Staffordshire County Council

Better Health Staffordshire

Evidence Base

Strategy Team

October 2021

Background

- Obesity and healthy weights identified as a key priority for Staffordshire in the 2020 Joint Strategic Needs Assessment (JSNA)
- Better Health Staffordshire is the branding for a whole systems approach to support healthy weights and tackle the causes of obesity.
- This shared evidence base sets out Staffordshire's current position, drivers of obesity and areas of focus to inform vision work and future planning.
- To be used alongside professional knowledge and other local intelligence.
- Insights will also contribute to a wider evidence base to inform future decision-making on wider determinants that impact on healthy weights and active lifestyles.

Analysis Approach

- Utilised a range of national and local data sources – National Child Measurement Programme (NCMP), Public Health England Profiles, NHS data (NHS digital), Active Lives Survey and more.
- Underpinned by statistical techniques (age standardisation, 95% confidence intervals). If a prevalence is described as higher it will be statistically significantly higher.
- Supported with resident voice intelligence where appropriate.
- Delivered in collaboration with SCC's Public Health and Children and Families teams.
- Data caveats:
  - Local NCMP data aggregated into 3 year averages due to Covid-19 impacting on lower numbers of children being measured in 2019/20. Due to Covid-19, 2020/21 NCMP data has not been released at Local Authority level.
  - Healthy Weight data either limited or not available for both adults or children.
  - Population data uses the BMI classifications for adults and BMI thresholds for children, as recommended by the National Institute for Health and Care Excellence (NICE).
  - BMI classifications should not be used to describe individuals. Positive and sensitive language is encouraged when communicating with individuals and residents.

Key Headlines

- Healthy weights remain a key issue for both children and adults.
- The proportion of people living with excess weight and obesity in Staffordshire is generally higher than national, or compares less favourably among peers.
- Higher prevalence of excess weight in both urban and deprived areas and higher levels of those living with obesity related conditions in Staffordshire.
- Evidence of wider impact on the system - obesity related hospital admissions higher than average and on an upward trend. Musculoskeletal conditions also remain high among peers.
- Healthy weights challenge for children mainly focussed in Newcastle and for adults in Cannock Chase. However, challenges and opportunities exist across the county and can shift over time.
- COVID-19 likely to have negatively impacted lifestyle behaviours - Staffordshire's residents reported a mixed impact on healthy lifestyles during the first lockdown.

Contents

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Prevalence of Excess Weight in Staffordshire

At Reception age …

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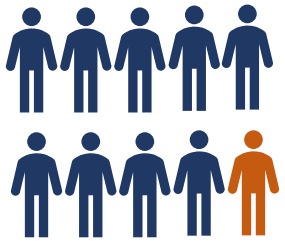
Prevalence of obesity and excess weight are both higher than national

1 in 4 live with excess weight (higher than national)



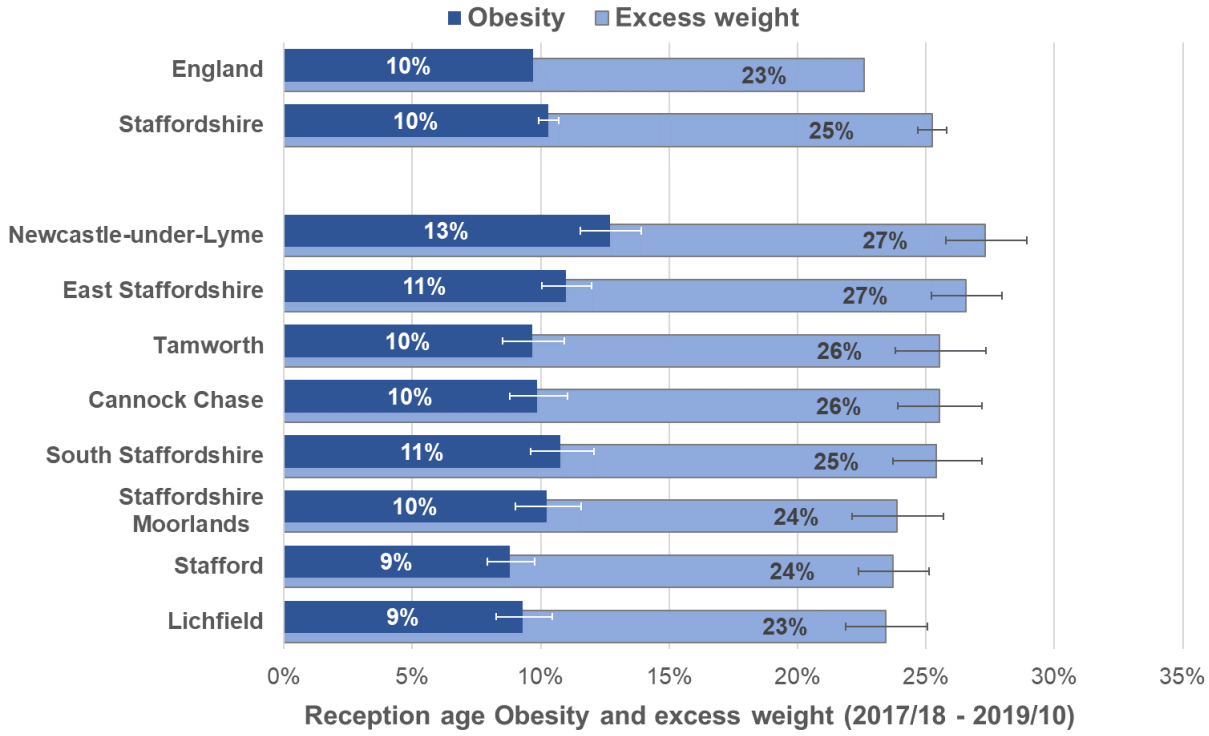
1 in 10 live with obesity (higher than national)

Excess weight has **steadily increased** from 23.7% in 2012-14 to 25.2% in 2017-20

Obesity has **steadily increased** from 9.5% in 2012-14 to 10.3% in 2017-20

Due to Covid-19, 2020/21 NCMP data has not been released at Local Authority level. National estimates point to increases in the prevalence of excess weight (from 23% in 2019/20 to 27.7 % in 2020/21) and obesity (from 9.9% in 2019/20 to 14.4% in 2020/21) in England.

District comparison



- East Staffordshire & Newcastle with a higher than national prevalence for **obesity** and **excess weight.**
- Cannock Chase, South Staffordshire & Tamworth have a higher than national prevalence for **excess weight.**

By year six...

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Obesity and excess weight have increased from reception age but are similar or lower than national.

1 in 3 live with excess weight (similar to national)

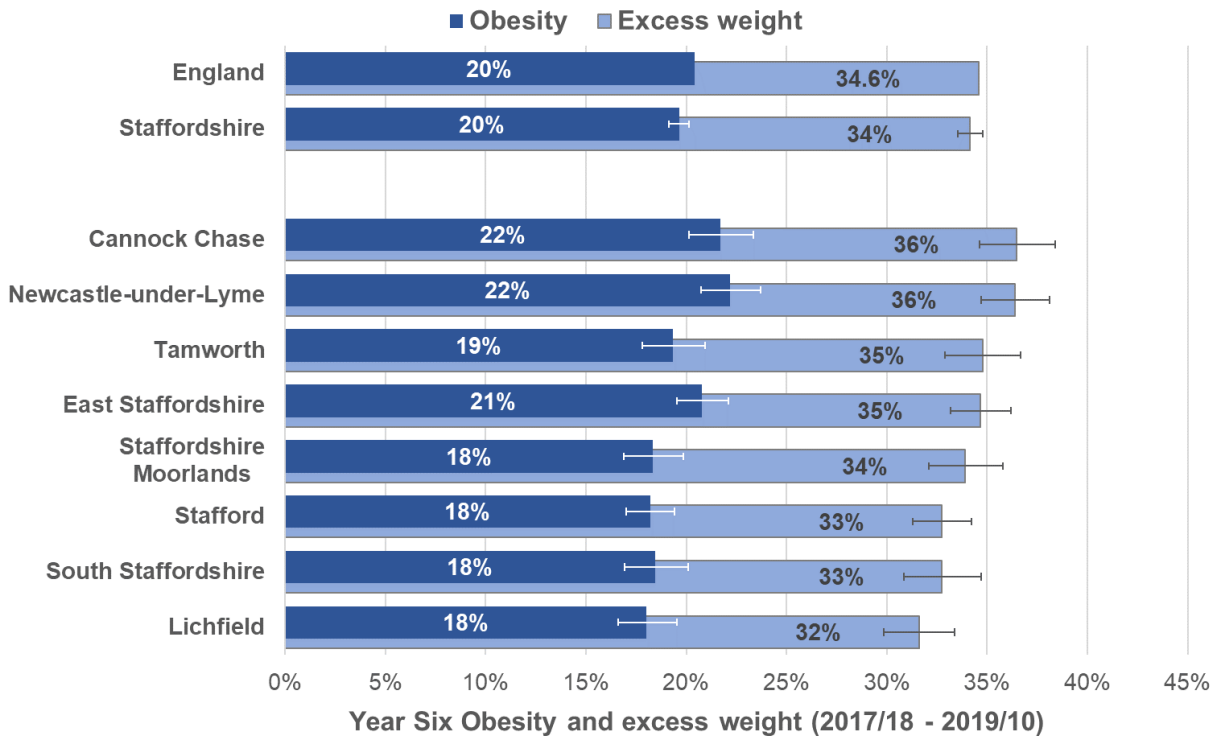
2 in 10 live with obesity, lower than national but double the reception prevalence of 1 in 10.

Excess weight trends are **stable**
(33.3% in 2012-14 to 34.2% in 2017-20)

Yet obesity has **steadily increased**
(18.4% in 2012-14 to 19.6% in 2017-20)

Due to Covid-19, 2020/21 NCMP data has not been released at Local Authority level. National estimates have been released with increases in the prevalence of excess weight (from 35.2% in 2019/20 to 40.9% in 2020/21) and obesity (from 21% in 2019/20 to 25.5% in 2020/21)

District comparison



- Similar to reception, Newcastle has higher than national prevalence for both **obesity** and **excess weight** *
- Increases from Reception to year six are seen in all districts, with the largest increase in Cannock Chase

