

# Hawke's Bay Healthy Weight Strategy

A lifespan approach to direct and coordinate activity to increase healthy weight 2016-2025

April 2015

#### **Overview**

Our Hawke's Bay Healthy Weight Strategy has a lifespan approach, to provide direction and coordination for the varied activities and sector engagement needed to support healthy weight. This Strategy is informed by national and international evidence, including the benefits of earlier intervention and addressing the obesegenic environment. Stakeholder and community engagement provided guidance for delivery including using a whānau approach, building on existing success and addressing inequity.

The Hawke's Bay Healthy Weight Strategy (see framework on page 6) includes:

- Investment in the early years and prevention
- A cross-sector leadership and activity to deliver prevention and intervention
- Influencing the wider obesegenic environment through role modelling, supporting workplaces, event management, policy changes and working with retailers
- Work with Pasifika, Māori and high deprivation communities to make the greatest gains in health and reduce inequity
- Interventions integrated with healthy lifestyle change supporting whānau to achieve their health goals and use a whole of community approach

#### Why is a healthy weight strategy important?

A strategy provides direction by identifying the issues, evidence and best practice. It also supports coordination by identifying shared outcomes and aligning activity. A single document supports key stakeholders to contribute to change.

A third of our population are obese, 48% and 68% for Maori and Pacific populations respectively. Obesity is the second leading risk to health in New Zealand. Not addressing obesity, will lead to a range of diseases with high personal and sector health costs. A recent report has also highlighted a number of alarming non-health obesity impacts.

People who are obese are more likely to earn less, have more time off work, experience discrimination and retire earlier than people with healthy weight. Obesity also impacts adversely on educational achievement and employment opportunities. (*The wider economic & social costs of obesity*, January 2015 New Zealand Institute of Economic Research).

Obesity rates are increasing due to increasingly sedentary lifestyles that include calorierich, nutrient-poor food which is readily available, heavily marketed and low-cost.

While the cause is simple the systems we need to change to reduce obesity and increase healthy weight are complex. Culture, economics, access, knowledge, family structure, working patterns, government policy and genetics all play a part in what we choose to eat and the amount of physical activity we do.

Due to this "complex system" there is no simple or single solution which will "fix" the problem. Any interventions we put in place need monitoring to assess impact and be flexible enough to adapt and address problems as they arise. A coordinated approach is vital to change "complex systems"

Unlike tobacco where the message is simple - don't start smoking or quit, messages around food and exercise requirements are often unique for each individual or population group. There is also a wide range of influencers who can support increases in healthy weight and health gains including employers, retailers, food manufacturers, education sector, government departments, families and lwi.

#### What did the evidence tell us?

- Early behaviours are influential on long term health, for example children of obese parents are much more likely to be obese throughout their life.
- Children who have mothers with a healthy weight pre-conception, and are breastfed are more likely to maintain healthy weight over their lifetime.
- Children in families who eat healthy food at structured mealtimes with minimal added sugar, salt and fat are more likely to develop healthy eating behaviours.
- Primary school-aged children who are regularly active and receive healthy eating messaging as part of a structured intervention (i.e. Project Energise in Waikato) can lower body waist index, girth size gain fitness, strength and speed and demonstrate increased healthy literacy.
- Children can influence the health behaviours of their whānau and community. The best example of this is seat belt use, children are the messengers who encourage everyone to wear seatbelts through targeted health promotion messages.
- There is limited evidence internationally showing long-term success for reversing obesity in adults.
- Older adults lack information about nutrition requirements for their age group, if they get this information there is a reduction in falls and malnutrition (Hawkes Bay Older Adult Nutrition Project findings).

#### What did the stakeholder and community input say?

The input from these groups and people reinforced the evidence. The following are the feedback themes.

- Focus needs to be wider than the individual and include whānau and the environmental influences.
- Equity issues need to be addressed.
- Community and whānau engagement in programme design and delivery is critical in achieving sustainable outcomes.
- Build on existing effective initiatives to gain the benefit of existing networks, skill and community linkages.

#### What is best practise?

- Multiple coordinated approaches work. Any single intervention is likely to have only a small impact.
- Early intervention is the most effective, i.e. maternal weight effects child weights.

- Education and personal responsibility are critical elements of any programme but are not sufficient on their own.
- Changes to the environment and societal norms are needed to "reset the defaults" to make healthy behaviours easier.
- Action needs to occur across sectors. No individual sector can address obesity.
- Health sector needs to provide leadership.
- A co-ordinated programme using combination of top-down corporate and government interventions with bottom-up community led activities and initiatives are needed.

