

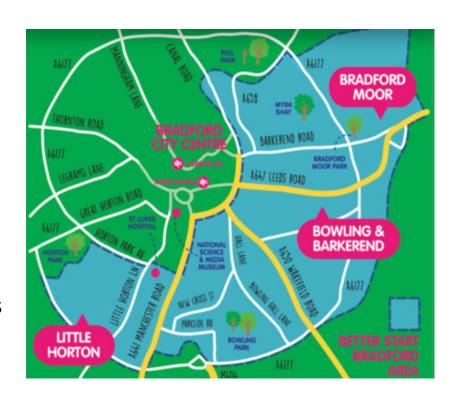
# Better Start Bradford & Health and Nutrition

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#### **Better Start Bradford**

- 10 Year National lottery Community funded programme -2015 – 2025
- Bowling and Barkerend, Bradford Moor and Little Horton postcodes
- Formally evaluated with Better Start **Bradford Innovation Hub**
- Increase the evidence of what works for young families in deprived communities
- To inform wider practice both locally and nationally.













## **Programme Objectives:**



**Social and Emotional Development** 



**Language and Communication Skills** 



**Health and Nutrition** 



































# **System Change**



















Baby Week Bradford is back from 14-20 November 2023 with:

Bradford Babies, Healthy Babies: READY, STEADY, GROW!



Check out the programme of free events and activities by scanning the QR code















# Why Health and Nutrition

#### Aim

Empower you to consider how you can support healthy weight and nutrition of babies in Bradford

### **Objectives**

- To give an overview of why living with overweight and obesity in pregnancy and early childhood is a problem in Bradford
- To raise awareness of what healthy weight and nutrition services exist across Bradford
- To discuss an example where a Better Start Bradford project is making a difference











#### **Bradford population**

- High proportion of children, 38% in relative low income (England average 18.5%)
- 2/3 (66.4%) of adults classified as overweight or obese (England 63.8%)
- >1 in 5 (1,535 children, 23%) living with overweight or obese at reception age (4-5 years)
- > 2 in 5 (3,000 children, 41%) living with overweight or obese at year 6 (10-11 years)

Indicator	Period	Bradford			Region	England	England England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
Reception: Prevalence of underweight (Persons, 4-5 yrs)	2021/22	<b>→</b>	120	1.8%	1.1%	1.2%	4.6%	•	0.3%
Year 6: Prevalence of underweight (Persons, 10-11 yrs)	2021/22	<b>→</b>	160	2.2%	1.4%	1.5%	4.4%	•	0.6%
Reception: Prevalence of overweight (including obesity) (Persons, 4-5 yrs)	2021/22	<b>→</b>	1,535	23.2%	23.7%	22.3%	28.9%	O	12.9%
Year 6: Prevalence of overweight (including obesity) (Persons, 10-11 yrs)	2021/22	•	3,000	41.5%	39.2%	37.8%	49.1%		16.9%
Reception: Prevalence of obesity (including severe obesity) (Persons, 4-5 yrs)	2021/22	<b>→</b>	755	11.4%	11.0%	10.1%	14.9%		3.9%
Year 6: Prevalence of obesity (including severe obesity) (Persons, 10-11 yrs)	2021/22	•	1,950	27.0%	24.9%	23.4%	34.0%		7.7%
Reception: Prevalence of severe obesity (Persons, 4-5 yrs)	2021/22	<b>→</b>	230	3.5%	3.2%	2.9%	5.8%		0.9%
Year 6: Prevalence of severe obesity (Persons, 10-11 yrs)	2021/22	•	530	7.3%	6.4%	5.8%	10.4%	•	1.1%