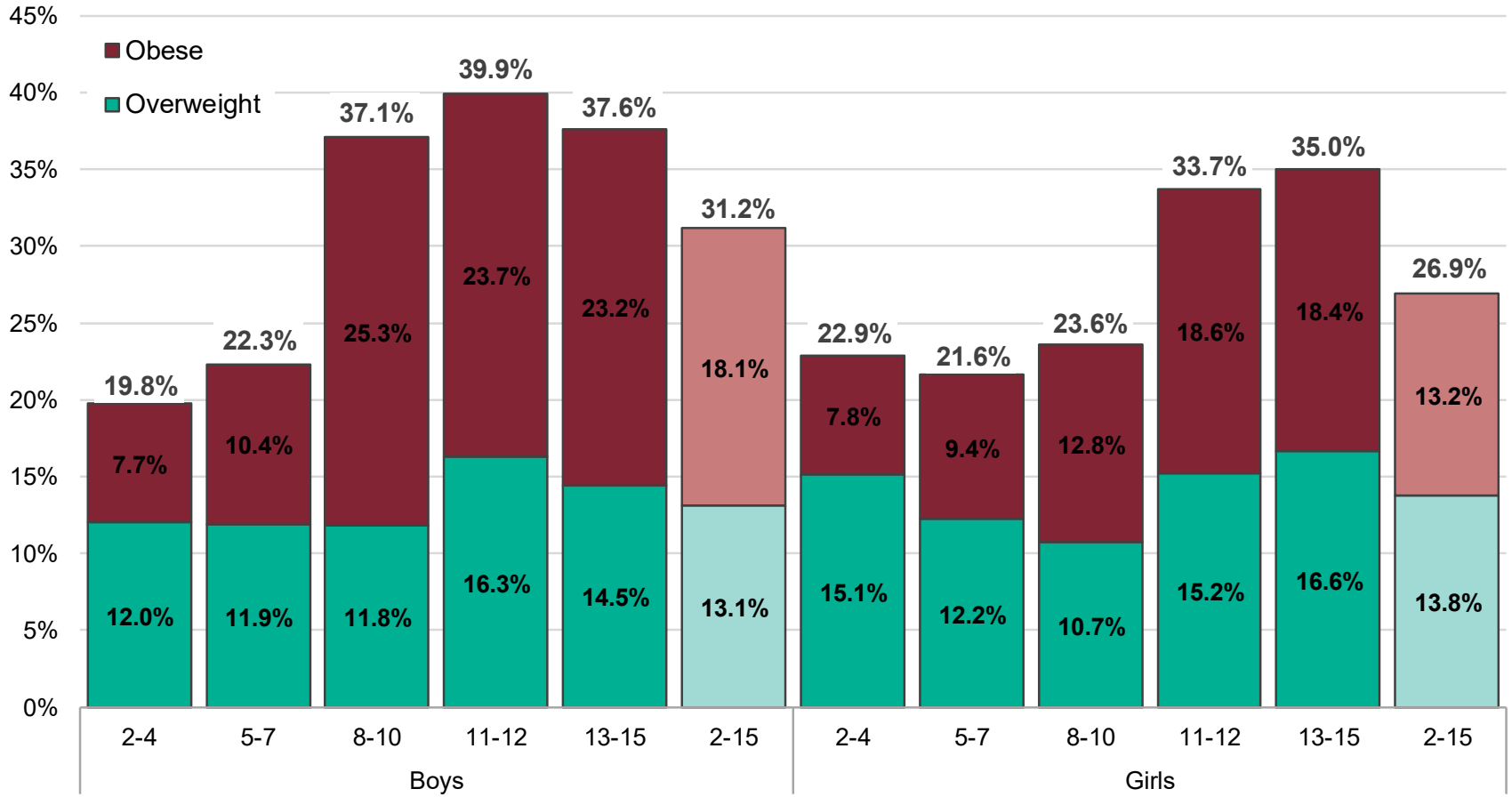
* Cannock Chase similar to national due to smaller numbers of pupils measured leading to larger confidence intervals

Higher Prevalence of Obesity by Year Six

- At Reception 25% of Staffordshire children have excess weight, increasing to 34% by year six.
- Rising obesity levels are a key reason for the increase – by year six the obesity prevalence has doubled to 20% compared to 10% at reception age.
- By Year 6 obesity prevalence is higher among boys (22%) than girls (18%)

Prevalence by Age and Gender

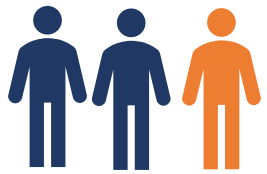
Health Survey for England 2018 and 2019 – Public Health England (Obesity Profile – PHE)



- National Health Survey data for England shows excess weight is more common in boys aged 11-12 and in girls aged 13-15.
- Obesity in boys is more prevalent in older age groups, also supported by local NCMP finding

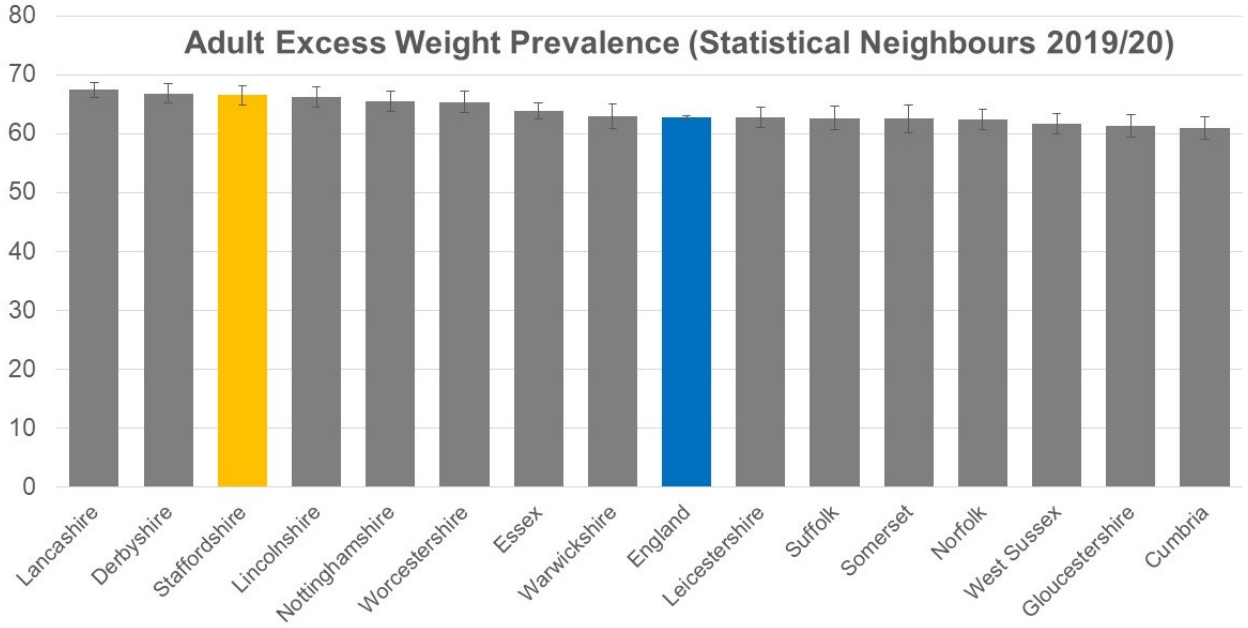
Excess Weight Continues into Adulthood

In Staffordshire…

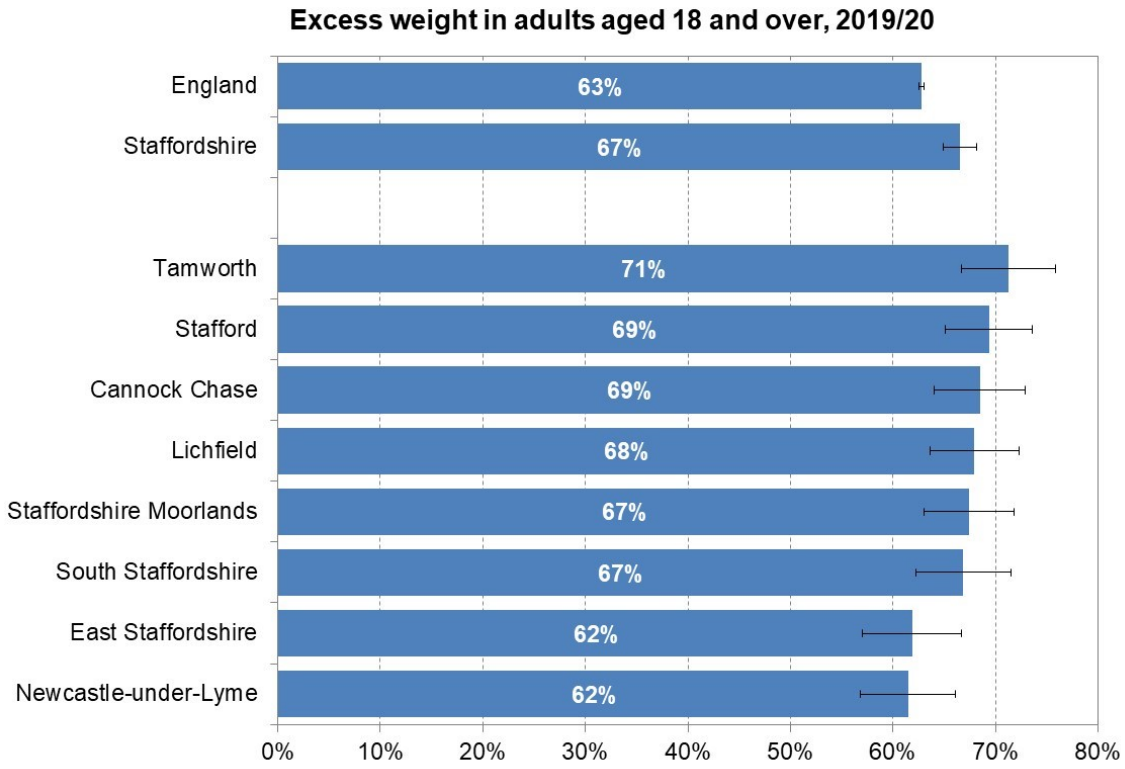


Excess weight trends are stable, yet **2 in 3** adults live with excess weight, higher than national.

Staffordshire also ranks the 3rd highest among similar authorities.



District comparison



- For adults the district focus varies, with higher than average prevalence in Cannock Chase, Lichfield, Stafford, Staffordshire Moorlands and Tamworth.

