

2023 to 2024

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# Let's not wait!

Enabling Hampshire's Children to be a Healthy Weight

Director of Public Health Annual Report

## Foreword

This year my Director of Public Health annual report focuses on childhood obesity. This is one of the most significant public health challenges of the 21st century. The percentage of children who are overweight and obese continues to increase and is now often accepted as normal, despite efforts to halt and reverse this trend. Too often discussion about weight is heard as stigmatising and laying the blame on individuals. The concerns highlighted are not about how people look, it is the impact on a person's health that is important. The science is increasingly

clear; genes and inheritance do affect individual risk, but it is the profound changes in the living environment that are shaping everybody's behaviour and making it much harder for us all to be a healthy weight.

Childhood obesity is already a significant challenge to improving the health and wellbeing of children and young people, and onwards into adulthood. The good news is that childhood obesity can be reversed through early collective action, and in doing so reduce risk for future

generations. But if we continue as we are, this will worsen rather than level out or improve. Today's children are tomorrow's workforce, and their health will be a deciding factor in whether Hampshire is healthy and prosperous in the future. Not responding effectively is resulting in unacceptable levels of childhood obesity, impacting both physical and emotional health. This is contributing to adult obesity and the health conditions associated with it.

Let's not wait, we have to act quickly to reverse the rise in childhood obesity.



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Director of Public Health

## Acknowledgments

I would like to thank all those people who contributed to this report including Sarah Copsey, Lucy Dennis, Cath Hall, Jo Lockhart, Marie-Claire Lobo, Rebecca Perrin, Emily Shelton, Matthew Haines and the Hampshire County Council Design Team.

## The data is clear

This report sets out the facts, figures and impact of childhood obesity at a Hampshire level and focuses on the public health challenge facing us. Much of the detail regarding obesity has been set out in previous annual reports<sup>1</sup>, but levels remain stubbornly unchanged. Against this backdrop of widespread obesity, our children and young people's wellbeing, and physical and mental health have also been negatively impacted by the COVID-19 pandemic. Much discourse is rightly aired about the mental health of our young people. Less discussion is focused on healthy weight; therefore, this report brings together key information about this subject to

enable Hampshire's children to attain a healthy weight.

Across Hampshire, more children are overweight and obese between starting (Reception) and leaving (Year 6) primary school. Just over one in five Hampshire children is overweight and obese when they start primary school, and this rises to over one in three by the time they leave primary school (Figure 1<sup>2</sup>).

We also know that obesity and being overweight disproportionately affects children living in deprived areas and different minority ethnic groups and will be driving some, but not all of this data (Figure 2<sup>3</sup>).

<sup>1</sup> [New Annual Report of the Director of Public Health | Health and social care | Hampshire County Council \(hants.gov.uk\)](#)

<sup>2</sup> [Obesity Profile - Data - OHID \(phe.org.uk\)](#)

<sup>3</sup> [Health matters: obesity and the food environment - gov.uk \(www.gov.uk\)](#)

