sugar, as will drinks with a high milk content because of their calcium content.

Sugar tax rates from April 2018



The Department of Education is expected to receive an extra £1bn from the sugar tax. In England, the revenue from the levy will be invested in programmes to reduce obesity and encourage physical activity and balanced diets for school age children. This includes doubling the Primary PE and Sport Premium and putting a further £10 million a year into school healthy breakfast clubs to give more children a healthier start to their day.

The British Social Attitudes Survey indicates that people do not seem to object to collective action designed to reduce obesity, especially if that action is seemingly targeted at food manufacturers, they being perceived to have a responsibility to try to reduce obesity. Actions designed to reduce the promotion of sugary drinks and to make them more expensive seem to be particularly popular.

Although the focus of product reformulation is on foods consumed by children, the reality is that families eat the same foods. There are nine initial categories that will be targeted to reduce sugar levels and

improve the health quality of products. Data from the National Diet and Nutrition Survey show that the foods that contribute most sugar to children's intakes are: breakfast cereals, yoghurts, biscuits, cakes, confectionery morning goods (e.g. pastries), puddings, ice cream and sweet spreads.

Healthier 'out of home' catering offers

Children and families need to be supported to make healthier choices and it is everyone's responsibility to ensure that the healthy choice is the easy choice. The challenge therefore is to fundamentally change the food environment in which children and their families become overweight and obese.



Nationally it is hoped that local councils take action, and build on what they are already doing, to encourage independent food businesses to implement simple changes that will make it easier for children and families to choose healthy food.

The Government has produced minimum mandatory catering standards for central government departments and their agencies which are also recommended for use in local authorities. The Government Buying Standards for Food and Catering Services can be used as a starting point to assess the availability, procurement, price and prominence of healthier ingredients, food products and catering practices.

By gradually making the following simple changes, local authorities can help businesses help their customers make healthier choices



Reduce portion size



Reduce fats & frying practices



Reduce salt



Reduce sugar



Increase the content of fruit, vegetables and fibre



Promote healthier options



Procuring healthier ingredients and food products from suppliers



Provide calorie information

Food business and catering services are encouraged to make healthy, ethical and informed decisions about the type of products they are using, for example buying vegetables that have not already been cooked in salt and ensuring the origin of meat and fish are from sustainable sources where possible. They are also encouraged to comply with the Government Buying Standards for Food.

Marketing

The Committee for Advertising Practice announced new rules banning the advertising of high fat, salt or sugar food and drink to children up to age 16, (raised from age 12), across all non-broadcast media including online and social media. The aim is to impact upon children's food and drink choices, preference and parents purchases. Locally organisations can follow this example and strongly consider where they promote poor quality food, especially across the public sector.

The NHS in England

From this year, there is a ban on the sale of certain products in hospitals and an added fee on all drinks with added sugar e.g. fruit juice, sweetened milk-based drinks and sweetened coffees. Monies obtained from this will fund health and wellbeing programmes and Trusts patient charities. Pilot studies have proved very effective.

What is happening in County Durham to address obesity:

Work with Leeds Beckett University, since 2015, has identified a need for strategic actions that require multiple partners in order to encourage a system wide response. As a mechanism to progress this work, strategic themes have been developed around:

- leading by example
- give every child the best start in life
- increasing play through the County Durham physical activity framework
- engaging the whole system

Sustainability and transformation partnerships

NHS England has asked NHS organisations to work together on improvement plans for their area, called Sustainability and Transformation Plans (STPs) to tackle three challenges:

1. Improving the health and wellbeing of the population,
2. Improving the quality of care that is provided,
3. Improving the efficiency of NHS services.

The following section of this report presents examples of some of the work developed by the Healthy Weight Alliance, to date, at a system wide level, to address obesity within each of these strategic themes:

Leading by example

Leading by example is an opportunity to work with Health and Wellbeing Board partners to continually improve the health of their workforces and our residents. The childhood obesity plan states that every public sector setting's food environment should be designed so that the healthy choice is the easy choice.

The food offer in Durham County Council has been reviewed, Government Buying Standards for food are being adopted, the healthy choice is more readily available and food labelling is improving so employees and visitors can make informed choices. Vending machines where possible, have had their branding removed, in order to limit product promotion.

Durham County Council has a significant workforce, the overwhelming majority of whom live in County Durham. Any efforts to impact the health of Durham County Council's workforce will have the dual benefit of a healthier workforce and residents. Leading by example is an opportunity to work with wider partner organisations who are also interested in improving health opportunities for their workforces and County Durham residents'. As a major employer in the county, this could present leverage to influence Health and Wellbeing Board Partners to follow the example set.

Durham Food Partnership has been successful achieving sustainable fish city status for Durham City.

The food offer in County Hall has been reviewed and work is continuing to ensure that healthy choices are more readily available and more attractively promoted. Food labelling is improving so colleagues can make informed choices about the food they eat. Food suppliers have attended County Hall to promote their healthy options and internal communications have promoted the benefits of healthy eating.

Holiday Hunger is an issue that a number of Area Action Partnerships [AAPs] and County Councillors have started to examine when working with partners to provide school holiday activity. Public health funded a programme in the East of the county in 2015 which has been further developed and funded in 2016 through a number of AAPs. This saw several holiday schemes across the county incorporate the ethos of holiday hunger and alongside their activities include snacks, picnics, quick meals or family cooking sessions.

