



Healthier Weight Strategy for Shropshire 2023-2028



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Introduction

This 2023 –2028 Healthier Weight Strategy sets out our system-wide approach and priorities to improve health and promote healthier weight among the Shropshire population. Our ambition is to ensure Shropshire residents have the opportunity to eat healthy, nutritious food and enjoy physical activity in a way that best suits them. Evidence indicates this will reduce levels of excess weight and weight-related illness in Shropshire.

We urgently need to respond to the problem of overweight and obesity, otherwise known as ‘excess weight’, in Shropshire to improve the health and wellbeing of the population. Levels of excess weight have been rising relentlessly over recent decades and are predicted to rise even further - particularly among children and more deprived populations.

The rise in excess weight is a consequence of dramatic changes in the way we eat, live and work. Our shops are filled with unhealthy, highly processed food options, and many of us are not moving enough. For an increasing number of people, a healthy lifestyle is not the easiest or most affordable option and enabling our residents to eat healthily and be physically active can only be achieved through changing our environment from one which drives the development of excess weight to one which promotes health.

We know excess weight is both a major cause and a consequence of inequality. Our strategy coincides with a time of unprecedented financial hardship for many as a result of the UK cost of living crisis. This has worsened problems such as food and fuel poverty which together make healthy living less affordable. Added to this are the challenges Shropshire faces in being a rural county.

Within the context of healthier weight, personal responsibility for health and weight is an important consideration, whilst also acknowledging the significant impact that barriers such as financial hardship have on individuals’ ability to make healthier choices. We know that with busy and stressful lives, keeping a healthy weight can often seem like one priority too many. Our aim is to empower Shropshire residents with the knowledge, information and support needed to enable a healthier lifestyle as way to improve their overall physical and mental wellbeing.



We know that 'prevention is better than cure'. Children who grow up with excess weight are more likely to be overweight or obese as adults. Treating obesity once it has occurred is not a long-term solution. It is essential that future action focuses on preventing the development of excess weight across our life course, especially from pregnancy, during infancy and early childhood.

Appropriate messaging around healthy weight is important in reducing any potential unintended harm to those at risk of underweight or eating disorders such as anorexia. The impact of stigma and discrimination experienced by those living with excess weight is well recognised, and an empathetic and inclusive approach is needed so we can focus on what matters most to the individual in terms of overall health, well-being, and weight.

The task ahead is complex and requires action by everyone. We will therefore work across the system in a co-ordinated way making reducing unhealthy weight everyone's business. This means working with all those who support Shropshire residents, including the public and voluntary sector, local businesses and employers, schools, NHS organisations and communities themselves. A whole system approach will engage leaders across these sectors to use their levers to maximise opportunities and remove barriers to achieving a healthier weight. This means improving access to healthy, nutritious food and increasing levels of physical activity to support physical and mental wellbeing.

This strategy builds on a comprehensive needs assessment which describes the scale of excess weight across Shropshire and its consequences on health. It also includes the findings of public and stakeholder consultations that document the perceptions, values, challenges, and opportunities to improve the weight profile of the population from the perspective of those who live and work in Shropshire. Alongside this, a separate engagement exercise was undertaken with young people to capture their views within the Strategy.

The Healthier Weight Strategy together with a high-level action plan sets out our commitment to work with partners across the system including health, education, transport, planning and businesses, to support our population to live in a way which allows them to enjoy the physical and mental wellbeing benefits of eating healthily and moving more.

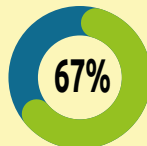


Healthier weight in Shropshire

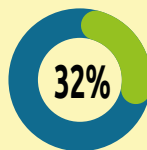
Excess weight, and in particular obesity, is associated with significant impacts on health and wellbeing. For example, those living with obesity are over 3 times more likely to develop colon cancer, 2.5 times more likely to develop high blood pressure and 5 times more likely to develop type 2 diabetes². Living with excess weight can harm people's self-esteem and their mental health, particularly when they suffer from weight stigma.

There is a disproportionate impact of excess weight and its consequences on the most deprived individuals and families.

Scale of excess weight in Shropshire



67% of adults are overweight or obese (more than 180,000 people)



32% of adults are obese, higher than the UK average

More than 1 in 5 children aged 4-5 years is overweight or very overweight



Almost 1 in 10 are very overweight

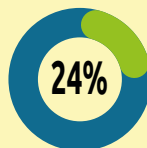
Nearly 1 in 3 children aged 10-11 years are overweight or very overweight¹



Almost 1 in 5 are very overweight



54% of pregnant women are overweight or obese in early pregnancy



24% of pregnant women are obese in early pregnancy



Rates of unhealthy weight in children are highest among more deprived groups^{2,4}



What drives unhealthy weight

Being active and eating healthy, nutritious food are key to achieving and maintaining a healthy weight as well as improving our wider emotional and mental wellbeing.

Weight status is determined by many different and interacting factors. These range from individual biology and psychology which can be impacted by physical or mental health conditions as well as stressful life events and include the economic and political environment which affect income and prices.

The genetic and environmental causes of excess weight are not widely understood by the population in general and a misplaced belief that weight is solely due to individual choices often leads to stigma and discrimination.

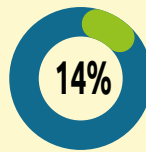
Drivers of excess weight in Shropshire



Almost **2/3** of adults and almost **1/2** of children are not eating enough fruit and vegetables a day⁵



Over **1/2** of children and a **1/4** of adults aren't physically active enough⁶



14% of households are struggling with food poverty⁷



Shropshire is among the highest-risk areas nationally for cost-of-living vulnerability⁷



The number of children living in poverty is increasing⁸



There are important differences in food prices and accessibility to food shops⁹



What we were told through our engagement and consultation

Through our engagement and consultation, we learned the following:

- Healthy weight is a complex, emotional issue which people care about. Experiences and drivers of excess weight vary broadly across the population
- There is a strong sense that people want to consider healthy weight more broadly, in the context of poverty, work/life pressures, mental health and wider wellbeing
- Particularly among young people, the focus on weight is considered to be too narrow and there is a sense that overall happiness is a priority regardless of weight with many stating the importance of 'body positivity'
- There is an awareness of the harms caused by stigmatisation of excess weight. Among young people there are concerns and fears around underweight and eating disorders
- Some groups are more affected than others, and an inclusive approach would consider their specific needs, including those with mental health conditions, certain physical health conditions, those with physical and learning disabilities, children and young people, women in menopause, and older adults
- Those working in the system want to work in a more joined-up way, making best use and raising awareness of current support options as well as integrating priorities to strengthen their impact



Our vision, priorities, and principles

Our vision is a future where every Shropshire resident has the opportunity to eat well, be physically active and enjoy good health, including being a healthier weight.

This strategy reflects the evidence and insights documented through the Healthy Weight Health Needs Assessment (HNA). This includes the views, needs, experiences, and values expressed through engagement and consultation with those living and working in Shropshire. These, together with an assessment of the evidence indicating which interventions are most effective have been used to inform our vision, key priorities, and underpinning core principles.

Our key priorities

Through this strategy we will strive to:

- 1 Improve the health of Shropshire's population by reducing the scale of excess weight and reducing inequalities in excess weight
- 2 Improve the environment in which Shropshire residents live so they enjoy a healthier lifestyle
- 3 Increase actions aimed at preventing excess weight across the life course - focusing on infants, early years, children, and families
- 4 Increase awareness of and uptake of universal support, available services, and resources - targeting the most vulnerable, including those with learning disabilities, special educational needs and disabilities, and those living with severe mental illness
- 5 Enable Shropshire's community, voluntary and public sector workforce to confidently and capably support Shropshire residents living with excess weight in a way which reduces stigma and discrimination



Our core principles

These key priorities will be delivered through applying a set of core principles aligned with the experience, needs and perspectives of the Shropshire population, and will guide our delivery and actions:

Through this strategy we will strive to:

1 Change Focus

Think about weight differently, no longer considering it in isolation and instead seeing it in the context of overall health and wellbeing. We will focus on what drives excess weight, moving away from the individual and towards the environment in which we live

2 Include

Recognise the need for greater support for those experiencing health inequalities, including those living with disabilities and people with physical and mental health conditions, so they enjoy a healthier lifestyle

3 Support

Support those whose health and wellbeing could be improved through healthier eating and physical activity. This means adopting an empathetic approach that also recognises the importance of appropriate messaging around weight and the harms of weight stigma and discrimination

