CHILDHOOD OBESITY UPDATE

Relevant Board Member(s)	Sharon Stoltz – Interim Director of Public Health Julie Kelly – Corporate Director, Children's Services
Organisation	London Borough of Hillingdon
Report author	Sharon Stoltz – Interim Director of Public Health
Papers with report	None

Papers with report	None
HEADLINE INFORMA	TION
Summary	This report is to brief the Board on the long-term impacts of childhood obesity, the local picture of childhood overweight and obesity and highlights some of the work going on to address it.
Contribution to plans and strategies	The work focused on the prevention and management of childhood overweight and obesity contributes to the delivery of the Joint Health and Wellbeing Strategy 2022-2025 and the Council Strategy 2022-2026.
Financial Cost	There are no financial implications in this report.
Ward(s) affected	All

RECOMMENDATION

That the Health and Wellbeing Board notes the content of the report.

INTRODUCTION

- 1. Excess weight impacts negatively on children's health and wellbeing outcomes and can have a significant long term negative impact on their educational and life chances into adulthood. Some of the key health impacts include:
 - Emotional and behavioural issues such as stigmatisation, bullying, low selfesteem
 - Educational issues such as school absence and educational attainment
 - Physical health issues such as high cholesterol, high blood pressure, prediabetes, bone and joint problems, breathing difficulties
 - Increased risk of becoming overweight and obese adults
 - Increased risk of ill-health and premature mortality in adult life
- 2. Excess weight in parents can have a negative impact on the healthy weight of their children. Having an obese mother increases the child's risk of experiencing excess weight by over 40% as shown in figure 1 below:

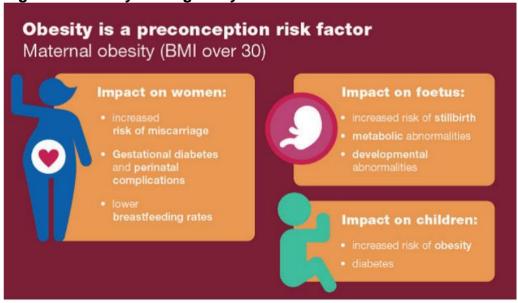
Obese Overweight Per cent 50 40 30 20 10 Neither Overweight Obese Neither Overweight Obese overweight overweight nor obese nor obese Mother's Father's BMI BMI Parent's BMI status status status

Figure 1. Impact of Parent's BMI Status on their Children

Analysis based on data from 2019, the most recent year for which data are available.

3. Women experiencing excess weight in pregnancy is also a risk factor for a number of health issues for the mother and her baby. These include gestational diabetes and hypertension (high blood pressure), pre-eclampsia, miscarriage and even death. There is also an increased risk of needing medical intervention during childbirth resulting in increased recovery time following the birth, challenges with breastfeeding and a risk to the bonding experience with their baby as well as poorer mental health outcomes. These risks are described in figure 2 below:

Figure 2. Obesity in Pregnancy



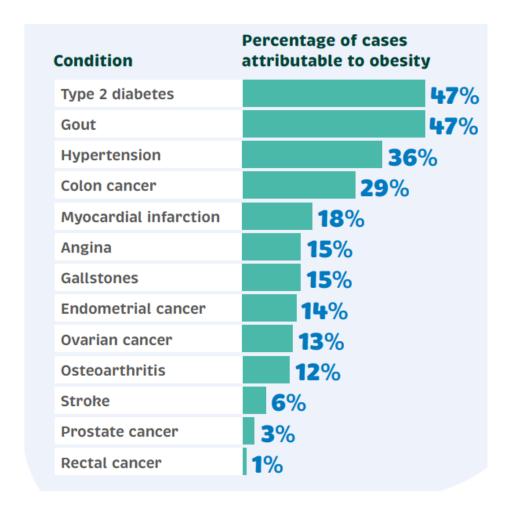
Source: OHID guidance Health matters: Prevention - a life course approach

4. Excess weight in childhood can often lead to obesity in adulthood. On average, obesity reduces a person's life expectancy by around 3 years with severe obesity shortening life by as much as up to 10 years (Severe obesity is a BMI of 40 or higher or a BMI of 35 with

co-existing health conditions such as hypertension or diabetes). The most recent data from 2023/24 shows that Hillingdon has a high percentage of adults classified as overweight or obese at 63%. This is higher than the London average of 57.8% but slightly better than the England average of 64.5%.

