



# **HEALTH AND SOCIAL SERVICES DEPARTMENT**

## **DRAFT HEALTHY WEIGHT STRATEGY 2016-2023**

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## Section A: EXECUTIVE SUMMARY

<b>States Policy: Yes</b>	Healthy Weight Strategy (formerly Guernsey Obesity Strategy)		
<b>Period covered</b>	2016 – 2023		
<b>Political sponsors</b>	Health and Social Services Department		
<b>Programme Authors</b>	Director of Public Health and Directorate team members, with the multi-agency Healthy Weight Strategy Group.		
<b>Summary</b>	<p>This draft of a new Healthy Weight Strategy builds on and reinforces the work of the previous Guernsey Obesity Strategy. It aims to continue to reduce prevalence of overweight and obesity, which are one of the principal causes of premature death and preventable disease in the Bailiwick. It has been developed through examination of evidence of the most effective measures to reduce overweight and obesity, and engagement with partners and the public.</p> <p>Proposals for action under the new Strategy include, but are not limited to:</p> <ul style="list-style-type: none"> <li>▪ Maintaining and improving the accuracy of surveillance of obesity and overweight in adults and children:</li> <li>▪ Working with local food producers to reduce fat and sugar:</li> <li>▪ Working with cafes and restaurants to provide and identify lighter menu options and address inappropriate portion size:</li> <li>▪ Exploration of fiscal measures to support healthy eating choices</li> <li>▪ Working with the Guernsey Sports Commission, the Culture and Leisure, Education and Environment Departments, and others to increase opportunities for reducing physical inactivity:</li> <li>▪ Improving healthy lifestyle and weight management support: focusing on inclusive initiatives to reduce health inequalities.</li> </ul> <p>The document is now offered for consultation.</p>		
<b>Implications</b>	<table> <tr> <td> <ul style="list-style-type: none"> <li>▪ States Policy</li> <li>▪ Governance</li> <li>▪ Public and Media</li> <li>▪ Staff and Trade Unions</li> <li>▪ Staffing</li> <li>▪ £ revenue – current year</li> <li>▪ £ revenue – full year effect</li> <li>▪ Source of revenue</li> <li>▪ £ capital</li> </ul> </td><td> <ul style="list-style-type: none"> <li>▪ Yes</li> <li>▪ Builds on current work</li> <li>▪ Yes</li> <li>▪ No</li> <li>▪ None additional</li> <li>▪ None</li> <li>▪ Proposes continuation of current States Strategy with application for future funding as required</li> <li>▪ n/a</li> </ul> </td></tr> </table>	<ul style="list-style-type: none"> <li>▪ States Policy</li> <li>▪ Governance</li> <li>▪ Public and Media</li> <li>▪ Staff and Trade Unions</li> <li>▪ Staffing</li> <li>▪ £ revenue – current year</li> <li>▪ £ revenue – full year effect</li> <li>▪ Source of revenue</li> <li>▪ £ capital</li> </ul>	<ul style="list-style-type: none"> <li>▪ Yes</li> <li>▪ Builds on current work</li> <li>▪ Yes</li> <li>▪ No</li> <li>▪ None additional</li> <li>▪ None</li> <li>▪ Proposes continuation of current States Strategy with application for future funding as required</li> <li>▪ n/a</li> </ul>
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## STATES STRATEGIC PLAN

The Healthy Weight Strategy is a delivery programme within the States Strategic Plan. The framework of the States Strategic Plan is shown below at Figure 1.

**Figure 1:**

PURPOSE	To enable the States to decide what they want to achieve over the medium to long-term and how they will manage or influence the use of Island resources to pursue those objectives.			
AIMS	To focus government and public services on protecting and improving quality of life of Islanders, the Island’s economic future, and the Island’s environment, unique cultural identity and rich heritage.			
COMMUNITY OUTCOMES	Fiscal & Economic	We have sustainable long term finances and programmes	We have a balanced, internationally competitive, high value economy	We have a skilled, sustainable and competitive workforce
	Social	We have a social environment and culture where there is active and engaged citizenship	We have equality of opportunity, social inclusion and social justice	As individuals we take personal responsibility and adopt healthy lifestyles
	Environmental	We adapt to climate change	We manage our carbon footprint and reduce energy consumption	Our countryside, marine and wildlife are protected and preserved

