What do we know?

Summary

A high percentage of adults in the UK are already overweight and an increasing number are obese. Modern lives lead to successive generations being heavier than the last. This is largely as a result of behaviour and environmental changes in society for example reliance on the car rather than walking or cycling. Fast food is readily available and an easy alternative to cooking healthier meals. The obesity epidemic cannot be prevented by individual action alone and it demands a fiscal, economic and community approach. Tackling obesity requires far greater change that anything tried so far and at many levels: personal, family, community and national.

Partnership working will be essential if we are to tackle this serious public health issue.

Facts and figures

GP registered obesity only reflects people measured by GPs, which typically are those people engaged with primary care and tend to be older with long-term health conditions (or at-risk conditions).

The data for GP reported patient obesity in Lincolnshire is 32.5%, the highest being reported in Boston at 35.2% and the lowest in Lincoln at 28.5%.

Community Health Profiles show model based estimates based on 2006-8 data. New data expected in July.

Obesity has serious health consequences and is associated with all cause mortality and decreased life expectancy. The data for Lincolnshire shows the county at 24.09%, which is a slightly lower rate than the England average of 24.16%. Within Lincolnshire the range of percentage areas is:

- South Holland has the highest at 26.42%
- Lincoln has the lowest at 22.81%

Trends

Household Survey for England (HSE, 2008) is the substantial national survey that sets out trends. Since 1993-2008 adult obesity has increased from 13% to 24% (men) and 16-25% (women) as measured by Body Mass Index (BMI). Waist circumference measurement has increased similarly -
23% to 39% (men) and 26% to 44% (women). And evidence suggests that this is likely to increase further.

It is estimated that by 2050 over half of adult men and women and about a quarter of all children under 16 will be obese. (Health Weight Healthy Lives Toolkit for Developing Local Strategies)

Obesity is directly associated with deprivation, older age, low income (particularly lower income for women), urbanisation, ethnicity, marital status, diabetes and hypertension. Obesity is inversely associated with physical activity and healthy eating.

The Active People Survey (4) reported 22,000 adults more physically active over a three-year period ending 2010. However, the majority of adults in Lincolnshire are sedentary.

The distribution of obesity across district areas in Lincolnshire correlates with age, deprivation and disease trends for shire, borough and districts (excluding Lincoln City).

### Targets

Currently there are no NHS targets for adult obesity. In previous years GPs were encouraged under the Quality Outcomes Framework (QOF) to produce a register of patients 16 and over with a BMI greater or equal to 30 in the previous 15 months. There is a proposed indicator in Healthy Lives, Healthy People Outcomes Framework (Domain 3: Health Improvement) on prevalence of healthy weight in adults which, if included, will be measured annually via the Health Survey for England.

The local response to the Department of Health’s Healthy Weight, Healthy Lives set out Lincolnshire’s commitment to tackle obesity in children and adults though:

- building physical activity into our lives;
- weight management support for people overweight and obese; and
- improved access to healthier food and healthy eating.

Commissioned services are performance managed and are contributing to the county’s progress. The goal of this work has been to set Lincolnshire a challenge to reduce the impact of the year on year increases in adult obesity as measured by annual QOF data, national and regional surveys.

### Performance

Primary care-based QOF has been supplied quarterly by the Department of Health. An example of the most recent dataset is shown below.

The Active People Survey is an annually produced survey with major and minor years of sampling. Publications occur in December each year.

Locally commissioned services are monitored on a quarterly basis with an annual statistical reporting process; typically within one quarter after the close of the financial year. For example, in 2010/11, 3086 adults had successfully participated in the community-based exercise referral programmes across Lincolnshire. 58% of the referrals were cited for obesity-related conditions. In total between 8,000-9,000 had participated in locally commissioned activity programmes in Lincolnshire last year.
Change4Life regularly reports upon the number of families engaged with the social marketing campaign. During 2010/11 over 6,000 registrations had taken place.

**Primary-care based BMI statistics – Quarter Two July-September 2010**

<table>
<thead>
<tr>
<th>Cluster</th>
<th>No of Practices</th>
<th>Population 16+</th>
<th>Obesity Status Recorded</th>
<th>Obesity Percentage Recorded</th>
<th>Number With BMI &gt; 30</th>
<th>Percentage with BMI &gt; 30</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston</td>
<td>9</td>
<td>52,287</td>
<td>16,999</td>
<td>32.5%</td>
<td>5,983</td>
<td>35.2%</td>
</tr>
<tr>
<td>East Lindsey</td>
<td>19</td>
<td>123,016</td>
<td>40,173</td>
<td>32.7%</td>
<td>14,735</td>
<td>36.7%</td>
</tr>
<tr>
<td>Lincoln</td>
<td>18</td>
<td>83,725</td>
<td>32,612</td>
<td>39.0%</td>
<td>9,310</td>
<td>28.5%</td>
</tr>
<tr>
<td>North Kesteven</td>
<td>13</td>
<td>73,375</td>
<td>26,464</td>
<td>36.1%</td>
<td>8,240</td>
<td>31.1%</td>
</tr>
<tr>
<td>South Holland</td>
<td>9</td>
<td>71,645</td>
<td>25,919</td>
<td>36.2%</td>
<td>9,208</td>
<td>35.5%</td>
</tr>
<tr>
<td>South Kesteven</td>
<td>18</td>
<td>125,644</td>
<td>43,737</td>
<td>34.8%</td>
<td>13,129</td>
<td>30.0%</td>
</tr>
<tr>
<td>West Lindsey</td>
<td>12</td>
<td>67,229</td>
<td>26,849</td>
<td>39.9%</td>
<td>8,506</td>
<td>31.7%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>98</strong></td>
<td><strong>596,921</strong></td>
<td><strong>212,753</strong></td>
<td><strong>35.6%</strong></td>
<td><strong>69,111</strong></td>
<td><strong>32.5%</strong></td>
</tr>
</tbody>
</table>
What is this telling us?

