

# Making obesity everybody's business

A whole systems approach  
to obesity

# Foreword

Obesity is considered to be one of the most serious public health challenges of the 21st century. It is having an impact on people's lives now, across the generations, in terms of our quality of life, our risk of developing chronic diseases such as type 2 diabetes and its association with common mental health disorders. Doing nothing is not an option. Without action, the health of individuals will continue to suffer, health inequalities associated with obesity will remain and the economic and social costs will increase to unsustainable levels.

Obesity is a complex problem with a large number of different but often interlinked causes. No single measure is likely to be effective on its own in tackling obesity.

The Government is committed to tackling obesity and is putting a range of levers in place to address the problem, including a soft drinks industry levy and reducing the amount of sugar and calories in foods. However, to have a significant impact on obesity levels, it is clear that everybody needs to get involved.

Local authorities are particularly well placed as the functions they are responsible for serve all generations in society and can directly influence people's health. Despite the will being there to tackle obesity, the current environment of significant financial constraints dictates that, for many local authorities, jobs, local prosperity and statutory services take priority.

However, as obesity can indirectly impact on the employability and productivity of local populations, in addition to the demand for social care, reducing obesity levels can have a positive effect on these priorities.

It is now over four years since councils took on responsibility for public health and health and wellbeing boards took on their statutory role. Councils have welcomed their new role and are now moving into a phase of transformational change. Success will depend on getting health policies embedded in all aspects of what a council and its partners do, or put simply the extent to which councils become genuine public health councils.

This briefing focuses on the Whole Systems Obesity programme, which will provide local authorities with a different approach to tackling obesity. This involves the whole local system of stakeholders, recognising that it is a problem that goes far beyond public health. It makes tackling obesity everybody's business. The programme is exploring the evidence and local practice to develop guidance and tools to help councils set up a whole systems approach to obesity in their local area.

A key lesson that is emerging from the programme is that taking a whole systems approach requires the right mind set across the council. Practitioners at a local level need support to think, adapt and work in a way that enables them to work in a whole systems way. The programme is developing ways to support this.

Having the support of elected members and the chief executive is vital to creating the right mind set and to for the success of this approach. It sends a clear signal that tackling obesity is a priority not just for public health but for the whole council and its wider stakeholders, thereby facilitating cooperation across departments and with local communities and partners.

Taking a systems approach to obesity epitomises 'Health in All Policies', drawing on a local authority's strengths, fitting with its business priorities and recognising that councils can achieve better and more effective results by engaging their community and local assets.

**Councillor Izzi Secombe OBE**

Chairman, Local Government Association  
Community Wellbeing Board

**Dr Alison Tedstone**

Director of Diet and Obesity, Public Health  
England

**Dr Andrew Furber**

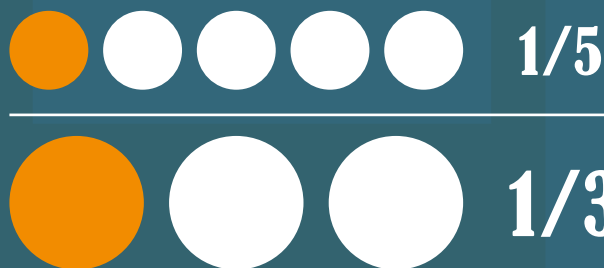
President, Association of Directors  
of Public Health

# Making obesity everybody's business

Over **1/4** of adults in England are obese (**27%**) and an additional **41%** of men and **31%** of women are overweight<sup>1</sup>



**1/5** of children start primary school overweight or obese and this figure increases to **1/3** by the time children leave primary school<sup>2</sup>



Children who are overweight or obese at age **4-5 years** tend to remain so at age **10-11 years**<sup>8</sup>

In 2014-15, the cost of obesity and related ill health to the NHS in England was estimated at **£6.1 billion** per annum<sup>10</sup>



Direct social care costs attributed to obesity are estimated at around **£352 million** per annum<sup>11</sup>

The costs to the wider economy are estimated at **£27 billion** per annum<sup>12</sup>



# Contents

Executive summary	6
The story so far	7
Obesity – why does it matter?	7
Why do we need a new approach?	8
What is the role of central government and local authorities in tackling obesity?	9
A whole system approach	10
What is the whole systems approach to obesity programme?	10
What is a whole systems approach to obesity?	12
A whole systems approach to obesity – the route map	15
What are the benefits of taking a whole systems approach to obesity?	16
Getting started	17
How local authorities can get involved in the programme – the Community of Learning	18
Next steps	18
Local practice examples	19
References	26

# Executive summary

Obesity is a global, national and local concern, which impacts the health, productivity and employability of local populations. Without action, the associated costs – individual, social and economic, including social care – will continue to rise as will the disproportionate burden on children and their families from deprived areas.

Tackling obesity is not straightforward. As Foresight in its ‘Tackling obesities; future choices’ report outlined the causes are multiple, complex and interlinked and reach far beyond public health. Traditional approaches that focus on single interventions do not tend to work at a population level. The value of using systems to understand complex phenomena in public health and health care has been increasingly recognised and such approaches create opportunities for concerted local action to support individuals, families and communities. Everybody has a part to play in tackling obesity but it is clear that a different approach is needed.

The Whole System Obesity (WSO) programme was commissioned by Public Health England in 2015 to develop a practical guide to help councils create a Whole Systems Approach (WSA) in their local area, building on learning from current national and international practice. The guide will take the form of a ‘route map’ – the process of setting up a WSA – with supporting material and tools. The programme places considerable emphasis on creating the right environment for change in the local area, collaborative working across the local system and the dynamic nature of the local system.

The guide is being co-produced and tested with local authorities to ensure that it is relevant and easy to use. It will be available for local authorities to use in early 2019. This elected members briefing is being published at a mid-stage point of the WSO programme in response to emerging learning, which has indicated that a fundamental shift in mind set is needed for the approach to become embedded in the council. Having the support of elected member and the chief executive is vital to achieve this. The programme is developing material to support this shift in mind set.