5. Tackling the risk factors for obesity such as diet and physical activity reduces the risk of more than 20 long term health conditions, increases economic productivity by having a healthier workforce and reduces demand on health and social care services. The 202 Global Burden of Disease study shows obesity as one of the biggest risk factors driving death and disability in England alongside hypertension, excess alcohol use and smoking as shown in figure 3 below:

Figure 3.



6. The long-term cost of obesity and the impact on the quality of life for those who are overweight or obese means that system-wide action is required to reduce the level of childhood obesity in Hillingdon.

CHILDHOOD OBESITY IN HILLINGDON

7. Data on childhood obesity has been collected by the National Childhood Measurement Programme (NCMP) since 2006. The NCMP is a mandated public health programme which measures the height and weight of children in Reception (aged 4 to 5 years) and Year 6 (aged 10 to 11 years) in schools in England. The participation rate in Hillingdon in the most recent year (2024/25) was 99.4% in Reception children and 98.5% for children in year 6.

- 8. In 2024/25 19.9% of children in Reception were overweight or living with obesity. This is similar to the London average (21.1%) and lower than the England average (23.5%) but represents a 1.2% increase in Hillingdon since 2023/24.
- 9. In 2024/25 36.2% of children in year 6 were overweight or living with obesity. This shows a downward trend of 1.3% since 2023/24 for Hillingdon and is now slightly lower than the London average (37.3%) and the same as the average for England (36.2%).
- 10. Although levels of overweight and obesity can be found in all areas of Hillingdon, it is more prevalent in some areas than others with a strong link with deprivation as shown below. Source data from Office of Health Improvement and Disparities (OHID).

Figure 4. Prevalence of Obesity in Hillingdon MSOAs in Children 4 to 5 years

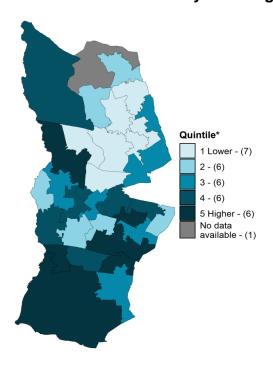
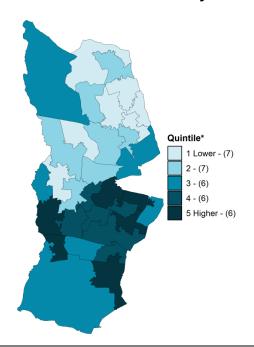


