

Select Committee on Regeneration, Culture and Adult Education

Report of the Director of the Urban Environment

Obesity Strategy Annual Monitoring Report: July 2005 – July 2006

Purpose of Report

1. To consider the Obesity Strategy Annual Monitoring Report with specific reference to those areas identified as coming within the terms of reference of this Select Committee and in particular the areas that have been identified as progressing slowly.

Background

2. Obesity is now recognised as a major public health problem requiring action by both the NHS and Local Government.
3. It is estimated that in Dudley approximately half of the adult population (86,500) is either overweight or obese – a figure which has increased rapidly from approximately a third only 12 years ago. Approximately 41,500 adults in Dudley are estimated to be obese. Similarly, overweight and obesity has increased in children. There are likely to be of the order of 8 – 9,000 obese children in Dudley and approximately 8,000 or so who are overweight.
4. The Government has set a Public Service Agreement (PSA) target to:

‘Halt the year on year rise in obesity among children under 11 by 2010 in the context of a broader strategy to tackle obesity in the population as a whole’

This has required the Local Strategic Partnerships to develop strategies to tackle obesity and also incorporate actions and targets within the Local Area Agreement. (LAA).

5. Specifically tackling obesity forms one of the outcome areas in the ‘Healthier Communities and Older People’s Block of the LAA with the current draft containing the following range of indicators that are closely linked to the Obesity Strategy:-

Block – Children and Young People

- Numbers of new sustainable (safer) routes to schools
- Number of different sustainable (safer) routes to schools
- Number of children walking or cycling to school as percentage of total number of children at school (primary and secondary)
- Halt in the rise in obesity levels in children and young people and a reduction in the levels of obesity for those already identified as clinically obese
- Numbers of children aged 11 who are considered obese through the measurement of Body Mass Index
- Frequency of physical activity amongst school aged children and young people.

Block – Safer and Stronger Communities

- Participation in local authority sport and recreation
- Representation of 11 – 19 year olds participating
- Representation of social class D/E participating
- Representation of over 60 year olds participating
- Representation of BME participating
- Percentage of participation in recreation/leisure provision by people with disabilities
- Percentage of population volunteering in sport and active recreation for at least one hour per week.

Block – Healthier Communities and Older People

- Reduce all-age all-cause mortality rates males and females
- Reduce premature mortality rates from heart disease and stroke related diseases so that the absolute gap between the national rate and the rate for the district is reduced by (x)% by 2010
- Cancer mortality rate
- Circulatory disease mortality rate
- Reducing (halting the rise in) Obesity
- Enlivened and transformed parks and green spaces
- Proportion of the total population within a 20 minute walk of 3 different designated activity centres, at least one of which has achieved the recognised QA standard
- The number of participants recorded at supervised sessions taking place in designated 'activity stations'
- Number of recorded obese adults losing weight through a personalized weight management programme, which includes an exercise programme at designated 'activity stations'
- Number of community volunteers for health hours spent on physical activity (all physical activity hours)

Fit for Work – The Public Sector Leading by Example

- Number of employees per annum in NHS, DMBC, Police participating

<p>in workplace based healthy living/fitness programmes</p> <ul style="list-style-type: none"> ▪ Number of employees per annum in NHS, DMBC, Police, undertaking a minimum of 5 x 30 minutes physical activity per week ▪ Percentage Social Class 6 and 7 participating in Workplace-based Health Living Programmes. <p>Nutrition: -</p> <ul style="list-style-type: none"> ▪ Number of food outlets receiving the Dudley Food for Health Award ▪ Proportion of adults eating 5 or more portions of fruit and vegetables per day ▪ Number of 'Get Cooking' ▪ Number of Dudley MBC employees targeted by healthy eating roadshows ▪ Number of Dudley MBC employees attending healthy eating roadshows (should it be PCT)
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6. The Dudley Health and Well Being Partnership (DHWP) established a multi-agency Task Group to develop this work aimed at making 'The Healthy Choice The Easy Choice' across a range of identified areas as follows:

