



Public Health
England

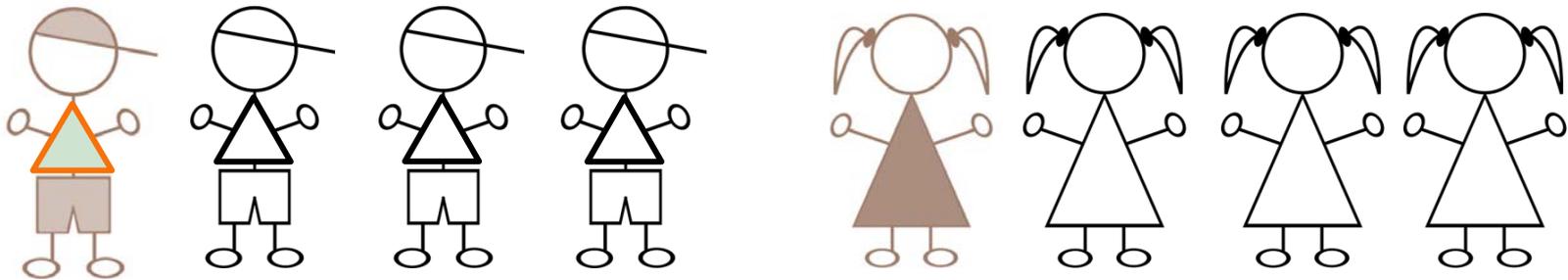
Childhood Obesity in London

Professor Paul Plant
Deputy Director Health Improvement
Public Health England - London

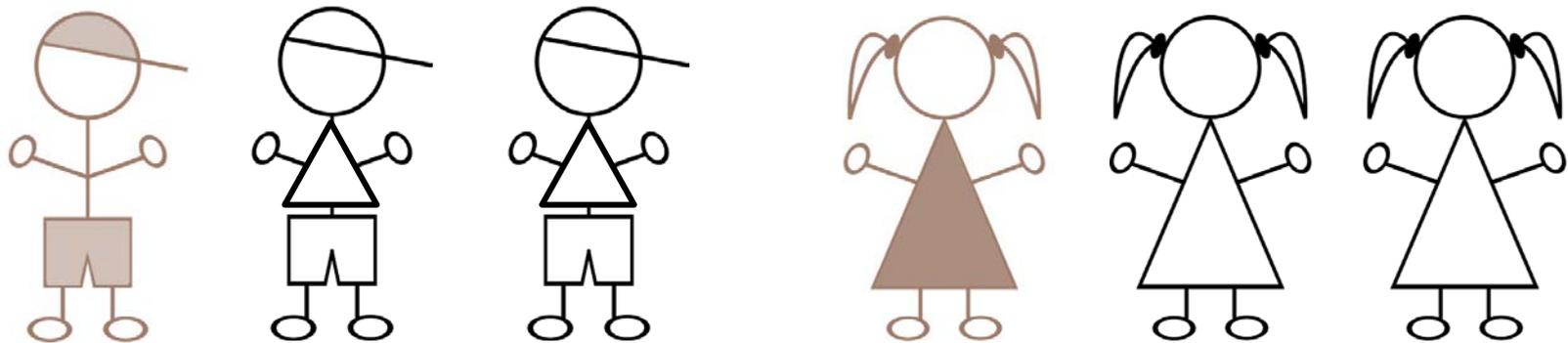


Almost one in four children in Reception and more than one in three children in Year 6 are overweight or obese