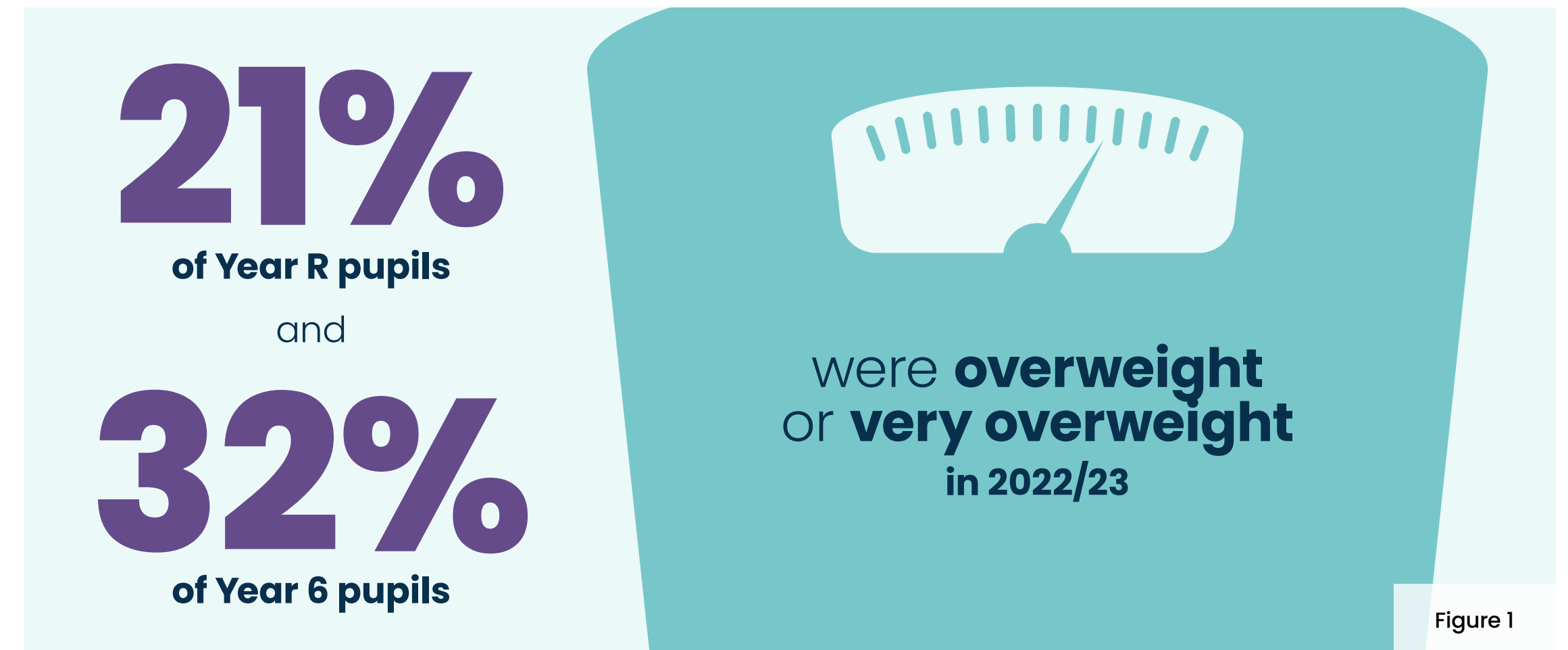


Figure 1

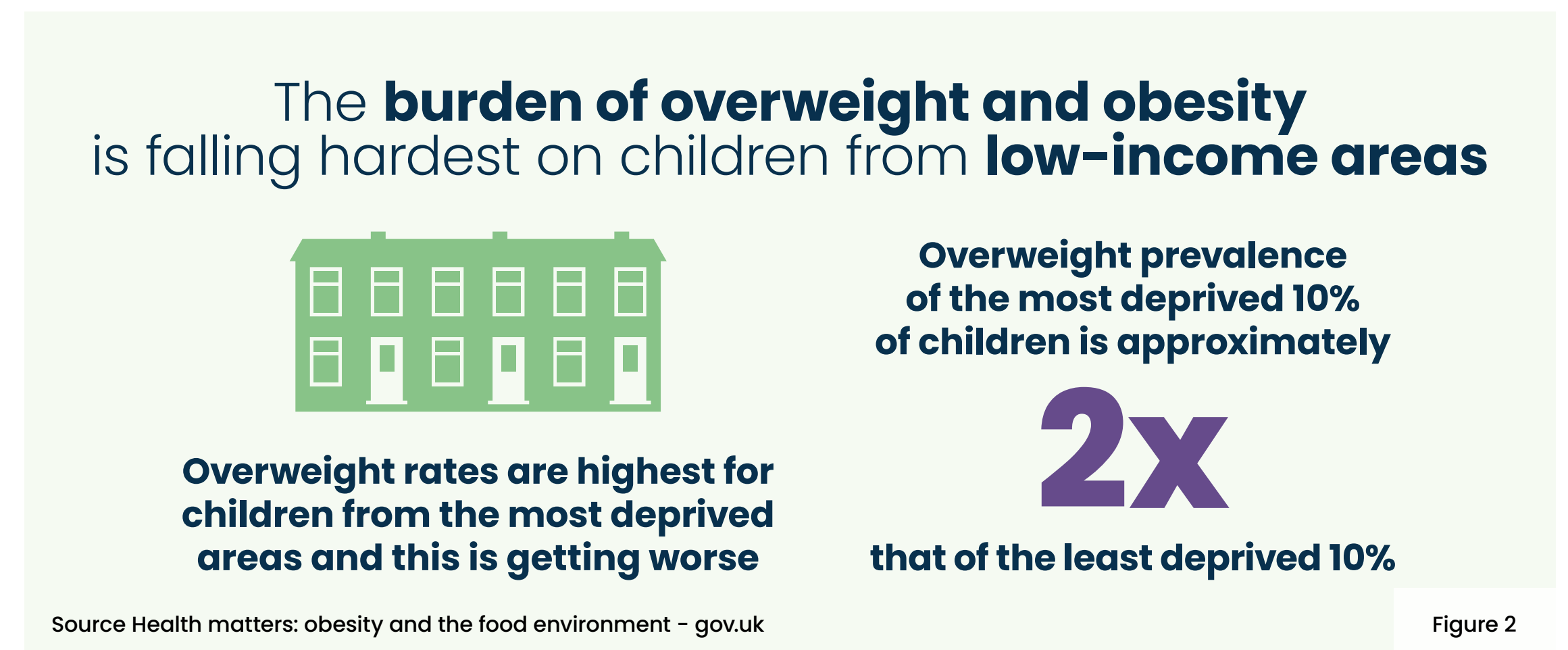


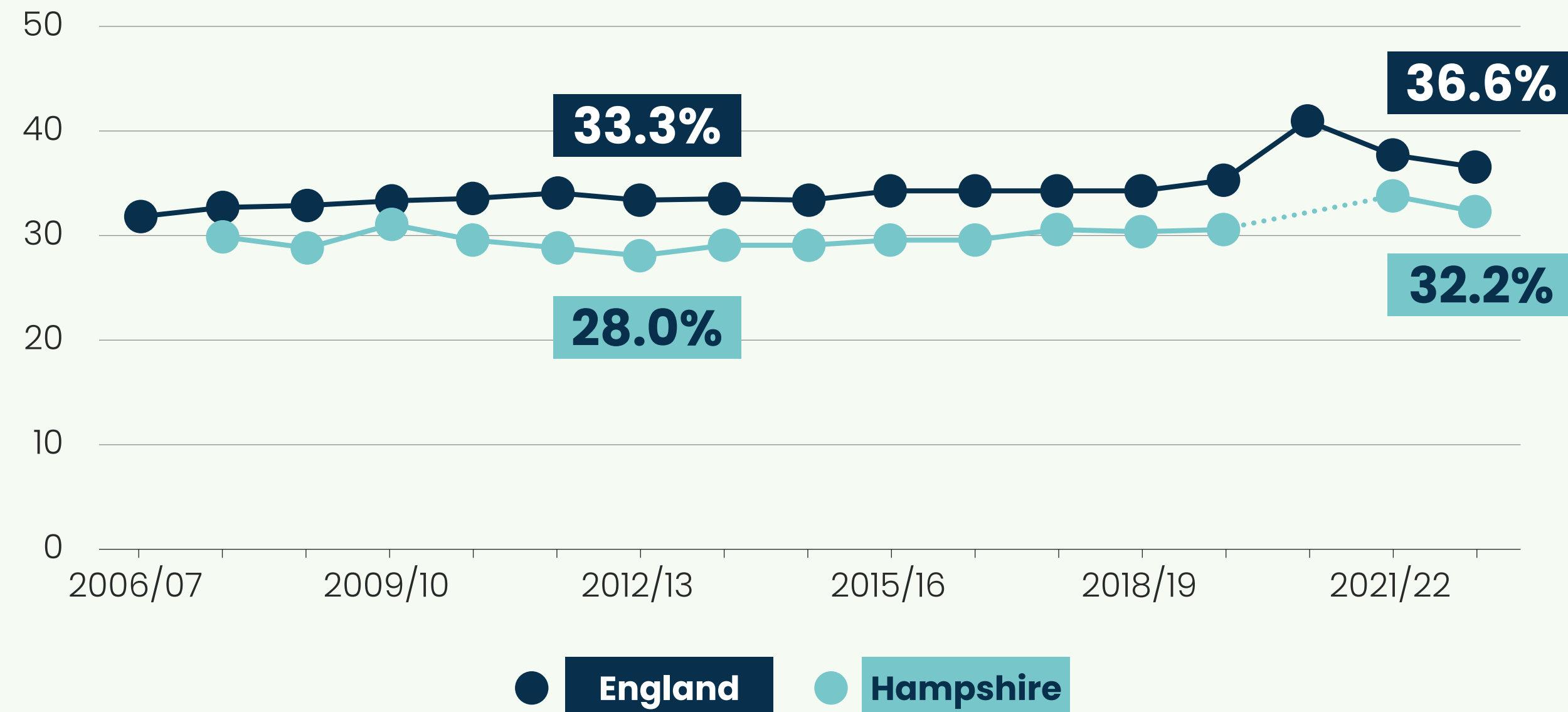
Figure 2

Proportions of overweight and obese Reception children appear to mirror their pre-pandemic position, but for Year 6 children the problem shows no signs of slowing, with higher post-pandemic levels, tracking a worrying and worsening trend (Figure 3).

Whilst the percentage of children who are overweight and obese in Hampshire is lower than the England average, there is little room for complacency given the trend. Concerningly, over the past decade there has been a significant jump in the percentage of children in Year 6 who are overweight and obese. Even more worryingly, this jump is larger in Hampshire than for England as a whole.

