

**TITLE OF REPORT:**           **Healthy Weight Update**

**REPORT OF:**               **Alice Wiseman, Strategic Director of Public Health  
and Wellbeing**

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## **SUMMARY**

The purpose of this report is to provide Overview and Scrutiny Committee with an overview of the healthy weight work that is being undertaken in Gateshead across the life-course as part of a whole system approach.

Obesity is described as one of the most serious public health challenges in the 21st Century. It is recognised as a complex problem and the causes are affected by many factors including our behaviours, environment, biology, society and culture.

Obesity is associated with reduced life expectancy. It is a risk factor for a range of chronic diseases, including cardiovascular disease, type 2 diabetes, at least 12 kinds of cancer, liver and respiratory disease, and obesity can impact on mental health.<sup>1</sup> In the last couple of years, we have seen that being overweight or living with obesity puts you at risk of dying from COVID-19.<sup>2</sup>

Obesity prevalence is highest amongst the most deprived groups in society. Children in the most deprived parts of the country are more than twice as likely to be obese as their peers living in the richest areas. This is sowing the seeds of adult diseases and health inequalities in early childhood.

Almost three in four adults in the UK will be overweight or obese by 2035 and over the next twenty years rising levels of obesity could lead to an additional 4.62 million cases of type 2 diabetes, 1.63 million cases of coronary heart disease and 670,000 new cases of cancer.

It is estimated that overweight and obesity related conditions across the UK are costing the NHS £6.1 billion each year Latest figures show there were nearly 900,000 obesity related hospital admissions in 2018 to 2019<sup>3</sup>

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<sup>1</sup> <https://www.gov.uk/government/publications/tackling-obesity-government-strategy/tackling-obesity-empowering-adults-and-children-to-live-healthier-lives>

<sup>2</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/907966/PHE\\_insight\\_Excess\\_weight\\_and\\_COVID-19\\_\\_FINAL.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/907966/PHE_insight_Excess_weight_and_COVID-19__FINAL.pdf)

<sup>3</sup> NHS Digital. (2020) Statistics on Obesity, Physical Activity and Diet, England, 2020

## BACKGROUND

### THE SCALE OF THE PROBLEM

1. Maternal obesity is linked to an increased risk of pregnancy related complications and children becoming obese in later life. Data on the prevalence of maternal obesity are not collected routinely in the UK. In England it is reported that 27% of women are overweight and 21% of women are obese at the start of pregnancy.
2. Local data for Gateshead shows that 22.6% (2018-2019) of mothers are classed as being obese in early pregnancy – this is in line with the average for England (22.1%) and is significantly better than the North East average 27.4%. Gateshead has the lowest prevalence out of all local authorities in the North East.
3. In terms of health inequalities, national data shows there is a gradient of deprivation with those women in the more deprived deciles almost twice as likely to be obese than mothers in the least deprived decile. There is also evidence to say the prevalence of obesity is over 10% higher in mothers from a black ethnic group than the national average and age is also a factor with women aged 20-29 and 40+ more at risk. Obesity is also more common in subsequent pregnancies than in the first pregnancy.
4. There is evidence of an association between breastfeeding and improved health outcomes for the mother, as well as the child. Breastfeeding is associated with improved maternal health; lower risk of breast cancer and endometriosis; greater post-partum weight loss and a lower BMI in the longer term. The Scientific Advisory Committee on Nutrition (SACN) highlighted that UK infants are exceeding their energy requirements, which may lead to an increased risk of obesity in childhood.<sup>4</sup>
5. Gateshead breast feeding data shows there is a significantly lower number of children who are first feed breastmilk (53%) than in England (67.4%), but Gateshead performs better than the North East average (50.6%). The percentage of breastfeeding mothers reduces after 6-8 weeks, but Gateshead performs significantly better (41.8%) than the North East average (35.4%) (third highest in the region).
6. Recent predictions indicate that by 2050, approximately 25% of all young people under twenty years of age are expected to be obese. Obesity in young people is difficult to treat and there is a high risk of persistence into adulthood.

