

Impact case study (REF3b)

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| <p>Institution: University of Lincoln</p> |
| <p>Unit of Assessment: 26 – Sport and Exercise Science, Leisure and Tourism</p> |
| <p>Title of case study: Transforming the management of obesity prevention</p> |
| <p>1. Summary of the impact</p> <p>The Health Advancement Research Team (HART) members critically evaluated the North-East Lincolnshire Obesity Prevention Strategy, the first such evaluation in the UK. The research led directly to measureable improvements: specific new training programmes and resource allocations; partnership development and co-ordination; health-worker behaviour change; increases in employment amongst obesity prevention healthcare staff; a new communications strategy; and an increase in healthy eating opportunities. The Care Trust considers that the research has had a beneficial impact on obesity levels in North-East Lincolnshire. The research team/Care Trust partnership has strengthened and is continuing, and the results are replicable nationally and internationally.</p> <p>2. Underpinning research</p> <p>Context</p> <p>The obesity ‘epidemic’ has been identified as one of the major public health challenges, both nationally and internationally, and is a particular problem in North-East Lincolnshire, one of the most socio-economically deprived areas in the UK. In response to the Government’s 2004 white paper, <i>Choosing Health</i>, The North-East Lincolnshire Care Trust produced its Obesity Prevention and Reduction Strategy in 2006. The Strategy’s aim was to secure health benefits for the population (via targeted obesity interventions) through partnerships between a number of stakeholders.</p> <p>Research objectives</p> <p>Members of HART were commissioned by the Care Trust (project value of £11,800) to critically evaluate the strategy. This was the first time in the UK that such a strategy had been evaluated. The research questions set were as follows:</p> <ul style="list-style-type: none"> • What were the main barriers amongst the key stakeholders to effective strategy implementation, and what were the principal positive characteristics of the strategy? • In what way, and to what extent, were the strategic aims being met? • What was the impact of activity stemming from the strategy – on both the key stakeholders involved in its implementation and on the community itself? • How did stakeholders’ views influence the effectiveness of the strategy implementation? <p>Research method</p> <p>A qualitative research design was used and a mixed-methods approach adopted, drawing on two focus groups (n=4; n=7), individual interviews (total n=31), and secondary data and documentary analysis. The semi-structured focus groups and interviews established an in-depth understanding of the experiences and opinions of those directly involved with implementation of the strategy. Purposive sampling, supplemented by snowball sampling via health professionals, was used to draw up a sample for the focus groups and interviews comprising: 1) community participants (intervention beneficiaries), and, 2) health professionals and local stakeholders (at strategic and senior level). Focus groups and interviews explored attitudes toward and experiences of both the <i>delivery</i> and the <i>receipt</i> of the strategy. Thematic data analysis was used to identify salient themes cohering around: 1) the implementation of the strategy, and, 2) impact on the intended beneficiaries.</p> |

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Principal findings

- There was a need for an expanded staffing base for the successful delivery of the programme.
- Open College Network Level 1 accredited training was required for health workers in areas relating to healthy lifestyles.
- There was a need to protect and enhance resources in this area of work.
- Specific recommendations were made in regard to enhancing partnership working amongst a range of health stakeholders.
- Health workers needed to accommodate more fully the social and environmental contexts of obesity.
- A new communications strategy would be beneficial.
- Opportunities for healthier eating should be developed.

Outputs

Findings were disseminated in various fora: a comprehensive research report was produced for the client; an international conference presentation was delivered, and international, peer-reviewed journal articles were produced.

Who and when conducted

The research was conducted from June 2009 to March 2010 by members of HART: Geoff Middleton (lead researcher), Hannah Henderson (née Rigby), and Donna Evans (co-researchers), all of whom were early career researchers at the time.

3. References to the research

Middleton, G., Evans, A., Keegan, R., Bishop, D. and Evans, D. (2014 forthcoming). The importance of parents and teachers as stakeholders in school-based healthy eating programs. In Y. B. Larock and D. C. Gustave (eds). *Health Education: Parental and Educators' Perspectives, Current Practices and Needs Assessment*. Hauppauge, NY: Nova Science Publishers. www.novapublishers.com/catalog/product_info.php?products_id=41363.

Middleton, G., Henderson, H. and Evans, D. (2013). Implementing a community-based obesity prevention programme: experiences of stakeholders in the North East of England. *Health Promotion International*. Advance access: doi:10.1093/heapro/das072.

Middleton, G., Keegan, R. and Henderson, H. (2012). A qualitative exploration of stakeholder perspectives on a school-based multi-component health promotion nutrition programme. *Journal of Human Nutrition and Dietetics*, 25 (6): 547-556. doi:10.1111/j.1365-277X.2012.01266.x.

Middleton, G., Rigby, H. and Evans, D. (2011). A qualitative evaluation of a regional obesity prevention programme, *Proceedings of the Nutrition Society* 70 (OCE4), E20.

Middleton, G., Keegan, R. and Rigby, H. (2010). *Evaluation of the Food for Fitness Team in North East Lincolnshire. Report for North East Lincolnshire Care Trust Plus NHS; Specialist Health Promotion Service*. Lincoln: University of Lincoln.