4 Work together to join the dots

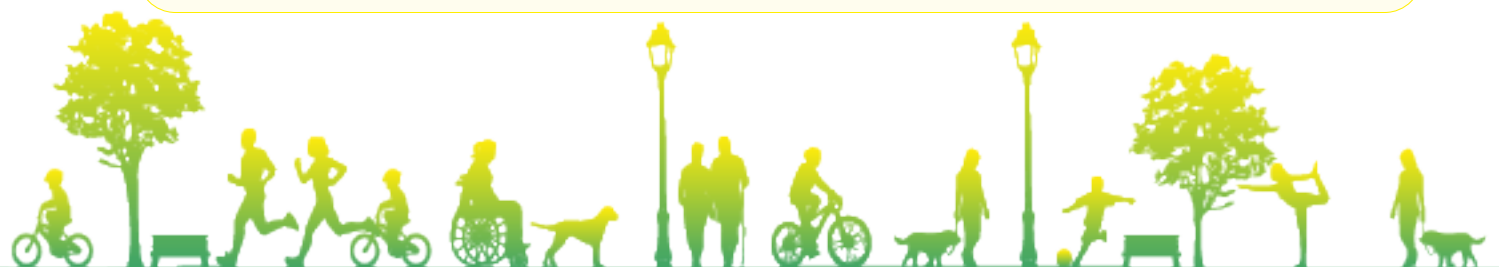
Make healthier weight everybody's aspiration. We recognise the importance of joining the dots to maximise the opportunities that Shropshire already has to support its population to live a healthy lifestyle. We want to be innovative in the way we connect, collaborate, and strengthen existing work

5 Lead by example

Public services should work in a way that exemplifies our approach by committing to changes and improvements that enable our workforce to live a healthier lifestyle

6 Use our Influence

Recognise the importance of our voice in influencing the wider-reaching policies at national level which prevent us from enjoying a healthier lifestyle, recognising the limitations of local levers



Governance

This strategy is supported and informed by our local Healthy Weight Health Needs Assessment (HNA), which forms part of Shropshire's Joint Strategic Needs Assessment (JSNA). The strategy also reflects the feedback from stakeholders and the public received through consultation on the draft strategy. This strategy includes a high-level action plan which has been co-produced with our partners across the system. The action plan describes how the strategic priorities and objectives can be achieved and includes the indicators that will be used to monitor progress.

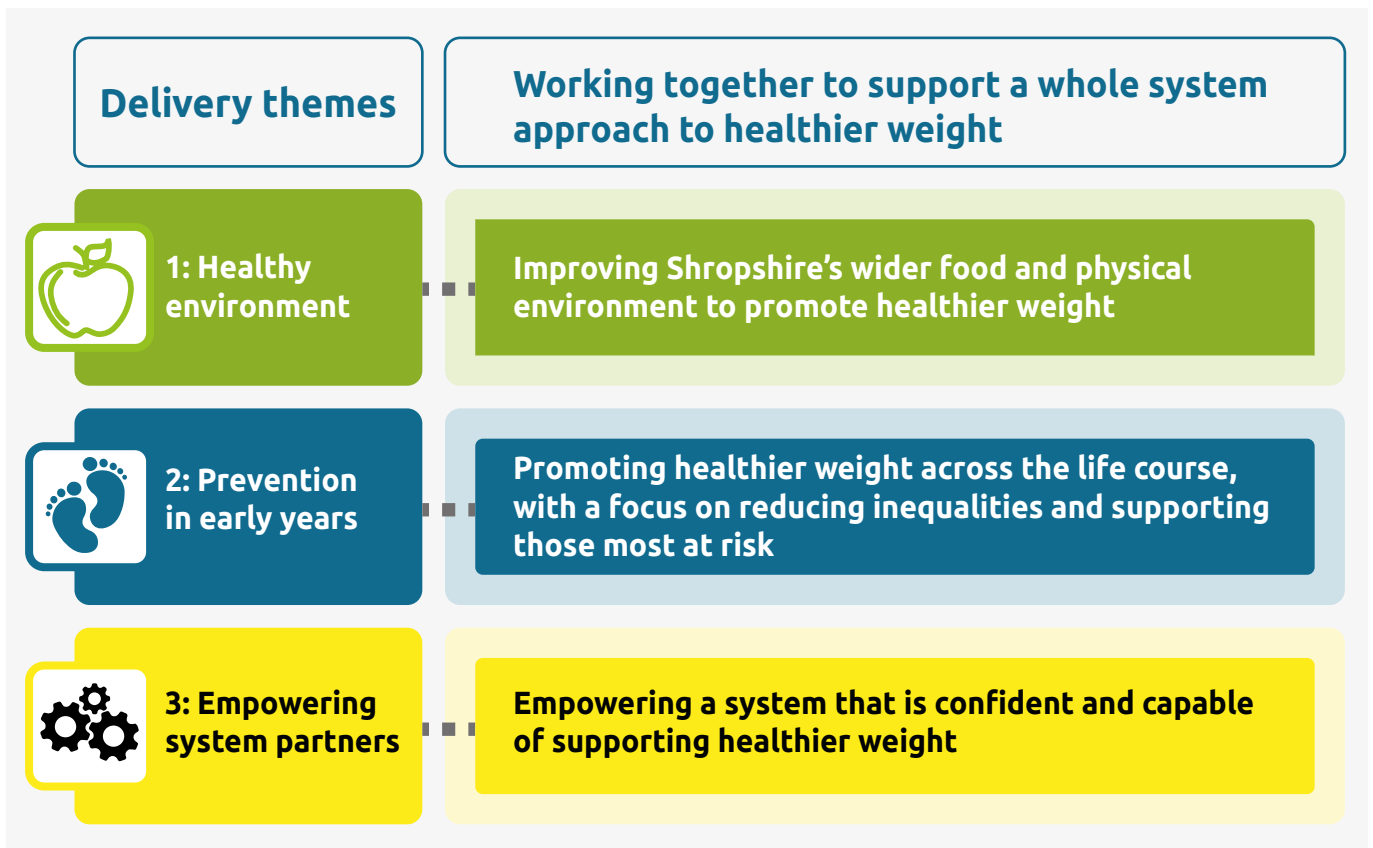
Once this strategy has been approved by the Health & Wellbeing Board (HWBB), the action plan will be further developed to include milestones and more precise timescales for delivery.

Implementation of the action plan will be monitored with reporting of progress, or otherwise, to the HWBB at regular intervals, as determined by the Board.



Key delivery themes and strategic objectives

The Healthier Weight Strategy priorities will be delivered through 3 key delivery themes. Each theme identifies strategic objectives needed to achieve our vision, supported by high level actions and key indicators that will be used to monitor progress.





1 Healthy environment

Improving Shropshire's wider food and physical environment to promote health

Why is this important?

The environment within which we live, learn, work and play dictates the lifestyles we can adopt.

Food environments shape what food we buy and eat. They are influenced by what foods and drinks are available, affordable, accessible, and also how they are promoted and advertised. Our diets are also impacted by our access to cooking and storage facilities, equipment, knowledge, and affordable energy. With rising living costs and increasing numbers of children living in food poverty – ensuring healthy eating for all in Shropshire is a challenge.

Physical environments are those natural and man-made spaces that shape how we move around. They are influenced by how places are planned, the activity of businesses and public services and how well we conserve nature. Our physical activity levels are also determined by the type of work we do, how much time we spend on screens and how easy it is to access opportunities to be active in a way that we enjoy.

Importantly, we know that it is those who are most deprived who are more exposed to unhealthy environments. This contributes to the health inequalities we see whereby those in more deprived areas are more likely to have excess weight than those in least deprived areas.

Whilst much of what influences our food and physical environment is often decided at a national level, we have many local levers that can contribute to positive change. Settings such as schools, workplaces, hospitals and public buildings or facilities can create opportunities which increase healthier eating and physical activity and avoid making unhealthy diets and sedentary behaviour the 'default'.

As a rural, food-producing county with beautiful countryside we have so much potential to shape our environment in a way that supports healthy weight and our general health and wellbeing.



What is the evidence?



