

Better Health Evidence Base

Stafford

Insight Team

March 2023



Background

- Healthy weight identified as a key priority for Staffordshire in the latest Joint Strategic Needs Assessment (JSNA).
- 'Better Health Staffordshire' is the branding for a Whole Systems Approach to tackle the causes of excess weight and promote a healthy weight and active lifestyle.
- This shared evidence base sets out Staffordshire's current position, drivers of excess weight 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 weight 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:
 - Some local NCMP data aggregated into 3 year averages due to small numbers. Due to Covid-19, 2020/21 NCMP data has not been released at Local Authority level.
 - 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

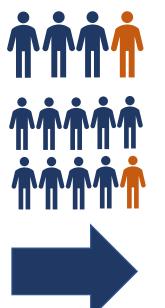
- The proportion of Reception age children living with excess weight and obesity in Stafford is similar to the national average but ranks high among statistical neighbours.
- In line with national trends, levels of Year 6 excess weight and obesity have increased in recent years but remain similar to national levels. As with Reception, Stafford ranks high among its statistical neighbours.
- Healthy weight challenge for children mainly focussed in Highfields & Western Downs and Penkside. However, challenges and opportunities exist across the borough and shift over time.
- 6 out of every 10 adults live with excess weight in Stafford, similar to the national average.
- Wider impact on residents health and on the system Obesity related long term conditions and hospital admissions higher than national.
- Fruit and vegetable consumption and activity levels in Stafford are similar or better than national but there is a high density of fast food outlets in Town Centres and in areas of higher deprivation.
- COVID-19 likely to have negatively impacted lifestyle behaviours Staffordshire's residents reported a mixed impact on healthy lifestyles during the first lockdown.

At Reception age ...



In Stafford...

Levels of excess weight and obesity in Reception both remain similar to national.



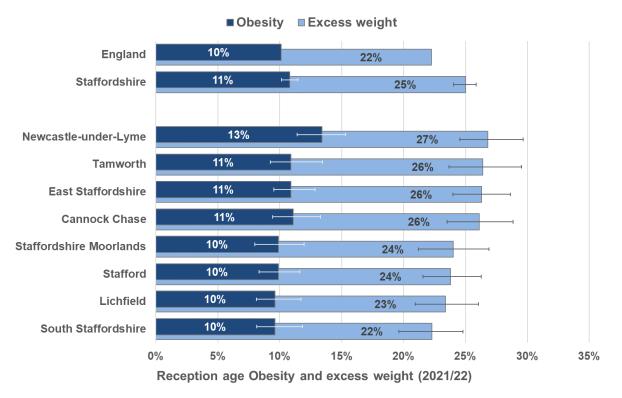
- **1 in 4** live with excess weight (similar to national)
 - **1 in 10** live with obesity (similar to national)

Levels of excess weight and obesity have remained stable over the last five years

Excess weight statistically higher than national in Highfields & Western Downs (33%).
Obesity statistically higher than national in Highfields & Western Downs (16%) and Penkside (16%).

Source: Office for Health Improvement and Disparities. Public health profiles.

District comparison



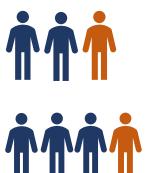
- Newcastle is the only district or borough to have a higher than national prevalence of **obesity**.
- Cannock Chase, East Staffordshire Newcastle and Tamworth have a higher than national prevalence of excess weight.

By year six...



In Stafford...

Whilst obesity and excess weight have both increased from Reception, levels are similar to national.



