States of Jersey

The States of Jersey Department for
Health & Social Services

Obesity in Primary School Aged Children 2011/12

Data Summary

Public Health Intelligence Unit, Health and Social Services Department , Jersey

PHIU INFORMATION READER

Document purpose	Inform local policy/general interest

Title	Obesity in Primary School Aged Children 2011/12 -Data Summary
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Description	Latest obesity statistics for Reception and Year 6 children. Trends data for 4-5 years olds (Reception). Obesity by school fee status and location.
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Key Points

- The 2011/2012 Child Measurement Data shows that obesity prevalence among 4-5 year olds (Reception) is 10% and among 10-11 year olds (Year 6) is 17% (Table 1).
- There is a downward trend in the proportion of children who are overweight (including obese) between 2006/07 and 2011/12 (Figure 2).
- Obesity prevalence increases between Reception and Year 6 (Table 2).
- Obesity prevalence is greater in non fee paying schools than fee paying schools for both Reception and Year 6 children (Table 3).
- In Reception obesity prevalence is greater in town schools than out of town schools or fee paying schools (Figure 3).
- Obesity prevalence in Jersey is similar to England (Figure 4).

Current Figures

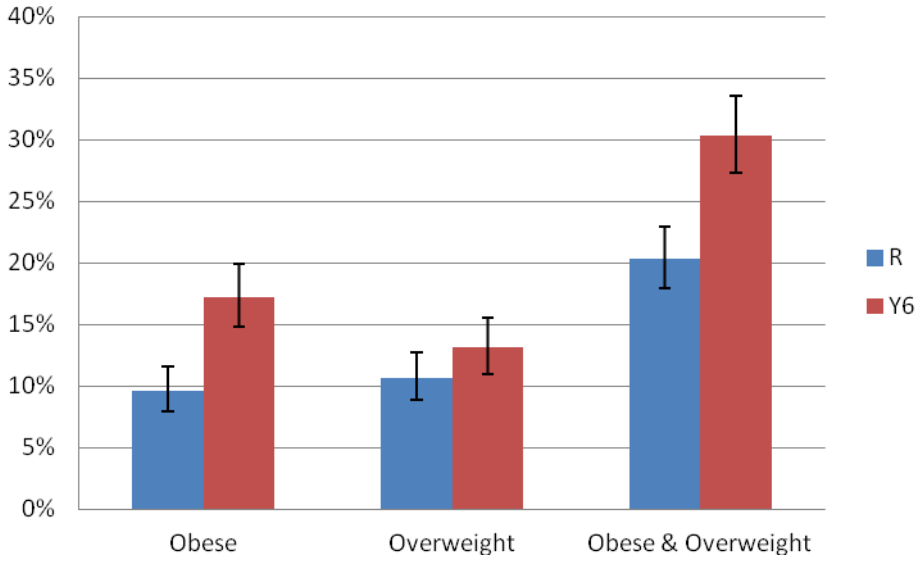
In Reception 20% of children are classified as overweight (including obese) with a similar proportion of obese and overweight children. Obesity prevalence is similar for boys and girls. In Year 6 a greater proportion of children are classified as overweight (including obese) at 30% of this year group.

Table 1: Prevalence of overweight and obesity by school year and gender

	Total (%)	Boys (%)	Girls (%)
Reception (aged 4-5 years)			
Overweight	10.6	11.2	10.2
Obese	9.6	10.1	9.2
Overweight including obese	20.3	21.3	19.3
Year 6 (aged 10-11 years)			
Overweight	13.1	13.9	12.3
Obese	17.2	19.6	14.5
Overweight including obese	30.3	33.5	26.8

In Year 6 there is a greater proportion of obese children than overweight children although this difference is not significant. Obesity prevalence remains similar for boys and girls. In Year 6 obesity prevalence is greater than in Reception aged children and this difference is greatest amongst boys (10 percentage points compared to 5).

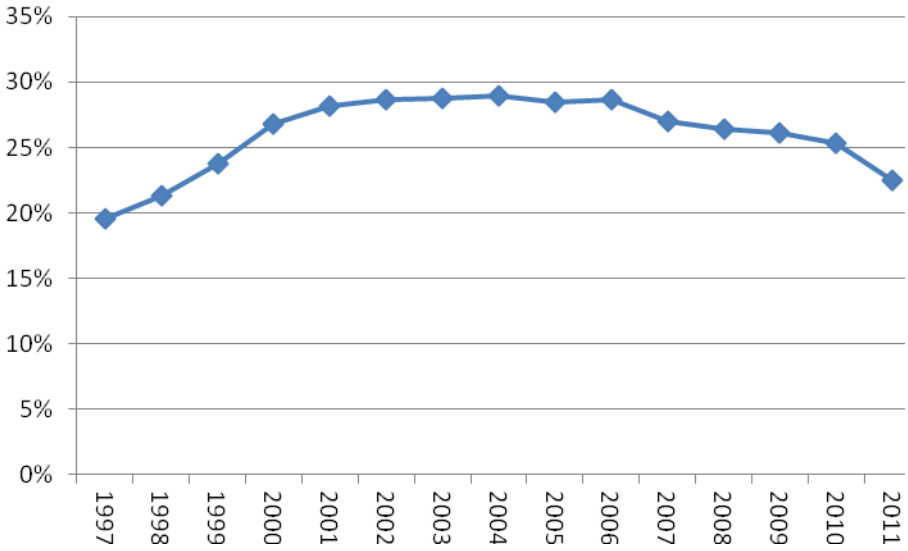
Figure 1: Prevalence of overweight (including obese)children by school year



