



**Northamptonshire
Health & Wellbeing Board**

JSNA Summary 2013

Obesity

Delivering meaningful, healthier, longer lives for the people of Northamptonshire

Introduction

- Obesity occurs when excess body fat has accumulated to the extent that it reduces life expectancy or increases the risk of health problems.
- Obesity increases the risk of many serious diseases including coronary heart disease, stroke, diabetes and cancer.
- Obesity also leads to disability and social care needs, and mental health problems.
- Obesity is more common in poorer people and there are variations in obesity prevalence between and within ethnic minority groups.
- The costs of health and social care for people with obesity are large and growing, both nationally and in Northamptonshire.
- One of the priorities in *In Everyone's Interest*, Northamptonshire's Health and Wellbeing Strategy 2013-16, is to reduce levels of childhood obesity.
- Effective interventions to tackle obesity in children and adults are yet to be developed and implemented to scale and efficiently in the County.

Key Points

- Obesity is common. About a quarter of adults in Northamptonshire are obese, a similar proportion to England as a whole. Obesity is more prevalent in Wellingborough than elsewhere in England.
- Almost one in ten children in Northamptonshire is obese when they start school, and nearly a quarter are obese or overweight. This proportion has risen recently.
- By year 6, more than one in six Northamptonshire children is obese and a third are overweight or obese.
- The National Institute for Health and Care Excellence (NICE) has published guidance on tackling obesity at a local level.
- Northamptonshire's obesity strategy 2010 to 2014 [Healthy Weight, Healthy Lives](#) set out the County's approach to preventing obesity, providing support for those who already have weight problems and encouraging healthy lifestyles in the population as a whole. However, the strategy is yet to be fully implemented.
- Northamptonshire County Council spends £351,000 per year on weight management services, comprising £181,000 on services for adults and £170,000 on services for children.
- Several weight management services are in place, though one has recently been de-commissioned. They appear not to be fully co-ordinated and sometimes are not well targeted. Many people do not attend or quickly cease attending. The extent to which the services comply with national guidance about how to support weight loss is not clear, the weight loss is usually too little to make a substantial difference to health and there is no information on participants' subsequent weight loss or gain.
- There are no audits, inspection reports, surveys of the views of service users or service evaluations.
- A survey of public opinion in Northamptonshire was conducted in July 2013. The reported barriers to having a healthy weight were commitment, convenience, cost, motivation, time, education, opportunity, friends and family.
- Total spending on the prevention and treatment of obesity in Northamptonshire is not known.

Recommendations

1. The Northamptonshire Health and Wellbeing Board should oversee the development of a coherent, community-wide, multi-agency approach to address obesity prevention and management addressing both adults and for children. The approach should include
 - raising awareness of the health problems caused by obesity and the benefits of being a normal weight
 - training to meet the needs of staff and volunteers, prioritising those who are working directly with local communities
 - influencing the wider determinants of health and healthy weight. This will include ensuring access to affordable, healthier food and drinks, and green space and built environments that encourage physical activity.
 - encouraging activities for both adults and children in a broad range of settings
 - providing lifestyle weight management services for adults, children and families
 - providing clinical services for treating obesity. This should include education for individuals who liaise with children and adults, so that every contact counts.

Health improvement partners are listed in Appendix 1 of [the Northamptonshire obesity strategy](#). They should

- integrate this work within the joint health and wellbeing strategy and broader regeneration and environmental strategies.
- provide funding and other resources for activities that make it as easy as possible for people to achieve and maintain a normal healthy weight. This includes, for example, activities to improve local recreation opportunities, community safety or access to food that can contribute to a healthier diet.
- look for opportunities firmly to engage a wider range of staff in tackling the obesity epidemic, for example health visitors, environmental health officers and community pharmacists
- involve the local community through Local Healthwatch, community involvement teams and community leaders. This provides a means to make clear the connections between obesity and other local concerns, such as crime, the siting of hot-food takeaways and alcohol outlets, the lack of well-maintained green space and pavement parking.
- ensure funding and resources beyond one financial or political cycle and have clear plans for sustainability
- optimise the positive impact and mitigate any adverse impacts of local policies on obesity levels. This includes strategies and policies that may have an indirect impact, for example, those favouring car use over other modes of transport, or decisions to remove park wardens that affect people's use of parks.
- assess regularly local partners' work to tackle obesity, taking account of any relevant evidence from monitoring and evaluation. In particular, they should ensure clinical commissioning groups' operational plans support the obesity agenda within the health and wellbeing strategy.

Local government and NHS employers in Northamptonshire should act as exemplars in developing internal policies to help staff, service users and the wider community achieve and maintain a healthy weight.

[NICE guidance](#) will be of value in this work.

2. The existing pattern of weight management service provision needs a review, which addresses the following questions:

- Who is the target population for each service?
- What data and information are required about service users? Specific information on disability, ethnicity, gender and age are needed to ensure that services are accessible.
- What do existing and potential service users want? What are their views of the existing service?
- How can the service be developed with input from the local community?
- How can the service be made attractive enough to secure adequate uptake and completion? What pattern of venues, times and interventions best achieves high uptake and maximum impact?
- How can more men be engaged by the services?
- Which packages of interventions are most effective and cost effective?
- What is the most appropriate intensity of programmes? How many interventions make up an effective programme? What percentage of the population should be reached?
- How does the commissioner ensure and confirm the service complies with national guidance?
- What is an acceptable weight loss target? How can the provider be incentivised to achieve it? Is there a place for payment by results, whereby the providers' revenue depends in part of participants achieving and maintaining weight loss?
- Should these services be commissioned separately, or as part of a wider lifestyle improvement service which also tackles smoking, physical activity, mental health and resilience and other community development priorities?

The National Obesity Observatory has published [a standard evaluation framework for weight management interventions](#). It will be of help in Northamptonshire in

- commissioning services of high quality
- assessing their effectiveness
- identifying gaps in provision.

Key early priorities are:

- Reviewing the weight management service so it is correctly targeted and effective
- Taking action on areas within the control of statutory partners, such as promoting healthy eating and physical activity among local authority and NHS staff
- Beginning work on a comprehensive obesity strategy.

This needs assessment should be read in conjunction with the reports on diabetes, cardiovascular disease and cancer.