

A sustainable approach to obesity prevention in early childhood from NZ and the UK

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Introduction

- Little Steps to Healthy Lives programme delivered through early years settings in London Borough of Camden, UK
- Hawkes Bay services to Improve Maternal and Child Nutrition and Physical Activity

Early years: Evidence vs. practice

Evidence associated with reduced risk of obesity

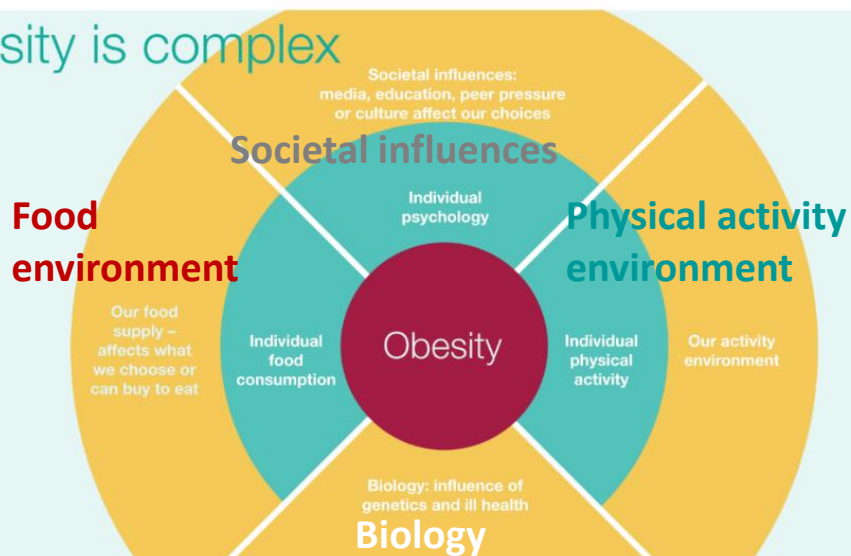
- Exclusive breastfeeding for 6 months
- Responsive feeding practices
- The avoidance of unhealthy foods and sugar sweetened beverages

UK and NZ practice

- UK: Only 1% (2010), NZ:17% (2013 Plunket)
- Many infants starting solids too early, UK: 75% introduced solids before 5 months (2010), NZ: 35% by 4 months and the average age 5 months (MOH, 2004).
- Most parents encourage their children to eat even when showing signs of satiety.
- Over 50% of parents do not recognise their child as overweight or obese.
- UK infant survey 2010 found 21% parents giving high sugar foods regularly by 8-10 months.
- Many NZ infants being given food inappropriate for under 1 year including sweet and salty snacks.



Obesity is complex



Obesity is the outcome of a complex set of factors acting across many areas of our lives

Whole system approach

Sustained changes to individual behaviours across the whole population will require:

Multiple actions across all parts
of the **system**

Changes to the food, physical
activity and social environments



Little Steps to Healthy Lives (LSHL)