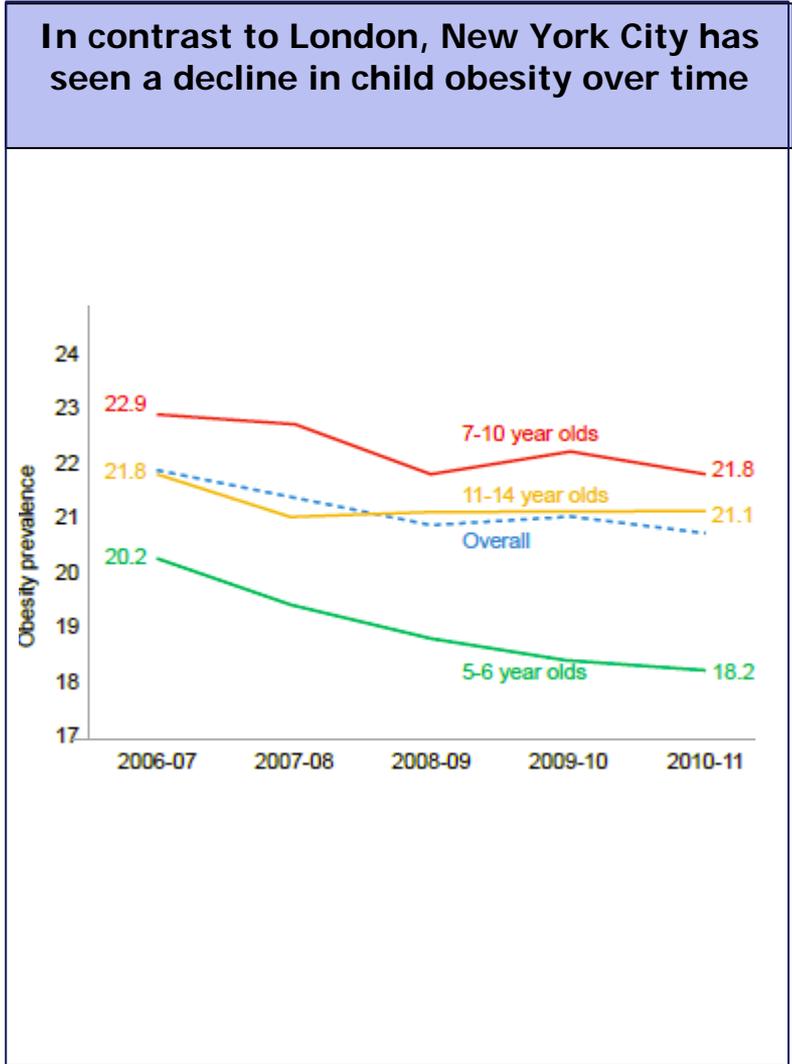
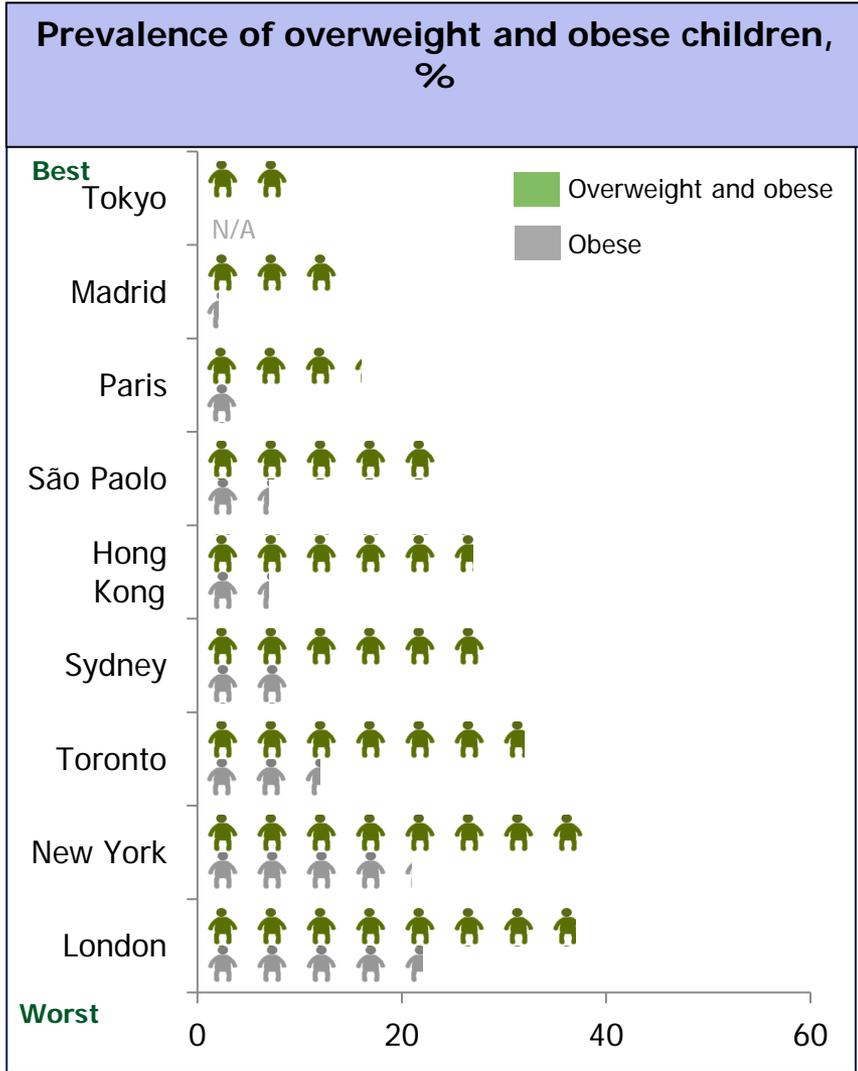
In Reception (4 to 5 years): London 23%, England 22.2% overweight or obese