- The wider physical and cultural environment – to address the context within which individuals can make lifestyle changes that reduce obesity such as advertising / counter-marketing / regulation or economic approaches such as the potential to use taxation as a vehicle to promote healthy eating, and also the purchase of health and fitness products.
- Community (prevention) – Education / awareness campaigns including measures to address childhood obesity e.g. breastfeeding; avoiding the use of sugars; physical activity measures; limit television viewing; school-based initiatives such as Health Promoting Schools, etc.,
- Community (weight loss) smoking cessation programmes, diet, physical activity and behaviour therapy as well as the use of specialist drugs.
- Primary Care prevention and weight loss – using more clinical measures such as drugs to assist individuals using primary care services.
- Hospital – services provided as direct forms of treatment to counter obesity in its most serious forms.

7. The 'Dudley Charter for Action' was presented to, and endorsed by, Cabinet at its meeting on 14 June 2006 and identified a range of activities and actions to be undertaken by the Council in support of the Strategy.

8. **An Overview of Progress Against 2006 Targets (as at July 2006)**

At its meeting on 18 January 2007 the Select Committee on Health and Adult Social Care considered the first annual monitoring report for the

Obesity Strategy, with specific reference to targets/actions that were identified as falling within the responsibility of the Council to deliver.

9. In considering the progress report, in particular those areas where this was slow or difficult the Committee assigned the actions to relevant Select Committees of the Council along with the recommendation that these Committees be asked to consider the report and make recommendations to address the problems identified.
- 10 So far as this Select Committee's terms of reference are concerned good progress was identified in the following areas:-

- Parks as physical activity centres; Key parks are now firmly established as activity centres with summer programmes, marked walks and other activities. Plans are in place to roll out to all parks.
- Increasing activity of children and young people:- through Active Dudley and the Health Promoting School programmes and the achievement of 100% coverage of schools in school sports partnerships across the Borough.
- National cycling training: a successful pilot at Hillcrest school has been completed and will be rolled-out by 2007.
- An accredited healthy lifestyle course is being piloted with learning disability clients.

11. However, the action plan is a very challenging one and as a result some areas are finding progress slow or difficult. There has been less good progress towards:

- Leisure Facilities: The introduction of the smartcard completed and over 5000 cards have been issued to date
- The outcome of the health impact assessment has been to passport funds from Sport and Recreation revenue budget to Brierley Hill Community Partnership to deliver physical activity and sports projects

12. **An Overview of Progress on the 2007 – 2010 Targets**

Progress is already being made towards a number of later targets. For example, the expansion of the 'get cooking' programme, NHS and DMBC travel plans, implementation of walking routes, exercise and get cooking on referral schemes, children achieving 4 hours physical activity per week, food provision, food policies, cooking classes, DFHAs and implementation of the healthy living blueprint within schools.

Early warning signs for **problem areas** include:

- Developing healthy workplace: Work has progressed and corporate membership of Leisure Centres is now available to employees from PCT and DMBC.
- Difficulties in accessing allotments for use by school children.
- Established targeted physical activity sessions for overweight adults in leisure centres will be rolled out during 2007 as part of MEND project.

Finance

13. There are no direct financial implications contained within this report.

Law

14. The Council have powers to do anything which it considers is likely to achieve the promotion or improvement of the economic, social and environmental well-being of its area under Section 2 of the Local Government Act 2000.

Equality Impact

15. The Health Inequalities Strategy is fundamentally aimed at equality issues with a focus on health and its wider determinants across the whole local population now and in the future and this is the case for the Obesity Strategy.
16. In terms of race impact assessment, the Obesity Strategy supports activity in Dudley to address the issue of obesity as it affects any group within the Borough.

Recommendations

17. (i) That the Select Committee for Health and Adult Social Care considers the progress report relating to the implementation of the Multi-Agency Strategy to tackle Obesity.



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