Office for Health Improvement and Disparities Child and Maternal Health Profiles





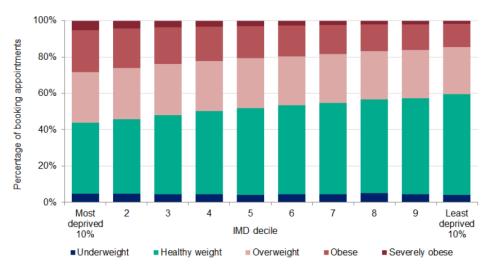






#### **Health inequalities**

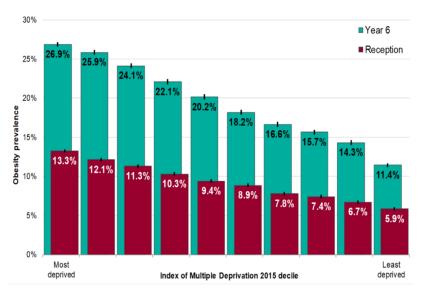
Figure A18b: Known maternal BMI at booking by decile of deprivation of mother's residence, maternity booking appointments January to December 2017 (BMI category by proportion of total in decile)



The proportion of women living with excess weight or obesity in early pregnancy rises with deprivation

PHE (2019) Health of women before and during pregnancy

2018 to 2019 National Child Measurement Programme data



Nationally obesity rates are more than twice as high in the most deprived populations for children (Office for Health Information and Disparities 2022) Percentage of obesity prevalence by index of multiple deprivation decile



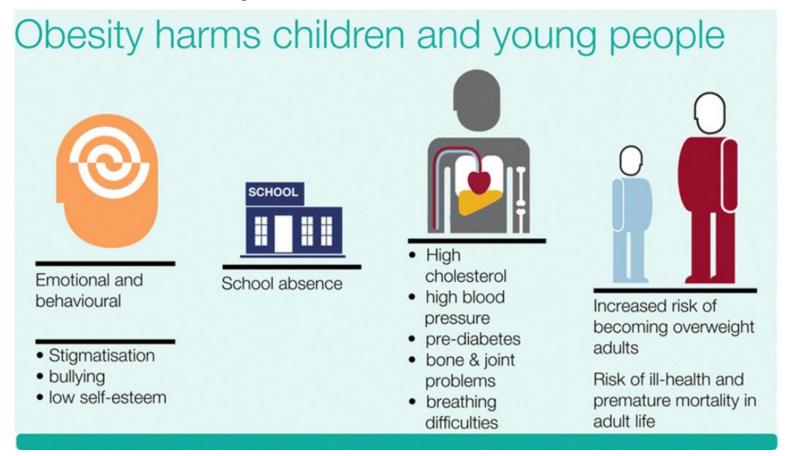








### Harms of obesity



Obesity harms for children and young people. Office for Health Improvement and Disparities (2022).











#### Living with overweight and obesity in pregnancy

#### Office for Health Improvement and Disparities

#### Maternal health

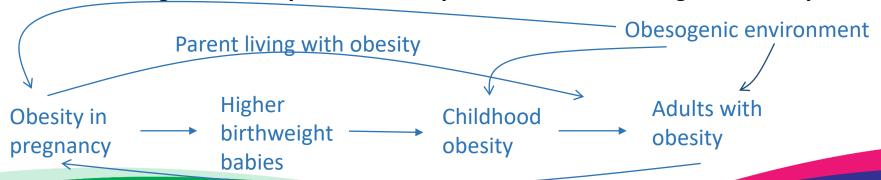
- Half of women are living with overweight or obesity at first midwife appointment
- Association between maternal obesity and higher birthweight babies, and subsequent childhood obesity

#### Parental health

 Children living with at least one parent or carer who is living with obesity are more likely to be at risk of growing up overweight themselves

In addition,

Children living with obesity are more likely to become adults living with obesity













### Living with overweight or obesity in pregnancy

Green top guideline 72: Care of Women with obesity in pregnancy (2018)

- Obesity is now one of the most common risk factors in obstetrics
- All pregnant women should have their BMI calculated at the antenatal booking visit – opportunity to intervene at booking visit

PHE(2019) Health of women before and during pregnancy: health behaviours, risk factors and inequalities

