

Health Improvement Board Briefing

28 November 2013

Healthy Weight Strategy Development - Update and moving plans forward

For Action at November 2013 HIB

- Discussion of paper – Are there any issues arising in what we have outlined below regarding our proposed partnership work?
- Discussion of paper – As strategic influencers in your respective organisations, what key issues do you think we need to be discussing with your Chief Officers/relevant staff members?
- Please ensure that you have responded to our email request regarding a meeting with your Chief Officers/relevant staff members

The Health Improvement team in the Public Health Directorate are developing a healthy weight strategy that will come into effect in April 2014

This strategy will dovetail other areas of public health work, including reducing inequalities and mental health and wellbeing.

We will work in partnership with the Local Authority, OCCG, Public Health England and third sector colleagues in order to address the multiple dimensions of ensuring healthy weight in a population.

The strategy will broadly look to address four areas (see diagram below):

	The Interior (Subjective) World	The Exterior (Objective) World
Individual Level	How individuals think and understand themselves Individual values and ethics/morals <i>(E.g. I'm overweight and have been since I was a child, I'm happy with my size and see no reason to change)</i>	An individual's physical body and brain. This physical world can be objectively studied and produce scientific evidence <i>(E.g. The more calories that an individual consumes, the more exercise they will have to do to use them up)</i>
Collective (Population) Level	Our culture A society's beliefs and values <i>(E.g. Our society does not think that an obese population is a good thing to aspire to, but neither does it want to discriminate against people who are obese)</i>	The environment in which we live The economy, social structures, government policies, the world of business etc. <i>(E.g. The factors that make up an obesogenic environment)</i>

This approach considers healthy weight across the population. However, as weight management issues often manifest at an early age, the strategy will particularly focus on addressing overweight and obesity in early years and childhood. Current data show that obesity rates double between 6 year olds and 11 year olds, and this strategy will emphasize the need to work particularly closely with schools and parents to ensure we understand the most effective approaches to reversing this trend.

In our current approach, we have put particular emphasis on addressing issues in the top right hand quadrant, i.e. exterior issues for an individual. Many of our services work with individuals to achieve and manage a healthy weight through a combination of diet and exercise. These services also go some way to addressing interior issues for an individual (top left hand quadrant), offering psychological support as an adjunct to education on healthy eating and exercise.

Primary prevention, identification & early intervention in a health care setting is an effective way to influence and educate individuals on the best choices for their wellbeing. We will continue to work closely with CCG colleagues, to develop and improve opportunities for prevention in a healthcare setting.

The bottom left hand quadrant is an area that our obesity strategy has not considered in great detail previously. We have been involved and supportive of National campaigns such as Change 4 Life, which aims to impact our understanding of risk and how to achieve and maintain a healthy lifestyle. We will continue to work with National campaigns and explore how we might further work in this area at a local level.

Of particular interest for the members of the Health Improvement Board is the work associated with the bottom right quadrant. Exterior issues at a collective, or population, level relate to issues in our environment that promote or dissuade healthy living and wellbeing. The term obesogenic environment refers to a set of circumstances that are extremely conducive to obesity. For example a lack of opportunity to exercise (no green spaces, no availability of safe cycling lanes, lack of leisure services etc); high availability of food with a high fat and sugar content (more fast food businesses than healthy options, local shops stocking processed food rather than fresh produce etc.); a work-life balance that does not allow time for food preparation, leisure activities etc.

The Health Improvement Team propose to work with members of the Health Improvement Board and their respective colleagues in District Councils to plan a comprehensive approach to reducing the obesogenic aspects of the local environment. To this end, we have sent a request to all District Councils, asking to meet with the Chief Officers responsible for:

- Spatial planning
- Leisure
- Environmental Health

At these meetings, we aim to map out what is currently underway to address the obesogenic environment and how we can work together to build on and improve existing work. Examples of this might include:

- Health and wellbeing considerations for new planning developments
- Improving access and provision of leisure services for hard to reach groups
- Including an assessment of population health needs when considering granting of planning permission for new local businesses or street traders (e.g. food establishments)
- A healthy workplace approach – encouraging employees to adopt healthy lifestyles through promoting an active transport policy, healthy eating at work and regular exercise as part of the working day

Next Steps

- Following our meetings with District Council Chief Officers, we will draft a joint working plan and present it for approval at the January 2014 HIB