## PROGRAMME SUMMARY OVERVIEW

<b>Programme Name</b>	Healthy Weight Strategy
<b>Period covered</b>	2016 – 2023
<b>Programme Authors</b>	Director of Public Health and Directorate team members, with the multi-agency Healthy Weight Strategy group.
<b>Political sponsors</b>	Health and Social Services Department
<b>Related Strategies / Reviews</b>	<ul style="list-style-type: none"> <li>2020 Vision for Health and Social Services</li> <li>Health Improvement Strategic Framework (under development in Health &amp; Social Services)</li> <li>Mental Health &amp; Wellbeing Strategy (Health &amp; Social Services)</li> <li>Cancer, Cardiovascular Disease and Maternity Care programmes (Health and Social Services)</li> <li>Children &amp; Young People's Plan (Health &amp; Social Services)</li> <li>Today's Learners: Tomorrow's World (Education)</li> <li>Disability &amp; Inclusion Strategy (Health &amp; Social Services)</li> <li>Supported Living and Ageing Well (under development)</li> <li>Transport, Development &amp; Land Use strategies (Environment)</li> <li>Leisure Services strategies (Culture and Leisure)</li> <li>Secondary Care &amp; Primary Care Reviews (under development)</li> </ul>
<b>Review periods</b>	<ul style="list-style-type: none"> <li>Ongoing monitoring of key performance indicators;</li> <li>Annual formal review of objectives and key performance indicators;</li> <li>5 yr review of strategic commitments.</li> </ul>
<b>Other relevant other documents that can be accessed when reading this document</b>	<ul style="list-style-type: none"> <li>Form for Consultation response October 2015</li> <li>Billet D'Etat XXX1 2009 vol 2: Health and Social Service Department – Guernsey Obesity Strategy, p. 2655 – 2750</li> <li>Health Profiles for Guernsey &amp; Alderney 2006-8 and 2010-12</li> <li>Guernsey &amp; Alderney Healthy Lifestyle Report 2014</li> <li>Guernsey &amp; Alderney Child Measurement Programme (GCMP) report 2015</li> <li>Healthy Weight Strategy: Report of Public Engagement exercises to date</li> <li>Research and evidence underpinning measures in the proposed Healthy Weight Strategy</li> <li>Healthy Weight Strategy - Action Plan and Monitoring schedule</li> <li>110<sup>th</sup> to 115<sup>th</sup> Medical Officer of Health reports</li> </ul> <p>All these are available at web-link addresses shown on page 23</p>

**1.****PURPOSE OF THIS DOCUMENT****1.1**

The purpose of this document is to invite comment on a proposed approach to continuation of strategy to address overweight and obesity. This approach includes commitment to support for those who need help to manage their obesity: initiatives to improve the numbers of people eating healthily; and initiatives to improve the numbers of people undertaking the recommended hours per week of physical activity in the Bailiwick of Guernsey for the years 2016-2023.

This consultation will run from October 16<sup>th</sup> to November 15<sup>th</sup>, when it will close to allow analysis and consideration of responses.

**1.2**

The following are presented in this document and its associated Action Plan:

- The Strategy's Statement of Purpose, its Vision, the outcomes that partner organisations hope to achieve together and the strategic commitments that drive us all towards achieving these outcomes;
- Identification of where the Healthy Weight Strategy sits within the States Strategic Plan;
- Identification of areas requiring appropriate attention and action in the period 2016-2023, as based on existing evidence and professional judgement;
- Identification of what will be done, by whom and with whom;
- Identification of where we wish to be within -
  - the short-term (a 2 yr period);
  - the medium-term (a 5 yr period); and
  - the long-term (a 10 yr period and beyond).
- An indication of measures of progress.

## 2. DEVELOPERS OF THIS DOCUMENT

### 2.1

This document has been produced by the Director of Public Health and team members in the Public Health Directorate of the Health and Social Services Department, with input from the Healthy Weight Strategy Group and key stakeholders, and advised by the Health and Social Services Board.

