# FOOD ACTIVE

Perspective
Pieces
Report

**March 2018** 





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#### Introduction

This Perspective Pieces Report has been developed to contribute to the wider work undertaken by Food Active on whole systems approaches to addressing overweight and obesity.

Perspective Pieces gathers evidence from local authority departments (other than Public Health) and other public sector organisations on good practices in tackling overweight and obesity.

This is the first Perspective Pieces Report and it builds upon successful implementation of Food Active's Local Authority Declaration on Healthy Weight by seven authorities in the North West of England, helping local government develop, implement and enforce policies that promote healthy weight.

### The Purpose of Perspective Pieces

The promotion of healthy weight in all policy areas:

In local authority departments other than Public Health, for example: early years, catering, forward planning, business development.

In other public sector organisations, for example: organisations concerned with activity, walking, cycling, sports, economic regeneration, local transport and fire and rescue services.

### Objectives of Perspective Pieces:

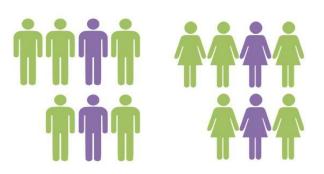
To discover and learn, on an ongoing basis, about plans and actions relating to the promotion of healthy weight.

To report and share, on an ongoing basis, good practice, highlighting the need for all policy areas to address healthy weight.



#### The Context

Overweight and obesity in England and the North West:



In England around 1 in 4 adults is obese<sup>1</sup>

In the North West around 1 in 3 adults is obese<sup>1</sup>





In England around
1 in 3 children aged 10-11
is overweight or obese<sup>2</sup>

In the North West around 1 in 3 children aged 10-11 is overweight or obese<sup>3</sup>

### References:

- 1. Public Health England (2017), Patterns and trends in adult obesity: A presentation of data on adult obesity July 2017, https://app.box.com/s/l3l064j9pmmfs0t37gcypdqz70ct56be
- 2. Public Health England (2017), Patterns and trends in child obesity: A presentation of the latest data on child obesity, https://www.slideshare.net/PublicHealthEngland/patterns-and-trends-inchild-obesity-june-2017
- 3. Public Health England (2017), Patterns and trends in child obesity in the North West: A presentation of the latest data on child obesity at regional level, https://www.slideshare.net/PublicHealthEngland/patterns-and-trends-in-child-obesity-in-the-north-west-80415115



### Causes of Overweight and Obesity

The causes of overweight and obesity are multifactorial, and those brought about by the environment, deprivation and housing are often referred to as the wider determinants of health. Within the wider determinants of health, some of the factors contributing to overweight and obesity are:

• unemployment	•	unemp	loyment
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- low education levels
- access to takeaways
- lack of cooking skills/equipment
- poor transport

- low income
- low exercise levels
- inability to access healthy food
- the cost of healthy food
- low nutritional awareness

#### Whole Systems Approach

The Government's Foresight report on tackling obesity identified many factors contributing to obesity in its system map and reported that, because of the complexity of obesity, only a whole systems approach, an approach that requires involvement from all sectors and not just public health, will be effective in tackling obesity<sup>1</sup>.

A whole systems approach to obesity for an organisation involves approaching and tackling obesity and overweight at all levels, from senior management down, and in all departments, which can then generate a stronger response than the sum of individual contributions<sup>2</sup>.

Perspective Pieces will try and contribute towards the narrative of a whole systems approach by reporting different public sector perspectives on tackling obesity and promoting healthy weight. For example, from local authority departments other than Public Health, and from additional public sector services, such as transport services and fire and rescue services.

#### References:

- 1. Government Office for Statistics (2007), Tackling obesities: future choices project report, https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/287937/07-1184x-tackling-obesities-future-choices-report.pdf
- 2. Leeds Beckett University (2018), A whole systems approach, http://www.leedsbeckett.ac.uk/wholesystemsobesity/a-whole-systems-approach/



#### Methods

A telephone or face to face interview format was chosen for conducting the interviews because it was considered to be the least time consuming method for interviewees. The interviews were designed to be around 30 minutes in length and the questions used were based on the questions used to evaluate the first implementation of the Local Authority Declaration on Healthy Weight.