Digital technology interventions have been implemented to encourage physical activity within the workforce. Stepjockey used smartphone technology to encourage stair use across County Hall. Encouraging everyday physical activity is a national priority and this programme led to 30,000 calories being burned across County Hall, with the unrecorded amount of activity anticipated to be significantly higher.


The 2016/17 annual Director of Public Health report, 'Work and You'

focuses on the workplace and its impact upon health. Good employment opportunities are critical to population health and wellbeing. The workplace can play an important role in promoting a healthy weight such as providing healthy options during the working day, and encouraging physical activity. As well as health benefits there are benefits to business too as employees in good health can be three times more productive. Many businesses already promote healthy lifestyles and consider the health of their employees. One of the recommendations within this report was that, as a minimum, the 30 largest employers (those with 250+ staff) in County Durham should sign up for the Better Health at Work Award. Durham County Council has recently completed the Bronze stage of this award. This award recognises the achievements of these business and helps them move forward in a structured and supported way.

<http://www.durham.gov.uk/media/10077/Work-and-you-Director-of-Public-Health-annual-report-2016-17/pdf/PublicHealthAnnualReport2016-17.pdf>

Best start in life

Children's life chances are heavily influenced by their development in the first five years of life with 80% of brain development occurring by the age of 3. Early intervention has the potential to improve a number of child outcomes. Durham County Council is part of a system led improvement programme which will facilitate local authority prioritisation and reflection to optimise services from conception to two years. Early work has identified a need to focus on maternal and infant obesity. This highlights the local efforts to attempt to connect our system so that it is collectively working towards tackling an agenda.



Tackling the issues which result in people, of all ages, having excess weight and becoming obese is a key priority for the two Clinical Commissioning Groups in County Durham. Each (CCG) has their own Sustainability and Transformation Plans but they share a prevention plan which has a focus on reducing levels of obesity. Giving every child the best start in life underpins the prevention approach, with key links into maternal and childhood obesity given the impact upon child development, the risk of obesity and the associated health complications in later life. It is important the local system works together to tackle obesity, as individual, isolated approaches to aspects of the agenda have a limited impact on the whole population.

Breastfeeding remains a priority and its impact on obesity is critical. UNICEF accreditation, breastfeeding cafes, and peer supporters are examples of the ongoing efforts. Health colleagues in County Durham and Darlington NHS Foundation Trust are leading the way in maternity, working in close partnership with Harrogate and District NHS Foundation Trust. Following the successful re-assessment in June 2017, County Durham and Darlington NHS Foundation Trust and Harrogate and District NHS Foundation Trust are currently working towards the prestigious UNICEF Baby Friendly Gold award. There is still much to do in schools and communities to change breastfeeding attitudes and Durham County Council, along with others within the public sector, have a key role still to play in promoting breastfeeding.

Work is currently underway to develop an Early Years Food Scheme to offer to early years providers across the County. This programme aims to increase the food and nutrition knowledge, skills and confidence of the early years workforce and improve the approach to and provision of food for children in early years settings.

In partnership with Newcastle University a PhD studentship has been developed which will assist in understanding the challenges of weight gain in infancy. This three year programme aims to support professional practice development that is informed by professionals and parents.

Schools have a powerful impact upon this age range and present an opportunity to continually explore methods to promote a healthy weight. The school food plan is being rolled out across County Durham and currently there is a great uptake of school meals across primary schools. However, this is not every school and anyone with an interest in the quality of their school's food is encouraged to promote the plan.

The FISCH programme is based upon NICE guidance for a tier 2 lifestyle weight management programme. It focuses on reducing excess weight in children and is aimed at stabilising weight and preventing young people from requiring specialist care. It is the only childhood weight management programme commissioned by Durham County Council and is one of the few remaining tier 2 weight management services in the North East. This approach aims to impact upon the National Child Measurement Programme (NCMP) levels of overweight and obesity.

The Healthy Weight Alliance has supported the continued development of the Durham Dash and the Sedgefield Dash school-based athletic events. Area Action Partnerships, culture and sport and public health supported these popular school physical activity celebration events.

Increasing play through the County Durham physical activity framework

Durham County Council Culture and Sport have the lead on the development of a physical activity framework for County Durham. A physical activity board, Active Durham, has been convened which will oversee the framework implementation, and the Healthy Weight Alliance is represented at this board to ensure the two agendas are aligned and synergistic. The groups are working to develop shared objectives and outcomes.



The slow to 20 for safer streets programme reduces traffic casualties and makes our communities safer places to play. Road safety education and cycling schemes are included to equip children with the skills they need.

Encouraging greater levels of community activity is a key component in the Beat the Street campaign which targeted pilot sites across County Durham during spring 2017. This programme used digital technology to create a game whereby friends, schools, workplaces or communities competed against each other through levels of physical activity. This has shown positive results and it is hoped that by aligning with the variety of successful programmes in the county; it will continue to boost and sustain levels of activity.

AAPs are instrumental in improving opportunities for physical activity within their communities. The 'Ready Set Go' programme in South West Durham, aims to improve physical literacy amongst early years and work is now ongoing to consider how to expand the programme across County Durham.