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

1 in 4 live with obesity (similar to national)

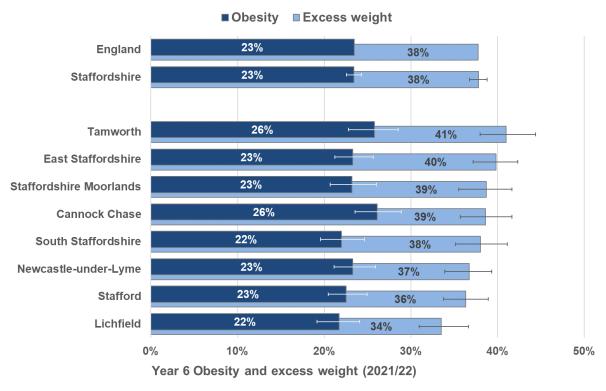


Levels of excess weight and obesity have increased over the last five years

Excess weight statistically higher than national in Eccleshall (44%) and Penkside (44%).Obesity statistically higher than national in Highfields & Western Downs (27%).

Source: Office for Health Improvement and Disparities. Public health profiles.

District comparison

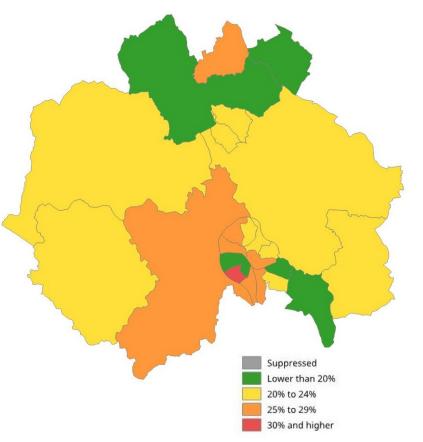


- Across all districts and boroughs, the prevalence of **obesity** is similar to national.
- Across all districts and boroughs, **excess weight** is similar to national apart from Tamworth (higher) and Lichfield (lower).

Areas of focus



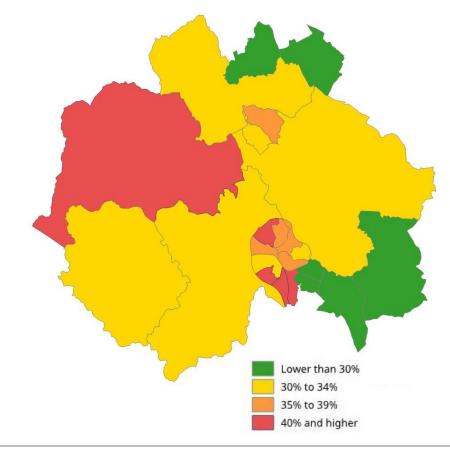
Reception excess weight (2018/19, 2019/20 & 2021/22)



Excess weight statistically higher than national in Highfields
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Obesity statistically higher than national in Highfields &

Western Downs (16%) and Penkside (16%).

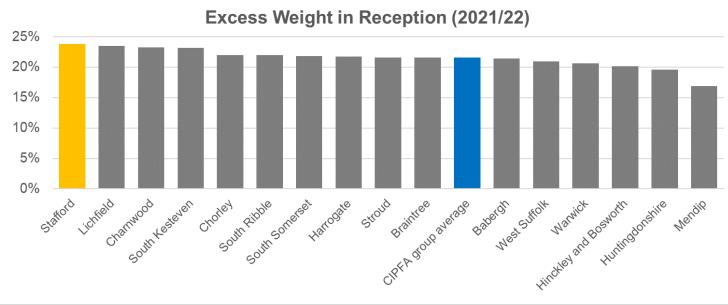
Year 6 excess weight (2018/19, 2019/20 & 2021/22)



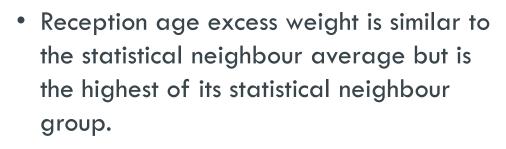
Excess weight statistically higher than national in Eccleshall (44%) and Penkside (44%).
Obesity statistically higher than national in Highfields & Western Downs (27%).

Source: NCMP local dataset 2021/22, Office for Health Improvement and Disparities. Public health profiles

How does Stafford compare?