Email invitations to take part in Perspective Pieces were sent to local authorities and other public sector organisations in the North West throughout October 2017 asking for interviews before the end of November 2017. We received 5 positive responses to take part in Perspective Pieces from local authority department leads and one from a public sector organisation. Additional local authority department leads were keen, but declined the invitation to take part because they felt that they had nothing to contribute.

Additional information about the interview, the report format, and the option of anonymity was given to the participants. Email consent was gained from the participants prior to interviews and the interview questions were also emailed to the interviewees in advance of the interview.

All interviews were carried out by telephone and at times agreed with participants. Each interview was audio recorded and transcribed by the Food Active interviewer. Interview transcriptions were then formatted for this report and each formatted interview was sent for approval to interviewees before inclusion in this report.

Key themes were then identified from the interview data using inductive analysis and these themes formed the basis of the conclusions that have been drawn from this research.



### Perspectives from the North West

Six interviews across the North West were completed for this report, and the interviews are written up on the following pages. The quotes below are to give you an insight to the topics that were discussed in the interviews.

#### Early Years Geographical Manager

read more on page 8

'we try to get every single pregnant mum on a HENRY course - government forget about 0-5, we look at early health and early intervention that's where the government needs to be'

### **Catering Services Manager**

read more on page 10

'leisure will be working in their little area, Public Health will be working in one area, and we do something else, and I think we're getting better at it, but I think it needs to be a more integrated approach across the whole council'

#### **Environmental Protection Officer**

read more on page 12

'I am now preventing takeaways on the grounds of noise and anti-social behaviour'

### Transport Planner, Project Coordinator for the Dft Access Fund

read more on page 13

'a barrier to promoting healthy weight is transport poverty, poor connectivity, which has resulted in some areas with economic under performance, pockets of deprivation and unemployment'

### Principal Planner, Forward Planning

read more on page 16

'we've restricted Domino's opening hours from 5pm onwards, so that it wasn't at school closing times'

### Director, MSP

read more on page 18

'when advocating an Active Workplace, we encourage organisations (public, voluntary and commercial) to sign up to the Workplace Wellbeing Charter which includes healthy eating as one of the eight charter areas'



Interview 1 - November 2017

Maria Nugent - Blackburn with Darwen Borough Council

Early Years Geographical Manager

### 1. Do you feel obesity is a particular problem in your local authority's footprint?

Yes, definitely. What we have in Blackburn with Darwen is a lot of children aged 3-4 years who measure obese and then that increases when they get to the end of school.

Our indigenous white communities are where we have the highest level of childhood obesity at age 4-5 and 10+, and it is also where we have low breastfeeding rates and where we will see our children coming in drinking pop.

### 2. How do you see your role in promoting healthy weight in your local authority's footprint?

I lead all the work of the children's centres, and in all the centres we have a community cafe, where we only offer healthy food options. We don't supersize, we don't cook with salt, and sugar is reduced. We do offer cakes and biscuits, but there isn't a vast selection, and we don't have crisps or pop.

We also run targeted weight courses, which are ultimately parenting courses, but they have a focus on healthy weight and nutrition.

We run a HENRY programme and we have good success rates with it. We have consistently run it throughout the year in each community and the parents who come on it really do engage and tend to last the whole of the course.

We have breast feeding support groups in every children's centre. We have staff who are highly trained in supporting breast feeding, and bottle feeding, but we only promote breast feeding.

We are accredited from UNICEF for being 'baby friendly'. I think we are the first authority in the country to get the gold standard and we ensure all our staff, from our cleaners to myself, are all trained to the same level, and we do that each year.

# 3. What do you think about the following statement: "The promotion of healthy weight is something that needs to be integrated across all local authority departments?"

I think it's right. We work very closely with Public Health and I lead on that work for the children's centres. I will also be a part of anything around alcohol and healthy eating that we have, for example, our eat-well and move-well agenda and our network action plan for the whole of the local authority.



In our network we have our health and fitness team, the third sector, charities, volunteers, and GPs. Blackburn with Darwen works hard at making and getting out those shared messages.

In our communities you can see weight is an issue, the authorities know that, yet they still promote takeaways and give licences to takeaways because the licences then bring money in to local authorities. The authorities should look at the high street and say 'we have got too many takeaways in that community'.