The Active Durham partnership aims to encourage daily active minutes, 'Active 30' in all schools in County Durham. Following recommendations from the Childhood Obesity Plan, the partnership aim to work with schools to encourage 30 minutes of activity every day.

Engaging the whole system

The Healthy Weight Alliance and County Durham Community Foundation have developed a match funded community grant to encourage community based initiatives, adopting systems methodology, to develop sustainable obesity programmes. The funding to be allocated totals just under £300,000. Over half of this funding has already been allocated and is supporting communities and community organisations to develop locally focussed system led approaches to address obesity. Three, 2-year projects were funded in this initial allocation, these are:

- East Durham Trust – to develop the Run East Durham Project
- Durham Community Action - to develop the Gilesgate Edible Estates Project
- Groundwork - to develop the Healthy Parks Healthy People - Trimdon Project

A further funding call, to enable the remaining funding to be allocated, will take place early 2018.

Primary care is an important setting. In 2016, 21 Healthy Living Pharmacies in County Durham were involved in a pilot pharmacy-led Slimming World referral scheme. Over 2200 clients engaged in the programme and average weight loss was around 9.5lb.

Continuing to work towards a healthy weight in County Durham

Obesity continues to present a major challenge for County Durham. Levels of overweight and obesity within child and adult populations across the county remain unacceptably high and there is still much to do. The issues County Durham faces in relation to obesity however have not occurred suddenly, they have developed out of a gradual combination of processes underpinned by a large number of very different but often interlinked causes. The evidence base underpinning a whole system approach to obesity is clear and whilst we thank all partners and acknowledge both the work already developed and the continuing commitment to challenge obesity and the underlying factors within County Durham, we restate the call to action to address obesity.

Drawing upon learning from our work to address teenage pregnancy we can see that over time the very clear downward trajectory in rates of teenage pregnancy has been achieved by addressing multiple

components over a substantial period of time. As with teenage pregnancy, no single approach or focus, in isolation, will be effective in tackling obesity.

To achieve our long term vision to *halt the rise in obesity in County Durham by 2022 and, by focussing resources upon addressing inequalities, see a sustained decline in obesity rates locally to below England national average by 2025*, our whole systems ambitions require multi agency drive and commitment and we have identified key long term goals within the system where further and sustained engagement is essential.

Actions include:

- address environments that promote the development of obesity
- promote support and sustain active travel opportunities
- encourage and enable people to use the local environment to be more active
- explore and challenge social perceptions and social norms
- give children the best start in life by addressing excess weight in early years, setting children on the path to healthier habits for their future
- influence the local food environment to enable people to make healthier choices

From 2018, going forward, our short and medium term goals include:

1. Work with planning and licensing colleagues to develop public health driven policies specifically around hot food takeaways and street trading
2. Development of training and support materials to enable licensing and environmental health staff to raise awareness of Government Buying Standards for Food and Catering within routine discussions with clients
3. Support Health & Wellbeing Board and Healthy Weight Alliance partners to develop and action pledges made to support the Durham Sugar Smart campaign
4. Implement and embed the Early Years Food Scheme
5. With schools, develop standards to further embed healthy eating and physical activity within whole school ethos which will support and promote emotional resilience, support the development of Active 30 campaign, Sugar Smart Durham and link into County Durham Oral Health Strategy.
6. Undertake a review of the Childhood Obesity Pathway
7. Support Durham County Council, around the healthy eating and physical activity components, to progress within the Better Health at Work Award
8. Work with Business Durham to engage the business sector across County Durham to inform the development of approaches to tackle obesity
9. Work with County Durham Community Foundation to further develop community grants to promote healthy eating, physical activity and access to green spaces.

The third and final section of this report is a recap of the impact of obesity in relation to physical and mental wellbeing and the impacts to the wider elements within the system emphasizing the need for work to address obesity to remain a key system wide priority going forward.

The costs and benefits of preventing obesity

Obesity develops when energy intake from food and drink consumption is greater than energy expenditure through the body's metabolism and physical activity over time. The complex nature of obesity however means that it is difficult to remove the impact of one from the other. Whilst levels of activity contribute towards obesity, obesity also impacts upon levels of activity (obese people are less likely to be active) and the nature of this relationship is unknown. With 7 out of 10 adults in County Durham overweight or obese, it is difficult to view the challenges of obesity, physical activity and food in isolation, as it is unlikely that improvements can be made in one area in isolation from the others.

Obesity and social attitudes

Obesity impacts upon many areas of life, not merely on the individual's health. Although there is a widespread recognition that obesity is harmful to health, the British Attitude Survey highlighted that many people fail to appreciate the full range of the risks it poses. Most people appear to regard obesity, at least in part, as an individual medical problem, and there is new and substantial evidence that obese people themselves are stigmatised, not least through a widespread belief that people who are overweight could lose weight if they wanted to. Furthermore there is a perception that prejudice against obese people is highly prevalent in terms of employment prospects. People however are not necessarily good at spotting obesity either in themselves or in others, while being somewhat overweight at least is something that many (especially men) appear inclined to tolerate. Separately the recent Health Survey for England found that 9 out of 10 mothers and 8 out of 10 fathers of an overweight child described them as being 'about the right weight'.