Figure 5. Prevalence of Obesity in Hillingdon MSOAs in Children 10 to 11 years



KEY PROGRESS AREAS

- 11. Understanding the school food landscape: Public Health and Education agreed a proposal for using the underspend from the GLA grant for universal free primary school meals implementation. School Food Matters undertook a survey of school food, with 46% primary schools responding and a full day audit in 12 schools. It showed:
 - low levels of awareness and compliance with statutory responsibilities around school food
 - lunch offer is largely compliant with School Food Standards, however, compliance across the whole school day is minimal. Food offered in wraparound provision is largely processed food and non-compliant.
 - Insufficient food education being delivered to meet requirements of the curriculum
 - Support for school around procurement and contract management is needed
- 12. **Improving school food provision**: Over the past six months, significant collaboration has taken place between Council teams, particularly Education and Environmental Health. Strategic objectives have been developed and agreed with Children's Services DMT.
 - Year 1 priorities are aligned to the Education Strategy Preparation for Adulthood objective and focus on school Leadership around food and health, access to and quality of school food.
 - Key Actions and development include:
 - Local guidance with resources for each strategic priority, available on LEAP that includes: a whole school food policy, self-assessment tools, contract templates
 - Establishing a new Hillingdon School Food Working Group (Public Health, Education, Environmental Heath and Oral Health Community Service)
 - Promotion of the new Healthy Schools London (HSL) programme, with the local priority being addressing a whole school approach to food
 - The Education team actively engaging school leaders in conversations regarding school food compliance and improvements aligned to universal Preparation for Adulthood
 - Environmental Health Officers undertaking School Food Standards compliance checks alongside statutory scheduled food hygiene inspections.
- 13. Increasing uptake of universal free school meal provision (primary schools)
 A big success this year has been more provision of free school meals for all primary school aged children. Led by Education, Hillingdon have recently implemented an Auto Enrolment process so families who are eligible for means tested free school meals are automatically enrolled; over 1000 additional children have been identified this year. This saves a family over £500 a year and gives their children access to better quality food. This is important as we know from the audits carried out by School Foo Matters, over 80% or packed lunches were not compliant with School Food Standards. It should also be noted that schools receive extra financial support for those children as well.
- 14. Healthy School London (HSL) Programme
 - The revised Healthy Schools London (HSL) programme is endorsed by Public Health and Education as a tool for health improvement, aligned with universal Preparation for Adulthood and the new Ofsted framework. Relaunched by the GLA in September 2025, it has been locally supported through school information sessions and governor training. Resources have been developed to help schools achieve awards, including a guide for implementing The Daily Mile. In July 2025, two schools achieved Gold status by

improving school food: introducing water-only policies, reducing sugary desserts, starting growing projects, and promoting sugar swaps.

Currently:

- Two schools are working towards Gold by enhancing Daily Mile activities and running Couch to 2K clubs.
- One school is focusing on a whole-school approach to food, healthy eating, and food education.

15. Parent information sessions

2 sessions for parents on how to have confident conversations regarding raising the issue of weight are planned. We have worked with partners from Hillingdon's Strategic Obesity Group to ensure the content reflects the needs identified by local services who work with parents.

16. Partnership with The Felix Project

There is a strong correlation between obesity and deprivation, with children living in the more deprived areas experiencing a higher prevalence of obesity. Active promotion of the Felix Project by Public Health has led to a 39% increase in families receiving healthy food during school holidays, from 709 families in 2024 to 1,159 in 2025. Hillingdon families received 159,018 meals, up 68% from 2024 and valued at £265K worth of food. Access to food provision had a significant community impact, with schools reporting high demand and quick uptake of food deliveries, increased engagement with families, enabling wider support and requests for weekly deliveries following summer success.

17. Free access to physical activity in the community

Parkrun at Stockley Park has been set up, providing a weekly event with up to 100 residents walking, jogging, running each week. This has led to plans for Junior parkrun, at Lake Farm Country Park, with 12 resident volunteers recruited. Following successful implementation of the LTA tennis court renovation programme, Public Health have recruited volunteers to deliver the Free Parks tennis programme. This has led to 1362 attendances over 18months (772 from south of the borough); tennis activation in underpresented communities acknowledged by DCMS (twice).

18. Children's weight management programme

A child healthy lifestyle programme for 5–17-year-olds above a healthy weight was approved in February 2025 by the Cabinet Member for Health and Social Care. This is being delivered by GLL, the council's leisure services provider. The programme includes Xplore, an 8-week family-based intervention and Junior Gym, a 12-week programme for eligible 11–17-year-olds. A web-based programme is also in development. In addition to the Xplore programme, GLL provide a universal offer to participating schools, delivering a whole school assembly and the Activate programme to Year 5 pupils. This has been delivered to 2 schools and active discussion are taking place with 6 schools to schedule this for January 2026.