

Obesity & Overweight – Addressing the Health Challenges

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Director of Public Health

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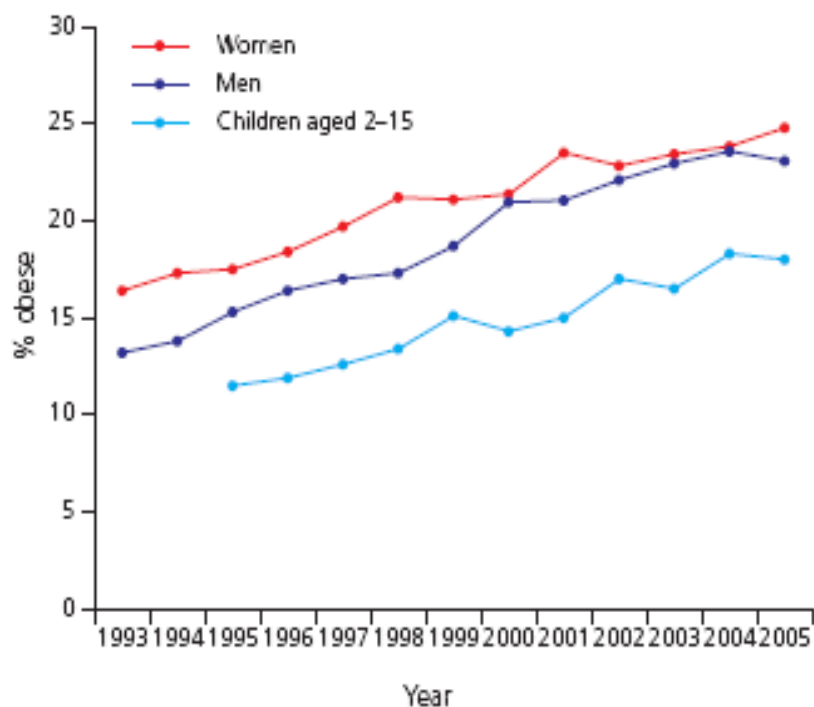
Healthy Lifestyles

Achieving healthy weight and maintaining it

- Introduction
- Local Assessment
- Some methods that work
- The plan

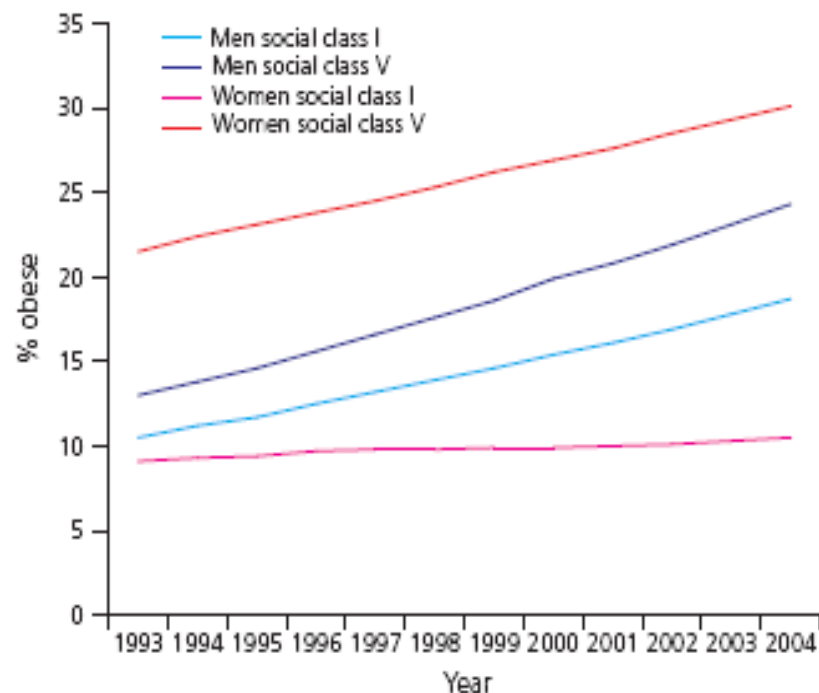
Obesity—A Growing Problem

Obesity prevalence trends from 1993 to 2005 adults, and children aged 2–15



Source: Health Survey for England

Trends in Obesity Prevalence 1993–2004 by Social Class I and V

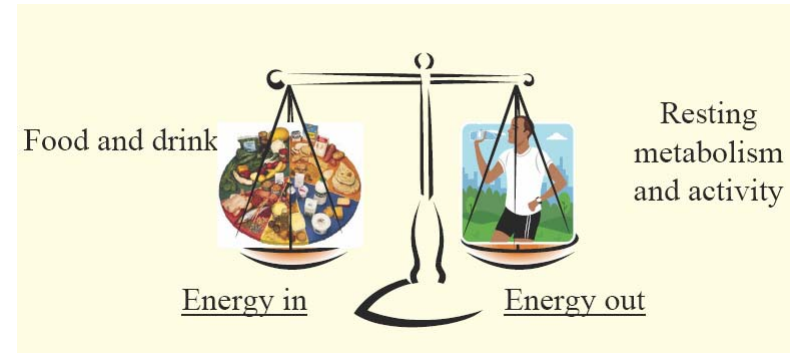


Source: Foresight Tackling Obesity: Future Choices – Modelling Future Trends in Obesity and Their Impact on Health

- If current trends in obesity are allowed to continue
 - 60% men will be obese
 - 50 % women will be obese
 - 25% children will be obese
- Obesity health costs
 - Current = £4.2 billion out of £17.4 billion NHS costs (24%)
 - Indirect economy costs = £15.8 billion rising to £50 billion by 2050
- Obesity health costs for LCR
 - Current = £77 million
 - Projected to rise to £95 million in 2015

Causes of Excess Weight

- Human Biology
 - Genetic make up
 - Growth after birth
 - Breast feeding
 - Weaning
- Cultural and individual psychological
 - Lack of recognition that child is overweight
 - Over estimates of Physical activity
 - Underestimates of food intake

