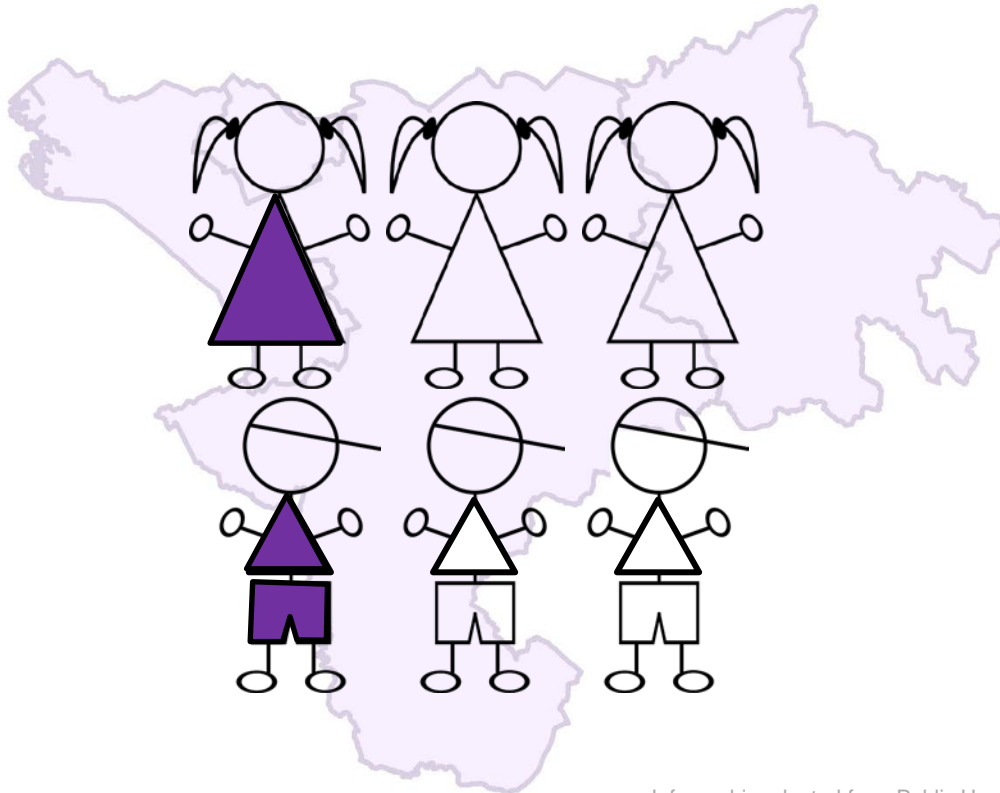


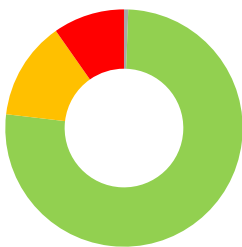
Excess weight in primary school children



Infographic adapted from Public Health England resources

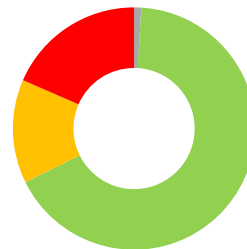
By the time they leave primary school, one in three children in Cheshire West and Chester are an unhealthy weight

Reception 2014/15



■ underweight 0.6% ■ healthy weight 76.3%
 ■ over weight 13.4% ■ obese 9.7%

Year six 2014/15



■ underweight 1.0% ■ healthy weight 66.8%
 ■ over weight 13.8% ■ obese 18.5%

In Cheshire West and Chester, levels of obesity in children double between reception and year six.

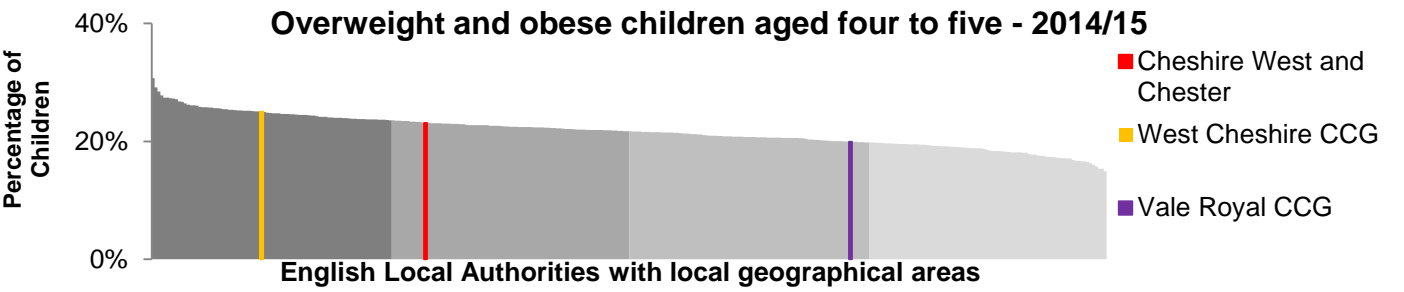
Excess weight in primary school children