Access to and affordability of healthy foods is a barrier to healthier diets, particularly for those in low-income groups



of people feel 'priced out' of buying healthy food¹⁰

More healthy foods are nearly **3x** more expensive per calorie than less healthy foods¹¹



47%

The least wealthy fifth of households need to spend **47%** of their disposable income on food to meet government nutrition guidelines, compared to **11%** for the wealthiest households¹¹



11%

Even where basic ingredients are affordable, the time and equipment needed as well as fuel costs can be a barrier to cooking healthy food



The availability and promotion of unhealthy food dominates our food options, especially in more deprived areas

Ultra-process food now account for over **50%** of UK diets¹²

In 2017, over **£300 million** was spent in advertising unhealthy food and drink, compared to **£16 million** on fruits and vegetables¹³



In the most deprived areas, almost **1/3** of food outlets are for fast food, compared to just over **1/5** in the least deprived areas¹¹



Daily life is becoming increasingly sedentary for everyone



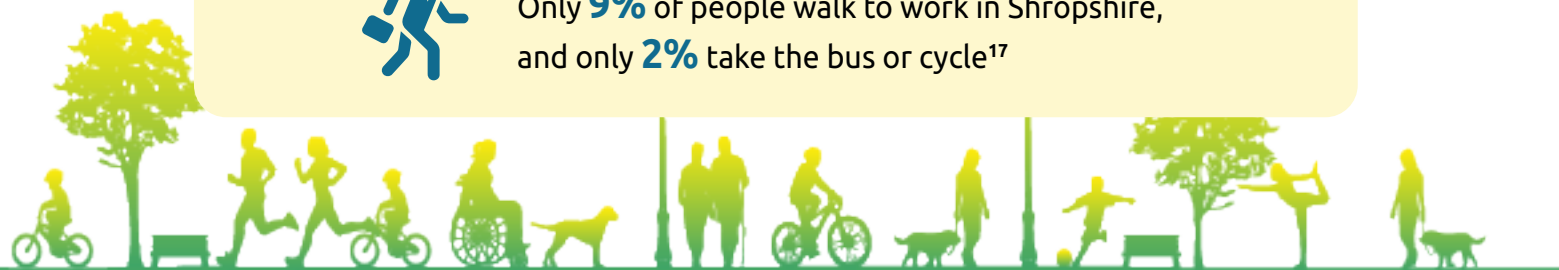
1 in 2 women and **1 in 3** men are not physically active enough for good health¹⁴



There has been a 30% reduction in physical activity at work since the 1960's. Today's office workers spend around **66%** of their working lives sitting^{15, 16}



Only **9%** of people walk to work in Shropshire, and only **2%** take the bus or cycle¹⁷



What we were told through our engagement and consultation

- There's too much unhealthy food available and too many opportunities to eat high sugar/fat snacks
- It can be a struggle to have enough time and motivation to prepare healthy food
- Eating and preparing healthy food is unaffordable, particularly for those experiencing poverty and deprivation
- It's hard to find the time to be more physically active
- Cost of physical activity options are a barrier, as well as needing to travel far to facilities
- Caring responsibilities as well as living with illness and disability can prevent people from being active
- Safer streets, roads, cycle spaces as well as accessible green space are needed
- Top barriers to being more physically active: finding time, having local access and ability to travel to facilities and cost



Strategic objective 1

Enable a food environment for Shropshire which promotes and provides access to healthy, nutritious, and sustainable food for all

What will be needed to achieve this?

- Reducing food poverty across Shropshire
- Increasing the availability of healthy food in public places
- Strengthening the local food system
- Reducing exposure to unhealthy food in the wider environment

What are we already doing to achieve this?

- We are working on a programme to increase the uptake of Healthy Start food vouchers
- Our Shaping Places Programme is generating learning about how we can tackle food poverty in rural areas
- The Holiday Activities and Food Programme (HAF) has been helping children in Shropshire to eat healthily over the school holidays
- Shropshire is home to brilliant community food initiatives such as OsNosh, the Shrewsbury Food Hub, Hands Together Ludlow and more

What more will we do to achieve this? In the first instance, we will be exploring:

- The feasibility of moving to auto-enrolment for free school meals
- The scope for further improving healthy eating education through the HAF programme
- Ways to incorporate the learning from the Shaping Places Programme to reduce food poverty for populations across Shropshire
- The scope to maximise household incomes by increasing awareness of the level of unclaimed benefits, and how individuals can apply for them
- Opportunities to work with schools and academies to ensure healthy, sustainable food provision in schools as well as ensuring education about healthy eating is embedded in the curriculum



- Working with hospitals to provide sustainable and healthy food to patients, visitors and staff
- The potential to ensure food that is provided in public places is healthy and sustainable, including an increase in the availability of water
- Ways to work effectively with Shropshire Good Food Partnership to improve the quality, strength, and accessibility of Shropshire's local food system, including opportunities for improved community food initiatives
- Opportunities to work with planners to reduce exposure to unhealthy food in the wider environment
- Opportunities to work with planners to improve access to healthy food options through new development planning, including improving access to healthy food shops and facilitating community growing initiatives



Strategic objective 2

Support development of a physical environment that allows Shropshire residents to enjoy the benefits of active living

What will be needed to achieve this?

- Decreasing daily sedentary behaviour among the Shropshire population
- Increasing opportunities to be physically active throughout the work and school day and during leisure time, particularly for those with unfair barriers to access
- Increasing public and active travel opportunities

What are we already doing to achieve this?

- Shropshire's Physical Activity Guide for Healthcare Professionals resource provides healthcare professionals in Shropshire with knowledge and resources for supporting physical activity among their patients
- Shropshire's Social Prescribing service provides person-centred support to enable a wide range of health and wellbeing issues to be addressed, including supporting an increase in physical activity
- Enabling active travel through the improved walking and cycling plan, or LCWIP
- Promoting Shropshire's opportunities for outdoor recreation as a rural county

What more will we do to achieve this? In the first instance, we will be exploring:

- Opportunities to increase access, proximity and use of recreational spaces that enable physical activity in the planning of new developments
- Enabling schools and early years settings to maximise opportunities to increase physical activity before, during and after the school or nursery day
- Ways to support employers to promote a way of working that increases opportunities for physical activity for employees
- Promoting and optimising the use of existing physical activity opportunities in Shropshire universally and for those with less access, including green space, leisure centres and community physical activity groups and initiatives

Further details relating to these actions and how progress will be monitored are included in appendix 2.





2 Prevention in early years

Promoting healthier weight across the life course, with a focus on reducing inequalities and supporting those most at risk

Why is this important?

The prevention of obesity is key to reducing its prevalence. Supporting pregnant women and families in understanding the importance of giving children the best start in life is key to prevention, as infancy provides a critical window during which the foundations for a healthy life are set.

Infants are at increased risk of excess weight if their mother is obese prior to pregnancy, if there is rapid weight gain during pregnancy or if a baby has a birthweight greater than 4.5kg. Receiving good nutrition in the early years is vital to a healthy start whilst recognising that many children are born into poverty putting them at higher risk of a poor-quality diet and subsequent obesity. Breastfeeding can protect infants against childhood obesity, whilst excessive or rapid weight gain in the first 2 years of life is a risk factor for future overweight or obesity.

Children's earliest experiences of food and their opportunities for active play can shape lifelong habits and consequently lifelong health. Establishing a good sleep pattern can also help in protecting against excess weight. The current healthy child programme and other related work programmes present many opportunities to enable all children to have a healthy start in life.



What is the evidence?



Excess weight in pregnancy, infancy and childhood increases the risk of adult obesity

The risk of obesity in children is higher among children whose mothers are obese¹⁸



75% of overweight children age 4-5 will remain overweight or become very overweight by aged 10-11 years¹⁹

Overweight children are more likely to become overweight adults²⁰



Many children are already experiencing unhealthy weight from an early age, with the highest risk among the most deprived



75% of infants in England are overfed²¹

1 in 4 infants have already gained excess weight by 18 months²¹

The most deprived children are 2-3x more likely to be very overweight than the least deprived²²

What we were told through our engagement and consultation

- Receiving support for breastfeeding and early feeding is often limited
- Informal support as well as midwife and health visitor input for early years nutrition is key
- Sources of information for parents vary widely and messaging can feel judgmental
- Understanding that breastfeeding is not achievable for everyone is important
- Any information or support needs to be relevant to the individual's specific situation and needs, for example those living with disabilities
- Feeding children healthy food at home and at school is expensive



Strategic objective 3

Ensure there is opportunity for all pregnancies to be healthy

What will be needed to achieve this?

- Providing lifestyle information and support for pregnant women, particularly those most at risk of unhealthy weight

What are we already doing to achieve this?