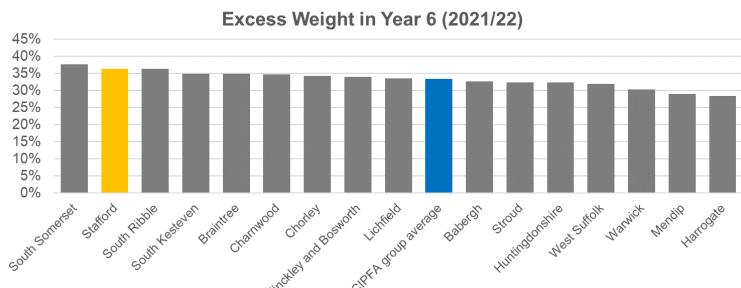
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• To be in line with CIPFA average, there would need to be an additional 30 children of a healthy weight.

Source: Office for Health Improvement and Disparities. Public health profiles.

- Year 6 excess weight is similar to the statistical neighbour average but is the second highest of its statistical neighbour group.
- To be in line with CIPFA average, there would need to be an additional 40 children of a healthy weight.



Higher obesity in urban and deprived areas



- For both Reception and Year 6, the prevalence of obesity in Staffordshire's least deprived areas is almost half that of Staffordshire's most deprived areas.
- Excess weight is also more prevalent in our urban areas than in town fringe and more rural locations.

Staffordshire

 Consequently, urban and deprived neighbourhoods within the borough are more likely to be areas of concern with regard to excess weight and obesity.

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%).

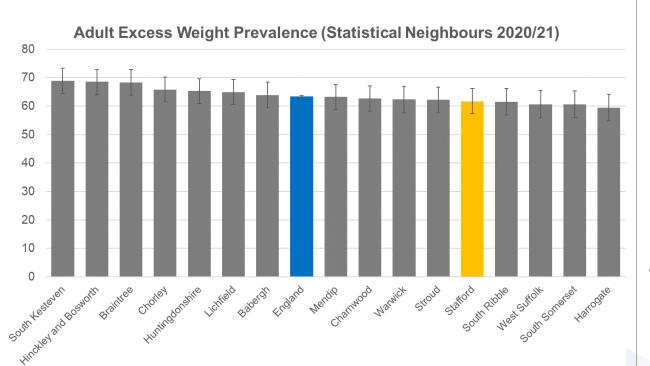


Increasing excess weight into adulthood

In Stafford...

6 in 10 similar

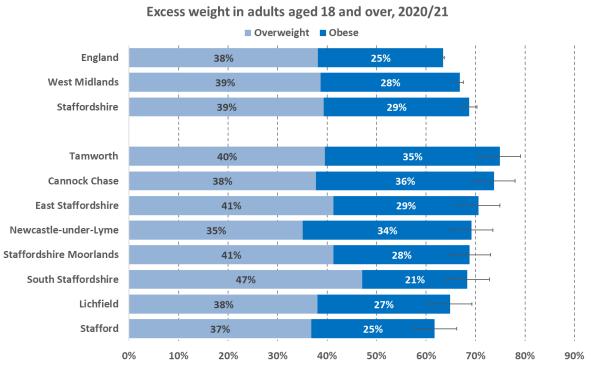
6 in 10 adults live with excess weight, similar to the national average.



• Stafford ranks 12th highest of similar local authorities.

Source: Office for Health Improvement and Disparities. Public health profiles.