The National Child Measurement Programme (NCMP) measures the height and weight of children in reception class (aged four to five years) and year six (aged ten to eleven years) to assess overweight and obesity levels in children within primary schools. Currently, in Cheshire West and Chester, levels of obesity in children double between reception and year six. By the time they leave primary school, a third of children in Cheshire West and Chester are an unhealthy weight.

Excess weight (overweight and obesity) in children often leads to excess weight in adults, and this is recognised as a major determinant of premature mortality and avoidable ill health. In the long term, childhood obesity is associated with diabetes, asthma, sleep disorders and various other conditions. There is also evidence that the overweight or obese child suffers from bullying and stigma with loss of self-esteem which may lead to depression and under-achievement.

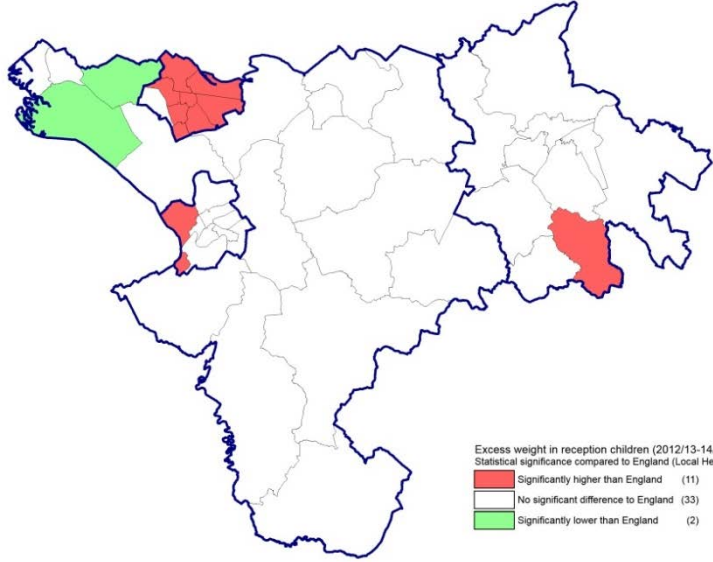
Reception age children (four and five year olds)

In 2014/15 just under one quarter of Cheshire West and Chester children in their school reception year were an unhealthy weight. One in ten children in the age group were obese.



In 2014/15, 97 percent of our eligible children participated in the national child measurement programme, a higher uptake rate than the national average. Results show that, with a proportion of 23.1% of children overweight or obese, Cheshire West and Chester has a higher prevalence compared to the England average (21.9%), although the difference is not statistically significant. The proportion of children considered obese (9.8%) is slightly higher than England (9.1%), as is the proportion of overweight children (13.4% compared to 12.8%).

Differences between local Clinical Commissioning Groups (CCGs) are significant. West Cheshire CCG has statistically higher levels of overweight and obesity in reception aged children compared to both England and Vale Royal CCG, whose prevalence rates are statistically lower than England.



Ward level data for the three year period 2012/13 to 2014/15 shows large variation within Cheshire West and Chester. Prevalence ranges from 33.8% in Rossmore ward (Ellesmere Port locality) to 11.2% in Willaston and Thornton ward (Rural locality). Eleven wards showed rates of excess weight which were significantly higher than the England average, eight were within the Ellesmere Port locality. The remaining three wards with rates of excess weight significantly higher than England were Lache and Blacon



Statistical significance of excess weight rates in reception children by ward in 2012/13-2014/15 (three years pooled) as compared to England, with ward and locality boundaries (Source: Local Health)