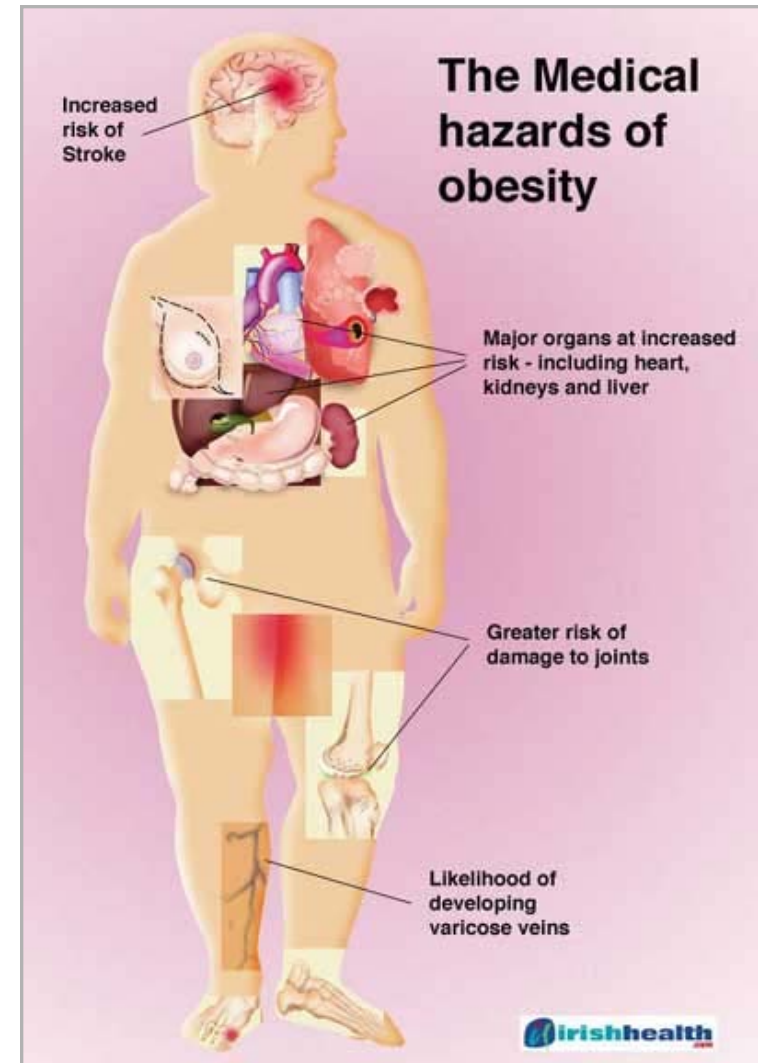


When energy intake is equal to energy expenditure, weight remains constant

- Food environment
 - Changes in eating patterns
 - Increased pre-prepared foods and fast food consumed
- Physical environment
 - Changes in travel patterns
 - Planning decisions
 - Reduction in daily activities patterns

Impact on Health

- 10% all cancers in non smokers related to obesity
- Heart disease and stroke risk increases by 3.6 times for every point BMI
- 20 times greater risk Type 2 Diabetes than those of normal BMI
- Some cancers
- Hypertension 85% more likely with BMI>25
- Obesity in pregnancy increase risk of complications to mother and baby
- Obese individuals are 11 times more likely to die prematurely





Healthy Lifestyles

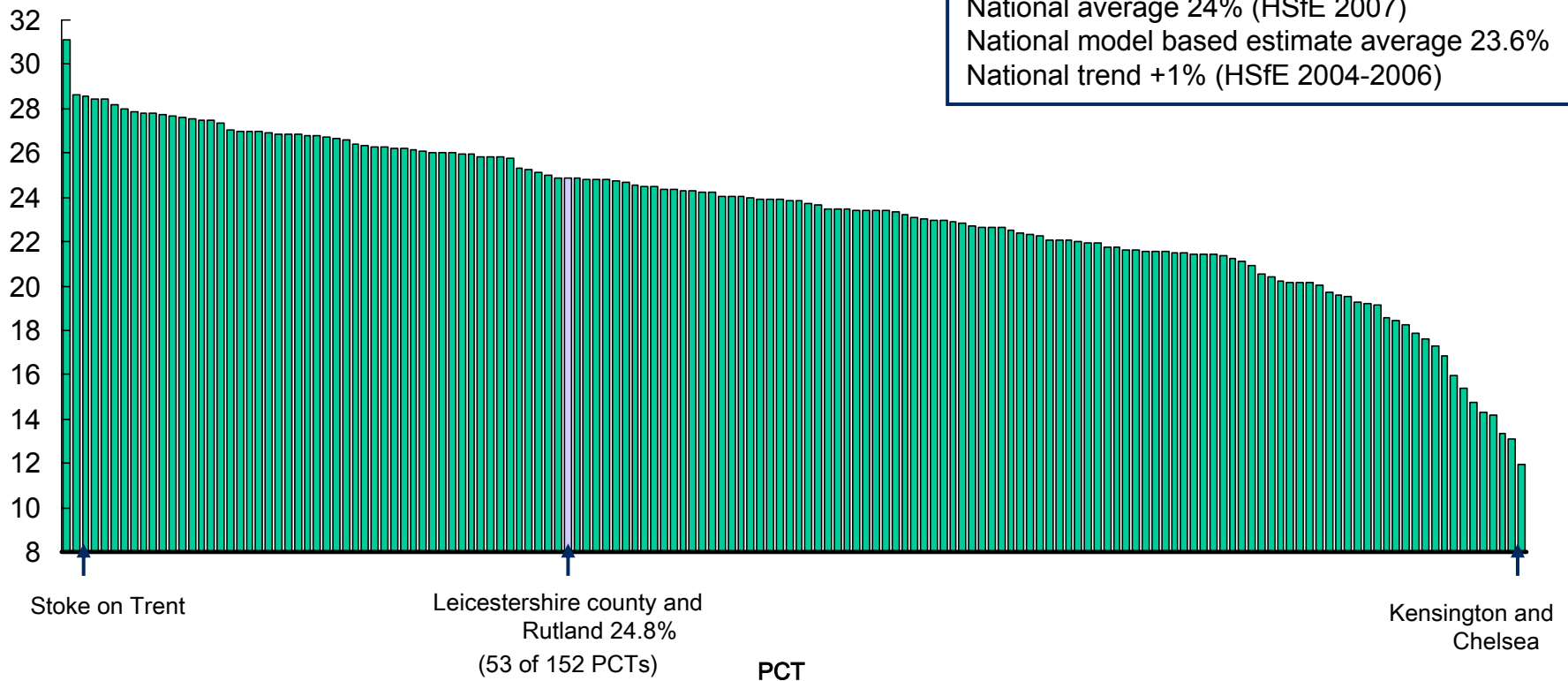
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Adult Obesity-Above Average

