



Birmingham Women's **NHS**  
NHS Foundation Trust

# Maternity Services Childhood Obesity Strategy.

September 2009

This document provides an overview of the care and services provided by Birmingham Women's NHS Foundation Trust (BWFT) Maternity Services in reducing childhood obesity.

## Background

Healthy Weight, Healthy Lives: A Cross-Government Strategy for England was launched in January 2008. The report was published in response to and built on the findings expressed in the Foresight report (2007) which described obesity as the climate change of public health. In addition, the Foresight report predicted that by 2050, nine in ten adults and two-thirds of children would be overweight or obese if no action is taken to tackle the obesity epidemic.

Based on evidence provided in detailed literature reviews it has been highlighted that pregnancy is a time in a woman's life where she has an increased risk of becoming obese. In addition to this a baby born to a couple where one parent is obese the baby has a 30%-40% chance of developing obesity. A baby born to two obese parents has a 70%-80% chance of developing obesity.

## Breast feeding

The Government has adopted the World Health Organisation (WHO) recommendation to encourage exclusive breastfeeding for the first six months of life. Findings from three systematic reviews and meta-analyses of good and moderate methodological quality suggest that a history of breastfeeding is associated with a reduction in the risk of obesity in later life.

Commitment by the Government has involved setting a target, as part of the strategy to reduce health inequalities, to increase breastfeeding initiation rates by 2% per year, focusing particularly on women from disadvantaged groups. BWFT works closely with link workers and breastfeeding support workers to ensure women from all ethnic backgrounds have the benefit of breastfeeding support and advice. BWFT is actively working towards WHO Baby Friendly status, and currently have a certificate of commitment.

The service offered at the BWFT aims to promote a holistic approach to lifestyle, health and wellbeing throughout pregnancy and the postnatal period. It is anticipated that not only will it benefit mother and baby but aim to reduce the risk of obesity to the whole family. Working in conjunction with other healthcare professionals our aims are to:

- To promote breastfeeding in the antenatal period as the optimum way to feed baby and help prevent childhood obesity.
- Encourage optimal weight gain during pregnancy
- To support individuals with weight management during pregnancy

- Impart simple information regarding a healthy diet in pregnancy in include national health strategies as laid down by the Food Standard Agency (FSA) including advice regarding five a day and optimal vitamins and nutrient intake
- To reduce morbidities associated with obesity in pregnancy and long term health promotion
- To deliver appropriate information and signpost to other agencies that provide education on healthy life style choices

## Definitions

Obesity is defined as ‘a condition in which body fat stores are enlarged to an extent that impairs health’ (Garrow and Summerbell 2004).

How is obesity measured?

Obesity can be measured in a number of ways, but Body Mass Index (BMI) is the method most commonly used.

$$\text{BMI} = \text{Weight in kg} \div (\text{Height in m})^2$$

Obesity is measured by calculating the body mass index (BMI) using the formula and is expressed as a number; the greater the number the more overweight or obese the individual. Overweight is defined as a BMI greater than 25 and obesity is defined as a BMI greater than 30 in adults.

Maternal obesity is measured using the standard BMI classification related to the woman’s pre-pregnancy weight. In absence of a pre-pregnancy weight, a woman’s weight at their first booking appointment should be recorded by the midwife during their first trimester (ideally before 10 weeks).

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## **Maternity Care**

The main part of this strategy focuses on the antenatal and postnatal period.

In summary these are:

### **Antenatal**

- Early booking with maternity services and prompt referral to appropriate services/agencies as required
- Routine antenatal care or a documented plan of care in the pregnancy hand held notes and hospital notes.
- Promoting a heightened awareness of healthy weight gain understanding of healthy eating for both mother and baby. Women will have health promotion discussions with midwife including discussion on optimal weight gain in pregnancy. See guideline and associated patient information leaflet, pregnancy & your weight.
- Signposting women to the FSA leaflet and '5 a day keeps doctor away' leaflet.
- Raising awareness of Healthy Start, and the importance of folic acid in pre and early pregnancy
- Raising awareness of the importance of nutrition in pregnancy and improve nutritional intake by means of the dietetics nutrition checklist at the antenatal booking visit
- Referral to the Dietetic Services if appropriate
- Promoting the benefits of breast feeding encouraging the uptake of breastfeeding workshops and by offering the Department of Health (DOH) Breastfeeding DVD and leaflet.
- Discussing the risks of smoking and offer referral to the Smoking Cessation Service.
- Awareness of the importance of routine exercise and healthy life style
- Signposting and encouraging access to other services to support healthy living options e.g. Aquanatal classes
- Encouraging women to access local Children's Centres services for help and support for women regarding lifestyle choices.

Midwives and doctors have a responsibility to re-enforce this information at regular intervals throughout pregnancy.

### **Intrapartum**

- Encourage skin to skin contact and reinforce the benefits of breast feeding.

## Postnatal

- Continue to encourage skin to skin contact and support breast feeding
- Ensure the Infant Feeding Team are available for advice and support for both the maternity, neonatal staff and the woman.
- To ensure women have contact with the Breastfeeding Buddies in the hospital and the community as they can offer additional support.
- Advise on life style modification – weight loss support, exercise
- Close liaison and continuation of support through the GP and the Health Visiting Service and Children's Centre's
- Ensuring all women have the baby's Child Health Records (Red Book) as soon after delivery as possible as it offers information which promotes healthy lifestyle of the baby from birth.

## Health eating programmes and postnatal exercise

These services are arranged by Dietetic Service in conjunction with BWFT and PCT's and can offer;

- Overweight and obese postnatal women weight management courses (Postnatal Size Down) specifically tailored for this group available at local venues (mainly Children's Centres) with free crèche facilities to improve access. Women can be referred by their midwives or can self refer to this service if living in South Birmingham. Women who live outside South Birmingham will need to discuss local services with their midwives
- Obese women the opportunity to participate in group sessions (Fit Moms) or to have individualised dietary advice can be arranged. Women can be referred by their midwife or self refer to the services..
- 1:1 Cook and Taste sessions for those referred with poor cooking skills, and Cook & Taste sessions this course can also be offered to pregnant women who have expressed an interest

## Training

- Multi professional /Agency training is available to all staff although not mandatory all midwives and midwifery assistants should be encouraged to attend
- Nutrition update newsletters distributed to all staff on a regular basis.

BWFT takes a holistic approach to the management of obesity both for the mother and her family, and works in partnership with the local Primary Care Trusts in offering opportunities for women to engage in helping to reduce childhood obesity.

This strategy summarises the detailed care which can be found in other related guidelines.

### Associated Guidelines:

BWFT Antenatal Care Guidelines  
BWFT Care of women with BMI above 35.  
BWFT Breast Feeding Policy

### References:

Garrow and Campbell Health Needs Assessment. Obesity. 3<sup>rd</sup> series.  
[www.hcna.radcliffe-oxford.com/obesity.html](http://www.hcna.radcliffe-oxford.com/obesity.html)

H.M Government Foresight report (2007)  
[www.foresight.gov.uk/](http://www.foresight.gov.uk/) -

Healthy Weight, Healthy Lives: A Cross-Government Strategy for England  
[www.dh.gov.uk/en/Publicationsandstatistics/.../DH\\_082378](http://www.dh.gov.uk/en/Publicationsandstatistics/.../DH_082378)