

## 11.3 Reducing obesity

<p><b>Improvement Project Title</b> Eating well and being active for health and wellbeing</p>
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<p><b>Aim statement</b> To reduce the percentage of men and women who are obese in Aberdeen City to 20% by 2021. Currently one in four adults (25%) in Aberdeen City are obese.<sup>1</sup></p>
<p><b>Link to Local Outcome Improvement Plan</b></p> <ul style="list-style-type: none"> <li>• <i>Stretch outcome aim 11</i> Healthy life expectancy (time lived in good health) is five years longer by 2026</li> <li>• <i>Driver 11.4</i> Encouraging adoption of healthier lifestyles</li> <li>• <i>Improvement Project Aim</i> Reduce the percentage of men and women who are obese to 20% by 2021</li> </ul>
<p><b>Why is this important</b></p> <p>Clinical obesity increases the risk of ill-health and premature death,<sup>2</sup> and is therefore an important driver of life expectancy. Obesity is not solely about individual willpower.<sup>3</sup> Obesity is about the food environment (e.g. what's affordable, what's available, what's convenient, what's possible (to buy, to prepare) and the physical exercise environment (e.g. perceived costs (money, time), perceived safety) against the context of modern living. High prices, rising bills, long working hours, exhaustion, stress, mental ill health, isolation, travel distances – a wide range of obstacles exist to eating well and participating in forms of pleasurable physical activity.</p> <p>Our improvement project, working towards the LOIP aim, will start in Torry, as the Torry Locality Plan identifies obesity as a concern. Whilst data on healthy weight and obesity are not collected at small area level, we know that inequalities in levels of obesity exist between the most and least deprived parts of Scotland.<sup>4</sup> In particular, inequalities have widened in recent years among children living in the most deprived areas. Consequently, we will link with the improvement project that is looking specifically at child obesity to ensure our efforts are complementary and have wider impact. Whilst we do not have a baseline for healthy weight and obesity at locality level, we will use other measures to assess the effect of our change efforts which contribute to our stretch aim. We will also link with the Community Pantry project charter in Torry (part of sustainable city work) because of the clear links with food poverty and nutrition.</p> <p>Community activism is at the core of this project, supported by evidence of behaviour change at community level.<sup>5</sup> We aim that our range of change ideas will help to change cultural norms in relation to nutrition, environment, physical activity and stigma – all primary drivers towards reducing obesity. (see driver diagram)</p>

<sup>1</sup> Source: Scottish Health Survey, local authority results 2014-17 inclusive, [published 2017](#)

<sup>2</sup> <https://www.nhs.uk/news/obesity/obesity-could-rob-you-of-20-years-of-health>

<sup>3</sup> <https://doi.org/10.1159/000455960>

<sup>4</sup> Source: Obesity and health inequalities in Scotland. ScotPHO 2017

## Measures

### Outcome Measures

- The amount of weight loss recorded by those with BMI > 30\* both via the weight loss/healthy helpings classes and the app
- % of obesity in Torry – we will collate data from the medical centre as a baseline
- Over time, we will be able to use the Scottish Health Survey to assess changes in healthy weight and obesity in Aberdeen City

### Process Measures

- The number of people who sign up to the website/app
- The number of people using the WOW travel tracker
- The number of people participating in walking football
- The proportion of people who sign up/attend the weight loss group who are BMI > 30\*
- The number of people using the CFINE boxes
- The number of community weight loss programme champions
- The change in uptake of local services/activities related to healthy weight and physical activity
- No. of individuals trained to provide support to community members
- No. of people participating in Dry January to save calories/lose weight.

Public perception survey questions to be identified to track behaviour change in the following areas:

- The change in knowledge about healthy weight and physical activity
- Views about stigma and particular individual and community actions to reduce this

\* The website/app will be open to everyone and will capture all BMIs, and will report the total weight loss, but we will be able to see the BMI>30 data (i.e. obesity related) without this being public on the website/app

## Change ideas

There is significant evidence that working with local communities plays a big part in changing people's attitudes, behaviours and ultimately their health outcomes with regard to healthy weight<sup>5</sup>. We plan for a series of focus groups to shape our thinking with members of the community and for other ideas to emerge. Our ambitions for transformation involve multi-agency support for behaviour change at both individual and community level in the following areas:

- Helping people want to eat healthier food
- Better access towards buying, growing and cooking healthier food
- Physical activity being a happy pursuit and embedded into daily lives
- Access to help when needed to achieve and maintain healthy weight and well-being

The detailed changes we test depend very much on feedback from the local community but our initial plans include:

- Cfine food boxes – Having boxes available in the local community with all the dry goods necessary to make a 'confidence to cook' recipe (healthy recipes that lay out

<sup>5</sup> NICE: Obesity: Working with local communities. June 2017

the calories within the recipe and will be carefully selected to suit people from all demographics) – all that would need to be added is the meat. This would encourage people to make healthier meals and provide them with the convenience and everything they need to do so.

- Develop NHS led weight loss classes/extend healthy helpings locally, weekly with weigh-ins, free of charge in the community – link with existing groups such as Jog Torry to provide taster sessions for members. Eventually testing having community champions as the group ‘leaders’.
- Develop training for key workers who may regularly come into contact with those who are or who are at risk of obesity, so that they can appropriately signpost/accompanying individuals to local services.
- Aberdeen Football Community Trust provides walking football sessions to adults-targeting local pubs/workplaces/streets
- Living Streets WOW (year round walk to school challenge) travel tracker established for both parents and children to increase active travel – potential links with the children’s obesity project.
- Campaign to encourage local people to participate in Dry January- with a focus on how many calories can be saved during this time – therefore having a positive impact on weight loss – working alongside the ‘a sobering thought’ scheme to access their alcohol unit calculator.
- Create a ‘brand’ to get people in Torry to sign up to a website or linked mobile app. This will promote healthy eating and physical activity and link them to relevant service providers in Torry (as above & more). This will increase uptake of those services. The service providers will in turn market the brand, driving sign-up to the website/app. The website/app will offer anonymous sign-up, will calculate BMI on sign-up, and encourage recording of weight loss through the website/app, with an aggregate ‘Torry weight loss’ being publicised. If we do create community momentum, we will then extend the programme to include other providers (e.g. retailers), develop the marketing to address specific issues / reach specific market segments, and build cases for additional investment and service development (e.g. additional community fitness activities, health coaching services).

**Potential risks and/or barriers to success & actions to address these**

- Our project must be asset-based, strengths-focused, and open, collaborative and participative, developed and delivered through coproduction not imposition – **a key risk is that community members and community groups may not engage with our project**
- Our project must be non-stigmatising, non-hectoring, non-shaming; our primary focus is on making positive changes to the food environment and tackling the barriers to healthy eating and being active – **we must be alert to the risk of causing embarrassment, shame or distress amongst the people of Torry** and how to respond in the event of receiving such reports
- Using improvement methodology we will ‘start small and grow’ – a key risk is that website and app development, brand development, and marketing can involve financial costs – in the event of success **we may face restrictions if budget cannot be secured**



Although set out here in a driver diagram, it is very important to remember that obesity is not the result of a linear system  
 See <https://foresightprojects.blog.gov.uk/2017/10/04/dusting-off-foresights-obesity-report>  
 See [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/296290/obesity-map-full-hi-res.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/296290/obesity-map-full-hi-res.pdf)