#### What is needed in a healthy weight strategy?

- Investment in the early years of life.
- All activities delivering consistent messages across the age groups.
- A cross-sector plan for action with health sector leadership to increase healthy weight.
- Influence in the wider obesegenic environment through role modelling, supporting workplaces, supporting healthy events, policy changes and working with retailers.
- Targeting Pasifika, Maori and high deprivation communities to make the greatest gains in health and reduce inequity.
- Integration with healthy lifestyle change supporting whānau to achieve their health goals and using a whole of community approach

#### What are the Hawke's Bay Healthy Weight Strategy's key outcomes?

Objective		Description
1.	Increase healthy eating environments, by increasing healthy eating choices and physical activity, and reducing sugar	Addressing the environment by increasing healthy food choices in settings that children engage with including; education, marae, events and communities. Advocating for changes in marketing, retail and councils. Also reducing access to sugar i.e. Water Only Schools, SSB Free Events and support whānua to make informed consumer choices. Support usage of physical activity i.e. i-Way, Active Transport, promoting movement at work
2.	Develop and deliver prevention programmes – via food literacy, maternal nutrition, sugar reduction, physical activity and policy	Implementing programmes which support healthy eating and physical activity for pregnant women, support breastfeeding, encourage healthy first foods, support whānau with healthy lifestyle changes, reduce sugar intake and school programmes which reinforces healthy eating messages and engage whānau in existing programmes shown to prevent the health risks associated with weight gain by maintaining healthy weight.
3.	Intervention – support people to have healthy weight	Screening programmes identify weight issues early and address weight gain via education, increases food literacy and whānau programmes.  Screening during pregnancy, and under five confer the greatest benefits over a lifetime.
4.	Provide leadership in healthy eating	A population wide improvement in healthy eating requires a cross-sector approach, the HBDHB is ideally placed to provide leadership across sectors and support key stakeholders in promoting healthy food environments, prevention programmes and early intervention.

### How will we coordinate the delivery?

"A Hawke's Bay Healthy Weight Strategy" (Framework page 6)) provides a lifespan approach to support coordination and alignment, for services, messages, initiatives and monitoring. The table below uses the Strategy's age groups and key outcomes areas to show where this coordination and alignment occurs for health services supporting child healthy weights.

Strategy Groups	Environment	Prevention	Intervention	Leadership
0-4 years	Advocacy to change marketing practices Policy support for ECEs-MoH Licensing Criteria	Resources to support breastfeeding, first foods – maternity services, Well Child/Tamariki Ora Early engagement with LMC and oral health services Messages- media community	Workforce development/screening tools/resources- midwives, Well Child/Tamariki Ora, and B4 School Check Clinical pathway- pediatric dietetic services	Breastfeeding Strategy National Obesity Plan Primary caregeneral practice and LMCs Well Child/Tamariki Ora health network Māori Health Plan TAW targets
5-12	Policy support for schools Advocacy-Health Promoting Schools programme	Consistent messaging  -Health Promoting Schools, nutrition programmes, Fruit in School, PHNs, Water Only Schools	Supporting whānau based programmes- Sport HB, Iron Māori, community providers General practice Secondary services	MoE, principals, school boards National Obesity Plan
13-18	Policy support for schools- MoE	Food literacy Workforce development- PHNs, teachers, community workers	School clinics General practice	HB Youth Health Strategy National Obesity Plan
19- 64	Food environment survey	Food literacy National messaging Maternal nutrition Community nutrition and physical activity programmes	Primary care screening Workplace screening Diabetes services Bariatric surgery GRx- Adult	Leading community initiatives Local government
65+	Clear nutrition and physical activity messages for settings i.e. residential care	Eat and Enjoy programme Community physical activity programmes	Primary care screening Nutrition advise	Elder care services

Childhood/Tamariki 5-12 years



Effective: in structured settings, combine physical activity and nutrition, influences families/community

Adolescents/Rangatahi 13-18 years



Can support good habits (weight and oral health), pre maternal health

Adults/Pakeke 19-64 years



Influenced by environmental factors ie: socio-economic

Seniors/Kaumatua 65+ Years



Screening reduces risks - early advice and information, social eating

## Leadership prevention, intervention and environment change

Breastfeeding strategy
Healthy pregnancies
Healthy First Foods
GDM support

Early Childhood Educationincluding Kohanga Young women - improving health prior to and during

pregnancy

Fruit in schools
Active Families
Health Promoting Schools



Coordinated programme in schools

Health Promoting Schools
Public Health Nurses



Addressing sugar sweetened beverages
School healthy eating policies
Pre maternal health

Green Prescription
Active Transport
KHW
Bariatric surgery

Healthy eating environments
Settings approach - retailers,
workplaces, events
Links to healthy lifestyle
programme

Eat and Enjoy Kaumatua Fit

Complete the roll out of Eat and Enjoy programme

Continue investment in the Maternal Nutrition programmes

Seek
investment in a primary
school programme
for decile one and two
Schools

Work with existing programmes to support healthy eating policies in schools

Target
settings - workplaces,
events and retailer to improve
healthy eating and activity
environment

Support the Eat and Enjoy programme

**CURRENT ACTIVITY** 

**OPPORTUNITIES/INFLUENCE**