Obesity

The economic costs associated with obesity are great. Nationally we spend more each year on the treatment of obesity and diabetes than we do on the police, fire service and judicial system combined. The costs to the wider economy dwarf the costs to the NHS. Tackling obesity has an economic benefit to a significant volume of public life.

Obesity and the workplace

There is a relationship between obesity and increased absenteeism from work for health reasons including frequent medical appointments. On average, obese workers take four extra sick days per year. As we consume a third of our daily calories at work, businesses have a key opportunity to create an environment that supports healthier food and drink choices and a healthier workforce. Encouraging employees to be more active also has significant business benefits. Physically active employees are more productive and less likely to:

- take sick leave (being active can reduce chances of depression by 30% and back pain by 25%).
- have an accident at work
- suffer from major health problems

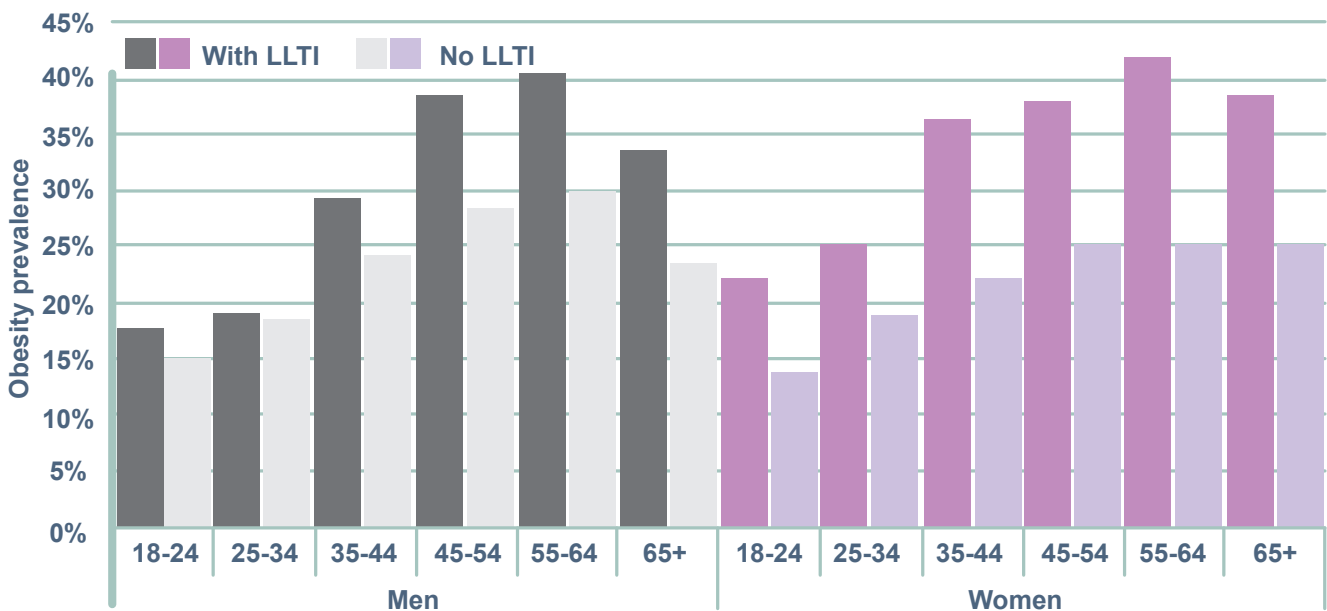
Obesity and adult social care

In England more than 15 million people have a long term condition. The care of people with long term conditions accounts for 70 per cent of total health and social care spend. Obesity is associated with a number of long term conditions that place a significant burden on the social care system. These include mental health problems, liver disease, type 2 diabetes, cardiovascular disease, muscular skeletal disease, some cancers, and respiratory disease.

Obese individuals are around nine times more likely to develop type 2 diabetes than the non-obese population and around 85 per cent of diabetics are either overweight or obese. Diabetes UK have estimated that the total cost of caring for people with diabetes in adult social care settings in England is £830 million per year. It is therefore likely that a substantial proportion of these social care costs are associated with excess weight. As the prevalence of obesity, especially severe obesity, along with associated long term conditions increases in the population, health and social care costs are likely to rise.

Figure 8: Prevalence of obesity among adults aged 18 years and over with and without a Limiting Long term Illness (LLTI) by age and sex.

Source: Health Survey for England, 2006-2010.



Obesity and ageing

County Durham has an ageing population (figure 9) with the greatest proportional increase over time being residents within the 85+ age band, Office for National Statistics projections suggest that by 2039 over 43% of County Durham's population will be aged 50+.

Figure 9 Population projections for County Durham, 2014 to 2039, selected age bands, and proportional changes to those populations over time.

Source: ONS mid 2014 population projections.

