

NATALIE HIGGS - WRITTEN EVIDENCE (FDO0063)

Background

1. I am a third year Law with Politics LLB student, and I have been researching obesity and its impacts.
2. I have interviewed parents of school-aged children and produced a questionnaire that I distributed to parents, teachers, and childminders, focusing on the drivers of obesity.

Executive Summary

3. Childhood and adolescent obesity are complex public health issues in the UK, with significant individual and societal costs. Identifying the primary drivers of this problem is crucial for designing effective prevention and intervention strategies. This submission explores the key factors contributing to childhood and adolescent obesity in the UK, drawing on relevant research and evidence.
4. In addition to analysing existing research and data, I have interviewed twenty parents of children aged between 5 and 16 and had a qualitative questionnaire completed by a sample size of forty people, including parents and teachers (see appendix).

Questions Answered

5. This submission will focus on answering question 2 of the call for evidence concerning the primary drivers of obesity amongst a specific demographic, specifically children and adolescents.

Drivers of Obesity

6. Understanding the drivers of child obesity in the UK requires examining both the prevalence of the issue and the evidence-based research exploring its contributing factors.
7. According to the National Child Measurement Programme (NCMP) 2020/2021 data, in England:
 - a. 19.6% of 4–5 year olds are considered to be overweight or obese.¹
 - b. 34.4% of 10-11 year olds are considered obese or overweight.
 - c. Over a third of children aged 2 to 19 years are overweight or obese.²

¹ National Child Measurement Programme (NCMP) England, 2020/21 data: <https://digital.nhs.uk/data-and-information/publications/statistical/national-child-measurement-programme/2020-21-school-year>

- d. Children from disadvantaged areas are twice as likely to be obese compared to their most affluent counterparts.

Dietary Factors

8. A 2023 study published in the International Journal of Behavioural Nutrition and Physical Activity found a positive association between consumption of sugar-sweetened beverages and increased body mass index (BMI) in UK adolescents.³
9. A 2022 study published in the National Library of Medicine Journal highlighted the link between unhealthy dietary patterns characterised by high intake of processed foods and low intake of fruits and vegetables, and increased obesity risk in children and adolescents.⁴

My Findings – Dietary Habits and Childhood Obesity

10. Building on the established links between diet and childhood obesity, the data gathered from parents and teachers in this study offers valuable insights into the specific dietary challenges faced by children and their parents.
11. Limited access to fresh fruit and vegetables.
 - a. Parents reported difficulties affording fresh produce or finding convenient options for healthy meals.
 - b. Several specifically reported that the cost of living has seen their shopping bill increase by a sizeable amount, putting further strain on making the money stretch further.
12. High consumption of sugary drinks and processed foods.
 - a. Both parents and teachers mentioned concerns about children's intake of sugary drinks and unhealthy snacks, both at home and at school.
 - b. Many stated that they felt high-sugary foods were so readily available that it was hard to monitor intake consistently.
13. Lack of awareness or knowledge.

² Baker, C., 2023. *Obesity Statistics*. House of Commons Library: <https://commonslibrary.parliament.uk/research-briefings/sn03336/>

³ Walton et al., 2022. *Associations between trajectories of obesity prevalence in English primary school children and the UK soft drinks industry levy: An interrupted time series analysis of surveillance data*. PLoS Med 20(1). Available online: <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004160>

⁴ Gibney, MJ., 2022. *Ultra-processed foods in public health nutrition: the unanswered questions*. Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10197074/>

- a. Some parents expressed a desire for more information on healthy meal planning and portion control for children, stating that they were unsure of how much food is appropriate for their child and they worry about overfeeding.
 - b. One parent stated that she was “embarrassed to admit” that her cooking skills were very limited, and that she would not know where to start with cooking a healthy meal “from scratch”.
 - c. A number of parents said they would benefit from cooking classes or workshops to help them learn to cook healthy meals that would appeal to their children.
14. Increased social media presence.
- a. Parents highlighted a concern with the speed at which social media trends become so widespread. A specific example mentioned by several parents and teachers was the furore surrounding the popular ‘Prime’ drink that became a global trend.
 - b. Parents said they felt under pressure to purchase the drinks because everyone seemed to have them. The drinks came in several different colours and flavours, and it became popular to try and collect them all.
15. These findings align with existing research highlighting the role of sugary drinks and processed foods in childhood obesity risk. This suggests a need for further initiatives to increase access to affordable fresh produce and promote healthy eating habits among families.