- The proportion of women who are overweight or obese during pregnancy increases with age, with the highest proportion being in those aged over 40 – opportunity to target preconception, particularly older women considering pregnancy
- A higher proportion of women booking for a subsequent pregnancy (23%) were obese than those in their first pregnancy (18%) opportunity to intervene between pregnancies
- Around 19% did not have their BMI recorded opportunity to increase BMI measurement and intervention











# Facilitators and Barriers influencing weight management during pregnancy

Meta-synthesis of qualitative research by Sanchez et al.,(2022)

- 1. Awareness and beliefs about weight gain and weight management
- Level of awareness and knowledge about dietary and exercise recommendations
- Risk perception
- Perceived control over health and weight gain
- Personal insecurities
- Antenatal healthcare
- Interactions with healthcare professionals
- Quality of the education received
- Social and environmental influence
- Social judgement and stigmatisations associated with overweight and obesity











# Barriers to health promotion for CYP living with overweight or obese and their families

- 1. lack of time, training and resources
- 2. parental motivation and response
- the 'new normal'

Systematic review by Johns and Brimble (2022)

## Other challenges

- National funding cuts to public health and health visiting services
- Structural changes such as the removal of children's centres
- Better Start Bradford funding ending
- 3 year funding for Reducing Inequalities in Communities and Start for Life











#### Aim of this work

- Wider whole systems approach
- Overview of projects and services that focus on individuals and families in Bradford related to Healthy Weight and Nutrition in Pregnancy and for Children and Young People across the Bradford District









## Ways of categorizing services

#### Levels/tiers

- Level 1 getting advice universal offer may be limited to a specific geography or population
- Level 2 additional needs
- Level 3 extensive support

Targeted support – levels 2&3

#### Safeguarding, crisis and inclusivity to be considered throughout

- concerns about weight might trigger a safeguarding concern
- include those with special educational needs



The thrive model











Early Years School age Pregnancy Stage of life course Safeguarding, crisis and inclusive access to services to be considered throughout Level 2 Level 1 Level 3 Level 1 Level 2 Level 3 Level 1 Level 2 Level 3 District wide Public health nursing Public health nursing Children and Antenatal Healthy Start Healthy Healthy Start Complications of Complications of children's service children's service Families Living care scheme lifestyles in scheme and **Excess Weight** Excess Weight (includes infant (CEW) Clinic (WY (if on certain Pregnancy vitamins Well Service (CEW) Clinic (WY clinic ICS, severely **Living Well Faith Settings** Bradford Antenatal benefits) feeding support) (under 4s if on ICS, severely obese (Bradford) certain benefits) obese plus co-Council (2plus co-morbidity) classes Breastfeed Together (Islamic Religious (Bradford) Bradford (peer support) morbidity) Settings) 19yrs, Encouraging Adult tier 3 HENRY Children and BMI>ideal) Exercise in obesity Families Living Well **Regional Obesity Living Well Schools** Regional Obesity **Healthy Start** People ('BEEP', vitamins services **Healthy Start** Service Bradford clinic (severely (whole school approaches clinic (severely vitamins (midwife long term (Airedale) Council (2-19 yrs, obese plus coto food) obese plus cobooking appt) health condition Health visitor (0-6 BMI>ideal) morbidity) morbidity) or BMI>25) months) **General Dietetic Outpatients** Paediatric Dietetics Airedale and Paediatric Dietetics Airedale and Bradford (under care of GP or (very high BMI, referred by Bradford (under care of GP or maternity) Airedale and Bradford paediatrician at that hospital and not paediatrician at that hospital and not eligible for other services) eligible for other services) Better Start Bradford Personalised Breastfeeding midwifery (BSB) - families living in support a BSB postcode area (randomly (Mar '24) (contract end date) allocated) Bradford Cooking for a Better Start 0-3 yrs (Mar '24) Doulas (May (24) Baby Steps BSB - HENRY 0-3 yrs (Jul '24) (Sep '24) Reducing Inequalities Personalised Healthy Families at Living Well Schools Healthy in Communities (RIC) midwifery Home (up to 17 yrs) enhanced offer Families at families registered with (randomised) (May '24) (additional targeted Home BTHFT a RIC GP Bradford support) (up to 17 yrs) (contract end date) Doulas (May (May '24) (24) Other specific JU:MP (4yr pilot North

