

A Strategic Plan for Healthy Weight in Bristol

Our mission: A healthy weight for all citizens of Bristol by 2028

Our vision: Healthy weight is a collective responsibility & a healthy choice is the easy choice

Our strategy: Develop a Bristol City wide approach to creating healthier behaviour in a healthier environment



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Forward

by the Chairs of the Health and Wellbeing Board and the Director of Public Health

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1. Introduction

The Healthy Weight Strategic Plan is to address the rising prevalence of overweight and obesity in Bristol. It sets out our city wide approach for prevention and early intervention of overweight and obesity. This approach will involve a wide range of stakeholders and partners across the city.

1.1 Background

Diet-related ill health in the UK is estimated to lead to approximately 70,000 premature deaths annually, which represents around 12 per cent of the total number of deaths. Evidence shows that poor diet has the highest impact on the NHS budget, costing around £6 billion per year, a figure which is greater than alcohol consumption, smoking and physical inactivity.

Marmot (2010) identified that inequalities in health in England existed across a range of social and demographic indicators, including income, social class, occupation and parental occupation, level of education, housing condition, neighbourhood quality, geographic region, gender and ethnicity. This applies

to Bristol city too. In England obesity is closely associated with social and economic deprivation across all age ranges and is increasing in prevalence. Whilst Bristol has a lower overall prevalence of overweight and obesity than the England average it is significantly higher in areas of social and economic deprivation in the city.

The Bristol City Council's corporate strategy highlights our priorities for the next five years as building resilience in the council and the city, together with a focus on intervening early for those most at risk of escalating needs. It outlines the council's increasingly important role as an enabler and facilitator to achieve our goals. The plan emphasises the

need for a commitment to work with people and organisations to tackle inequality and focus on the fundamentals; more homes; decent jobs and a stronger economy; less congestion and cleaner air; and enhanced health and wellbeing.

The causes of weight gain are a complex combination of our individual biology and psychology, the environment we live in and societal and cultural influences. In order to achieve our ambitious mission and to address health inequalities we need collective action across each of these factors at a local, regional and national level. This will only be possible through a collaborative, partnership approach across agencies.

1.2 A Whole Systems Approach to Healthy Weight

We are establishing a Bristol Whole Systems approach to healthy weight. This approach requires leadership from the top, with Bristol City Council holding the ring and engaging partners across the city including health, local authority, business, education and child care, sport and recreation, community groups, charities, universities; government agencies; families and individuals. But it goes beyond collaboration and individual contributions of each organisation and focuses on how the system works as a whole to make the solution "more than the sum of its parts". This approach needs to be challenging and to take bold action if we are to achieve our goal of a healthy weight for all.

Signing the Local Authority Declaration for Healthy Weight will indicate that Bristol City Council is prepared to take the lead in this approach.

A map of the Bristol system has been presented in *Figure 1*.

1.3 Our Objectives

Our partners have all committed to achieving a whole systems approach to healthy weight in Bristol by implementing the objectives identified by this strategic action plan (*Appendix 1*). This strategy is underpinned by an annual action plan that will detail each action and who is responsible.

1.3.1 Our Strategic Objectives:

- To build a more effective, sustainable, system-wide approach to implement changes
- To influence the regional and national agenda to promote healthy weight

1.3.2 Our Prevention Objectives:

- To create an environment which promotes healthy weight
- To give all children the best start in life and address the generational cycle of lifestyle factors in families and individuals.
- To address causes that put particular groups at greater risk of obesity

1.3.3 Our Early Intervention Objectives:

- To offer effective support for families and individuals who want to lose weight.

There are a set of overarching outcomes that will be monitored to show improvements in the healthy weight targets for Bristol (*Appendix 2*).

1.4 Key Commitments

The key commitments and actions have been identified through consultation with Bristol citizens and professionals as well as a review of the evidence of best practice provided by our local Joint Strategic Needs Assessments, the National Institute for Health and Care Excellence (NICE), the Local Government Association (LGA), the Department of Health (DH) and Public Health England (PHE).

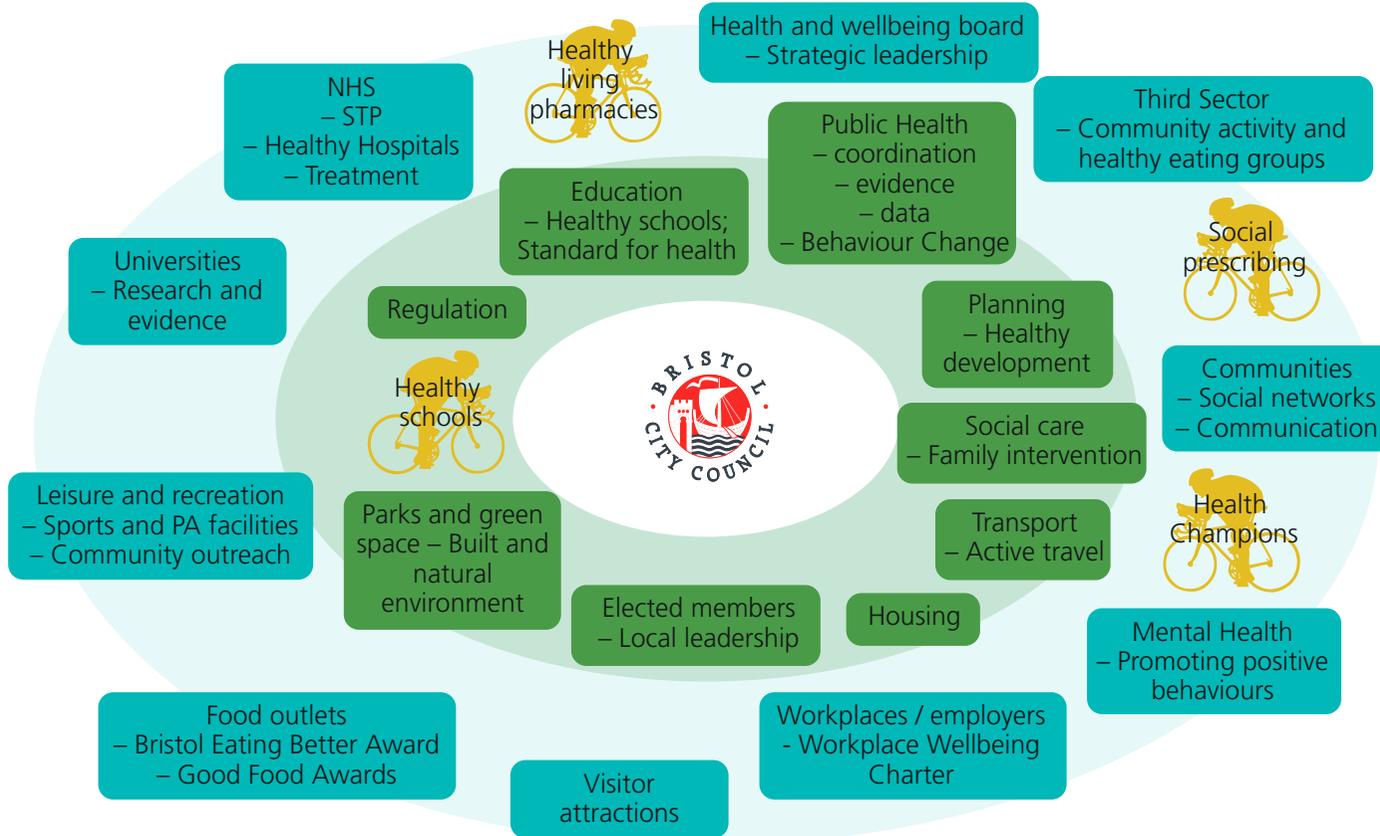
Figure 1:

