Better Start BRADFORD

2015-2025

SHARING KNOWLEDGE, SHAPING FUTURES

HENRY

Project Impact Report: 2025

henry

Healthy Start, Brighter Future

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About Better Start Bradford

Better Start Bradford is part of the ten-year A Better Start programme set up and funded by The National Lottery Community Fund in 2015.

Since 2015, A Better Start partnerships in Blackpool, Bradford, Lambeth, Nottingham and Southend-On-Sea have supported families to give their babies and very young children the best possible start in life, specifically to:

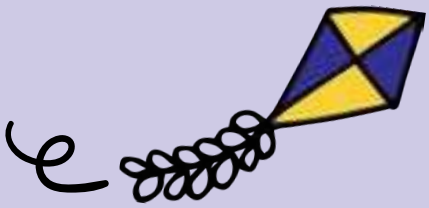
- Improve children's diet and nutrition to support healthy physical development and protect against illness in later life.
- Support children to develop social and emotional skills so they can develop positive relationships and cope with difficult situations.
- Help children develop their language and communication skills, so that they can engage with the world around them. Help children develop their language and communication skills, so that they can engage with the world around them.
- Bring about changes in systems, practice and behaviour that increased the focus on the first 1001 days of life and invest in preventative and early intervention approaches that have been demonstrated to have impact.

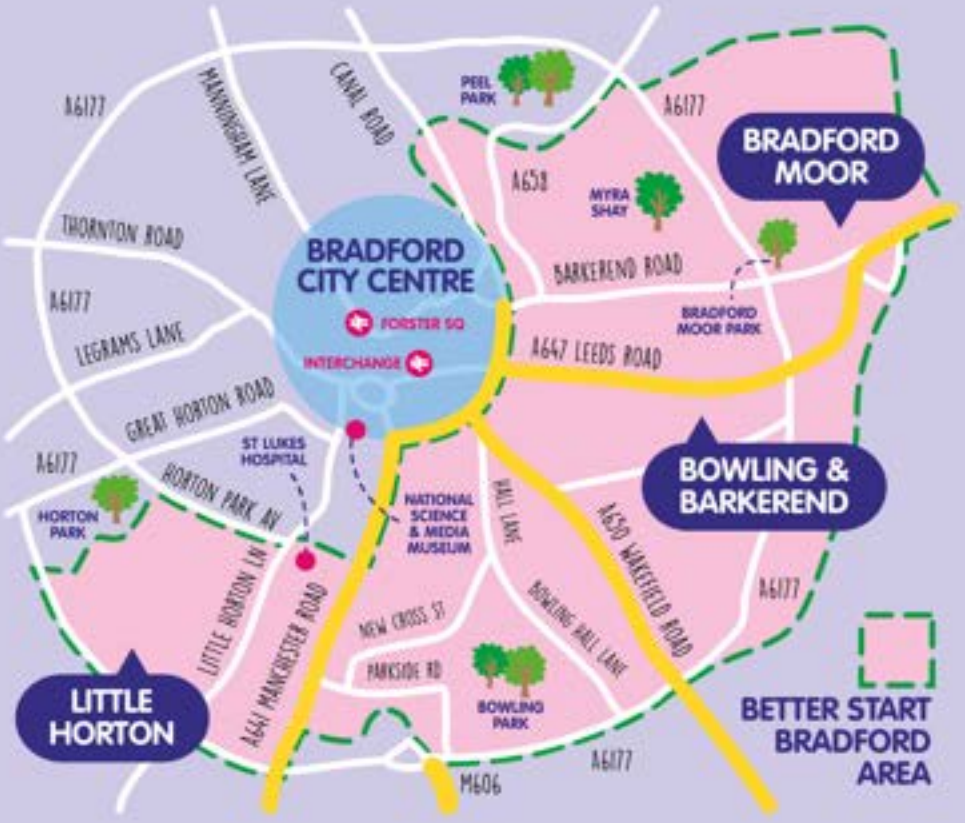
In Bradford, we created over 20 evidence-led projects and services for expectant families and families with children aged 0-3 in Bowling and Barkerend, Bradford Moor and Little Horton (the Better Start Bradford area).

Each one was designed with, and for, our specific communities, delivered by commissioned partner organisations, and evaluated throughout by the Better Start Bradford Innovation Hub (BSBIH).