I think for anything to work, to make a difference, working together is very important, and we do work very closely as a network.

# 4. What policies and actions do you undertake/plan to undertake to promote healthy weight in the work you do?

We have our HENRY programme, which we run all the time, and we do some work around food poverty workshops. We have a food alliance workshop, where we look at key themes and issues for Darwen and that involves representative from schools, Catering, young people's services, neighbourhoods, elected members, Public Health, Early Years, East Lancashire and Housing. In Blackburn with Darwen we have a housing consortium called Great Places and they work very closely with us for families who are in their housing stock.

Another project is Challenge Through Sport, which is part of our network action plan.

# 5. Are you aware of any real or perceived barriers or difficulties in promoting healthy weight in the work you do?

Sometimes finance is an issue, certainly for the HENRY programme. It costs something like £52,000 to train more staff to be trainers of the HENRY programme and we just do not have that money.

# 6. Are there any key successes to date in your department relating to the promotion of healthy weight?

Our gold award for UNICEF's Baby Friendly initiative is a massive achievement, and the HENRY programme is a massive success too. Other successes include having our health visiting teams based in the children's centres, our strong partnership with Public Health and our health partners and delivering the same services right across the network for all our children and families.

# 7. In your opinion, what are the three most important steps that your department could take going forward in promoting healthy weight across your local authority's footprint?

Important steps for us are partnership working, for example, working with charities and housing groups, and getting more funding.

An example of charity partnership is the free lunches we gave to our most vulnerable families over the summer holidays and Christmas. Charity partnerships can be hard work though as it takes a lot of time organising, but it is worth it as they have passion and volunteers who want to make a difference.



8. In your opinion, what mechanisms need to be developed at both national government and local government levels to allow local authority departments to work together towards a common goal in tackling obesity and promoting healthy weight?

It is about people working together, having a shared footprint and vision.

I think there is a need to focus on early years intervention. Pre-natal is where we do our work with mums and when they're pregnant. Our midwife colleagues work with us and we try to get every single pregnant mum on a HENRY course. I think that 0-5s is when we need to look at early health and early intervention and that is where the government needs to be. We need to tackle it that before 5, otherwise you've had 5 years of damage.

In Blackburn with Darwen we have kept our children's centres and I think that the early years is where money needs to be invested.

9. Is there anything else about promoting healthy weight that you would like to add?

In Blackburn and Darwen different partners are working strongly together. We are not bothered about who does what, it is about getting it done together.

Interview 2 - November 2017

Jill Duddle - Blackpool Council

**Catering Services Manager** 

1. Do you feel obesity is a particular problem in your local authority's footprint?

Yes.

2. How do you see your role in promoting healthy weight in your local authority's footprint?

I manage the catering service, so I do school meals and I also work on certain aspects with Public Health and on the healthy weight steering group.

3. What do you think about the following statement: "The promotion of healthy weight is something that needs to be integrated across all local authority departments?"

Yes, it's true. I think people try to do that, but leisure will be working in their little area, Public Health will be working in one area, and we do something else, and I think we're getting better at it, but I think there needs to be a more integrated approach across the whole council.

4. What policies and actions do you undertake/plan to undertake to promote healthy weight in the work you do?



We follow the School Food Standards and the School Food Plan. We also work with Leisure on a Sports for Champions programme, which looks at nutrition and activity for children in year 6. As part of the programme we give out stickers if they take salad, vegetables, or fruit as part of the school lunch. They can also earn prizes. Leisure look at the activity side and try and encourage the children to be more active.

I am also working with Public Health to develop a healthy packed lunch policy for the council.

# 5. Are you aware of any real or perceived barriers or difficulties in promoting healthy weight in the work you do?

I think parents are a barrier, especially here as we have high levels of deprivation and because parents often depend on convenience foods, believing them to be cheaper, and this can mean children want more food like chips on the menu, don't eat much fruit and veg, and their food preferences can be quite narrow. We try and work around these barriers, but we need to ensure that the food we offer is healthy and also something that the children will actually eat. It is a fine line, children can be quite faddy.