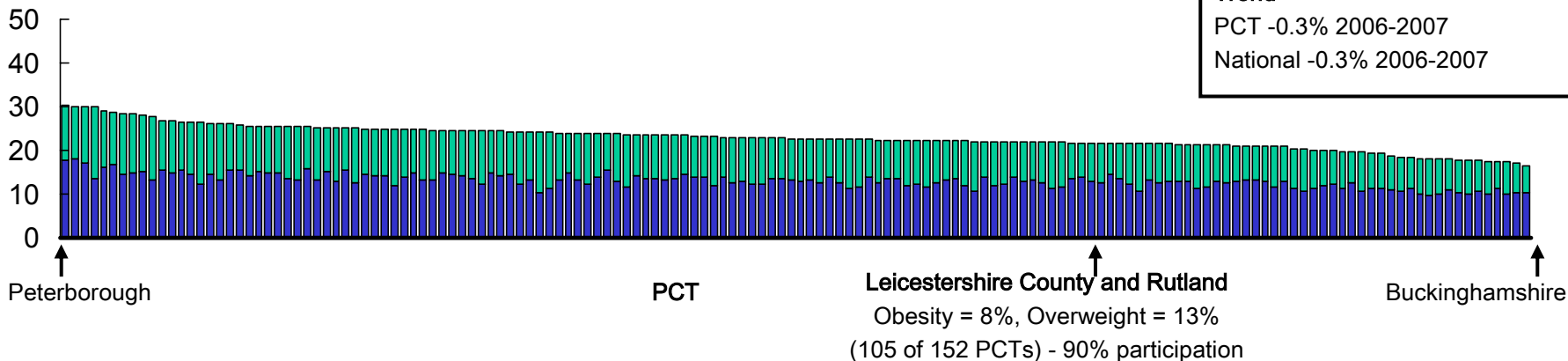
Expected prevalence of adult obesity from Model Based Estimates¹, %



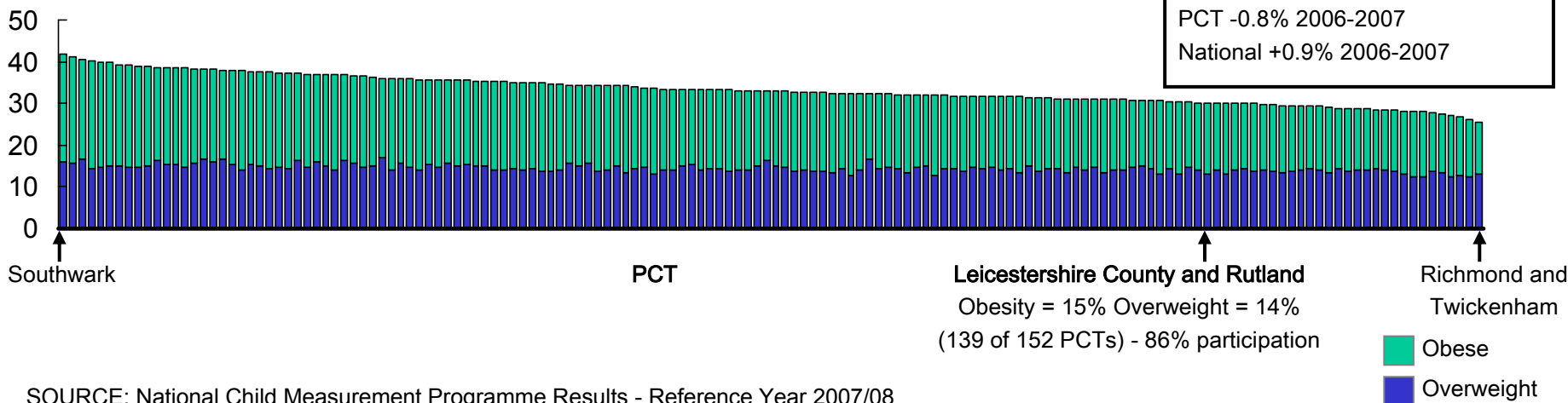
¹ The data for the model based estimates is based on data from the Health Survey for England that is weighted using a variety of data such as Mortality rates, census data, life expectancy at birth estimates, Compendium of Clinical and Outcome Indicators (2003-2005), and JobSeekers Allowance claimant rates