Bristol's whole system for healthy weight

Co-creating an action plan towards healthier lifestyles

Opportunities for co-creation:

- Everyone's priority
- Consistent messages
- Share knowledge & avoid duplication
- Cross sector partnerships e.g. leisure and schools



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1.5 In-Scope

In its simplest form reaching and maintaining a healthy weight depends on the amount of calories (energy from food and drink) eaten against the amount of calories (energy from activity) used. *Appendix 3* describes a healthy weight and the preferred nutrition and physical activity recommendations to be used with this strategic plan.

This strategic plan is intended to address the breadth of modifiable issues which contribute to healthy weight across the life course, from conception, through childhood to old age. The strategy focusses on preventable weight gain and early intervention to reduce overweight and obesity.

There is a two way relationship between weight and mental health. People who suffer from anxiety and depressive disorders are at greater risk of being overweight. Being overweight can also lead to low self-esteem and poorer mental wellbeing. Conversely, taking regular exercise and eating a nutritious, balanced diet can make people feel better, have more energy and boost mental wellbeing. Taking part in exercise groups and clubs can also reduce social isolation which can affect people's mental wellbeing. There is also emerging evidence that stress and poor sleep are also risk factors for weight gain.

Promoting sugar smart as part of healthy weight will also improve oral health as a diet high in sugar not only contributes to overweight but also poor oral health and dental decay.

Many of the opportunities for increasing physical activity and improving diet have a positive impact on the environment. For example travelling by foot or bike instead of by car reduces harmful emissions, causing air pollution and road traffic collisions. Improving the built and natural environment can make streets safer and more welcoming, improve social interaction and support local businesses. A reduction in road traffic would also reduce noise pollution.

Reducing consumption of processed and take-away foods can reduce the impact of excess packaging, food miles and energy used in processing. This could also improve the environment by creating less litter.

1.6 Out of Scope

There are some medical conditions and treatments which can cause people to gain weight. This strategic plan will not address these. However it is recognised that people experiencing weight gain for these reasons, still require support to help them manage the weight gain. Professionals need to be aware of their role in supporting and signposting people to the appropriate support available.

As well as the health risks associated with being overweight, there are also important health risks of being underweight. However the reasons and causes of underweight differ to those of overweight and therefore this is not addressed by this strategic plan. It is recognised as an important issue however and the Government's Emotional Health Transformation Plan: Future in Mind, specifically highlights this issue. Work is underway to implement the recommendations of this report and has been aligned to this strategic plan.

2. The case for change

Healthy weight

- The World Health Organisation considers the rising levels of obesity seen globally to be one of the most serious health challenges of the 21st century.^[1]
- In adults, obesity reduces life expectancy by an average of 3 years, and severe obesity by 8-10 years.^[2]
- Being overweight or obese increases your risk of:
 - Osteoporosis and musculoskeletal problems
 - Discrimination and stigmatisation, leading to depression and anxiety.
 - People who are overweight and obese are also less likely to be in employment and more likely to require sickness absence from employment or education.