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<sup>4</sup> [SACN report on Feeding in the First Year of Life.pdf](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/614242/SACN_report_on_Feeding_in_the_First_Year_of_Life.pdf)  
([publishing.service.gov.uk](https://www.publishing.service.gov.uk))

7. **Reception** –In Gateshead over one quarter of children at 29.4% are overweight or obese when they begin school- this is significantly higher than the North East and England averages and the trend is increasing. The prevalence of children of a healthy weight (69.5%) is significantly lower than the England and North East average and the trend is reducing. Gateshead is the third lowest in the region for healthy weight. Prevalence of obesity in Gateshead is 13% and is significantly higher than North East average (11%) and England average (9.9%) The prevalence of children who are underweight in Gateshead is 1.1% - higher than both the North East and England average.
8. Nationally the prevalence of obesity for reception aged children is 10% higher in the most deprived areas compared to the least deprived. The prevalence of overweight or obese children is significantly higher in children from a black ethnic group. Although the prevalence of overweight or obese children is significantly higher in males, the difference is <1%.
9. **Year 6-** There is a particular issue in Gateshead with a high number of obese and severely obese children, although the number of children who are classed as overweight is lower than the national average. The number of children who are obese or severely obese has almost doubled since the recorded prevalence for reception (+11.9%) and is significantly higher than the national average. Resulting in 38.5% of children who are overweight or obese - being significantly higher than the England average (35.2%). The prevalence of children who are underweight remains low in Gateshead – and is lower than the average for England.
10. The same inequalities are seen as in reception national data (no data available at a local level). There is a gradient of deprivation with over 17% more children classed as ‘overweight or obese’ in the most deprived deciles than the least deprived. For Year 6 there are significantly more boys (+5%) who are classed as overweight or obese than girls – a much greater difference than in Reception between the two sexes. (37.7 vs 32.5%).
11. Overall National Child Measurement Programme (NCMP) routine data shows that there are more overweight children in areas of socio-economic deprivation compared to more affluent areas. Children living in the 10% most deprived areas are twice as likely to be obese than children living in the 10% least deprived areas. Living with obesity can have implications on children’s physical and mental health, often as a consequence of low self-esteem and anxiety and these children are also more likely to carry this experience into adulthood, increasing the risk for their own children.
12. Gateshead (47.9%) has a higher percentage of physically active children and young people than both the North East regional average (47.1%) and the average for England 44.6%).
13. Although locally we don’t collect data specifically on a healthy diet in children – we do have data on the amount of visually obvious dental decay. Evidence suggests high sugar intake is associated with an increased risk of dental caries and that children with excess weight are more likely to have dental caries, therefore we have used this as a proxy measure for an unhealthy diet. The percentage of children with visually obvious dental decay at 5 years old is

significantly higher in Gateshead (26.6%) than national and regional averages (23.3% North East and 23.4% England).

14. By 2050, modelling indicates that 60% of adult men, 50% of adult women could be obese. Although personal responsibility plays a crucial part in weight gain, human biology is being overwhelmed by the effects of today's 'obesogenic' environment, with its abundance of energy dense food, transport, and sedentary lifestyles.<sup>5</sup>
15. Current data show the prevalence of obesity for those aged 18+ in Gateshead is 70.8% - significantly higher than the England average and also higher than the North East average (though not significant). The percentage of overweight and obese increased in 2020, after reducing and coming into line with the England average in 2019.
16. Physical activity is often described as the most cost-effective drug in terms of addressing obesity. Data from the active lives survey shows us that 61.8% of adults in Gateshead are physically active. This is significantly lower than both the North East (64.7%) and England (66.4%) average. This aligns with the percentage of those walking/cycling at least 3 days a week in Gateshead (2.1%) is also lower than the England (3.1%) and North East (2.3%) averages (though not significantly). The proportion of adults meeting their recommended 5-a-day in Gateshead (53.1) is in line with the North East (53.7%) and England average (55.4%).
17. Obesity does not affect all groups equally. Nationally the rates of excess weight are even higher in adults with severe mental health illnesses and learning disabilities. The latest experimental statistics on the health and care of people with learning disabilities suggests that excess weight is twice as prevalent in adults aged 18-35 years old with a learning disability whilst the prevalence of obesity in individuals with severe mental illness (SMI) can vary depending on the psychiatric diagnosis.