In Year 6 (10 to 11 years): London 37.4%, England 33.3% overweight or obese



London has a high rate of child obesity compared to other global cities



In Tokyo, obesity is classed as BMI≥25 instead of 30, therefore separate overweight/obesity measures are difficult to obtain: % children with BMI ≥ 30 was not available in Tokyo,



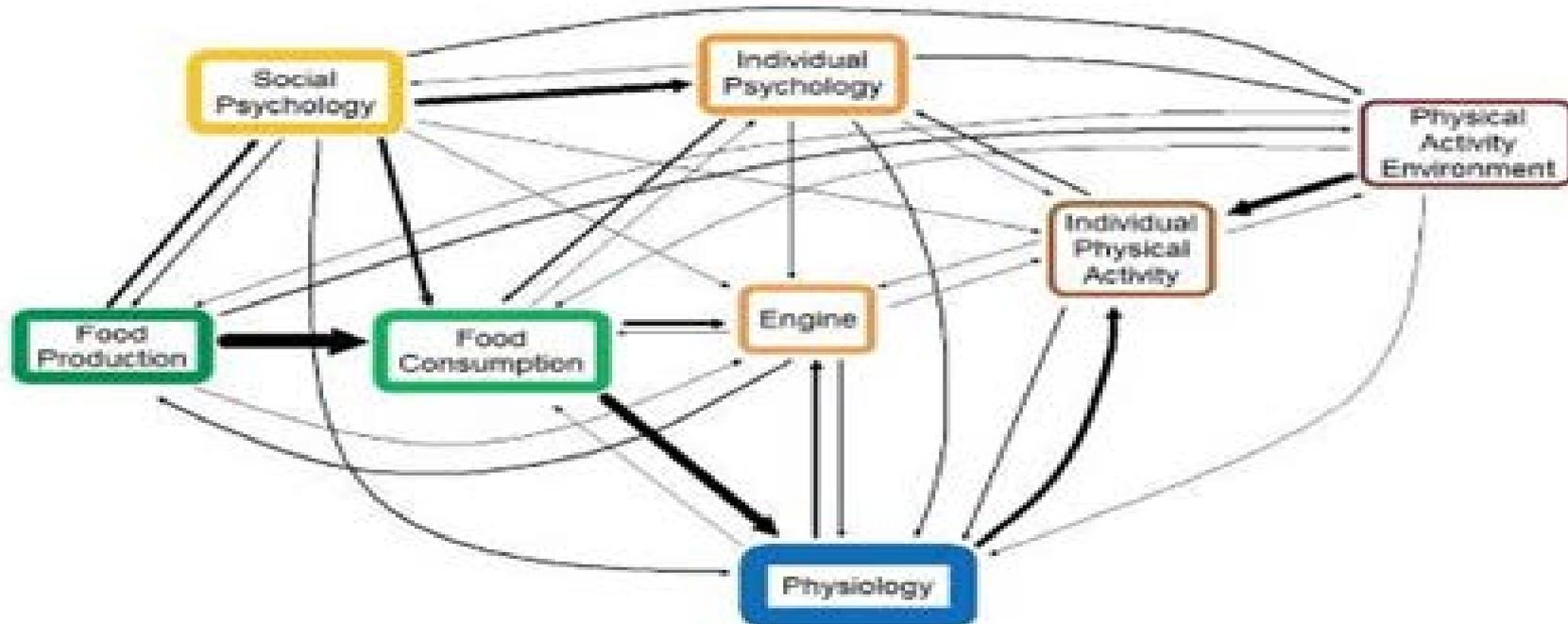
Why are our children getting fatter?