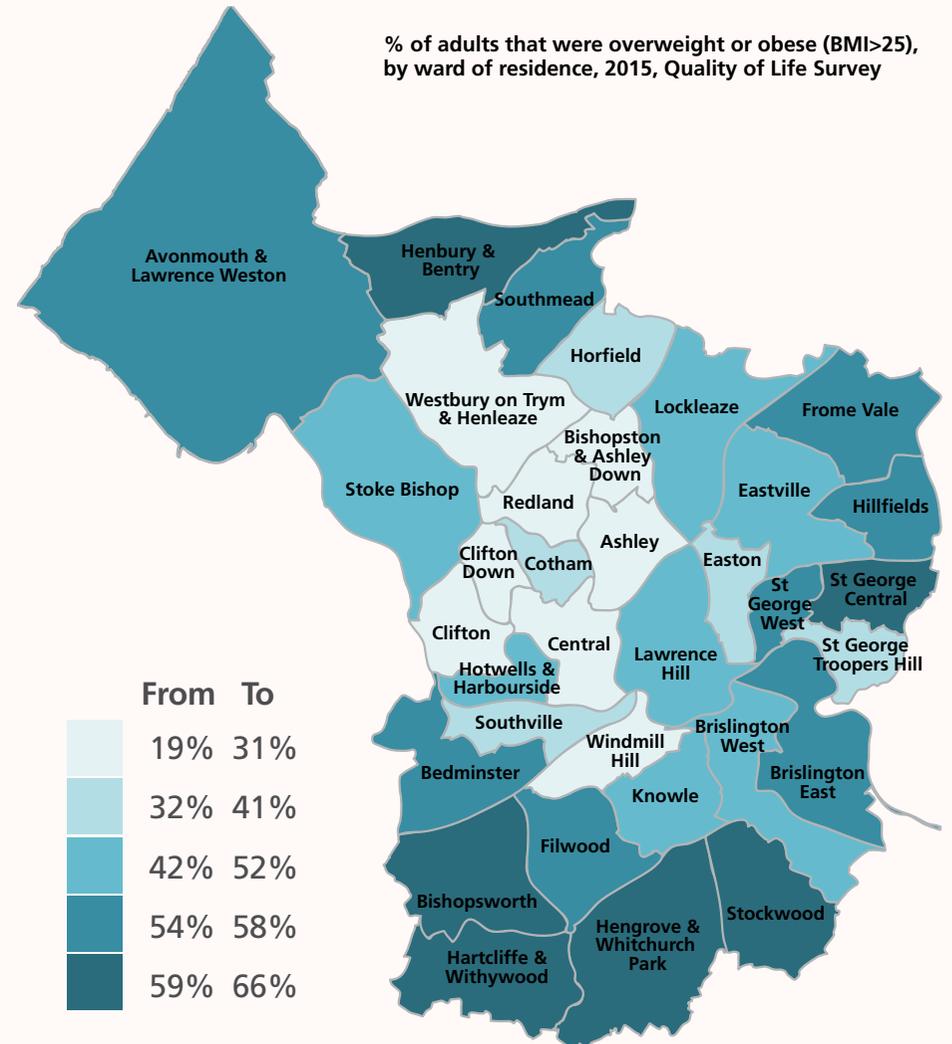
- Obesity is currently estimated to cost the wider economy £27 billion.^[2]



- The measure usually used to assess weight is the body mass index (BMI), a person's weight (in kilograms) divided by the square of his or her height (in metres). A person with a BMI of 30 or more is generally considered obese. A person with a BMI equal to or more than 25 is considered overweight. A BMI of between 20 and 25 is considered a healthy weight.

- The percentage of people in Bristol who were overweight and obese increased from 56.9% in 2012-14 to 57.8% for 2013-15. Some wards have much higher levels of overweight than others.^[3]

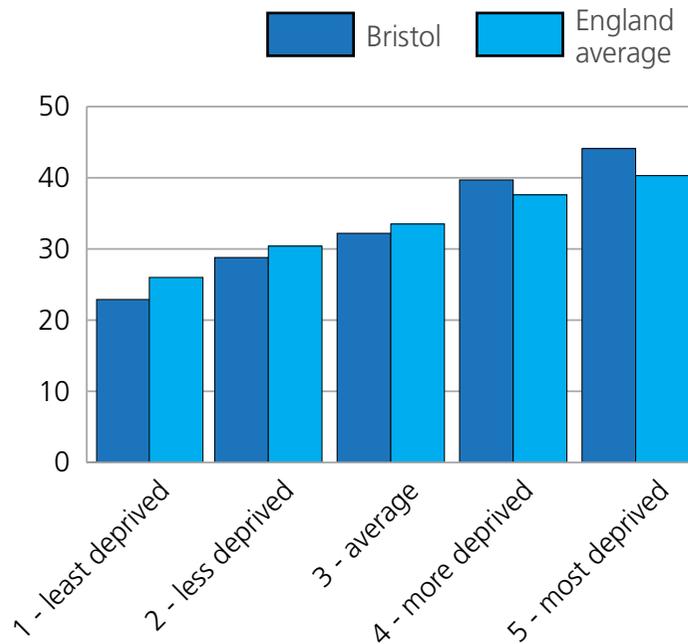
Figure 2: Percentage of respondents who are overweight and obese by Bristol ward area, Bristol Quality of Life Survey 2015



Facts and stats

- The most deprived children in Bristol are significantly more likely to be overweight or obese than in England as a whole.

Childhood excess weight prevalence (% of those measured), by deprivation quintile, year 6 (10/11yrs), Bristol resident pupils vs England average, 2015/16



Physical activity

- 16.8% adults in Bristol are physically inactive. Men are more likely to achieve the recommendations for physical activity than women.^[4]
- Physical activity in 13-15 year olds nationally fell from 28% meeting the government recommendations in 2008 to 14% by 2012.^[5]

Healthy Eating

- 50.5% of adults in Bristol meet the 5-a-day fruit and vegetable recommendation. Women are significantly more likely to achieve the recommendation than men.^[3]
- 25% of year 8 and 10 (secondary) pupils are getting their 5-a-day, 31% of those in years 4 and 6 (primary).^[6]



- In Bristol, the following proportion of people eat out once per week:^[6]



- Families who eat their main meal together are more likely to come from deprived areas (Quintiles 4&5)

3. What you've told us (from our Sugar Smart survey)

We received 1,200 responses from across the city to our Sugar Smart survey, whilst this is not a true representation of the city's views on healthy weight; it provides a snapshot of public opinion:

Healthy weight

- 77% of you told us healthy weight should be a high or top priority for Bristol.
- 75% of you were worried about being or becoming overweight yourselves.
- You would like more information on the risks of being overweight and the benefits of a healthy lifestyle.

Physical activity

- You told us you would like more opportunities for children and adults to walk or cycle as part of their daily travel, by creating safer routes that are away from roads, have a good quality surface and are well lit.
- You'd like more places for children and adults to be active in.
- You'd like more exercise groups in parks and community spaces. They need to be affordable, held at convenient times (for example in evenings and on weekends), be family friendly, accessible and disabled friendly and well-advertised.