Source: PHE fingertips profiles

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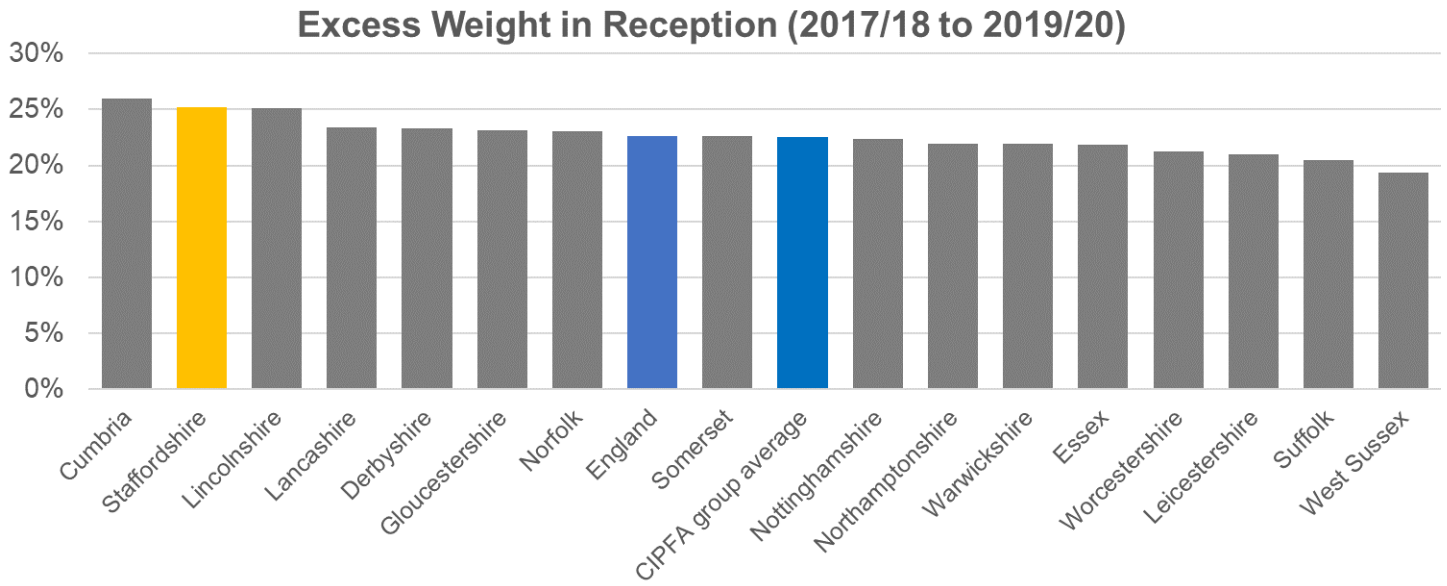
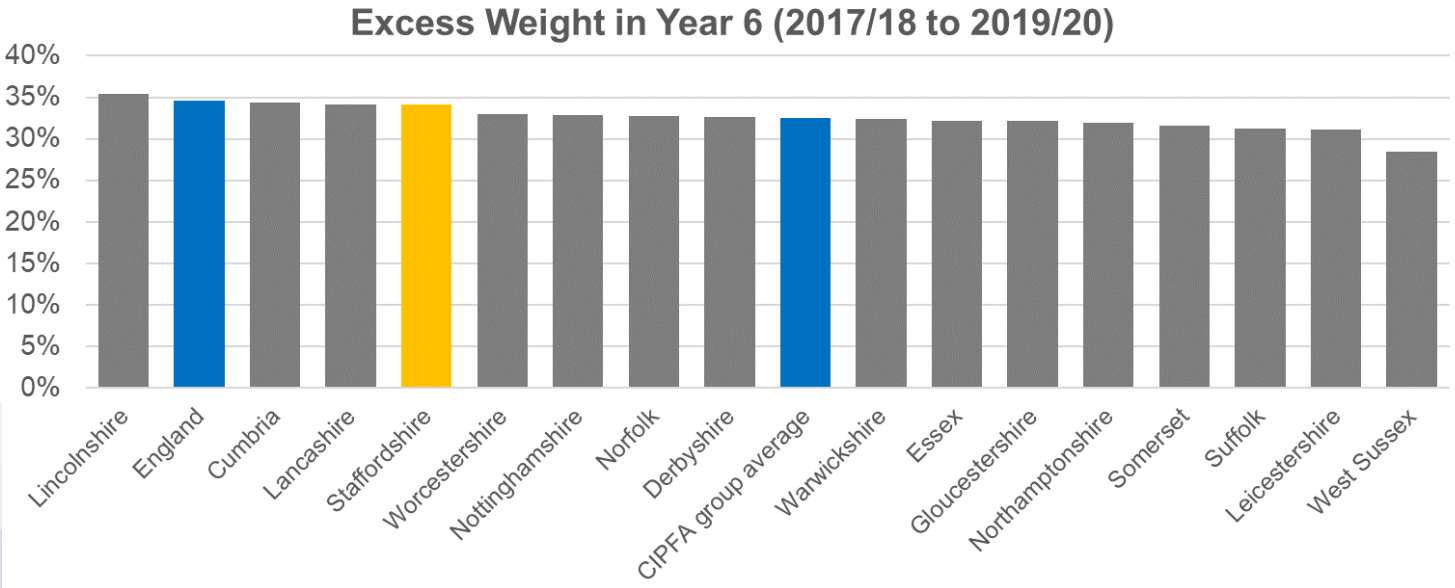
Excess Weight – A Local Focus

How does Staffordshire compare?

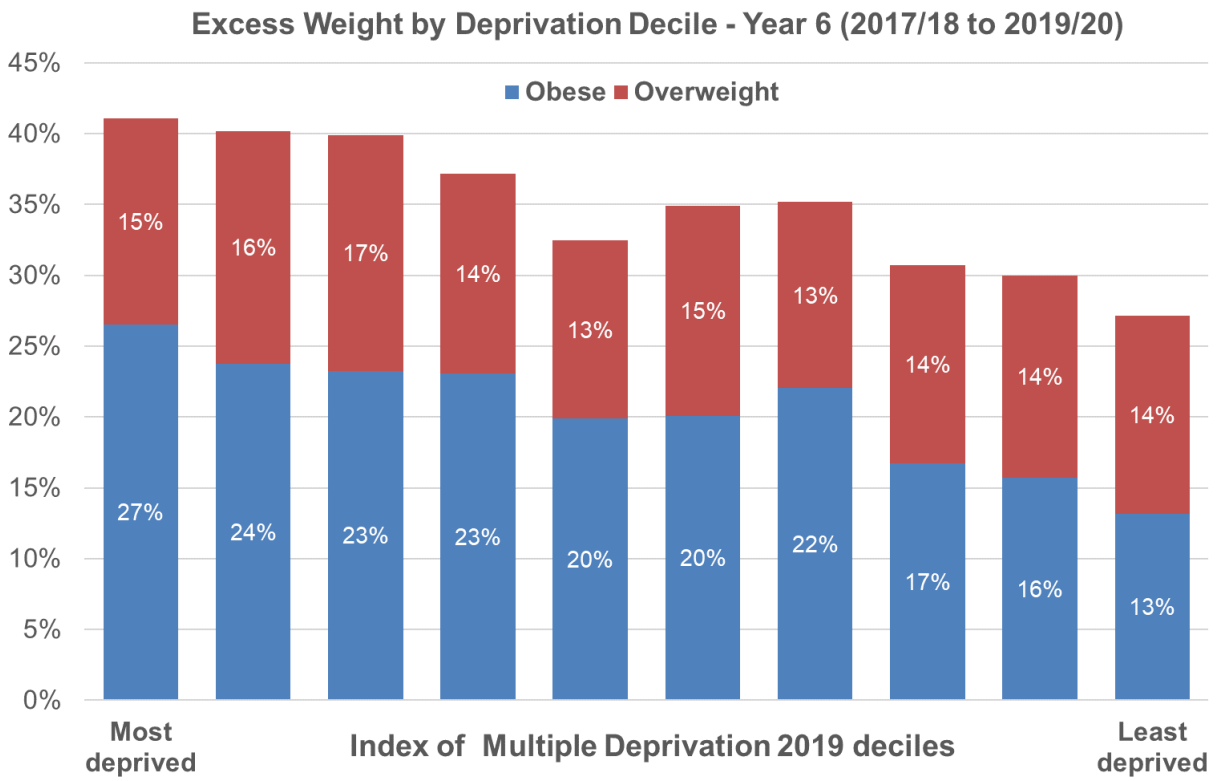


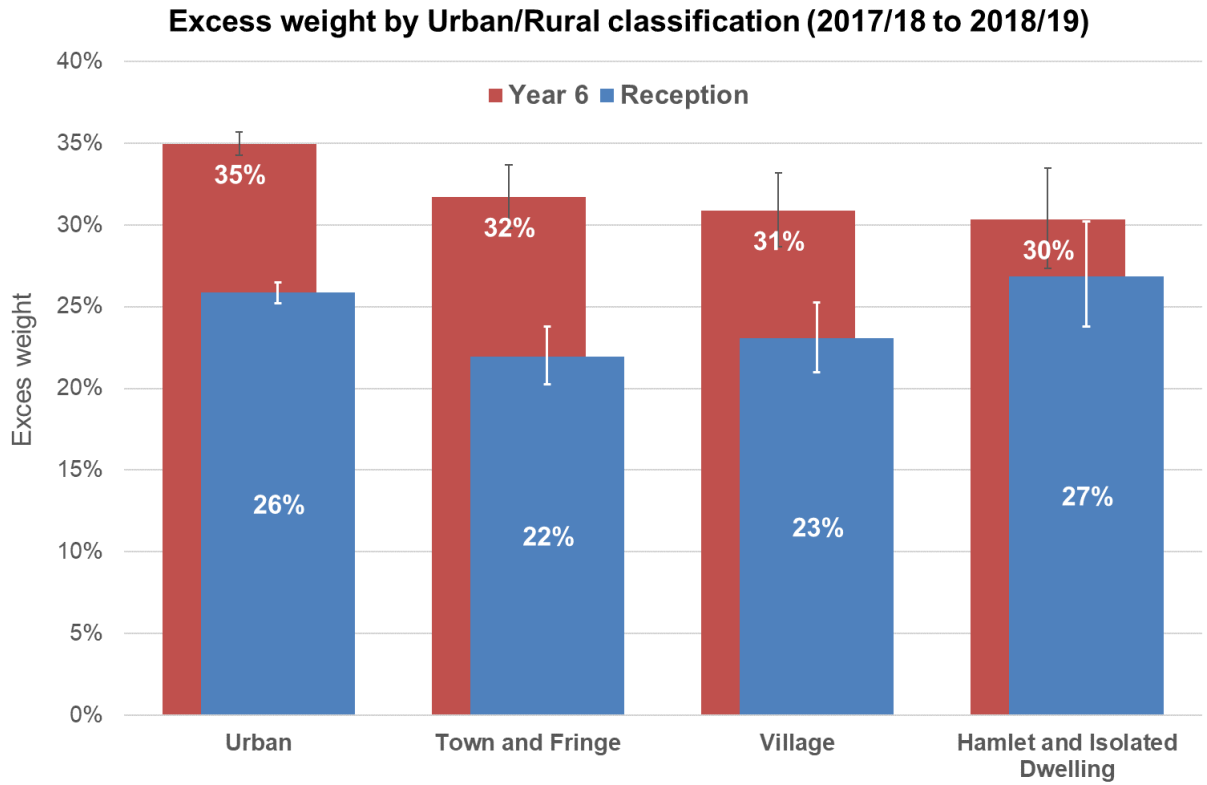
- Reception age excess weight is **2nd highest** of its statistical neighbour group.
- To be in line with the CIPFA average, there would need to be an additional **142** children of a healthy weight.



- Year 6 excess weight is **4th highest** of its statistical neighbour group.
- There would need to be an additional **128** children of a healthy weight to meet the CIPFA average.

Higher levels of obesity in urban and deprived areas





- For both reception and year 6, the prevalence of obesity in Staffordshire's least deprived areas is half that of our most deprived areas.
- By Year 6 excess weight is less prevalent in Staffordshire's rural areas than urban areas.

