



East Renfrewshire Healthy Weight Communities

Sharing our Lessons Learned

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NHS Highland



Background to Healthy Weight Communities

- ❑ Commitment to create pathfinders set out in *Healthy Eating, Active Living*
 - ❑ To demonstrate the ways in which gathering together diverse projects, under the shared purpose of tackling obesity, may have a greater impact on health outcomes than dispersed activity"
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EPODE's Goal

Childhood obesity prevention at the local level:
Sustainable change of the environment of the family



Creation of **group dynamics**



Social norms changes

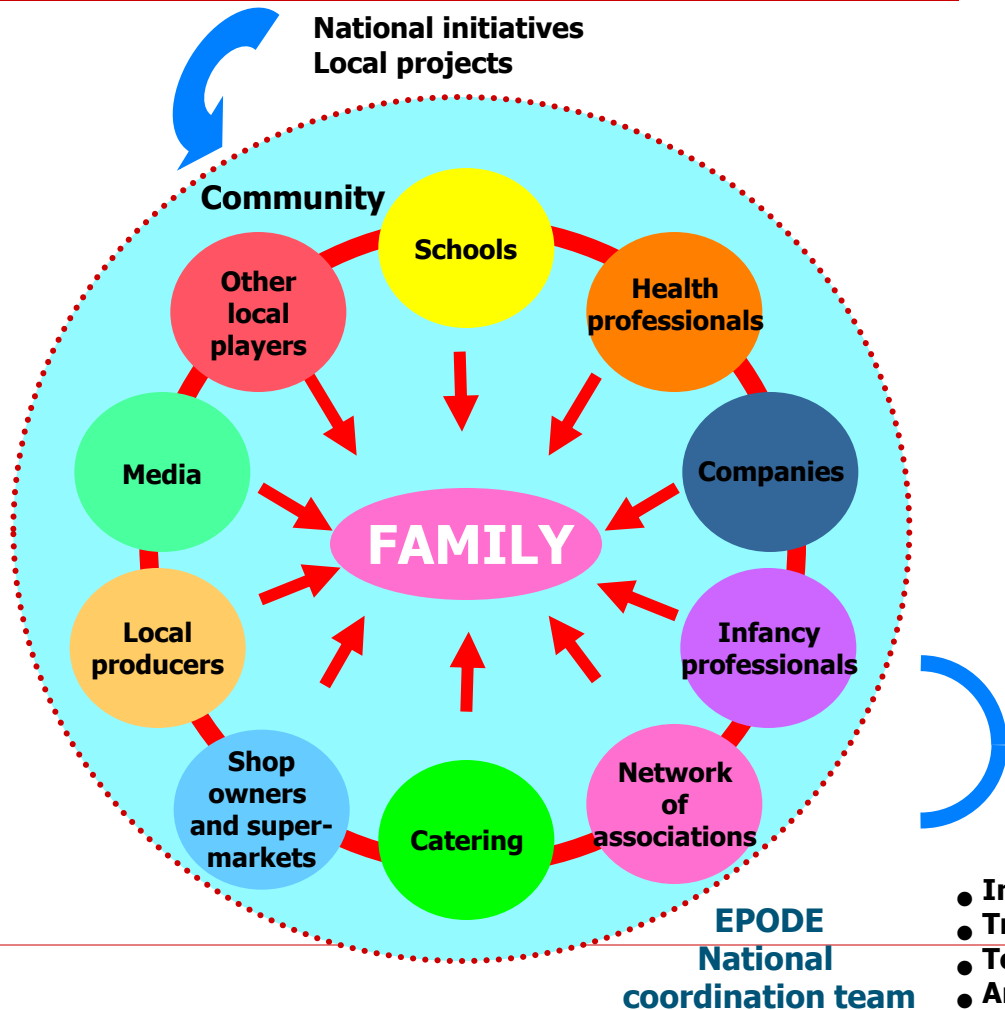


Encouragement of **healthier lifestyles**

- ❑ Encourage children and families to be less inactive, play more and exercise
 - ❑ Promote a balanced, diversified, affordable and fun diet
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The EPODE concept



The city is at the heart of the initiative



- Foster multistakeholder **dynamics**
- Change **professional practices** to change the **environment**