Children's Obesity-Better than Average

Prevalence of childhood overweight and obesity in reception (Age 4/5), %

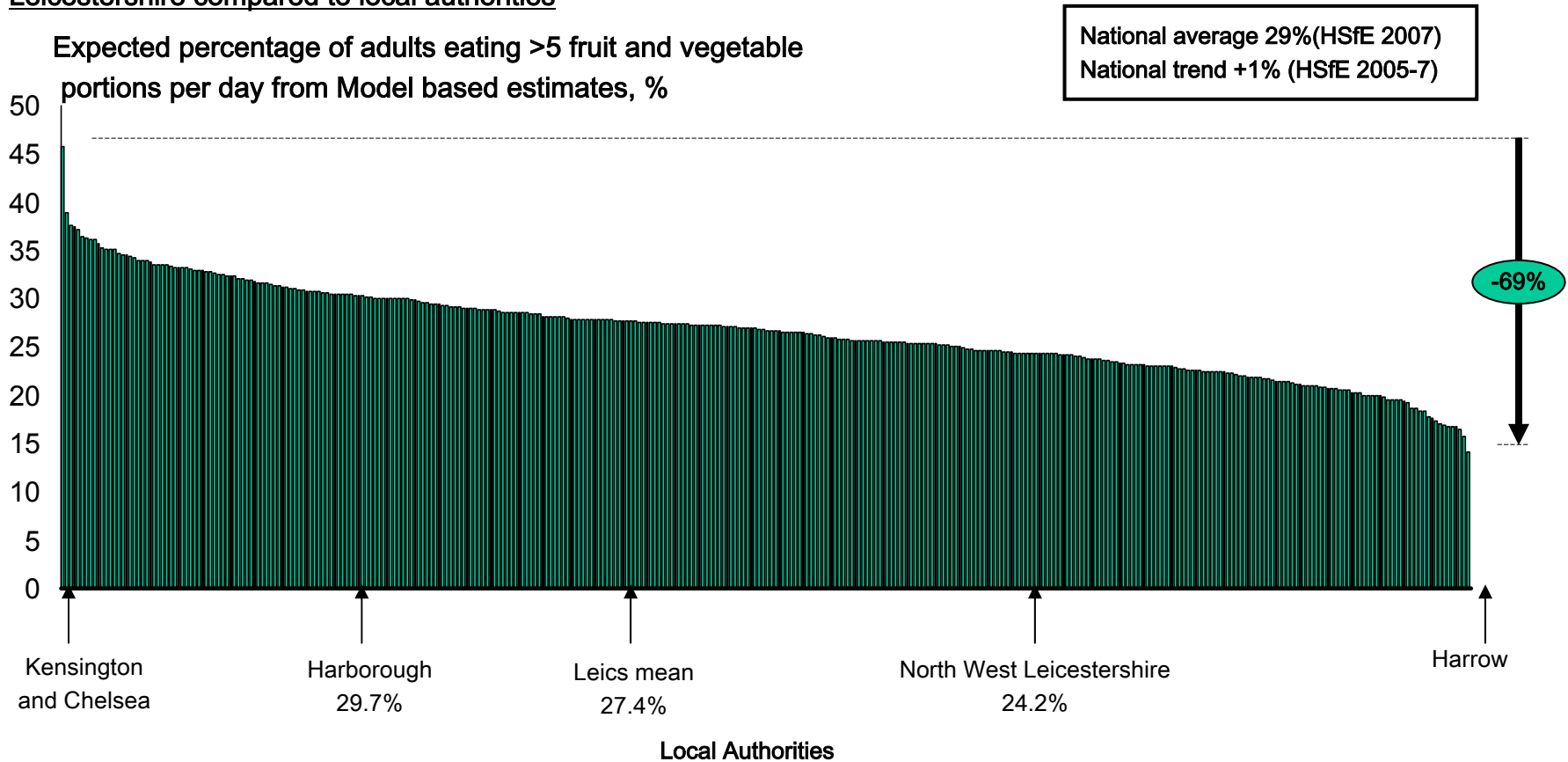


Prevalence of childhood overweight and obesity in Year 6 (Age 9/10), %



Adult Nutrition-Variable

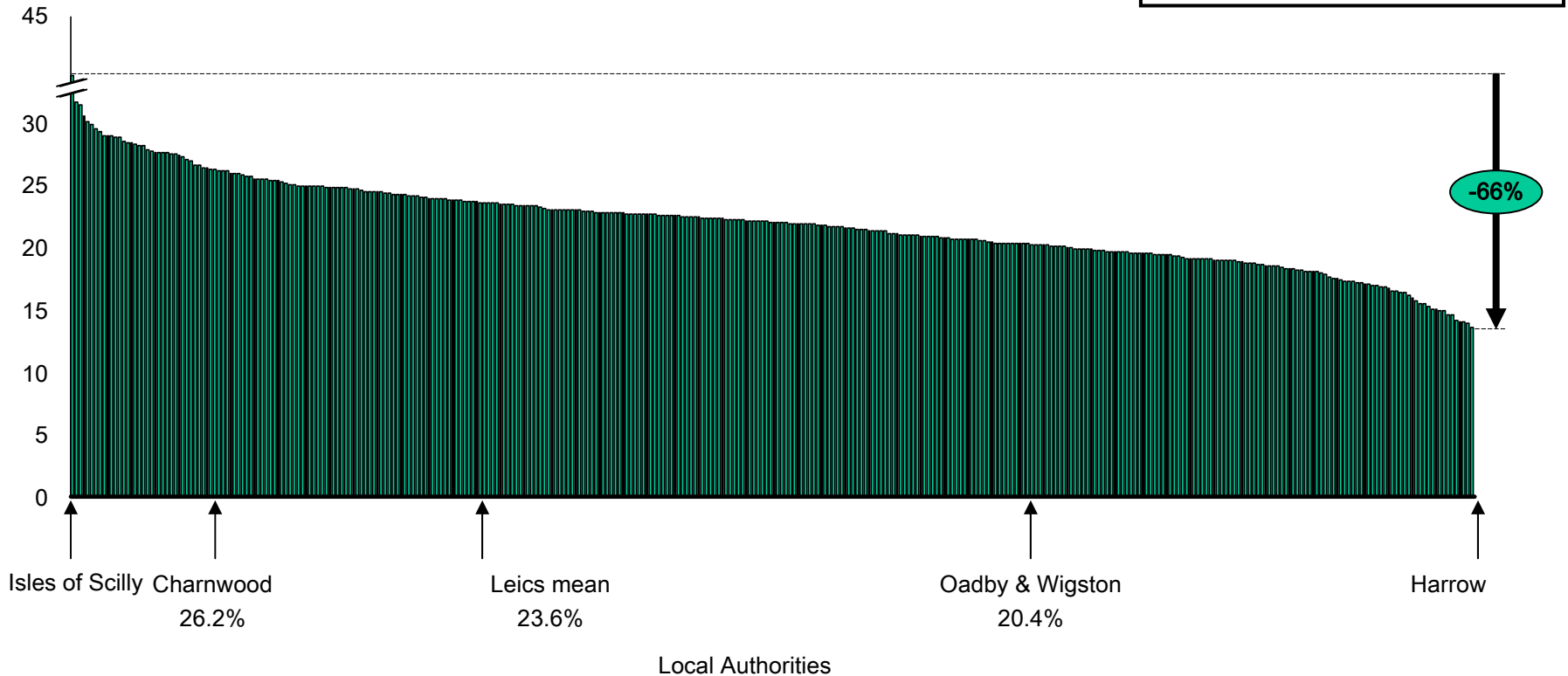
Leicestershire compared to local authorities