Source: NCMP local dataset and PHE fingertips profiles, IMD 2019 and Urban Rural classification

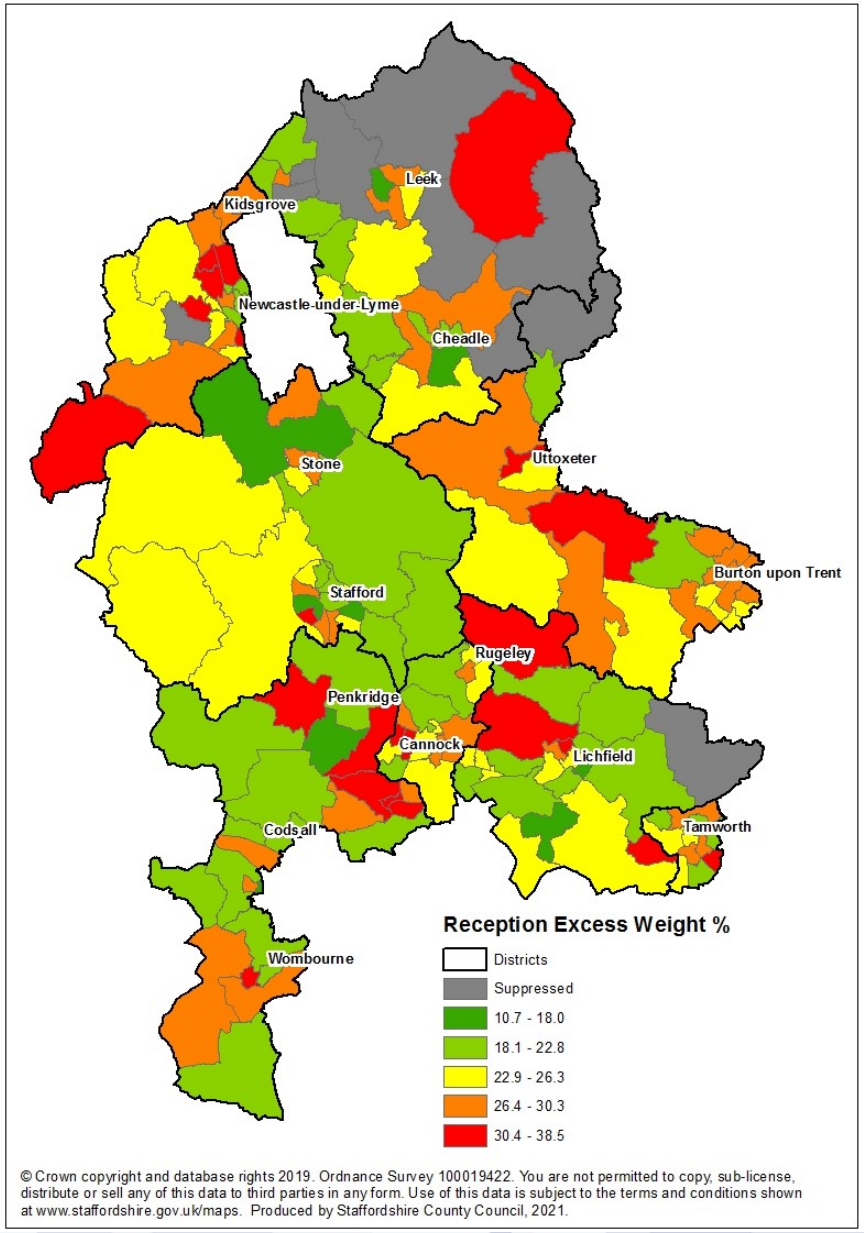
The Indices of Deprivation are a measure of relative deprivation at a local level across England. The IMD combines information from the seven domains to produce an overall relative measure of deprivation. The domains are combined using the following weights: Income Deprivation (22.5%), Employment Deprivation (22.5%), Education, Skills and Training Deprivation (13.5%), Health Deprivation and Disability (13.5%), Crime (9.3%), Barriers to Housing and Services (9.3%), Living Environment Deprivation (9.3%).

Reception – Areas of Focus

Across Staffordshire excess weight is significantly higher than average in 28 of 164 wards.

- **Cannock Chase:** Cannock East and Cannock North
- **East Staffordshire:** Branston, Eton Park, Heath and Horninglow
- **Lichfield:** Chadsmead, Curborough and Fazeley
- **Newcastle:** Bradwell, Clayton, Crackley & Red Street, Cross Heath, Holditch & Chesterton, Kidsgrove & Ravenscliffe, Loggerheads and Silverdale
- **South Staffordshire:** Cheslyn Hay North and Saredon, Cheslyn Hay South, Great Wyrley Landywood, Huntington and Hatherton, Perton Lakeside and Wombourne South West
- **Stafford:** Highfields & Western Downs and Penkside
- **Staffordshire Moorlands:** Leek North
- **Tamworth:** Glascote and Stonydelph

Reception Excess Weight (2017/18 to 2019/20)



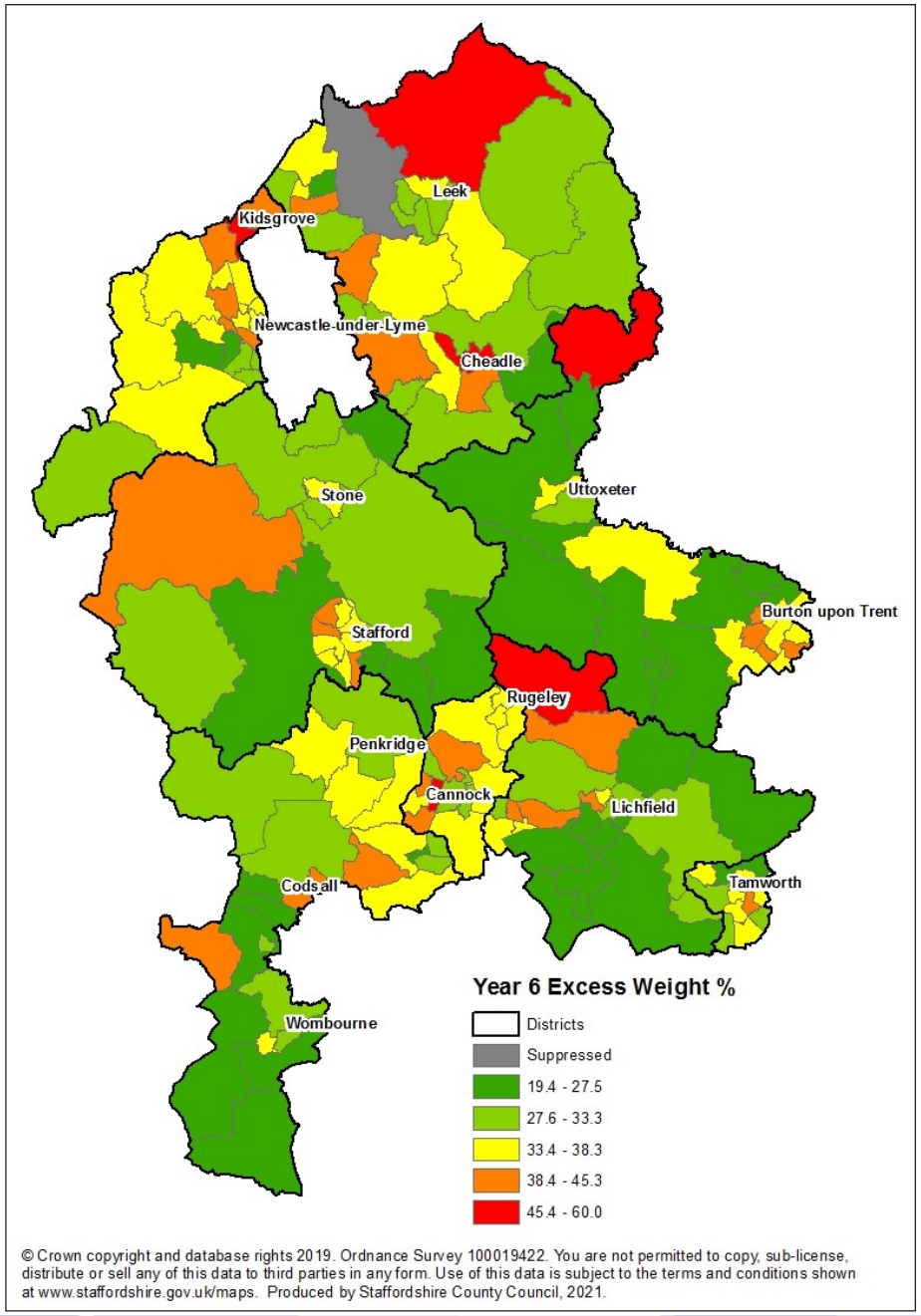
Year 6 – Areas of Focus

- Across Staffordshire excess weight is significantly higher than average in 13 of 164 wards.

- **Cannock Chase:** Cannock East
- **East Staffordshire:** Anglesey, Horninglow, Shobnall and Weaver
- **Lichfield:** Armitage with Handsacre
- **Newcastle:** Holditch & Chesterton and Kidsgrove & Ravenscliffe
- **South Staffordshire:** Featherstone and Shareshill
- **Stafford:** Eccleshall
- **Staffordshire Moorlands:** Cheadle North East and Dane
- **Tamworth:** Glascote

Key areas of focus for <u>both</u> Reception and Year 6 are:
Cannock East, Horninglow, Glascote, Holditch & Chesterton and Kidsgrove & Ravenscliffe.
Appendix 1 contains further detail on key areas of focus.

Year 6 Excess Weight
(2017/18 to 2019/20)



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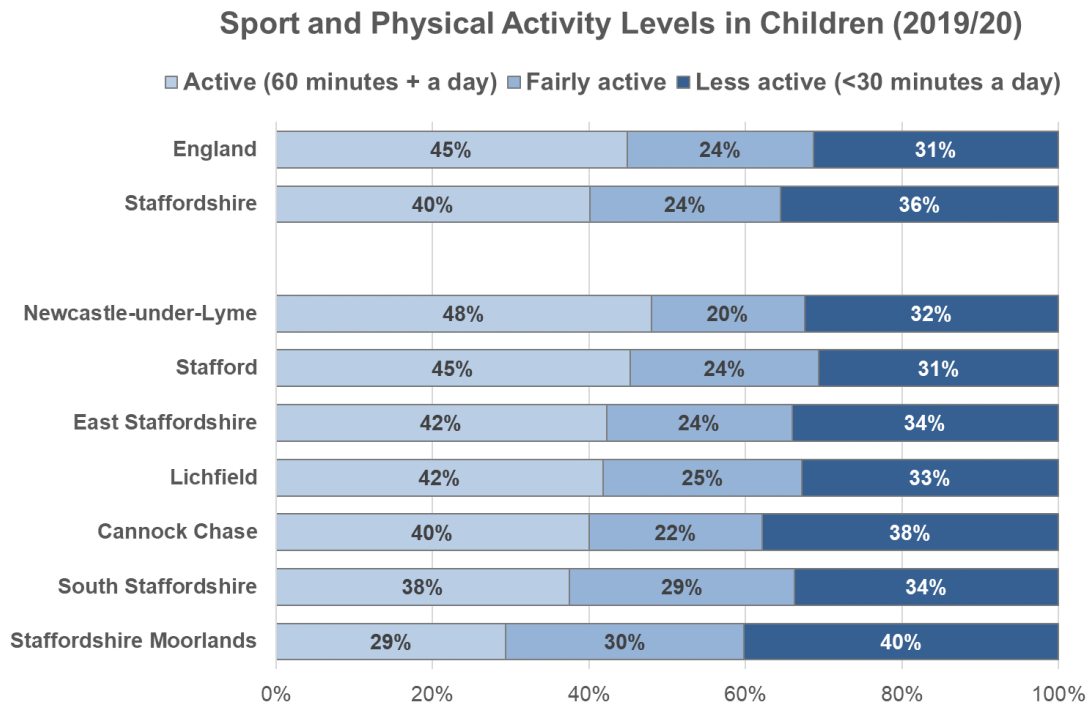
Factors Influencing Healthy Weights and Active Lifestyles

