

### **Obesity in year 6 – short briefing**

**April 2017** 



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> Version: 01 Last Updated: 27 April 2016



# 1. What do we know about the risks and outcomes associated with obesity at year 6?

Although there are people in all population groups who are overweight or obese, obesity is related to social disadvantage (Marmot Review). Children with a parent who is obese are more likely to have weight problems and adolescents are likely to become obese adults. The areas in Kent with highest rates are shown within the Health and Social Care maps. <u>http://www.kmpho.nhs.uk/health-and-social-care-maps/</u>

Apart from increased risks to the mother's health (e.g. through gestational diabetes) obesity is also associated with large-sized babies (macrosomia). Children of obese mothers are at an increased risk of later obesity themselves.

Data on obesity and disability is not robust. However, analysis shows that children who have a limiting illness are more likely to be obese or overweight, particularly if they also have a learning disability. A child with both a limiting illness and a learning disability is over one and a half times as likely to be obese or overweight as a child with neither. Those children who have a limiting illness are one and a half times as likely to be obese as children with neither, whilst a child who also has a learning disability is twice as likely to be obese.

Whilst levels of overweight amongst year 6 pupils in Kent are fairly similar to those found in Year R, there is a striking difference in terms of obesity with the proportion of Year 6 pupils measured as obese almost twice that of year R pupils.

In Kent there are differences evident in levels of obesity in childhood by sex, deprivation, ethnicity and rurality. Inequalities are particularly marked by ethnicity and deprivation.

The gap between the most and least deprived Year 6 pupils in Kent has almost doubled from 6.6 percentage points in 2008/09 to 12.4 percentage points in 2014/15. The gap between Black and White Year 6 pupils in Kent has also dramatically increased from 5.0 percentage points in 2008/09 to 12.1 percentage points in 2014/15.

#### 2. What works to prevent year 6 children from becoming obese?

The evidence base for preventing obesity is not well developed, but within the Healthy Child programme there are actions that should help prevent obesity:

- identifying early those children and families who are most at risk (e.g. where either the mother or the father is overweight or obese, or where there is rapid weight gain in the child)
- encouraging an active lifestyle
- 5–16-year-olds should be given the opportunity to take part in two hours of curriculum PE each week, plus up to three hours of school and community sport

- good food habits at home and school are essential to support healthy weight and attitudes to nutrition
- schools are encouraged to increase the number of children eating a school lunch. This is particularly important for children from poorer families, and schools should seek to ensure that all children eligible for free school meals take up their entitlement
- schools are required to ensure that all food provided in schools complies with standards that support a balanced nutritional intake
- in addition, the promotion of Change4Life messaging across all settings, encouraging small changes in behaviour
- for some families, skilled professional guidance and support will be needed. The health professional should work in partnership with the family setting small goals, using strength-based methods and exploring family relationships and earlier life experiences
- following the measurement of children the Schools Public Health Team contact the parents and carers of children who have been shown to be at risk of being an unhealthy weight to provide support and advice
- the Schools Public Health Team can offer up to four sessions to discuss weight, this is at Tier 1 level or signpost or refer into other community interventions or to Tier 2 Family Weight Management programmes

#### 3. Questions you might need to ask

- How might your organisation have a role in supporting families to be more active and make positive food choices?
- Have all staff in your organisation who come into regular contact with families received appropriate training to ensure they are confident to have a conversation about weight?
- Do staff have information about the support that is available if families need more help, for interventions such as cooking, increasing physical activity and understanding food labels, where these are available?
- Do organisations have champions who can demonstrate evidence of appropriate knowledge and skill?
- Has the LCPG plans to support healthy weight, are these shared with the Health and Wellbeing Board and vice versa?
- Are there robust partnerships locally that are co-ordinating the response to childhood obesity in your District?

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#### 4. Who to involve?

- Children and families
- Early Help
- School staff and those working with children not in school
- School Public Health Team
- District and Borough Councils
- Primary Care Teams
- Kent Community NHS Foundation Trust
- Leisure Centres
- School Sports Development Officers
- Specialist services e.g. dietetics, paediatrics

#### **Resources/further information**

www.kent.gov.uk/change4liferesources

http://www.kpho.org.uk/search?mode=results&queries\_exclude\_query=no&queries\_excludefromse arch\_query=yes&queries\_keyword\_query=obesity

www.noo.org.uk

http://pathways.nice.org.uk/pathways/obesity