## PROGRESS UPDATE

### A WHOLE SYSTEM APPROACH

18. **Gateshead Healthy Weight Alliance-** Work was undertaken in October 2021 to refresh the work of the Alliance and this has increased the knowledge and expertise within the membership. The meetings have been set as monthly meetings for the first quarter of 2022 to revisit aims and objectives, existing membership of the Alliance, as well as to focus on local needs from most recent data to help set priorities.
19. As part of the Healthy Weight Alliance subgroups have been introduced to take forward priority areas of work. The Children and Families Obesity subgroup work was convened, and a workshop was held on 21st January,

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<sup>5</sup> McPherson K, Marsh T, Brown M. Modelling Future Trends in Obesity and the Impact on Health. Foresight – Tackling Obesities: Future Choices – Government Office for Science, 2007

with key partners to map out existing children and families obesity interventions across Gateshead. This included gathering experiences and voices from various practitioners regarding gaps and interventions that can be put in place at various points on the 0-19 journey. The findings from the workshop will feed back into the Alliance priorities. The next step is to draft pathway options for Gateshead, so when Children and Young People are identified by the school weight and height assessments in Reception and Year 6, results can be acted upon. Dr Judith Reid, Paediatric Associate Specialist, at Gateshead QE is progressing potential models and funding for a pilot in Gateshead localities with higher incidence.

20. **Local Healthier Food Advertising Policies-** This work came to a halt and is just being progressed once again. Gateshead recognises the association between obesity prevalence and adverts for high fat, salt and/or sugar (HFSS) products, but up until recently had little power to do anything about it. The establishment of local Healthier Food Advertising Policies, first launched by the Mayor of London on the Transport for London network in February 2019, provides us with an opportunity to look at tried and tested policy to hold industry to account and protect our communities in Gateshead.
21. **Healthy Weight Declaration (HWD)-** The HWD is a strategic, system-wide commitment made across all council departments to reduce unhealthy weight in local communities, protect the health and wellbeing of staff and citizens and make an economic impact on health and the local economy. This work has recommenced after being dormant due to covid. There are 4 other local authorities in the region working towards the declaration.
22. The first phase of work (September until November 2021) has involved the voluntary and community sector to cascade key facts about what the HWD is, understanding its commitments and how it can involve their communities. The second stage involved a survey to understand shopping habits of local residents and the reason behind these as the first stage towards the healthy weight partnership working with local businesses. Based on the data collected we now have a greater understanding of when people like to shop (after work or after participating in activities), where they prefer to shop (actually instore compared to online and which stores are the most popular), and majority of people shop for their household or family members. We can now interrogate the data and feed this into the 20-minute neighbourhood work as well as help us work with local businesses based around the needs of local people
23. As part of the HWD we have commenced work with the Councils Human Resources and Workforce Development Team to work with Gateshead staff working on resources, campaigns, policies, and future opportunities to work on the healthy weight agenda. Work has also been ongoing with the QE hospital and Working Gateshead with their HWD pledge.
24. Work has also commenced with Gateshead School Sports Partnership to consider ways to support schools with the HWD pledge for staff and pupils.
25. **Next steps for the Healthy Weight Declaration:**
  - Assisting the voluntary and community sector and a handful of local businesses to look at the commitments for organisational change and

cultural shift and support them to take on one or more of the healthy weight commitments and feedback progress.