Physical Activity Levels in Staffordshire

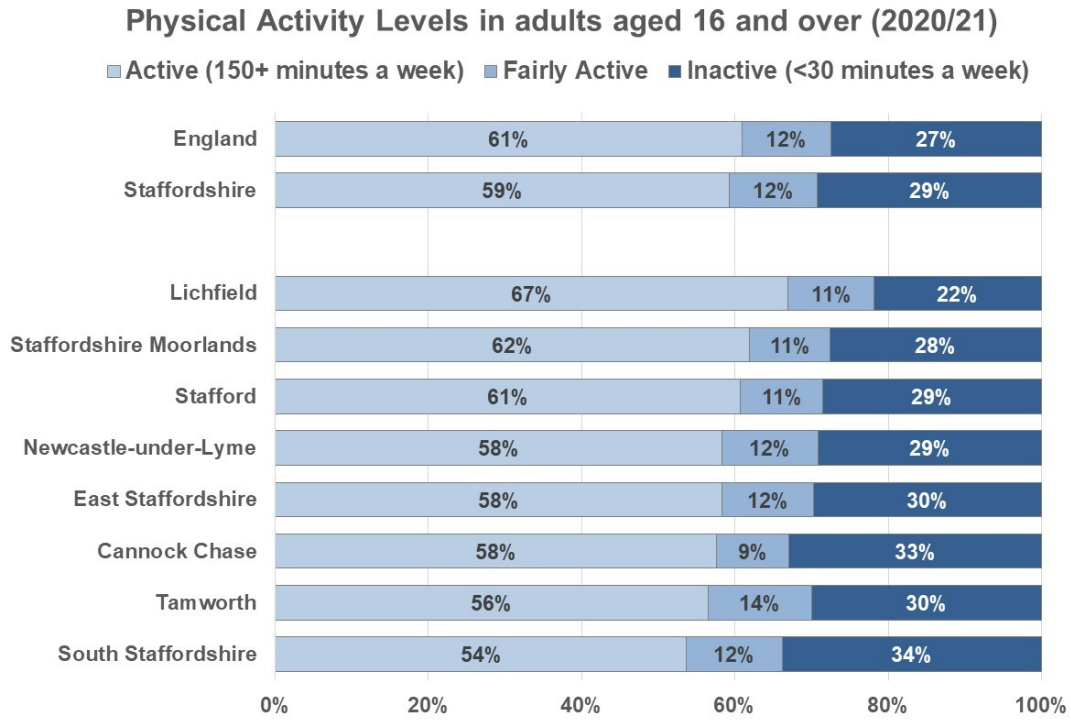
Children (2019/20)



Source: Active Lives Survey (2019/20) - Children and Young People in school years 1-11 ** **Tamworth missing due to incomplete coverage**

- 1 in 3 children are active for less than 30 minutes a day, higher than national.
- Lower than national activity levels focussed in Staffordshire Moorlands and South Staffordshire.

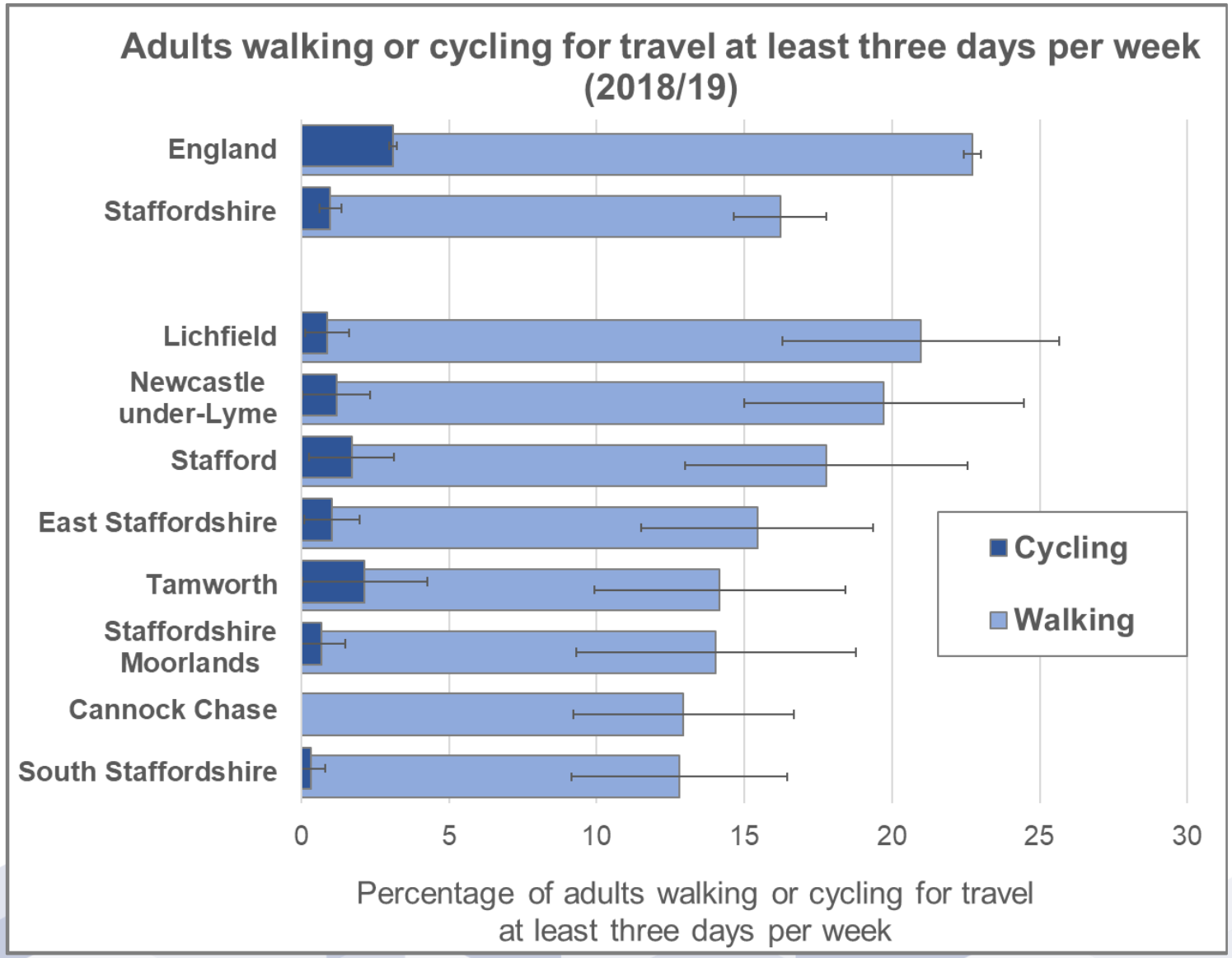
Adults (2019/20)



Source: Active Lives Survey (2020/21) – Note PHE (PHOF) also publish adult activity levels for ages 19+

- 6 in 10 adults are active for more than 150 minutes a week, with 3 in 10 active for less than 30 minutes a week.
- Activity levels are statistically lower than national in South Staffordshire.

Low Levels of Walking or Cycling

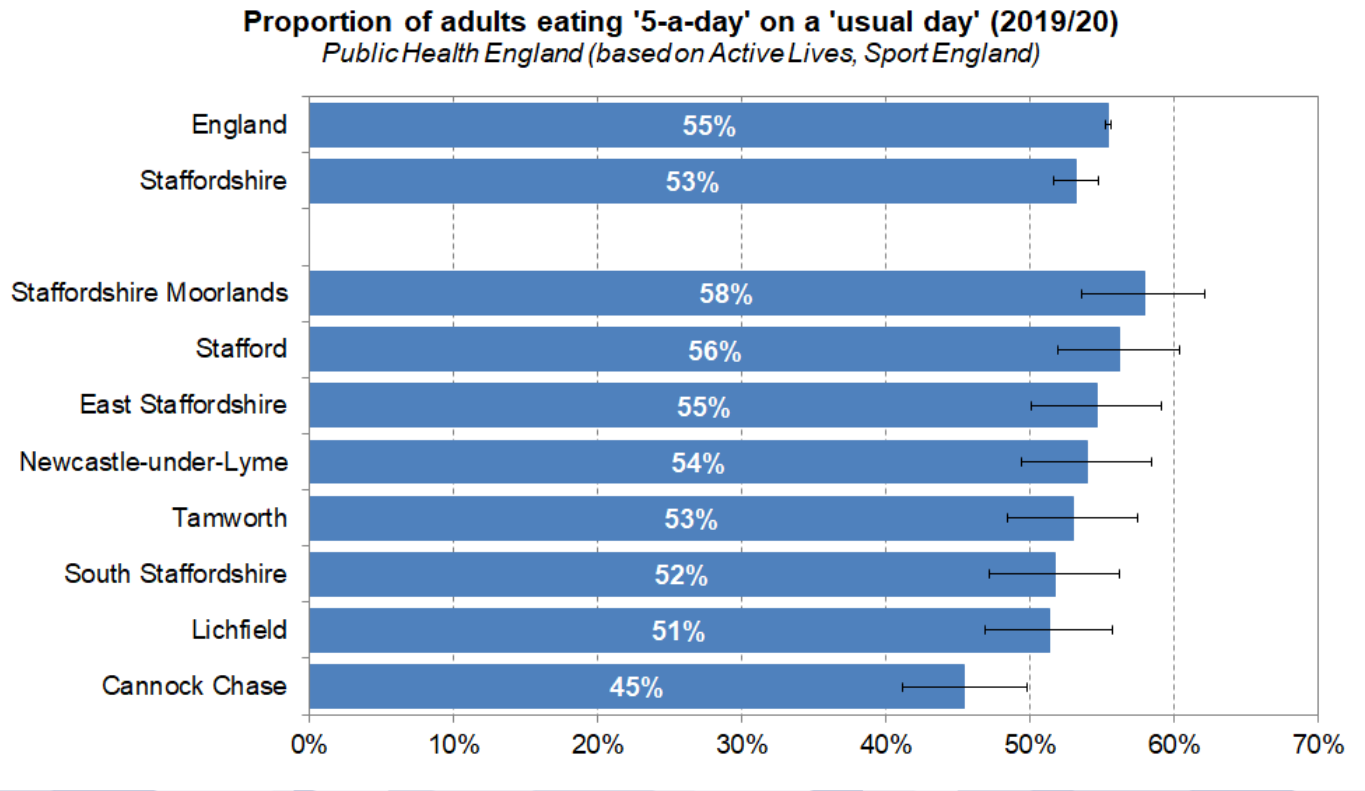


- Low physical activity levels are also supported by a range of proxy measures.
- Just 1 in 6 adults walk and 1 in 100 cycle for travel at least three days a week - both lower than national.
- The proportion walking or cycling for travel is also lower than national.
- Lowest levels in Staffordshire Moorlands, Cannock Chase and South Staffordshire