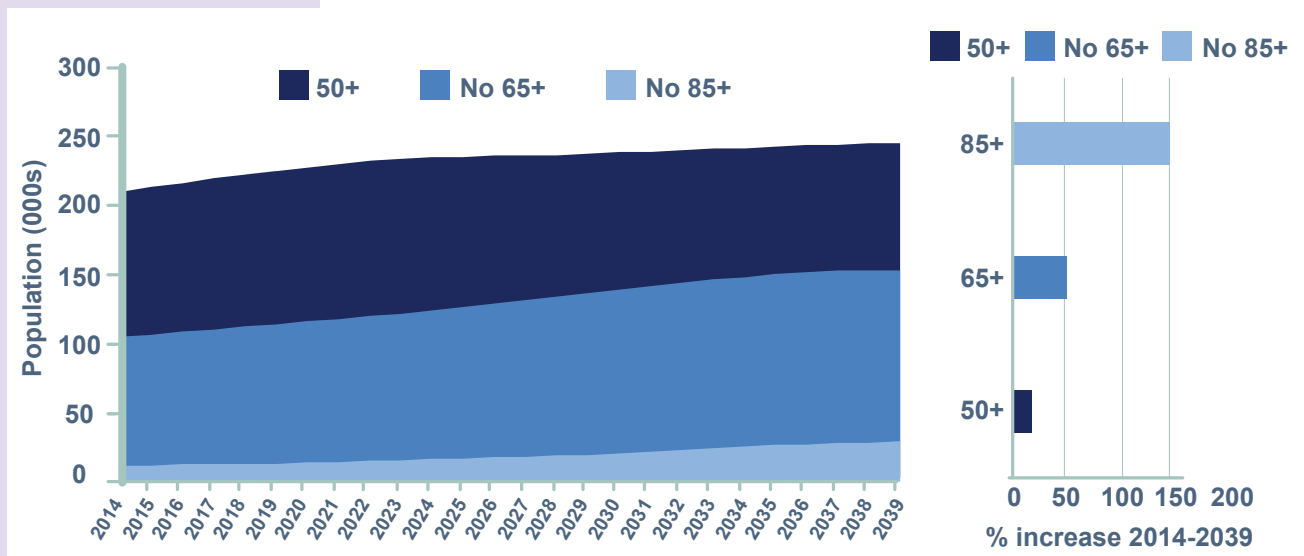


Figure 10 Population projections for County Durham, 2014 to 2039, selected age bands.

Source: ONS mid 2014 population projections.

Age group	County Durham	
	2014	2039
Total pop (1,000's)	517.8	566.0
50+	206.4	241.4
65+	101.5	149.8
85+	11.7	28.7
%50+	39.9	42.7
%65+	19.6	26.5
%85+	2.3	5.1

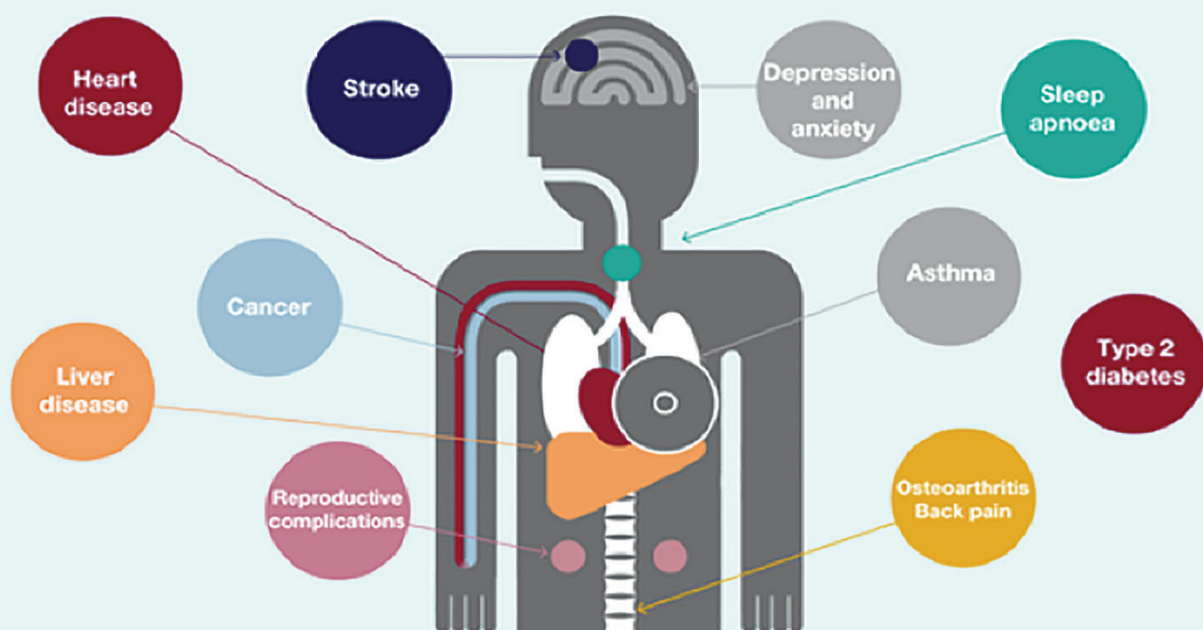
Excess energy intake greatly increases the risk for obesity, chronic diseases and disabilities as people grow older. Yet, participation in regular, moderate physical activity can delay functional declines and it can reduce the onset of chronic diseases in both healthy and chronically ill older people. Being active can help older people remain as independent as possible for the longest period of time. It can also reduce the risk of falls.

In older people, malnutrition can be caused by limited access to good quality food, poor food choices (e.g. eating high fat foods), socioeconomic hardship, a lack of knowledge about nutrition, disease and the use of medications, tooth loss, social isolation, cognitive or physical disabilities that inhibit people's ability to buy foods and prepare them and a lack of physical activity. If ageing is to be a positive experience, longer life must be accompanied by continuing opportunities for health, participation and security.