There are many benefits to integrating a WSA into the council including:

- **Supports the council’s key priorities** – tackling obesity can improve workforce health, contributing to a stronger local economy, and help reduce social care costs.
- **Develops a coordinated set of approaches** – recognises that tackling a single cause of obesity in isolation is unlikely to be effective and that a coordinated range of activities over the short, medium and long term will produce greater results.
- **Reflects the local leadership role of local authorities** – working with and through an extensive range of stakeholders, including communities.
- **Develops transferrable workforce skills and capacity relating to systems thinking** – relevant to other complex issues.

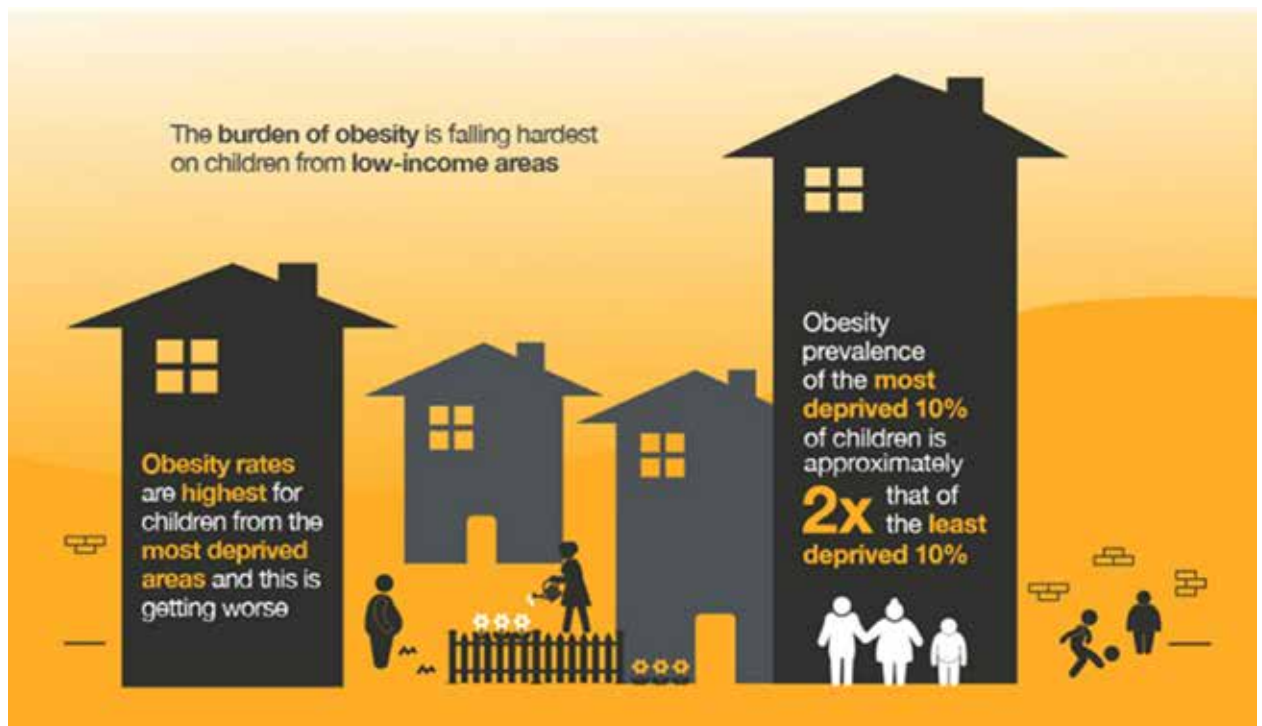
# The story so far

## Obesity – why does it matter?

Obesity is a global, national and local concern.

Being overweight or obese is the norm for adults in England, with over a quarter of adults obese (27 per cent) and an additional 41 per cent of men and 31 per cent of women overweight<sup>1</sup>. Rates are also high in children; a fifth start primary school overweight or obese and this figure increases to a third by the time children leave primary school.<sup>2</sup>

Although many children in affluent areas are overweight or obese, there are stark inequalities in levels of child obesity, with prevalence among children in the most deprived areas being double that of those children in the least deprived areas.<sup>2</sup> This situation is getting worse.



Being overweight seriously affects people's quality of life and their health. It increases the risk of heart disease, stroke, type 2 diabetes, non-alcoholic fatty liver disease and some cancers in adults<sup>3,4,5</sup>; it is also associated with bullying in children and stigma in both adults and children<sup>6,7</sup> and is associated with common mental health disorders. Children who are overweight or obese at age four to five years tend to remain so at age 10 to 11 years<sup>8</sup> and are more likely to enter adulthood being overweight or obese, which puts them at increased risk of experiencing those chronic diseases outlined above. Children who live in a home with at least one parent or carer who is obese are more at risk of becoming obese themselves.<sup>9</sup>



The financial burden of obesity is also significant. In 2014/15, the cost of obesity and related ill health to the NHS in England was estimated at £6.1 billion per annum.<sup>10</sup> Obesity also impacts local authorities' social care budgets: direct costs attributed to obesity are estimated at around £352 million per annum.<sup>11</sup> Conditions linked to obesity, such as type 2 diabetes, although not yet systematically quantified, are likely to impose a significant additional social care burden. The costs to the wider economy are even greater, estimated at £27 billion per annum.<sup>12</sup>



## Why do we need a new approach?

Tackling obesity is not straightforward. So far no country has been successful in reversing obesity trends and evidence for the effectiveness of individual measures to tackle obesity, at a population level, is limited. A different approach to tackling obesity is needed.

This point was made in the 2007 Foresight report *Tackling Obesities – Future Choices*<sup>12</sup> (figure 1), which underlined that there is no single solution to tackle obesity and a broad range of actions involving stakeholders from across the system is needed. Such an approach recognises that obesity is a complex and dynamic problem, where traditional approaches that focus on single interventions do not tend to work.

In 2013, Public Health England (PHE) and the Association of Directors of Public Health (ADPH) conducted a directors of public health survey<sup>13</sup>, which identified that support on shaping a local whole systems approach to obesity was a key priority.