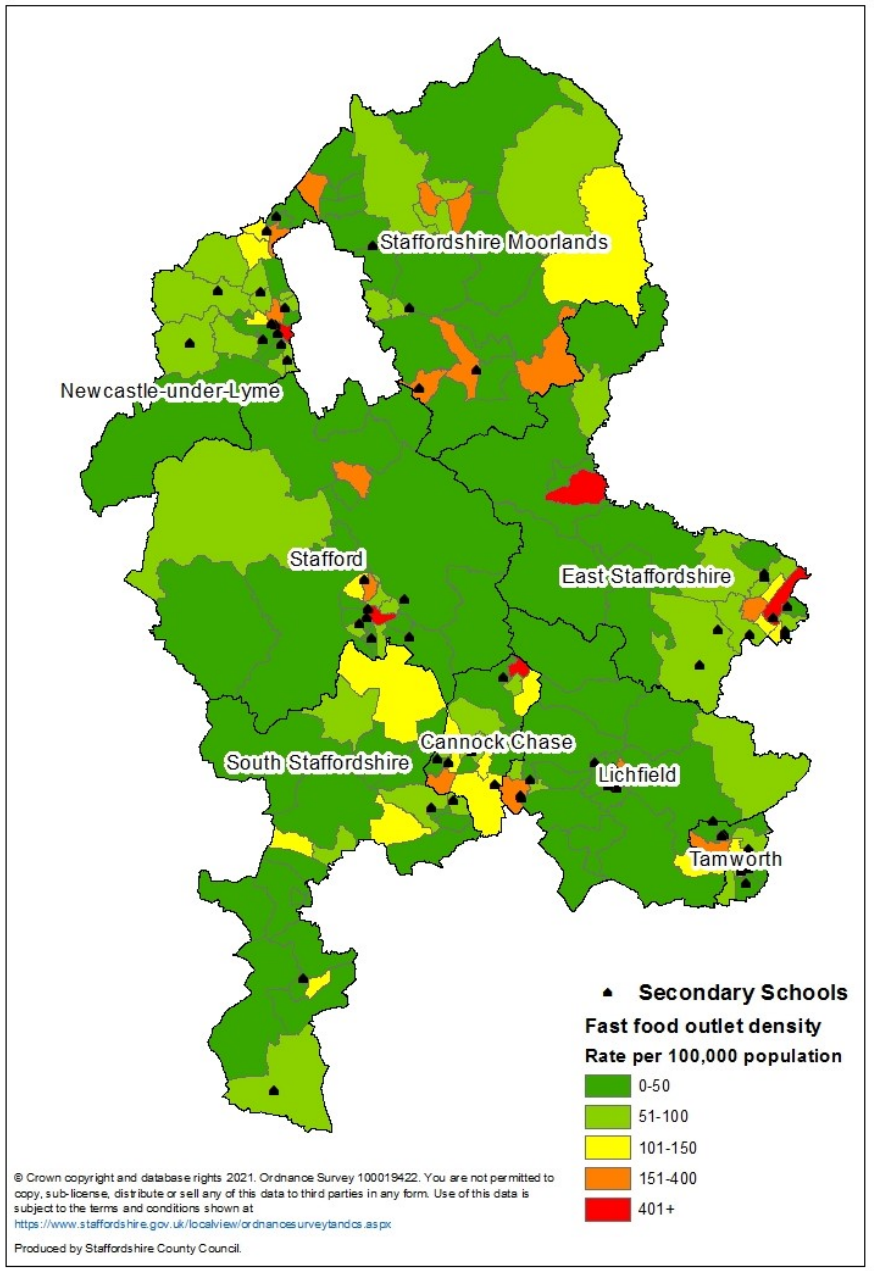
Source: Public Health England (based on Active Lives, Sport England)

Lower levels of Healthy Eating

- 53% of Staffordshire adults eat five a day, lower than national, with Cannock Chase an area of focus.
- The density of fast food outlets is similar to national, although higher in Cannock Chase and East Staffordshire. These are clustered in areas of deprivation and town centres, and not necessarily near to schools.



Fast food outlet density (2017)



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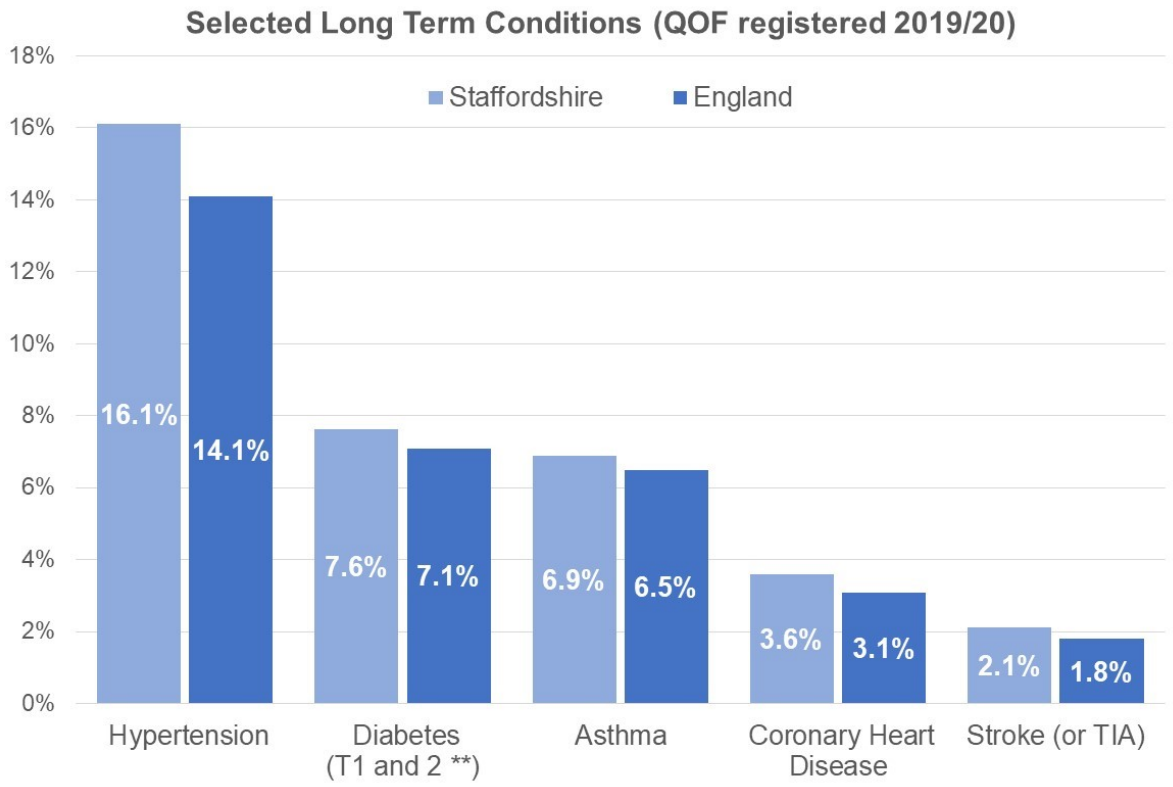
Impact on Health and Wellbeing and Health Services

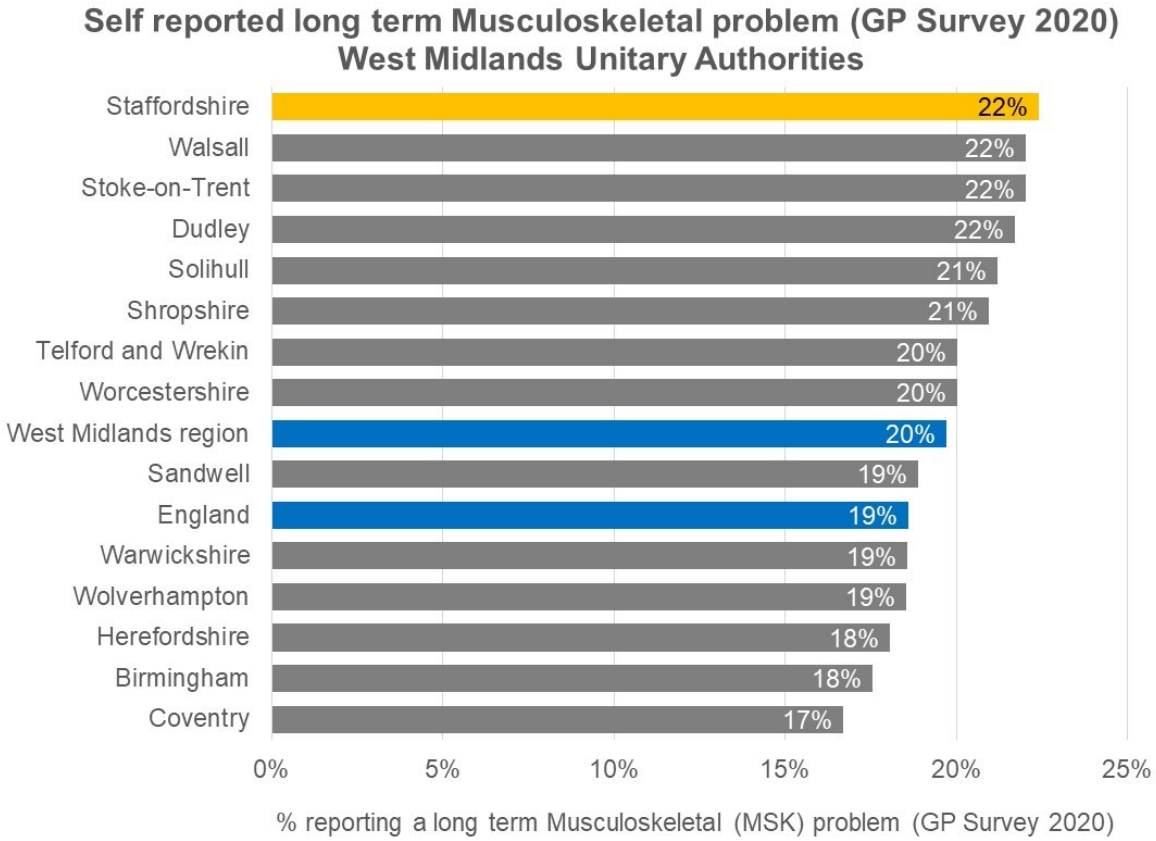
Higher levels of obesity related conditions

Prevalence of obesity related conditions* such as Hypertension, Diabetes, Asthma, Coronary Heart Disease, Stroke and Musculoskeletal problems all remain higher than national.