# 6. Are there any key successes to date in your department relating to the promotion of healthy weight?

The introduction of infant free school meals has helped and children, who benefited from salads and fruit at lunch time, are now in high school, and we see more children taking fruit pots or salad boxes as part of the lunch menu now. So, I think we have instilled habits at school since reception year that they have grown up with.

# 7. In your opinion, what are the three most important steps that your department could take going forward in promoting healthy weight across your local authority's footprint?

I think trying to get a longer lunch hour, especially in high schools, because it is not an hour, it is about 30-35 minutes. This means that students in high school are not encouraged to sit and eat a proper meal.

# 8. In your opinion, what mechanisms need to be developed at both national government and local government levels to allow local authority departments to work together towards a common goal in tackling obesity and promoting healthy weight?

I think making sure that we know whether the funding is in place and will stay in place for universal infant free school meals is important.

I know that there are free school meals from a benefit point of view for older pupils, but I think that rolling out free school meals to older pupils would be a good idea.



Interview 3 – November 2017

Interviewee requested anonymity - Unitary Authority in the North West

**Environmental Protection Officer** 

#### 1. Do you feel obesity is a particular problem in your local authority's footprint?

I don't keep abreast of the stats, but yes, this is a deprived area, and the two often go hand in hand.

#### 2. How do you see your role in promoting healthy weight in your local authority's footprint?

My role is quite small, but I started a conversation with Public Health as I noticed we were getting more and more planning applications for takeaways and restaurants. The issue is something I noticed and wanted to stop. I feel that takeaways and restaurants should be for special occasions rather than an everyday occurrence. In my role I see a number of complaints because takeaways and restaurants operate at night and in the early hours. They really have an impact in terms of noise and anti-social behaviour. I am now pioneering a way to stop them proliferating which may have a positive impact in terms of public health and obesity, because I am actually now preventing them on the grounds of noise and anti-social behaviour.

# 3. What do you think about the following statement: "The promotion of healthy weight is something that needs to be integrated across all local authority departments?"

I totally agree, we are a unitary authority, we have Highways and Public Health, and you can really see the potential and the variety of different options within the authority.

# 4. What policies and actions do you undertake/plan to undertake to promote healthy weight in the work you do?

For me it's simply trying to stop takeaways and restaurants.

# 5. Are you aware of any real or perceived barriers or difficulties in promoting healthy weight in the work you do?

In my particular niche area, I have to be very careful not to be preventing equal opportunities, as the majority of our applications for takeaways and restaurants are from minority groups. Migrants to the area often see it as a way to open a business and be their own boss. We have to be careful that any policy we come up with isn't against equal opportunities, and that is a barrier.

Also, we are not getting any direction from government. They could do more, something big that we can also carry on at local level.



6. Are there any key successes to date in your department relating to the promotion of healthy weight?

The refusal of new restaurants and takeaways, which has actually happened.

7. In your opinion, what are the three most important steps that your department could take going forward in promoting healthy weight across your local authority's footprint?

The problem is food is everywhere, all the time. Saying enough is enough in terms of new eating establishments could possibly help us.

Teaching home economics, about healthy eating, and the actual cost of food is important too. I don't think people realise the cost of a takeaway and eating out and how much food that could buy for the home.

I also think we should show calories on drinks, although it is hard for small caterers to actually do this, and we have a lot of small caterers.

8. In your opinion, what mechanisms need to be developed at both national government and local government levels to allow local authority departments to work together towards a common goal in tackling obesity and promoting healthy weight?

Unhealthy food is often aimed towards children, so I think children need a clear and strong message saying that unhealthy food is not good for them.

Interview 4 – November 2017

Melanie Taylor - Blackburn with Darwen Borough Council

Transport Planner / Project Coordinator for the Department for Transport Access

Fund 'Connecting East Lancashire Project

1. Do you feel obesity is a particular problem in your local authority's footprint?

Yes, as part of our bid prep for the Department for Transport's Access Fund research was undertaken to understand the consequences of deprivation and within East Lancashire about 60.5 % of the population are living in deprived conditions. One of the outcomes of that deprivation is poor levels of public health, especially in relation to obesity.