The WSO programme was commissioned by PHE as a direct response to the findings of this survey.<sup>14</sup> The programme is building on the foundations articulated in the Foresight obesity report and research commissioned by the National Institute for Health and Clinical Excellence (NICE)<sup>15</sup>. It also directly addresses the recommendations made in the national evaluation of the Healthy Communities Challenge Fund<sup>a</sup>, that guidance needs to be developed to inform local practice on what is involved in taking a systems approach.<sup>16,17</sup>

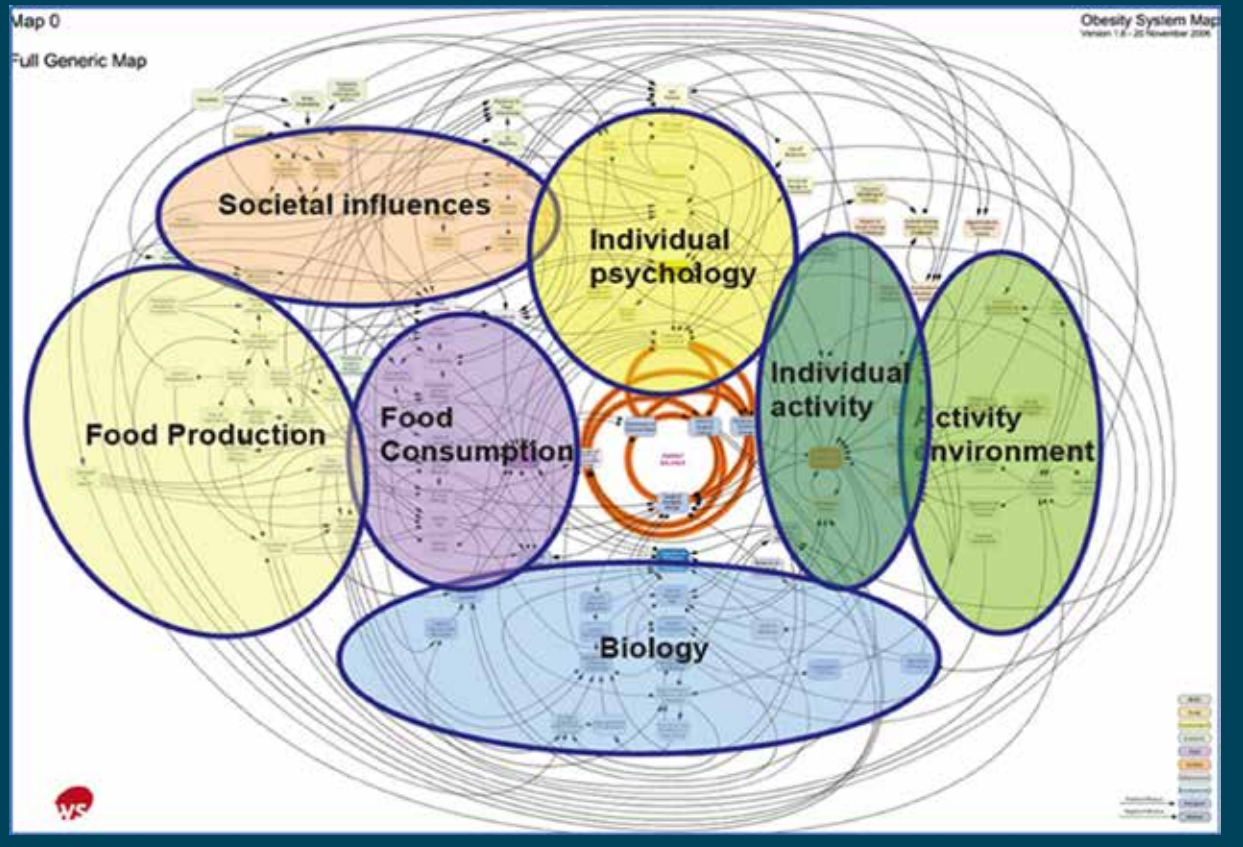
a Also called the Healthy Towns Programme, this was a three year programme (2009-11) to stimulate a whole towns approach to address the environmental determinants of obesity. The fund provided £30 million to nine pilot towns in England.



## Figure 1: The Foresight obesity report

In 2007, the government-commissioned Foresight report *Tackling Obesities – Future Choices*<sup>9</sup> was published, which examined how society might deliver a sustainable response to obesity in the UK over the next 40 years. Foresight reframed obesity as a societal and economic issue and not just about individual willpower and choice.

An integral part of the Foresight programme was the construction of an obesity systems map (see below) which illustrated that the causes of obesity are complex and interlinked with many different contributing drivers that go far beyond eating habits and activity levels.



## What is the role of central government and local authorities in tackling obesity?

The Government's commitment to reducing obesity, in particular to protect children, is clear. In 2016 'Childhood obesity – a plan for action'<sup>18</sup> was published, which aims to significantly reduce childhood obesity over the next 10 years. Introducing a comprehensive set of measures, the childhood obesity plan underlines that everybody has a role to play in tackling obesity: Government, local authorities, the

NHS but also the food industry, schools and local communities.

PHE has a key role in the delivery of the childhood obesity plan in line with its priority to reduce childhood obesity. PHE's obesity priorities reflect the life course approach and include reducing the levels of excess weight in adults.

Since 2013, local authorities have been responsible for improving the health of their local populations supported by a ring-fenced public health grant and a public health team.<sup>19</sup> PHE has a key role in providing ongoing support to these local public health teams to tackle obesity.

# A whole system approach

## What is the whole systems approach to obesity programme?

PHE, in partnership with the Local Government Association (LGA) and the ADPH, commissioned Leeds Beckett University (LBU) to deliver this three year 'action research' programme, which launched in October 2015.

The purpose of the programme is to test theory and local practice about systems approaches and translate the learning into practical guidance to help councils set up a WSA in their local area. To do this, the programme is co-producing and testing a process (termed 'the route map') and a set of tools on how to set up a WSA, with local authorities including four pilots. This work is also drawing on a systematic review undertaken as part of the programme, published research and learning from other countries and sectors. The final route map will be launched in Spring 2019.