Healthy Eating

- You'd like better deals for gyms and leisure centres.
- You'd like more opportunities for children and young people to be active at school.
- You'd like us to reduce the number of cars on the roads and improve pollution, for example through a congestion charge.
- You told us you'd like more support for adults and families to cook healthier food, for examples through courses on cooking from scratch and budgeting. They need to be held at convenient times (for example in evenings and on weekends).
- You'd like cooking, budgeting and healthy eating skills to be taught in schools and that they should consider including parents.
- You'd like healthy food and drink options to be more affordable.
- You'd like free drinking water to be easily available.
- You'd like to see a reduction in the amount of marketing and advertising of high sugar food and drink.
- You'd like more action to be taken in schools to limit sugary items and reduce sugary drink intake among pupils.

4. Achieving our strategic objectives

4.1 Build a more effective, sustainable, system-wide approach to implement changes

- 1 Use the Whole Systems Approach to develop a Healthy Weight Strategic Plan for Bristol which is led by the Health and Wellbeing Board.
- 2 Establish a broad network of stakeholders to deliver the healthy weight strategic plan for Bristol.
- 3 Ensure professionals are aware of the causes and support available to people to maintain a healthy weight, linking with the Making Every Contact Count programme.
- 4 Be innovative and ambitious with our programme, using evidence based approaches where possible and contributing to the knowledge base through research and evaluation.
- 5 Ensure emotional health and wellbeing is embedded into the delivery of this strategy.

To make a meaningful difference to levels of obesity we need challenging, ambitious and innovative approaches across the spectrum of causes. To do this we plan to:

- Sign the Local Authority Declaration on Healthy Weight (*Appendix 4*)
- Use a Whole Systems Approach to Healthy Weight
- Commit to leading a city wide strategic plan.
- Establish a steering group (Great Weight Group) with a broad network of stakeholders that have a role in promoting healthy weight

- To set challenging goals and raise expectations of achievement
- To produce an annual report for the Health and Wellbeing Board and Children and Families Board Partnership that provides an update on progress against the outcome measures and highlights case studies of successful interventions

There is one main action plan (*Appendix 1*) based on our strategic objectives and there will be a more detailed action plan with SMART objectives developed every 12 months.

4.2 Influence the regional and national agenda to promote healthy weight

6 Work with Public Health England, the West of England Partnership and across our STP footprint to develop consistent messages and approaches to promote healthy weight.

7 Influence the national agenda to implement evidence based policy to promote healthy weight.

Although there is a lot we can do locally, many initiatives to promote healthy weight need to happen at a regional and/or national level. We are committed to using our influence to steer the national agenda and contribute to the evidence base to inform regional and national policy.

CASE STUDY: Bristol Standard for Health

Bristol Standard is a self-evaluation framework has been supporting quality improvement in early year's settings in Bristol and other local authorities for over 20 years. This year we have piloted an extended model for settings to consider ten relevant public health priorities known as the Bristol Standard for Health. The model provides practitioners with a framework to acknowledge/evidence what they are doing already on a health topic, then reflect and identify where to go next by setting targets. It is an innovative development as there is no other framework available that covers the breadth of health priorities. They include nutrition, physical activity, oral health and emotional health amongst others.

CASE STUDY: Outdoor Events Policy

Public Health Bristol has developed a set of Standards and Guidance to ensure Outdoor Events hosted in Bristol promote healthy lifestyles. This policy includes requirements around ensuring the provision of free drinking water and committing to at least two out of seven Sugar Smart actions.

4.3 Create an environment which promotes healthy weight

- 8 Improve the built and natural environment to encourage physical activity.
- 9 Ensure spatial planning processes support promoting a healthy weight.
- 10 Improve the food environment so the healthy choice is the easy choice.
- 11 Ensure the public sector food environment sets an example of healthy and sustainable food procurement.
- 12 Enable and empower workplaces to be competent, confident and effective in promoting healthy weight.

Over recent decades our lives have become more sedentary due to the proliferation of cars, mechanisation and desk-based jobs. This has been coupled with easy access to high energy convenience food and drinks. We want to

create an environment where healthy food is the easy choice and exercise can be integrated into everyday life.

CASE STUDY: Playing Out

Playing Out is a Community Interest Company which was set up to enable children to play out freely and safely on the streets where they live, increasing their physical activity levels and improving wellbeing and sense of belonging in their communities; encouraging walking, cycling and children's independent mobility in the city; bringing communities together and re-defining residential streets as playable, liveable public spaces. More information is available on their website www.playingout.net.

A total of 921 sessions have taken place, with an average of 20 children per 2 hour session, this equals over 30 000 active play hours. The University of Bristol undertook research to evaluate the impact of playing out sessions. Measures of moderate to vigorous physical activity were taken using accelerometers and GPS monitors on a sample of 105 children. Results found that sessions significantly increased children's time spent outdoors and physical activity levels, increasing by 16 minutes for every hour spent outdoors.

CASE STUDY: Sugar Smart Bristol

Bristol is the first city in England to become 'Sugar Smart'. The programme is working in a variety of settings (schools, colleges, universities, workplaces, food outlets, visitor attractions, sport and leisure facilities) to support changes to the food on offer as well as developing resources and promotional material to promote Sugar Smart messages to the public such as reading the labels, swap sweet snacks for fruit and swap fizzy drinks for water. This is being evaluated in a variety of different ways including through master's student dissertations at the University of Bristol.

CASE STUDY: Sustainable Food City

The Sustainable Food Cities Award is designed to recognise and celebrate the success of those places taking a joined up, holistic approach to food and that are achieving significant positive change on a range of key food issues. Bristol currently holds the Silver Sustainable Food City Award but we are working towards achieving Gold in the coming years.

CASE STUDY: Bristol Eating Better Award

The Bristol Eating Better Award is a free award scheme publicising food businesses that are taking some action to offer food that is healthier and more environmentally friendly. The scheme is currently being piloted in a few cafes and take-aways across the City. An evaluation of the scheme is being conducted by the University of Bristol. More information is available at www.bristol.gov.uk/food-business/bristol-eating-better-award-scheme.

