

**Community Practitioners' and Health Visitors' Association's (CPHVA)  
Response to Request for Stakeholder Views on Prevention of  
Overweight and Obesity in Children and Young People**

**1. What do you consider to be the major issues that need to be taken into account in tackling the issue of overweight and obesity in children and young people?**

- Regulation of Food Labelling and Advertising particularly in relation to advertising directed at children and young people
- Access to healthy food in school canteens
- Regulation of food vending machines in schools
- Increased emphasis on the amount and range of physical activities within the school curriculum
- Accessible, inclusive and affordable local authority leisure and physical activity facilities
- Standardised information for parents in relation to healthy eating and exercise for all the family from health visitors, School nurses, teachers and other professionals or lay workers who have regular access to children and young people.

**2. What is being done already by your organisation to prevent children and young people from becoming overweight or obese?**

The majority of our membership comprises health visitors and school nurses who have regular contact with children and young through their everyday work. Health promotion and disease prevention is central to their role in working with this client group. Our organisation promotes the professional development of these members by producing a range of literature and publications on health topics including healthy eating and the prevention of obesity. We also

disseminate as part of their membership a monthly professional journal, which frequently contains papers and other information on this subject. We also include topics on obesity as part of the many seminars and conferences that we organise for our members throughout the United Kingdom. We are stakeholders in the National Institute for Clinical Excellence (NICE) guidance on Obesity for England and Wales and a number of our school nurse and health visitor members sit on the various groups developing these guidelines. We continue to lobby the government to increase the numbers of school nurses and health visitors so that they can contribute more effectively to the public health agenda generally and particularly in relation to priority areas such as the rise in obesity levels. We regularly contribute to relevant consultation documents throughout the UK in relation to public health and primary care. We actively lobby relevant stakeholders through our organisation and membership networks in relation to a range of topics, which impact on the health of our children and young people.

**3. What could be done by your organisation to more effectively assist efforts to prevent increases in levels of overweight and obesity in children and young people?**

We could continue to support new initiatives, for example the healthy schools initiative or extended schools, which aims to improve the health of our children and young people. We could use the knowledge and expertise of both the CPHVA officers and members to contribute to working groups in relation to developing policy and practice in reducing obesity. We could also seek to work in partnership with other stakeholders to provide a more comprehensive holistic approach to improve efforts to address this problem.

**4. What would others need to do to maximise your organisation's contribution to the prevention of overweight and obesity in children and young people?**

There needs to be recognition at a number of levels that health professionals such as health visitors and school nurse have a key role in contributing to the prevention of overweight and obesity in children and young people. Health visitors have access to mothers and families from shortly after the birth of children. They are in a prime position to give accurate standardised information to mother about the importance of healthy lifestyle for all family members.

However, although they do this as part of the service universally to all families with new babies there have been a number of factors which mitigate against this being as effective as it could be. There have been a reduction in the number of health visitors recruited throughout the UK juxtaposed by the increase in the amount of other work they are having to undertake in areas such as child protection and the wider public health agenda.

Similarly, the number of school nurses available to contribute effectively to improving the health of children and young people is woefully inadequate particularly in Northern Ireland where we have the lowest number per head of school age population with many school nurses having a case load of between 6-10,000 pupils. Currently school nurses are carrying out many excellent initiatives in schools around health eating activities but these are often short-term projects playing second fiddle to mass immunisation programmes and other health priorities.

Guidance on obesity management needs to be developed and effectively disseminated to all stakeholders concerned with the health and education of children. This guidance should be developed in

partnership with all stakeholders who play a role in improving the health of children both at policy and grassroots practice level.

CPHVA would like to see the government take a more proactive stance in relation to food advertising directed at children and young people. Action is necessary to address such areas as media advertising linked to celebrities and educational resources.

There is a need also to review the standard of food served in school canteens throughout Northern Ireland. We are in danger of giving mixed messages if on one hand we are telling children to take a healthy diet when much of the food available on the school canteen menu consists of high fat foods such as chips, pies and sausages. The use of vending machine in schools should be better regulated. Many schools depend on the revenue from these machines to help employ extra teaching staff but this is done at the expense of children having ready access to calorie laden snacks and drinks with little nutritional value.

There is also a need for more local authority quality, inexpensive and accessible leisure and physical activity facilities. The issue of access to leisure and physical activity facilities is not just about the ability to pay, but also about being inclusive of age, ability and culture. We support the idea of extended schools where children could access sports facilities after school and throughout the holiday periods.