Bath & North East Somerset Council		
MEETING/ DECISION MAKER:	Children's Policy Development & Scrutiny Panel	
MEETING/ DECISION DATE:	12 th July 2016	EXECUTIVE FORWARD PLAN REFERENCE:
TITLE:	Childhood Obesity	
WARD:	All	
AN OPEN PUBLIC ITEM		
List of attachments to this report: Shaping Up! Healthy Weight Strategy 2015 - 2020		

1 THE ISSUE

- 1.1 The evidence is very clear. Significant action is required to prevent obesity at a population level to avoid creating "obesity promoting" environments as well as improving healthy eating and physical activity in individuals. Trends in childhood overweight and obesity are of particular concern. Obesity has been rising rapidly in children in England over the past 20 years the proportion of children classified as obese has nearly doubled for children aged 4- 5 years and increased more than threefold for 10 -11 year olds.
- 1.2 There is a rather persistent finding over a number of years in B&NES that our obesity figures for children in reception year are a little worse than national and regional averages but that our year 6 children have lower rates of obesity and overweight than their peers. Although the rate of obesity in children and young people is slowing down, further action is needed to address this issue.

2 RECOMMENDATION

- 2.1 The scrutiny panel is asked to note the Shaping Up! Healthy Weight Strategy and its relevance to Children and Young People's health.
- 2.2 The panel is asked to note that while B&NES compares reasonably well for children's obesity rates in comparison with similar areas we still have significant numbers of children whose health will be adversely affected as a result of their weight.
- 2.3 The panel is asked to endorse the importance of addressing obesity at a population level though creating health promoting environments and maintaining adequate health improvement services, including universal services, targeted

support and specialist services through this period of intense pressure on local government finances.

3 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

3.1 No specific requests are being made and so there are no direct resource implications. The scrutiny panel is asked to note that children's healthy weight in B&NES is underpinned by a wide range of services commissioned or provided by the council together with a range of interventions to reduce obesogenic environments such as active transport, provision of leisure and outdoor spaces, planning for the built environments and so forth.

4 STATUTORY CONSIDERATIONS AND BASIS FOR PROPOSAL

4.1 Nil specific

5 THE REPORT

Why is Childhood obesity an issue?

5.1 Around 1 in 4 (23.2% reception aged children (4 – 5 yr olds) in B&NES are an unhealthy weight (either overweight or obese). Around 1 in 11 (8.9%) reception aged children are obese.

Around 3 in 10 (29.5%) year 6 children (10 - 11 yr olds) in B&NES are an unhealthy weight. Around 1 in 6 (16%) year 6 aged children are obese.

Deprivation and ethnicity are significant factors in the levels of obesity amongst year 6 children in B&NES. Parental obesity is a significant risk factor for childhood obesity and half of parents do not recognise that their children are overweight or obese.

- 5.1 Being overweight or obese in pregnancy, childhood or adolescence has consequences for health in both the short and long term. Maternal obesity significantly increases the risk of foetal congenital abnormality, prematurity, still birth and neonatal death. Overweight and obese children are more likely to become obese adults and will have a higher risk of morbidity, disability and premature mortality in adulthood. Although many of the most serious consequences will not be apparent until adulthood, the effects of obesity e.g raised blood pressure, fatty changes, raised cholesterol and metabolic syndrome can be identified in obese children and adolescents. Some obesity related conditions and health risks can develop during childhood such as type 2 diabetes, early puberty, eating disorders, asthma, and skin disorders. There is strong evidence to link obesity with poor mental health in teenagers as a result of bullying, stigmatisation and low self esteem.
- 5.2 Achieving a healthy weight for children and young people is a complex issue and depends on factors in every part of life: the environment, our schools, social life and the families and people around us. The evidence is clear that policies aimed solely at individuals will be inadequate and that simply increasing the number of small scale interventions will not be sufficient to reverse the trend. We need significant effective action at a population level targeting elements of the obesogenic environment as well as improving nutrition and physical activity in individuals. Addressing these factors is dependent upon partnership working with local residents and a range of agencies if we are to have a lasting effect.

5.3 The Shaping Up! Healthy Weight Strategy for B&NES describes our partnership approach to promote healthy weight and tackle the rise in obesity. The strategy provides an overview of the current issues relating to healthy weight and focusses on what will achieve sustainable change. It draws on the main themes from the national Healthy Lives, Healthy People: A Call to Action on Obesity in England. At the time of writing the strategy a new national childhood obesity strategy was being drafted and was due for publication in spring 2016. This has been delayed due to the recent EU referendum. The local strategy will be reviewed to reflect any changes in policy once the national strategy is published.

Eating well and being physically active go hand in hand so this strategy should be read together with the B&NES Fit for Life physical activity strategy and the Local Food strategy.

- 5.4 The implementation of the Shaping up! Healthy Weight strategy is coordinated via a multi agency partnership which reports to the Health and Wellbeing Board.
- 5.5 The key objectives in the strategy which relate to children are to:
 - i Coordinate weight management pathways for pregnant women, children and young people.
 - ii Increase opportunities for physical activity in our daily lives (delivered via the fit for life strategy and partnership)
 - iii Promote a healthy and sustainable food culture enabling people to access affordable good food (delivered via the local food strategy and partnership)
 - iv Develop a workforce that is confident and competent in promoting healthy weight.
- 5.6 Achievement of these objectives will involve action across all stages of life including from conception with a particular focus on families. Action will be at three levels: universal (for the whole population), targeted (for those at risk) and specialist (for those who are already above a healthy weight)

6 RATIONALE

6.1 No new course of action is being suggested in this paper.

7 OTHER OPTIONS CONSIDERED

7.1 Children and young people's public health services are constantly being reviewed and updated according to new policy and guidance and in response to budgetary opportunities and pressures. Some of the relevant services come within the scope of "your care your way" and so are currently being reviewed through that process.

8 CONSULTATION

- 8.1 The Shaping Up! Healthy Weight strategy was subjected to full consultation processes during the development phase.
- 8.2 Issues and barriers that were raised during the consultation were lack of good facilities and activities for preschool children, need for improved activities (indoor and outdoor) for young people, improved transport for disabled children, cost of activities, lack of awareness of services, fear of being judged as a parent, reacting badly to being told their child is overweight.

RISK MANAGEMENT

9.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance.

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Background papers	Shaping Up! Healthy Weight Strategy 2015 -2020 (attached) Fit for Life strategy 2014 – 19 Local Food strategy 2014 – 17	
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