HEALTH AND WELLBEING BOARD

11 FEBRUARY 2014

Title:	Obesity Summit	
Report of the Director of Public Health		
Open Report		For Decision
Wards Affected: NONE		Key Decision: NO
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Sponsor:

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Summary:

The Obesity Summit, held on 16 December 2013 concluded with five main recommendations for 'industrial scale' action to reduce overweight and obesity (and its impact on chronic disease and premature mortality) across the borough. These are summarised below.

Recommendations

- 1. Engagement Engage at least 4000 inactive residents physically active enough to meet the minimum recommended weekly physical activity target using the message that 'fit and overweight' is acceptable, rather than focusing on 'how to lose weight'.
- 2. Incentivisation Offer incentives on an industrial scale to motivate groups of people to meet activity targets use incentives that focus on local charities or causes that will engage large numbers of people.
- 3. Early Identification and Intervention Engage with all GP practices in developing chronic disease pathways that have a physical activity component that is integral to delivery of care, and in actively referring every patient who is overweight/obese and/or has a chronic illness to one of our lifestyles prevention programmes.
- 4. Marketing Make use of more effective marketing, with borough straplines (eg 'Do it for Dagenham') and positive images that engage people, and to target specifically those communities that do not access our current programmes, e.g. men accessing weight loss programmes.
- 5. Environment and Planning More assertive promotion aimed at increasing the communities use of green spaces, and continue our local planning regime to improve the health promoting environment.

Reason(s)

The Obesity Summit was as a result of a decision taken by the Health & Wellbeing Board in October 2013. The aim was to achieve a collaborative strategic response for effective industrial scale healthy weight programme to incentivise residents to adopt a healthier lifestyle.

1.0 Background

- 1.1 Barking and Dagenham the bottom 10% of local authorities in the national league tables on the prevalence of adult and child obesity as well as child and adult participation in physical activity.
- 1.2 28.7% of adults in Barking and Dagenham are obese (BMI of 30+) Significantly higher than both national and regional rates, amounting to a total of 40192 of Barking and Dagenham's adult population.
- 1.3 Nationally, Barking and Dagenham has the fifth highest proportion of overweight and obese children in Reception class (26.7%) and the fourth highest proportion in Year 6 (42.2%) when ranked by local authority.
- 1.4 Significant investment has been made in the borough, past and present, on a range of healthier eating and sport/leisure programmes but without a co-ordinated strategic approach to the delivery of these programmes the impact on reducing obesity levels has been minimal.
- 1.5 As a result a decision was taken by the Health and Wellbeing Board that a summit be held to advise the Board on concerted effective action.
- 1.6 The aims of the summit were to engage all local partners in revitalised action to reduce obesity over the next 18 months, and to agree a strategy for achieving that.

2.0 The Summit

- 2.1 The Summit took place on 16 December 2013 at The Technical Skills Academy in Barking and engaged participants in a combination of interactive workshops and collective discussion with approximately 54 delegates in attendance.
- 2.2 Dr William Bird, GP, reported on how other boroughs have motivated large proportions of residents to become more physically active through large-scale incentivised physical activity programmes, with 'buy-in' from most GPs and cooperation from schools and leisure services.
- 2.3 Four workshops/interactive events were held as follows:
- i. Psychological insights into obesity.
- ii. Planning, regeneration and saturation.
- iii. Reinvigorating the specialist, clinical service offer.
- iv. Tackling obesity a whole systems approach.

- 2.4 Participants then engaged collectively in a plenary session making recommendations for the most effective action on obesity in the borough. The session asked participants four key questions:
 - i. How we can get the borough more active and eating more healthily?
 - ii. How should we use incentives?
 - Iii Who should we target?
 - iv. How should we target them?
- 2.5 The information was collated and recommendations that ensued are summarised below.

3.0 Recommendations

- 3.1 Engagement Engage at least 4000 inactive residents physically active enough to meet the minimum recommended weekly physical activity target using the message that 'fit and overweight' is acceptable, rather than focusing on 'how to lose weight'.
- 3.2 Incentivisation Offer incentives on an industrial scale to motivate groups of people to meet activity targets use incentives that focus on local charities or causes that will engage large numbers of people.
- 3.3 Early Identification and Intervention Engage with all GP practices in developing chronic disease pathways that have a physical activity component that is integral to delivery of care, and in actively referring every patient who is overweight/obese and/or has a chronic illness to one of our lifestyles prevention programmes.
- 3.4 Marketing Make use of more effective marketing, with borough straplines (eg 'Do it for Dagenham') and positive images that engage people, and to target specifically those communities that do not access our current programmes, e.g. men accessing weight loss programmes.
- 3.5 Environment and Planning More assertive promotion aimed at increasing the communities use of green spaces, and continue our local planning regime to improve the health promoting environment..

4.0 Conclusion

- 4.1 Barking and Dagenham face significant challenges in tackling obesity in both adults and children. If we are to achieve really sustainable behaviour change, we need to develop integrated programmes that draw on the latest behavioural change research and motivate residents to live a more healthy and sustainable lifestyle in today's environment. Both personal incentives and large scale actions have a role to play, with public and private sector partners working together for the benefit of the community.
- 4.2 The challenge to both commissioners and providers is the need to incorporate appropriate behaviour change approaches into service design and delivery in care and sickness services as well as health and wellbeing services, recognising that, for example, healthy eating and appropriate exercise may be as important to recovery as diligent adherence to taking recommended medicines.