Adult Exercise-Variable

Leicestershire compared to local authorities

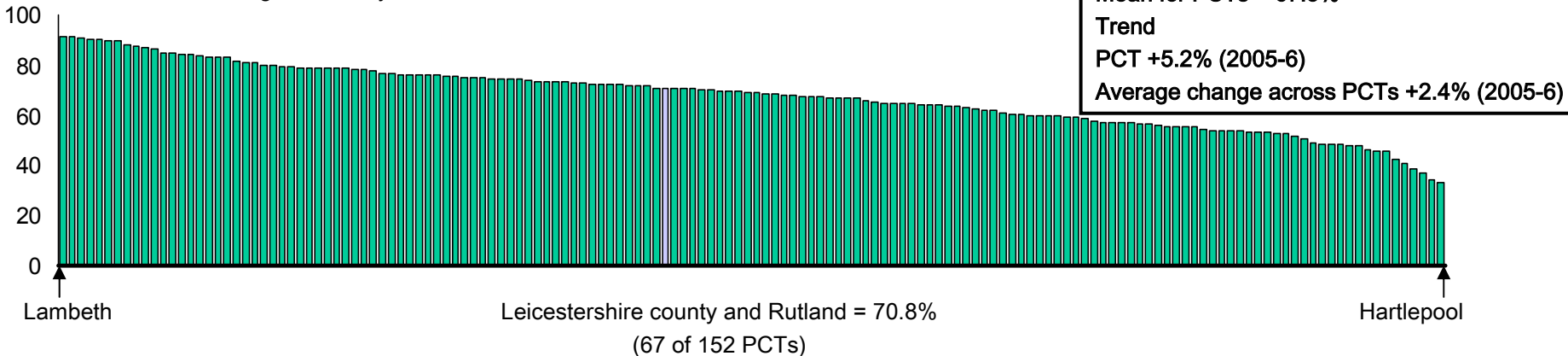
Percentage of adults achieving NI8¹, %



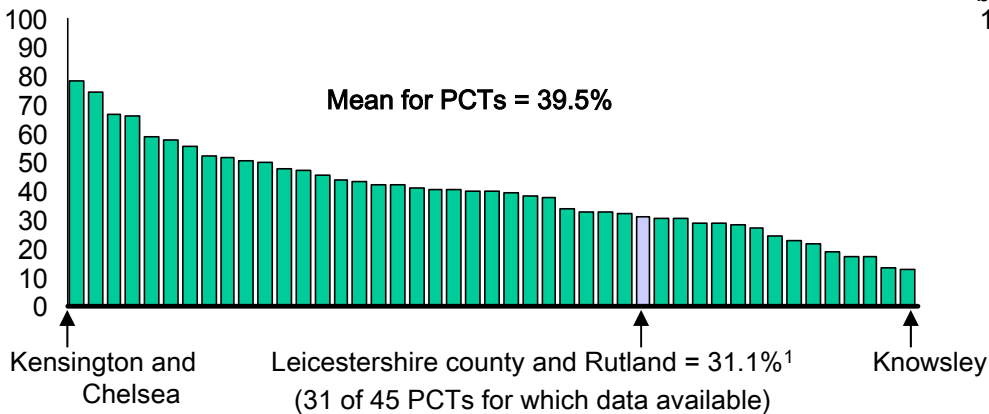
¹ NI8 is the percentage of the adult population (age 16 years and over) in a local area who participate in sport and active recreation, at moderate intensity, for at least 30 minutes on at least 12 days out of the last 4 weeks (equivalent to 30 minutes on 3 or more days a week).

Breastfeeding-Variable

Initiation of breast feeding on delivery 2006/7, %

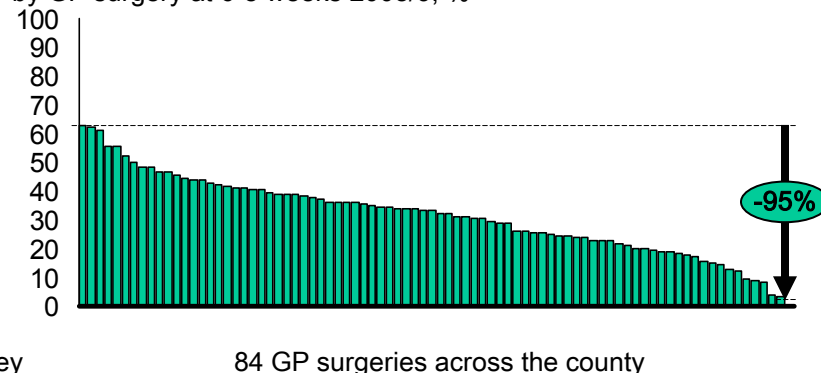


Continuation of breast feeding (full or partial) by PCT at 6-8 weeks 2008/9, %



¹ Coverage = 69.5%

Continuation of breast feeding (full or partial) by GP surgery at 6-8 weeks 2008/9, %