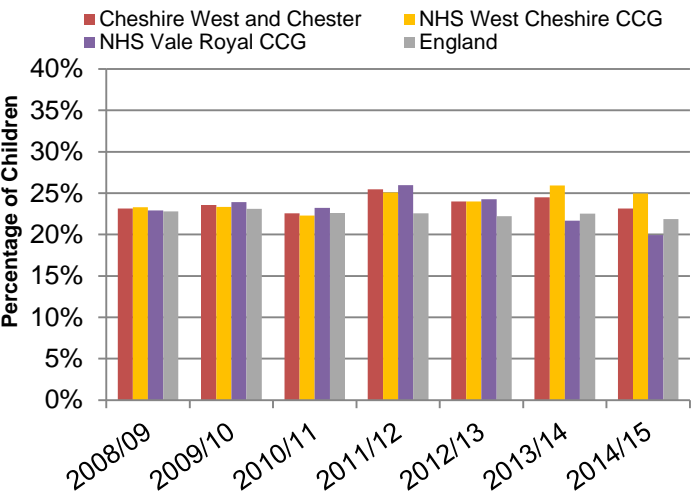
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Excess weight in primary school children cont.

in the Chester locality, and Winsford Wharton in the Northwich and Winsford locality. There was no significant difference when compared to England within the other wards, except in the Rural wards of Little Neston and Burton, and Willaston and Thornton which were significantly lower than the England average.

Excess weight in children aged four and five years - Trend



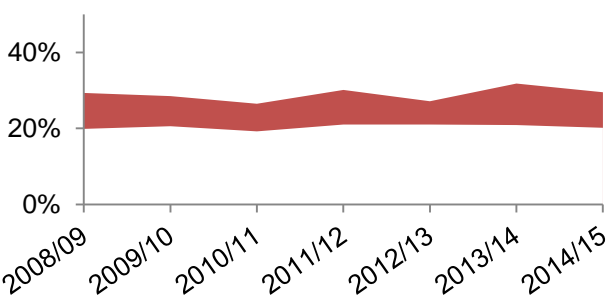
Looking at trends over time, there has been some variation in excess weight levels for reception children in Cheshire West and Chester as a whole, although current levels of excess weight are the same as the levels seen in 2008/09. Below borough level however, there is a distinct change since 2008/09. Where previously the levels of excess weight in the two CCGs were similar, there is now a significant difference.

There is a strong correlation between deprivation and child obesity prevalence. Our most deprived areas have a significantly higher proportion of children with excess weight (29.5%) than our least deprived areas (20.2%). Prevalence of obesity is almost double in reception age children living in our most deprived areas (14.0%) compared to our least deprived areas (7.9%).

The inequality gap in excess weight prevalence between our most and least deprived areas is similar to 2008/09.

Nationally, boys experience a significantly higher prevalence of excess weight than girls and this pattern is reflected locally although the difference is not significant.

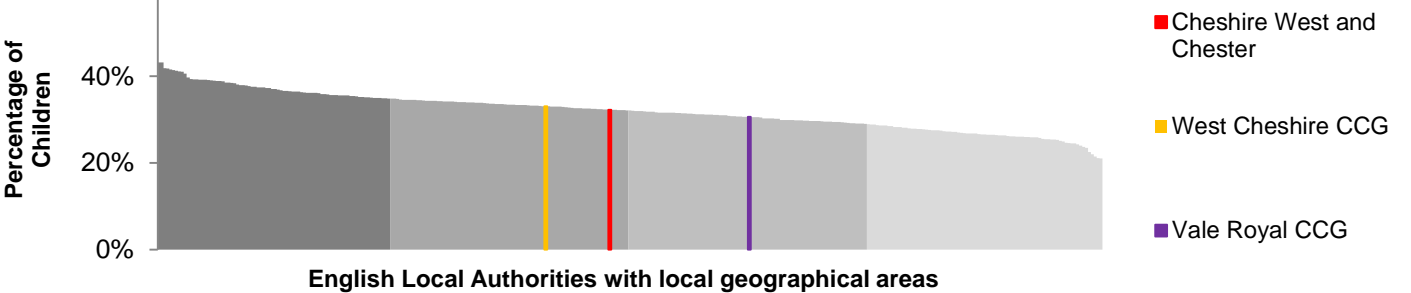
2008/9 to 2014/15 excess weight gap between reception children in most deprived areas (quintile one) and least deprived areas (quintile five)



Year six children (ten and eleven year olds)

In 2014/15 one third of Cheshire West and Chester children in their final year at junior school were an unhealthy weight. Almost one in five children in this age group were obese, double the proportion of children who were identified as obese in the reception age group.