Trends

The Child Health Information System provides data for Reception aged children going back over a number of years demonstrating trends in child weight status. Figure 2 shows overweight (including obese) prevalence in Reception aged children from 1997 to 2011. There was an increase in the prevalence of overweight (including obese) children between 1997 and 2000 and then a period of stability. Since 2006 prevalence has been decreasing year on year back to its pre 2000 levels and there was a significant decrease between 2000/01 and 2011/12. 2011 was the first year of height and weight measurement of Year 6 children therefore no trend data is available for this age group.

Figure 2: Prevalence of overweight (including obese) children in Reception (three year average) 1997-2011



Cohort View

The group of children who started Reception in 2005 were the Year 6 group measured in 2011/12, therefore for the first time it is possible to look at the changes in obesity prevalence in the same group of children over the six year period of primary school. Overall, prevalence of overweight (including obese) children has not changed but there is now a greater proportion of obese children and a decrease in the proportion of overweight children.

Table 2: Prevalence of overweight and obesity of Reception cohort of 2005

	Reception (2005)%	**Year 6 (2011) %**
Overweight	17.1	13.1
Obese	13.1	17.2
Overweight including obese	30.2	30.3

Obesity and School Fee Status

In other countries obesity is strongly correlated with deprivation. There is no local data linked with deprivation decile (as in the UK) but it is interesting to look at prevalence by school fee status (fee paying and non fee paying). In both Reception and Year 6 there is a much greater proportion of children classified as obese in non fee paying (NFP) schools compared to fee paying schools. This difference is greater in Year 6 children than in Reception children.

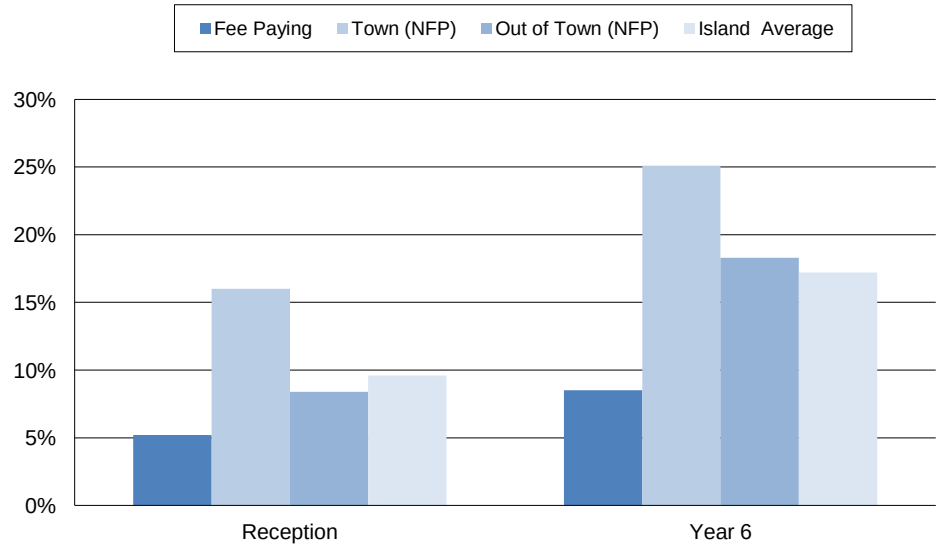
Table 3: Prevalence of overweight and obesity by school year and fee status

	Fee paying(%)	Non fee paying(%)
Reception (aged 4-5 years)		
Overweight	7.7	11.6
Obese	5.2	11.1
Overweight including obese	12.9	22.7
Year 6 (aged 10-11 years)		
Overweight	12.1	13.6
Obese	8.5	20.8
Overweight including obese	20.6	34.4

Obesity and School Location

In Reception the obesity prevalence is similar in fee paying and out of town (NFP) schools but greater in town (NFP) schools. In Year 6 there is no difference between obesity prevalence in town (NFP) and out of town (NFP) schools but obesity prevalence for both is greater than in fee paying schools. Obesity prevalence is however greater in town schools than the island average. We do not have ethnicity or deprivation data to look at in relation to obesity prevalence and therefore cannot comment on what is causing the differences in obesity prevalence in town and out of town children (ethnicity, deprivation and accessibility of different food types may all play a part).

