Healthy Weight, Healthy Lives: a cross-Government strategy for England

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Healthy Weight, Healthy Lives

Obesity is a significant and growing problem – with a huge impact on individual health

UK Foresight report: By 2050, 60% of men and 50% of women could be clinically obese.

• Health impact of obesity:
  – 58% type-2 diabetes
  – 21% of heart disease
  – 10% of non-smoking related cancers
  – 9,000 premature deaths a year in England
  – Reduces life expectancy by, on average, 9 years.

• Costs of obesity:
  – National Health Service - £4.2bn
  – Wider economy - £15.8bn
  – Foresight estimate costs to economy of £50bn by 2050

• Launched in January 2008 with the ambition that England will:

  “be the first major nation to reverse the rising tide of obesity and overweight in the population… Our initial focus will be on children: by 2020, we aim to reduce the proportion of overweight and obese children to 2000 levels.”

• This ambition is being delivered, initially, by a £372m strategy
Healthy Weight, Healthy Lives: Five areas for action based on Foresight.

1. *Children - healthy growth and healthy weight*

2. *Promoting healthier food choices*

3. *Building physical activity into our lives*

4. *Creating incentives for better health*

5. *Personalised advice and support*
Promoting participation in physical activity: Why active travel is important to health

• Scientific evidence is compelling; regular moderate physical activity essential for good health.

• People who are physically active reduce their risk of developing major chronic diseases by up to 50% premature death by about 20% to 30%.

• Moderate physical activity should be taken ‘At least five times a week’ (CMO 2004).

• Adults should undertake at least 30 minutes and children 60 minutes moderate physical activity each day.
### Promoting participation in physical activity: The evidence for walking and cycling

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<tr>
<th>Walking</th>
<th>Cycling</th>
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<td>Brisk walking for between 6-12 miles per week reduces the risk of premature death by 20-30%.</td>
<td>23% of car trips are under 2 miles – the ideal cycling distance which typically takes just 12 minutes and is often quicker than the car.</td>
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<td>Walking more than four hours per week reduces the risk of hospitalisation for cardiovascular disease by 30% (compared to walking less than one hour per week).</td>
<td>Over 100 calories are used on a 12 minute journey</td>
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<td>The incidence of CHD in men is halved by walking over 1.5 miles a day.</td>
<td>A good way to get exercise; low impact on joints with 70% of the body weight is borne by the saddle</td>
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There is clear evidence that the built environment can help to address this

*National Institute for Health and Clinical Excellence found that:*

- introducing cycle infrastructure can lead to long-term increased in levels of cycling
- interventions to change the urban structure at street level can lead to increased pedestrian activity
- there are links between physical activity levels and the accessibility of physical activity and other facilities, the density of residential areas and land use mix
- there are links between physical activity levels and the perceived safety of an area and the availability of footpaths or equipment for exercising
- traffic calming can lead to increases in walking and cycling (including children’s play)
A supportive built environment: What this means in practice…
But levels of walking and other everyday activity have dropped over many years

- The last 20 years has seen a decline in the number of children walking and cycling to school.

- Over the same period traffic volume has doubled.
Healthy Weight, Healthy Lives: Building physical activity into daily lives (Theme 3)

- Theme 3 of Healthy Weight, Healthy Lives has two strands of work:
  - Promoting participation in physical activity
  - A supportive built environment

- Sustainable travel plays an pivotal role in advancing both these.

- Importance of locally driven work

- Healthy Towns £30 million

- Cycling Towns and Cities £140 million
Building physical activity into daily lives: Targeted programmes.

- Close collaborative work with OGDs and others to formulate a strategy for walking promotion, particularly for children and young people.

- £7million has been allocated to developing walking strategies over the next three years.

- DH is contributing £15million to DfTs cycling programme. This will be used to bolster work already in progress e.g.
  - Bikeability
  - Cycling Towns and Cities
  - Links to schools
Building physical activity into daily lives: Planning authorities and infrastructure.

- Health is already embedded in planning policy as a key consideration but continued support is essential if the vision of a more physically active society is to be realised.

- We are collaborating with DH Public Health workforce on the development of a support package for current and future planners. This will include:
  - Continue to build on models of good practice e.g. London’s Healthy Development Unit.
  - Building on successful Teaching Public Health Network model to create a network of educators of the built environment.
  - Dissemination of teaching materials developed by RTPI.
  - Healthy Towns DH is investing £30m in Healthy Towns.
Supporting these programmes will be a substantial social marketing programme

Insights into behaviour
- Extensive consumer insight research, individuals:
  - Underestimate food intake
  - Overestimate activity levels
- We have developed an over-arching brand to address these

Change 4 Life
- £75 million marketing campaign to reframe obesity in terms of behaviours and consequences.
  - Aim is to increase recognition that lifestyle can threaten health.
  - Outcome to motivate and empower people to change diet and physical activity.
Discussion

- Programmes to promote healthy weight can help the sustainability agenda, but the links are not strong. How can we improve this?

- What are the best motivators to change for different parts of the population e.g. health, climate change?

- What opportunities arise from the current economic climate?