4.4 Give all children the best start in life and address the generational cycle of lifestyle factors in families

13 Engender healthy lifestyles throughout life with evidence based early intervention during the critical 1001 days of a child's life, from conception to age 2.

14 Ensure early years, schools and other education settings make the environment health promoting and teach the skills for life required to lead healthy lifestyles.

If children are overweight in childhood they are much more likely to be overweight as adults. From the moment a baby is conceived, their environment and experiences affect their behaviour and preferences into adulthood. There are key opportunities during childhood where it is possible to intervene to promote healthy lifestyles, establish positive behaviours and build emotional wellbeing that they will maintain throughout life.

CASE STUDY: Mayors Award for Healthy Schools

The Healthy Schools Team works with schools to assess the whole school environment and ensure that the ethos of all school policies helps children and young people to maintain a healthy weight, eat healthily and be physically active, in line with existing standards and guidance. This includes policies relating to building layout and recreational spaces, catering (including vending machines) and the food and drink children bring into school, the taught curriculum (including PE), school travel plans and provision for cycling, and policies relating to the National Healthy Schools Programme and extended schools. The team have expanded this award to now include healthy nurseries.

CASE STUDY: Fit and Fed

School holidays have become hard for low income families. Research shows many children on free school meals, or low income families are hungry, isolated and inactive in the holidays. A poor diet, lack of activities and limited social engagement leaves them poorly prepared to return to school. Bristol is one of 16 communities across the UK piloting Fit and Fed, providing physical activity programmes and a meal for children in the most deprived areas.

"I am so pleased and happy with the service that has been provided over the last 6 weeks. Without this my children would have been stuck in the house with nothing to do as I am housebound and in a wheelchair. My children have enjoyed coming, enjoyed playing, enjoyed joining in with all the activities that was provided, also the lunches that have been provided for children have been a godsend....."

4.5 Address causes that put particular groups at greater risk of obesity

15 Enable and empower communities to improve individuals and families' relationship with food.

16 Enable and empower communities to improve individuals and families' physical activity levels.

17 Ensure sport and recreational clubs and groups are inclusive and accessible to all.

18 Ensure interventions are targeted towards vulnerable groups at highest risk of overweight.

People from lower socio-economic groups and Black, Asian and Minority Ethnic groups are at much greater risk of being overweight and therefore we need to target interventions and support at those groups who need it most. In order to achieve this, interventions need to be accessible and culturally appropriate. Often people experience barriers to being physically active such as time, the cost of recreational clubs and groups (including kit and transport to them) and a perception that 'sport' is elitist and not for them. We need to address these barriers and ensure everyone has the opportunity to be physically active in a way that suits them.

CASE STUDY: European City of Sport 2017

European City of Sport has been about raising awareness of the sport and physical activity opportunities available across Bristol. Our website and social media accounts share information enabling organisations to publicise their activities and successes with us and to share with the wider population. The 'Are You Game?' campaign had 80 organisations offering over 100 free different sessions of activity that people could access between May and September. The legacy will be an ongoing 'First Session Free' offer from organisations across Bristol and an on-line physical activity and sports directory. The key aim is to promote physical activity opportunities and encourage participation whether incorporating it into a more active lifestyle or more formal participation.

CASE STUDY: Young Chef and Young Baker Award

Bristol Healthy Schools launched these awards in 2014, to celebrate the fact that practical cooking skills were back in the curriculum for Key Stages 1 - 3. The aim was to get young people excited about the idea of cooking from scratch; growing food and helping others to get involved. The awards promote health and wellbeing, with a focus on being Sugar Smart and creative on a budget. There has always been huge interest and hundreds of applications to enter for these awards. Feedback on the awards from entrants includes:

'Being a finalist in the Young Chef competition made me realise I am good at something'

'Cooking is good fun, it helps me destress. I get nervous about SATS and this helps me think about other things'

'For the first time ever students in the lower years look up to me! I can help them learn to cook too'

'Weighing food to bake with helps me with my Maths'

From Parents / Carers:

'This experience is such a great one for any young person'

From Teachers:

'We have seen this competition impact on Childrens cooking and growing skills but also on confidence and self-esteem'.

4.6 Offer effective support for children and adults who want to lose weight

19 Provide a behaviour change programme which will enable individuals and families to take action to reduce their weight through provision of information, guidance and coaching.

The focus of this strategy is on preventing people becoming overweight and intervening early by making healthy lifestyles the easy choice. However we recognise that some people will need specialist support to lose weight, for example the severely obese and those with additional needs.

CASE STUDY: Core Cities Sport England Grant

The aim of this project is to address health inequalities for inactive people in areas of deprivation through increased awareness, better use of community assets and motivators, and improved access and increased participation.

In tackling inactivity we want to reduce health inequalities through better understanding of particular community groups, influencing their behaviours, attitudes and motivations towards physical activity. This will help to achieve personal aims, such as meeting friends, having fun, keeping a healthy weight and feeling safe, through physical activity.

This behaviour change model approach will work towards a pathway of opportunities to ensure that people currently taking less than 30 minutes physical activity a week adopt everyday habits which move them towards the recommended levels beneficial for health i.e. the move from sedentary to participation.

5. How are we going to get there?

This strategy is the beginning of a journey, not the end. The next steps are implementing this strategic plan.

Healthy Weight is one of the top three priorities of Bristol's Health and Wellbeing Board. They have tasked the Great Weight Group with achieving these objectives over the next five years.

**[www.bristol.gov.uk/
social-care-health/get-
involved-in-the-great-
weight-debate](http://www.bristol.gov.uk/social-care-health/get-involved-in-the-great-weight-debate)**

In order to deliver the objectives we will continue to engage communities and partners in the Great Weight Debate, taking a whole systems approach and creating a social movement. We will do this through local engagement events and public surveys.