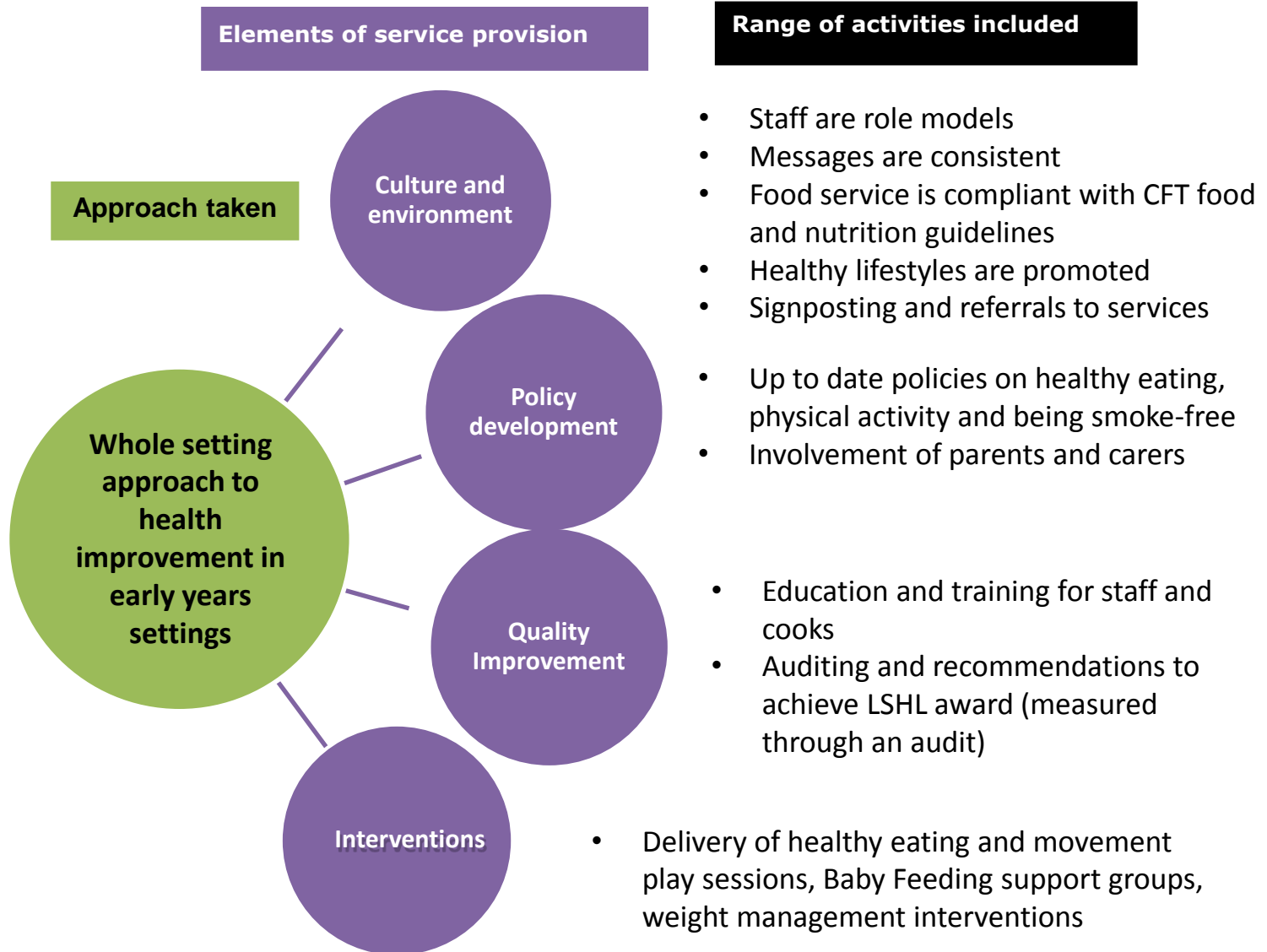
- An integrated whole settings approach to improve health outcomes through early years settings:
 - Long term multi agency approach that enables settings to establish the foundations to support health and wellbeing.
 - Supports staff to promote consistent, evidence based health messages and effectively refer to a range of services
 - Aims to empower parents to take responsibility for their own family's health
- Identified 6 priority health areas for Camden:
 - Breastfeeding
 - Immunisations
 - Healthy eating
 - Physical activity (including Movement Play)
 - Dental health
 - Smoking (cessation and smoke-free homes & cars)

Children's centres:

- Offer a range of services for families including childcare, family support, health and social services.
- Provide a network of support with the core purpose is to improve outcomes for early years focusing on the most disadvantaged families.
- The LSHL programme aims to strengthen the role of children's centres in providing integrated services that promote health and wellbeing and to model this framework across other early years' settings (voluntary and private settings).