Better Start Bradford set up the Innovation Hub with Born in Bradford at the Bradford Institute for Health Research (BIHR) to be our evaluation partner for the whole programme. We also commissioned the additional birth cohort, Born in Bradford Better Start (BiBBS), to allow a more extensive and longer-term evaluation. The findings of the BSBIH evaluation of each of the projects are threaded through these Impact Reports and are credited to BSBIH.

This work has been supported by complementary strands of work, including community engagement, workforce development, campaigns and volunteering.





The HENRY (Health, Exercise and Nutrition for the Really Young) Project

HENRY was commissioned by Better Start Bradford in 2015 and started out as a programme delivered in partnership with Children's Centres and Voluntary and Community Sector (VCS) organisations. The training focusses on developing an understanding of the HENRY approach, incorporating the family partnership model. The HENRY programme ended in 2024 through Better Start Bradford and across the Bradford District, but continued through Start for Life until March 2025, focussing on 'Preparation for Parenthood'.

In the Better Start Bradford area, the portfolio of training for professionals, VCS and parent volunteers covered:

- Core Skills Training for health and early years professionals and VCS organisations.
- Group Facilitator Training for staff who wished to deliver the group intervention, HENRY: Healthy Families Right from the Start (who had already completed the Core Training).
- 1:1 Programme Training for staff who wished to deliver one-to-one intervention for families who faced barriers to attending the group programme.
- Healthy Start in Childcare Training for all childcare settings and childminders (complementing existing food policy and menu planning training).
- Training and support of Parent Champions – 'Raise, Engage, Refer' - four hours total available to all referrers into the project.

The programmes available to parents in the Better Start Bradford area

- An 8-week group programme, HENRY: Healthy Families Right from the Start, universally available to all parents. Participants explored a new topic each week (e.g. parenting skills, portion sizes, physical activity and play) through activities that led to shared understanding and ideas for strategies to support changes. At the end of each session, group members were encouraged to set individual goals for the week ahead.
- A one-to-one service for parents who were unable to attend the group programme (for example because of factors such as disability, language, or lack of confidence).
- Healthy Families workshops available to all parents and targeted to some specific groups, the main one being Starting Solids, which was on a rolling programme every 3-4 weeks. Parents attending the workshops would increase their knowledge in the stand-alone subject and give the additional benefit of an opportunity to promote the HENRY Healthy Families Right from the Start, giving them a sense of what it would be like and build their motivation to join at a later stage.

The HENRY Co-ordinator was employed by the HENRY national unit and located in Bradford Council's Public Health team, alongside the existing co-ordinator of HENRY for Bradford District. This enabled co delivery of staff training sessions and connected staff from the Better Start Bradford area with staff across the Bradford district. Joint Continuous Professional Development (CPD) sessions enabled sharing of strengths and weaknesses across the programme and helped with consistency and fidelity in delivery.

Why HENRY was needed

In the UK, 9.2% of children are already living with overweight or obesity by the time they enter their reception year of primary school, and this figure rises to 22.7% of children leaving primary school after Year 6. (NCMP National Child Measurement Programme).

When this project was commissioned, these figures were slightly higher in the Better Start Bradford wards. There was also research from The Area Well-Being survey, conducted by the Social Research Unit as part of Better Start Bradford's bid, that found greater numbers of 5-8-year-old children were getting insufficient amounts of exercise compared to children in the wider Bradford District. Research from the Born in Bradford cohort found that the average age of weaning was considerably earlier than the recommended 6 months – 4.2 months for white British mothers and 4.8 months for Pakistani mothers. Early weaning has been related to rapid weight gain in infancy and future childhood obesity.

Research from the Born in Bradford cohort study (Fairley et al, 2015) has also shown that at age three, higher BMI is significantly associated with a number of modifiable factors in the early years. These included maternal obesity and an 'indulgent' feeding style (where the parent is highly responsive to the child's demands and exercises less control over their eating). Parenting styles which were high in hostility or low in warmth were also associated with higher BMI (Body Mass Index).

A longitudinal study on the Contribution of Early Weight Gain to Childhood Overweight and Metabolic Health (Gardner et al, 2009) found that 90% of the excess weight in girls, and 70% of excess weight in boys, was gained before reaching school age, emphasising the importance of intervention and establishing good habits very early in a child's life.