2. How do you see your role in promoting healthy weight in your local authority's footprint?

My particular role is to deliver the successful Access Fund program, which concentrates on active travel, so walking and cycling, and we are doing this in partnership with Lancashire County Council who are the lead authority. I will be focusing on increasing levels of activity through active travel, with a particular emphasis on walking and cycling.



The promotion of healthy weight is delivered through two complimentary packages of work. One is around access to skills and employment, and one around enabling active travel, which is about building skills sets and confidence. For example, about maintaining bikes and it is targeted to areas that are deprived.

As transport planner for Blackburn with Darwen Council, I have an influence on the design of streets, housing developments, accommodating walking and cycling, and the infrastructure side of things.

Finally, my role is driving partnership working, with those partners that influence and benefit from the Access Fund delivery. For example, I work with British Cycling, Public Health, Refresh, our local leisure and health and wellbeing programme, and organisations such as Living Streets.

# 3. What do you think about the following statement: "The promotion of healthy weight is something that needs to be integrated across all local authority departments?"

I think integration is absolutely vital to ensure unity and common understanding that there is an issue and that the issue requires attention. I think the difficulty is the practical actions we take. It is easy to have representatives from different departments, to be on steering groups, and to attend meetings, however it is the physical changes, the policy changes, that instigate real change towards tackling this issue and other issues.

# 4. What policies and actions do you undertake/plan to undertake to promote healthy weight in the work you do?

We deliver actions through the Department for Transport Fund Access Fund, by working towards the Public Health Outcomes Framework of outdoor space for exercise health reasons, social isolation, proportion of physical active/inactive adults, health related quality of life for older people.

Blackburn with Darwen also have a Physical Activity and Healthy Weight Strategy that supports the Access Fund programme by recognising that active travel has a significant impact on public health, in terms of increasing physical activity, particularly for shorter journeys that might normally be taken by car.

We are also planning on utilising the forthcoming cycling and walking strategy, named Actively Moving Forward, which is going to be a strategy for the next ten years. It will look to shape local spending priorities in developing our cycling and walking infrastructure and will build on a range of high quality cycling and walking offers that currently exist and work in tandem with a series of measures to address long term behaviour trends.

# 5. Are you aware of any real or perceived barriers or difficulties in promoting healthy weight in the work you do?

Topography and weather are huge barriers when encouraging walking and cycling. All the time you hear people say 'I can't possibly do that because of hills'.



Another barrier is transport poverty. Poor connectivity has resulted in some areas with economic under performance, pockets of deprivation and unemployment, and these combined with high physical inactivity do create barriers to the work I do.

# 6. Are there any key successes to date in your department relating to the promotion of healthy weight?

The main success is our consistent secured funding from the Department for Transport over the past five years to specifically look at improving activity levels and encouraging sustainable travel and transport.

We also successfully secured local growth fund monies to develop strategic cycle networks linking communities, employment, education and leisure sites.

Another success is our cycling network and our cycling app. We have seen a sharp increase in the number of cyclists on weekdays at peak commuting times, and the app has month by month increases in downloads.

# 7. In your opinion, what are the three most important steps that your department could take going forward in promoting healthy weight across your local authority's footprint?

To work closely with partners, departments and services to ensure a more collaborative approach to promoting healthy weight.

To have senior management and councillor champions to drive the notion and importance of achieving healthy weight.

To better utilise partners, such as British Cycling and Living Streets, to get to the hearts of communities that are highlighted as deprived.

# 8. In your opinion, what mechanisms need to be developed at both national government and local government levels to allow local authority departments to work together towards a common goal in tackling obesity and promoting healthy weight?

There needs to be an improved willingness and improved ways for sharing data

We also need to know how different departments can influence obesity and make changes to their agendas, and all departments need to work together on agreed common actions. It is about moving forward, with departments working together.

### 9. Is there anything else about promoting healthy weight that you would like to add?

On a personal basis I would like to see more work around food education and cooking skills. I think it is optional to do home economics in school now, which is an issue. For me it is critically important to do home economics at a young age. As a mum I encourage my children to cook with me, to understand what different foods are and what they do for our bodies. I think it's a huge part of our obesity problem.