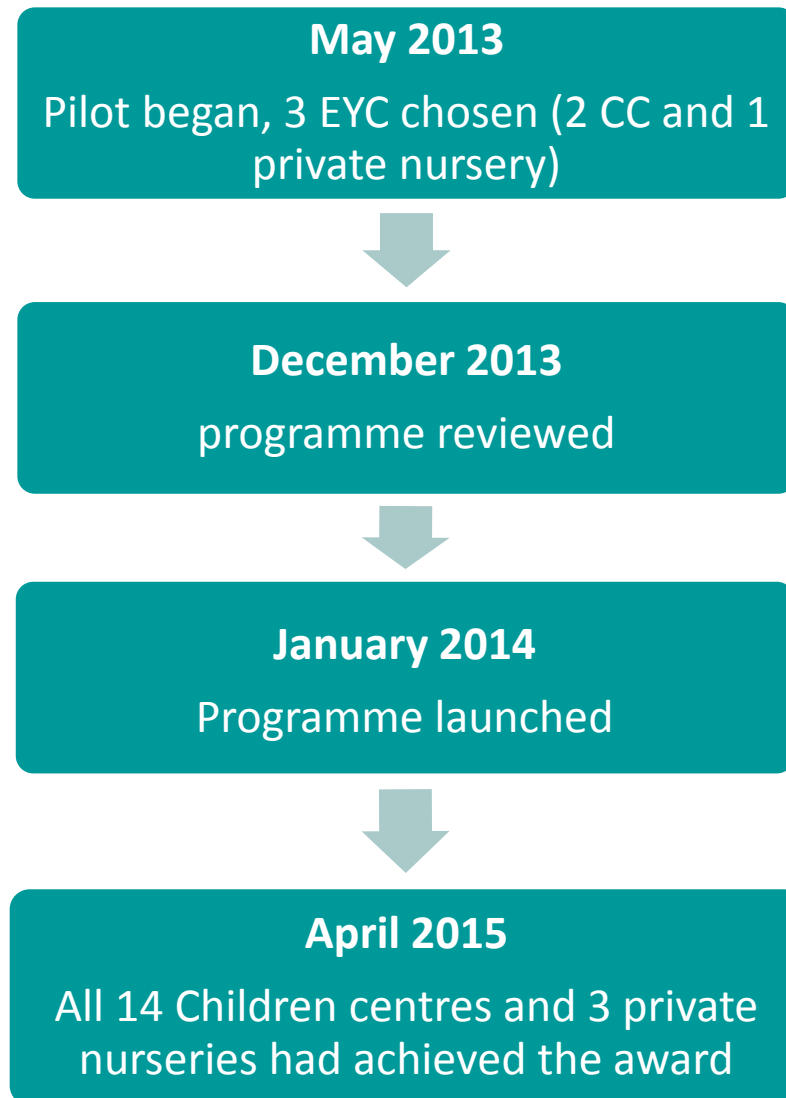
A whole setting approach



Process for early years setting to achieve LSHL award



Time line



Outcomes:

- Audit highlighted: a need to update policies on physical activity, nutrition and smoke-free, modifying menus to meet the CFT guidelines and improving referrals to health services.
- Staff attitudes around importance of healthy lifestyle behaviours, knowledge of key messages and services available and role modelling.
- Referrals to Camden weight management service, baby feeding service, healthy eating sessions, Dental health, Immunisations, Smoke-free homes & Cars and Smoking cessation all increased.
- 25% increase in number of parents initiating solids at 6 months.

Services to Improve Maternal and Child Nutrition and Physical Activity - Hawkes Bay

- New funding from Ministry of Health for services to improve nutrition and physical activity from preconception to 6 years.
- Providers collaboratively engaged in projects across the Maternity and Early Childhood spectrum which covers a range of ages, stages and settings .
- Best practice and evidence based programmes include:
 - Maternal Green prescription
 - Breastfeeding- community support services
 - Gestational Diabetes Support: Workforce development and Healthy lifestyle package
 - Healthy First Foods
 - Pre School Active Families

Healthy First Foods



- HB pilot site for provider and whānau focus groups for pre- testing of HPA's 'Let your baby guide you' resources
- Train the trainer framework through Well Child Tamariki Ora providers.
- Practical workshops delivered for whānau by WCTO providers- Healthy first foods up to 1 year.
- Partnership with local fruit/vegetable producers
- Follow up observation of behaviour change and age initiating solids.

Healthy First foods: UK vs. NZ

- Guidelines:
 - Signs of readiness for solids
 - Texture and timings of introducing different foods
- Service providers:
 - Delivered through structured setting vs. home-based or community setting
- Buy in from providers:
 - All staff received mandatory training as part of wider programme vs. training offered to providers
- Product branding:
 - NZ resources heavily branded until HPA

Learnings

- Increased focus on healthy first foods initiation
- Different approaches to reducing inequalities
- An integrated multi-agency approach to tackling obesity shifting attention away from isolated interventions instead considering many influences, across community, education and health services

Any Questions?