**Summary**

Obesity is a key issue nationally and across Lincolnshire. We will need to continue to commission preventative services to reduce the risk of people becomes overweight and obese and to provide support for those trying to lose weight.

The population of Lincolnshire is typically an ageing population, sedentary, with higher rates of diabetes, CHD and hypertension. All factors associated directly with obesity.

**Local views**

Local views and feedback has been and is secured through current services and specific pieces of work, e.g. scoping exercise regarding Boston Healthy Living Centre; evaluation of physical activity interventions undertaken by Lincoln University

Shaping Health for Lincolnshire ran between May and August 2007 and was a large-scale consultation on the future of health and health services in Lincolnshire.

**National and local strategies**

*Healthy Weight, Healthy Lives*: A Cross Government Strategy for England was published in 2008 and outlined the previous government's plans to reduce the number of obese children across England by 2020. Although this strategy is aimed at children, it will have an impact on the health of the wider population as these children become adults.

The *Change4Life* campaign expanded to include adults aged 45-65 years in February 2010, as research showed about 71% of people in this age group are either overweight or obese and the majority do not have children aged under 11 so have not been targeted in the original *Change4Life* campaign.

The campaign to adults focussed on six behaviour changes:

- Plate swap, 5 a day, Up and about, Snack swap, Fibre swap, Drink swap.
- Lincolnshire Physical Activity & Health Strategy

**Current activity and services**

The Staying Healthy Programme supports adults to be more active, eat more healthily and manage their weight. These include:

- Over 7,000 adults each year engage with the physical activity programmes, 5% of the population estimated to be obese.
- Over 8,000 adults and families engage with Food4Life programmes
- 6,000 families from Lincolnshire have engaged with the national *Change4Life* campaign
- 1,000 adults engage with the Lincolnshire Weight Management Service.
- 1,000s more regularly use commercial weight management services

**Key inequalities**

Obesity is directly associated with deprivation (IMD), older age, low income (particularly lower income for women), urbanisation, ethnicity, marital status, diabetes and hypertension. Obesity is inversely associated with physical activity and healthy eating.

The distribution of obesity across districts correlates with age, deprivation and disease trends for shire, borough and districts (excluding Lincoln City).

Obesity is intrinsically linked into the Marmot Review both for children and adults and the scale of the impact is substantial.

The 2007 Foresight Report on Obesity ('Tackling Obesities: Future Choices') highlighted the importance of tackling the growing obesity trend in a coherent and comprehensive manner. The report examined where councils can use their local leadership role to positively change obesity levels and create healthier environments.

**Key gaps in knowledge and services**

Issues remain around capacity of services, targeting of services and providing an evidenced based pathway for children and adults.

**Risks of not doing something**

Future costs to the NHS of obesity related illness. By 2050 over half of men and women could be clinically obese. Without action obesity related diseases will cost an extra £45.5 billion per year.

Overweight and obesity has a substantial human cost contributing to onset of disease and premature death this has serious financial consequences for the NHS and the wider economy. In 2007 it was estimated that the total cost to the NHS was £4.2 billion and to the wider economy £15.8 billion. By 2050 it is estimated that overweight and obesity could cost the NHS £9.7 billion and the wider economy £49.9 billion (at 2007 prices), as per the Healthy Weight, Healthy Lives: A Toolkit for Developing Local Strategies.

**What is coming on the horizon?**

A degree of uncertainty with the impact of austerity and public sector re-organisations may jeopardise joint initiatives to tackle obesity.

A new public health agenda for local authorities has been proposed that recognises the importance of tackling obesity through multiple efforts to change the physical and corporate environments, provide opportunities and support behaviour change.

**What should we be doing next?**

Continue to purchase targeted services:
- Securing partner’s continued commitments to tackling obesity within a new public health agenda

- Engaging new partners across the commercial, corporate, voluntary and public sectors to contribute to tackling obesity

- Develop the ‘Let's Get Moving’ physical activity pathway – further the physical activity and health agenda through brief interventions training and marketing of local opportunities to be active

- Support the further development to make weight management services (commercial and clinical) accessible for more adults and families in Lincolnshire.