- Reviewing the pilot work with the Mini Health Champions in schools and supporting a handful of schools to adapt the commitments around health promotion infrastructure and environments and to review their success.
- Work with Human Resources and Workforce Development Team around the 'strategic system leadership' commitments for healthy weight, to pilot for Gateshead staff and review their outcomes

**26. Training on Healthy Weight/Nutrition-** There are 500 Making Every Contact Count (MECC) Champions in Gateshead from all sectors and representing the most marginalised and vulnerable members of society. They have been trained in all aspects of 14 lifestyle topics with an ongoing training programme and fortnightly meetings. They cascade key messaging to their communities and colleagues.

27. Resources have been developed to train people of all abilities and sectors on how to have conversations on food and mood; understanding vitamins and minerals; key aspects of behaviour change, and where to signpost for specialist advice or support. e.g. local businesses such as GB Lubricants so they can support their workforce to be physically active; Skills4Work are a VCS organisation who adapt the MECC key messaging for young adults with learning disabilities. We have worked with TIMS physiotherapists so consistency of information is given by every physio on all aspects of physical activity, healthy weight and nutrition, along with mental health but they also have a range of resources suitable for different cultures, ages, learning disabilities, etc to give out at appointments. Working Gateshead are MECC trained so they can cascade key lifestyle messaging.

28. A vast range of healthy weight/ nutrition resources suitable for various abilities, ages and cultures (training slides, quizzes, videos, social media graphics, leaflets) have been developed for organisations in Gateshead. Bespoke resources have been made in BSL formats and with voice overs for different cultures. Gateshead MECC work in collaboration with Middlesbrough Council is being used as a best practice model for potential scalability across the NENC ICS area. Work has been published on the Local Government Association website as a model of good practice nationally..

**29. Wellbeing Walks Programme-** Gateshead Council have signed up to 'The Ramblers Wellbeing programme' to develop a walking programme for Gateshead residents to have access to a friendly short walking group, within easy reach of where they live, to help them become and stay active.

30. To date 5 volunteers from the organisation 'Skills 4 Work' have recently trained as Wellbeing Walk Leaders and are delivering closed walks to adults with learning disabilities as part of their weekly activity programme.

31. A further training course was delivered at Gateshead Older Peoples Assembly on Friday 6th March. Twelve volunteers from organisations including the Stroke Association, Gateshead Older Peoples Assembly and Tyne Valley Health Walks who currently deliver walks in Chopwell and

Blaydon, attended the training to become Wellbeing Walk leaders and Walk Leader Assistants.

32. A Wellbeing Walks inbox has been created to support volunteers to add walks to the website so these can be promoted across Gateshead. Information relating to the Ramblers Wellbeing Walks programme has been circulated and an overview of the programme as well as contact information for residents of Gateshead to become involved in the programme.
33. **Healthy Weight Intelligence Tool-** Public Health England requested for a local authority in the region to support them in the development of a healthy weight intelligence tool. Gateshead Council supported and tested out this tool at a local level. The tool helps bring together available data and evidence on obesity, and the conditions associated with it. It has been used at workshops to bring together a multitude of data and evidence and the tool presents this in an easily accessible format to support local systems in their work to address excess weight and obesity in their populations.

## **WIDER ENVIRONMENT/PLANNING/TRANSPORT**

34. **Hot Food Take Away-** Gateshead Council are working with the Office of Health Improvement and Disparity (OHID) and Teesside University in relation to the approach to hot food takeaways and the food environment during covid. Gateshead is considered proactive in their approach to this work.
35. Temporary legislation that allowed restaurants, cafes and pubs to offer hot food takeaway food without gaining planning permission during the Coronavirus pandemic comes to an end at the end of March 2022.
36. Eating establishments that are offering takeaway food as more than an ancillary part of their business will need to apply for planning permission to continue. Ancillary is usually considered in excess of 20% of turnover. Anecdotally many food premises have started to offer takeaway food in Gateshead, however not many have notified the Council of this. Planning permission for hot food take away or mixed take away and other uses is not likely to be granted at this time due to considerations within the Hot Food Takeaway Supplementary Planning Document,<sup>6</sup> which seeks to protect the health and wellbeing of Gateshead residents amongst other planning considerations.
37. The council is providing a guidance note to all eating establishments in Gateshead through the Environmental Support Officers as part of their current role. It is recognised that many businesses are struggling, therefore we are offering further guidance and assistance as part of this process.

