

<b>Healthier Communities Select Committee</b>			
Title:	Information item: Lewisham Whole System Approach to Obesity		
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Class:	Part 1 (Open)	28 June 2016	

## **1. Purpose**

- 1.1 To seek HCSC member support and engagement in Lewisham's Whole System Approach to tackling obesity and to delivery of a Lewisham Whole System Obesity Action Plan.

## **2. Recommendations**

- 2.1 Members of the Healthier Communities Select Committee are asked to endorse and give support to the proposed draft action plan.

## **3. Background**

- 3.1 Lewisham has a high prevalence of children and adults with excess weight: over a third of 10-11 year olds, a quarter of 4-5 year olds and nearly two third of adults being overweight or obese. Less than half of the adult population meet the '5-a-day' recommendation for fruit and vegetables. Over a quarter of adults are classed as inactive - doing less than 30 minutes of moderate intensity physical activity per week.
- 3.2 WHO first sounded the alarm on the global obesity epidemic in the 1990s, and it has only very recently shown signs of leveling off, but not decreasing. The world's scientific community has concluded that the obesity epidemic is a 'normal response of normal individuals to an abnormal environment'. Whilst there is no single silver bullet solution, and encouraging individuals to live healthier lifestyles should form part of the solution, most experts now agree that only a whole system approach offers a real chance of turning the tide on the epidemic. A whole system approach to obesity not only promotes behaviour change directly, for example through weight management programmes, but it brings about healthy eating and increased physical activity indirectly by creating a less obesogenic environment in which people live. This involves and engages stakeholders across society and includes schools, the NHS, food retailers, food manufacturers and suppliers, town planning, transport, sport and leisure, the voluntary sector, and many other sectors.
- 3.3 **National Whole System Obesity Pilot** - In 2016 Lewisham Council was awarded National Pilot status for a whole system approach to tackling obesity; one of only four local authorities in the country and the only London Borough. This three year pilot does not bring with it any direct funding, but a team of obesity and physical activity experts from Leeds Beckett University have been commissioned to support

and advise the pilot sites on the design and implementation of a whole system approach to reducing population levels of adult and child obesity. It is intended that not only will the research team bring learning and evidence of best practice to the pilot local authorities, but that the lessons learnt will be shared nationally.

- 3.4 Pan London Childhood Obesity Sector Led Improvement - In late 2015 / early 2016, Lewisham led a Sector Led Improvement (SLI) Programme on childhood obesity involving all London Boroughs. As part of the SLI each borough completed a self-assessment and engaged in a peer challenge event with 4-5 other boroughs. The interim results have been published, and the recommendations, together with the learning from the self-assessment and the peer challenge, has allowed Lewisham to develop a draft Whole System Obesity Action Plan for the next 2-3 years.

#### **4. Policy Context**

- 4.1 The Foresight report on Tackling Obesities (2007) identified that obesity is the result of a very large number of determinants with many of the drivers beyond the scope of individuals to influence. The consensus opinion is that there needs to be a whole system approach, with co-ordinated policies and actions across individual, environmental and societal levels to prevent and tackle obesity and that the leadership role of local authorities in developing a workable whole systems approach is crucial.
- 4.2 The government is expected to publish its national obesity strategy towards the end of June or in early July. The Prime Minister intends to launch the strategy and has said he wants the publication to be 'a game-changing moment'.
- 4.3 The Chief Medical Officer's report (2011) recommends:
- adults aged 19-64 years undertake 150 minutes of moderate intensity physical activity (MPA) per week in bouts of 10 minutes or more, or 75 minutes of vigorous intensity physical activity (VPA) per week or an equivalent combination of the two and should minimise the amount of time spent sedentary.
  - children aged 5-15 years should engage in at least 60 minutes and up to several hours physical activity per day
  - children aged 2 -4 years should engage in at least 180 minutes activity spread throughout the day
- 4.4 Building muscle strength and skills is also a key component of physical activity, this could be through active play in children and resistance-type activity in adults.
- 4.5 Public Health England in 2014 published a framework to embed physical activity into daily life, Everybody Active, Everyday Day: an evidence based approach to physical activity. It concluded that to get people active everyday would only happen if all sectors work together to make physical activity easy, affordable and the 'normal' choice for communities.
- 4.6 The Scientific Advisory Committee on Nutrition (SACN) in July 2015 published its new recommendations on carbohydrates and health and the recommended amount of free sugar has been halved (average intake of free sugars should not exceed 5% of total dietary energy intake). This applies to all age groups from 2 years upwards. It identified particularly high consumption of sugar and sugar sweetened drinks

amongst school age children and recommended that the consumption of sugar sweetened drinks should be minimized in children and adults.