HENRY was commissioned by Better Start Bradford as it had the strongest evidence-base currently available for any UK early intervention programme to prevent child obesity. Several published evaluations have shown that:

- Following attendance on the HENRY group programme, parents reported statistically significant changes in family dietary intake, family eating behaviours and parental self-efficacy (Willis et al, 2014).
- Brief HENRY training has a sustained impact on practitioners' professional and personal lives and leads to improvement in nutritional policy and practice at Children's Centres (Willis et al, 2012; Brown et al, 2013).

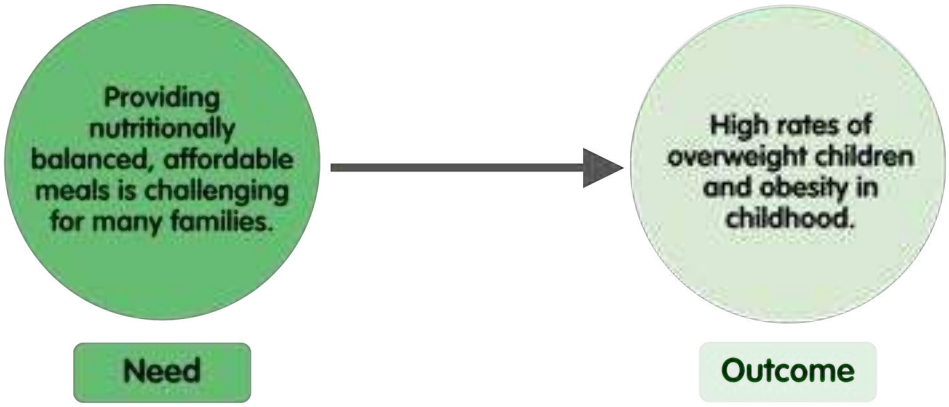
For more detailed information on the HENRY evidence base, please scan this QR code:

Theory of Change and Logic Model

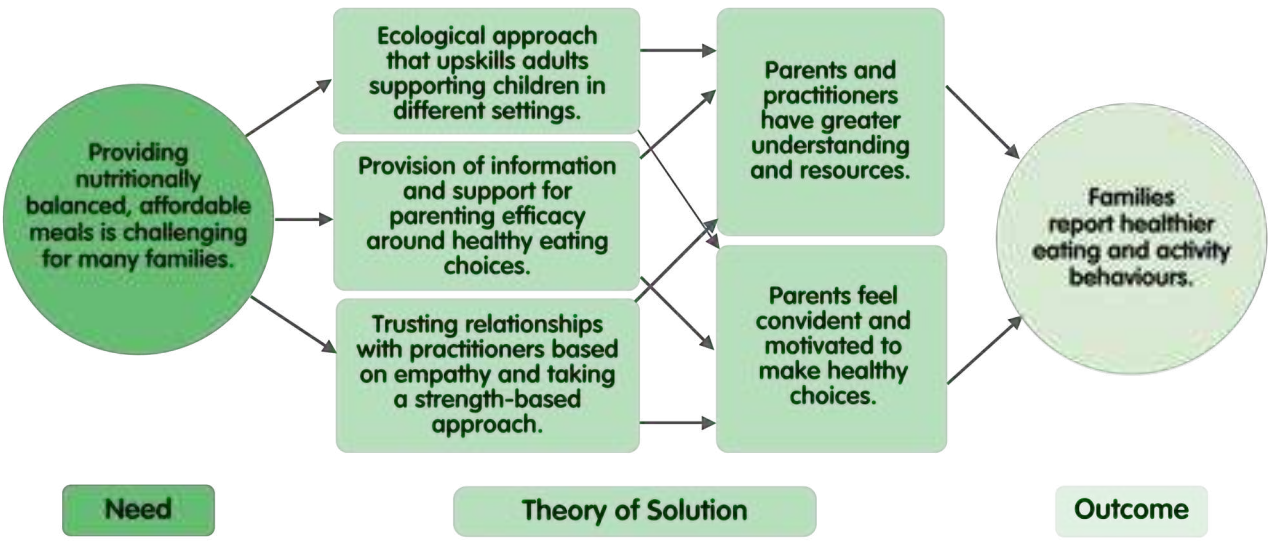
We used a Theory of Change and Logic Model approach to design our services. These are included in the impact reports because they offer a useful summary of the service design. They are accompanied by an evaluation plan which is delivered by the Better Start Bradford Innovation Hub.