Middleton, G., Rigby, H. and Evans, D. (2009). *Evaluation of the Obesity Prevention Scheme in North East Lincolnshire: Executive Report for North East Lincolnshire Care Trust Plus NHS; Specialist Health Promotion Service*. Lincoln: University of Lincoln.

4. Details of the impact

A number of impact outcomes have been identified by the client as arising as a direct result of the

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research. Following the report, the Public Health Directorate at the North East Lincolnshire Council implemented changes in the areas of staffing, strategy, and training and resources:

i) Staffing

- A specific '**Obesity Lead**' was appointed to drive, implement and evaluate the co-ordination of local services.
- The **employment** of six staff (two of these were posts that were due to finish but were retained on the basis of the research findings). These posts co-ordinate the programme for the reduction in obesity through physical activity, healthier eating and emotional well-being across the lifecycle. Their purpose was to 'embed skills or tools into local areas, run by local volunteers or community people' (research report, page 16).
- **Partnership development**: there was a reconfiguration of the partnership arrangements used to tackle obesity, which also led to the employment of a further staff member dedicated to the co-ordination of partnership roles and to work specifically on childhood obesity prevention.

ii) Strategy

- **Local obesity strategies** were developed, specific to local requirements.
- A 'Healthy Weight' **care pathway** was established for 0 to 18 year olds in North-East Lincolnshire.
- A new **communications strategy** for the obesity programme was created, including the use of electronic media, to improve communications at all levels of the programme.
- **Healthy eating opportunities**: a new Healthy Choices Award Scheme was introduced to enable and encourage food retailers to offer healthier choices.
- The introduction and implementation of a **monitoring tool** took place to enhance ongoing evaluation of the strategy.

iii) Training and resources

- **Training**: between 2009 and 2011 a skills package was introduced for health professionals that comprised of four new certificated courses and a series of guides that were produced for health trainers.
- **Resource allocations** to the obesity project were enhanced, including the production of leaflets for both health workers and clients, as well as the retention of resources that would otherwise have been lost, for example, by establishing a library of advisory documents.
- In respect of **health-worker behaviour** change, workers were trained in the wider understanding of the social and environmental contexts of obesity, as well as lifecycle influences, to improve efficacy of the obesity programme.

The Care Trust also considers that the research has had a beneficial impact on obesity levels in North-East Lincolnshire, and research is currently underway to investigate this further.

How the research led to impact

The research was commissioned specifically due to the considerable challenge of tackling the obesity 'epidemic' in the North-East Lincolnshire area, and the research technical report was provided directly to key decision-makers in the Care Trust in 2009. It was also distributed to a wide range of stakeholder groups accessing and using the Obesity Prevention Strategy. Wider dissemination and impact, beyond the North-East Lincolnshire region, has been achieved through academic journal articles and conference presentations, and this is also ongoing.

Nature, extent and dates of the impact

The changes noted above were implemented from 2010. The project has also stimulated local

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and regional debate relating to strategy monitoring, collaborative service alliances, and marketing communication strategies, which in turn led to further funding from North-East Lincolnshire Care Trust allocated to the HART group to conduct additional research. These subsequent projects have included investigating the changes made as a consequence of the research (currently ongoing), as well as further grants to research other related strategies, such as the Food for Fitness Team and Health Promotion Portfolio in North-East Lincolnshire. In relation to local and regional impact, the research has generated a strong working relationship between the research team and the key regional agencies, resulting in the team's input into strategic thinking in relation not only to obesity programmes, but also to health promotion more generally in the region.

The scope of the research is potentially international (with regard to its relevance to obesity reduction strategies) as well as national, and the School intends to develop this aspect in future work. Findings have so far been presented both in international journals and via an international conference presentation.

Beneficiaries

There are a number of direct stakeholder beneficiaries of the research, in addition to the community more widely. These are:

North-East Lincolnshire NHS Care Trust:

- Public Health Directorate
- Specialist Health Promotion Service
- General Practice, Primary Care
- Health Trainer Service.

Northern Lincolnshire and Goole Hospitals NHS Foundation Trust:

- Community Dietetics Service.

North East Lincolnshire Council:

- Neighbourhood Development Unit
- Sports Development Unit
- Healthy Schools Scheme.

Other bodies:

- The North East Lincolnshire School Sports Partnership
- Shoreline Housing Partnership
- Voluntary and Community sector.

5. Sources to corroborate the impact

Regional debate

Pathway for promoting healthy weight to children and young people:

www.north-east.lincolnshireincs.gov.uk/council/children-s-workforce-development/view-best-practice-guidance-and-research/promoting-healthy-weight-to-children-and-young-people/level-1-giving-brief-advice/.

Public Health Directorate communications

Email communications, available on request, with Health Promotion Specialist, Specialist Health Promotion Service Department, Public Health Directorate, North East Lincolnshire Council.

Public Health England 'research evidence'

Research journal output Middleton et al. 2013, included as research evidence, www.noo.org.uk/NOO_pub/KU/13113.