A whole systems approach to tackling Childhood Obesity in Sheffield

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Evaluation Lead
Learning objectives

• Apply evidence of what works in establishing foundations for healthy lifestyles.

• Work effectively in partnership to address obesity

• Effectively communicate to the community what measures are needed to address childhood obesity

• Identify the critical factors of a successful whole systems approach
Presentation Overview

- Background to Sheffield Let's Change 4 Life
- The SLC4L programme
- Successes to date
- Critical success factors of a whole-systems approach
Progress towards LAA target of limiting rise in obesity to 15.1% by academic year 2009/10

Childhood Obesity in Sheffield

Baseline = 14.8%
(2006/07 academic year)

2008/09 = 15.0%
(2007/08 academic year)

2009/10 = 15.0%
(2008/09 academic year)

2010/11 = 15.0%
(2009/10 academic year)
Underpinned by Foresight
How did SLC4L start?

- Joint NHS Sheffield and Sheffield City Council application to the Healthy Communities Challenge Fund
- Secured £5 million until March 2011 with £5 million match funding
- A Programme Board established to oversee the programme delivery
  - Lead Councillor for Children & Young People
  - Co-chaired by Executive Director Children & Young People (SCC) and Joint Director of Public Health
Aim

- By 2012 reduction in prevalence of overweight and obesity in Reception Year and Year 6 children

Principles

- Prevention: Universal and Targeted
- Equity and inclusivity
- Empowering communities
- Learning from what works
- Fun!
8 strands of work

Breastfeeding Friendly City

Parents as Positive Role Models

Community Health Champions

Living Neighbourhoods

Healthy Open Spaces

Cross Sector Innovation

Schools

Social Marketing
Whole systems approach in a city
A summary so far........
What's the impact?
Reducing obesity in children & families

Satisfied stakeholders
Greater desire to adopt healthy lifestyle
Breastfeeding-friendly city
Innovative new partnerships across all sectors
Joint working SCC, NHS, private & third sectors

Better diet & nutrition
Favourable attitudes of others
Community health champions
Effective social marketing
Community engagement

Increased physical activity
Confidence in ability to change
Schools at the heart of healthy communities
Parents as positive role models
Shared vision

Value for money & sustainability
Overcoming barriers to change
Healthy, safe, accessible, open spaces
Living neighbourhoods

Effective project management
Leadership from programme board
Increased Physical Activity

Headlines so far

• Reduction in sedentary travel to school (*Bus use 5.7%* and *Car use 1.6%*)

• Increase in active travel to school (*cycling 4.3%* and *walking 2.5%*)

• Likely that the city wide increase in active travel to school has been driven by SLC4L bike it and travel 4 Life programmes

* Denotes significance 95% confidence interval
Greater desire to adopt healthy lifestyle

- Targeted physical activity example: Sharrow (n=43)
- Interventions Cricket and Boxing

- Paired t-test revealed significant differences (p<0.05) for each TPB variable
Schools at the heart of communities

Stay on Site Policy

School meal uptake increased from 16% to 37%.

75% of pupils felt safer at lunchtime

Recommended steps for 6-12 year olds 12,000-15,000 steps per day.

Those doing less more likely to overweight/obese (Tudor-Locke et al., 2004)

A typical week in the life of a pupil at Beck Primary school….

<table>
<thead>
<tr>
<th>Physical activity</th>
<th>Steps</th>
<th>Km</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total: 9 pupils over 7 days</td>
<td>454332</td>
<td>2726</td>
</tr>
<tr>
<td>Average per person over 7 days</td>
<td>50481</td>
<td>302</td>
</tr>
<tr>
<td>Average per person per day</td>
<td>7211</td>
<td>43</td>
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</table>

Cohort suggests pupils do not meet recommendations for physical activity.

<table>
<thead>
<tr>
<th>Pupil</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steps</td>
<td>5423</td>
<td>2394</td>
<td>10131</td>
<td>8364</td>
<td>8807</td>
<td>9182</td>
<td>4734</td>
<td>6445</td>
<td>9426</td>
</tr>
</tbody>
</table>
Breastfeeding-friendly city

- Achieved stage 2 UNICEF breastfeeding friendly city status
- 30 workplaces & 65 public places are breastfeeding friendly accredited
- 36 children's centres across the city offer peer support
- Breastfeeding prevalence increased from 48.7% to 53.5% prevalence at 6-8wk's
Key findings

Breastfeeding maintenance is 75% in mothers who access peer support for at least 6-weeks

However,

Data suggests programme is still providing support for mothers who have:
- hit target and stopped
- exceeded the target
- never started BF & don't intend to

Breastfeeding-friendly city

- Sampled 380 mothers
  - 89% White; 4% Pakistani; 2% Indian, 5% Other
  - 36 different locations

Mothers satisfaction and usefulness following contact with peer support

Mothers self-reported impact of peer support programme
Capability and capacity

• Establish a partnership of stakeholders and key decision makers that influence the thematic clusters of the foresight map.

• Short term timescales create an environment of client provider rather than partner. Instead a longer term vision, with clearly identified process goals should be developed.

• Project designers, managers and deliverers require a greater awareness and understanding of how each element of project activity relates to and impacts on the obesity agenda.

• Enthusiastic and highly skilled, programme director to create and environment of trust that work will get finished.
Critical success factors of a whole-systems approach

1. Establish a long term vision, agreed shared goals and top level leadership/political support from the start.
2. Adopt a theoretically underpinned and evidence based approach to the intervention(s) & evaluation.
Critical success factors of a whole-systems approach

3. Present a clear & consistent brand message to the communities and key stakeholders you wish to influence.
4. Be realistic in terms of what can be achieved given available resource & complexity of obesity
Thank you for your attention

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