Obesity and physical health

Obesity on average reduces life expectancy by six to seven years. The Department of Health recommends that adults should undertake 150 minutes of physical activity each week. Meeting recommended levels of physical activity can reduce the risk of heart disease, stroke and type 2 diabetes by up to 50% and avoid 1 in 11 early deaths.

Obesity harms health



Obesity and mental health

A connection between childhood obesity and depression can form at a young age and continue into adulthood. Public Health England social attitudes survey revealed 56% of those classified as obese say they are unhappy. Individuals who suffer from both obesity and common mental health disorders may face particular risks to health and well-being, as it is likely that the conditions may perpetuate each other. Research shows obesity and poor diets can cause mental health disorders such as depression whilst mental health disorders can be a causal factor of obesity; such as the use of food as a coping mechanism

Obesity and school academic performance


Promoting the health and wellbeing of students in schools and colleges has the potential to improve their educational outcomes and their health and wellbeing outcomes. Pupils with better health and wellbeing are likely to achieve better academically. Harmful aspects of overweight and obesity are stigmatisation and low self-esteem. Obese children are more likely to be absent from school than children that are a healthy weight. Physical activity is associated with academic achievement. As well as benefits associated with improved health and fitness, physical activity can also help to build confidence and social skills, improve sleep, concentration and learning. Physical activity has been linked to improved classroom behaviour across the whole school setting.

Obesity and the environment

Street cleaning cost local government £778m in 2015/16. A significant portion of this will be for avoidable litter clear-up; money that could have been spent on vital public services. Over the past decade, there has been a relatively steady rise in the percentage of all sites affected by fast food related litter, from around 20% in 2004/5 to over 30% in 2014/15. Also 50% of main roads and 58% of industry and warehousing sites were found to have fast-food related litter present; this could be linked with a significant rise in the number of fast food outlets over the same period. Tackling obesity not only reduces impacts across the public sector, but a more active population and a better quality food environment will likely bring a multitude of benefits to our communities. Planning authorities can do much to influence the built environment to improve health and reduce the extent to which it promotes obesity.

The importance of the built environment for travel

The overall costs to society from road transport are substantial. It has been estimated that half of the UK's £10bn cost per annum of air pollution comes from road transport. The Cabinet Office has estimated that excess delays, accidents, poor air quality, physical inactivity, greenhouse gas emissions and some of the impacts of noise resulting from motorised road transport costs English urban areas £38-49 billion a year. Recent analysis of data from the Active People Survey shows that people who cycle for travel purposes (rather than simply recreation) are four times as likely to meet physical activity guidelines as those who don't. Each additional hour spent in



a car per day was associated with a 6% increase in the likelihood of obesity. Health-promoting transport systems are pro-business and support economic prosperity. They enable optimal travel to work with less congestion, collisions, pollution, and they support a healthier workforce. The built environment should support healthy choices. The choice to walk and cycle is strongly influenced by urban settings and transport policy, and planners have a crucial role in ensuring residents have cycling and walking options. It is not just how walkways are planned that makes a difference; their design can also encourage people to walk more frequently.

The importance of the built environment for play

Proximity to plentiful, good quality green space has an important influence on the health of local populations and accessible, good quality green space is linked to better and more frequent use of green spaces. Accessible green space is considered to be that which is located close to residents' homes, easy to walk to, physically accessible, safe to use, and provides well maintained facilities. For play spaces to be used by children, the safety, functionality and accessibility of the recreational area is important to parents, as well as their perceived quality of the areas.

The importance of the built environment to support healthy choices

The local public sector and local food businesses have great influence over the lives of local communities and the food choices available. Overall, food consumed out of home tends to be less healthy than that prepared and consumed within the home and is associated with fat intake and body fatness. By working together and in partnership with the local community we can positively influence the food environment, to promote and increase availability of healthier food choices, enabling us all to live longer, healthier lives.

Growing Healthy

Education Durham / Outdoor and Sustainability Education Specialists

Growing Healthy

This project working through schools to engage pupils and to make links with the wider community was developed in 2011 working with five schools. This was used as a basis to develop a larger programme working with 20 schools over two years from September 2015-July 2017.

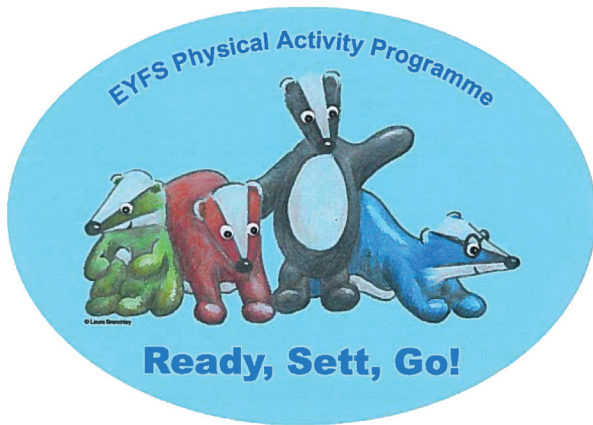


The project was designed to be flexible to work in any school context. It links the benefits of learning outdoors and physical activity with an enhanced understanding of growing food along with how to use the produce effectively.