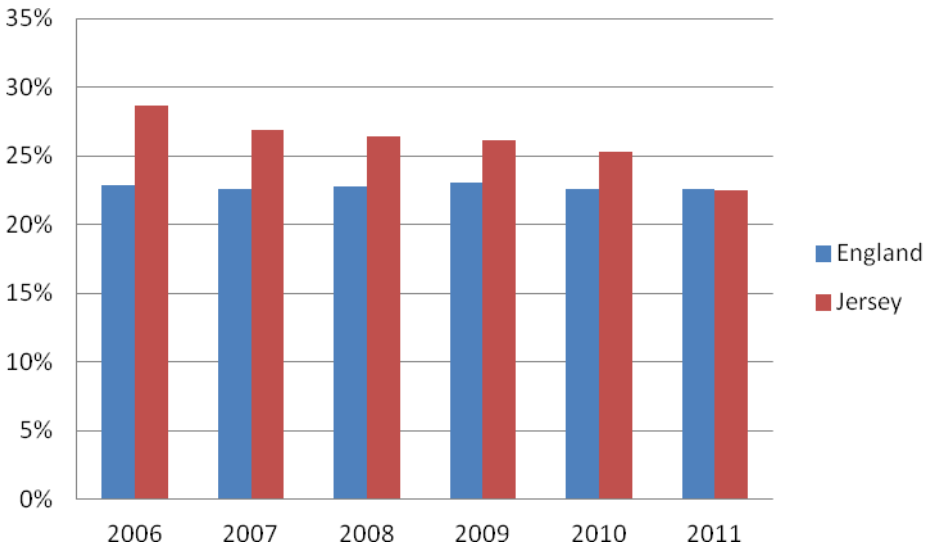
Figure 3: Obesity prevalence by school location, fee status and school year



Comparison with England

Since overweight (including obesity) prevalence has been decreasing in reception children since 2006, there is now no difference between prevalence rates in Jersey and England and any of the English regions. In Year 6 overweight and obesity prevalence in slightly lower than in England (30% compared to 34%). This may be due in part to sample bias arising from the 'opt out' rather than 'opt in' methodology and consequential lower participation rate in Jersey (see definitions on p8).

Figure 4: Overweight (including obesity) prevalence in Reception children in Jersey & England. 2006-2011



Data Sources

Child Measurement Programme

In Jersey the height and weight of Reception children (aged 4-5 years) and Year 6 (aged 10-11 years) is measured annually by the school nurses of Family Nursing and Home Care. Reception aged children have been measured for many years as part of the school entry medical and participation rate is high (98%). 2011/12 was the first year of measurement for Year 6 children with opt in consent required for participation. Participation rate was lower for this age group (82%) and it is hoped this will increase as the measurement programme becomes more established.

Timing of data collection: Data are collected annually during the school year

Date of next release: January 2014

Definitions/ Methods

Body mass index classification on children

BMI is a measure of weight status that adjusts for height, calculated by a person's weight in kilograms divided by the square of their height in metres. BMI is then classified as either underweight, healthy weight, overweight or obese. The definition used to classify children's BMI in this report is the epidemiological one which uses the British 1990 growth reference (UK90) to determine weight status according to a child's age and sex. Children whose BMI is between the 85th and less than the 95th centile are classified as overweight and those at or above the 95th centile are classified as obese. This definition is used for population monitoring rather than clinical purposes and is comparable to UK data but not international (there are separate clinical and international classifications for children's BMI). The LMS Growth Add-in was used to analyse the data for the first time this year which uses the exact age at which the child was when measurement was taken rather than average age as was used previously. This change in methodology has not affected the results and year on year data is comparable

Confidence Intervals

A confidence interval gives an indication of the likely error around an estimate calculated from measurements based on a sample of the population. It indicates the range within which the true value for the population as a whole can be expected to lie taking natural random variation into account. 95% confidence intervals were calculated for all percentages reported. Where differences were reported confidence intervals did not overlap. Percentages with overlapping confidence intervals were reported as similar (although they may look different). When analysing local data numbers are so small that confidence intervals tend to be large (between 2-5%) and therefore difference have to be quite large before they are considered significant and we can be confident in them.

School categorisation

The schools were categorised as follows

Fee Paying **(25-30% respondents)**	**Non-fee paying (NFP) Town** **(27% respondents)**	**Non-fee paying (NFP) Out of town** **(44-48% respondents)**
De la Salle College	Janvrin School	First Tower School
St Michael's School	Springfield School	Grouville School
Beaulieu Convent School	D'Auvergne School	La Moye School
St George's School	Plat Douet School	Les Landes School
F C J School	Rouge Bouillon School	Samares Primary School
Helvetia House School	St Luke School	Mont Nicolle School
St Christopher's School	Grands Vaux Primary School	Bel Royal Primary School
JCG Preparatory School		St Mary School
Victoria College Preparatory School		St Peter School
		St Saviour School
		Trinity School
		St Clement School
		St John School
		St Lawrence School
		St Martin School

Useful Resources

National Child Measurement Programme www.noo.org.uk