The following organisations and representatives have been involved in development (in alphabetical order):

- *Culture & Leisure Department*
- *Education Department;*
- *Environment Department*
- *Guernsey Sports Commission*
- *Health and Social Services Department;*
- *Medical Specialist Group;*
- *Office of Environmental Health and Pollution Regulation;*
- *Primary Care Medical Practices (Guernsey).*

These organisations and individuals work in conjunction with key partners in other areas, including other States of Guernsey Departments and corporate strategies such as the Education Strategy, the Transport Strategy, the Environment Strategy, and also businesses and third-sector parties where appropriate.

### 2.2

The production of this document, and the contribution of resources to support the Strategy's development and ongoing maintenance, is sponsored by the States of Guernsey Health and Social Services Department.



### 3. FOREWORD FROM THE MINISTER AND BOARD OF THE HEALTH AND SOCIAL SERVICES DEPARTMENT

#### 3.1

The Health and Social Services Department (HSSD) is mandated to advise the States on matters relating to the mental, physical and social well-being of the people of Guernsey and Alderney. This mandate gives HSSD responsibility for:-

- Promoting, protecting and improving personal, environmental and public health; and
- Preventing or diagnosing and treating illness, disease and disability.

Overweight and obesity are recognised as an increasingly important cause of early death and avoidable ill-health in Islanders. The States of Guernsey has continued to support the development of Bailiwick Healthy Weight (Obesity) strategies since 2006, and recognised that this is essential to improve the health of the population. It makes an important contribution to:

- sustainable long-term finances and programmes:
- meeting government objectives through coordinated service delivery:
- encouraging individuals to take personal responsibility and adopt healthy lifestyles: and
- maintaining a healthy, competitive workforce.

#### 3.2

In 2009, the States committed to an Obesity Strategy which has been driven forward by HSSD with partners. The principal aim of the Strategy was to reduce the burden of death and ill-health that obesity and overweight cause in the islands of the Bailiwick. It has achieved many of its objectives over the six year period since then: however, the Strategy was envisaged to be implemented in two halves. The second tranche of funding was not granted and some recommended actions have therefore not been implemented. Nevertheless, Guernsey life expectancies at birth for men and women have improved by 4-5% over the last 15-20 years and are now some of the highest in Europe.

#### 3.3

Obesity is a risk factor for a range of chronic diseases such as heart disease, cancer, and diabetes. The success of integrated tobacco control and increased worldwide obesity (excess fat accumulation that presents a risk to health) means that obesity is now close to exceeding tobacco smoking as a cause of premature ill health and death in developed countries. The World Health Organisation has identified reduction of population levels of obesity as one strategic objective that, if successful, will reduce societal costs from treating its complications. In the Bailiwick of Guernsey, this would reduce costs for HSSD.

#### 3.4

While health services may treat the consequences of obesity, many of the causal factors are part of the wider determinants of health, for example poverty, environment and commerce. Guernsey has been successful in developing, agreeing and implementing a multi-system Obesity Strategy, an achievement in itself. Prevalence of overweight and obesity is spread across the range of household income levels, indicating the issue of excess weight in adults occurs across all socioeconomic groups. Results from other jurisdictions strongly