The Theory of Change explains how we have identified a need (for example, poor health) for improved outcomes and why we believe the proposed service would provide a solution (based on evidence and science). The Logic Model shows the steps we needed to take to arrive at the desired outcomes. It identifies the need, the target group(s), the inputs and activities which would impact on the outcomes and the changes we should expect to see in the short, medium and long term.

HENRY: The Theory of the problem



HENRY: Theory of the solution



HENRY: Overall Project Logic Model

HENRY Project Aims

The HENRY project aimed to:

- Support parents/carers of young children to improve their healthy eating habits and nutrition; anticipating that those who completed HENRY programmes would demonstrate improvements in effective parenting, increased consumption of fruit and vegetables, reduced consumption of high fat/sugar foods and improvements in healthy family eating behaviours (e.g. eating together, not snacking, not eating in front of the TV).
- Contribute in the longer term to reductions in the number of overweight/obese children in the Better Start Bradford area at age 2, 5 and 11. (See Logic Model for more detail)

HENRY was originally delivered in Children's Centres' across the Bradford District. Following changes to the Children's Centre delivery which reduced capacity, HENRY developed the work of delivering programmes with VCS organisations and schools to try and maintain delivery at the previous level. HENRY has supported, organisations to deliver HENRY themselves, encouraging sustainable and on-going delivery whilst supporting others by delivering in partnership, offering facilitators to deliver the programme and using the organisation to provide the venue and recruitment of families.

There have been some adaptations over the nine years of delivery to meet specific needs of the Better Start Bradford community. During the pandemic HENRY very quickly adapted all parent programmes to run online or via WhatsApp video or phone calls. Initially there were a range of workshops on offer, but it became clear from families' requests, that the preferred workshop was Starting Solids. This was then run on a four-weekly basis to meet this need.

The Start for Life contract included this workshop to families extending it across the district and HENRY found that within a few months they had a waiting list of around 75 families. Unfortunately, the Department for Education decided that this workshop would transition into 'Preparation for Parenthood' a six-week antenatal programme. HENRY applied for some alternative funding to continue the Starting Solids workshop and have been able to complete the extensive waiting list and meet the needs of these families.

HENRY received additional funding from the Better Start Bradford programme to add capacity to their team to meet the delivery targets when Children Centre staff capacity decreased. There were also rises in the cost for venue hire, creche provision and office space, which resulted in additional funding from Better Start Bradford to meet these needs.

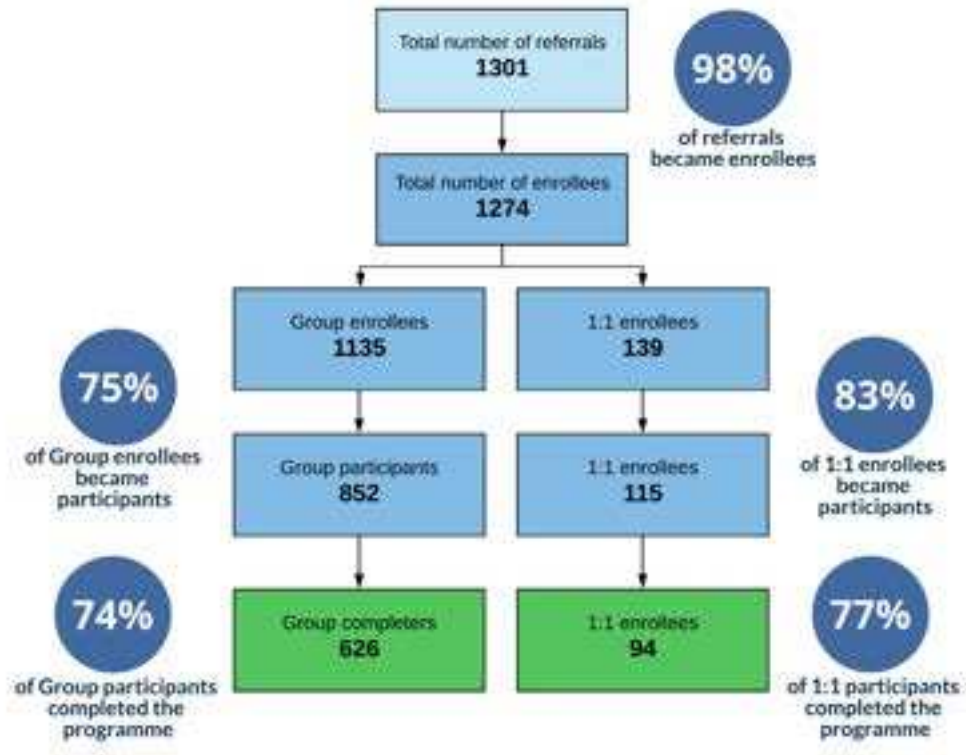
As a result of the pandemic, HENRY adapted all their training offer for online. This enabled staff to access the Core Training online as well as Raise, Engage and Refer which was open to all practitioners and volunteers in the Better Start Bradford area, and subsequently, districtwide as part of Start for Life. Within an increasingly stretched Bradford workforce, this enabled more staff to access the underlying principles of HENRY and their unique approach to raising sensitive issues within families.