The first year of the programme focused on laying the groundwork for putting a whole systems approach in place, including gaining an understanding of local strategic priorities into which the obesity programme would need to fit; and understanding what works well across the council and why. Pilots have participated in workshops with stakeholders from across and outside the council to collectively identify the causes of obesity in their local area and what approaches might be employed to address them.

A key objective of the programme is to identify synergies and win-wins across local authority departments. For example, limiting the number of unhealthy food outlets in a local area could result in less littering, in addition to meeting the core objective of delivering healthier food environments.

At the same time, by working collaboratively to develop a range of actions across departments, negative unintended consequences of individual actions are more likely to be anticipated and avoided. For example, if increasing activity levels in adults and children is a priority and leads to increased use of leisure centres, the outcome could be undermined if no parallel action is taken to encourage healthier catering and vending within these facilities.

## Durham County Council

### A whole systems approach to obesity pilot

“Durham County Council, supported by many partners, are working hard to tackle obesity, and are keen to improve our approach – particularly where we can learn from others’ experiences and bring the best of the learning to County Durham.

Our work so far makes it clear that unhealthy weight impacts on every aspect of the work of the council and our stakeholders – on the environment, on local business, on how people use our public spaces, on individuals, their families and their communities.

We know that the best solutions come from bringing together the experience and knowledge of all those who can contribute, both in influencing the wider environment and in working with our communities who are at risk from being overweight and/or obesity. We are eager to continue to develop our approach and improve our ‘system’ and help to tackle obesity in County Durham.”

**Councillor Lucy Hovvels**, Cabinet Member for Adults and Health Services and Chair of Durham County Health and Wellbeing Board

Durham County Council were keen to get involved in the programme as they wanted to explore how they could have a greater impact on obesity, in the context of existing or diminishing resources, by working differently. Understanding that this requires work on the relationships and connections between people, teams, organisations and communities – participation in a national pilot, and the involvement of independent academic experts, could help to get the local system together.

What’s been achieved in the first year:

- Auditing activity from the council’s healthy weight alliance highlighted the variety of quality work that occurs locally, which may indicate that volume alone is not sufficient to impact obesity prevalence.
- Systems thinking and obesity has been presented and discussed at all levels through the authority.
- There is real enthusiasm to find approaches today that can make a difference, and the challenge is to be strategic and develop long term approaches, not time limited interventions.

Throughout the process of developing the route map, views from a wider group of stakeholders from the public, private, academic and voluntary sectors are being used.

The programme will also explore how to engage a council’s non-public health departments. Learning from councils who are already working towards systems approaches will inform and provide valuable evidence.

This will be underpinned by a resource being developed by PHE to support local authority departments to take actions to promote healthy weight in children, young people and families.

There are many opportunities for local authorities to engage with the programme throughout – see ‘How local authorities can get involved in the programme – the Community of Learning’ (p18).

## Gloucestershire County Council

### A whole systems approach to obesity pilot

“Addressing obesity is a key priority for health and wellbeing partners in Gloucestershire and an important part of our plans to reduce health inequalities. We have welcomed the opportunity to work with Leeds Beckett University and other local authorities on how to best direct our collective resources to tackle this ‘wicked issue.’”

**Sarah Scott**, Director of Public Health, Gloucestershire County Council

“We have a strong history of partnership working on obesity in Gloucestershire but obesity levels remain a real concern. We are keen to share what we’ve learned and to learn from other areas to help refine our approach.”

**Councillor Tim Harman**, Cabinet Member for Public Health and Communities

The programme provides an opportunity for Gloucestershire to build on the learning and relationships developed through Local Vision systems leadership programme.

What’s been achieved in the first year:

- Healthy weight programme board established, chaired by the accountable officer of NHS Gloucestershire Clinical Commissioning Group.
- A healthy weight needs assessment has been completed and this, alongside a multiagency stakeholder workshop (December 2016), has informed the development of our Healthy Weight Delivery Plan.
- Transformation approach (quality improvement methodology) applied to improving health and wellbeing outcomes for people with weight issues.

- Conversations with different parts of the system, not previously engaged in the obesity agenda eg planning and infrastructure.

## What is a whole systems approach to obesity?

One of the aims of the programme is to develop a clear and practical definition that is relevant to local authorities.

A systems approach to obesity moves away from silo working on isolated short term interventions to working with stakeholders across the whole system to identify, align and review a range of actions to tackle obesity in the short, medium and long term.

At present, our understanding is that a whole systems approach includes the following key elements:

- Collaborative approach – brings stakeholders together from a broad range of functions to jointly develop and take ownership of the programme. For the purposes of the current programme, we are focusing on the local system – stakeholders within and outside the council. Table 1 provides a list of potential stakeholders to involve in a WSA.
- A cross-sector range of actions – this involves identifying areas of activity where a council can take action (for example the workplace, the local food environment and built and green environment) and creating a range of short, medium and long term actions around these areas. Recognising the current financial and resource constraints, councils are encouraged to focus on those areas of activity where they are likely to have the greatest impact.
- Using systems thinking to be dynamic and flexible – the range of actions should be aligned, monitored, reviewed and adjusted on a regular basis to: assess their effectiveness against agreed goals; incorporate any new learning; address changes in the needs of the local population or resource-base etc.

**Table 1: Potential WSA stakeholders**

**Inside the council:**

- obesity or healthy weight steering or working group
- sub-groups dealing with obesity, nutrition and physical activity
- health and wellbeing board
- planning
- highways and transportation
- housing
- environmental health
- schools
- leisure and parks service
- regeneration and growth
- community engagement and customer services
- adult social services
- children's services including early years
- education and training
- sustainability
- community safety.

**Outside the council:**

- clinical commissioning group
- NHS trusts, private and voluntary sector providers
- local community groups
- faith organisations
- local enterprise partnerships
- local businesses
- police
- fire service
- health watch
- local business bodies including Chambers of Commerce.