4.7 In October 2015 Public Health England published 'Sugar Reduction: the evidence for action'. The report concluded that no single action will be effective in reducing sugar intakes, and that the problem could not be solved by approaches that rely on individuals changing their behaviour in response to health education and marketing. The environmental drivers are just too big. Their analysis of the evidence suggests that a successful programme could include the following levers:

1. Reduce and rebalance the number and type of price promotions in all retail outlets including supermarkets and convenience stores and the out of home sector (including restaurants, cafes and takeaways);

2. Significantly reduce opportunities to market and advertise high sugar food and drink products to children and adults across all media including digital platforms and through sponsorship;

3. The setting of a clear definition for high sugar foods to aid with actions 1 and 2 above. Currently the only regulatory framework for doing this is via the Ofcom nutrient profiling model, which would benefit from being reviewed and strengthened;

4. Introduction of a broad, structured and transparently monitored programme of gradual sugar reduction in everyday food and drink products, combined with reductions in portion size;

5. Introduction of a price increase of a minimum of 10-20% on high sugar products through the use of a tax or levy such as on full sugar soft drinks, based on the emerging evidence of the impact of such measures in other countries;

6. Adopt, implement and monitor the government buying standards for food and catering services (GBSF) across the public sector, including national and local government and the NHS to ensure provision and sale of healthier food and drinks in hospitals, leisure centres etc;

7. Ensure that accredited training in diet and health is routinely delivered to all of those who have opportunities to influence food choices in the catering, fitness and leisure sectors and others within local authorities;

8. Continue to raise awareness of concerns around sugar levels in the diet to the public as well as health professionals, employers, the food industry etc., encourage action to reduce intakes and provide practical steps to help people lower their own and their families sugar intake.

4.8 The chancellor announced the introduction of a sugar sweetened drinks tax in 2018. The levy, which will start in April 2018, will put up the price of drinks such as Red Bull, Capri Sun, Sprite and several versions of cola. The Treasury has not decided exactly how much extra they will force producers to charge for heavily sweetened drinks, but health campaigners want it to be 20%. Companies that produce or import soft drinks with significant added sugar will have to pay one level of the tax for drinks containing at least 5g of sugar per 100ml and a higher rate for those with more than 8g per 100ml. It is understood that the Treasury is currently exploring the possibility of piloting the tax early in London.

## 5. Lewisham's Whole System Obesity Action Plan

- 5.1 Following the award to Lewisham Council of national pilot status for a whole system approach to obesity, a whole system obesity project board was established which included: senior officer representation from the council directorates of Community Services, Children's Services and Customer Services; the cabinet member for Children & Young People; and Lewisham CCG.
- 5.2 Members of the National team, which included academics from Leeds Beckett University and representatives from PHE, visited Lewisham in early 2016 and met with the Mayor and with the Lewisham whole system obesity project board. This was followed up by a two day workshop at Leeds Beckett University in March involving all four local authority pilot sites.
- 5.3 Following the two day workshop the Lewisham project board met twice more and developed a draft whole system obesity action plan.
- 5.4 The overarching aims of Lewisham's draft whole system obesity action plan are:
- 1) **to promote an environment that supports healthy weight and wellbeing as the norm, making it easier for our residents to choose healthier diets and active lifestyles;**
  - 2) **Supporting our communities and families to become healthier and more resilient, which will include addressing the wider determinants of health.**
- 5.5 At a strategic level, we will achieve these aims by engaging the wider Lewisham Partnership to ensure a better co-ordinated approach around the wider determinants of obesity, by forming a **Lewisham Obesity Alliance**. The alliance will continue to build on progress in delivering actions across four priority areas:

### **Children and Young People Increased Public Awareness and engagement Health and Public Services Environment**

- 5.6 Initially however, the Alliance will focus on **three cross cutting actions** to create healthy environments: **Sugar Smart Lewisham; the Lewisham Daily Mile; and Use of Lewisham's Parks.**
- 5.7 **Sugar Smart Lewisham**

Lewisham, together with Greenwich will become the first 'SUGAR SMART' boroughs in London, and will launch Jamie Oliver & Sustain's national Sugar Smart Campaign in September 2016. SUGAR SMART is an ambitious campaign helping towns, cities, counties and boroughs across the UK to raise awareness and reduce consumption of sugar across all age groups. The campaign aims to promote healthy alternatives and remove or reduce unhealthy food and drink. As a Sugar Smart borough, we will seek commitments from institutions and businesses

across different sectors to develop their own sugar smart policies, to make good food and drink more affordable, accessible and better marketed than high sugar food and drink. The principles of the campaign are aligned to the levers identified by Public Health England to reduce sugar consumption (outlined in section 4.4)

## 5.8 **The Lewisham Daily Mile**

All Lewisham primary schools will be encouraged to allow all children in the school to run outdoors for 12 minutes each day, as part of the Daily Mile initiative. Originally created by a primary head teacher in Stirling, this simple, 'no cost' initiative has swept the UK. Two Lewisham schools have already started running the daily mile, and several more are planning to start in September. An initial Scottish evaluation has demonstrated impressive outcomes in terms of reduced prevalence of childhood obesity and improved levels of cardio respiratory fitness. Anecdotal evidence suggests improvements in attendance, behaviour and educational attainment.

## 5.9 **Use of Lewisham's Parks**

Lewisham council aims to build on its track record of success in increasing the use of its parks to improve physical and mental health and wellbeing (for example through its 'Nature's Gym' initiative - <https://natureconservationlewisham.co.uk/how-to/natures-gym-2/>). The council plans to explore the use of social media and web based technology developed locally to make it easier for people to meet in parks and open spaces to play, exercise and run ([www.sportstarta.com](http://www.sportstarta.com)).

5.10 A number of other new innovations have been identified in the action plan, for example: increasing participation in physical activity through dance, working with Trinity Laban; and increasing recreational physical activity through football and basketball, working with primary schools, London Thunder Basketball Club and Millwall FC Community Trust.

5.11 **Appendix one** describes Lewisham's Whole System Obesity action Plan in more detail.

## 6. **Financial implications**

6.1 In order to fulfill its statutory responsibilities for delivering the prescribed public health functions (sexual health, NHS health checks, Public Health advice to the CCG, Health Visiting and the National Child Measurement Programme) as resources are being reduced through council savings and cuts in Public Health Grant, the council will have to look at reducing investment in preventative lifestyle services, and achieve public health outcomes through more upstream whole system approaches that change the environment and address the wider determinants of ill health. The proposed whole system obesity action plan aims to achieve such a shift in approach to public health. None of the actions described in this report are funded from the Public Health budget.

## 7. **Legal implications**

7.1 There are no legal implications

## 8. **Crime and disorder implications**

8.1 There are no crime and disorder implications

## **9. Equalities implications**

9.1 The prevalence of obesity amongst the 20% most disadvantaged is twice that of the 20% least disadvantaged in the UK. Childhood obesity rates also tend to be higher amongst some black and asian communities. Unless they are highly targeted, preventive lifestyle obesity interventions are more likely to be taken up by those communities with the highest prevalence. The actions proposed in Lewisham's whole system approach, for example the Sugar Smart Lewisham campaign, are targeted at the obesogenic environment (e.g. Junk food and confectionary at checkouts in shops and supermarkets) and they are likely to have the biggest impact on those most in need, thereby reducing inequalities.

## **10. Environmental implications**

10.1 There are no specific environmental implications arising from this report or its recommendations.

If there are any queries on this report please contact Danny Ruta, Director of Public Health, 020 8314 9094 [danny.ruta@lewisham.gov.uk](mailto:danny.ruta@lewisham.gov.uk).