East Renfrewshire Healthy Weight Community Aims

- ❑ To raise awareness of what is meant by the term healthy weight
 - ❑ To sustain a programme of activities that support's the achievement of healthy weight for more adults and young people
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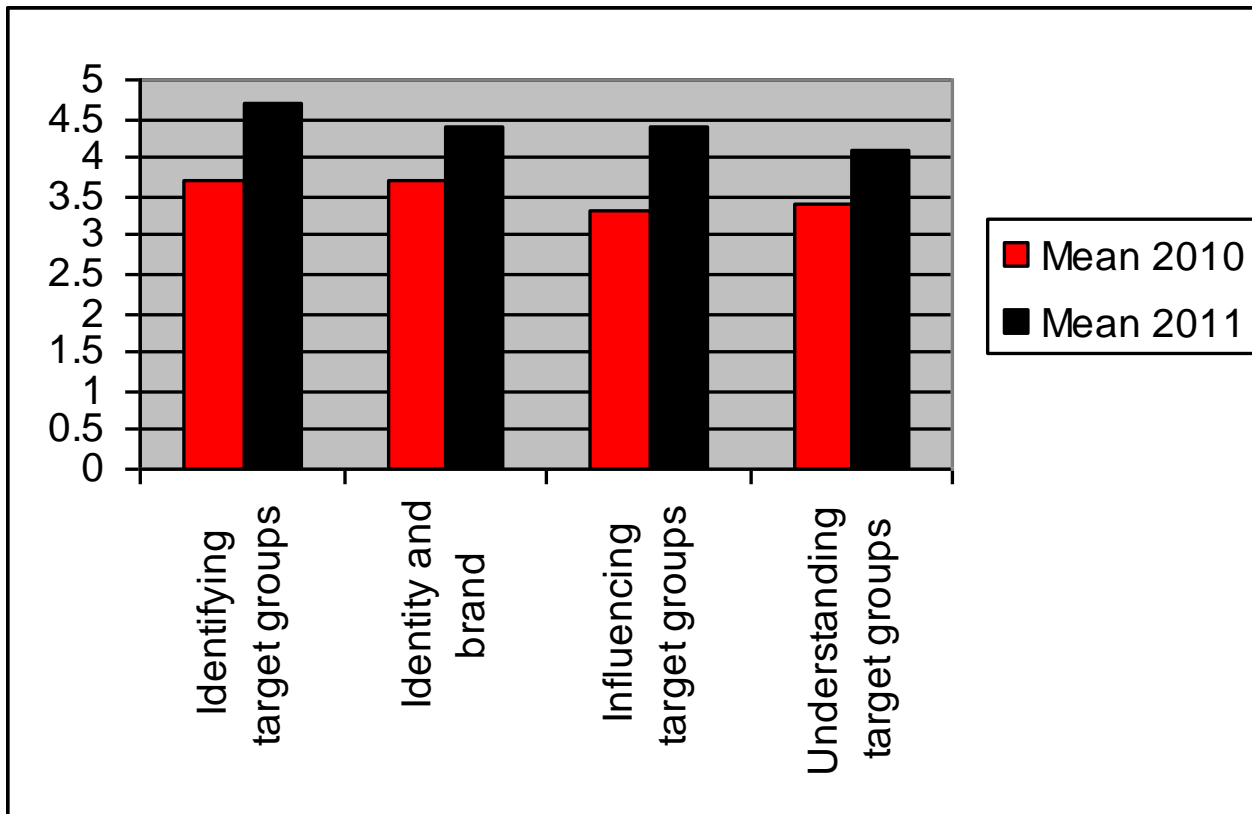
Key Features

- ❑ Building on Smarter Choices Smarter Places
 - ❑ Healthy Weight Planning and Implementation Group
 - ❑ Linking in ACES (H3) work
 - ❑ Shape Up programme
 - ❑ Weigh to Go Dunterlie programme
 - ❑ Development of community led health approaches
 - ❑ Social marketing work
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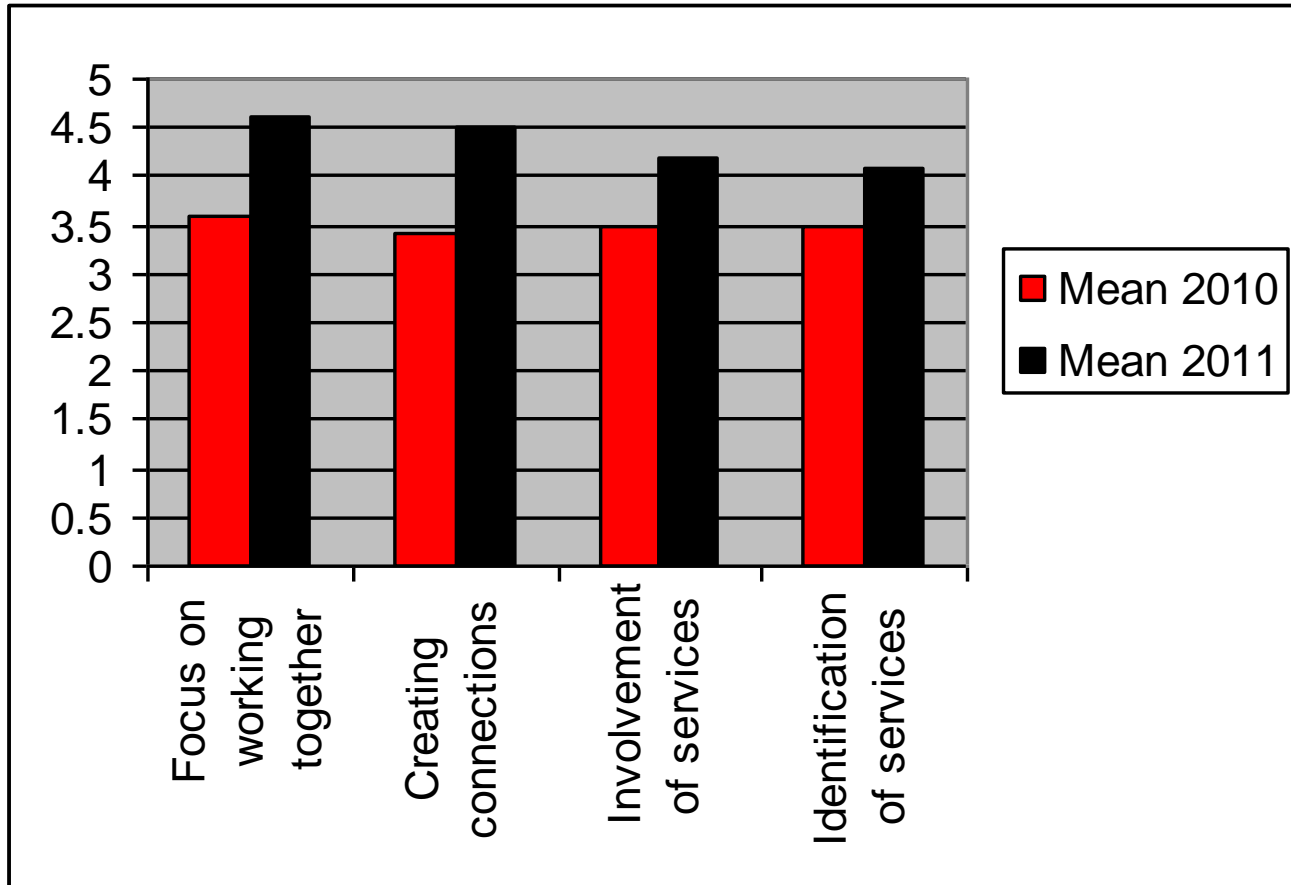
Differences made