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## North Kesteven District Council

### A whole systems approach to obesity pilot

“We have been proud to work on this whole system approach pilot to tackle obesity. Alongside our partners we are working hard to improve the health and wellbeing across the district, and being part of this study will undoubtedly help to improve this further.”

**Councillor Richard Wright**, Leader of North Kesteven District Council

“The opportunity to participate in such an innovative project was a privilege, through which North Kesteven District Council could develop an influential and lasting legacy of change.”

**Ian Fytche**, Chief Executive

The initiative sits alongside North Kesteven District Council’s (NKDC) Sports and Physical Activity Strategy which launched in 2016, with a key priority of reducing obesity in the local area. NKDC values healthy challenge and a critical friend approach to its work and sees the programme as an opportunity to further improve its role in enabling the health and wellbeing agenda.

What’s been achieved in the first year:

- Obesity workshops run through the programme with different council stakeholders have been replicated by NKDC with other targeted groups of stakeholders.
- Plan to focus on performance and evaluation framework for monitoring initiatives and programmes following evaluation through the programme.
- Areas of strength and areas for improvement have been clearly defined.

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## London Borough of Lewisham

### A whole systems approach to obesity pilot

“We want all our residents to live healthy and happy lives for as long as possible and for our children to grow up healthy. Our strong partnership across the health services, local businesses, schools and community organisations is ensuring residents have the right support, information and opportunities that will empower them to make the right choices to ensure they lead healthier lifestyles.”

**Sir Steve Bullock**, Mayor of Lewisham

Lewisham Council recognises that bringing about a significant shift in population-level obesity can only be achieved by involving and engaging all partners across society. Participating in the programme enabled the council to build on its commitment to early intervention, prevention and its community development approach to improving the health and wellbeing of its residents. The council wanted to explore how to maximise the impact of the actions it was already taking, and learn how to make more effective use of all the levers that it could employ for a better coordinated ‘whole systems’ approach to modifying the obesogenic environment.

What’s been achieved in the first year:

- Obesity project board with members including the cabinet member for children and young people, senior representation from three council executive directorates and the Lewisham clinical commissioning group.
- Launched Lewisham obesity alliance in November 2016 at an interactive stakeholder event co-facilitated by Leeds Beckett University.
- Annual Public Health Report for Lewisham focused on a whole systems approach to obesity.

- Whole systems action plan developed following a childhood obesity sector-led improvement self-assessment and feedback from WSO programme team.
- Actions include Sugar Smart Lewisham, the Lewisham Daily Mile and the use of Lewisham parks.

## A whole systems approach to obesity – the route map

The WSO programme is producing a process, termed the route map (figure 1), to help councils set up a WSA in their local area. The key stages are described below.

### Pre-systems – creating the environment for change

This preparation element involves building an understanding of the context of obesity in the local area and its impact on economic prosperity and wellbeing. Key actions include securing senior leadership commitment; collecting and analysing relevant data and information to support the programme; and developing relationships with key stakeholders across the council and wider community.

### Understanding local causes and linkages

Once preparation has been undertaken, partners from different local government functions and stakeholders from the wider community come together to collectively map out the causes of obesity and actions that are currently being undertaken to tackle obesity in the local area. Part of this exercise involves recognising the links between obesity and different policy areas, for example, an abundance of fast food outlets near schools (planning)<sup>20</sup>, limited safe green space (leisure and parks), limited options for active travel (transport) etc.

### Identifying opportunities to disrupt the system

'Disrupting the system' involves partners collectively identifying the most likely and productive areas of activity in the local system where a council and its partners can take action. Common areas of activity that have emerged through the programme are included in Table 2. Councils should identify the areas of activity that are relevant to their own local environment.

Considerations behind the prioritisation of areas of activity are likely to vary between councils but may relate to relevant resources and relationships, the extent of existing activities and the strength of the evidence base.

A systems approach to obesity moves away from silo working on isolated short term interventions to working with stakeholders across the whole system to identify, align and review a range of actions to tackle obesity in the short, medium and long term.

Identifying areas of activity will be supported by the resource currently being developed by PHE to support departments to take actions to promote healthy weight in children, young people and families.

### Table 2: Common areas of obesity activity identified by WSO pilots

- planning a healthier food environment
- the school and childcare setting
- increasing healthy food consumption
- planning and creating an environment that promotes activity including active transport
- providing access to weight management support<sup>21</sup>
- creating healthy workplaces
- educating people about the benefits of healthy eating and exercise and promoting opportunities in the local community.



## Building and aligning actions around key points

This element involves collectively identifying and developing actions around the prioritised areas of activity. For example, if increasing healthy food consumption is a priority area of activity, actions could include incentivising local fast food outlets to provide a healthier food offering<sup>22,23</sup>; tighter planning around fast food outlets<sup>24</sup>, encouraging implementation of government buying standards for food and catering services across the wider public sector<sup>25</sup> and catering guidance available to support this<sup>26</sup>; working with schools to promote healthier school food approaches.

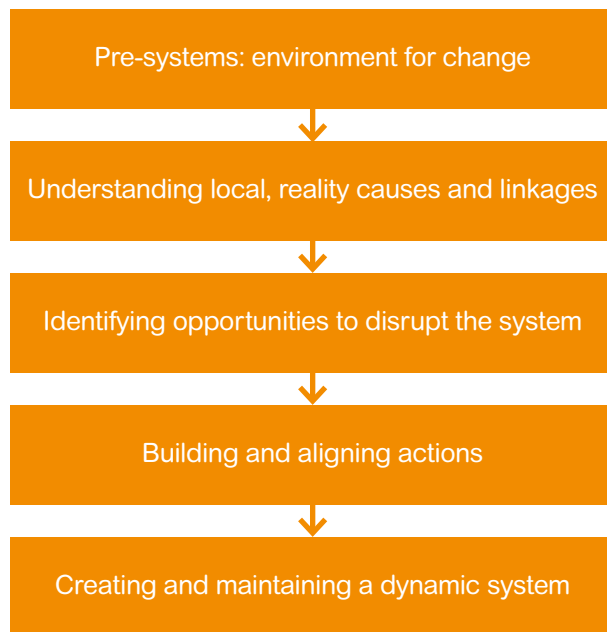
A coordinated approach across sectors and organisations is essential to ensure that action in one area is not undermined by lack of action in another. It is also important to have an overview of all council policies, programmes and activities that can potentially impact on obesity.