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<sup>6</sup> [Hot-Food-Takeaway-SPD-2015.pdf \(gateshead.gov.uk\)](#)

38. **20 Minute Neighbourhoods**- Public Health are involved in the discussions with Planning colleagues around 20 minute neighbourhoods in Gateshead. The concept is about ensuring our communities are able to meet their day to day needs within a 20 minute walking distance to reduce car use, promote active travel and improve wellbeing.

39. **Spatial Planning Core Strategy**- Public Health have formed a subgroup to initiate discussions around Public Health priorities as part of the Spatial Planning Core. Public Health ensures the voices of the most marginalised and vulnerable communities are considered and the range of inequalities highlighted for the pilot areas. Additionally the work involves cross referencing the core strategy work to all relevant public health policy areas related to physical activity, healthy weight and nutrition.

## HEALTH PARTNERS

40. **CCG/Local Authority Group**- Newcastle Gateshead CCG and Public Health have established a working group to review current services and approaches to healthy weight being delivered across the system and looking at areas for improvements. The group has monthly meetings to review priorities and ensure pathways are connected. A health needs assessment was carried out by North of England Commissioning Support (NECS) to identify gaps in provision.

41. **Active Travel and Social Prescribing**- The Department for Transport (DfT) announced in June 2021 'Active Travel' Capital funding across the country. This was to be provided to local transport authorities to embed walking and cycling as part of the new long-term commuting habits and to reap the associated health, air quality and congestion benefits and forms part of the Government's £2 billion commitment set-out in Gear change: a bold vision for cycling and walking (Gear Change)<sup>7</sup>. The pilot seeks to understand the relationship between personalised support plans for cycling and walking and increased cycling/walking infrastructure in a local authority to increase physical activity and a modal shift in behaviour.

42. This funding included 'expressions of interests' (EOI) for the development of a GP Social Prescribing Pilot. The aims of the project (as stated by DfT) is to –

- Address local community identified need relating to underrepresented groups, high levels of deprivation and health inequalities
- To actively promote increased levels of physical activity through cycling and walking.
- To demonstrate clear links between infrastructure development and the proposed social prescribing schemes.
- To support modal shift to active travel providing people with travel choices and supporting changes in behaviour.

43. Gateshead applied for funding and were one of the shortlisted local authorities to receive revenue funding (25k) for a feasibility study. Gateshead

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<sup>7</sup>[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/904146/gear-change-a-bold-vision-for-cycling-and-walking.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/904146/gear-change-a-bold-vision-for-cycling-and-walking.pdf)

have the opportunity to proceed to stage 2 of funding to apply for £1.5 millions pounds. The steering group, taking this work forward includes a variety of partners including Public Health, Edberts House and LA Planning Policy, Climate Change & Strategic Transport colleagues.