Excess weight in children aged 10 to 11 - 2014/15



In 2014/15, 94% of our eligible children took part in the annual national child measurement programme, which is equal to the national average. Recording 32.3% of children as either overweight or obese, Cheshire West and Chester was not significantly different to the England

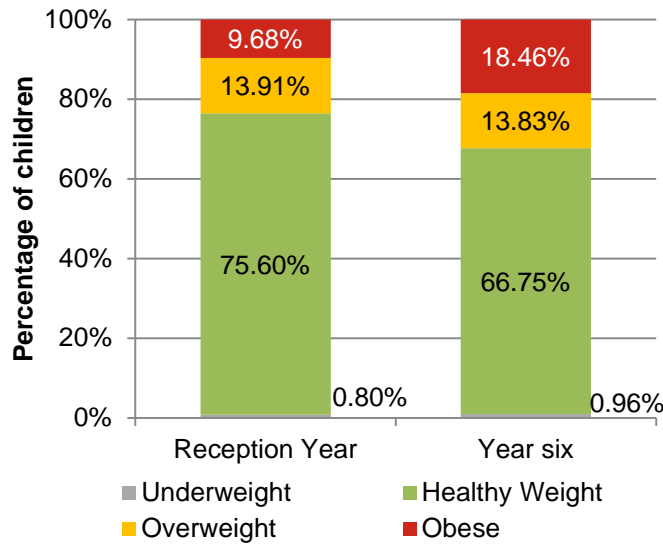
Excess weight in primary school children cont.

average of 33.2%. The proportion of children considered obese (18.5%) was slightly lower than England (19.1%), as was the proportion of overweight children (13.9% compared to 14.2%). Differences between local Clinical Commissioning Groups (CCGs) are again observed in year six children, although the variation is less than is observed in reception age children and is not considered significant. West Cheshire CCG has higher levels of excess weight and obesity in year six children compared to both England and Vale Royal CCG, whose prevalence rates are lower than England.

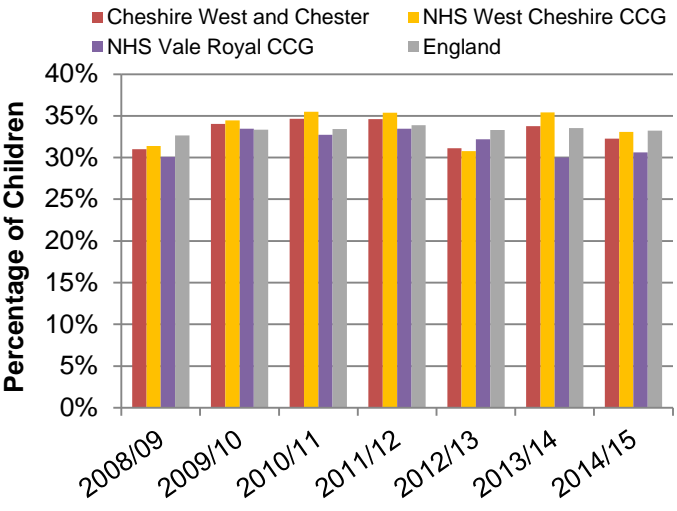
The NCMP program has now been running for more than 7 years meaning that it is possible to directly compare levels of obesity and overweight in cohorts of children in their reception year and when they reach year six.

Since their reception year in 2008/09, the current year six cohort has seen obesity prevalence double. The percentage of overweight children in the cohort has remained the same while the percentage of children in the cohort of a healthy weight has decreased.

Percentage split of weight categories for the 2014/15 year six cohort, in their current year and in their reception year

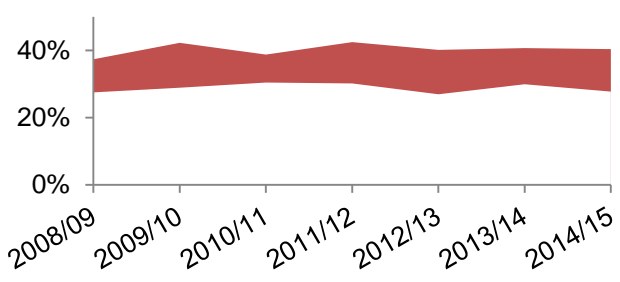


Excess weight in children aged ten and eleven years - Trend



Looking at trends for year six children over time, excess weight levels in Cheshire West and Chester have shown some variation. Current prevalence is slightly higher than in 2008/09 however the difference is not significant. Since 2008/09 the England average has increased significantly. Vale Royal CCG consistently exhibits lower excess weight rates than West Cheshire CCG (except in 2012/13) although the rates are not significantly different.