### Year 6 prevalence of overweight (including obesity) (10-11yrs)

The relentless problem of overweight and obese Year 6 children that continues post-pandemic



Source: Office for Health Improvement and Disparities (OHID), using National Child Measurement Programme (NCMP), NHS England. Obesity Profile on Fingertips website

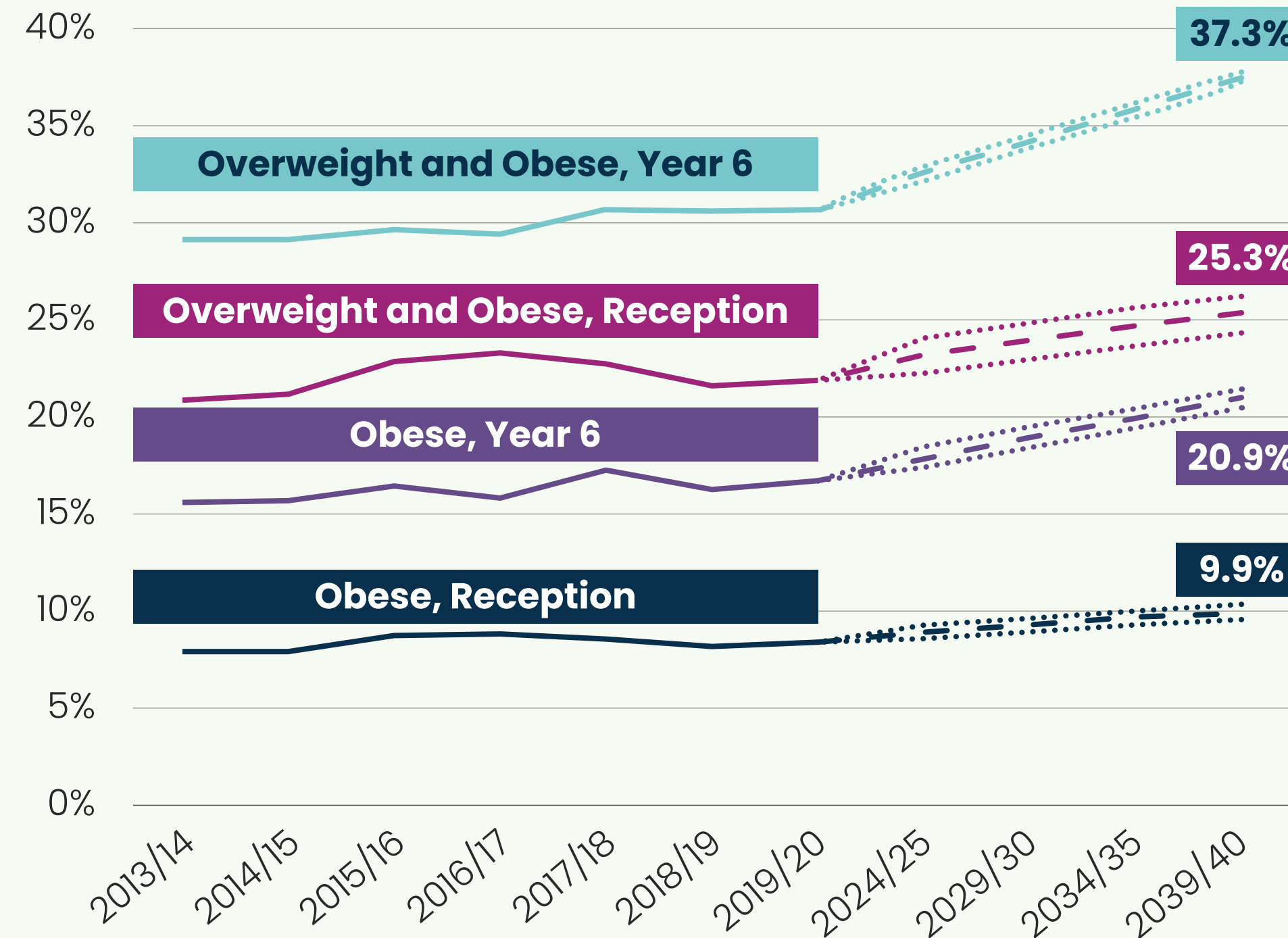
Figure 3

**The greatest opportunity for focusing our efforts is between the ages of 5 and 11 to halt the steep rise between Year R and Year 6.**

If we fail to act now, carrying on as we are, levels of childhood overweight and obesity are projected to rise for this and the next generation. Several studies show that the COVID-19 pandemic has led to an increase in childhood overweight and obesity, so the forecasts in Figure 4 which were calculated prior to the COVID-19 pandemic, are likely to be much higher. Now is the time for urgent and decisive action.