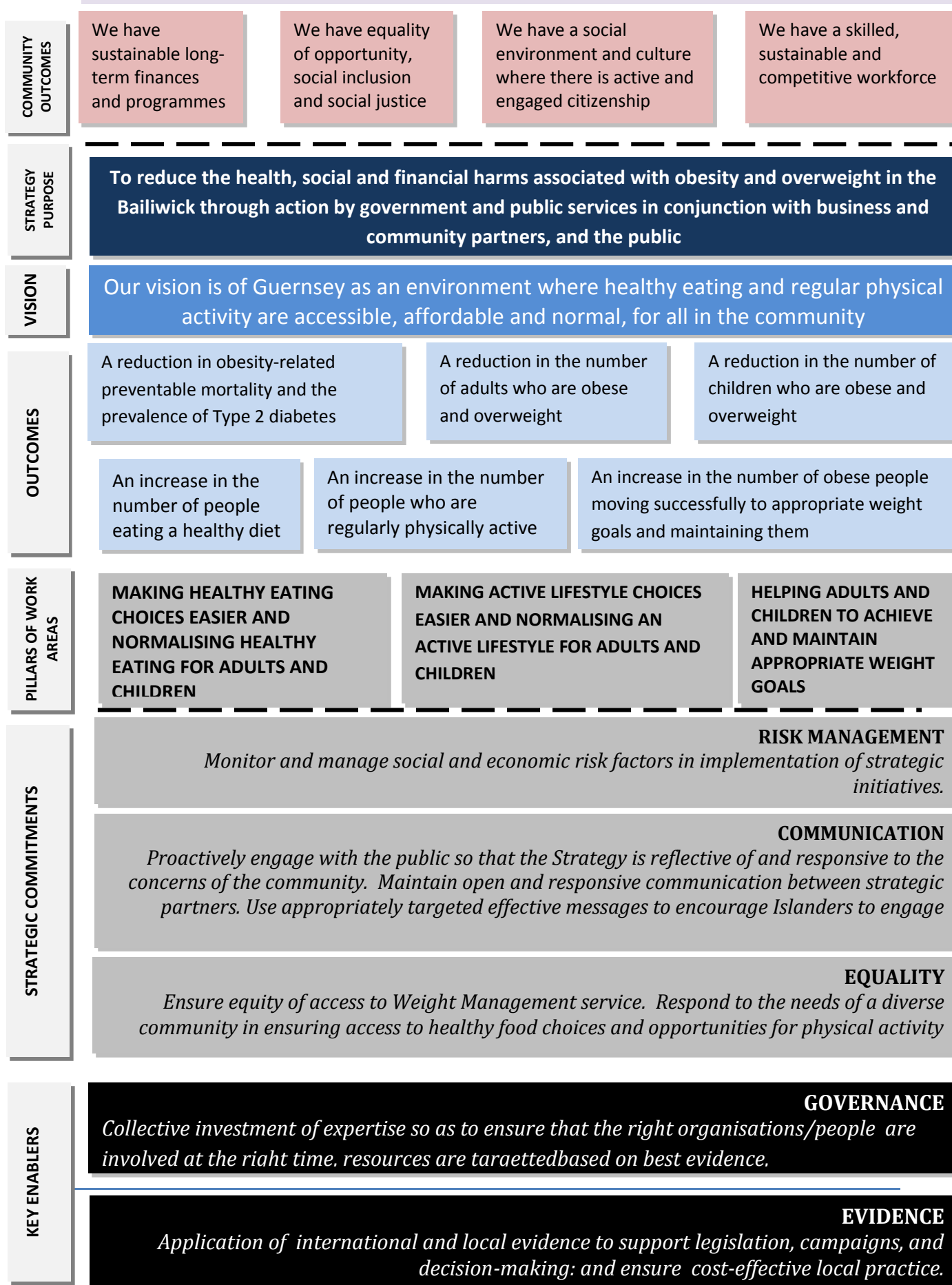
	<p>indicate a correlation between lower incomes and levels of overweight and obesity and effective monitoring should continue to take place within the Bailiwick to identify this trend, should it become apparent. There are also issues concerning individual perception of this problem: in the most recent Healthy Lifestyle Survey, over a quarter of those adults who were overweight reported themselves as being about the right weight, and of those who were obese, 58.9% thought that they were only overweight.</p>
3.5	<p>Under the Obesity Strategy of 2009, the first Guernsey Child Measurement Programme (GCMP) was delivered in primary schools in 2013. In 2015, 92% of children in Years 1 and 5 took part. Of Year 1 school children, 15% were overweight or obese: while of Year 5 children, 29% were overweight or obese. Following a small rise in 2014, results in 2015 have returned very closely to 2013 levels. The data show that approximately 250 children are being measured as either overweight or obese annually in just these two Year groups. Whilst the data suggest that our obesity and overweight prevalence is slightly lower than that in England, the number of children who carry an increased risk of facing an unhealthy future is of concern in Guernsey, just as it is in England.</p> <p>The Guernsey Young People's Survey (2010) contained questions on Health and Weight. 28% of boys and 34% of girls in Year 6 responded that they ate five or more portions of fruit and vegetables the previous day. By Year 12, this had fallen to 22% and 14% respectively. In the 2013 Survey report, 75% of boys and 85% of girls in Year 6 exercised three times a week or more (this is significantly less than the recommended hour a day) and 66% of boys and 58% of girls in Year 10.</p>
3.6	<p>Between 2010 and 2012 there were an estimated average 43 preventable cancer deaths each year and 23 preventable cardiovascular deaths each year in Guernsey and Alderney. Obesity and overweight are important contributory causes of these preventable deaths, therefore these figures, among others, should be viewed as a baseline for onward monitoring of the success of the Healthy Weight Strategy.</p>
3.7	<p>Partnership working with Clinicians, schools and the Education Department, the Environment Department, the Guernsey Sports Commission, other States Departments, business and the voluntary sector has supported striving to achieve a healthy weight in Islanders to date. This partnership is essential to future success, as all have their part to play.</p>
<p><b>Deputy Paul Luxon, Minister for Health and Social Services.</b>  <b>Deputy Heidi Soulsby, Deputy Minister: Deputy Michelle Le Clerc, Board Member: Deputy Mike Hadley, Board Member: Deputy Sandra James MBE, Board Member, Roger Allsopp and Alex Christou, Non-States Members</b>  <b>October 2015</b></p>	