- The Local Maternity & Neonatal System (LMNS) is transforming maternity care to ensure pregnancies are healthier and safer
- Providing women with access to online antenatal exercise videos to encourage physical activity
- Maternity staff have been MECC trained to enable them to sensitively and effectively empower women to make lifestyle changes
- Providing access to healthy lifestyle support through the Shropshire Telford & Wrekin (STW) Healthy Pregnancy Support Service (HPSS)

What more will we do to achieve this? In the first instance, we will be exploring:

- How to ensure recommended healthy pregnancy information is available before and throughout pregnancy including information on healthy diet, physical activity, appropriate weight gain and good mental wellbeing
- If there are any further training needs of staff that will enable them to better support women in making lifestyle changes
- How to target those most at risk of maternal obesity – providing access to the HPSS and potentially additional antenatal support as/when this becomes available. In order to provide on-going support, the pathway between the HPSS and Social Prescribing will be strengthened



Strategic objective 4

Support parents and families to provide infants with the best start in life

What will be needed to achieve this?

- Promoting and supporting an increase in breastfeeding, particularly for younger and more deprived groups
- Promoting and supporting the introduction of healthy solid foods
- Supporting parents and families to live healthily and introduce healthy eating, physical activity and good sleeping and screen time habits from early infancy
- Enabling early years professionals and early years settings to promote and support healthy eating, physical activity, and good sleep habits

What are we already doing to achieve this?

- Providing access to the 'Solihull Approach' online antenatal parenting support programme
- STW's Infant Feeding Strategy has been developed and approved
- Promoting the uptake of Healthy Start food vouchers and vitamins
- Shropshire's Healthy Child Programme provides universal services and support to families from pregnancy to 19 years and is inclusive of maternity, health visiting, Family Nurse Partnership, school nursing and schools-based programmes
- Shropshire's Family Information Service provides information, advice, and support on all aspects of family life for parents and carers of 0–19-year-olds and for the practitioners supporting them
- Shropshire's Oral Health Programme is being delivered to reduce preventable tooth decay
- Adopting the UNICEF Baby Friendly Initiative across the LMNS to support an increase in breastfeeding

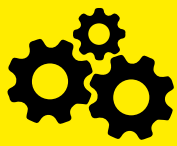


What more will we do to achieve this? In the first instance, we will be exploring:

- How local action plans to support delivery of the Infant feeding strategy can be developed enabling increased breast-feeding support
- The feasibility of developing a pathway for the provision of baby formula for families experiencing food poverty
- How to promote awareness of the importance of introducing infants to healthy solid foods, through the provision of recommended national resources for both the public and practitioners
- Opportunities through the LMNS and Best Start for Life work programmes to strengthen and improve the targeting of healthy eating and physical activity advice and resources for infants through antenatal education and onward parenting support
- The feasibility of developing a standardised approach towards identifying infants at risk of obesity and a pathway for onward support for those at greatest risk
- How, as part of our support to infants at risk of obesity, we develop a bespoke family-based healthy lifestyle support offer interfacing with existing services including the HPSS, health visiting and social prescribing. The service will also be inclusive of NCMP follow-up
- How to work with early years settings and professionals to enable them to (i) support healthy eating and physical activity, and (ii) identify parents and families in need of healthy lifestyles support and facilitate their access to existing services and offers

Further details relating to these actions and how progress will be monitored are included in appendix 2.





3 Empowering system partners

Enabling a system that is confident and capable of supporting healthier weight

Why is this important?

Local action to promote healthy weight across the life course requires a coordinated, collaborative approach with alignment of priorities across organisations so that preventing excess weight and promoting healthy weight becomes everybody's business.

Across all organisations, the workforce needs to be equipped with the necessary knowledge and skills to promote healthy weight. They need to be able to confidently provide empathetic, current and accessible information and support to those, at risk of, or living with excess weight and its health consequences, recognising the impact of trauma, stigma and discrimination. Evidence-based national and local resources are available to support those living with excess weight and frontline staff need to be able to connect these to those who would benefit (appendix 1).

As part of a 'whole system approach' it is important that a wide range of organisations play their part – considering the levers they have to make their environment healthier and the opportunities available to them to support those living with excess weight. This includes early years settings, schools, all public sector organisations, local employers, and voluntary and community groups, amongst others.



What is the evidence?



Systems can work well together to reduce excess weight across populations

A whole system approach to obesity has been shown to **reduce** overweight and obesity amongst young children, particularly in the most deprived groups, as well as **increase** breastfeeding rates, fresh fruit intake and exercise levels²³

Efforts to improve obesity rates are more effective when they **combine approaches** to eating healthily, increasing physical activity and improving the environment for health²⁴

Systems **work together better** when similar language and messages are used across organisations and when action is rooted in local needs and experience²⁵



Frontline staff have an important role in promoting healthy weight

Identifying those at risk of obesity and signposting them appropriately to support services can lead to **individual weight reduction**²⁶



of people with obesity have felt stigmatised, including in healthcare settings. Only **1 in 4** felt they were treated with dignity when seeking support for their weight²⁷

Some healthcare staff lack the confidence to discuss weight, but using the right language can be acceptable to patients and effective for supporting weight management²⁷



What we were told through our engagement and consultation

- Knowledge about what services and support are available to people is one of the best ways staff can help people
- Those working with children and families often do not know about schemes such as Healthy Start
- Being joined up across the system will make lighter work for everyone
- It can feel uncomfortable and stigmatising to bring up people's weight when it is relevant to their health and wellbeing - knowing how to do this would be beneficial



Strategic objective 5

Ensure staff have the knowledge and skills to be confident and competent in promoting healthy weight and in supporting those living with obesity

What will be needed to achieve this?

- Support staff knowledge and skills development, specifically to promote understanding of the causes of obesity and its prevention and increase the use of resources and available support

What are we already doing to achieve this?

- Working to create a trauma-informed workforce that understands the impact of trauma on physical and mental health outcomes, supported by a system-wide training offer
- Embedding a personalised care approach to enable staff across STW Integrated Care System to deliver personalised care and have person-centred conversations with those they support
- Sharing a locally developed Physical Activity in Shropshire Guide for Healthcare Professionals to aid frontline practitioners in discussing, encouraging, and promoting physical activity

What more will we do to achieve this? In the first instance, we will be exploring:

The training needs of staff to understand and ensure they:

- have the knowledge, skills, and confidence to engage in sensitive conversations about healthy weight
- understand the root causes of obesity and the impact of stigma and discrimination
- feel confident and able to inform and educate those they are in contact with about the causes of obesity and how to prevent it
- are able to sign-post individuals at risk of unhealthy weight to resources, services and available support

Recognising also the nature of certain roles means some staff groups can benefit from a greater understanding of the psychological factors driving unhealthy weight and support individuals in maximising their income by raising awareness of benefits entitlement and how to access them.



Strategic objective 6

Enable organisations across the system to prioritise healthy eating and active living in their specific settings

What will be needed to achieve this?

- Establish a healthy settings approach across the system

What are we already doing to achieve this?

- Implementing the Creating Active Schools Framework as part of a national pilot led by Energize Active Partnership
- Creating Workplace Wellbeing Champions who support Shropshire Council employees by signposting to wellbeing resources and promoting access to available support
- Shropshire Council Thrive at Work Workplace Wellbeing Accreditation that focuses on creating a workplace that promotes employee mental and physical health and wellbeing including healthy lifestyles
- The NHS are likewise prioritising staff wellbeing post COVID-19
- Promoting access to weight management support for NHS staff living with obesity and weight-related conditions through the NHS Digital Weight Management Programme (DWMP) staff offer

What more will we do to achieve this? In the first instance, we will be exploring:

- How we and partners work together to develop a whole-settings approach to healthy eating and physical activity that involves schools, workplaces and early years settings and focuses on:
 - increasing access to and provision of healthy food
 - maximising opportunities for physical activity
 - developing staff knowledge, education, and skills to support healthy lifestyles
 - promoting and signposting individuals to the available services and support



Strategic objective 7

Ensure the system is working together in a co-ordinated way to maximise existing assets, resources, and best practice

What will be needed to achieve this?

- Ensure existing resources and assets are visible and shared across the system
- Align messaging and communications about healthier weight across the system

What are we already doing to achieve this?

- Promoting access to universal and evidence-based information and resources aimed at the public and those supporting them
- Keeping stakeholders updated with information from local NHS providers, Local Authorities, and other ICS partners through Collaborate, STW Integrated Care System's regular bulletin
- Promoting NHS STW's Healthier Together website as a trusted, local source of healthcare advice for parents, carers, young people, and professionals
- Expanding Shropshire's integration test & learn work to develop local family and community wellbeing centres. Using a preventive approach that recognises the importance of communities and health professionals working together to understand local needs and maximise existing assets and universal support available to enable people to access the right support at the right time for them

What more will we do to achieve this? In the first instance, we will be exploring:

- How to ensure evidence, guidance and existing assets and services are included in health and social care pathways, especially for more vulnerable groups including SMI, LD, SEND, physical disability and other key groups such as older people or women experiencing the menopause
- Development of key universal and targeted communications including key messages for the public, key messages and underpinning evidence for staff, and opportunities for sharing key messages

Further details relating to these actions and how progress will be monitored are included in appendix 2.