**Likely Future Levels of Child Overweight and Obesity**

Historic and projected child overweight and obesity prevalence across Hampshire up to 2040



Child overweight and obesity at Reception might be expected to rise to almost 25.3% by 2040, with the rate among Year 6 pupils expected to rise to 37.3%

Prevalence of obesity is projected to rise to 9.9% of Reception pupils and almost 20.9% of Year 6 pupils

— Historical figures  
- - - Projected figures  
..... Confidence intervals

Please note projected lines appear steeper than historical lines because they cover a more condensed time period  
Source: LGA Research and Information Team. Future health challenges: public health projections – childhood obesity

Figure 4

## Why does this matter?

Children who are overweight or obese are more likely to experience other associated physical health conditions, for example breathing difficulties, bone and joint problems, insulin resistance, high blood pressure and dental decay<sup>4</sup>. Alongside the physical health impact, emotional health issues can also influence a child's life now and in the future. These are not only felt by the individual but also by those connected with children at home, school and in the wider community.

The impact of this is noticeable across the life course. Studies show that obese children and young people are

five times<sup>5</sup> more likely to be obese in adulthood than those who were not obese as children. This brings with it significant increased risks for heart disease, stroke, diabetes and some cancers, reducing the number of years people live in good health.

The cost to public services is significant, particularly the health service. The annual cost of obesity in Hampshire could be as much as £540 million annually<sup>6</sup>, with a wider cost to society, through loss of work productivity and social care needs.

stroke  
heart  
disease  
some  
cancers  
diabetes

<sup>4</sup> World Health Organization [Obesity and overweight \(who.int\)](http://who.int)

[Early years high impact area 4: Supporting healthy weight and nutrition – GOV.UK \(www.gov.uk\)](http://www.gov.uk)

<sup>5</sup> Simmonds, M, Llewellyn et al. (2016). Predicting adult obesity from childhood obesity: a systematic review and meta analysis. *Obesity reviews*, 17(2), 95-107

<sup>6</sup> [Health matters: obesity and the food environment – GOV.UK \(www.gov.uk\)](http://www.gov.uk)

## What causes children to be overweight and obese?

Numerous factors influence the likelihood of obesity, including socio-economic circumstances, the physical environment and food systems. Figure 5 illustrates the complex factors influencing weight, linking people's individual factors to the impact of food production and consumption, the places we live and our society – termed as the obesogenic environment.