Source: Quality and Outcomes Framework (QOF)

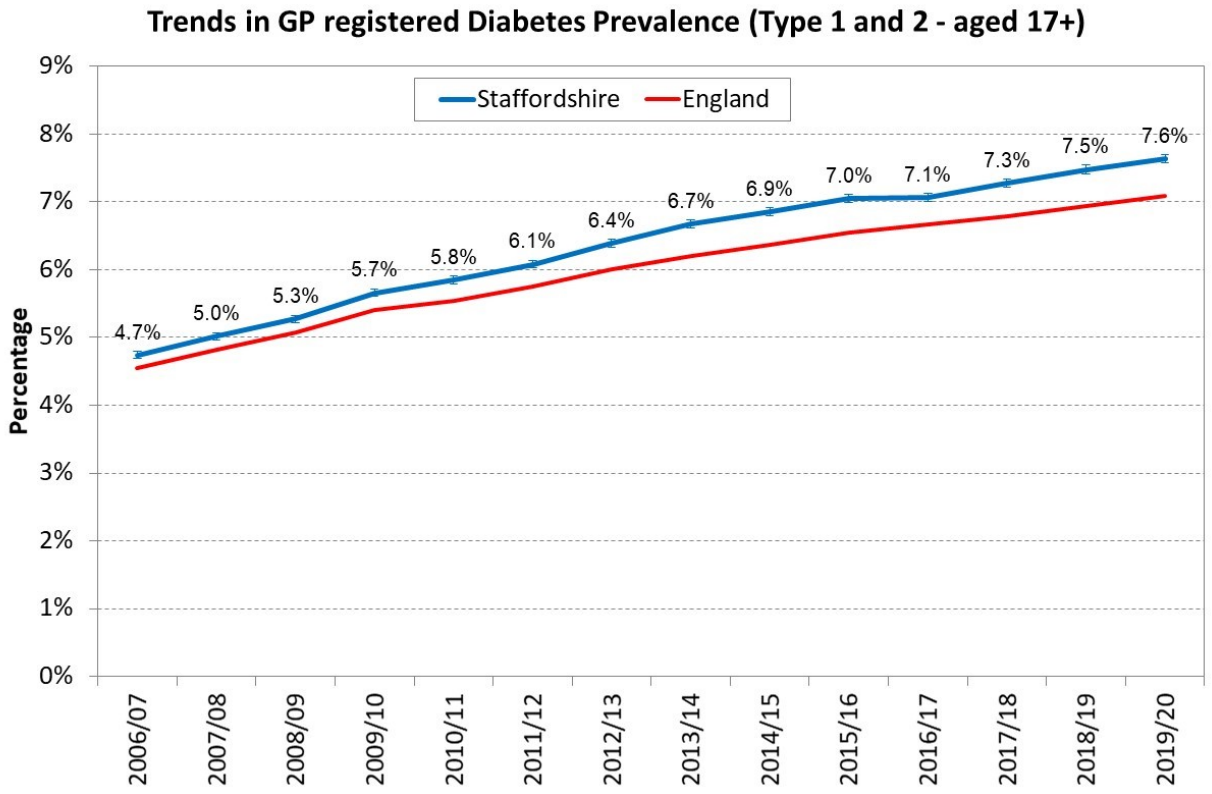
* Not age standardised. Staffordshire has an older age structure than England. The contribution of obesity to each condition varies. Source : See Obesity - NHS (www.nhs.uk).



Staffordshire has the highest self reported prevalence of Musculoskeletal conditions in the West Midlands.

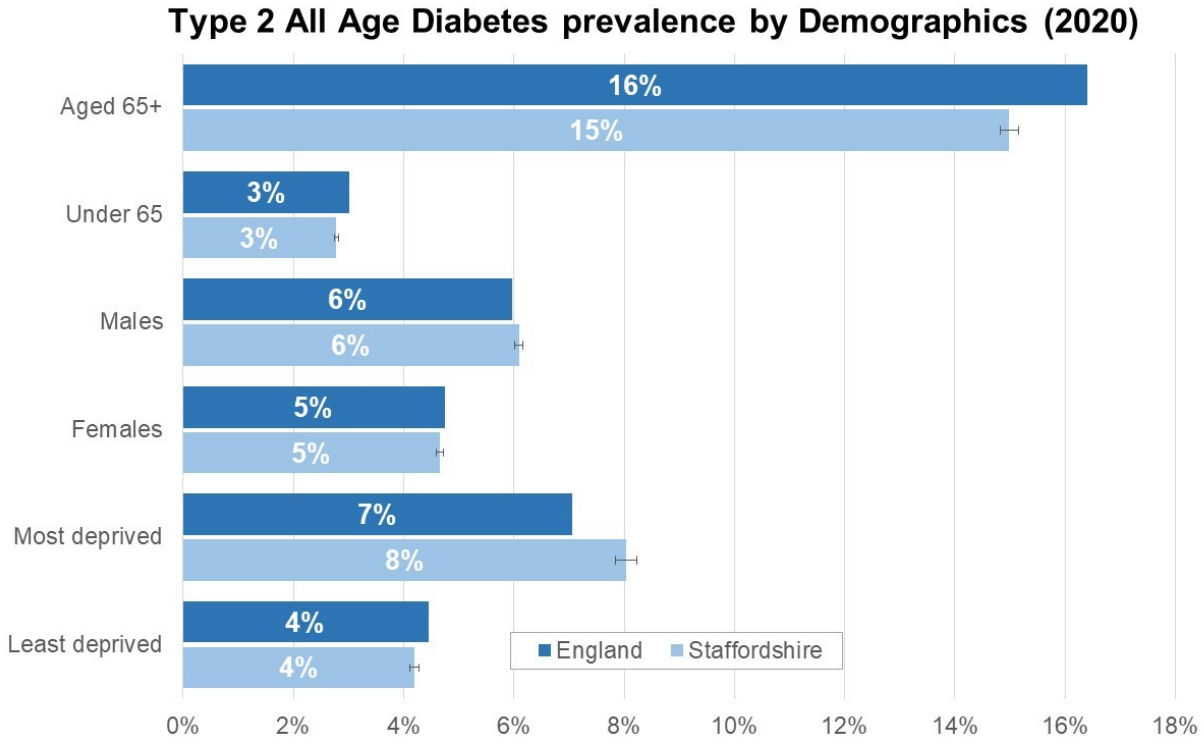
Increasing Prevalence of Diabetes

The prevalence of GP registered Diabetes (Type 1 and 2) in Staffordshire is higher than national and is rising.



Source: Quality and Outcomes Framework (QOF)

In Staffordshire 93% of diabetes patients are Type 2 (National Diabetes Audit), particularly higher in older ages, males and in the most deprived area.

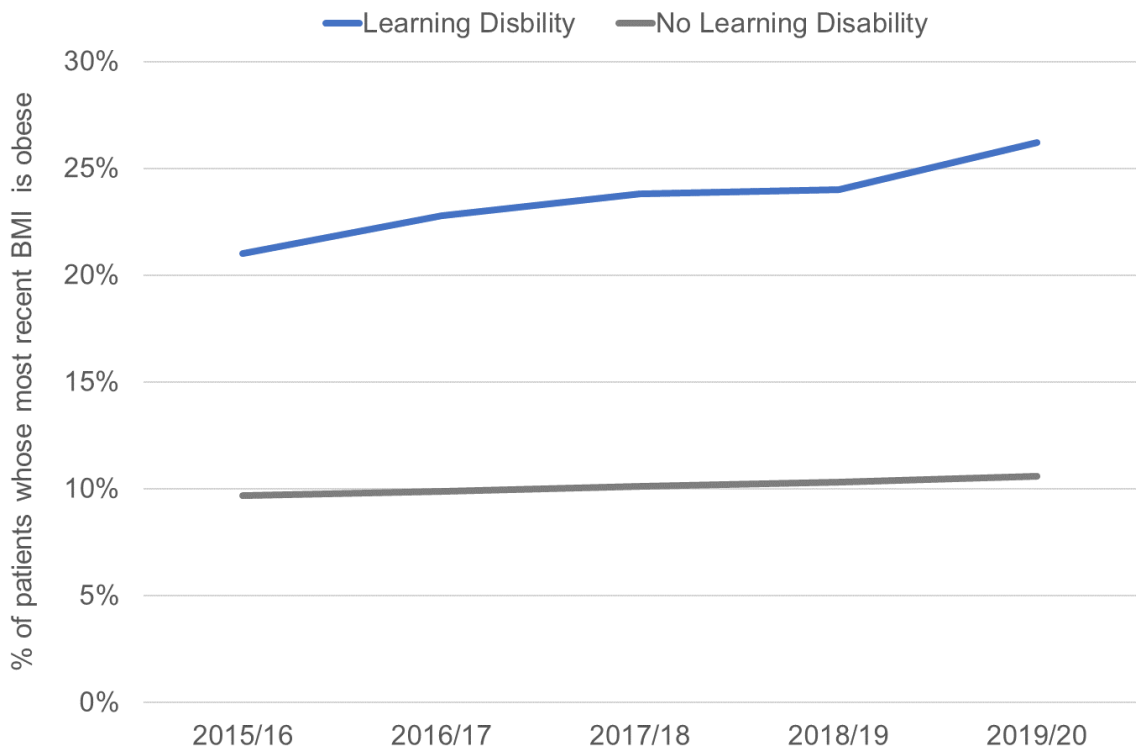


Source: National Diabetes Audit

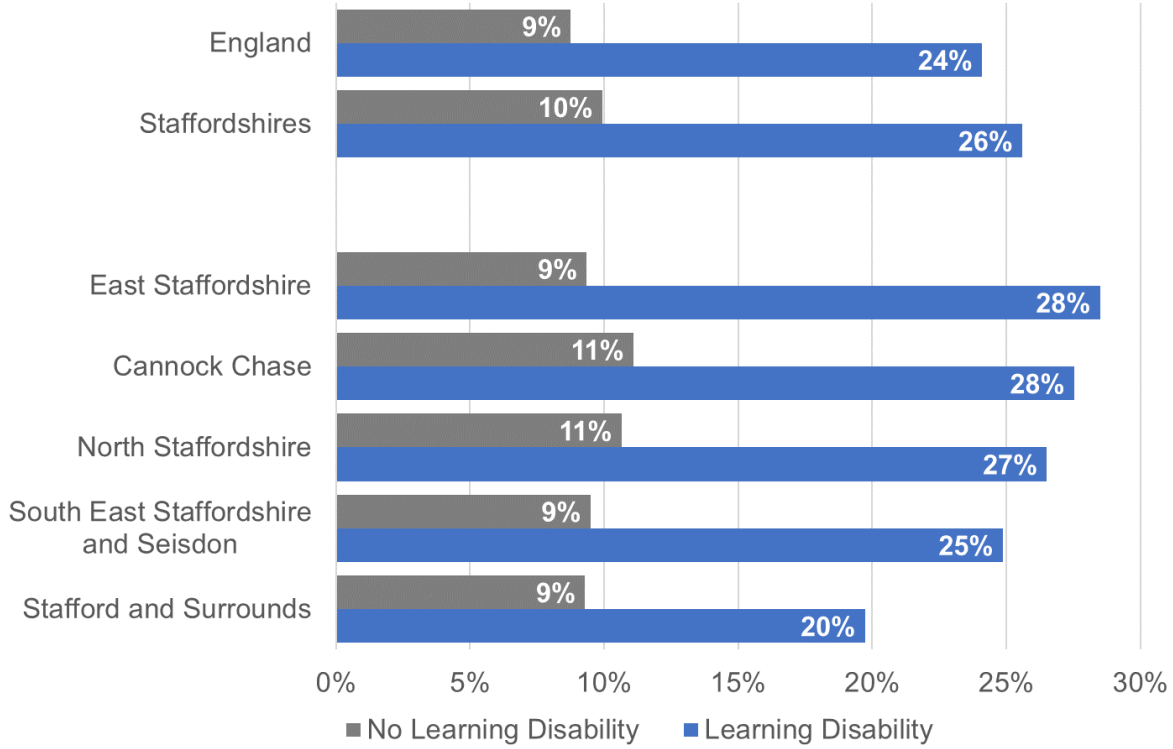
Rising Obesity Among Patients with Learning Disabilities

GP registered prevalence of obesity is almost three times greater in patients with Learning Disabilities, compared to people without and the gap is widening.