- ❑ Bringing services together to explore joined-up working and delivery
 - ❑ HWPIG providing the opportunity to develop practice and to locate healthy weight within service planning.
 - ❑ Social marketing has been a key element of the HWC
 - ❑ Small steps towards behaviour change
 - ❑ Partnership approach adding value
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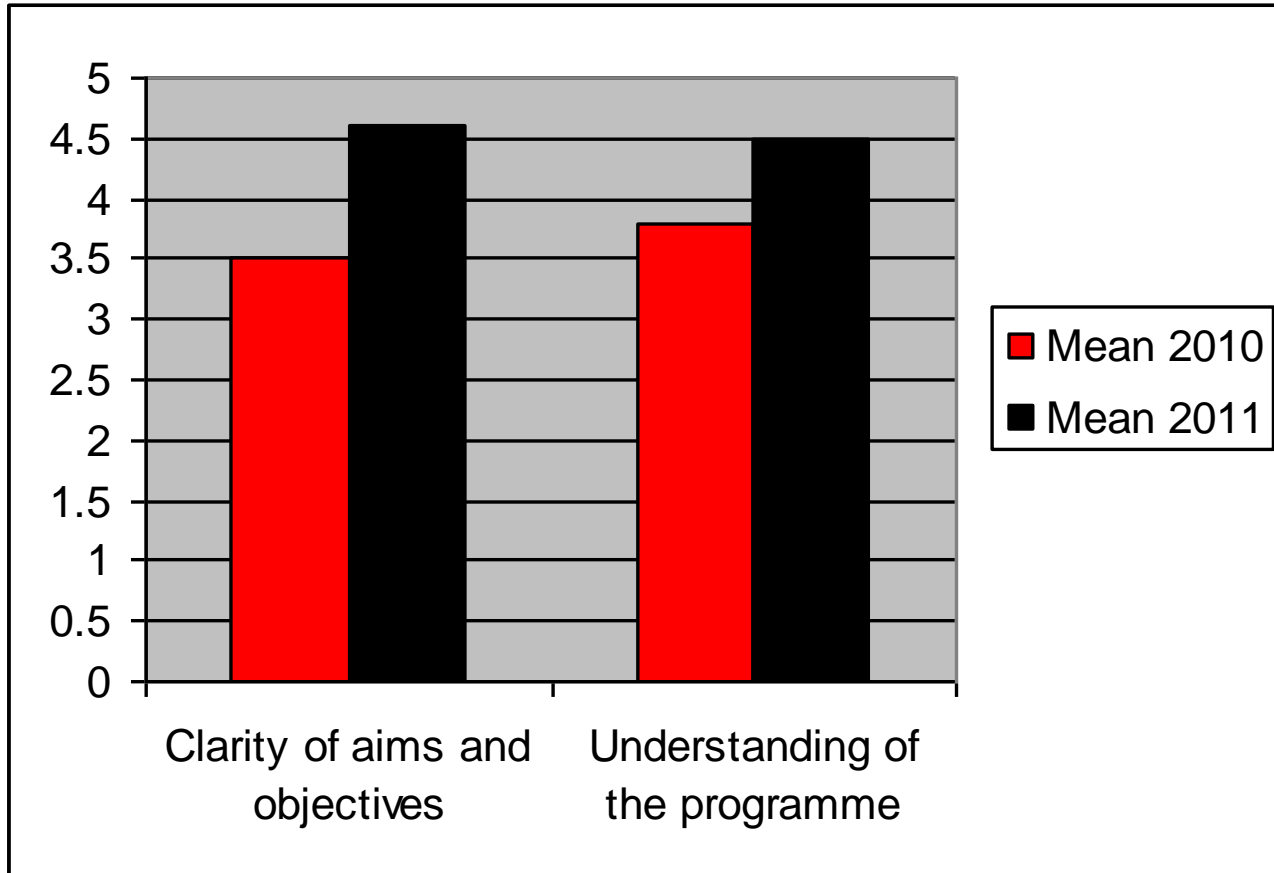
Community Engagement and Social Marketing