From 2015 ten primary schools were supported over the course of a school year developing new growing areas or revamping existing ones along with teacher training and working with groups of children to enhance their knowledge and skills. The second year of the programme has focussed on supporting a variety of schools and settings.

A flexible approach has met the various needs of schools to provide appropriate curriculum based activities and learning resources. Schools involved now have new or enhanced growing areas to continue growing and health related activities in the future.

Pupils and staff enjoy learning through growing, often learning lots of skills and knowledge without realising it as well as being physically active.



Ready Sett Go

Early Years Physical Development Programme

A high quality Early Years Physical Development programme was developed in the Three Town AAP areas nursery schools. Through the use of physical activity and play delivery led by a qualified coach, more children in the area could possess the necessary fine and gross motor skills to develop and enjoy physical activity. This would help them obtain an active lifestyle through childhood and into adulthood and reduce the risk of obesity and associated health risks.

413 pupils took part in the programme across the 16 different schools and 27 classes. On average across the 16 schools, 23% of early year's children were achieving or exceeding physical development levels that were expected for their age on entry to the school/nursery.



Ready Sett Go

After taking part in the Ready Sett Go programme, 81% of pupils achieved either expected or above average physical development levels for their age.

By comparison, selected schools which were not part of the pilot found that on average the percentage figures achieving/exceeding expected levels rose from 25% on entry to 61% at exit.



Public Health, Durham County Council

A pharmacy-led Slimming World referral scheme

The increasing prevalence of obesity needs effective approaches for weight loss in primary care and community settings in line with NICE Public Health Guidance 53 'Weight management: lifestyle services for overweight or obese adults' recommendations. In 2016, 21 Healthy Living Pharmacies (HLPs) in County Durham were involved in a pharmacy-led Slimming World referral scheme.

21 HLPs provided 2242 eligible clients (aged 18 and above; BMI 25 and above) with a referral letter to Slimming World in order to access a free 12 week course (2,242 clients represents a 98% successful referral rate from pharmacy).

Data from Slimming World in May 2017 showed that, at the end of the 12 week course, the clients who then went on to attend a local Slimming World course:

- Reduced their average Body Mass Index (BMI) from 35.2 to 33.6.
- Had an average weight loss of 9.6lbs.

For those that 'completed' the course (i.e. attended 10 out of 12 sessions)

- The average BMI reduced from 35.4 to 33.1.
- The average weight loss was 13.6lbs.
- 67% of completers achieved a 5% weight loss, and 15% of completers achieved a 10% weight loss.

Questionnaires issued before and after the programme highlighted the positive changes in behaviours:

	Before	After 10 weeks
I ate a lot of takeaways / fast food	72%	17%
I ate a lot of unhealthy snack foods at work and at home	88%	23%
I tended to avoid any moderate activity	65%	45%
I went for walk a lot / I go for walks a lot	69%	93%

In July 2017, this work was published in the Journal of Perspectives in Public Health – see <http://journals.sagepub.com/home/rsh>.

DCC Sustainable and Healthy Food Policy

The policy provides a context in which the current food agenda is delivered.

To embrace a 'health' agenda message with one of 'sustainability' but aims to align the two concepts as one.

Policy comprises three elements and builds on current local practice:

- Corporate Procurement – applying and promoting sustainable buying standards for food and catering.
- Catering Managers – driving menu standards
- Communications – getting the message across

Food Durham - Growing Durham

The purpose of the Growing Durham project is to create a network of new and diverse community growing schemes across County Durham, linking these schemes with existing projects. Growing Durham wants to:

- See as many people as possible producing some of their own food
- Improve access to fresh produce where this is difficult
- Provide opportunities for everyone to participate in food production and enjoy the benefits this brings including better mental and physical health, education, and community resilience

Participation in food growing has multiple benefits, including proven physical and mental health benefits. In the longer term it can result in improved diets (increased consumption of fruit and veg) and increased physical activity that can contribute towards healthy weight.

More than 33 active groups (and 300+ people) have been involved spanning a wide variety of models and approaches including a community orchard, a garden set up and run by residents of a supported living home, community gardens, single plot gardens, and a Children's Centre project. From August 2017 the programme will develop one or two Edible Estates projects, working with partners on an estate to develop green spaces for growing and with an emphasis on health improvement, exploring the opportunities for working with health services. Adopting an approach of facilitation and enabling has maximised our resources and ensured that ownership and activity remains firmly in the hands of the community participants.



County Durham was a year one pilot area for the ASA's Dementia Friendly Swimming. The project aimed to enhance the swimming experience of those living with dementia and their carers, targeting the pool environment while delivering low intensity exercise, relaxation sessions and structured motivational swimming lessons.

Amateur Swimming Association (ASA)

Durham County Council and the Alzheimer's Society

County Durham was a year one pilot area for the ASA's Dementia Friendly Swimming. The project aimed to enhance the swimming experience of those living with dementia and their carers, targeting the pool environment while delivering low intensity exercise, relaxation sessions and structured motivational swimming lessons.

Sessions are currently being delivered in several pools across County Durham with specially trained staff to support those people living with dementia.

Dementia Friendly Swimming links extremely well with other work taking place in County Durham to create dementia friendly communities as part of the County Durham and Darlington Dementia Strategy. This highlights the cross cutting benefits of physical activity, and the need for wide partnership approaches.