Districts comparison

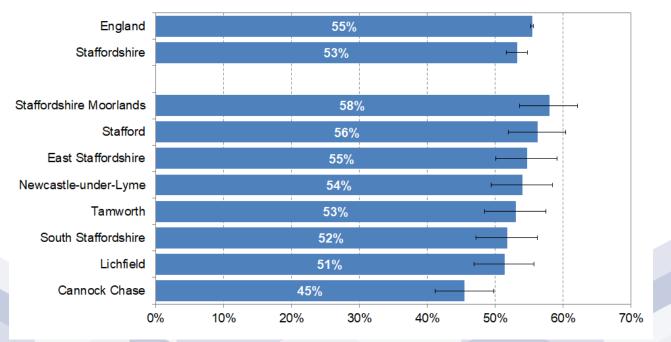


- Excess weight prevalence is higher than national in Cannock Chase, East Staffordshire, Newcastle, South Staffordshire, Staffordshire Moorlands and Tamworth.
- Obesity prevalence is higher than national in Cannock Chase, Newcastle and Tamworth.



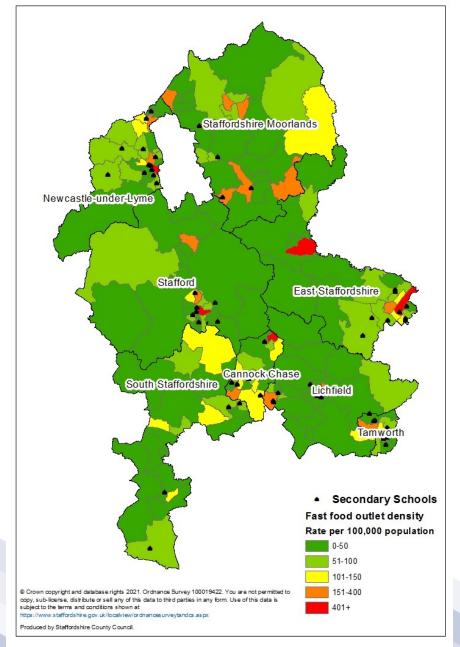
Healthy eating

- 56% of adults in Stafford eat five a day, similar to the Staffordshire and national average.
- Across Staffordshire, the density of fast food outlets is similar to national, but generally higher in areas of deprivation and town centres and as a result, sometimes near secondary schools as shown on the map.
- The density of fast food restaurants is lower than national in Stafford but higher in Common and Forebridge wards.



Proportion of adults eating '5-a-day' on a 'usual day' (2019/20) Public Health England (based on Active Lives, Sport England)

Fast food outlet density (2017)





Physical activity in Stafford

Regular physical activity is linked to reduced risk of obesity, reduced risk of illness and improved wellbeing.

1 in 2 Stafford **children** are physically active for one hour a day, similar to Staffordshire and England (2021/22).

3 in 10 Stafford **children** are active for less than 30 minutes a day, similar to Staffordshire and England (2021/22).



7 in 10 Stafford **adults** are active for more than 150 minutes a week, higher than Staffordshire and England (2020/21).



1 in 6 Stafford **adults** are active for less than 30 minutes a week, lower than Staffordshire and England (2020/21).

Child Activity Source: Active Lives Survey (2019/20 to 2021/22). School years 1-11. Active = minimum of 60 mins a day. Less Active = less than 30 mins a day. Adult Activity Source: NCMP local dataset 2021/22, Office for Health Improvement and Disparities. Public health profiles. Note Sport England also publish adult activity levels for ages 16+

High levels of obesity related conditions

Selected Long Term Conditions (QOF registered 2021/22) 18% Stafford England 16% 14% 12% 10% 8% 15.9% 14.0% 6% 4% 7.3% 7.0% 6.7% 6.5% 2% 3.5% 3.0% 2.2% 0% Hypertension Diabetes Asthma Coronary Heart Stroke (or TIA) (T1 and 2) Disease

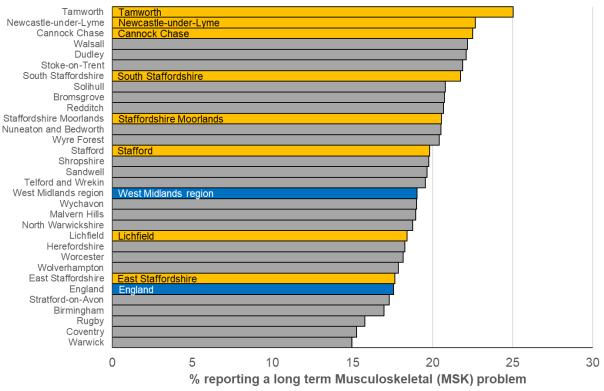
In Stafford, GP registered prevalence of Hypertension, Asthma, Coronary Heart Disease, and Stroke are higher than national.

