

Obesity

Headlines

The rising tide of obesity is one of the biggest threats to health in the UK. In 2008, almost 2 in 3 adults and 1 in 3 children were either overweight or obese. 4 in 5 obese teenagers go on to be obese adults. Without clear action, the rates of obesity will rise to almost 9 in 10 adults and 2 in 3 children by 2050.

Obesity is associated with an increased risk of a range of diseases that have a significant health impact, including earlier death, on individuals such as diabetes, heart disease, cancer, muscular skeletal problems, and maternal death from childbirth. It shortens life expectancy by nine years on average.

Locally:

- Over half (54%) of all adults were overweight or obese, especially those aged 46-64 years and men, in 2008.
- 2 in 5 of women aged 18-44 were overweight or obese in 2008.
- Those with diabetes, pain and heart disease were far more likely to be obese or overweight, i.e. up to 3 in 4 in 2008.
- 1 in 5 of five year olds and 1 in 3 of 11 year olds were overweight or obese in 2009.

Why is this issue important?

The rising tide of obesity is one of the biggest threats to health in the UK. In 2008, almost 2 in 3 adults and 1 in 3 children were either overweight or obese¹. Obesity is associated with social and economic deprivation across all age ranges^{2(p58)}. Without clear action, this will rise to almost 9 in 10 adults and 2 in 3 of children by 2050³.

Obesity is associated with increased risk of a range of diseases that have a significant health impact on individuals such as diabetes, heart disease, cancer, muscular skeletal problems, maternal death from childbirth and infant death¹.

Annually, obesity is responsible for 9,000 deaths aged under 65 years in England, and reduces life expectancy by nine years on average¹. It is responsible for the recent rise in maternal deaths. Obese people can experience stigmatisation and bullying, which can lead to depression and low self-esteem. Those with diabetes were twice (40%) as likely to be obese than the overall population (18%), which has important consequences for their risk of further ill health.

The Government has set itself a new ambition of being the first major country to reverse the rising tide of obesity and being overweight in the population. Two key publications Healthy Weight Healthy Lives³ and Lord Darzi's Next Stage Review⁴ clearly set out the cross government strategy to support people to maintain a healthy weight.

What significant factors are affecting this issue?

Obesity is caused by the imbalance between calories (or energy) taken into the body and calories used by the body and burnt off in physical activity, over a prolonged period. Excess energy results in the accumulation of excess body fat. Therefore it is an individual's biology, for example, genetics and metabolism and their eating and physical activity behaviour that are primarily responsible for maintaining a healthy body weight.

Body Mass Index (BMI) is used to measure whether people are overweight (BMI 25-30) or obese (BMI >30), and relates weight to height

Addressing obesity links to several behaviour programmes, particularly food, alcohol and physical activity (see behaviours section). Locally only 1 in 5 obese people did the recommended amount of physical activity; the lowest out of all the weight categories⁵. In addition there are also significant external influences such as environmental and social factors, for example, changes in the availability of food, motorised transport and work/home lifestyle patterns that also play a role in body weight, the obesogenic environment.

Which groups or communities are most affected by this?

Children and young people⁶

Locally, more than 1 in 5 (21%) of 4-5 years olds living in Kirklees were either overweight or obese. Approximately 1 in 3 (30%) of 10-11 year olds were either overweight or obese.

As children move into secondary school weight management continues to be a concern across Kirklees. 1 in 5 (18%) 14 year olds reported they were on a diet or trying to lose weight, but they may not necessarily need to. 4 in 5 obese teenagers went on to be obese adults^{7(p19)}.

Adults⁵

Locally 18% of all adults were obese; highest in those aged 45-64 years (22%) compared to 16% in those aged 18-44 years and 17% in those aged 65 years and over. 1 in 3 (36%) of all adults living in Kirklees were overweight; so over half of all adults were overweight or obese.

More men living in Kirklees were obese (61%) compared to women (47%). At least 3 in 4 of those with diabetes and of those with cardiovascular disease were either overweight or obese, as were 2 in 3 people with pain.

Women of childbearing age⁵

Locally 42% of women aged 18-44 years were obese or overweight, which is important for the future health of their unborn child. (See women of childbearing age section)

Families

The likelihood of a child being obese is strongly linked with whether their parents are overweight or obese; 1 in 4 children who have both parents overweight or obese are obese themselves, compared with 1 in 20 who have no parent overweight or obese⁸.

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Ethnicity

People from black African and black Caribbean communities more likely to be obese (28%) than the general population (18%)⁵. Obesity was higher in Pakistani mothers of infants who died.

Income

Obese people were the least likely of all income groups to earn over £40,000, with only 1 in 5 (18%) in this income bracket. Obese people (12%) were more than twice as likely to be permanently sick or disabled as those of a healthy weight (5%)⁵.

Where is this causing greatest concern?

Obesity is an issue across all localities. However, Spenningsdale has the highest rate of children, young people and adults; nearly 1 in 9 (11%) children aged 4-5 years and 1 in 5 children aged 10-11 years were obese. Over 1 in 5 (21%) adults were obese. 20% of adults living within Batley, Birstall & Birkenshaw, Dewsbury and Mirfield were obese⁵.

Far more children aged 10-11 years were obese than children aged 4-5 years. This is particularly evident in Huddersfield South with nearly 1 in 12 (8%) children aged 4-5 obese compared to 1 in 5 (18%) children aged 10-11 years.

Views of local people

NHS Kirklees commissioned a series of consultations with obese children, their families and adults to understand the barriers and motivations to weight loss⁹. These consultations found:

- Adults are put off services by the humiliation of the 'weigh-in' and people attending classes who were not seen as very overweight.
- Cost is a barrier to adults attending weight management programmes.
- Men perceive conventional weight management services as inappropriate and want material targeted at them.
- Parents feel there is a lack of activities for children and they feel reluctant to allow children to play out.
- Children and young people feel they comfort eat as a result of emotional issues, i.e. problems with parents and bullying.
- Parents believe weight gain is a result of an external uncontrollable factor, i.e. genetics or medication. Children give other reasons such as availability of cheap junk food, laziness and their parents working long hours, therefore, resulting in them eating whatever they can find when they return from school and turning to easy fast food for evening meals.

What could commissioners and service planners consider?

Innovative approaches to education and raising awareness are needed to motivate target groups. Key partners and service planners should maximise opportunities to deliver key messages to encourage the public to take personal action and highlight the effective help available to support them. These include national campaigns for instance the Change4Life movement¹⁰ and local initiatives such as the Healthyweight4Kirklees¹¹ website and network which provide advice, support and links to local services.

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