Physical Activity Levels

16. The UK Active Lives Children and Young People Survey (2019/20) found that only 20.7% of children aged between five and sixteen met the recommended physical activity guidelines of at least 60 minutes per day.⁵
17. A study published in the International Journal of Behavioural Nutrition and Physical Activity found an association between increased screen time and higher Body Mass Index (BMI) in children, emphasising the negative impact of sedentary lifestyles (2024).⁶

⁵ Sport England, 2020. *Active Lives Children and Young People Survey: Academic Year 19/20*. Available: <https://www.gov.uk/government/statistics/announcements/active-lives-children-and-young-people-survey-academic-year-1920>

⁶ Zink, J., et al., 2023. *Longitudinal associations of screen time, physical activity, and sleep duration with body mass index in US youth*. International Journal of Behavioural Nutrition and Physical Activity. 34(24). Available: <https://ijbnpa.biomedcentral.com/articles/10.1186/s12966-024-01587-6>

My Findings – Physical Activity Levels and Childhood Obesity

18. As the referenced studies highlight, insufficient physical activity and increased sedentary behaviours are significant contributors to childhood obesity. This section explores the specific challenges faced by children regarding physical activity levels.
19. Limited opportunities for physical activity
 - a. Parents and teachers mentioned a lack of safe play areas, after-school sports programs that are affordable, or recess time dedicated to active play.
 - b. One parent reported that due to the cost of living, she has had to remove her ten-year old son from his football team because she could no longer afford to pay £25 a month for his fees on top of the costs of maintaining the equipment needed (shin pads, football boots, base layers).
20. Competition from screen time
 - a. Both parents and teachers expressed concerns about the amount of time children spend on electronic devices, reducing opportunities for physical activity.
 - b. Parents reported attempting to limit screen time but found it difficult to be consistent, “especially as there are no safe places to take the children to play”.
21. Transportation issues
 - a. Participants reported that safe walking or cycling routes to school are limited, and that parents do not feel safe letting their children play out in the street.
 - b. One parent said “I used to play out on the field as a child with my siblings, but I would not feel safe letting my children do that. There are too many reckless drivers on the road, and too many reports of teenagers carrying knives”.
 - c. A lack of safe play spaces means that children have limited space and opportunity to run and play.
22. These findings echo national trends of low physical activity levels and high screen time among children, contributing to a higher risk of obesity. This suggests a need for increased investment in creating safe spaces for physical activity, promoting active school environments, and encouraging families to limit screen time.

Socioeconomic Factors

23. The NCMP data consistently reveals a disproportionate burden of obesity amongst children from low-income families and disadvantaged areas.⁷ It highlights the complex interplay of poverty, food insecurity, and limited access to healthy food options in contributing to childhood obesity, particularly in specific communities.

My Findings – Socioeconomic Disparities and Childhood Obesity

24. This section explores the specific experiences of children in Southport, Merseyside. Although Southport is not considered a deprived town, some participants face financial constraints and care in receipt of Universal Credit and free school meals.
25. Food insecurity
- a. Some parents mentioned difficulties in affording healthy groceries or relying on processed foods that are cheaper but less nutritious.
 - b. Parents and teachers highlighted a lack of supermarkets or affordable healthy food options in their local vicinity. One parent said “I do not drive, and to carry my shopping back from a supermarket on a bus with my three children fills me with dread each week”.
26. Competing needs
- a. Some parents reported that financial constraints have made it difficult for them to do their food shopping. Especially now that the cost of living is so high, some expressed their concerns that they are needing to prioritise bills, rent and utilities over healthy food choices.
27. The challenges identified here, such as food insecurity and limited access to healthy foods align with existing research on the complex interplay of socioeconomic factors contributing to childhood obesity.
28. This suggests a need for targeted initiatives to address food insecurity in vulnerable communities and increase access to affordable, healthy food options.