## Section B: STRATEGIC FRAMEWORK

4.	STRATEGIC FRAMEWORK OVERVIEW	
4.1	States Strategic Plan	The Healthy Weight Strategy is a delivery programme within the States Strategic Plan. Figure 1 on page 5 outlines the States Strategic Plan's purpose and aims, and also the social policy, financial and environmental outcomes that it seeks to achieve. Figure 2 on page 13 outlines the framework of the Healthy Weight Strategy and identifies the social policy and financial outcomes with which it aligns.
4.2	Strategy Purpose	The purpose of the Healthy Weight Strategy is <i>"to reduce the health, social and financial harms associated with obesity and overweight in the Bailiwick through action by government and public services in conjunction with business and community partners"</i> (see Fig.2).
4.3	Strategy Vision	The Strategy has been built to achieve our vision of <i>"the Bailiwick of Guernsey as an environment where healthy eating and regular physical activity are accessible, affordable and normal, for all in the community"</i>
4.4	Outcomes	The outcomes are the benefits to individual residents and the wider community in the Bailiwick, which result from government, public policy, public service and individual actions.
4.5	Pillars (areas of focus)	The priority areas of focus are those areas where we will concentrate our efforts. These areas have been chosen through examination of relevant evidence, and through professional and political judgement. In each area we have set specific objectives as shown in our Action Plan.
4.6	Strategic Commitments	The strategic commitments enable and drive towards the delivery of outcomes.
4.7	Objectives	Objectives are shown within an Action Plan which covers the period 2016 - 2023 and includes short (2yrs), medium

		<p>(5yrs) and long term objectives (10yrs). These contribute to the achievement of outcomes. All objectives have an “end milestone”, or an indication of how we will know the objective has been achieved.</p>
4.8	<b>Key Performance Indicators</b>	<p>To define achievement of our aims and objectives, a limited number of high level ‘key performance indicators’ are set against outcomes in order to give us broad indications of achievement. Further detail about key performance indicators is provided on pages 15-20.</p>

**Figure 2**  
**Healthy Weight Strategy Framework**



5.	KEY PERFORMANCE INDICATORS
5.1	It is important that strategy is monitored on an ongoing basis in order to assess how we are performing against our desired outcomes. Key performance indicators are therefore set against each outcome. We will formally review and publish results of high level key performance indicators on an annual basis.
5.2	There may be times when there is little data to bench mark against and therefore some data will only become meaningful when it has been collected over a number of years.
5.3	We recognise that other HSSD and pan-States strategies for improving health will have an effect on the achievement of the key performance indicators for the first outcome of this strategy. Nevertheless, the evidence shows that maintaining a healthy weight and an active lifestyle are important and effective way to reduce the burden of early death (premature mortality) and preventable illness (morbidity).
5.4	The data gathered can give a broad indication of how successful our efforts are, and help us to make evidence-based decisions on what to do so as to achieve our outcomes and, ultimately, our vision of <i>“Guernsey as an environment where healthy eating and regular physical activity are accessible, affordable and normal, for all in the community”</i> .
5.5	Our objectives (what we propose to do) contribute to the achievement of our outcomes. All objectives have an “end milestone”, or an indication of how we will know the objective has been achieved. These objectives are shown within our action plan and will be monitored.