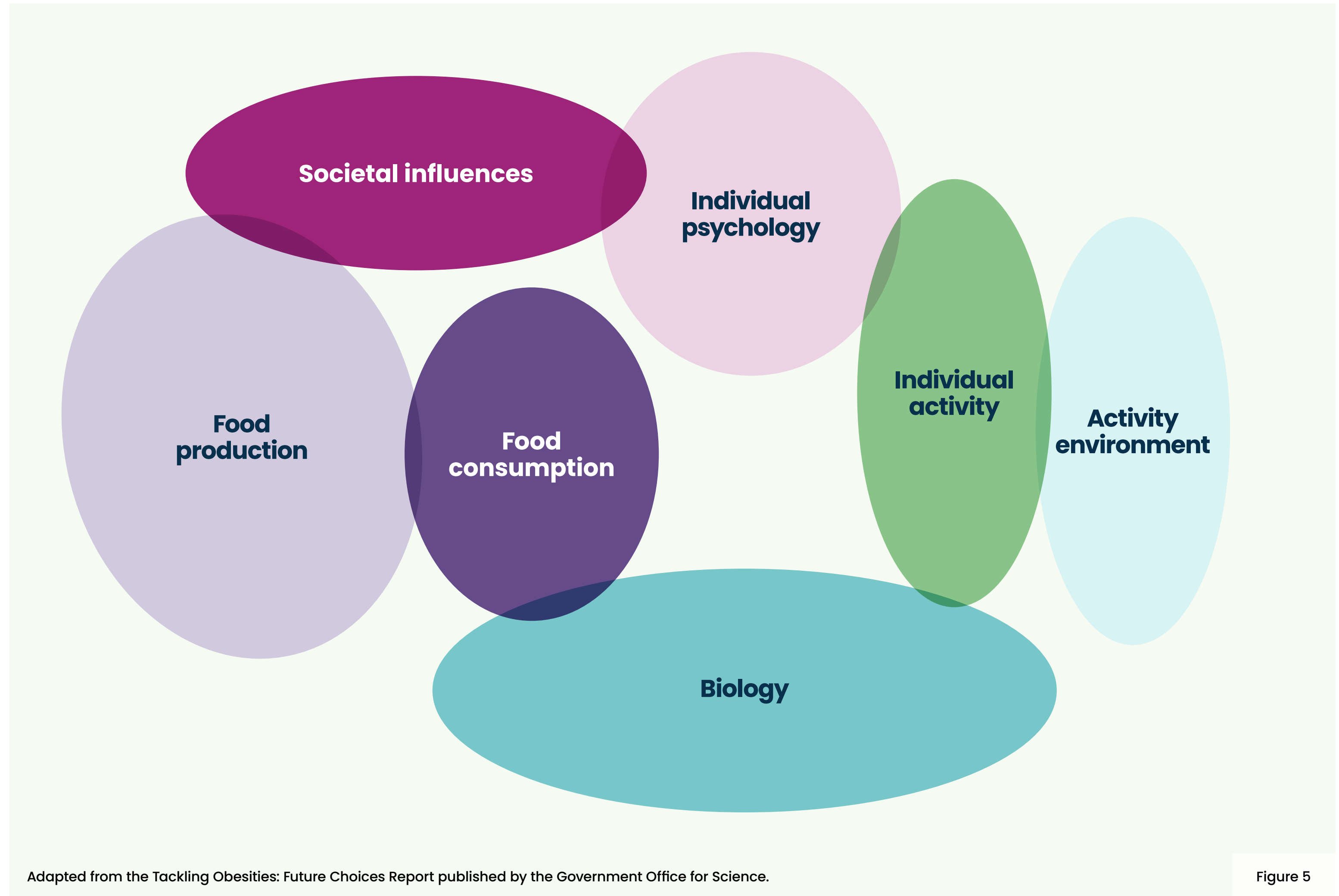


Figure 5

## Starting at the beginning

Maternal obesity is a key factor influencing childhood weight, with an increased risk of babies being born above a normal weight range and greater risk of complications during birth<sup>7</sup>. The First 1001 Days<sup>8</sup> is the most critical phase when the foundations for lifelong health are built. Poor nutrition during this time can cause an irreversible disadvantage in the development of a child's brain and other organs, setting the stage for potential adult obesity and associated health problems.

Breastfeeding has long-term health benefits for babies, lasting right into adulthood. Most babies in Hampshire

have breastmilk for their first feed. However, over the following days and months from birth, there is a marked drop off in the number of babies who continue to be breastfed (Figure 6<sup>9</sup>) with notable variation in breastfeeding rates across parts of Hampshire, with more affluent areas having highest rates and more deprived communities having lower rates. In addition to breastfeeding, the first year of life includes an infant's introduction to solid food which is a key time to influence healthy food habits and eating behaviours.

**76%**  
of babies are  
breastfed at birth

**BUT**  
this  
**DROPS**  
to

**57%**  
at 6–8 weeks

<sup>7</sup> Childhood obesity: applying All Our Health – GOV.UK ([www.gov.uk](http://www.gov.uk))  
<sup>8</sup> The best start for life a vision for the 1001 critical days.pdf ([publishing.service.gov.uk](http://publishing.service.gov.uk))  
<sup>9</sup> Public health profiles – OHID ([phe.org.uk](http://phe.org.uk))

Figure 6



## Changes in dietary habits

We have seen children's consumption of energy-dense foods, high in fat and sugars, increase. These changes are often the result of changing societal habits with changing portion sizes, cooking habits and increased availability of fast and convenience food. This is important as most children are not eating the recommended minimum five portions of fruit and vegetables per day and children's consumption of added or processed sugars, including those in fizzy drinks, exceeds the recommended amount (Figure 7<sup>10</sup>).

<sup>10</sup> Hampshire County Council Health and Wellbeing School Survey 2021/22

