

KEY FACTS

- Nationally over one half of all adults are overweight and one in five is obese. In the past 20 years the proportion of people who are overweight increased by over 50% while the proportion who are obese has trebled. This increase is the fastest in Europe.
- Most children and adults do not meet dietary recommendations
- The number of children who are overweight is increasing
- An estimated one in three deaths from cancer and one in three deaths from coronary heart disease are attributable to poor diet
- Consuming at least five portions of fruit and vegetables a day can reduce the risk from heart disease, stroke and cancer by up to 20%
- A reduction in the salt intake of the population to 6g per day would result in an estimated reduced incidence of coronary heart disease by 6%, stroke by 15%, and hypertension by 17%
- Reducing fat intake, particularly saturated fat, can help lower the risk of coronary heart disease and some cancers
- Infants who are breastfed are five times less likely to be admitted to hospital in the first year of life with infections and are less likely to become obese in later childhood
- Mothers who breastfeed their baby are less likely to develop pre-menopausal breast cancer
- Treating ill health related to poor diet is estimated to cost the NHS at least £4 billion each year



OBESITY IN STAFFORDSHIRE

- Overweight Body Mass Index (BMI): Despite a national decrease, the proportion of the population with a BMI defined as 'overweight' has increased in the Shropshire and Staffordshire SHA region over the last decade
- Estimated rates of obesity (as measured by BMI) mean BMI in England 27.1, West Midlands 27.6 and Staffordshire 27.0
- Data on childhood obesity in Staffordshire Moorlands suggest that the rates of obesity in children at reception age England 9.9%, North Staffordshire 12.4% and South Staffordshire 8.4% obese, at year 6 England 17.5%, North Staffordshire 18.8% and South Staffordshire 16.8% obese

For further information on obesity within Staffordshire click on the following link to download the

 [Joint Strategic Needs Assessment Jan 08.](#)



HEALTH INEQUALITIES AND WHY OBESITY & HEALTHY EATING MATTERS

KEY ISSUES

- Communities in greatest need face particular challenges in accessing good quality and affordable healthy food, in particular fresh fruit and vegetables. Poor eating habits are a result of wider socio-economic factors that impact on people's health and ability to make healthier eating the easy choice. It is not just a matter of personal choice. It is important that any programme of intervention takes a holistic approach that looks at awareness, attitude, access and affordability issues in collaboration with key partners.
- People who are obese or overweight are at increased risk of a wide range of diseases including coronary heart disease, stroke, diabetes, high blood pressure, some cancers, osteoarthritis and other musculoskeletal diseases. Additionally obese people suffer poor levels of fitness and possibly poor self-esteem and reduced quality of life. Obese children have increased risk of asthma and may also experience low self esteem and difficulty in socialising.
- The West Midlands Regional Lifestyle Survey in 2005 shows for both men and women that those in the most deprived areas are more likely to be obese than those living in less deprived areas.
- In England in 1999, the prevalence of obesity among black Caribbean women was 50% higher than average and among Pakistani women 25% higher than average.
- Obesity in Asian children was almost four times more common than in white children
- Obesity is more common among lower social groups. 16% of 'professional' males and females were obese, compared to 23% of males and 29% of females classed as 'unskilled manual'.
- Nationally the average consumption of fruit and vegetables for adults is less than 3 portions a day and for children less than 2 portions a day. In lower income households the consumption of fruit and vegetables is lower still.
- The impact of poor diets and increased levels of inactivity is the cause in the rise in obesity rates in the population. Nationally, one 8 in five adults are obese with over 30,000 deaths a year caused by obesity.
- The number of obese children has tripled in the last 20 years. In 2001, 8.5% of six year olds were obese, rising to 15% in 15 year olds.
- A typical diet of school aged children from low income households consists of a diet high in saturated fat, salt and sugar. Such a diet contributes to a long term risk of developing heart disease, stroke, diet related cancers, diabetes type 2, obesity, dental decay, anaemia, growth problems, low bone mass and reduces mental performance.

NATIONAL AND LOCAL TARGETS

"Tackle the underlying determinants of ill health and health inequalities by halting the year on year rise in obesity among children under 11 (from the 2002-04 baseline) in the context of a broader strategy to tackle obesity in the population as a whole".

There is a local Public Service Agreement Target for Staffordshire to halt the rise in obesity and overweight in two Staffordshire High Schools and the Primary Schools that feed into them.

STANDARD HEALTH RECOMMENDATIONS

- Eat a balanced diet, with a good mixture of foods that supply adequate energy and nutrients. A high proportion of the energy should come from complex carbohydrates such as potatoes, wholegrain rice and pasta and wholemeal bread.
- Reduce fat, salt and sugar content in the diet
- Eat at least 5 portions of fruit and vegetables per day
- In order to obtain health benefits people are recommended to be moderately physically active (equivalent to brisk walking) for at least 30 minutes, five days a week. Children should be physically active for a minimum of one hour a day, (this can be spread over different times, but should total a minimum of one hour).

WHAT IS EFFECTIVE IN REDUCING OBESITY AND OVERWEIGHT?

Body weight depends on the balance between energy used and energy consumed. Strategies to reduce overweight and obesity must therefore be based on promoting healthy eating patterns and encouraging physical activity.

The Health Development Agency's Effectiveness Reviews provide information on good practice and effectiveness. These include effectiveness reviews of interventions to promote breastfeeding and the management of obesity and overweight.

These reviews conclude that successful interventions:-

- Are located in the 4 key settings (community, schools, primary care and workplaces)
- Adopt a whole systems and client centred approach
- Have a sound theoretical framework for action
- Promote healthier options at the point of service
- Tackle the barriers to accessing and affording healthier food
- Tailor healthy eating messages to the target audience

For more information, click on the links below:

[Health Development Agency Breast Feeding Summary](#)

[NICE Obesity Project](#)

<http://www.5aday.nhs.uk/>

<http://www.dh.gov.uk/>

www.biglotteryfund.org.uk

[Faculty of Public Health](#) "Lightening the load" toolkit

Further advice and information can be obtained from:

Staffordshire County Council, Community Services, Health Development Team
14 Martin Street, Stafford, ST16 2LG

Tel: 01785 277832

Minicom: 01785 854156

Email: denise.vittorino@staffordshire.gov.uk

All of our information leaflets are available in a range of formats and languages, including Braille and large print. If this would be useful to you or someone you know, please contact us.

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