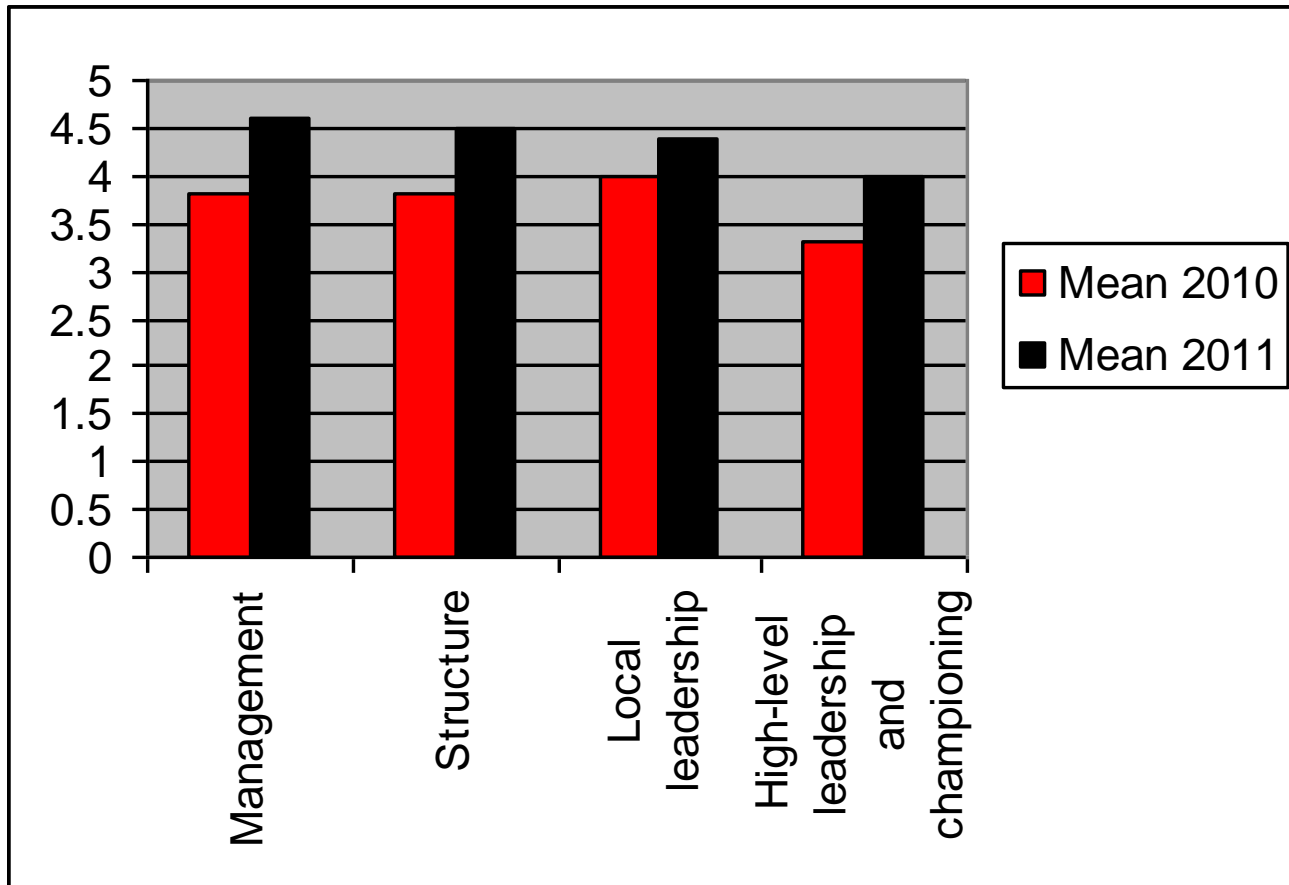
Joining-up Services and Activities



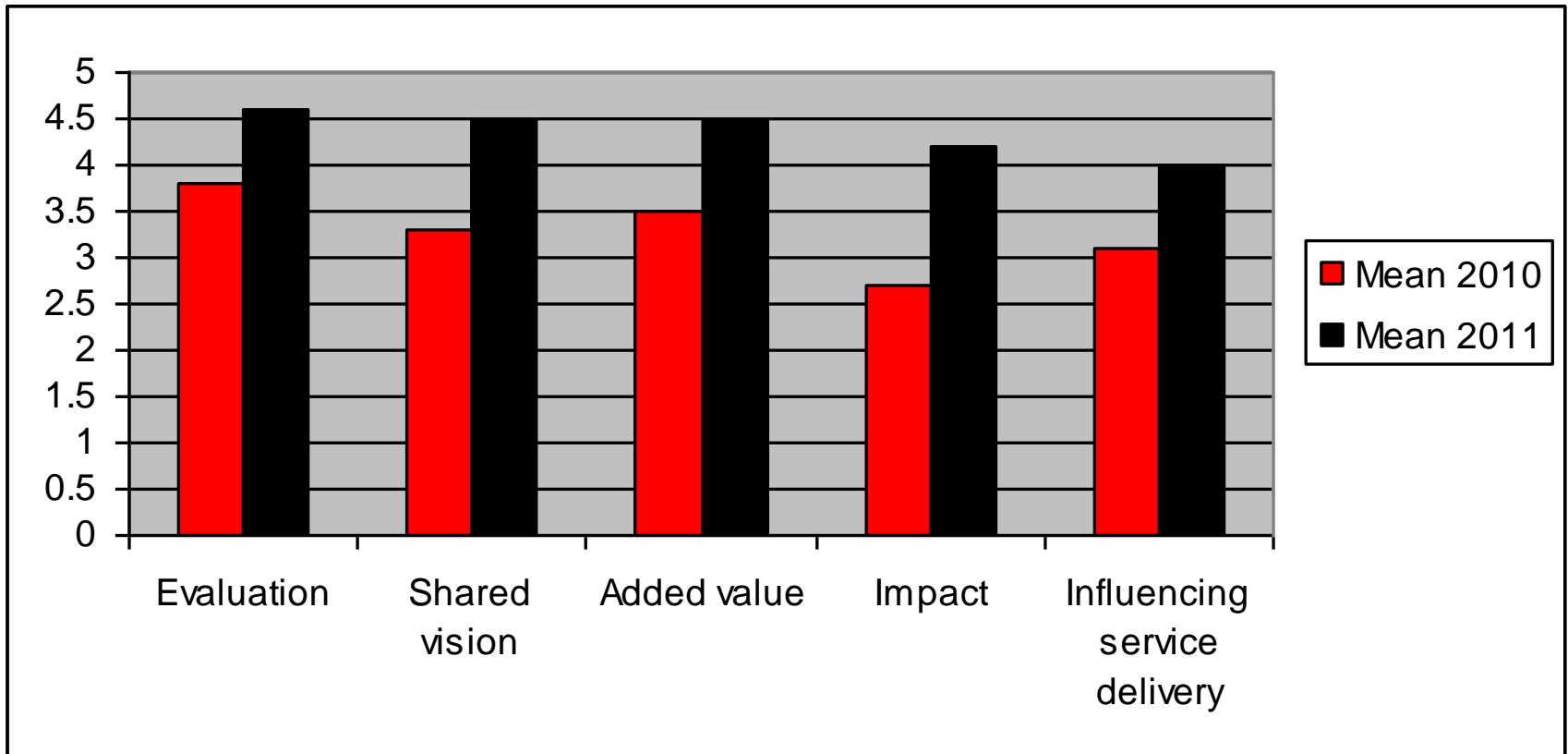
Aims and Objectives



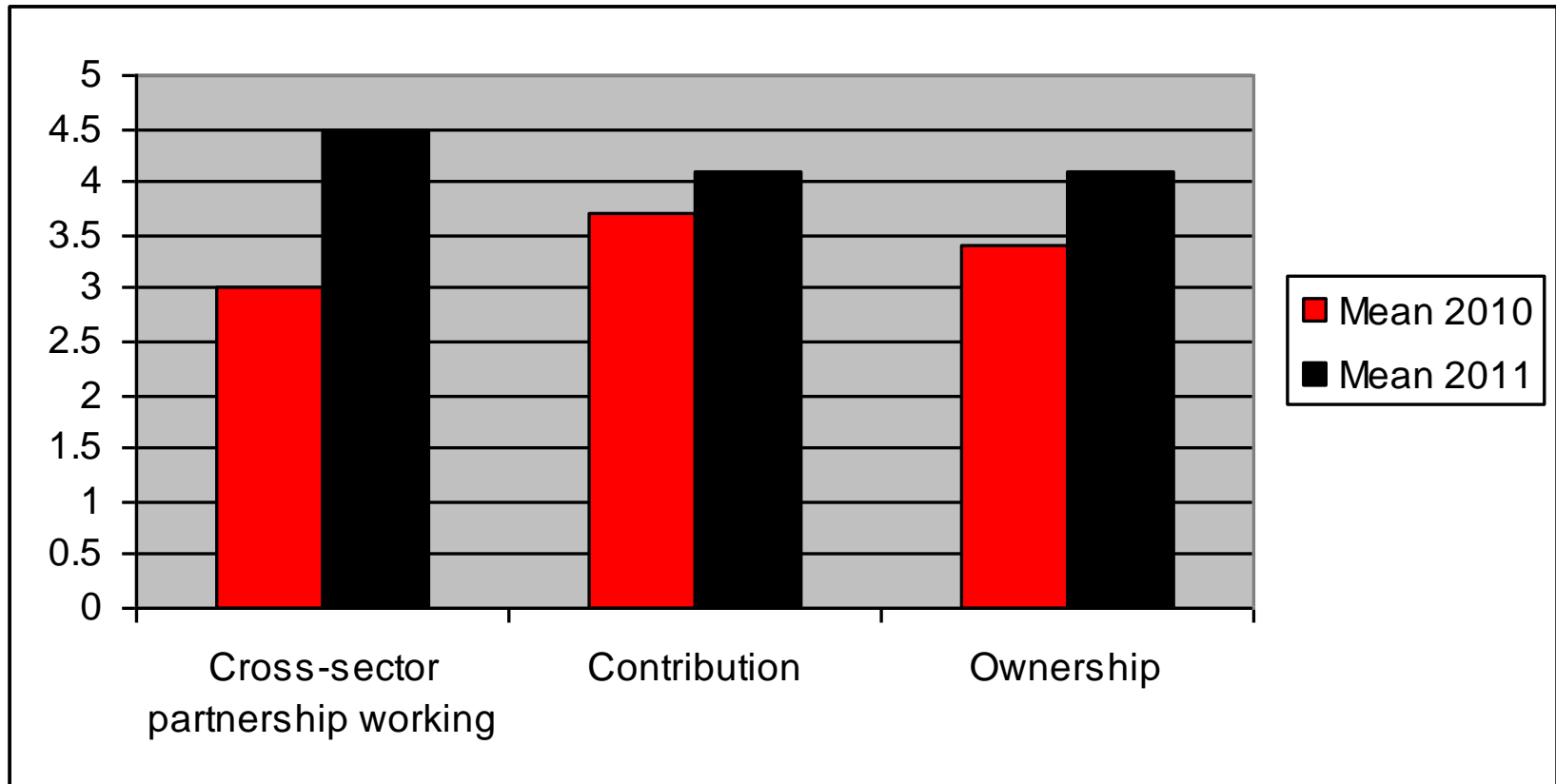
Management and Leadership



Outcomes and Impact



Working in Partnership



Main lessons

- ❑ Health Improvement Lead important
 - ❑ Co-ordinator operating between strategic and operational levels
 - ❑ Clear and agreed aims, objectives and outcomes aids development
 - ❑ Taking time for the HWC to evolve ensured that structures were appropriate
 - ❑ Funds to develop materials and undertake social marketing provided a good base for the HWC
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Implications and recommendations

- ❑ Develop a sustainability plan
 - ❑ Develop and maintain the HWPIG
 - ❑ Review and update the outcomes framework
 - ❑ Develop the use of social marketing techniques and brand awareness
 - ❑ Further develop community engagement in the HWC
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Outcomes Framework