The work will not stop after the five year duration of this strategic plan; however that will be a sensible point for us to reflect back on progress, evaluate our achievements against our objectives and refresh our strategy in light of any changes.

6. How will we know when we're there?

The strategic action plan (*Appendix 1*) will be monitored against the overarching outcomes (*Appendix 2*) each year.

The annual action plans will contain more detail about individual projects with SMART (specific; measurable; achievable; realistic and timely) objectives that will also be monitored.

The results of this monitoring will be highlighted in the annual report for the Health & Wellbeing Board, and Children & Families Board Partnership.

6.1 Evaluation

Evaluation of the strategic plan will be continuous and will include feedback from stakeholders and participants.

6.2 Appendix 1: Strategic Action Plan

Summary of the actions and key commitments identified above.

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
Priority	BCC signs the Local Authority Declaration on Healthy Weight			
1	Build a more effective, sustainable, system-wide approach to implement changes			
1.1	Develop a Whole Systems approach to Healthy weight in Bristol that is challenging and bold and is underpinned by a comprehensive healthy weight strategic plan which is led by the Health and Wellbeing Board	<ul style="list-style-type: none"> To set challenging goals and raise expectations of achievement interventions. To produce an annual report for the Health and Wellbeing Board and Children and Families Partnership Board that provides an update on progress against the outcome measures and highlights case studies of successful 	Annual action plan developed with challenging objectives Production of annual report	March 2018 March 2019 March 2020 March 2021
1.2	Establish a broad network of stakeholders to deliver the healthy weight strategic plan for Bristol	<ul style="list-style-type: none"> Establish a Steering Group (Great Weight Group) with a broad network of stakeholders that have a role in promoting healthy weight. 	Range of stakeholders engaged with delivering objectives in the action plans	Annual

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
1.3	Develop training programmes to ensure professionals; families and individuals are aware of the causes of obesity and the support available to residents to reach and maintain a healthy weight, linking with the Making Every Contact Count programme (MECC)	<ul style="list-style-type: none"> Invest in the health literacy of local residents to make informed healthier choices. 	Range of programmes supporting health literacy and uptake of places	Annual
1.4	Be innovative and ambitious with our programme using evidence based approaches where possible and contributing to the knowledge base through research and evaluation	<ul style="list-style-type: none"> Create, develop and implement 'The Bristol Challenge' – a population challenge supporting healthy weight 	Uptake of Bristol Challenge by the residents of Bristol	April 2018
1.5	Ensure emotional health and wellbeing is embedded into the delivery of this strategic plan	<ul style="list-style-type: none"> To work with the Thrive programme to ensure emotional health and wellbeing is included in all interventions 	Annual report Measure of emotional health and wellbeing as part of Thrive programme	Annually
2	Influence the regional and national agenda to promote healthy weight			
2.1	Work with Public Health England Obesity Network, West of England Partnership and the Bristol, North Somerset and South Gloucestershire Sustainability Transformation Plan to develop consistent messages and approaches to promote healthy weight.	<ul style="list-style-type: none"> Support local, regional and national campaigns such as Change 4 Life; Sugar Smart Bristol and One You. Promote innovative local schemes and their evidence of effectiveness regionally and nationally. 	Evidence of input to regional and national campaigns. Evidence of sharing information to support external schemes	Continuous

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
2.2	Influence the national agenda to implement evidence based policy to promote healthy weight	<ul style="list-style-type: none"> • Respond to regional and national consultations and engagement processes to develop healthy weight policy. • Support action at national level to help local authorities reduce obesity prevalence and health inequalities in our communities. 	<p>Evidence of response to national consultations</p> <p>Evidence of work supporting national programmes</p>	Ongoing
3	Create an environment which promotes healthy weight			
3.1	Improve the built and natural environment to encourage physical activity	<ul style="list-style-type: none"> • Link plans to Active Travel and public transport 		
3.2	Ensure spatial planning processes support promoting a healthy weight	<ul style="list-style-type: none"> • Advocate plans with our partners including the NHS and all agencies represented on the Health and Wellbeing Board, Healthy Cities, academic institutions and local communities to address the causes and impacts of obesity • Promote use of open spaces for physical activity 		2018

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
3.3	Improve the food environment so the healthy choice is the easy choice	<p>[8]</p> <ul style="list-style-type: none"> Engage with local food businesses to encourage an increase in the availability, accessibility and affordability of sustainable and healthy food and drink across the city. Increase public access to fresh drinking water at venues across Bristol 	<p>Number of businesses with Bristol Eating Better Awards</p> <p>Number of businesses linked into Refill</p>	Annually
3.4	Ensure the public sector food environment sets an example of healthy and sustainable food procurement	<ul style="list-style-type: none"> Review and improve the Food supply contract to enable more healthy and sustainable food procurement for all BCC contracts Develop and implement new healthy and sustainable food and catering standards to apply to all BCC Catering contracts Protect our children from inappropriate marketing by the food and drink industry such as advertising and marketing in close proximity to schools; 'giveaways' and promotions within schools; at events on local authority controlled sites. 	<p>New food supply contract in place that supports healthy and sustainable food procurement.</p> <p>Standards embedded into all BCC Catering contracts</p>	March 2018

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
3.5	Enable and empower workplaces to be competent, confident and effective in promoting healthy weight	<p>[9]</p> <ul style="list-style-type: none"> Support the health and well-being of local authority staff and increase knowledge and understanding of unhealthy weight to create a culture and ethos that normalises healthy weight 	Workplace health programmes in place to support staff	
4	Give all children the best start in life and address the generational cycle of lifestyle factors in families.			
4.1	Engender healthy lifestyles throughout life with evidence based early intervention during the critical 1001 days of a child's life: from conception to age 2.	<ul style="list-style-type: none"> Promote the importance of a healthy start in life through breastfeeding; healthy eating and physical activity in the first 1001 days of life Engage the wider family. Focus resources in areas of higher deprivation, including increasing access to healthier foods. Promote the Healthy Start Scheme along with Oral Health targeted to high risk families 	<p>Breastfeeding initiation rates increase</p> <p>Support for pregnant women to maintain a healthy weight throughout pregnancy</p> <p>Uptake of Healthy Start scheme by eligible families</p>	Annually
4.2	Ensure early years, schools and other education settings make the environment health promoting and teach the skills for life required to lead healthy lifestyles	<p>[13] [11] [18]</p> <ul style="list-style-type: none"> Ensure schools provide a healthy environment through the Healthy Schools Award Scheme. Engage the parents; wider family and community Bristol Standards 	<p>Number of schools achieving Mayors Award</p> <p>Number of Early Years settings completing the Bristol Standard</p> <p>Increased number of children achieving 60 minutes physical activity daily</p>	Annually