**Outcome 1**

**A reduction in obesity-related preventable mortality and in the prevalence of Type 2 diabetes by 2023**

		Data-source	Frequency of measure
KPI 1.1	Rates of premature death from cardiovascular disease decline over a ten year period from a baseline of 49.4 per 100,000 in 2013	HSSD Public Health Intelligence	Annual
KPI 1.2	The prevalence of Type 2 diabetes adjusted for age and sex (to be developed)	Primary Care/HSSD	Annual
KPI 1.3	Rates of premature death from cancers decline over a ten year period from a baseline of 15.1 per 100,000 in 2013	HSSD Public Health Intelligence	Annual

\* Premature death = < 75 years.

\*\* All rates are calculated as age standardised (Age Standardised Rates = ASR).

**Outcome 2**

**By 2023, a reduction in the number of adults who are obese and overweight**

		Data-source	Frequency of measure
KPI 2.1	Percentages of men self-reporting to be overweight or obese reduce over a ten year period from a baseline in 2013 of 38% and 19% respectively	HSSD Healthy Lifestyle Survey	Every five years
KPI 2.2	Percentages of women self-reporting to be overweight or obese reduce over a ten year period from a baseline in 2013 of 28% and 18% respectively	HSSD Healthy Lifestyle Survey	Every five years
KPI 2.3	Percentages of overweight and obesity in pregnant women at booking reduce over a ten year period from a baseline average in 2010-12 of 24% and 17% respectively	HSSD Maternity and Dietetic services	Annual






**Outcome 3****By 2023, a reduction in the number of children who are obese and overweight**

		Data-source	Frequency of measure
KPI 3.1	Percentages of children measured as being overweight or obese in Year 1 children reduce over a ten year period from a baseline in 2013 of 9% and 6% respectively	Guernsey Child Measurement Programme: HSSD	Annual
KPI 3.2	Percentages of children measured as being either overweight or obese in Year 5 children reduce over a ten year period from a baseline in 2013 of 14% and 15% respectively	Guernsey Child Measurement Programme: HSSD	Annual

**Outcome 4****An increase in the number of people eating a healthy diet by 2023**


		Data-source	Frequency of measure
<b>KPI 4.1</b>	<b>Percentages of men and women self-reporting to consume the recommended five portions of fruit and vegetables a day increase over a ten year period from a baseline in 2013 of 19% and 22% respectively</b>	HSSD Healthy Lifestyle Survey	Every five years
<b>KPI 4.2</b>	<b>Percentages of boys and girls in Year 6 self-reporting to consume the recommended five portions of fruit and vegetables a day increase over a thirteen year period from a baseline in 2010 of 28% and 34% respectively</b>	Young People's Survey	Every three years
<b>KPI 4.3</b>	<b>Percentage of boys and girls in Year 10 self-reporting to consume the recommended five portions of fruit and vegetables a day increases over a thirteen year period from a baseline in 2010 of 23% and 20% respectively</b>	Young People's Survey	Every three years

**Outcome 5****An increase in the number of people who are regularly physically active by 2023**

		Data-source	Frequency of measure
	<b>Percentages of men and women self-reporting to be physically active for 30 minutes five times a week increase over a ten year period from a baseline in 2013 of 31% and 29% respectively</b>	HSSD Healthy Lifestyle Survey	Every five years
	<b>Percentages of boys and girls in Year 6 self-reporting to be physically active for 3 or more times a week increases over a ten year period from a baseline in 2013 of 74% and 85% respectively</b>	Young People's Survey	Every three years
	<b>Percentages of boys and girls in Year 10 self-reporting to be physically active for 3 or more times a week increases over a ten year period from a baseline in 2013 of 67% and 58% respectively</b>	Young People's Survey	Every three years

**Outcome 6**

**By 2023, an increase in the number of overweight and obese people moving successfully to appropriate weight goals and maintaining them**

		Data-source	Frequency of measure
	<p><b>The number of men and women moving successfully to appropriate weight goals within the Adult Weight Management Service at 3 and 6 months increases over a ten year period from a baseline in 2013 of 42 and 18 respectively</b></p>	HSSD and independent services	Annual
	<p><b>The number of children moving successfully to appropriate weight goals within the Child Weight Management Service at 3 and 6 months, increases over a seven year period from a baseline set in 2016</b></p>	Guernsey School Nursing service	Annual
	<p><b>The number of Health Trainer clients achieving personal health goals in relation to weight, healthy eating and physical activity increases over a seven year period from a baseline set in 2016</b></p>	Health Trainer records	Annual