A Community Partnerships Officer was introduced at the mid-stage of the contract who undertook development of clear referral routes, enabled high levels of understanding of HENRY and developed strong working relationships with all organisations, particularly Public Health, to collaborate and share learning and practice across the district. This had a particular focus on work in schools and in other community settings to develop training and delivery. This role was effective in increasing recruitment and potentially supporting a sustainable HENRY offer going forward for the future.

Data and Evaluation (Better Start Bradford Innovation Hub)

Before and After results

Across both group and 1:1 programmes, statistically significant improvements in parental confidence were reported by carers at the end of a programme. Mealtime habits had also improved at the end of both programmes, specifically families were sitting down to eat together more frequently and had the tv on during meals less frequently. Significant increases in fruit and vegetable consumption were reported for carers and children as well as significant reductions in consumption of high fat and sugary snacks across both programmes. Physical activity habits had improved for both carers and children, with screen time reported as less frquent at the end of both programmes. While these results don't tell us about effectiveness of the programme, they suggest participation in HENRY can lead to changes in confidence and behaviour.



Recommendations for Practice

There remains a need to address the precursors and early instances of overweight and obesity in the BSB community as well as the wider Bradford district. Although other programmes exist that focus on preventing overweight and obesity in childhood, few if any of these are as well developed and embedded as the HENRY programme. This report demonstrates that the HENRY project has managed to navigate an incredibly challenging time in preventative intervention work, and has engaged with a large number of families in the BSB community. There is also evidence that the different delivery options (Group; 1:1) are being utilised to extend the reach of the project, which is a particularly important consideration for the BSB community. For these reasons, the BSBIH recommends the following:

- Continue to explore options for how this service could be delivered in the district. While there is strongest evidence for the *HENRY: Healthy Families Right From the Start* programme, recent experiences have shown that the *Starting Solids* workshops are popular, and an evaluation elsewhere showed these workshops supported complementary feeding practices. For this reason, it is worth considering how a holistic service could be implemented that supports families to develop healthy feeding and eating habits right from when children begin weaning.
- If the project were to continue, it would be useful to carefully consider the referrals pathways into the project. In the most recent contract, many referrals have come from other BSB projects, and it would be vital to consider other referrals sources in the absence of BSB.
- The 1:1 version of the programme allows families to engage with the programme who may otherwise not be able to, and as such future versions of the project should aim to continue this component of the programme.
- Consider whether training and other supports for childcare settings would be possible. Many children spend significant amounts of time in early years education and care settings, and this time represents a key opportunity to support their healthy relationship with food. However, staff turnover in settings means that many of the practitioners trained during this project may have left, and the cost of living crisis may be impacting on settings' ability to provide nutritionally balanced meals. Further training and support could be beneficial for children's wider environments.

Recommendations for Evaluation

The relatively consistent delivery of HENRY in the BSB area over the past nine years represents a unique opportunity to explore the impact of this service using routine data. The BSBIH is currently developing a protocol for a quasi-experimental evaluation of the HENRY service using data from the project along with routine child health outcome data. While the specifics of this evaluation are still in development, the overall aim of the evaluation would be to consider whether BiBBS children whose parents attended HENRY had significantly lower body mass indexes (BMIs) at ages 2 or 5 years, as compared to similar children who did not attend the project. It is encouraging that the data from the implementation evaluation reported here suggests that there is likely to be a sufficient sample of families available to the evaluation to allow for the necessary analyses. As such, the BSBIH's recommendation is that this evaluation move forward. However, it should be noted that the younger average age of the children in the final years of service delivery suggests that this evaluation will not be available until approximately 2028 when a sufficient number of the child beneficiaries have reached the age of 5 and National Child Measurement Programme data is available for them.