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
5	Address causes that put particular groups at greater risk of obesity.			
5.1	Enable and empower communities to improve individuals and families' relationship with food.	<p>[19]</p> <ul style="list-style-type: none"> • Provide guidance for hot food takeaways, specifically in areas around schools, parks and where access to healthier alternatives are limited through the Bristol Eating Better Awards 	<p>Uptake of Bristol Eating Better Awards</p> <p>Improve skills and knowledge around food and food preparation</p> <p>Better informed about budgeting</p>	
5.2	Enable and empower communities to improve individuals and families' physical activity levels	<ul style="list-style-type: none"> • Develop a supportive infrastructure and a range of opportunities (including social prescribing) to enable people to engage in community activities that promote healthy lifestyles; and communicate these opportunities across all communities. 	<p>Increased uptake of a range of sport and physical activities</p>	Ongoing
5.3	Ensure physical activity, sport and recreational clubs and groups are inclusive and accessible to all	<ul style="list-style-type: none"> • Continue to improve access to all Council leisure centres and swimming pools particularly for those with highest health needs. 	<p>Increased uptake by eligible families and individuals</p>	

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
5.4	Ensure interventions are targeted towards vulnerable groups at highest risk of overweight and obesity	<p>[18]</p> <ul style="list-style-type: none"> • Provide opportunities to engage the public in health promoting behaviours • Tailor information and support to groups at higher risk of overweight or obesity through activities provided by the Behaviour Change Programme. 	<p>Range of targeted interventions</p> <p>Increased uptake by vulnerable groups</p>	Annual from 2018-2021

Reference number	Action to achieve change	Key Commitments	Success measure	Timeframe
6	Offer effective support for children and adults who want to lose weight.			
6.1	Provide a behaviour change programme which will enable individuals and families to take action to reduce their weight through provision of information, guidance and coaching.	<ul style="list-style-type: none"> • To implement the Behaviour Change Programme to provide a range of support for individuals and families by building capacity in the community for physical activity and healthy eating initiatives. • The Healthy Weight Nurses will continue to support children and families with highest health needs. • Ensure signposting to the Behaviour Change Programme is available through the NHS Health Check, the National Child Measurement Programme feedback and the pregnant women booking appointment. 	As described in the service specifications for for the Behaviour Change programme and for the Healthy weight nurses	

Appendix 2: Outcomes

The strategy will be monitored against a set of measurable outcomes. Some of these outcomes will need monitoring

over a longer term than others due to the speed of change and we may want to add more as the work programme

develops. These have been presented below:

*Sources: Public Health Outcomes Framework (PHOF) www.phoutcomes.info

Quality of Life Survey (QoL) www.bristol.gov.uk/qualityoflife

National Child Measurement Programme (NCMP) fingertips.phe.org.uk/profile/national-child-measurement-programme

Indicator	Source*	Frequency of reporting	Bristol value (2015/16)	England Average (2015/16)
Primary outcome measures				
Excess weight in adults	PHOF	Annual	57.8%	64.8
Reduce the percentage of children in reception class (4-5 yrs) with height and weight recorded who are overweight or obese.	PHOF	Annual	22.9%	22.1
Reduce the percentage of children in Year 6 class (10-11yrs) with height and weight recorded who are overweight or obese.	PHOF	Annual	35.6%	34.2
Increase levels of physical activity in Bristol.	QoL	Annual	65.3%	
Increase levels of physical activity in areas of deprivation in Bristol	QoL	Annual	56%	
Increase the number of people recorded as consuming 5-a-day fruit and vegetable portions.	PHOF/QoL	Annual	50.50%	
Utilisation of outdoor space for exercise/health reasons	PHOF	Annual	10.8%	17.9

Indicator	Source*	Frequency of reporting	Bristol value (2015/16)	England Average (2015/16)
Reduce the gap between the ward with the highest rates of adult overweight or obesity and the ward with the lowest.	QoL	Annual	66% in Hengrove & Whitchurch Park vs 19% in Hotwells & Harbourside Difference of 47% points	
Sustained reduction in percentage of children in the most deprived quintile who are recorded as overweight or obese in Reception Year (4-5 years)	NCMP	Annual		
Reduce the percentage of children in the most deprived quintile who are recorded as overweight or obese in Year 6 (10-11 years)	NCMP	Annual		
Reduce the percentage of adults recorded as overweight or obese in the 10 wards with the highest levels of overweight or obesity	QOL	Annual	Hengrove & Whitchurch Park 66% Hartcliffe & Withywood 66% Stockwood 65% St George Central 59% Henbury & Brentry 59% Bishopsworth 59% Brislington East 58% Southmead 57% Hillfields 56% Avonmouth & Lawrence Weston 56%	
Increase the number of people recorded as actively travelling to work	Active People			