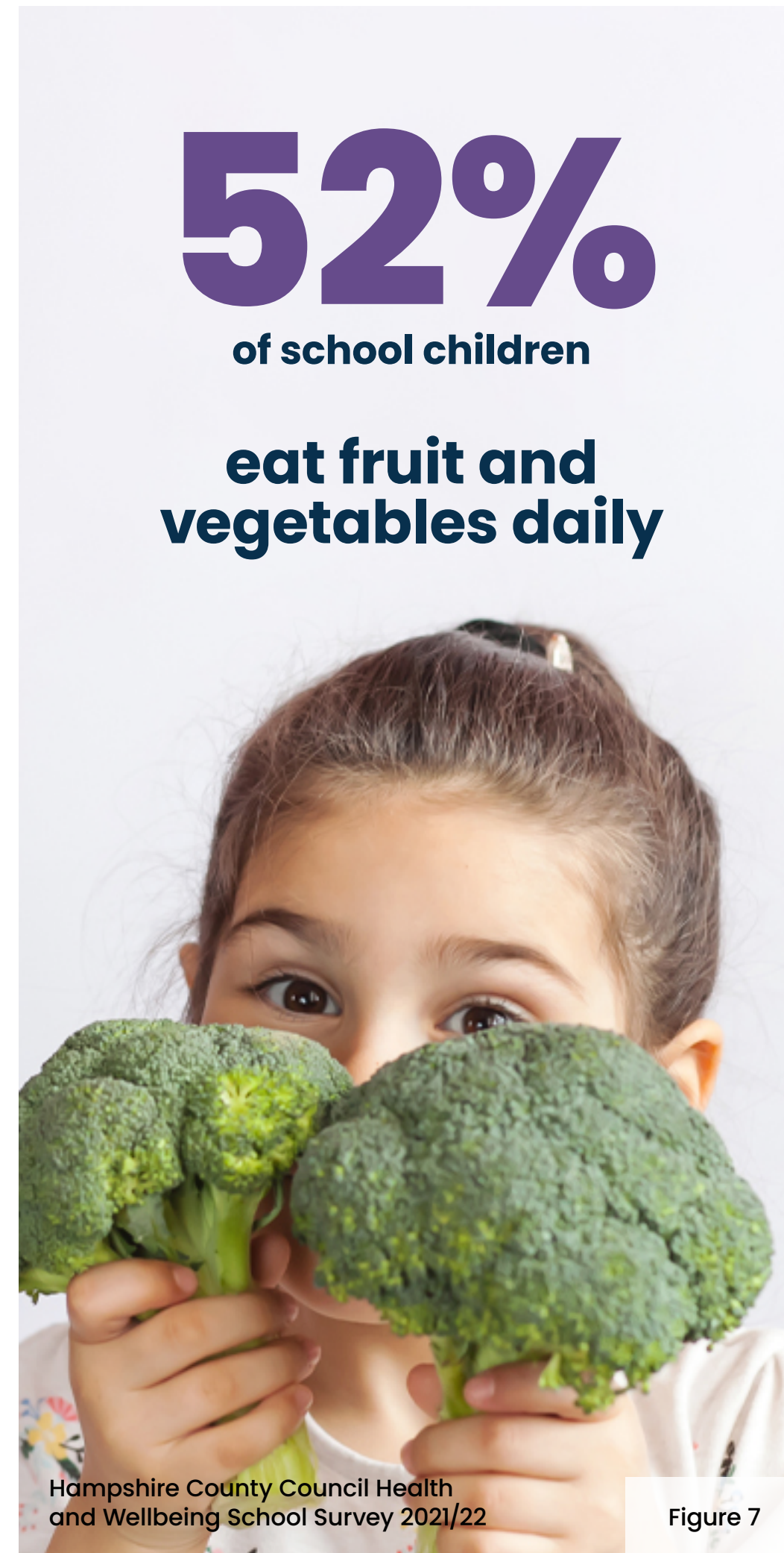


Figure 7

## Food environment

Healthy food choices are important and need focused efforts by the system to make them an easier, desirable and affordable option. Fast food outlets near schools impact children's food consumption as they make their way to and from home. The availability of less healthy foods in mainstream supermarkets, education and leisure environments, as well as restaurants and takeaways, contribute to an 'obesogenic' environment. In more deprived areas there is reduced access to healthier food retail options, and often a greater density of hot food takeaways (Figure 8). The increasing availability of home delivery services also adds to the provision of cheaper and faster meals to our doorstep,

<sup>11</sup> RSPH | Routing out Childhood Obesity

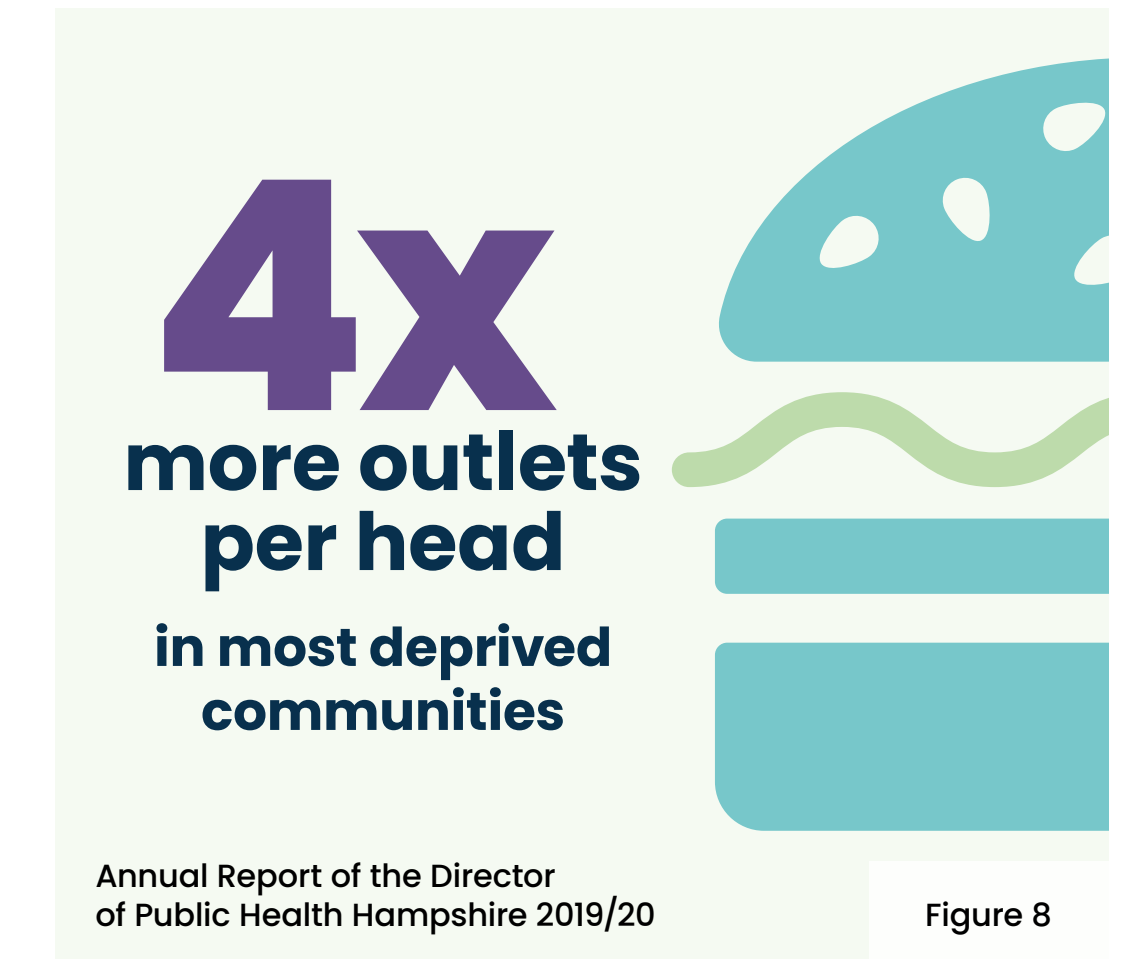


Figure 8

making it easier to consume less healthy foods. This impacts the ability of children, young people and families to make healthy food choices. We need to build on national research which suggests there is public support for restricting the number of takeaway shops within 400m of a primary school in our localities<sup>11</sup>.

## Physical inactivity

The reduction in physical activity is due to more sedentary lifestyles, changing modes of transportation and shifting urban and rural environments<sup>12</sup>. Our environment has changed over time, including how we travel and connect with the places where we live, grow, learn and play.