Dietwise CIC

Food Mood and Attitude programme

Food mood and attitude tackles the 'why' of eating and weight management issues. It has been designed to complement and run alongside existing programmes already available to residents that already tackle the 'what' and 'how much' of weight management.

The project explores people's relationship with food and aims to create a safe and non-judgemental environment for people to discuss and examine unhelpful food habits and behaviours that stifle weight management progress.



County Durham and Darlington NHS Foundation Trust Staff Health & Wellbeing CQUIN Action Plan

Staff Health and Wellbeing (SH&WB) is a key priority for County Durham and Darlington NHS Foundation Trust (CDDFT). A SH&WB Strategy has been written and ratified and an Action Plan developed and ratified to support and reinforce the SH&WB Strategy. Key priorities of the Strategy and the Action Plan are to improve the health and wellbeing of CDDFT employees in order to reduce sickness absence, improve patient care as well as improve patient and staff experience and satisfaction. This includes ensuring staff are engaged in regard to their own health and wellbeing thus reducing sickness absence rates; which will be achieved by promoting collaborative working relationships and work environments that encourage wellbeing, as well as meeting CQUIN targets and NICE guidelines.

The CDDFT Action Plan also demonstrates that County Durham and Darlington NHS Foundation Trust provide a Quality, Safe Occupational Health Service to all employees in line with SEQOHS (Safe, Effective, Quality, Occupational Health Service) Standards.

This Action Plan outlines the two broad themes within the NHS Healthy Workforce Programme:

- Focus on Improving the culture within CDDFT, specifically regarding health and wellbeing
- Introducing an improved set of preventative and early intervention schemes for staff (including building upon existing schemes)

The Action Plan is detailed against 4 Key Objectives

1. Introducing Health and Wellbeing Schemes in order to improve staff morale and enhance staff engagement in influencing health and wellbeing and promoting Physical Activity of Staff
2. Improving Support to Staff with Musculoskeletal (MSK) issues (including improved access to physiotherapy services)
3. Introducing Mental Health Initiatives for Staff
4. Staff Training & Information

Wellbeing for Life

The WBfL service was developed in 2014 to move away from single 'lifestyle' programmes to provide a wellbeing approach, based on the Marmot Review 2010. Currently, WBfL delivers the following services under one overall approach:

a) One-to-one support

Health Trainers work with local people over eight one-to one sessions to set a wellbeing plan, which includes setting small achievable goals, focusing on individual needs and identifying a range of support e.g. healthy eating, mini-healthchecks, being more active, stop smoking support, alcohol and drug awareness, mental health and wellbeing, accessing local services including housing, crisis services and welfare advice and reducing social isolation.

b) Group Support

Wellbeing Development Officers work with local people in friendly group sessions, which are varied and typically last for an hour and cover; healthy eating and cooking on budget, physical activity/get active, Improving mental wellbeing, reducing social isolation and loneliness, diabetes support group, social singing and dementia friendly groups.

c) Community Development

- Wellbeing workers know what is available in the local area and support people to access, groups, activities and services they want and need e.g. housing, health.
- Local people are supported to volunteer with the service with some becoming Community Health Champions and many gaining qualifications and friends.
- Connecting local people and organisations supports community groups to form and develop so they can set up their own activities based upon their needs.



d) Training and capacity building

WBfL provides a training and capacity service for professionals, volunteers and community members. The service provided Making Every Contact Count (MECC) training for the County Durham and Darlington Fire and Rescue (F&R) service and ongoing support which enabled F&R to be able to provide the successful safe and wellbeing visits programme in County Durham. (www.hits.cdd.nhs.uk)

Other training includes the Five Ways to Wellbeing, group work skills, motivational interviewing, mental health awareness and dementia awareness

The Service was evaluated by Durham University the evaluation which took place between June 2015 and January 2017 found the service to have achieved significant improvements. Key findings are:

- Improvements observed in all measures of weight, BMI, blood pressure, physical activity, fruit & vegetable intake, alcohol consumption, cigarette smoking, self-rated health, quality of life, mental wellbeing and self-efficacy.
- Amongst those who lost weight, the average weight loss was 7.5lbs (3.4kg) - one in four had lost a clinically significant amount.
- There were significant reductions in the prevalence of obesity (62.9% vs 58.0%) and high blood pressure (27.5% vs 16.7%).
- Physical activity had increased by an average of 105.6 minutes per week at completion relative to the baseline levels; much of this increase was maintained at six months (85.2 minutes) and 12 months (61.3 minutes).
- The largest improvements tended to be seen in those with the 'worst' results at baseline - those with lowest self-rated health at baseline, with most need.
- Significant improvements in self-rated health & mental wellbeing were maintained.

- Case studies demonstrated the social value of the service, e.g. reducing isolation, increasing confidence, self-esteem, connecting with the community.
- There was some indication that inequalities in these indicators, and also in weight and BMI, might be reducing over time. In other words, the gaps in average weight, BMI, self-rated health and wellbeing between those living in the 30% most deprived areas and those living in all other areas were smaller at follow-up than at baseline.
- Achieved a social return on investment of between £3.59 and £5.95 for every £1 spent on WFL, producing estimated long-term public sector savings of at least £12,664,874

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