Interview 5 - November 2017

Adrian Smith - Rossendale Borough Council

**Principal Planner - Forward Planning** 

#### 1. Do you feel obesity is a particular problem in your local authority's footprint?

I think it is. There are certain areas where it tends to be more concentrated, but in general obesity is an issue.

### 2. How do you see your role in promoting healthy weight in your local authority's footprint?

From a planning authority we can only ever play a small complimentary role. Our role would be perhaps trying to do something with takeaway policy, but even with that we are limited.

There are things we can do with promoting active walking and sport which we are involved in. For example, there is a major new cycle route through the area that we are engaged with and looking at places where people can walk to.

3. What do you think about the following statement: "The promotion of healthy weight is something that needs to be integrated across all local authority departments?"

I think it does, and also if you have a two-tier area it can be a bit difficult. It is more than just one department can do, and it is more than a district council with limited powers can do.

# 4. What policies and actions do you undertake/plan to undertake to promote healthy weight in the work you do?

My work is the production of the local plan and related work. My team put together the criteria that an application is judged on, then the planning officer who is looking at an application would need to consider those criteria.

The council has a hot food takeaway policy and that sets out several factors that we look at in terms of the location of hot food takeaways. For example, the concentration of them, how close they are to residential properties, how close they are to schools and youth facilities, their design, and environmental issues like rubbish and bins, and their hours of operation.

We look at that hot food policy when considering applications, and we will be developing a new policy. We have been liaising with Public Health about this.

'Concentration' which considers 'vitality' and 'viability' is important for town centre policy. 'Vitality' is the range of shops and the types of things that will cause most people to want to shop there, and if you've got an over concentration of one use then it makes it less attractive.



We often have to consider which is worse - having a row of vacant shops or having a row of takeaways. We are also concerned with the overall effect on the town centre. The health side, from our perspective, is just one element in the decision making process.

The challenge we have is that the hot food policy is heavily challenged, and we have to be able to substantiate it at public examination and also when deciding a planning application.

The other side of my job is to try and create networks of places and spaces that are attractive for people to walk through or cycle through and to use other modes and get out and enjoy their environment.

# 5. Are you aware of any real or perceived barriers or difficulties in promoting healthy weight in the work you do?

Our difficulty is substantiating a reason for refusal purely on health grounds. If the applicant appeals, you could lose and get costs against you as a council, so you really need to be sure that your evidence is robust.

The Public Health team put something together for us on a big Domino's scheme and we got Domino's to change their hours of opening, but we didn't stop it per se as it was a really important building in the town centre that was vacant. The building was a former bank and it was seen to be important to bring it back into use, and 'vitality' overrides from a planning perspective.

Health is moving up the agenda, but it is always difficult to establish a direct causal link.

Causal evidence has also got be area specific. It is very difficult to put a blanket ban across a whole area. The problem for planning officers is that you have so many other things to do, and other things to take in to account, and it becomes difficult to become an expert in this and keep up with everything else as well.

# 6. Are there any key successes to date in your department relating to the promotion of healthy weight?

We have restricted a Domino's opening hours to 'from 5 onwards'. The argument was that children coming home from school would be affected by it.

Other applications have been turned down but not purely on health grounds. Health grounds have been part of it, but there were other grounds too such as the impact on residential properties.

# 7. In your opinion, what are the three most important steps that your department could take going forward in promoting healthy weight across your local authority's footprint?

I think that creating opportunities for active living is important, so strategic cycle ways and walking routes, so that you can walk easily wherever you are going. Also, developing the hot food takeaway policy and a further supplementary planning document based on accurate local evidence would be helpful.

Another important step is working with partners as appropriate.



8. In your opinion, what mechanisms need to be developed at both national government and local government levels to allow local authority departments to work together towards a common goal in tackling obesity and promoting healthy weight?

I think there needs to be something from government that is very clear. I know that they are reviewing the National Planning Policy Framework so something more on health and how to consider health within the planning process would give it more weight from our side.

Then we need joined up thinking. You often get Public Health promoting one angle of something, and another department might be doing something else.

It would be really good at national or sub-regional level if a defined person or organisation was to take the lead and specify how obesity and overweight was to be addressed within different sectors.

### 9. Is there anything else about promoting healthy weight that you would like to add?

The best we can do is to learn from other people.