E

Excess weight

Excess weight refers to overweight or obesity.

F

Family Nurse Partnership (FNP)

FNP is a home visiting programme for first-time young mothers and families and is aimed at supporting a healthy pregnancy and improving child health and development.

Food environment

The food environment is the collective physical, economic, social, cultural, commercial surroundings, opportunities, and conditions which influence food consumption. It encompasses availability, price, promotion, accessibility, affordability, convenience, and desirability of food choices.

Food poverty

The inability to afford, or to have access to, food to make up a healthy diet.

Fuel poverty

A household is said to be fuel poor if it has above-average energy costs, and if paying those costs would push it below the poverty line as far as its remaining income is concerned. A house that spends at least 10 percent on its fuel costs is considered to be in fuel poverty.

H

Health and Wellbeing Board

Health and Wellbeing Boards (HWBB) bring key leaders from the health and care system together to improve the health and wellbeing of local residents. Board members collaborate to understand their local community's needs, agree priorities, and work together to plan how best to deliver services.

Health Inequalities

These are unfair and avoidable differences in people's health across the population and between different groups in the population. These include how long people are likely to live, the health conditions they may experience and the care that is available to them. Inequalities exist across a number of dimensions e.g., age, sex, ethnicity, socio-economic status. The cost of health inequality can be substantial for individual health but also for population health.



Healthy Child Programme

The Healthy Child Programme (HCP) is a framework for the delivery of a wide range of universal services for families from pregnancy to age 19 years, including maternity, health visiting, the Family Nurse Partnership, school nurses and schools-based programmes.

Healthy Pregnancy Support Service (HPSS)

The Shropshire Telford & Wrekin Healthy Pregnancy Support Service offers healthy lifestyle support including support to stop smoking and advice and support about healthy weight gain and lifestyle choices in pregnancy for those with a BMI of 30 or more.

Healthier weight

Evidence indicates that individuals who are overweight or obese can achieve health benefits through losing 5% to 10% of their body weight. However, despite weight loss an individual's weight may still not fall within the internationally defined healthy weight range of 18.5-24.9 kg/m² (i.e., not a healthy weight based on a measure of BMI only). Such individuals may still be overweight or obese but can be considered to be a healthier weight because their weight has moved towards the healthy weight category, and they could be experiencing other benefits such as improved mental wellbeing or an ability to be more physically active.

This strategy favours the term 'healthier weight' over 'healthy weight' because we recognise that weight is about more than only the numbers given by BMI and instead includes overall mental and physical wellbeing. For most people, being more physically active and eating a healthy and balanced diet will incur health and wellbeing benefits. Reductions in excess weight which occur as a result of this will very likely benefit our health. The term 'healthier weight' indicates our aspiration to focus less on the numbers and more on the way we can live healthy and happy lives. Consequently, our strategy is built on the concept of achieving a 'healthier weight' whilst striving for a 'healthy weight'.

Healthy weight

Healthy weight refers to those with a BMI between 18.5 kg/m² and 24.9 kg/m².

L

LCWIP

The LCWIP is the Local Cycling and Walking Infrastructure Plan which is a long-term plan covering many towns in Shropshire and aims to improve the safety, comfort and attractiveness of walking and cycling in Shropshire.



P

Personalised care approach

The Personalised care approach means people have choice and control over the way their care is planned and delivered. It is based on 'what matters' to them and their individual strengths and needs.

Physical environment

The physical environment is the built and natural places where people live, work, move and play. Built places are man-made and include offices, houses, roads, shopping centres and other building types, as well as facilities such as transport and leisure centres. Natural places include parks, forests, rivers, and other places where there is exposure to the living world.

Physical Activity

Physical activity is any movement of the body that uses up energy. It includes activities such as walking, running, dancing, housework, gardening, or other leisure time activities that use the body's energy stores. It also includes 'active travel' for example where people walk to work, cycle to work or walk to and from the bus-stop in order to get to work. For children, physical activity includes walking, cycling, and running but also play activities that require physical movement and the use of energy.

PHOF

PHOF refers to Public Health Outcomes Framework.

S

SEND

SEND refers to special educational needs and disabilities.

Shropshire Good Food Partnership

Shropshire Good Food Partnership brings together local food producers, retailers, and consumers to make Shropshire's food system more resilient, sustainable, and fair. The Partnership support the work of organisations across the county, catalyse new initiatives, and enable joined-up innovative thinking to improve access to good food and reimagine land stewardship.

SMI

SMI refers to severe mental illness experienced by individuals with psychological problems that can be so debilitating that their ability to engage in functional and occupational activities is severely impaired.

Social Prescribing

Social prescribing uses a person-centred, preventative approach by intervening early, before problems start to escalate. In Shropshire, people referred have the space to talk one-to-one with a trained Social Prescribing Advisor and come up with a plan of action together, to help resolve health and wellbeing concerns and help put the person back in charge of their life.



Solihull online antenatal support

The Solihull Approach is an evidence-based parenting programme with the aim of improving emotional health and wellbeing through relationships from the antenatal period through childhood into adulthood.

T

The system

The stakeholders, partners, organisations, and communities that work and support everyone who lives and works in Shropshire. This includes Shropshire Council, Shropshire, Telford & Wrekin Integrated Care System (NHS), the voluntary sector, charities, community groups, employers & businesses.

Trauma-informed workforce

A workforce that adopts trauma-informed practice that seeks to reduce the negative impact of traumatic experiences and supports physical and mental health outcomes. Trauma results from an event, series of events, or set of circumstances experienced by an individual as harmful or life-threatening.

U

Ultra Processed Foods

Ultra-processed foods typically have five or more ingredients. They tend to include many additives and ingredients that are not typically used in home cooking, such as preservatives, emulsifiers, sweeteners, and artificial colours and flavours. These foods generally have a long shelf life. They often contain high levels of fat, salt, and sugar. They include biscuits, some breakfast cereals, mass-produced bread, crisps, and others.

Underweight

Underweight is defined as a BMI < 18.5 kg/m².

Unhealthy weight

Unhealthy weight refers to those who are underweight, overweight, or obese as defined by their BMI.

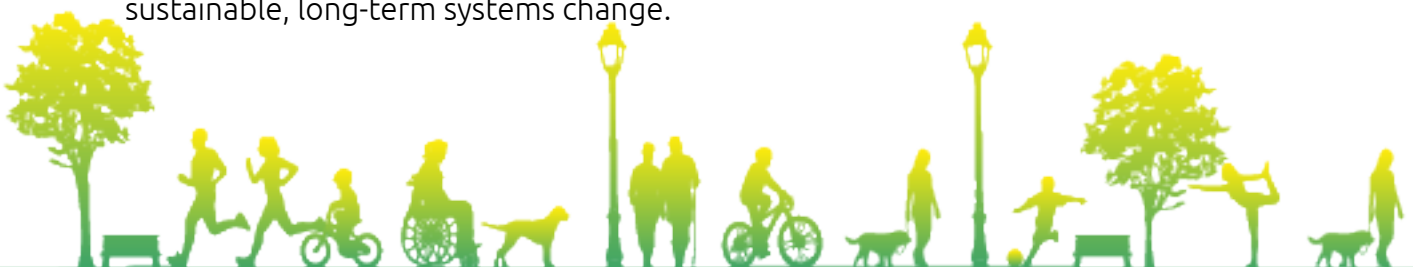
UNICEF Baby Friendly Initiative (BFI)

The UNICEF Baby Friendly Initiative supports breastfeeding and parent-infant relationships by working with public services to improve standards of care. Baby Friendly accreditation is based on a set of interlinking evidence-based standards which services implement in stages over a number of years.

W

Whole system approach

A whole system approach responds to complexity through an ongoing, dynamic, and flexible way of working. It enables stakeholders, including communities, to come together, to share an understanding of the challenge, consider opportunities for change, agree actions, and work together in an integrated way to bring about sustainable, long-term systems change.



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Appendices

The Healthier weight strategy includes:

Appendix 1 Example of available services and support

Appendix 2 High-level Action Plan

The following supporting information is available on request.

Please contact: cathy.e.levy@shropshire.gov.uk

Healthy Weight Health Needs Assessment Summary

Shropshire Healthy Weight Research report January 2023

CYP Engagement Report

Healthier Weight Strategy for Shropshire 2023 to 2028

Consultation Report September 2023



Appendix 1

Example of available services and support

The following provides a list of some of the lifestyle programmes, services and support available to support healthy weight in Shropshire.