The Chief Medical Officer guidelines recommend children aged 5-17 undertake 60 minutes per day of moderate to vigorous physical activity. Travel to school by car for 40% of children, means that we need to think of new ways to achieve this recommendation. The proportion of children in Hampshire achieving the recommended 60 minutes

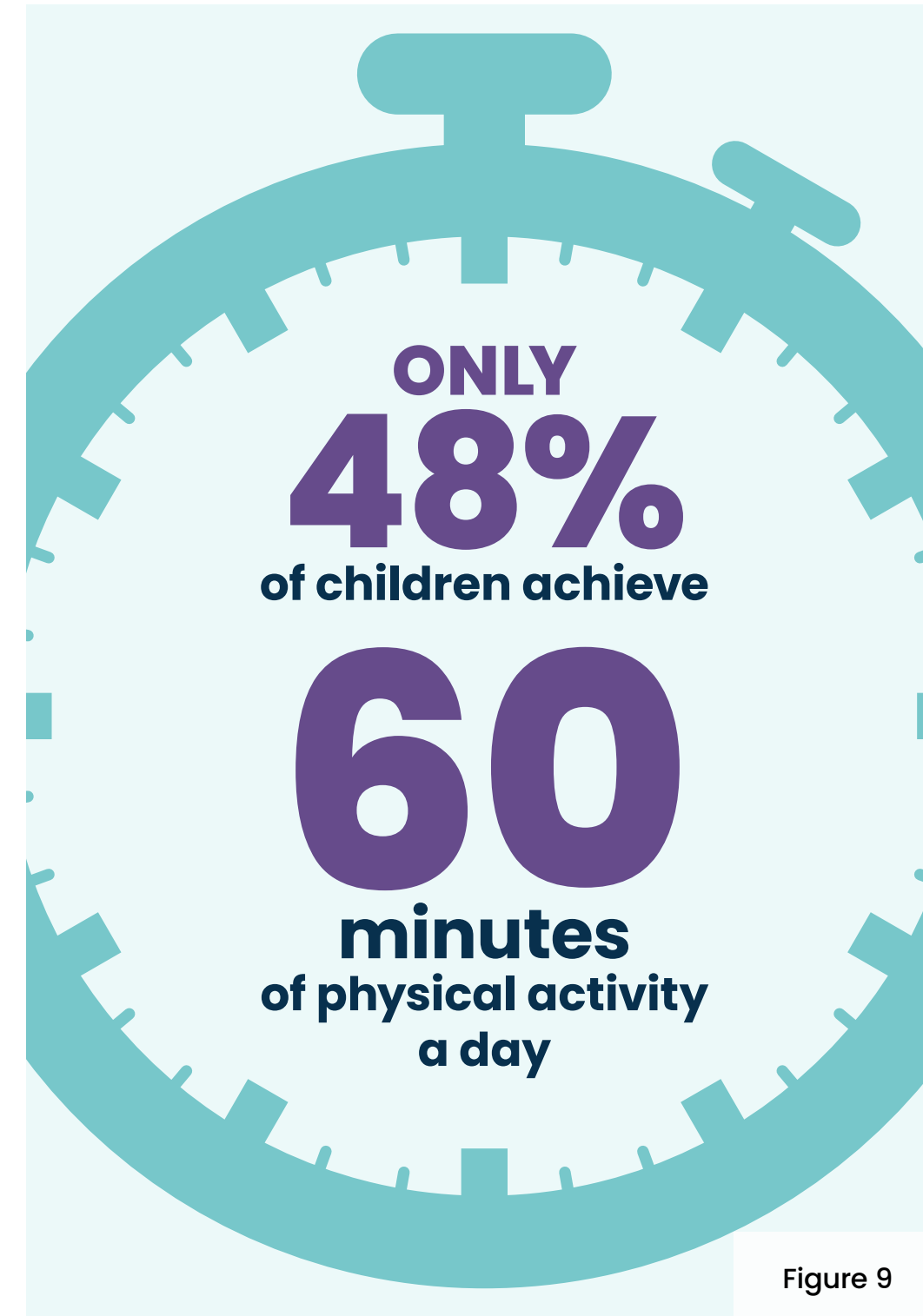


Figure 9

of physical activity per day remains static (Figure 9<sup>13</sup>).



<sup>12</sup> Obesity and overweight (who.int)  
<sup>13</sup> Public health profiles – OHID (phe.org.uk)

## How we can solve this problem

**We need to think of childhood obesity as a complex system problem and manage it as such, as an urgent priority. No single organisation has the knowledge, tools or agency to reduce the prevalence of childhood overweight and obesity<sup>14</sup>.**

Treatment services provided by the NHS for childhood obesity are necessary and vital but will not on their own increase the proportion of children with a healthy weight. Yet reversing rising childhood obesity levels is pivotal to delivery of the Major Conditions Strategy<sup>15</sup>. Adopting a shared understanding, with a common purpose, we can maximise our

collective resources to tackle childhood obesity as a system.

A coordinated and collaborative systems approach is needed to halt and reverse the current increase in overweight and obesity in our population. This places the emphasis on changing and improving the places and systems in which people are born, grow, live and work.

It is difficult, but that must not stop us from trying. There is innovative work already happening to address this challenge, we must now act to broaden and strengthen this to make a difference at a population level. We also

need to move with urgency, as we did to prevent the spread and impact of COVID-19.

This coordinated approach is being taken in some Hampshire districts. We are seeing green shoots of success where stakeholders including The County Council, Borough Council, NHS, voluntary sector, and members of the community are coming together to galvanise local action.

The Hampshire Planning and Public Health Position Statement<sup>16</sup> supports a collaborative response to improving the health and wellbeing of residents, providing a framework for creating

healthy living environments through local plans, developments and planning applications. Some District Councils are using a whole system approach within their planning policies and plans to ensure wellbeing is reflected in their designs and community infrastructure, meeting the current and future needs of their communities.

<sup>14</sup> Public Health England. 2019. [Whole systems approach to obesity. A guide to support local approaches to promoting a healthy weight.](#)

<sup>15</sup> DHSC. 2023. [Major conditions strategy: case for change and our strategic framework](#)

<sup>16</sup> [PublicHealthandPlanninginHampshirePositionStatement.pdf \(hants.gov.uk\)](#)

## Education settings

All education settings, from early years to post-16, influence children and young people's health. It is where they spend much of their time, socialise with peers and adults, build habits, and develop values and attitudes.