For example council owned billboard advertising or sponsorship deals that generate revenue but promote unhealthy eating or strategies to promote road safety such as 20 mph speed limits in urban zones which may also increase the number of children walking to school.

## Systems working to create and maintain a dynamic system

It is essential that the approach uses systems thinking – how the system as a whole works together, so that actions and efforts are aligned, and action plans remain flexible to accommodate changes in the local system, that may impact on the effectiveness of actions. For example, financial resources related to a particular area of activity may be reduced, resulting in reduced capacity to implement actions in that area or there may be a shift in the needs of the local population, resulting in a change in the actions required. Stakeholders should meet regularly to discuss their progress towards the agreed goals and adjust activities where necessary.

**Figure 2: The draft route map: key elements involved in taking a WSA**



## What are the benefits of taking a whole systems approach to obesity?

Taking a WSA has a number of important benefits, which directly address some of the challenges identified by local authorities to tackling obesity:

- Aligns with a health in all policies approach<sup>27</sup> – recognises the range and complexity of the causes of obesity.
- Supports the council's key priorities – for instance, tackling obesity can improve workforce health, contributing to a stronger local economy, and help reduce social care costs.
- Ensures partners across the system work together - moves from departments working in silo to an approach engaging a wider range of stakeholders, focused around agreed goals.
- Maximises all the assets in the local system, including community resources – bringing in valuable insights and creating additional resource.
- Develops a coordinated set of approaches – recognises that tackling a single cause of obesity in isolation is unlikely to be effective

and that a coordinated range of activities over the short, medium and long term will produce greater results.

- Reflects the local leadership role of local authorities – working with and through an extensive range of stakeholders, including communities.
- Develops transferable workforce skills and capacity relating to ‘systems thinking’ – relevant for other complex issues.

**“We have built a culture where being healthy is not the default option for many. Only acting as a system will turn it round. And it will take phases of work across time, and work at different levels. If focusing on individuals really worked then well, why are we still in this mess?”**

**Professor Jim McManus**

Director of Public Health, Hertfordshire

## Getting started

A WSA requires commitment to create the right environment for change. The programme recommends the following key steps to start the process:

### **Communicate your commitment to systems approaches**

As a first step, it is crucial to communicate your commitment to taking a WSA and socialise your vision throughout the organisation and local community. As people become more aware of the approach, it will be easier to develop partnerships across departments and with other stakeholders.

Taking a WSA requires a fundamental shift in mind set. It should be communicated as a framework for how people carry out their day to day jobs and interact with others in the wider system, rather than an extra programme to implement. People need to be supported and encouraged to work and think differently.

### **Articulate the benefits**

Communicate clearly to stakeholders what is meant by a WSA to obesity and what the benefits are likely to be, both for the organisation and for their sector. Make sure the debate is grounded firmly in the priorities of the local area.

### **Engage stakeholders**

Identify local stakeholders and their interest in tackling obesity and, if not already active participants, work out how to engage them. This may involve addressing some of the attitudes and perceptions people may have about obesity and enabling stakeholders to see for themselves why and how obesity is relevant to them. Stakeholders need to commit to ongoing involvement in the programme.

### **Understanding the local picture**

Identify what actions are underway to tackle obesity and what their impact has been. Gather information and insights about the consequences of obesity in the local area in terms of how individuals, communities and the economy are affected. Understand what resources and levers are available locally, including community assets.<sup>26</sup> Identify the strengths of the local system. These can then be shared with stakeholders involved in the process.

## How local authorities can get involved in the programme – the Community of Learning

We want to engage with all local authorities who have an interest in the programme.

The Community of Learning is an integral part of the programme through which LBU:

- Provides updates from the pilot local authorities and other sources.
- Seeks opinions on elements of the approach that are in development – including route map tools.
- Shares progress on development and publication of tools to support the different elements of the route map.
- Informs members about upcoming events and opportunities – including webinars and conferences.

The Community of Learning is made up of a broad range of stakeholders with a collective interest in taking a WSA to obesity in their local area including local authorities, community partners, academics and private sector organisations.

Sign up to the Community of Learning through the following link:

[www.leedsbeckett.ac.uk/wholesystemsobesity/register-your-interest/](http://www.leedsbeckett.ac.uk/wholesystemsobesity/register-your-interest/)

### Resources

For further information on the WSO programme, including how to sign up to the Community of Learning, please visit the Leeds Beckett website:

[www.leedsbeckett.ac.uk/wholesystemsobesity/](http://www.leedsbeckett.ac.uk/wholesystemsobesity/)

## Next steps

The WSO programme is scheduled to complete in early 2019 and between now and then there are a number of important milestones, which include:

- Continued co-production and testing of the route map and tools, including running through the whole process with a small number of local authorities including City of Bradford Metropolitan District Council, Dudley Metropolitan Borough Council, Hertfordshire County Council, Solihull Metropolitan Borough Council and Halton Borough Council.
- Publication of a paper on the systematic review.
- Continued work with partners on how to support local authorities in shifting the 'mindset' and how to work and think differently.
- Development of making the case material for obesity across all policies.
- Finalised definition of what a WSA to obesity means in practice.
- Publication of the final route map and tools in early 2018 accompanied by process and impact evaluation reports.
- Publication of a resource to support local authority departments to take actions to promote healthy weight in children, young people and families in early 2018.

# Local practice examples

In addition to the programme's 'pilots', a number of other local authorities across England are in the process of putting in place systems approaches to tackle obesity in their local communities. Although most of these councils are still in the preparation phase or the early stage of implementation of the approach, there is already invaluable learning to share with other local authorities interested in taking a WSA.