Healthy weight and nutrition service offer for individuals and families by geography and level from pregnancy to 18 years in Bradford. Level 1 = universal within that population/area, 2 = more targeted, 3 = extensive support. (Does not include diabetes specific services or wider whole systems offer). Produced by Claire Gilbert, Kirsten Foster and the Bradford Pregnancy, Children, Young People and Families Healthy Weight mapping steering group, last updated 22<sup>nd</sup> June 2023



geography





Bradford to increase

activity)
Healthy Families
(Virtual support 4-19 yrs, in Craven – N Yorkshire)





## **How have HENRY programmes helped in Better Start Bradford?**



As of September 2022, more than 440 families had completed a group or 1:1 programme, 100% described it as good or great

Our evaluation by the Better Start Bradford Innovation Hub found families described significant improvements in:

- Parent confidence
- Boundary setting, particularly at mealtimes and snack times, around TV and computer games, active play and bedtimes
- How much time parents described as having for themselves, how supported they fell, their happiness levels, and they described feeling less isolated
- How often families sat down together for a meal
- Reduction in how often the TV was on at mealtimes
- Types of food eaten



















Behavioural insights on what influences service uptake

The Easy, Attractive, Social and Timely 'EAST' framework to understand what influences uptake of the HENRY service in Better Start Bradford Behavioural insights team

# **ATTRACTIVE** TIMELY SOCIAL

#### Make it easy

- Location
- Childcare nearby/co-located
- Term-time sessions
- Easy referral process including self-referral

#### Make it attractive

- Simple, attractive communications
- Highlight benefits of attending
- Free

#### Make it social

- Face-to-face programmes
- Encourage attendees to share information about the service with their peers
- Community Partnerships Officer role

#### Make it timely

- Prompt people to attend when they are most receptive e.g. after starting solids workshop
- Text message reminders











#### Raise awareness of what services exist





https://fyi.bradford.gov.uk/

https://mylivingwell.co.uk/



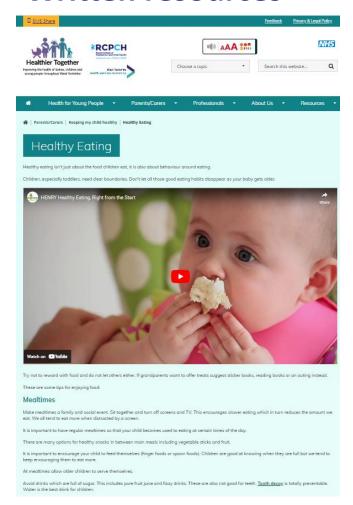




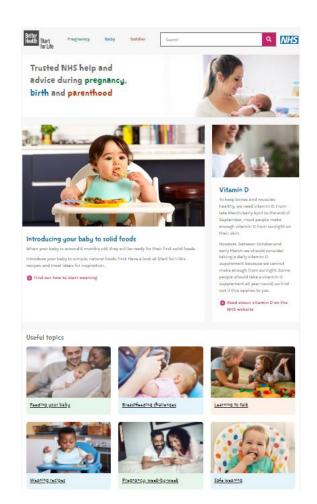




#### Written resources



https://wyhealthiertogether.nhs.uk/



https://www.nhs.uk/start-for-life/baby/











## What can you do?

- Greater awareness of the scale of living with overweight and obesity in childhood in Bradford
- Opportunities to 'Make Every Contact Count' such as when interacting with families
- Share what resources are available to support families
- Provide healthy options e.g. in early years settings
- Consider ways of reducing living with excess weight and obesity across the life course
- Influence service design to address gaps in provision











#### Aim

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