Trends in obesity in Staffordshire patients with Learning Disabities



Obesity in patients with Learning Disabities 2019/20



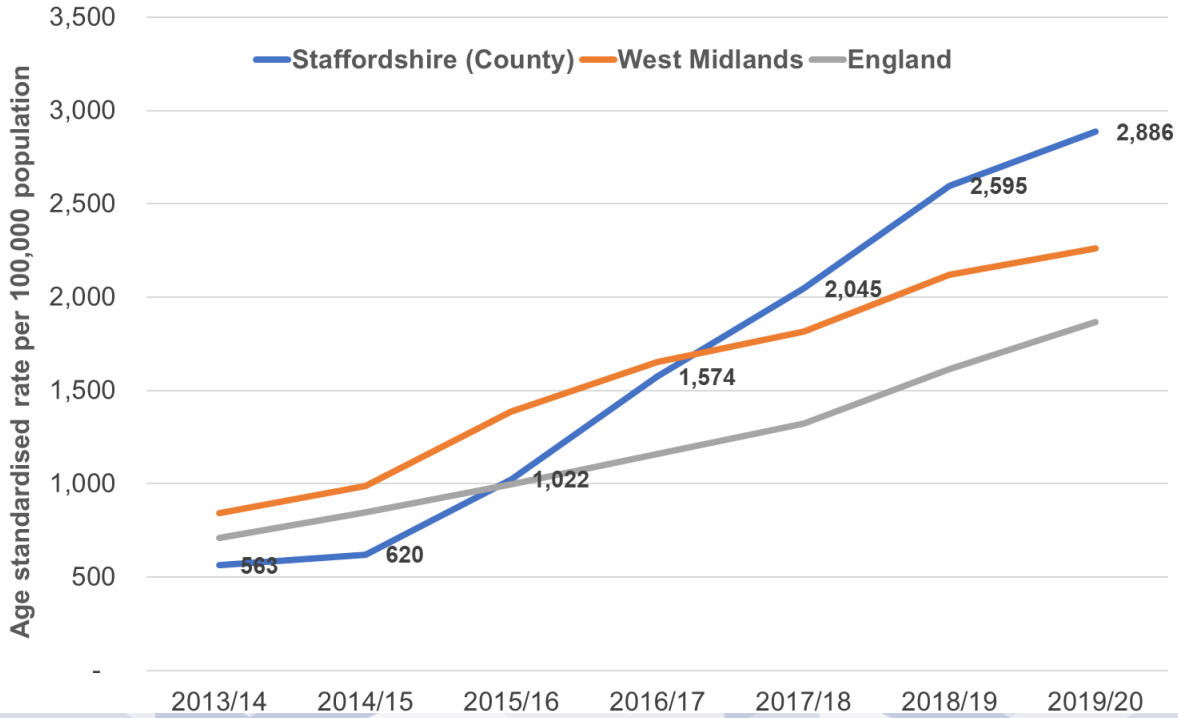
Source: Health and Care of People with Learning Disabilities Experimental Statistics 2019 to 2020 - NHS Digital

*Based on experimental statistics – please note the above is a GP recorded prevalence of obesity so will not match estimates of excess weight derived from the active lives / people survey

Rising Obesity Related Hospital Demand

- Obesity related hospital admissions higher than national and on an upward trend.
- Twice as many admissions in Staffordshire are female than male.

Tends in hospital admissions where obesity was a factor
Finished Admission Episodes with a primary or secondary diagnosis of obesity



Source: NHS Digital

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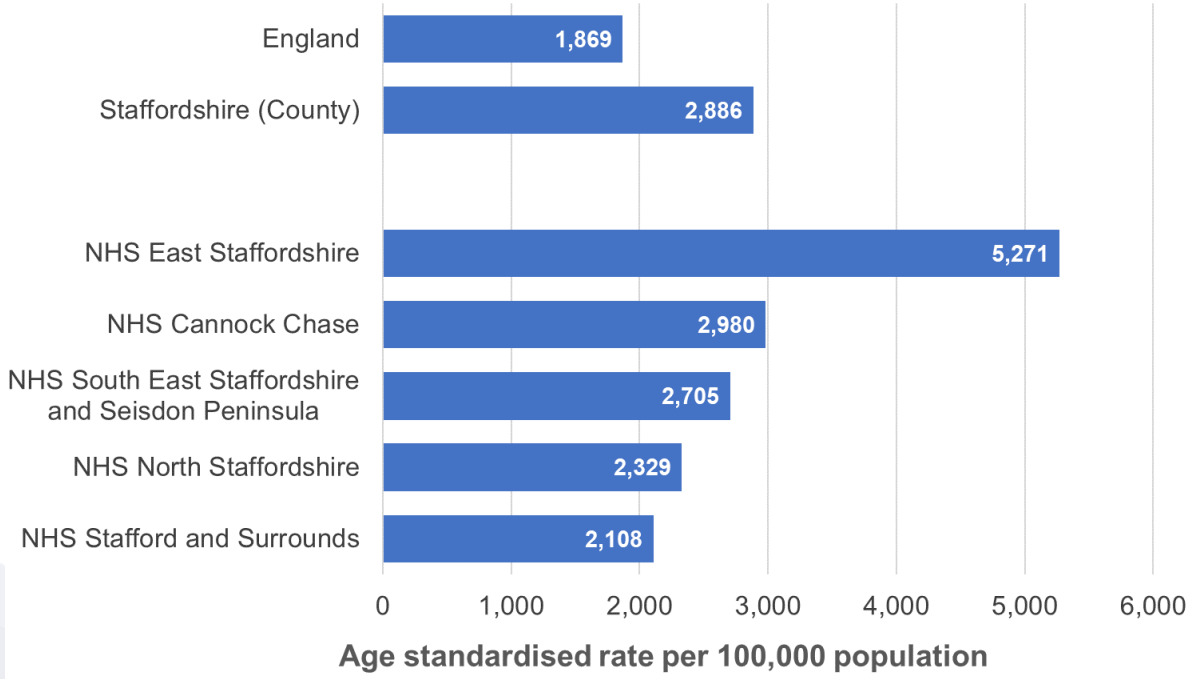
Hospital admissions where obesity was a factor 2019/20
Finished Admission Episodes with a primary or secondary diagnosis of obesity



Source: NHS Digital

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COVID-19 Impact and Resident Voice

COVID-19 Resident Impact

In Staffordshire:

- Residents report a mixed picture for lifestyle behaviours during the first lockdown.
- Increases in exercise reported by some (31%), balanced against decreases amongst others (29%).
- The same is also true for healthy eating.
- Positively, many respondents planned to maintain healthy behaviours.

	Exercise	Alcohol consumption	Eating healthy
Did more of	31%	27%	21%
No change	39%	46%	56%
Did less of	39%	10%	23%
Plan to keep doing	39%	9%	48%

Source: Staffordshire COVID-19 Residents' Survey (2020)

Nationally:

- COVID-19 adversely impacted diet and physical activity in many children, young people and adults
- Over half of adults found it difficult to manage weight during lockdowns due to increased snacking, reduced exercise, anxiety or stress, and accessing healthy food.
- Those with higher BMIs had difficulty in accessing healthy food, lacked motivation and control around food and lacked support compared to before lockdown.
- Reduced access to Weight Management Services and support during lockdowns.
- Evidence suggests excess weight is associated with an increased risk of a positive COVID-19 test and more severe illness.

Sources: Supporting weight management services during the COVID-19 pandemic (PHE, 2020), Obesity, eating behaviour and physical activity during COVID-19 lockdown: A study of UK adults (University of Liverpool, 2020), Excess Weight and Covid-19: Insights from new evidence (PHE, 2020), Impact of Covid-19 on Health related behaviours, wellbeing and the ability to manage weight (Slimming World, 2020)

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Appendix 1: Areas of Focus Summary - Data Matrix

Areas of Focus Overview

- Addressing the needs of communities will differ, therefore a targeted approach is required to tackle specific issues in areas of greatest need.
- The table below provides a summary of the key supporting metrics and indicates districts where results are worse than national - Cannock Chase and Newcastle are consistently highlighted across many of the key areas.

	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire
Reception Exces Weight prevalence	■	■		■	■			■	■
Reception Obesity prevalence		■		■					■
Year 6 Exces Weight prevalence				■					
Year 6 Obesity prevalence				■					
Adult Exces Weight prevalence	■		■			■	■	■	■
Physical Activity in Children					■		■		■
Physical Activity in Adults									
Five a day consumption	■								■
Density of Fast Food Outlets	■	■							
Hypertension prevalence	■		■	■	■	■	■	■	■
Diabetes prevalence	■	■	■	■	■		■	■	■
Coronary Heart Disease prevalence	■		■	■	■	■	■	■	■
Asthma prevalence	■	■	■	■	■	■	■	■	■
Stroke prevalence	■		■	■	■	■	■		■
Musculoskeletal conditions	■			■	■		■	■	■
Obesity related hospital admissions	■	■	■	■	■	■	■	■	■

Incomplete Physical activity in children data for Tamworth

Supporting Data Matrix

	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	England
Reception Exces Weight Prevalence	26%	27%	23%	27%	25%	24%	24%	26%	25%	23%
Statistical Neighbour Rank	4 of 16	1 of 16	8 of 16	1 of 16	3 of 16	6 of 16	5 of 16	2 of 16	2 of 16	
Reception Obesity Prevalence	10%	11%	9%	13%	11%	9%	10%	10%	10%	10%
Statistical Neighbour Rank	10 of 16	2 of 16	7 of 16	1 of 16	3 of 16	10 of 16	5 of 16	11 of 16	2 of 16	
Year 6 Exces Weight Prevalence	36%	35%	32%	36%	33%	33%	34%	35%	34%	35%
Statistical Neighbour Rank	4 of 16	4 of 16	8 of 16	4 of 16	6 of 16	5 of 16	2 of 16	7 of 16	4 of 16	
Year 6 Obesity Prevalence	22%	21%	18%	22%	18%	18%	18%	19%	20%	20%
Statistical Neighbour Rank	6 of 16	4 of 16	8 of 16	4 of 16	3 of 16	7 of 16	7 of 16	11 of 16	4 of 16	
Adult Exces Weight Prevalence	69%	62%	68%	62%	67%	69%	67%	71%	67%	63%
Statistical Neighbour Rank *	8 of 15	12 of 14	4 of 15	15 of 16	7 of 16	3 of 16	5 of 16	2 of 14	3 of 15	
Physical Activity in Children **	40%	42%	42%	48%	38%	45%	29%	**	40%	45%
Physical Activity in Adults	57%	58%	66%	64%	63%	64%	65%	60%	62%	63%
Five a day consumption	45%	55%	51%	54%	52%	56%	58%	53%	53%	55%
Fast Food Outlets (rate per 100,000)	120	119	64	103	51	76	99	86	90	95
Hypertension prevalence	17%	14%	16%	17%	17%	16%	19%	15%	16%	14%
Diabetes prevalence	8%	8%	7%	8%	8%	7%	8%	8%	8%	7%
Coronary Heart Disease prevalence	4%	3%	4%	4%	4%	4%	4%	3%	4%	3%
Asthma prevalence	7%	7%	7%	7%	7%	7%	8%	7%	7%	6%
Stroke prevalence	2%	2%	2%	2%	2%	2%	3%	2%	2%	2%
Musculoskeletal conditions	25%	20%	21%	25%	22%	20%	24%	23%	22%	19%
Obesity related hospital admissions (rate per 100,000 - CCG values)	2,708	4,009	2,354	2,311	2,354	2,216	2,311	2,354	2,595	1,615

Worse than England or Statistical Neighbour Group, Better than England or Statistical Neighbour Group (difference calculated using 95% statistical significance)

** Missing some comparator data due to incomplete coverage. Difference to Statistical Neighbour Group not calculated ** missing Tamworth data due to incomplete coverage*