Most of these approaches were initiated before the launch of the WSO programme and therefore do not follow an identical approach to the one being developed through this programme. This provides a valuable opportunity to compare the different approaches and use the learning to inform the development of the WSO programme. Some councils who have provided practice examples have attended WSO programme workshops or other events.

# North Somerset Council: Whole system healthy weight programme

Lessons for success:

- Allocate time and resources to planning and delivering the programme.
- Set realistic timelines for achieving reductions in obesity – benchmark against other complex public health issues such as smoking and teenage conception rates.
- Allow time to build relationships with other partners both within and outside the council and demonstrate commitment to understanding their business priorities.
- Recognise that a systems approach requires a new way of working for most people and it may take time and perseverance to get people on board.

“Obesity is a complex problem that doesn’t have a quick and simple solution, with action being required from across the council and its partners. The People and Communities Board has adopted a whole system approach to healthy weight as part of their new strategy.

The whole system healthy weight programme is an ongoing process that will be delivered over the longer term, with new developments being incorporated and the reach extended as opportunities arise and as the programme evolves.”

**Natalie Field**

Director of Public Health, North Somerset Council

The programme aims to reduce rates of overweight and obesity, in addition to health inequalities, in the local population. A strategic action plan on childhood obesity has been developed as a first step and the programme will extend this into a whole systems healthy weight programme that covers the full life course.

As a starting point, the programme is using the Foresight systems map to help map out the causes of obesity that can be influenced at a local level. The local system of stakeholders is being aligned to domains or subsystems, with the process being used to identify where appropriate actions can be delivered. A whole systems stakeholder event is being planned for 2018 to further explore, collectively, these causes of obesity and to develop a joint action plan.

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# Medway Unitary Authority: A whole systems approach to tackling obesity

Lessons for success:

- Identify a champion' in the council, who is best placed to lead and own the programme and drive the agenda forward.
- Consider how existing community assets can form part of the programme.
- Prioritise actions that will generate the quickest wins or largest long-term gains.
- Celebrate success – this is essential to keep stakeholders engaged and motivated.

“Medway Council are committed to tackling obesity and we play an active role in this important health and wellbeing agenda. In addition to the wide range of services we provide and commission, we co-ordinate a local network of private, public, voluntary and academic partners. This network is essential as we know it will take a wide range of actions from a number of partners to achieve success. We understand that this is a long term ambition and a challenge that will not be solved over night, but we are committed to playing an active role in the solution and taking a system leadership role to galvanise the support of all local partners.”

## **Councillor David Brake**

Portfolio Holder for Adult Services and Public Health and Chair of Medway Health and Wellbeing Board

Medway's vision is to “support all Medway residents to adopt healthier lifestyles, allowing everyone the opportunity to achieve a healthy weight.”

A WSA to obesity was initiated in Medway in 2014 following an obesity summit hosted by the chair of the health and wellbeing board and attended by a wide group of stakeholders.

The local healthy weight network – which comprises stakeholders from the public, private and voluntary sectors – lies at the heart of the programme. The network holds an annual healthy weight summit which brings together all key stakeholders to identify new opportunities, agree priorities for the following year and celebrate success.

The programme uses an ‘obesity intervention directory’ which was developed after the first obesity summit. This provides an overview of all ongoing activities mapped against obesity drivers. The approach is dynamic. Funded activities are reviewed annually against output metrics, including uptake, adherence and change in behaviour and a decision is made whether they will be continued, refreshed or stopped. A challenge of the approach is to understand the combined impact of the totality of interventions rather than just the impact of individual activities.

Medway have an ongoing collaboration with the University of Kent, Centre for Health Studies and are in discussion about the best way to evaluate the approach.

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# London Royal Borough of Kensington and Chelsea: Go Golborne

Children enjoying a community event to launch the Unplug and Play physical activity campaign.

Lessons for success:

- Secure support from leaders within the council.
- Take time to plan and prepare the approach based on evidence.
- Develop stakeholder relationships and involve them in identifying and mapping the causes of obesity and developing action plans.
- Be flexible – continually monitor what is and isn't working and adapt the programme accordingly.
- Use simple and accessible language for communications to the public.

**“The Go Golborne initiative is providing us with a valuable framework to better understand how the risk factors for childhood obesity play out at a local level, so that we can take action right across the local environment. It is motivating departments across the council to work together to find joint solutions in partnership with the local community.”**

## **Councillor Mary Weale**

Cabinet Member for Adult Social Care and Public Health, London Royal Borough of Kensington and Chelsea

Go Golborne is a three year programme, which aims to reduce childhood obesity in the ward of Golborne by increasing healthy lifestyle behaviours in children aged four to 16 years.

Golborne has been targeted due to its higher rates of childhood obesity relative to some other parts of the borough.

The programme recognised the need for a community assets-based approach. Developing this involved detailed preparation and an extensive planning phase that included programme conceptualisation, stakeholder engagement, setting behavioural change objectives and identifying core programme components. This phase also included defining the system that could be influenced at a local level and mapping out the interconnections between different stakeholders within this system.

The programme frames the issue of childhood obesity as ‘everyone’s business’ and considerable emphasis has been placed on building relationships with stakeholders both within the community and within the council. Community stakeholders have been directly involved in both identifying barriers and opportunities to promote healthy lifestyles, and in the formulation of behaviour change objectives and core programme components. Non-public health council departments are also playing their role in the programme. For example, the environmental health team has been prioritising fast food outlets in the Golborne area for healthier catering awards.

The programme has a significant evaluation component, which includes surveys with partner organisations, children and parents in addition to an extended National Child Measurement Programme across all participating primary schools.

The pilot phase of the programme runs until 2019.

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# Essex County Council and Braintree District Council: Livewell Child

Lessons for success:

- Allow time to research and plan the programme – the planning phase of Livewell Child was over one year.
- Ensure the purpose of the programme is clearly articulated to stakeholders and you provide them with ongoing support – this will increase long-term stakeholder commitment.
- The support of the council's communications team is vital for the widespread promotion of the programme.
- This is an action research programme – don't be afraid to try new things.