44. The feasibility study needs to outline a detailed proposal for Gateshead by the end of April 2022, outlining how the prescribing pilots and related infrastructure improvements will be properly integrated into wider cycling and walking network plans.
45. The focus of the work will be in areas where there is high levels of deprivation and poor health indicators. A focus is on promoting walking and cycling for short journeys, contributing to air quality, carbon, and congestion benefits. The focus of this work will support the Council's draft Local Cycling and Walking Infrastructure Plan (LCWIP).
46. A key part of the feasibility phase includes consultation and capturing the voices of local people. This will be done by working with community groups, Voluntary, Community, Social Enterprise Organisations (VCSE) and Primary Care Networks (PCN's). Edberts House, as the Social Prescribing Provider for Gateshead, will play a key role in linking with Primary Care Networks
47. **MECC Training Primary Care- Primary Care Training** – MECC training sessions have been delivered to Gateshead GP practices- focusing on how to have conversations around lifestyle topics particularly physical activity, healthy weight, and nutrition. These will support staff to include these key messages where appropriate in daily conversations with patients using the MECC approach of brief advice. Further programme sessions are being rolled out again to the GP practices at the requests of GP staff commencing from May onwards.
48. **A Weight Off Your Mind-** Gateshead have been part of the regional work 'A weight off your mind' led by Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW). The work has led to the development of a plan for people with lived experience of mental health conditions and/or learning disabilities to support people to maintain a healthy weight. Gateshead public health has provided extensive training as part of the MECC offer to CNTW staff and local action plans have been devised and this group continues to meet to review the work. This work has now been given higher priority by CNTW, and the work plan is now supported by new staff in post at CNTW to progress further.

## **MATERNITY/EARLY YEARS FOCUS/CHILDREN AND YOUNG PEOPLE**

49. **Maternal Healthy Weight Group- Maternal Healthy Weight Group-** A multi partnership sub group has been developed-including Gateshead QE, Newcastle Gateshead CCG, North East and North Cumbria Integrated Care system to focus on the work around healthy weight during pregnancy, and potential interventions. Work to date has included:

- Reviewing Gateshead data on healthy weight during pregnancy and involving insights from local communities and services to consider ways to enable people to be supported with behaviour change and myth busting.
- Reviewing information around pregnancy that can be distributed by any sector. e.g. benefits of physical activity during pregnancy; benefits of vitamins supplements during pregnancy
- Joining up ways to cascade consistency of key messaging during pregnancy and first 1001 days of child's life regarding nutrition, healthy weight and physical activity.

50. **Integrated Care System Core20plus Funding-** A steering group was brought together by Public Health, consisting of experienced practitioners from a range of organisations to put together an Expression of Interest for ICS Core20plus funding, focused on support within foodbanks for prenatal and postnatal families. The bid was not successful but the steering group are assisting to pilot the resources for maternal healthy weight within Foodbanks in Gateshead.

51. **The 0-19 years 'Growing Health Team' (health visitors and school nursing services)-** The team has now a dedicated infant feeding and nutrition lead. This provides a key focus for breastfeeding, weaning and nutrition for the crucial early years period and also supports the healthy weight agenda for school children.

52. **HENRY-** HENRY is a programme that works to support families to help children achieve the best start in life, using a holistic, evidence-based approach. HENRY has been operating since 2008 and provides a programme focused on a healthy start in life and is currently commissioned in around 40 local authority areas. The HENRY approach uses a holistic approach of working with families underpinned by evidence on risk and protective factors for whole-family nutrition, healthy weight, and child development.

53. HENRY has the strongest evidence-base of any UK healthy early years programme. Peer reviewed evidence shows HENRY has successful outcomes in the following:

- Families make and sustain statistically significant improvements in family lifestyle and parenting efficacy.
- The training has a lasting impact on practitioner skill and confidence.
- The training leads to improved practice in early years settings – in both nutrition and physical activity.
- HENRY has a population level impact (obesity rates in Leeds were shown to decrease in the deprived areas where HENRY was targeted (caveat with data). Based on current evidence of the programme's effectiveness a pilot Randomised Control Trial (RCT) of HENRY is in progress.

54. Gateshead will be implementing the HENRY programmes 'Healthy Families: Right from the Start Programme' 0-5 years and Healthy Families: Growing Up Programme. The approach will be to pilot 2 HENRY programmes and these will be implemented by the 0-19 Public Health Nursing team (Growing Healthy Gateshead). Identified Practitioners will undertake the training and then

deliver the programme through their day-to-day work with families and children. The training and then implementation will begin in September 2022 and support families and children with healthy weight in a holistic way.