- Everyone has a theory! The Foresight Report maps the whole picture
- Determinants multi-factorial & operate in complex 'interactive' ways
- Behaviours are learnt and habits formed early
- We make choices but not in circumstances of our own making
- Great increase in the prompts and opportunities to consume low price calories (eg fast food)
- Demise of older eating habits (eg role of food in the family) and start of new ones
- Physical activity patterns are changing
- Obesity is an inequalities issue



Why are our children getting fatter?

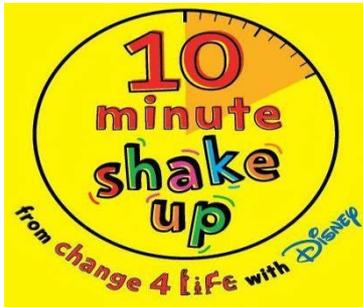
.....A simplified version





What does the evidence tell us?

- There is no simple or single solution: need whole system approach
- Social marketing can work if based on consumer insight and power of different media



148 m cubes of sugar taken out of diet (2015)

104 m additional minutes of activity reported (49 minutes per family) (2014)

- 'Upstream' interventions have more impact but are more difficult to agree
- Intervening early in life more acceptable and more cost effective
- Personal support services may be too costly in future?



What are boroughs doing?

- **Some adopting a system leadership approach , multiple upstream interventions (eg Three boroughs, Tower Hamlets, six east London boroughs)**
- **London Food Board and School Food Trust sponsoring whole system approaches (Food Flagship Boroughs: Lambeth & Croydon)**
- **Many supporting school based action, with GLA Healthy Schools programme active in over 1000 schools**
- **Opposite end of spectrum some stuck at the personal service intervention ‘end’ only providing face to face support (eg weight management)**



School and wider food environment

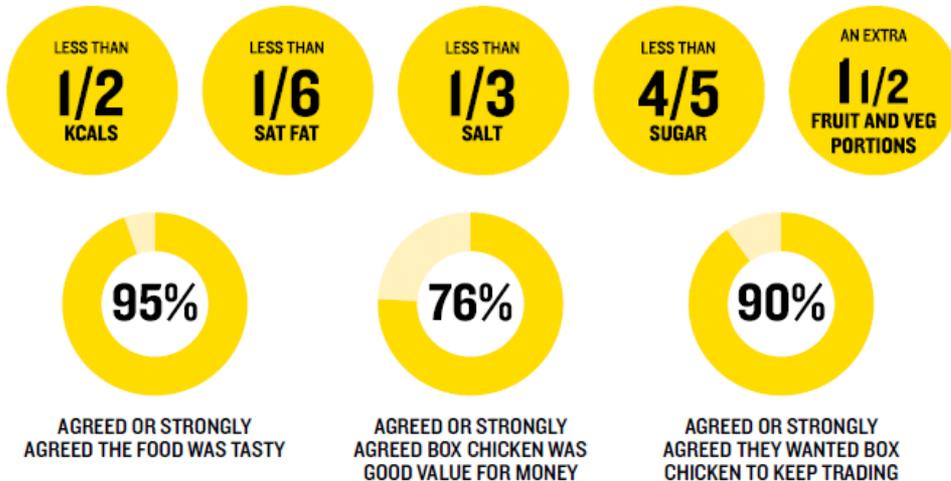
- 40% of children eat school meals - in some areas, school meals make up just 15% of meals consumed by school age children
- Fast food outlets need targeted action as they are an important and popular food source for children and young people (38% of Newham teenagers eat fast food once a week and 12% eat fast food every day)
- Significant proportion of students' fat, salt and sugar intake comes from these foods, with a standard meal containing 58% RDA kcal, 51% RDA saturated fat and 52% RDA salt
- Some shops use 'student offers' specifically to target school children
- Interesting work by City University looking at fast food and what young people think in Haringey.