Our whole setting approach to healthy weight includes:

- lessons on living healthily
- provision of a nutritious and varied menu with free school meals for some children

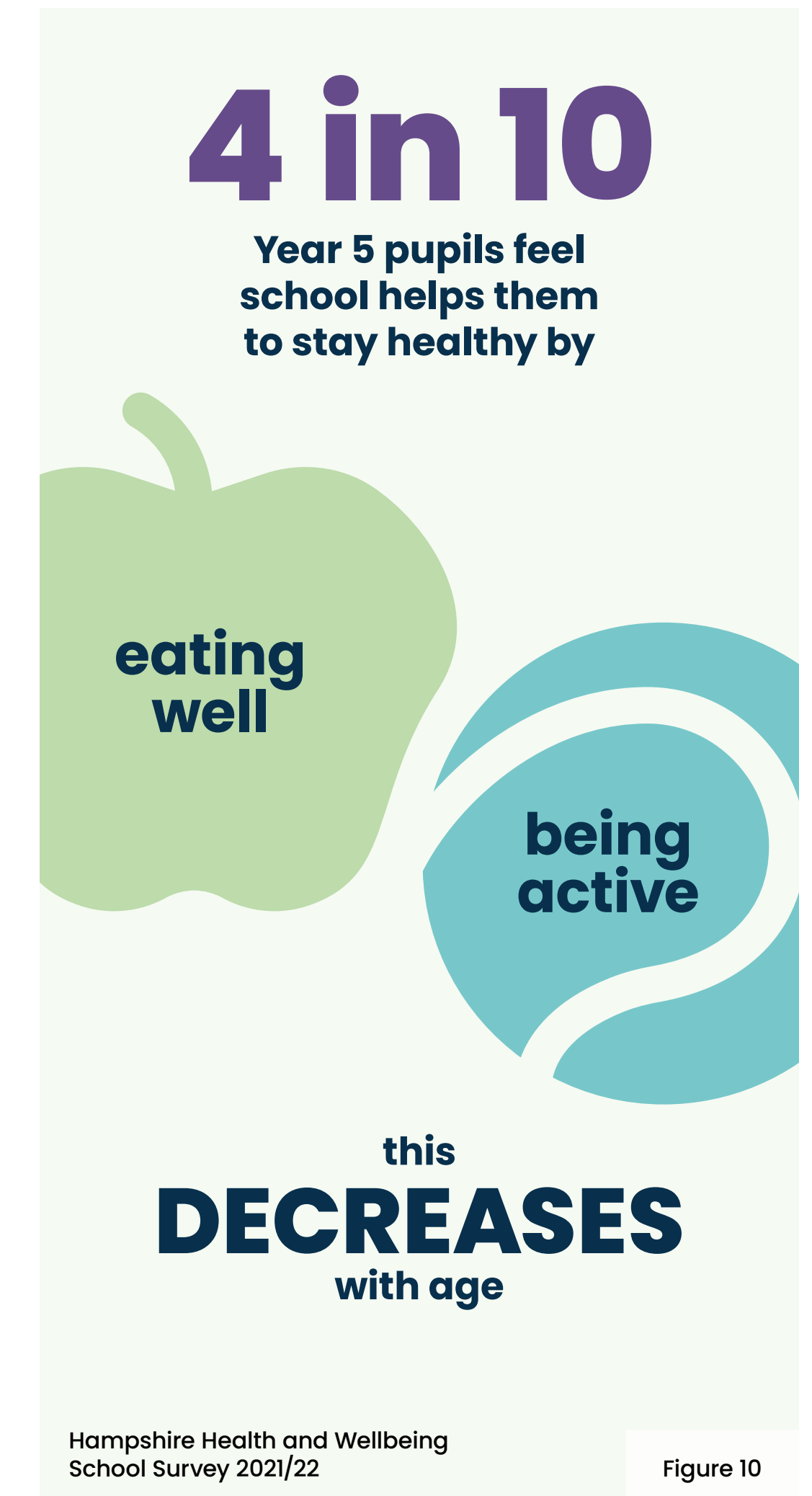
- environments that promote physical activity
- opportunities for families to build active travel into their daily routine

This allows all children to experience and develop positive beliefs and behaviours about eating and exercise that last into adulthood. Our support includes training for all staff, resources, and policy guidance<sup>17</sup>.

The Holiday Activity and Food (HAF) programme provides funded holiday activities for children who are in receipt of free school meals. HAF schemes

provide healthy meals, and many of these community-based providers carry out the Daily Mile at their provisions. Others are specialist sports providers offering a range of sporting activities.

Programmes such as the Golden Mile and the Hampshire School Games delivered by Energise Me in partnership with other organisations are key, alongside the great work of our teachers leading PE lessons. Hampshire County Council has used some COVID-19 recovery funding<sup>18</sup> to boost physical activity in our communities particularly for those populations who are most inactive.



<sup>17</sup> About Us | Health and social care | Hampshire County Council ([hants.gov.uk](https://hants.gov.uk))  
<sup>18</sup> Hampshire Active Health Programme – Energise Me

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## Working together

We must increase our understanding of what works and what is in line with the views of children and families. We are growing local evidence on this, designing, piloting and evaluating interventions for healthy eating, physical activity and family wellbeing. The Hampshire Health and Wellbeing School Survey provides an opportunity for students and school staff to have their voice heard about school life and the impact this has on eating behaviours and physical activity. More research, co-production and evaluation will be required to improve this further.

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## Recommendation

This report sets out the challenge we face with regard to childhood obesity in Hampshire. Some of the work is already happening to address this, but equally there will be consequences if we continue as we are. Therefore, I recommend that everyone recognises and talks about the complexity of childhood overweight and obesity and the urgency with which we must act.

I propose that we develop a Hampshire Healthy Weight approach which we all agree and sign up to, including plans to reduce child obesity.



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