Indicator	Source*	Frequency of reporting	Bristol value (2015/16)	England Average (2015/16)
Give all children the best start in life and address the generational cycle of lifestyle factors in families.				
Breastfeeding prevalence in children with a known feeding status at 6 to 8 weeks who were exclusively or partially breastfed	PHOF	Quarterly	63.7%	49.6%
Number of early years settings with the healthy eating and physical activity health priorities of the Bristol Standard for Health framework	Public Health	Annual		n/a
Number of drinking water fountains		Annual	1	
Number of school settings have achieved the Mayor's award	Public Health	Annual	18 Primary 1 Special 1 PRU 1 Secondary	n/a
Percentage of children measured as overweight or obese that are signposted to support at their 2 year integrated health check.	Public Health	Annual		n/a
Referrals to and uptake of the local National Diabetes Prevention Programme (NDPP)	?			
Decayed, Missing and Filled Teeth (DMFT) in 5 year old children	Oral Health Profile - Public Health England	Annual	1.12 (2014/5)	0.84 (2014/5)
Hospital admissions for tooth extractions in 0-19 year olds	PHOF	Annual		
Self-reported wellbeing – people with a low worthwhile score	PHOF	Annual	4.4	3.6
Fraction of mortality attributable to particulate air pollution	PHOF	Annual	4.40%	

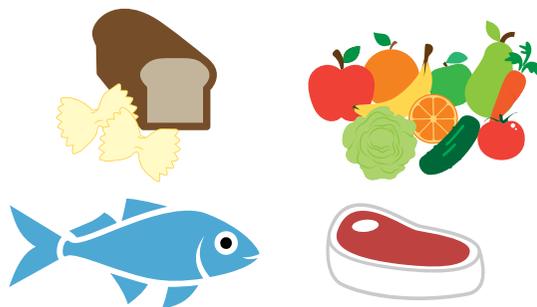
Appendix 3: Guidelines

Our recommendation is that the Eatwell Guide is used as the basis for all nutrition information being delivered to the public:
www.gov.uk/government/publications/the-eatwell-guide

For physical activity these are the recommendations to use:
www.gov.uk/government/news/new-physical-activity-guideline

The following recommendations summarise the guidance on healthy eating:

- Base your meals on starchy carbohydrates
- Eat lots of fruit and vegetables (minimum of 5-a-day)
- Eat more fish – including a portion of oily fish
- Cut down on saturated fat
- Eat less salt – no more than 6g a day for adults
- Drink more water; keep hydrated
- Don't skip breakfast
- Limit red and processed meat to 70g per day.
- Eat less sugar – keep to recommendations for amount of sugar/day



Recommended government guidelines for physical activity are:

Pre-school children who can walk unaided (under 5s)	Be physically active daily for at least 180 minutes (3 hours), spread throughout the day
5-18 years	60 minutes of moderate to vigorous intensity physical activity per day
	Vigorous intensity activities, including those that strengthen muscle and bone, should be incorporated at least three days a week.
Adults	Minimise the amount of time spent being sedentary (sitting) for extended periods.
	150 minutes of moderate aerobic activity such as cycling or fast walking every week

Definitions of Healthy Weight:

Health risk categories for adults: Health Survey for England/ NICE

	Low	High	Very High
	Men <94cm Women <80cm	Men: 94-102cm Women: 80-88cm	Men: >102cm Women: >88cm
Underweight (<18.5kg/m ²)	Underweight (Not applicable)	Underweight (Not applicable)	Underweight (Not applicable)
Healthy weight (18.5–24.9kg/m ²)	No increased risk	No increased risk	Increased risk
Overweight (25–29.9kg/m ²)	No increased risk	Increased risk	High risk
Obese (30–34.9kg/m ²)	Increased risk	High risk	Very high risk
Very obese (>40kg/m ²)	High risk	Very high risk	Very high risk

These criteria are lower for people from Black, Asian and Minority Ethnic groups (BAME)

Measuring and interpreting BMI in children: Public Health England

Measuring an individual child		Measuring a population of children (NCMP)	
<0.4th centile	Very underweight	<2nd centile	Underweight
<2nd centile	Underweight	>2 – <85th centile	Healthy weight
>2 – <91 centile	Healthy weight	>85th centile	Overweight
>91st centile	Overweight	>95th centile	Obese
≥98th centile	Obese		
>99.6th centile	Severely obese		

Appendix 4: The Local Government Declaration on Healthy Weight

The 14 commitments:

- Engage with the local food and drink sector (retailers, manufacturers, caterers, out of home settings) where appropriate to consider responsible retailing (such as not selling energy drinks to under 18s), offering and promoting healthier food and drink options, and reformulating and reducing the portion sizes of high fat, sugar and salt (HFSS) products;
 - Consider how commercial partnerships with the food and drink industry may impact on the messages communicated around healthy weight to our local communities.
- Funding may be offered to support research, discretionary services (such as sport and recreation and tourism events) and town centre promotions;
- Review provision in all our public buildings, facilities and 'via' providers to make healthy foods and drinks more available, convenient and affordable and limit access to high-calorie, low nutrient foods and drinks (this should be applied to public institutions such as schools, hospitals, care homes and leisure facilities where possible);
- Increase public access to fresh drinking water on local authority controlled sites;
 - Consider supplementary guidance for hot food takeaways, specifically in areas around schools, parks and where access to healthier alternatives are limited;
 - Advocate plans with our partners including the NHS and all agencies represented on the Health and Wellbeing Board, Healthy Cities, academic institutions and local communities to address the causes and impacts of obesity;
- Protect our children from inappropriate marketing by the food and drink industry such as advertising and marketing in close proximity to schools; 'giveaways' and promotions within schools; at events on local authority controlled sites;
 - Support action at national level to help local authorities reduce obesity prevalence and health inequalities in our communities;
 - Ensure food and drinks provided at public events include healthy provisions, supporting food retailers to deliver this offer;
- Support the health and well-being of local authority staff and increase knowledge and understanding of unhealthy weight to create a culture and ethos that normalises healthy weight;
 - Invest in the health literacy of local citizens to make informed healthier choices;
 - Ensure clear and comprehensive healthy eating messages are consistent with government guidelines;
 - Consider how strategies, plans and infrastructures for regeneration and town planning positively impact on physical activity;
- Monitor the progress of our plan against our commitments and publish the results.
- Local commitments can be added.

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Documents available in other formats:

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