“Addressing childhood obesity is a challenge. The available evidence suggests the best option is a whole system approach based on the EPODE<sup>28</sup> model. Our Livewell Child programme utilises this approach with focus on partnership working and I believe is our best chance of impacting on the issue.”

**Dr Mike Gogarty**

Director of Public Health, Essex County Council

“We are working on a coordinated approach with schools, families and local businesses to ensure a complete network of support for children. Braintree District Council has a commitment to Livewell Child to ensure we build strong and healthy communities for residents today and for future generations.”

**Councillor Butland**

Leader of Braintree District Council

The Livewell Child programme aims to stop the rise in childhood obesity in primary school aged children in the District of Braintree. This three year pilot programme, which started in January 2017, is a collaboration between Braintree District Council and Essex County Council. The programme is fully supported by leaders and senior corporate management in both councils. The programme places the school community at the heart of the system and the domains of influence have been mapped around this.

A key element of the preparation phase involved engagement events with parents, businesses and other community stakeholders to gain a greater understanding of the barriers and enablers that exist for families, schools and the wider community around obesity, healthy eating and exercise. This stakeholder feedback shaped the projects that are being undertaken in the first year.

The programme is dynamic and uses a ‘feedback learning loop’ model to ensure that that lessons from the first year help optimise activities in later years. This approach also enables the programme to address the changing needs of the local communities and incorporate new evidence-based research into future work streams.

Both qualitative and quantitative evaluations have been commissioned for the project. The quantitative element involves an extended National Child Measurement Programme (NCMP) programme in participating schools. Qualitative evaluation involves a range of initiatives; school case studies, theory of change workshops, focus groups, interviews and public engagement activities.

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# London Borough of Haringey: Obesity Whole Systems Delivery Plan

Lessons for success:

- Embed strong leadership from the outset.
- Dedicated resource to build and maintain partnerships.
- Make the case for why obesity needs to be addressed through an engagement event with key speakers and relevant stakeholders.

**“We know we have a lot of work to do to deliver this vision. But given the spirit of our Haringey Obesity Alliance members, I’m confident that the collective will make great progress in reversing the rise of obesity by encouraging healthier eating, increasing and sustaining people’s participation in sport and leisure activities, and creating a culture that makes positive behaviour changes easier.”**

## **Councillor Jason Arthu**

Haringey’s Cabinet Member for Health and Wellbeing and Chair of the Haringey Health Obesity Alliance

Haringey Health and Wellbeing Board has set itself an ambitious target of reducing obesity to the England average by 2018 as current levels in the borough are above the national average. To achieve this, Haringey has set up a whole systems plan to tackle obesity.

The plan is being delivered through the Haringey Obesity Alliance (HOA), which was launched in 2015 and currently comprises 65 member organisations including the council, schools, housing associations, local community and voluntary organisations and NHS organisations including the clinical

commissioning group. The HOA is chaired by Haringey Council’s Cabinet Member for Health and Wellbeing. The plan is ongoing with no end date, as the council recognises that persistent effort will be required to bring about sustained change.

Haringey has chosen to focus on a number of ‘upstream’ initiatives, that involve changes to the environment and social norms rather than individual behaviour change, where it feels it can have the most impact. As well as working externally through the HOA, the approach also involves working across the council to implement the delivery plan. Haringey Council has a ‘Health in All Policies’ approach which aims to embed health at every level of policy making across the council and encourages a collaborative approach across council departments and with community partners.

The approach has involved deeper integration of public health into the local authority through using the council’s place making role to shape the built environment through planning and regulatory policies, influencing health-related design aspects of the Tottenham Regeneration programme and through the Healthy Schools and Early Years programme.

The council has prioritised resources to support the Obesity Whole Systems Delivery Plan. Since 2014, the council has employed a healthy public policy officer who has been dedicated to pursuing the approach in a systematic way across departments and with key partners. Despite overall funding cuts, dedicated resources allocated to this function have increased from 1 to 2.5 full time employees.

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# Solihull Council: Working together to get Solihull to eat well and move more by 2021

“The causes of obesity are incredibly complex with a large number of inter-related factors, activities and determinants involved. Traditional approaches have not made enough of an impact on reducing obesity levels. I was therefore pleased to host a whole system change event led by Leeds Beckett University to help bring together a range of stakeholders across Solihull including communities, public health, local authority services, the NHS and the voluntary sector, in order to identify what we can influence to tackle the drivers perpetuating obesity. The event was a great opportunity for collaborative learning, looking at the system components and connections between them and identifying points of leverage to drive transformation. Our partners embraced the opportunity to work together to create environments that make the healthier choices the easiest choices whether at home, work or play.”

**Stephen Munday,**  
Director of Public Health, Solihull Council

## Lessons for success

- Make sure you are engaging the whole system of stakeholders who can influence obesity in the local area.
- Secure support for the programme from senior council leaders.
- Focus on developing and maintaining stronger stakeholder partnerships with shared goals and good communication.
- Map out community assets and consider how you can build on these.

The approach has been set up by Solihull's Strategic Healthy Weight Group which includes representation from a number of council departments and organisations outside the council. The group has developed a Health in Every System Strategy, which forms the basis of the approach. The vision is to enable the residents of Solihull to feel able to reach their health and wellbeing potential through a whole system approach that tackles poor nutrition and inactivity, by working in partnership with a range of stakeholders. The programme has a key focus on reducing the gap in health inequalities, health behaviours and obesity levels between the regeneration wards and most affluent wards in the borough.

The implementation of the approach is in its very early stages with an initial stakeholder meeting taking place in spring 2017, which collectively identified the causes of obesity and mapped out potential levers to tackle them. Both the chief executive and director of public health attended the meeting and are very supportive of the approach to tackling obesity. Solihull Council has built on existing stakeholder relationships and learnings from the council's food strategy, which was developed in 2014, to identify the systems that fed into the food system and where in the system the council could best intervene.

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