## Section D: GOVERNANCE

### 6. STRATEGY GROUP STRUCTURE

#### 6.1

The Healthy Weight Strategy group is a multi-agency group, comprising membership from:

Culture and Leisure Department  
Education Department;  
Environment Department;  
Guernsey Sports Commission;  
HSSD clinical staff;  
Medical Specialist Group;  
Office of Environmental Health and Pollution Regulation;  
Primary Care

Representatives from the Treasury and Resources Department have also attended for specific items.

Representatives of the business and voluntary sector will be invited to join the new strategy steering group

#### 6.2

The Healthy Weight Strategy group will report to the Health Improvement Programme Group. The Health Improvement Programme Group will report through the Director of Public Health to the Health and Social Services Board.

### 7. STRATEGY TIME-FRAMES & REVIEW PERIODS

#### 7.1

Our Action Plan is made up of a series of objectives that aim to be achieved across short, medium and long term time frames.

#### 7.2

Progress on actions will be reviewed by the Healthy Weight Strategy Group on an annual basis, and reported to the HSSD Board, and other Boards as relevant, through the Director of Public Health.

The milestones will be refreshed in 2018 for the second phase of Strategy delivery.

An interim public report on the progress of this Strategy in achieving its milestones will be produced by December 2018

## APPENDIX I: LIST OF CONSULTEES

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The range of organisations, including those listed below will be circulated with this document for consultation in Autumn 2015. Following analysis of consultation response: the document will be finalised and presented to the States by Health and Social Services.

Café and restaurant owners / managers

Chamber of Commerce, food producers and retailers

The Community Foundation

Office of Environmental Health and Pollution Regulation

General Public and the Media

GP Practices, Pharmacies and Dentists

Health and Social Services Directors and Managers leading on associated Strategies

Health Improvement Programme group and Healthy Weight Strategy group

Health and Safety Executive

Institute of Directors

Law Officers of the Crown, Guernsey Greffe Office and Alderney Greffe Office

Officer leads of other States Strategies and the States Strategic Plan

Schools and Parent Teacher Associations, GTA University Centre and College of Further Education

Secondary Care clinicians

Guernsey Sports Commission and The Youth Commission

States of Guernsey and Alderney Departments and Members, Committees and Policy Council and Parish Douzaines

Trading Standards

Voluntary Sector and associated special interest groups

Faith Groups

## APPENDIX 2:

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## WEB-LINKS TO RELATED DOCUMENTS

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Other relevant other documents that can be accessed when reading this document are shown here with web-links to take you to the documents

Healthy Weight Consultation response form 2015

Web-link: <http://www.surveymonkey.com/r/gsyhealthyweight2015>

Billet D'Etat XXX1 2009 vol 2: Health and Social Service Department – Guernsey Obesity Strategy, p. 2655 – 2750

Web-link: <http://www.gov.gg/CHttpHandler.ashx?id=3166&p=0>

Health Profiles for Guernsey & Alderney 2006-8 and 2010-12

Web-links: <http://www.gov.gg/CHttpHandler.ashx?id=74886> and  
<http://www.gov.gg/CHttpHandler.ashx?id=87388&p=0>

Healthy Lifestyle Surveys for Guernsey and Alderney, 2008 and 2013

Web-link: <http://www.gov.gg/publichealth>

Guernsey Young People's surveys: reports in 2013 and 2015

Web-link: <http://www.education.gg/ypsurvey>

Healthy Weight Strategy: Report of Public Engagement exercises to date

Web-link: <http://www.gov.gg/publichealth>

Research and evidence underpinning measures planned in the proposed Healthy Weight Strategy

Web-link: <http://www.gov.gg/publichealth>

Healthy Weight Strategy - Action Plan and Monitoring schedule

Web-link: <http://www.gov.gg/publichealth>

110<sup>th</sup> to 115<sup>th</sup> Medical Officer of Health reports

Web-link: <http://www.gov.gg/publichealth>

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