- ❑ Obesity route map –national, local
 - ❑ Strategic Healthy Weight Outcomes
 - ❑ ER HWC Outcome Model, fit with shared outcomes and service plans
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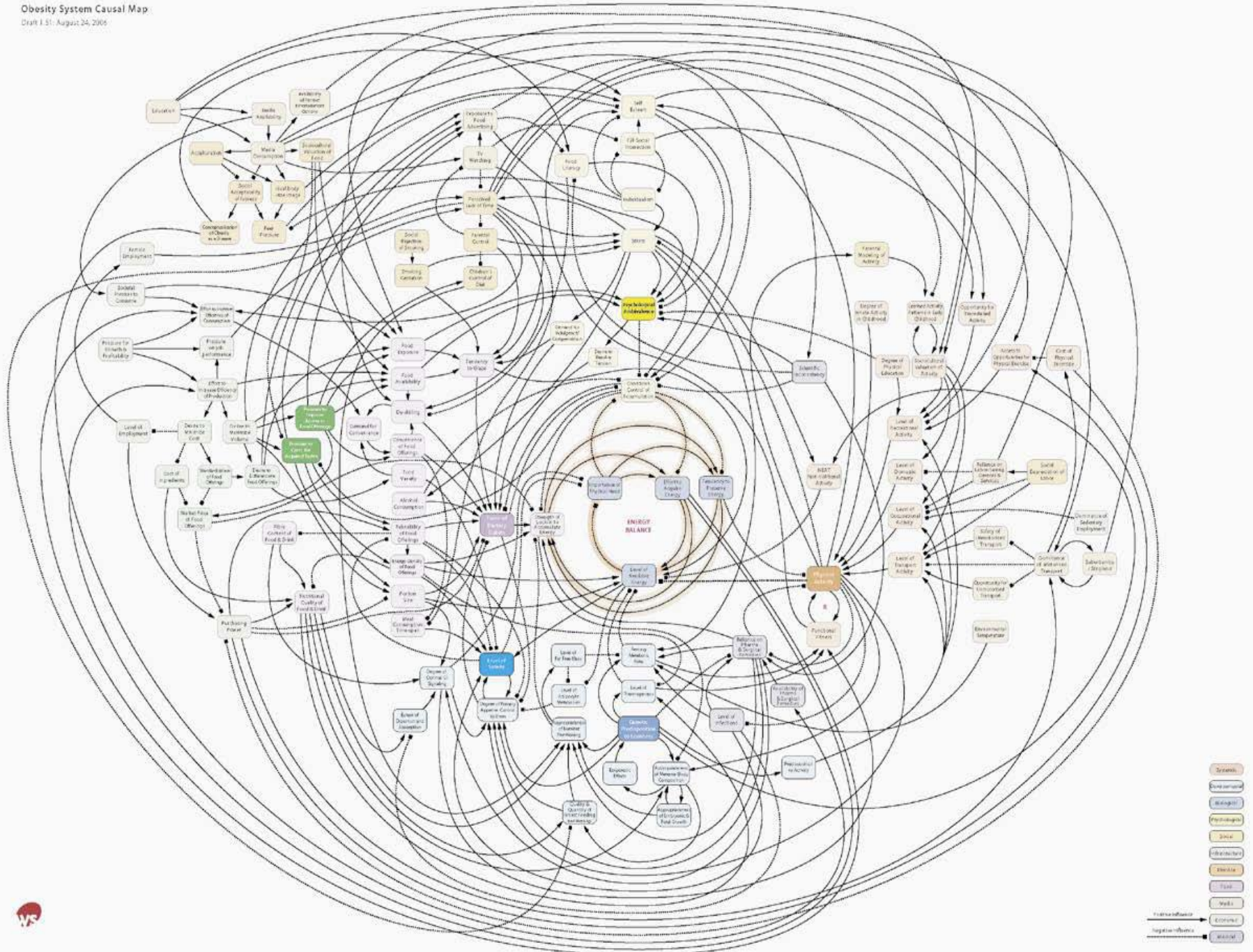


Figure 5.2: The full obesity system map with thematic clusters (see main text 5.1.2 for discussion)^{17,18} Variables are represented by boxes, positive causal relationships are represented by solid arrows and negative relationships by dotted lines. The central engine is highlighted in orange at the centre of the map.