<p>Shropshire Family Information Service (FIS)</p>	<p>Shropshire Family Information Service (FIS) provides free information, advice, and support on all aspects of family life. The FIS online directory features local and national organisations and services that support children, young people and families. For more information, visit Shropshire Family Information Service (0-19 years) Shropshire Council</p>
<p>NHS Shropshire Telford and Wrekin Healthier Together</p>	<p>Healthier Together provides advice for parents, young people and pregnant women, as well as clinical resources to support healthcare professionals. For more information, visit Home (stw-healthiertogether.nhs.uk)</p>
<p>The Shropshire Local Directory</p>	<p>The Shropshire Local Directory has been developed in partnership between Shropshire Council and QUBE and gives information on support organisations and groups in the towns and villages in Shropshire. For information, visit Find local support in Shropshire - Shropshire's Local Directory (shropshire-directory.co.uk)</p>
<p>Shropshire, Telford and Wrekin Energize Active Partnership</p>	<p>Energize is a local charity and part of Active Partnerships network working collaboratively with local and national partners to create the conditions for an active nation using the power of sport and physical activity to transform lives. For more information, visit Energize Shropshire, Telford & Wrekin (energizestw.org.uk)</p>
<p>Shropshire Council Leisure Services</p>	<p>Information on a wide range of activities for all ages and levels of ability, including a leisure time app to help with choosing and booking activities at your local leisure centre, and information on other partner leisure provision. For more information, visit Find a leisure centre or activity in Shropshire. Shropshire Council</p>



<p>Shropshire’s Great Outdoors</p>	<p>Information on outdoor activities in Shropshire including walking, cycling and other outdoor experiences, including Shropshire’s country parks. For more information including how to become a member of Shropshire’s Great Outdoors, visit Shropshire’s Great Outdoors (shropshiresgreatoutdoors.co.uk)</p>
<p>NHS Better Health programme</p>	<p>Designed to help people improve their health, lose weight, boost mood, get active and quit smoking.</p> <p>Free 12-week NHS weight loss plan to help with healthier eating habits, physical activity and weight loss. Includes free tools and support, BMI calculator, easy meals app, tips on healthy food swaps and eating well for less. For more information and to download free app, visit https://www.nhs.uk/better-health/</p>
<p>Healthy Lives (Social Prescribing & Health Coaching) behavioural support</p>	<p>Shropshire’s Healthy Lives (Social Prescribing and Health Coaching) programme is a non-medical approach designed to help people aged 18 years and over who are experiencing a wide range of social, emotional, or practical needs.</p> <p>Skilled Healthy Lives Advisors can offer free behavioural weight management and stop smoking support, as well as support with a wide range of issues such as loneliness and isolation, low level mental health concerns or long term conditions. For further information, visit https://www.shropshire.gov.uk/public-health/healthy-shropshire/social-prescribing-in-shropshire/</p>



<p>Healthier You NHS diabetes prevention programme</p>	<p>Free 9-month, evidence-based lifestyle change programme for adults at risk of Type 2 diabetes. The programme supports with making positive changes to your diet, weight, and physical activity to reduce risk of developing type 2 diabetes and is available both as face-to-face peer group and as a digital service.</p> <p>You can find out if you are at risk of developing type 2 diabetes by:</p> <ul style="list-style-type: none"> • Answering a few simple questions on the Know Your Risk tool via https://riskscore.diabetes.org.uk/start • Taking up offer of free NHS Health Check (available to eligible 40-74 year olds) to assess your risk of type 2 diabetes, cardiovascular disease and other conditions such as high blood pressure • Asking your GP Practice to check if you are at risk <p>For more information, visit NHS England » NHS Diabetes Prevention Programme (NHS DPP)</p>
<p>Structured diabetes education</p>	<p>Free X-Pert structured education for adults diagnosed with type 2 diabetes and free DAFNE structured education for adults diagnosed with type 1 diabetes delivered by Community Diabetes Specialist Nursing Service (Diabetes education team). For more information, visit Diabetes care to adults (shropscommunityhealth.nhs.uk)</p>
<p>NHS Healthy Living for people with type 2 diabetes</p>	<p>Free online NHS programme that can be used alongside other diabetes programmes or education. NHS Healthy Living supports people aged 18 years and over to live well with type 2 diabetes, or people who care for someone with type 2 diabetes.</p> <p>Includes a range of helpful information and advice, with no limit to access to allow individuals to learn at own pace. For more information, visit https://healthyliving.nhs.uk/</p>



<p>NHS digital weight management programme (DWMP)</p>	<p>NHS free 12-week online behavioural and lifestyle programme which supports adults living with obesity who also have a diagnosis of diabetes, hypertension or both, to manage their weight and improve their health. For more information, visit NHS England » The NHS Digital Weight Management Programme</p>
<p>NHS digital weight management programme for NHS staff</p>	<p>NHS staff can find out more and self-register via https://www.england.nhs.uk/supporting-our-nhs-people/support-now/digital-weight-management-programme-for-nhs-staff/</p>
<p>Healthy Pregnancy Support Service (HPSS)</p>	<p>The Shropshire Telford & Wrekin Healthy Pregnancy Support Service offers healthy lifestyle support including support to stop smoking and advice and support about healthy weight gain and lifestyle choices in pregnancy for those with a BMI ≥ 30 kg/m²</p>
<p>The Shrewsbury and Telford Hospital NHS Trust (SaTH) Integrated Tier 3/Tier 4 service (multi-disciplinary management of complex obesity)</p>	<p>The SaTH integrated Tier 3 and Tier 4 service is based at Royal Shrewsbury Hospital and provides specialist, multi-disciplinary medical and surgical management of complex obesity, via GP referral. Tier 3 support includes individual consultations and group sessions, psychological strategies to address long term unhelpful eating behaviours, dietary modification, emotional eating peer support and specialist interventions to support weight loss including medications e.g., Semaglutide (Wegovy). Tier 4 support includes bariatric (weight loss) surgery undertaken by the Bariatric and Upper Gastrointestinal Service.</p>



Appendix 2

High-level Action Plan

This action plan is an iterative document that will be developed and refined as the delivery progresses through the lifetime of the strategy. Alongside refinement of the actions, the measures for delivery will also be further developed to demonstrate progress, impact, and outcomes.

Delivery theme 1: Healthy environment		
<p>Strategic Objective 1:</p> <p>Enable a food environment for Shropshire which promotes and provides access to healthy, nutritious, and sustainable food for all</p>	<p>What will be needed to achieve this?</p> <ul style="list-style-type: none"> • Reduce food poverty • Increase the availability of healthy food in public places • Strengthen the local food system • Reduce exposure to unhealthy food in the wider environment 	<p>What are we already doing to achieve this?</p> <ul style="list-style-type: none"> • Increasing the uptake of Healthy Start food vouchers • Shaping Places Programme • HAF Programme • Community food initiatives e.g., OsNosh
What more will we do? Key priority actions:	Why?	Indicators of progress (data source)
Review the feasibility of moving to auto-enrolment for free school meals	Not all eligible children are currently receiving free school meals. Free school meals can help families with the cost of living, helping alleviate food poverty, that is associated with obesity	Number and proportion of eligible children taking up school meals (Department for Education)
Review the scope for further improving education around healthy food through the Holiday Activities and Food (HAF) Programme	HAF is already in place (pending government funding renewal), and there are good examples where healthy food has been provided. There is potential to improve nutrition education for participating families	Proportion of Reception and Year 6 children overweight and very overweight, by deprivation decile or Place Plan Area (NCMP/PHOF)
Consider ways to incorporate learning from the Shaping Places Programme to tackle food poverty across Shropshire	Shropshire has a higher-than-average proportion of families struggling with food insecurity and hunger. The Shaping Places Programme is a grant-funded programme which aims to understand how to tackle food poverty in rural areas. Learning from this Programme can be used to tackle food poverty in other areas across Shropshire	Proportion of households in food poverty; % experiencing hunger, % experiencing food insecurity (Local Government Association)