55. **Active Mums-** Active Mums sessions have started again in March 2022 at Saltwell Park and Winlaton Mill. The sessions target new mums who have given birth in the past 12 months and offers a free, safe and supported environment for them to be physically active with their baby as well as a social opportunity to meet other new mums. The sessions are supported by our local maternity services.
56. **PHD Embedded Research Role - Gateshead Council** - Zoë Bell is approaching the final months of her PhD, due July 2022. The original project was designed so that she would spend a year embedded in a service offering free food in Gateshead as a researcher-volunteer. Using observations from inside a foodbank and semi-structured interviews (with a particular focus on pregnant women and women with children aged 0-2 years old) the project intended to understand the effects of austerity and food insecurity on maternal and child nutrition and health. Zoë spent approximately five months based in the public health team scoping the food aid landscape in Gateshead, mapping the services offering free food parcels, building relationships, and securing a research site. The pandemic inhibited this community-based project due to safety and time limitations set by PhD funding.
57. Since, Zoë has completed a qualitative systematic review and meta-ethnography exploring the experiences and perceptions of nutritional health and wellbeing amongst food insecure women and children in Europe. Findings of this review relating to women have been presented to women with lived experience of food insecurity in Gateshead and have recently been submitted to an academic journal for publication. Findings of this review relating to children are anticipated to be submitted to an academic journal for publication by April 2022.
58. Zoë's final project used serial interviews to explore frontline workers (those helping women and children access food) experiences and perceptions of the nature of food insecurity within a changing landscape. Zoë is currently analysing this data and it is anticipated that initial findings will be written up in June 2022. As part of her collaboration with the council Zoë has collaboratively presented at UKCO 2019 symposium and Fuse The Early life and adolescence programme (ELAP) meetings with Emma Gibson reflecting on the researcher-in-residence model used as part of the original research.
59. **Gateshead School Sport Partnership-** The Schools Health and Wellbeing Service' is now in its fourth year of operation and the service has already established a local network of 40 primary schools and Health and Wellbeing co-ordinators, all with the aim of improving the health and wellbeing of children and young people. The service provides a range of tangible services to schools, providing effective support across the four key themes of; Emotional Health and Wellbeing, Healthy Eating, PSE and Physical Activity.
60. Gateshead public health have developed activity booklets around physical activity, healthy weight, and nutrition for 7–10-year-olds that are being piloted

with 20 schools for the Mini Health Champions through the SSP to gain insights to their success on cascading key messaging

61. We are building upon the success of our Covid Champions work with schools and adapting our training module around understanding vitamins and minerals to enable children to understand how eating fruit and vegetables benefits their bodies. This is again going to be trialled initially with Mini Health Champions within primary Schools
62. Initial discussions have been held around school tuck shops and ways to give ideas for healthier options. This piece of work is in its early stages of developments with schools.

## **WORKPLACE**

63. **ESCAPE Pain** -Gateshead Council will be the first area/organisation nationally to pilot ESCAPE Pain in a workplace. The rehabilitation programme helps people with chronic joint pain to self-manage their condition. It aims to increase physical function and improve quality of life by integrating simple education, self-management, and coping strategies, with an exercise regime individualised for each person that is fun, progressive, engaging and challenging.
64. The programme has been piloted with staff in early March 2020, at Shearlegs and Park Road, just before the Pandemic hit. Since this time, the programme has been adapted to be delivered virtually and also as a self-help guide. This will be revisited within Council services to offer virtual access as well as face to face from the summer onwards.
65. The same approach is being used for back pain nationally to reduce the use of opioids. Gateshead MECC showcased their approach to lifestyle conversations around physical activity, healthy weight, nutrition, and mental health at a North East webinar and this is now being progressed as a model for the North East region for back pain.

## **RECOMMENDATIONS**

66. The committee is asked to note the contents of this report and give its views on the progress of work being carried out with partners as part of the healthy weight agenda.

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