We get a certain number of these applications in a year so you don't become an expert. You don't become aware of all the background and so you don't know what you can legitimately ask for and you don't know whether you have enough evidence to follow through on something.

Interview 6 – November 2017

Jean Stephens - MSP

Director

#### 1. Do you feel obesity is a particular problem in your organisation's footprint?

Yes, we know that:

- 25.9% of children aged 4 to 5 years in the Liverpool City Region (LCR), were recorded as overweight or obese in 2015-16.
- 37.8% of children aged 10 to 11 years in LCR, were recorded as overweight or obese in 2015-16.
- 41% of 55-64s living across LCR are classed as obese

### 2. How do you see your role in promoting healthy weight in your organisation's footprint?

MSP's vision is to inspire all people to be active every day. We recognise the link between healthy eating and nutrition which sits alongside increasing the amount of physical activity and sport that people do.



3. What do you think about the following statement: "The promotion of healthy weight is something that needs to be integrated across all departments?"

Yes, it needs to be embedded with other public health promotion work, taking in to account inequalities in health and social inequalities.

4. What policies and actions do you undertake/plan to undertake to promote healthy weight in the work you do?

When advocating an Active Workplace, we encourage organisations (public, voluntary and commercial) to sign up to the Workplace Wellbeing Charter which includes healthy eating as one of the eight charter areas.

MSP has achieved Workplace Wellbeing Charter standard.

5. Are you aware of any real or perceived barriers or difficulties in promoting healthy weight in the work you do?

Promoting healthy weight is not MSP's area of expertise, however, with physical activity, people inform us through our data, research and insight that their barriers to active participation include family commitments, work commitments, lack of facilities, cost, lack of confidence, poor health, injury, and disability.

6. In your opinion, what are the three most important steps that your department could take going forward in promoting healthy weight across your organisation's footprint?

To promote an Active Workplace.

To promote healthy eating and introduce fruit bowls.

To continue to advocate and inspire people to be active every day.

7. In your opinion, what mechanisms need to be developed nationally and/or locally to allow departments in your organisation to work together towards a common goal in tackling obesity and promoting healthy weight?

Universally joined up provision and referral pathways to relevant services. For example, if someone presents at a GP Practice as being overweight or underweight then they should be referred in to healthy weight services and physical activity providers.

8. Is there anything else about promoting healthy weight that you would like to add?

By advocating and influencing a whole system approach, create a LCR Moving "blueprint for change" with a shared purpose and collective approaches to tackling inactivity levels, in those segments of our population who are most at risk.



### **Key Findings**

The overarching themes indentified in the interviews are as follows:

### Willingness to engage

There is a clear willingness amongst the interviewees to promote healthy weight in the work they do and to inspire people to engage in healthier lifestyles. A variety of ways were reported on how departments can contribute to the promotion of healthy weight in their authority's footprint.

It is also evident that ideas to promote healthy weight and conversations can be conceived and started in departments beyond Public Health, for example Environmental Protection refusing planning applications, and additional ideas have been put forward in the interviews, for example advocating for a longer lunch break at schools, and focusing on 0-5 year old children.

There is however a feeling of undervaluing the contributions that they can make, for example:

'we can only ever play a small complimentary role'

'my role is quite small'

It is worth noting here that other potential interviewees in other departments were keen to take part in Perspective Pieces, but felt that they had nothing to contribute. This may indicate a limited understanding of the wider determinants of health, and how changes, no matter how small or apparently unrelated, can contribute to healthy weight and better health.

### Understanding the issue and the causes

There are two points to be made here, firstly, that knowing the facts about overweight and obesity in their geographical area is not a priority, and secondly, that there is a limited understanding of the causes of overweight and obesity.

There was a wide variation in the knowledge of overweight and obesity issues in their local areas. This may be because it was more relevant to their work, for example providing early years services. Some knew details of geographical variances and demographic variances which helped in the provision of targeted services, for example weight courses and cycling confidence courses.

In terms of understanding the causes of overweight and obesity it is worth noting that the majority of points made in the interviews related to food and exercise, for example the provision of cycle ways and courses to encourage cycling, changing takeaway hours, preventing additional takeaways, delivering nutrition programmes, and providing healthy school meals. Some wider determinants were mentioned, for example, parenting skills, food education, poor transport, junk food marketing, and cultural norms, however in most instances tackling overweight and obesity was directly linked to food intakes and activity levels.