For more information and final BSBIH HENRY reporting, please scan this QR code:

Project improvements

- Having a digital offer that could be implemented during COVID-19 to continue to support families.
- Facilitators who spoke a variety of community languages and use of translators.
- Community Partnerships Officer built strong relationships with parents and professionals and increased awareness of all elements of the programme and follow-on learning.
- Evening sessions online benefitted working parents, including dads/male carers.
- WhatsApp groups for parent cohorts added value to their experience, built relationships and support for each other.
- Practice development sessions provided supervision to facilitators and wider support and networking and support towards fidelity.
- Seven Primary Schools partnered to deliver Healthy Families which helped to embed the HENRY approach with 10 community facilitators able to deliver.
- Parent Champions helped at events with recruitment and supported individual parents to attend.
- Training involved Core, one-to-one facilitation, Healthy Start in Childcare, Raise, Engage and Refer.

Future plans and considerations

- HENRY are currently applying to the National Lottery Reaching Communities Fund, Ken & Edna Morrison Charitable Trust and Sovereign Healthcare for further funding.
- External funding has been sourced to continue the Starting Solids Workshops across the district, as there was an extensive waiting list at the point when the Department of Education required a diversion to Preparation for Parenthood under Start for Life.
- Although Bradford District cancelled the HENRY contract at the end of 2023, participation in the national Randomised Control Trial (RCT) means that there will continue to be delivery of HENRY Healthy Families: Right from the Start group programme over the coming years.
- There is an ongoing quasi-experimental effectiveness evaluation of HENRY being conducted by BSBIH which will look at the impact of the programme on children's Body Mass Index using the National Child Measurement Programme (NCMP) data collected at reception age (results are expected in 2028).

Local and national strategic influences

- **NHS 10-Year Health Plan for England (2025):** A new health plan is underway, with three shifts of significant change: 1) Looking at how people access their services, digitally and in person, 2) looking at boosting community care reducing hospital visits and stays and 3) shifting from treatment to prevention focused care.
- **Best Start in Life Strategy:** The Government's Best Start in life Strategy highlights that the foundations of success are laid in early childhood. Ensuring every child has the best start in life - the chance to achieve and to thrive - are the foundation stones of the Government's Opportunity Mission. Better Start Bradford wholeheartedly agrees with the Government's statement that every child should have the opportunity to 'grow, play, learn and thrive'.
- **The Bradford District Children and Young People's Strategy 2023-2025:** The strategy includes actions to address childhood obesity. and also aims to improve the health and wellbeing of children and young people in Bradford.
- **Living Well:** A three-year programme that aims to help people in Bradford make changes to improve their health and wellbeing.
- **Childhood Obesity Trailblazer Programme:** The programme is an innovative three-year Living Well programme, looking at the role of faith organisations in tackling childhood obesity across the Bradford district, has been selected as one of the Government's five trailblazer programmes.
- **Bradford's Joint Health and Wellbeing Strategy:** The Better Start Bradford delivery model is in line with this strategy and is necessary to achieve all four outcomes for the district as well as long-term outcomes.

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to view strategies

I have really enjoyed this training, the learning has made me really think and question my attitude and how I speak, listen, and respond to parents and families. I have built on my own previous skills and have a greater understanding of how to empower families and help them to problem solve and reflect on their own ideas to make healthy choices and lead healthier lifestyles. The resources are fantastic and will be used in my daily visits with families. Role play sessions were really good to practice skills and strategies learnt in the training. I really feel this training has enabled me to support families better within my role.

Community Nursery Nurse

Really interesting and useful. I now have more confidence in approaching conversations with parents and with referring to the HENRY groups and workshops.

Health Visitor

The delivery of the training was exceptional. They were engaging, knowledgeable and made it a fun experience. The resources shared were of a very high standard and will be incredibly useful for me when supporting families.

If HENRY did not exist, I would still be struggling to cut down screen time for my children. My children are definitely getting less screen time and are eating healthier meals. I couldn't have done this without the support of HENRY.

Case Studies

Tasmida's story - How HENRY helped my son to eat

I was very worried about my one-year-old son, Sohail, as he was not eating solids and did not want to eat food. He would only drink milk from a bottle or eat baby rice. No matter what foods I tried with him, he would refuse and get upset, which in turn was very upsetting and stressful for me. It was as if he didn't like food at all. I voiced my concerns to the Health Visitor and they recommended the HENRY course to me.