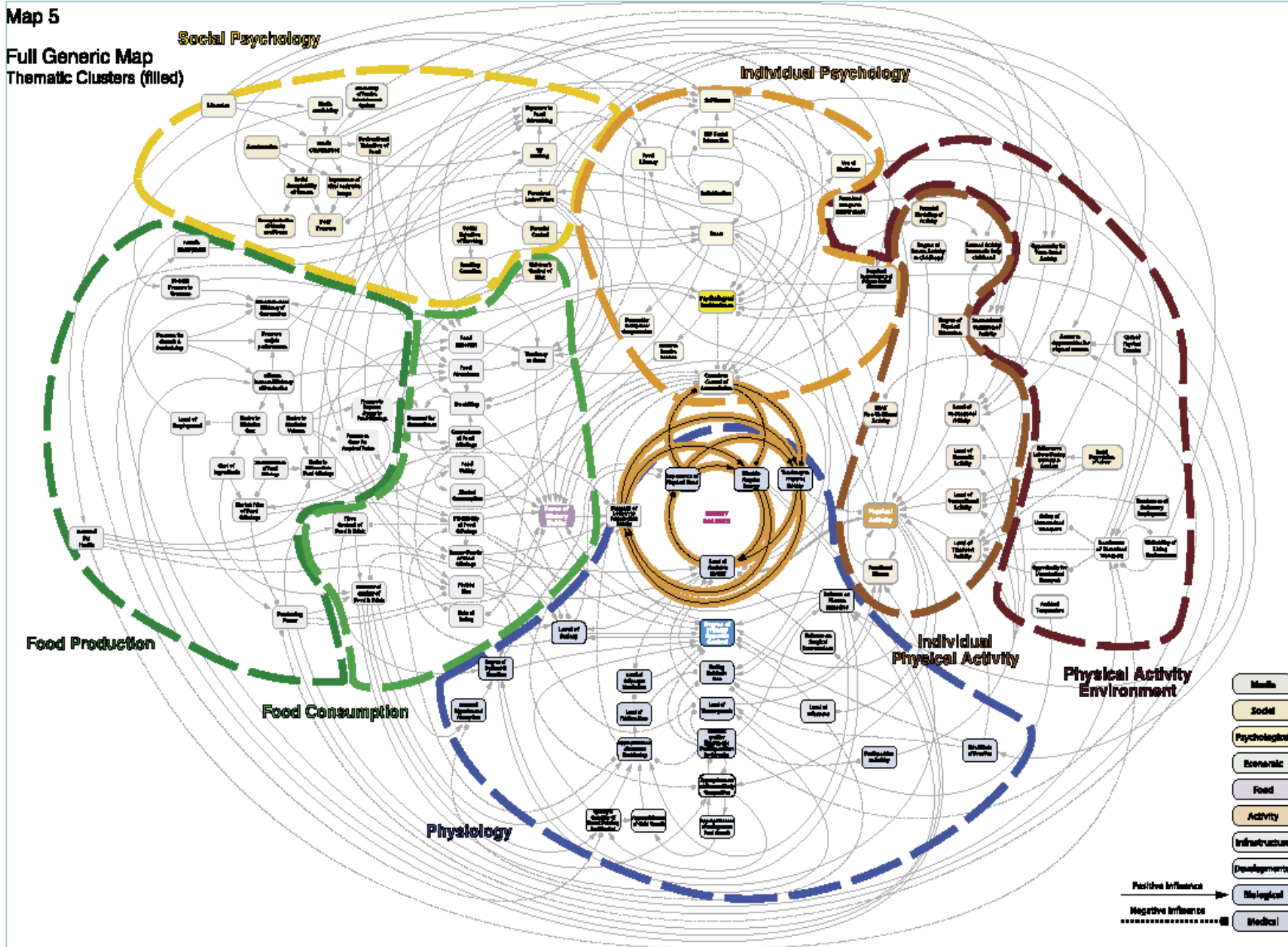
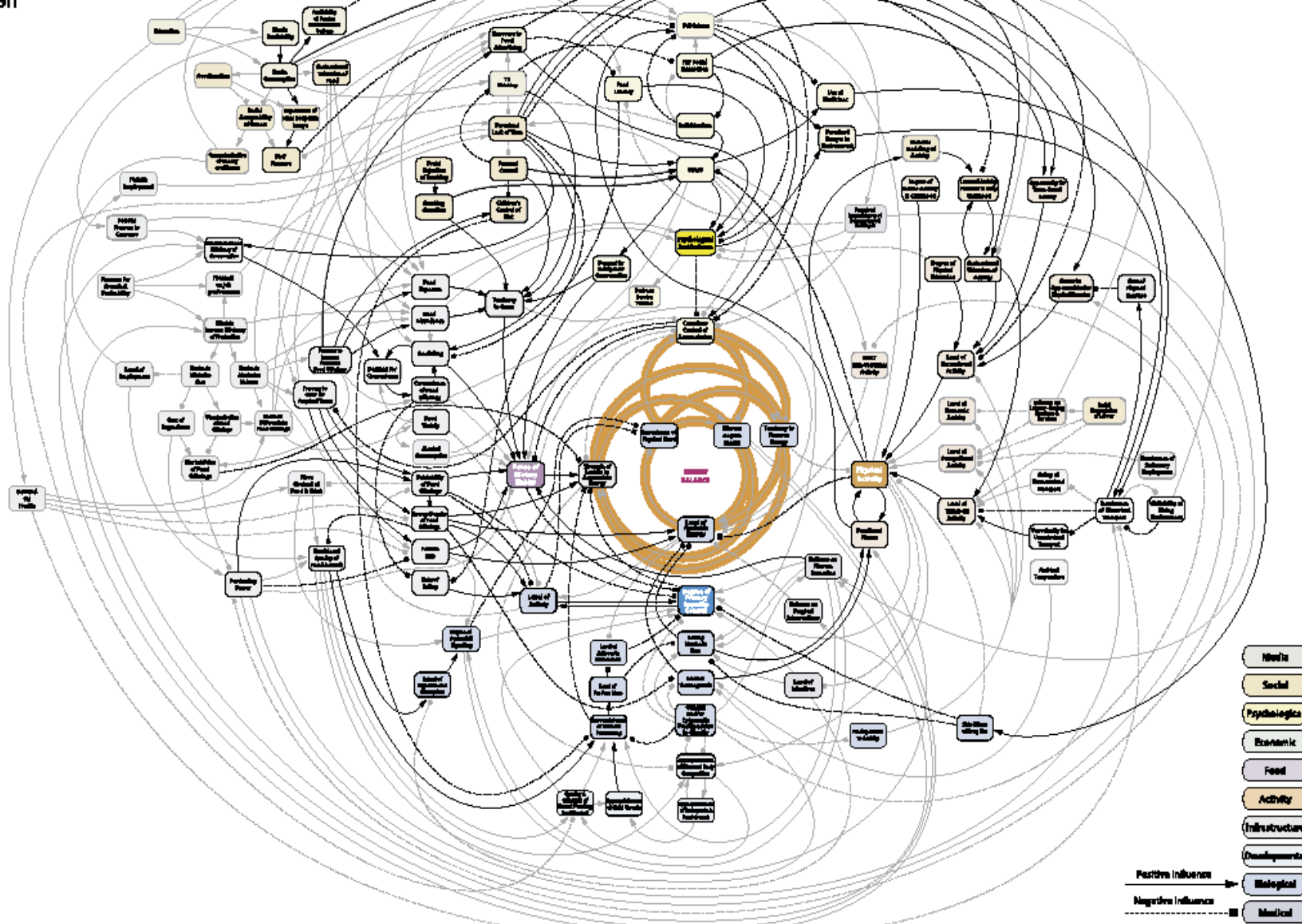


Figure 5.5: The obesity system map highlighting the interconnections of particular relevance to children (see main text, section 5.3, for discussion)^{17,18}