Note: Prevalences not age standardised – Stafford has a greater proportion of over 50s than England. The contribution of obesity to each condition varies.

Source Obesity - NHS (www.nhs.uk).

Staffordshire County Council

Self reported long term Musculoskeletal problem (GP Survey 2022) West Midlands Districts and Unitary Authorities



The prevalence of self reported Musculoskeletal conditions is higher than national in Stafford.

Source: Office for Health Improvement and Disparities. Public health profiles.

The rate of obesity related admissions in Stafford and Surrounds CCG was higher than England (2019/20). Source: NHS Digital (Hospital Episode Statistics)

Supporting Data Matrix

	Cannock Chase	East Staffordshire	Lichfield	Newcastle- under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	England
Reception Excess Weight Prevalence	26%	26%	23%	27%	22%	24%	24%	26%	25%	22%
Statistical Neighbour Rank	4 out of 16	1 out of 16	5 out of 16	1 out of 16	7 out of 16	1 out of 16	2 out of 16	2 out of 16	2 out of 16	
Reception Obesity Prevalence	11%	11%	10%	13%	10%	10%	10%	11%	11%	10%
Statistical Neighbour Rank	4 out of 16	3 out of 16	6 out of 16	1 out of 16	4 out of 16	3 out of 16	1 out of 16	7 out of 16	3 out of 16	
Year 6 Excess Weight Prevalence	39%	40%	34%	37%	38%	36%	39%	41%	38%	38%
Statistical Neighbour Rank	9 out of 16	1 out of 16	9 out of 16	10 out of 16	2 out of 16	2 out of 16	1 out of 16	6 out of 16	2 out of 16	
Year 6 Obesity Prevalence	26%	23%	22%	23%	22%	22%	23%	26%	23%	23%
Statistical Neighbour Rank	5 out of 16	3 out of 16	7 out of 16	7 out of 16	4 out of 16	2 out of 16	2 out of 16	7 out of 16	2 out of 16	
Adult Excess Weight Prevalence	74%	71%	65%	69%	68%	62%	69%	75%	69%	63%
Statistical Neighbour Rank *	2 out of 16	4 out of 16	6 out of 16	5 out of 16	5 out of 16	12 out of 16	1 out of 16	1 out of 16	2 out of 16	
Adult Obesity Prevalence	36%	29%	27%	34%	21%	25%	28%	35%	29%	25%
Statistical Neighbour Rank *	1 out of 16	9 out of 16	7 out of 16	2 out of 16	14 out of 16	8 out of 16	6 out of 16	2 out of 16	2 out of 16	1
Physical Activity in Children	**	**	**	43%	42%	47%	42%	**	47%	47%
Physical Activity in Adults	64%	60%	72%	64%	64%	71%	68%	62%	66%	66%
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	16%	14%	16%	17%	17%	16%	19%	14%	16%	14%
Diabetes prevalence	8%	8%	7%	8%	8%	7%	8%	8%	8%	7%
Coronary Heart Disease prevalence	4%	3%	4%	3%	4%	3%	4%	3%	4%	3%
Asthma prevalence	6%	6%	7%	7%	6%	6%	7%	7%	7%	6%
Stroke prevalence	2%	2%	2%	2%	2%	2%	3%	2%	2%	2%
Musculoskeletal conditions	22%	18%	18%	23%	22%	20%	21%	25%	21%	18%
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) * Difference to Statistical Neighbour Group not calculated ** recent coverage low in the district / borough *** methodology under review. District / Borough figure based on best fit CCG