#### Integration, guidance and leadership

The interviews revealed an element of frustration due to the absence of direction, guidance and leadership in relation to promoting healthy weight.

'It would be really good at national or sub-regional level if a defined person or organisation was to take the lead and specify how obesity and overweight was to be addressed within different sectors.'

'to have senior management and councillor champions to drive the notion and importance of achieving healthy weight'

The interviews also demonstrated that promoting healthy weight is not a priority for many departments/organisations and this means they do not often have the knowledge or experience to consider or address the issue. There is a clear willingness, as noted above, but it seems departments are lacking a firm lead in terms of what they can do in their department to promote healthy weight.

#### Working collaboratively

Responses to working collaboratively were all wholly positive, but there was no mention of how this was happening, or is planned to happen. Working with other departments, with leisure organisations, with social housing providers, with food charities and other partners was seen as important. Reasons for this were financial, and to take advantage of the expertise of other organisations, their links with communities and the passion of their volunteers.

#### Successes

There are a number policies, programmes and actions that successfully promote healthy eating and active living. For example, the hot food takeaway policy, refusing takeaway planning applications, restricting opening hours of takeaways, healthy weight and nutrition courses, physical weight and healthy weight strategies, sports for champions and teaching cycling skills. This demonstrates that there is scope in departments beyond Public Health to promote healthy weight.

#### Obstacles and barriers

A variety of obstacles and barriers were mentioned, for example: funding, especially not knowing in advance if funding would be available; parents, as they were thought responsible for limited food preferences when children reached school age; the lack of evidence, particularly when assessing planning applications; transport poverty, causing deprivation and employment; however there were few common barriers and obstacles mentioned.



#### **Conclusions**

The following conclusions can be drawn from the findings:

- tackling obesity and promoting healthy weight is being considered, planned and undertaken by some departments beyond public health and there is a willingness to do more
- there is frustration at the lack of leadership, both locally and nationally, in terms of tackling obesity and promoting health
- there is a perception from departments beyond public health that their contributions are supplementary, and perhaps insignificant
- there is a limited understanding of the wider determinants of the causes of obesity and overweight, leading to beliefs that unless a department can take steps to change either eating behaviours or exercise behaviours then there is nothing they can do to help

These conclusions indicate a desire to help and change the situation but a limited capacity to do so. It seems that departments desperately need leadership, guidance and collaboration to help them take part. This suggests the need for an overarching framework, across all departments, that creates one supportive approach to tackling obesity.



### Going forward

#### Perspective Pieces report

Food Active believes that sharing views from different local authority departments and public sector organisations, in terms of policy and action to promote healthy weight, will highlight the benefits of a whole systems approach and will also be beneficial in terms of sharing good practice and providing necessary momentum. We are therefore very keen to hear more perspectives in relation to promoting healthy weight within a range of public service organisations.

This is the first iteration of the Perspective Pieces report and, although this first report has focused on the North West, we are keen to collate and share innovative and good practice from all areas of the U.K. in future Perspective Pieces reports.

So, if you work in a local authority department outside of Public Health or in a public sector organisation and lead on some innovative or good practice in terms of promoting healthy weight then please contact Jenny Bakkali via email <a href="mailto:info@foodactive.org.uk">info@foodactive.org.uk</a> or give her a call on 0151 237 2686.

#### Local Authority Declaration on Healthy Weight – A Whole Systems Approach

Food Active also have many years experience with whole systems approaches to tackling overweight and obesity and promoting healthy weight and can help provide a structure and guidance on this type of approach if needed.

Food Active use a framework they have designed called the Local Authority Declaration on Healthy Weight, and the framework gives structure, importance, weight and credibility to tackling overweight and obesity, whilst also enabling an organisation to engage in a whole systems approach.

Please get in touch if you feel we could help you create a whole systems approach to tackling healthy weight in your area.

We look forward to hearing from you.



This report has been prepared by

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Food Active is a programme of work commissioned by North West Directors of Public Health and delivered by Health Equalities Group

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