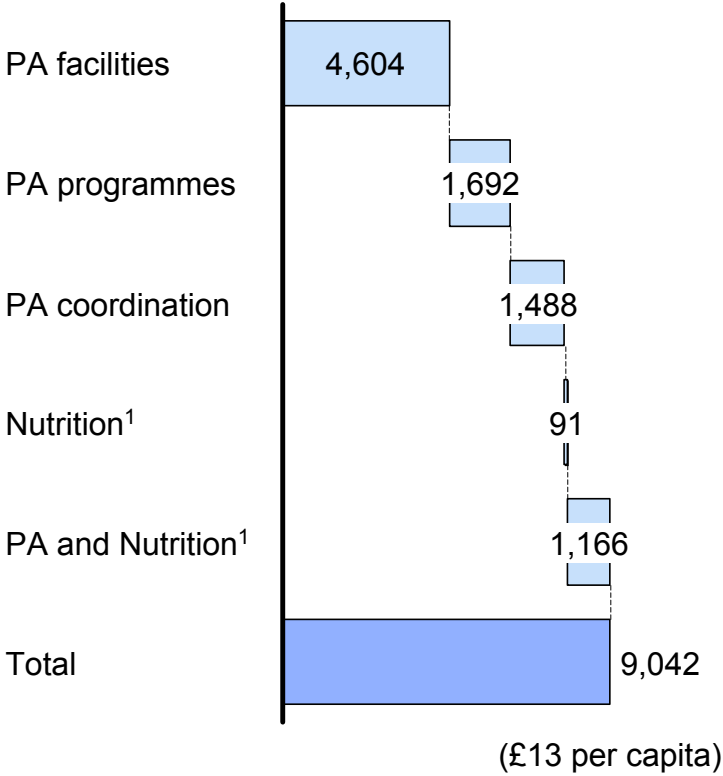


Statistics for LCR

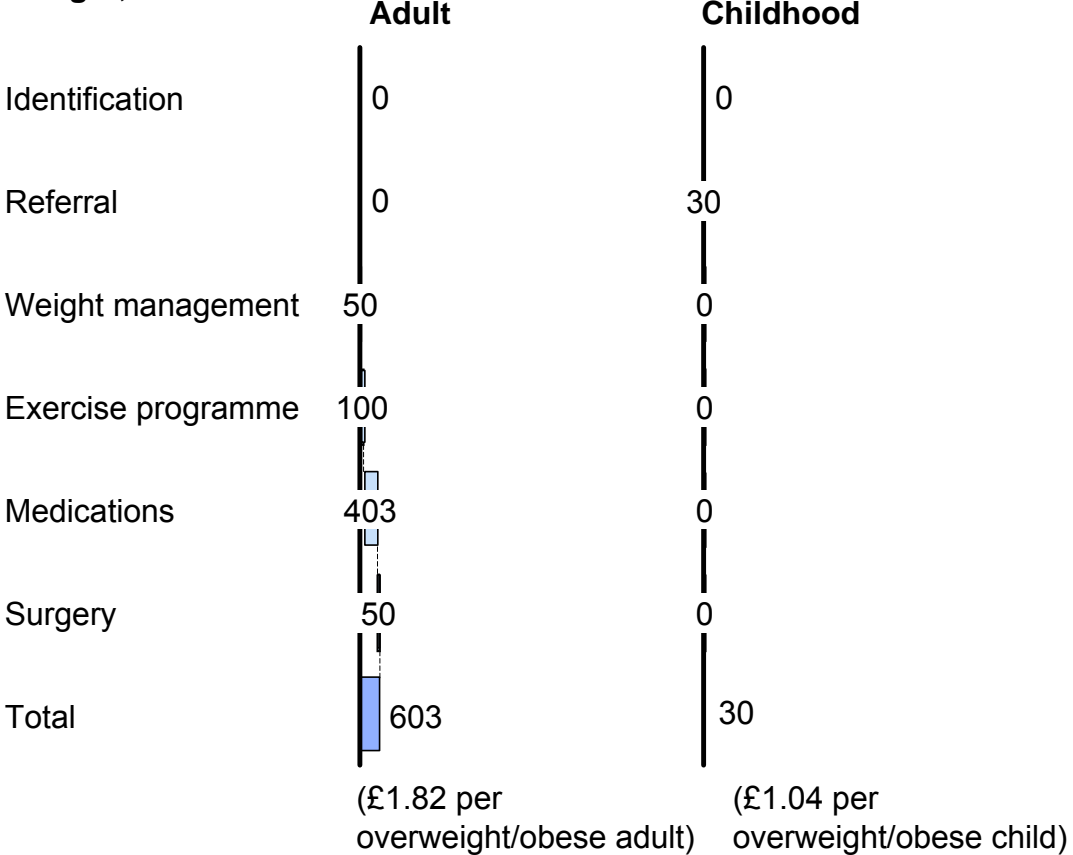
	Reception (Age 4/5) NCMP results – 2007/8		Year 6 (Age 9/10) NCMP results – 2007/8		Adults (16+) 2003/5
	Obese BMI \geq 30	Overweight & Obese BMI \geq 25	Obese BMI \geq 30	Overweight & Obese BMI \geq 25	Obese BMI \geq 30
NHS LCR	8.4%	21.8%	14.8%	28.8%	24.8%
England	9.6%	22.6%	18.3%	32.6%	23.6%
Obesity Trend	Decreasing locally Local = -0.3% (2006/7) National = -0.3% (2006/7)		Decreasing locally Local = -0.8% (2006/7) National = +0.9% (2006/7)		National = +1.0% (HSfE 2004-6)

Today the focus of public spending is on the environment to support maintenance of a healthy weight, particularly in physical activity (PA)

Annual spend on helping individuals of healthy weight maintain it, £k



Annual spend helping overweight/obese individuals lose weight, £k



- Total spend - **£9.67m per annum**
- Total spend per capita - **£14 per person per annum**