Beyond diet, Activity, and Socioeconomics

⁷ National Child Measurement Programme (NCMP) England, 2020/21 data: <https://digital.nhs.uk/data-and-information/publications/statistical/national-child-measurement-programme/2020-21-school-year>

29. It is important to acknowledge that other factors beyond diet, physical activity, and socioeconomic background can also influence childhood obesity risk. These include genetics, stress levels, sleep patterns, and cultural attitudes towards food and body image. Further research is needed to fully understand the specific impact of each of these factors.

Recommendations

30. As highlighted by the research, healthy eating habits needs to be promoted.
- a. Develop and disseminate affordable, culturally appropriate recipe guides and meal planning resources for parents.
 - b. Partner with schools to offer cooking classes or workshops focused on healthy meal preparation for families.
31. Encouraging Physical Activity
- a. Increase investment in creating safe and accessible parks and recreation facilities in underserved communities.
 - b. Advocate for national guidelines requiring a minimum amount of dedicated recess time for physical activity in schools.
 - c. Work to provide affordable out-of-hour sports activities and clubs for children. Charities could potentially offer grants to fund sports team places for children whose parents cannot afford the fees.
32. Addressing Socioeconomic Disparities
- a. Implement targeted initiatives, such as grocery store voucher programs, to improve access to affordable, healthy food options in low-income communities.
 - b. Collaborate social service agencies to develop programs for families struggling with food insecurity, offering national guidance and support.
 - c. Give social services a greater responsibility in ensuring children's health and dietary needs are not being neglected.

Conclusion

33. Childhood obesity is a complex public health issue in the UK with significant consequences. This submission has explored the key factors contributing to this problem, drawing on relevant research and evidence from my independent study in Southport, Merseyside. The findings highlight the important of addressing dietary habits, physical activity levels, and socioeconomic disparities.
34. Limited access to affordable, healthy food options and a lack of awareness about healthy meal planning were identified

challenges for parents. Insufficient opportunities for safe physical activity due to cost barriers and a lack of safe play spaces were prevalent concerns, and financial constraints disproportionately affect low-income families, limiting access to healthy food and participation in sports activities.

35. As highlighted in the recommendations, initiatives promoting healthy eating habits, such as affordable recipe guides and cooking classes for families, are crucial. Additionally, increased investment in creating safe parks and recreation facilities, advocating for dedicated recess time in schools, and providing affordable after-school sports programs are essential to encourage physical activity. Implementing targeted programs to address food insecurity and improve access to healthy food options in vulnerable communities is vital.
36. By addressing these and working collaboratively, we can create a healthier environment for children and adolescents in the UK.

Appendix 1

Parents Questionnaire and Interview Questions

- 1) In your opinion, what are the biggest challenges children face in maintaining a healthy weight in today's society?

- 2) How often do you cook meals at home for your child(ren)?
 - a. Daily
 - b. Several times a week
 - c. Occasionally
 - d. Never

- 3) What are the biggest difficulties you face in ensuring your child(ren) have a healthy diet and get enough physical activity?

- 4) Does your child(ren) participate in any organised sports or physical activity programs outside of school?
 - a. Yes
 - b. No

- 5) What resources or support would be most helpful to you in promoting healthy habits for your child(ren)?

- 6) What do you think can be done nationally to help reduce obesity in children and young people?

- 7) Do you have any additional comments on the topic?

Appendix 2

Teachers and Childcare Providers Questionnaire

- 1) In your experience, what are the most common obstacles children face in adopting healthy eating habits at school/childcare?

- 2) Do you feel school/childcare facilities have adequate resources and support to promote healthy eating and physical activity among children?
 - a. Yes
 - b. No

- 3) How often do you have access to spaces or equipment suitable for physical activity at your school/facility?
 - a. Daily
 - b. Two times a week
 - c. Three days a week
 - d. Four or more days
 - e. Rarely

- 4) Have you observed any specific challenges children with obesity face in the school/childcare environment?

- 5) What changes or improvements do you think could be made at schools/childcare facilities to better support children's health and well-being?

- 6) What do you think can be done to tackle child obesity nationally?

- 7) Do you have any other comments on the topic?

7 April 2024