What more will we do? Key priority actions:	Why?	Indicators of progress (data source)
Maximise household incomes by increasing awareness of the level of unclaimed benefits in Shropshire and how individuals can apply for them	Obesity rates are higher in more deprived groups. More deprived groups spend proportionately more on food and often find unhealthy options more affordable. There is evidence of large-scale under-claiming of benefits. Increased uptake of unclaimed benefits can increase household income, increasing spending on healthier food	Number of households receiving Universal Credit (UC) and other benefits not included in UC, e.g., Council Tax Support, Personal Independence Payment etc (Department of Work & Pensions), Shropshire Council) Healthy Start uptake (Shropshire Council)
Identify opportunities to work with schools/academies to ensure healthy food provision in schools	Rates of overweight and obesity increase in school-aged children from Reception to Year 6. Whole school approaches to healthy weight can be effective in improving healthy eating when they combine intervention types	Proportion of Reception and Year 6 children overweight and very overweight, by deprivation decile or Place Plan Area (NCMP/PHOF)
Work with hospitals to provide sustainable and healthy food to patients, visitors and staff	Healthy food provision in hospitals is in line with NHS National standards for healthcare food and drink (2022) and NHS Long Term Plan commitment. It is important for the NHS to lead by example by providing healthy choices and minimising the provision of sugar sweetened beverages and foods high in sugar salt and fat	Proportion of Reception and Year 6 children overweight and very overweight and proportion of adults overweight and obese, by deprivation decile or Place Plan Area (NCMP/PHOF) TBC-NHS Food Standards indicators Proportion of adults meeting recommended 5-a-day fruit & vegetable consumption on a usual day (OHID)
Explore the potential to ensure food that is provided in public places is healthy and sustainable, including increasing water availability	Healthy food and water availability in public places will improve exposure to healthy food and allow public places to be 'exemplars'	Proportion of Reception and Year 6 children overweight and very overweight and proportion of adults overweight and obese, by deprivation decile or Place Plan Area (NCMP/PHOF) Proportion of adults meeting recommended 5-a-day fruit & vegetable consumption on a usual day (OHID)



What more will we do? Key priority actions:	Why?	Indicators of progress (data source)
Work effectively with the Shropshire Good Food Partnership	Shropshire has a higher than national average level of food poverty. It is also a food-producing county. We want to improve the local food system to improve i) supply and access of healthy food, ii) support local economy and local food growers, iii) support community development around healthy food, e.g. community food hubs/sharing and community growing	<p>Proportion of Reception and Year 6 children overweight and very overweight and proportion of adults overweight and obese, by deprivation decile or Place Plan Area (NCMP/PHOF)</p> <p>Proportion of households in food poverty; % experiencing hunger, % experiencing food insecurity (LGA)</p> <p>Proportion of adults meeting recommended 5-a-day fruit & vegetable consumption on a usual day (OHID)</p>
Explore planning opportunities to reduce exposure to unhealthy food in the wider environment	There are opportunities within the planning system to enable the provision of healthier food, for example through incorporating 'growing spaces' within new developments or through limiting the proliferation of unhealthy food and drink, including alcohol	<p>Proportion of Reception and Year 6 children overweight and very overweight and proportion of adults overweight and obese, by deprivation decile or Place Plan Area (NCMP/PHOF)</p> <p>Proportion of adults meeting recommended 5-a-day fruit & vegetable consumption on a usual day (OHID)</p>
Opportunities to work with planners to improve access to healthy food options through new development planning, including improving access to healthy food shops and provision of community growing initiatives	There are opportunities within the planning system to enable the provision of healthier food, for example through incorporating 'growing spaces' within new developments or through limiting the proliferation of unhealthy food and drink, including alcohol	<p>Proportion of Reception and Year 6 children overweight and very overweight and proportion of adults overweight and obese, by deprivation decile or Place Plan Area (NCMP/PHOF)</p> <p>Proportion of adults meeting recommended 5-a-day fruit & vegetable consumption on a usual day (OHID)</p>



<p>Strategic Objective 2:</p> <p>Support the development of a physical environment that allows Shropshire residents to enjoy the benefits of active living</p>	<p>What will be needed to achieve this?</p> <ul style="list-style-type: none"> Decrease sedentary behaviour and increase opportunities to be physically active throughout the work and school day as well as during leisure time with particular emphasis on those vulnerable to health inequalities and for whom access is not equitable Increase public and active travel opportunities 	<p>What are we already doing to achieve this?</p> <ul style="list-style-type: none"> Shropshire’s Physical Activity Guide for Healthcare Professionals resource Social prescribing Enabling active travel through improved walking and cycling plan (LCWIP)
<p>What more will we do? Key priority actions:</p>	<p>Why?</p>	<p>Indicators of progress (data source)</p>
<p>Identify opportunities to increase access, proximity and use of recreational spaces that enable physical activity into new development planning</p>	<p>Planning has a key role in influencing the healthy physical environment and has the potential to make it healthier</p>	<p>Proportion of physically active/inactive children and adults (OHID)</p> <p>Proportion of residents visiting natural environment for health or exercise (OHID)</p>
<p>Enable schools and early years settings to maximise opportunities to increase movement and physical activity before, during and after the school day</p>	<p>Whole school approaches to healthy weight can be effective in improving physical activity levels when they combine intervention types</p>	<p>Proportion of physically active/inactive children (OHID)</p>
<p>Support employers to promote a way of working that increases opportunities for physical activity during and around the working day for employees</p>	<p>Workplace interventions can increase healthy eating and physical activity among employees whilst noting that more than 20% of Shropshire’s working population Work From Home</p>	<p>Proportion of physically active/inactive children and adults (OHID)</p> <p>Proportion of adults walking or cycling for travel for at least 3 days per week (OHID)</p>
<p>Promote and optimise use of existing assets which support physical activity, including open green space, leisure centres, community physical activity options and initiatives. Access for those most vulnerable and with most barriers to access should be prioritised</p>	<p>Shropshire has a number of assets that support physical activity including the natural environment, rivers, parks and sports and activity clubs and classes. There needs to be more awareness of these opportunities and more equitable access/use of these resources</p>	<p>Proportion of physically active/inactive children and adults (OHID)</p>



Delivery Theme 2: Prevention in early years

<p>Strategic Objective 3:</p> <p>Ensure there is opportunity for all pregnancies to be healthy</p>	<p>What will be needed to achieve this?</p> <ul style="list-style-type: none"> • Provide lifestyle support for pregnant women, particularly those most at risk of unhealthy weight or its consequences 	<p>What are we already doing to achieve this?</p> <ul style="list-style-type: none"> • Local Maternity & Neonatal System (LMNS) • Solihull online antenatal support • Shropshire Telford & Wrekin Healthy Pregnancy Support Service (HPSS)
<p>What more will we do? Key priority actions:</p>	<p>Why?</p>	<p>Indicators of progress (data source)</p>
<p>Local Maternity & Neonatal System (LMNS) to ensure recommended healthy pregnancy information is available before and throughout pregnancy including information on healthy diet, physical activity, appropriate weight gain and good mental wellbeing</p>	<p>Access to up to date, consistent information is key to supporting the knowledge of frontline practitioners enabling them to better advise families. Providing information to families through nationally and locally produced resources can help families adopt healthier behaviours that protect against unhealthy weight</p>	<p>Proportion of women obese at early pregnancy i.e., at booking by deprivation decile/Place Plan Area (OHID, Shropshire Council)</p>
<p>Target those most at risk of maternal obesity – providing access to Healthy Pregnancy Support Service (HPSS) and potentially additional antenatal support as/when this becomes available. In order to provide on-going support, the pathway between Healthy Pregnancy Service and Social Prescribing needs to be strengthened</p>	<p>The HPSS provides additional weight management support to pregnant women with a BMI\geq30. Referrals to Social Prescribing can be made from the HPSS through which more sustained support for families can be accessed</p>	<p>Proportion of women obese in early pregnancy i.e., at booking by deprivation decile/Place Plan Area (OHID, Shropshire Council)</p> <p>Number of referrals to HPSS and from HPSS to Social Prescribing</p>