2008/9 to 2014/15 excess weight gap between year six children in most deprived areas (quintile one) and least deprived areas (quintile five)



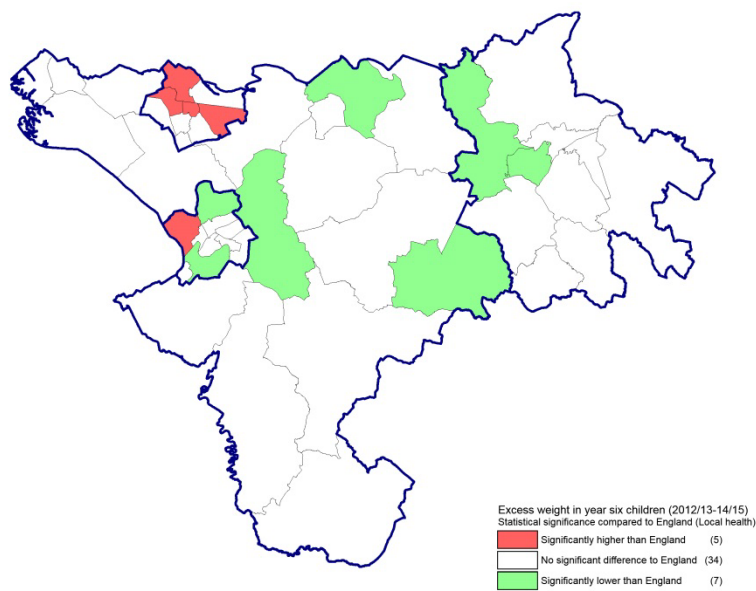
There is a strong correlation between deprivation and child obesity prevalence. In our most deprived areas, excess weight prevalence in children aged 10-11 years old is 40.4%, significantly higher than prevalence in our least deprived areas (27.8%). Inequality is seen most starkly in the obesity category where the rate in our most deprived areas (26.3%) is more than double the rate in our least deprived areas (13.1%). Since 2008/09 levels of excess weight have risen in both our most and least deprived areas, however the increase has been larger in the most deprived areas, widening the inequality gap.



Excess weight in primary school children cont.

At ward level, excess weight rates for year six children in Cheshire West and Chester for the three year period of 2012/13 to 2014/15 ranged from 45.5% in Ellesmere Port Town ward (Ellesmere Port locality) to 22.9% in Tarporley ward (Rural locality). Five wards showed rates of excess weight

which were significantly higher than the England average, of which four were in the Ellesmere Port locality; the fifth ward was Blacon in the Chester locality. Seven wards showed significantly lower rates of excess weight compared to England, these were Upton and Handbridge Park in Chester locality, Chester Villages, Tarporley and Frodsham in Rural locality and Hartford and Greenbank ward, and Weaver and Cuddington ward, in Northwich and Winsford locality.



Statistical significance of excess weight rates in year six children by ward in 2012/13-2014/15 (three years pooled) as compared to England, with ward and locality boundaries (Local health)

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Nationally, boys in year six continue to have a significantly

higher prevalence of excess weight compared to girls. This pattern is reflected locally although, as is seen in reception aged children, the difference is not significant.

Evidence of what works

- The 2016 childhood obesity policy states that “while obesity is a complex problem, at its root, obesity is caused by an energy imbalance: taking in more energy through food than we use through activity.” Improving diets and increasing active lifestyles are key factors in managing obesity levels.
- Long-term, sustainable change will only be achieved through the active engagement of schools, communities, families and individuals.
- Evidence shows that slowly changing the balance of ingredients in everyday products, or making changes to product size, is a successful way of improving diets (PHE).
- Offering healthy food choices in schools and introducing physical activity initiatives such as the Daily Mile are effective ways to tackle poor diets and sedentary lifestyles.
- Tailored intervention is recommended for those children and young people with BMI at or above 91st centile.

Recommended actions

1. Ensure a range of opportunities for children and young people to take part in formal and informal active play, such as provision of parks, greenspaces and cycle routes.
2. Ensure that the whole workforce are skilled and competent at raising and discussing healthy weight.
3. Utilise change4life brand and campaign material to encourage families to eat less and be more active.
4. Promote healthy food choices particularly around nutrition, weaning and breastfeeding. Healthy menu choices in schools is a key example of this.
5. Encourage participation in physical activity initiatives such as the schools Smile for a Mile initiative.
6. Use the Starting Well action plan within the Eat Well be Active framework to promote greater opportunities for residents to make healthier choices.