¹ ~£100k on Healthy tots and breast feeding initiatives



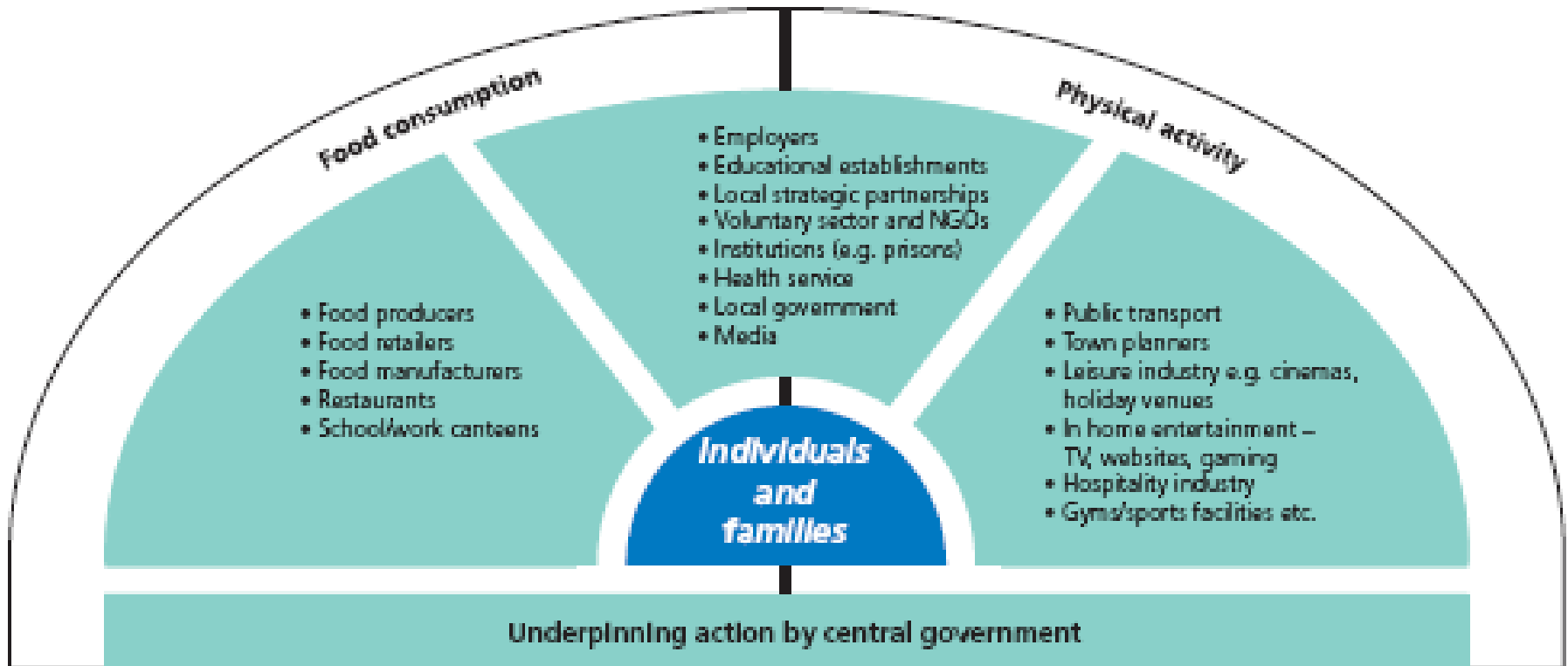
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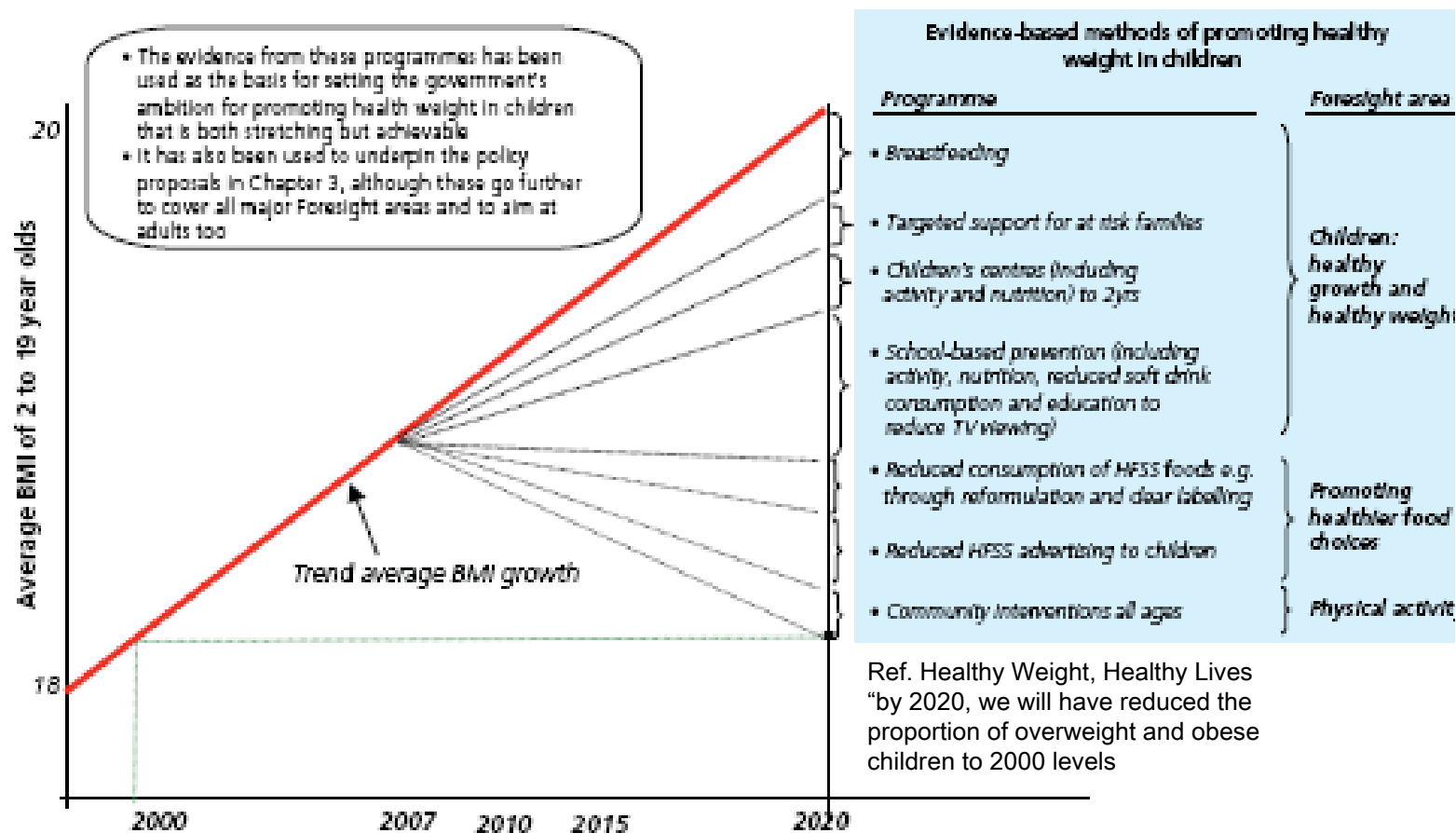
Tackling Obesity