Map 34

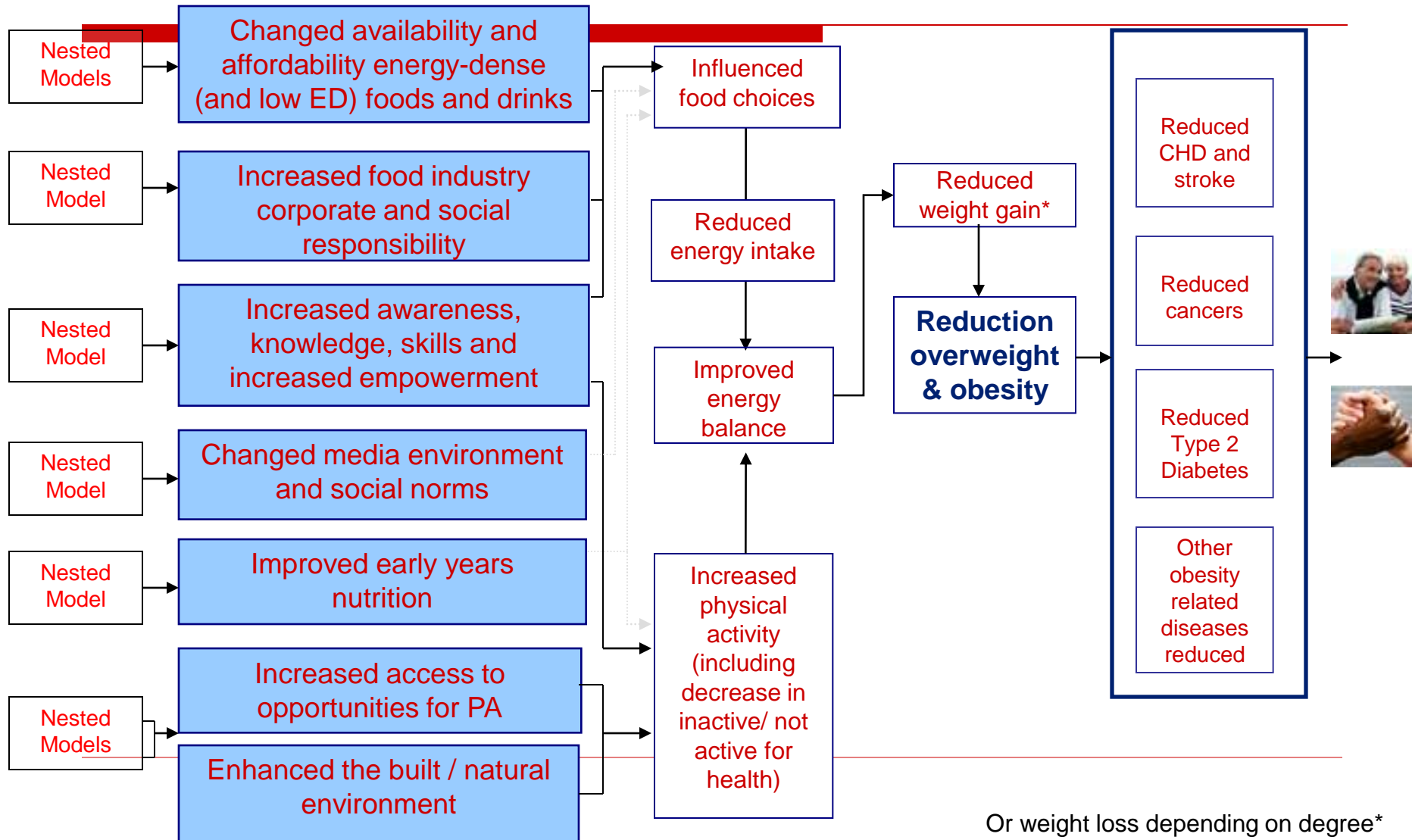
Segmented Map:
Children



Simplified strategic model for healthy weight (overweight /obesity)

Intermediate outcomes

Longer term and national outcomes



East Renfrewshire HWC Outcome Model

Activities	Reach	Short term outcomes 2009-2011	Intermediate Outcomes
<p>Social Marketing – Adopt social marketing principles to develop phase I and II social marketing campaign</p>	<ul style="list-style-type: none"> •10-14 years males and females •Parents of young people 10-14 years •Partners/stakeholders for phase II 	<ul style="list-style-type: none"> •Increased knowledge of healthy food choices / healthy physical activity choices •Access to young person friendly services / opportunities 	<ul style="list-style-type: none"> •Increased awareness, knowledge, skills and increased empowerment •Increased access to opportunities for physical activity •Enhance the built / natural environment
<p>Interventions (Adults) – Implement a range of community based healthy weight interventions for adults</p> <p>Interventions (Children/Young People) – Implement healthy weight interventions for children aged 5 – 15 yrs (H3)</p>	<ul style="list-style-type: none"> •Adults 18+ years •Males and females •BMI > 25 / > 30 •Children and young people 5 – 15 years •Males and females •Families / parents 	<ul style="list-style-type: none"> •Awareness and knowledge of recognition of unhealthy risks •Awareness of nutrition and physical activity messages •Awareness of food content/portion size •Increased skills and confidence •Increased motivation to take up healthy living opportunities •Identification and appropriate referral 	<ul style="list-style-type: none"> •Increased awareness, knowledge, skills and increased empowerment •Increased access to opportunities for physical activity •Enhance the built / natural environment

East Renfrewshire HWC Outcome Model

Activities	Reach	Short term outcomes 2009-2011	Intermediate Outcomes
<p>Stakeholder/Partnership Development – a) Establish a HWPIG to support the implementation of HWC/ACES b) Make explicit the connections between the range of intermediate outcomes in relation to: 1. Early Years nutrition 2. Physical activity (access/environment) 3. Healthy food choices (availability/accessibility) c) Review HW Strategy for Children and Young People (New edition 2010-13)</p>	<ul style="list-style-type: none"> • Health /NHS • ERC / Services • Partners / stakeholders 	<p>Increased awareness and knowledge of individual roles / service contribution to addressing healthy weight in East Renfrewshire</p>	<ul style="list-style-type: none"> • Changed media environment and social norms • Improved early years nutrition • Increased access to opportunities for physical activity • Enhance the built / natural environment
<p>Communication strategy - Develop a communication PR strategy to support HWC</p>	<ul style="list-style-type: none"> • Adults 18+ • Children and young people 5 – 15 years • Internal / external partners 	<ul style="list-style-type: none"> • Awareness of Go Barrhead brand • Awareness of healthy weight risks / key messages 	<ul style="list-style-type: none"> • Changed media environment and social norms • Increased awareness, knowledge, skills and increased empowerment • Increased access to opportunities for physical activity • Enhance the built / natural environment

What now?

- ❑ Identify continued contribution to healthy weight 'shared 'outcomes
 - ❑ Where do services fit?
 - ❑ What is manageable?
 - ❑ Future of programmes
 - ❑ Implication for resources
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Moving on and sustaining the HW approach

- ❑ Adults – Live Active, Vitality and Shape Up
 - ❑ Children – CHW, Right Moves and Youth health
 - ❑ Community – W2Go
 - ❑ Profile – HW awareness, brand, PR and Media
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Healthy Weight Outcomes, Priorities and Actions

- ❑ Fitting 'moving on' with outcomes
 - ❑ Role and remit of HWPIG
 - ❑ Agree actions – short, medium, long term
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