<p>Strategic Objective 4:</p> <p>Support parents and families to provide infants with the best start in life</p>	<p>What will be needed to achieve this?</p> <ul style="list-style-type: none"> • Support and promote an increase in breastfeeding, particularly for younger and more deprived groups • Support and promote healthy weaning • Support parents and families to live healthily and introduce healthy eating and physical activity habits from early infancy • Enable early years professionals and early years settings to promote and support healthy eating and physical activity 	<p>What are we already doing to achieve this?</p> <ul style="list-style-type: none"> • Shropshire’s Healthy Child Programme • Shropshire’s Oral Health Programme • Shropshire, Telford & Wrekin Infant Feeding Strategy
<p>What more will we do? Key priority actions:</p>	<p>Why?</p>	<p>Indicators of progress (data source)</p>
<p>Explore through the LMNS opportunities to develop local action plans to support delivery of the Infant Feeding Strategy</p>	<p>A STW-wide Infant Feeding Strategy has been developed and delivery needs to be supported through the development of local action plans. There is evidence of the positive relationship between breastfeeding and subsequent obesity risk. Evidence indicates that rapid weight gain in infancy may predict later obesity and parent-reported infant food intake exceeds infant energy needs</p>	<p>Proportion of mothers breastfeeding at first feed and 6-8 weeks, by deprivation decile or Place Plan Area (OHID)</p>
<p>Explore feasibility of developing a pathway for provision of baby formula for families experiencing food poverty e.g., via the welfare support team</p>	<p>Healthy Start vouchers don’t reflect the cost of infant formula. There is some national (and perhaps local anecdotal) evidence of formula feed being diluted and/or fortified with other foods so that infant appetites are sated. Early introduction of foods other than breast milk/formula is associated with obesity risk. Formula poverty raised by LMNS as an area of concern</p>	<p>TBC</p>



What more will we do? Key priority actions:	Why?	Indicators of progress (data source)
LMNS to promote awareness of the importance of a healthy introduction to solid foods for infants, including dissemination of recommended national resources for both the public and practitioners (links to Healthy Child Programme/Best Start for Life)	Evidence indicates that formula fed infants introduced to solid foods before 4 months of age are significantly more likely to be obese at 3 years. National reports indicate that parents are also under pressure to purchase unnecessary processed foods based on misleading industry marketing	Proportion of Reception and Year 6 children overweight and very overweight, by deprivation decile or Place Plan Area (NCMP/PHOF)
Explore opportunities through LMNS and Best Start for Life work programmes to strengthen and improve the targeting of healthy eating and physical activity advice/resources for infants through antenatal education and onward parenting support	Rapid weight gain and overweight during infancy are consistently associated with a higher risk of obesity in childhood and adult life. There is evidence that infants are overfed and that some gain weight too rapidly. There is also evidence that infants/toddlers do not meet physical activity recommendations. Information and support provided in the antenatal period can be effective in providing infants with a better start in life, as can on-going parenting support	Proportion of Reception and Year 6 children overweight and very overweight, by deprivation decile or Place Plan Area (NCMP/PHOF)
Explore feasibility of developing a standardised approach towards identifying infants at risk of obesity and a pathway for onward support for those at greatest risk	Currently there is no standardised approach to identifying infants at risk of obesity. However, research has shown that rapid weight gain in infancy is the strongest predictor of a child becoming overweight. Crossing just one centile for weight during the first year of life is associated with fourfold increase in the risk of overweight or obesity in childhood	Proportion of Reception and Year 6 children overweight and very overweight, by deprivation decile or Place Plan Area (NCMP/PHOF) Other specific indicators TBC



What more will we do? Key priority actions:	Why?	Indicators of progress (data source)
<p>As part of support to infants at risk of obesity, develop bespoke family-based healthy lifestyle support offer interfacing with existing services including the Healthy Pregnancy Support Service (HPSS), Health Visiting and Social Prescribing. Links to pathway development for infants at risk of obesity. The service will also be inclusive of NCMP follow-up</p>	<p>Current gap for families in securing Healthy Weight 'support', as a continuation of support provided through HPSS, HV services and/ or following NCMP measurement. Evidence supports the provision of advice in understanding feeding cues, the need for active play and adequate sleep in promoting healthy weight. Healthy Lives Team currently trained in behavioural support strategies and techniques and able to signpost/refer. Consistent with personalisation agenda. Interventions to promote responsive feeding/responsive parenting have been shown to be effective in supporting a healthy pattern of early growth</p>	<p>Proportion of Reception and Year 6 children overweight and very overweight, by deprivation decile or Place Plan Area (NCMP/PHOF)</p> <p>Service-specific indicators TBC</p>
<p>Identify ways of working with early years settings and professionals to enable them to (i) support healthy eating and physical activity, and (ii) identify parents and families in need of healthy lifestyles support and facilitate their access to existing services and offers</p>	<p>The Scientific Advisory Committee on Nutrition (SACN) report for infant feeding aged 1 to 5 years highlights that larger portion sizes of snacks and meals provided in preschool settings are associated with higher food and energy intake</p>	<p>Proportion of Reception and Year 6 children overweight and very overweight, by deprivation decile or Place Plan Area (NCMP/PHOF)</p>



Delivery Theme 3: Empowering system partners

<p>Strategic Objective 5:</p> <p>Ensure staff have the knowledge and skills to be confident and competent in promoting healthy weight and in supporting those living with unhealthy weight</p>	<p>What will be needed to achieve this?</p> <ul style="list-style-type: none"> Support staff knowledge and skills development 	<p>What are we already doing to achieve this?</p> <ul style="list-style-type: none"> Trauma-informed approach: workforce training offer STW Personalised Care approach Physical Activity in Shropshire Guide for Healthcare Professionals
<p>What more will we do? Key priority actions:</p>	<p>Why?</p>	<p>Indicators of progress (data source)</p>
<p>Identify the training needs of staff ensuring they:</p> <ul style="list-style-type: none"> (i) have the knowledge, skills, and confidence to have sensitive conversations about healthy weight (ii) have an understanding of the determinants of obesity and the impact of stigma and discrimination (iii) have competence in educating colleagues, patients, service users, parents, families about the causes of obesity and how to prevent it (iv) are able to sign-post individuals at risk to the available resources, services, and support <p>Some staff groups in particular will benefit from:</p> <ul style="list-style-type: none"> (i) an enhanced understanding of the psychological factors driving unhealthy weight (ii) being able to support individuals in knowing their entitlement to benefits and how to access them <p>To include NHS (LMNS, Health Visitors, School Nurses), staff in early years settings social care staff: children's social care (Looked After Children (LAC), foster parents), learning disabilities support staff, mental health staff, staff in schools</p>	<p>Making Every Contact Count (MECC) approach.</p> <p>Well-trained staff can better support individuals in achieving healthier weight and increase access to services and resources.</p> <p>Having well-trained staff can also reduce stigma and discrimination experienced by those with obesity. Frontline staff (especially those working with families) would benefit from a deeper understanding of the psychological factors that influence eating behaviours and those working with more vulnerable groups need to be able to support patients/clients in accessing advice/support to claim benefits</p>	<p>Proportion of Reception and Year 6 children overweight and very overweight and adults overweight and obese, by deprivation decile or Place Plan Area (NCMP/PHOF)</p> <p>Proportion of physically active/inactive children and adults (OHID)</p> <p>Proportion of adults meeting recommended 5-a-day fruit & vegetable consumption on a usual day (OHID)</p> <p>Number of referrals to NHS digital weight management programme</p> <p>Referrals, take-up, and completion of Diabetes Prevention Programme</p> <p>Referrals, take-up and various outcomes of Social Prescribing</p>



<p>Strategic Objective 7:</p> <p>Ensure the system is working together in a co-ordinated way to maximise existing assets, resources and best practice</p>	<p>What will be needed to achieve this?</p> <ul style="list-style-type: none"> • Ensure existing resources and assets are visible and shared across the system • Align messaging and communications about healthier weight across the system 	<p>What are we already doing to achieve this?</p> <ul style="list-style-type: none"> • Shropshire, Telford & Wrekin Personalised Care approach • NHS Shropshire, Telford & Wrekin system collaborative networking Collaborate Newsletter
<p>What more will we do? Key priority actions:</p>	<p>Why?</p>	<p>Indicators of progress (data source)</p>
<p>Ensure the inclusion of evidence, guidance and existing assets and services within health and social care pathways especially for more vulnerable groups (SMI, LD, SEND, Physical Disability etc) and other key groups including older people</p>	<p>There are national resources and nationally and locally commissioned services that are universally available that are aimed at either preventing or treating obesity. In addition, Shropshire has a range of different assets and support services that are likewise universally available. Front-line staff and the public in general are not all aware of what is available and hence access to these resources is inequitable</p>	<p>As above - see Strategic Objective 5</p>
<p>Work together to develop key shared communications (universal and targeted) the scope of which will include:</p> <ul style="list-style-type: none"> • key messages for public • key messages/evidence for staff • opportunities for sharing messages 	<p>Conflicting messages relating to food, physical activity and weight in general are unhelpful, creating confusion and can ultimately lead to disengagement. Furthermore, messages relating to overweight and obesity can further reinforce stigma and discrimination. In addition, staff are not always aware of the services and support that are available and consequently resources are under-used and there is inequitable access reflecting the differences in staff knowledge</p>	<p>As above - see Strategic Objective 5</p>





Healthier Weight Strategy for Shropshire 2023-2028

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