Map of major sectors that must play a role in tackling excess weight



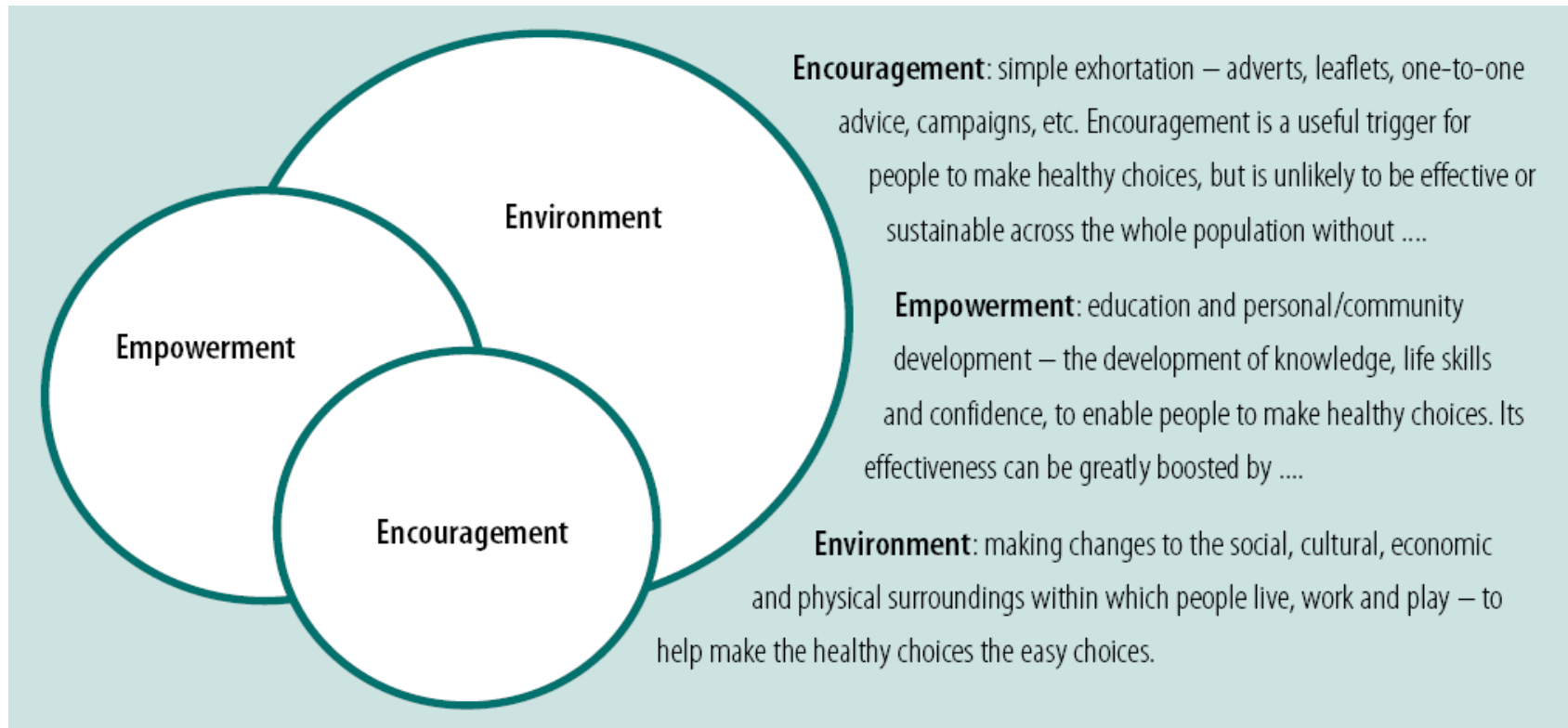
Some Methods that Work

Illustrative chart of potential reduction in average BMI in children from implementing best practice programmes – Indicative trajectory



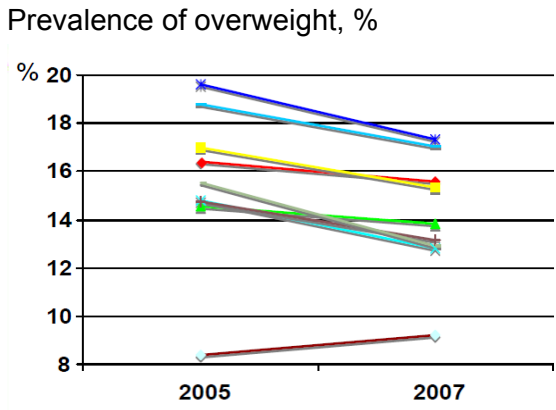
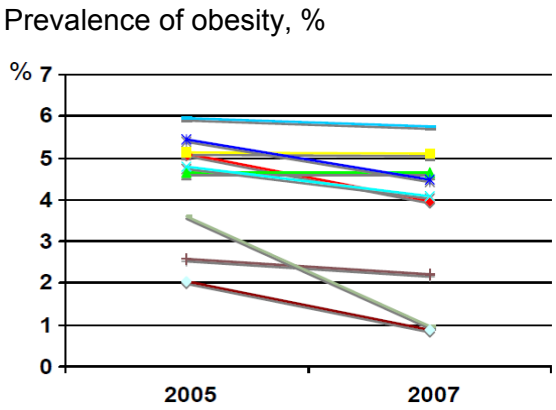
Three Es Model

- Promoting lifestyle changes



Evidence is clear that whole community engagement is needed to prevent weight gain / promote weight loss

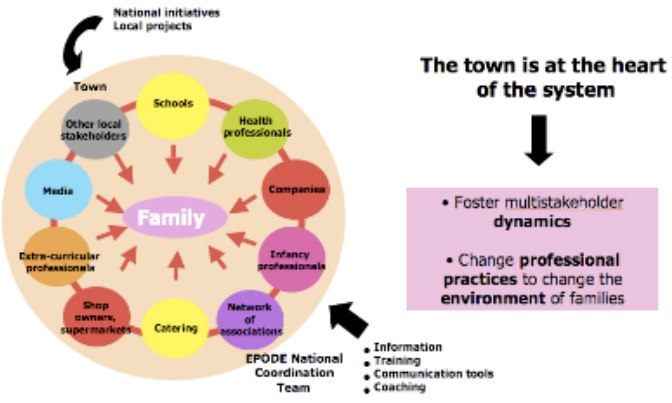
EPODE is an example of an effective intervention for reducing the prevalence of overweight and obesity amongst children



- ◆ Asnières
- Beauvais
- ▲ Béziers
- ✦ Evreux
- ✧ Meyzieu
- ✚ Royan
- ▬ Saint-Jean
- ▬ Thiers
- ◆ Vitry

In EPODE schools are only one component of the strategy

The town, at the heart of the system



- EPODE community interventions
- Local healthcare providers – Health and nutritional information, education and marketing
 - Local community organisations - Town meetings for both children and adults
 - Local sports organisations/NGOs – Information, education, marketing, provision of facilities and activities
 - Local restaurants – Menu adaptation, pedagogical and fun sessions
 - Local producers/retailers – Information and marketing
 - Various local stakeholders (general practitioners, pharmacists, shopkeepers, sporting and cultural associations) - Family activities focused on a 'healthy lifestyle'
 - Local media - Newsletters/press releases/media articles



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What we need to do

- Need an all encompassing strategy to provide cohesion
- Need a wider screening (identification) strategy
- Define and promote a referral pathway
- Define comprehensive set of interventions
 - Physical activity and secondary exercise initiatives
 - Food & nutrition advisory service
 - Engagement, behavioural change
 - Additional programs to offer choice & increase competition
- Define programs
 - Mixed set of interventions to boost interest and efficacy
- Broad partnership working
- Promote links between children & adult programs
- Increase funding to develop longer term plans



Next Steps

- Organisation
 - Form an Obesity Core Group reporting to health and wellbeing Partnership Board
- Details
 - What works, what is needed, where etc..
 - Priorities & timescales
 - Delegation of responsibilities
 - Measuring outcomes
- Funding