HENRY sounded ideal. Not only did I like the idea of helping Sohail eat more foods, but I also welcomed advice around healthy activities and routine. I decided to choose the HENRY one-to-one approach because as a single mum, I struggle with childcare and at the time I felt it would be more beneficial for the course to take place in my home. Sally, who delivered the course, was so nice and understanding and explained everything to me in a way that was easy to understand. I also loved the bag of educational goodies I got, which included a video, books for reading, and a ball among many other things.

I remember watching a video Sally showed me about how babies eat and that their stomach is only the size of their clenched fist - this really surprised me as I thought he should be eating a lot more than that. Because I didn't think Sohail was getting enough nutrition through his milk, I had also been giving my son a milk supplement with cereal in it. I didn't realise how much sugar was in it and how damaging this was for his teeth. Sally also emphasised the importance of good oral health and dental care through the programme.

Sally taught me to be more relaxed with the foods that I gave Sohail and not to try and force him to eat. She also taught me to look for signals where my son was showing that he was hungry, or to try when he was more alert, rather than when he was tired. I started to feed him when he wanted rather than when I thought was right. Eventually he started to try different types of food. He even tried and enjoyed fish the other day. The new techniques and approach to my son's eating have made life much easier and I am much less stressed these days.

Gemma's Story – HENRY and me

I often struggle to attend family courses and activities as I only have Monday's free. When I found out about HENRY's one-to-one programme, I jumped at the chance to take part as they offered to do it in my home on my day off.

My two-year-old son Logan and I have on going reflux conditions, which impacted on the food we can eat. I could only get Logan's medicine down with his formula milk; I thought if I took the formula away I would not get his medicine down, and it was holding me back from improving his eating habits. Doing the HENRY course gave me a push to make the change he needed.

Through the course, I was able to swap his formula for real milk. I realised that just because he had refused at the start, his initial issue had become my issue. In the end, it was not so hard to make the change after all.

I had also taken his snacks away, thinking that was a good thing, but that meant he was really hungry at mealtimes and eating too much and too fast, which was probably affecting his reflux.

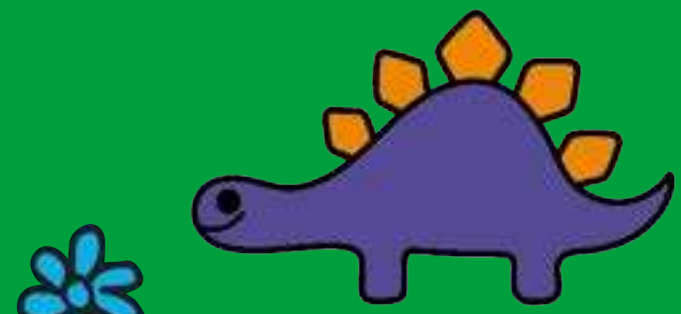
The course offered much more than advice around nutrition though. I realised that I was making Logan older than his time and trying to do more advanced activities with him. HENRY provides you with lots of suggestions for what's good and healthy for young children. Some I use and some I don't, but that's the beauty of the course: you take from it what you need to take.

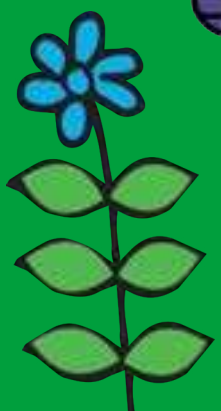
Initially I was doing the course to help with feeding Logan, but it really helps you to look at other habits you may get into. We were one of those families that would use the television as a 'babysitter'. My husband Richard, Logan and I would all eat in front of the television and we would let Logan watch it before bedtime, thinking it was a calming influence.

Logan's bedtime routine is now amazing; we have a little quiet time play in his bedroom, get pyjamas on, settle down and read books and then leave him in his bedroom to go to sleep. He has even started shutting the bedroom door on me so I will go!

As for meals, I got rid of Logan's highchair and he now has a seat on his chair and sits at the table with us for meals. We have real family time with no television. We also have a meal reward chart, and even when Logan has gone to bed, me and Richard will reward ourselves with stickers if we sit down and have a meal together.

Thanks to the HENRY course, I feel a lot more confident as a parent, and we have not only learned a lot of things that we can do as a family to be healthier, but also how to take time out for yourself. I did the course just because I wanted a healthier balance. You don't get judged and I think everyone who does the course will take something away that they didn't consider before starting it.





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