Case studies in London have demonstrated the popularity and feasibility of healthy alternatives

Box Chicken pilot, Newham

- We Are What We Do demonstrated the viability of a healthy, popular and financially sustainable alternative to existing fast food outlets through the Box Chicken pilot in Newham.
- Mobile catering unit set up from 12-5pm Monday to Friday for a month.
- Four recipes developed, all in line with PHE healthy eating guidelines.
- Target audience: students at three local schools and members of the local community. Many students also took boxes home for their parents.
- Hot, cheap and quick one pot meals served.
- During the one month pilot with one van, Box Chicken made £970 profit, excluding the caterer salary. 50% more meal sales would be needed to break even. Box Chicken would be likely to reach profitability with a longer trading period and economies of scale. The council waived trading fees* for operation.



Comparing a 300g Box Chicken meal and 200ml of orange juice to an original recipe meal at KFC.



* Newham street trading licence £25 application + £24/week



Health democracy in action

- Health improvement activities best directed and lead by leaders close to the communities they serve - you have legitimacy and understanding to take action on their behalf.
- A role for national and regional organisations in support and to take action that can only be done at that level (eg reformulation of sugar in drinks).
- Public Health England:
 - Provides evidence and health intelligence (eg recent sugar in diet recommendations)
 - Leads national social marketing activities
 - Contributes to pan-London partnerships



Better Health for London

Ambition

- Give every child the best start in life, taking a family based approach
- Work with schools, making London schools the healthiest in the country
- Reduce the proportion of sugar in children's diet by 50%
- Develop healthy urban environments for children to grow and develop
- Work together across London with new partners to find innovative solutions



Better Health for London/ LHB

We will make collective progress if we:

Focus on children – give every child the best start in life and make London a great way to raise a family that is active and eats healthily.

Supporting families – to meet this aspiration recognising the reality of bringing up children in different parts of the city.

Uniting - agreeing a common set of ambitions for the city – to focus our collective efforts and scarce resources, recognising that each agency will make local decisions.

Supportive messaging - supporting messages that are positive and consistent so wherever a family lives they are clear about what they can do for their children to ensure they have a healthy diet and are active.

Doing things together - a small number of things where action at a pan-London level makes the most sense



Supporting local action

- London Prevention Board - childhood obesity a priority
- DPH for Lewisham leads for Directors of Public Health
 - Active London obesity leads network
 - New London obesity group inaugural meeting 8th October
- Work being commissioned where evidence weak (eg return on investment)
- Sector led improvement on obesity, led by London Association of Directors of Public Health
- Working with new partners eg London Sport, Jamie Oliver Foundation, planners, transport etc - building strategic alliances and relationships
- PHE have developed tools, data, evaluation guides, economic assessment aids etc to help local authorities plan obesity strategies:
<https://www.noo.org.uk/>



What next?

- By working together we will have greater impact
- Let's be innovative together – if we always do what we've always done.....and learn collectively
- We will be failing our children if we don't find innovative solutions
- London can lead the way in turning the tide on obesity and giving every child the best start in life

