

Cuts to children's support centres in England linked to thousands more kids with obesity

June 21 2021



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Spending cuts to children's support centres (Sure Start) in England are linked to thousands more 4-5 year olds becoming obese over the past decade, suggests research published online in the *Journal of*



Epidemiology & Community Health.

The cuts correspond to 4575 more children with obesity or 9174 more overweight/obese children between 2010/11 and 2017/18 than would have been expected had funding levels for the centres remained the same, estimate the researchers.

With deprived areas hardest hit by these cuts, the effect is likely to have widened the 'obesity gap' between the richest and the poorest children, they say.

Sure Start children's centres provide community-based services for children under 5 and their parents, including many services that contribute to a healthy weight, by supporting good nutrition and physical activity.

When the Sure Start scheme started in 1999, the prevention of obesity and the narrowing of health inequalities were explicit aims of the centres.

But since 2010, austerity-driven cuts to local authority budgets have prompted drastic reductions in funding for these centres, resulting in closures and/or reductions in the range of services provided.

The researchers therefore wanted to find out if the prevalence of childhood obesity rose more than would have been expected in those areas in England where the cuts have been the deepest.

They drew on publicly available annual local authority data on obesity prevalence among children at reception (ages 4-5) from the National Child Measurement Programme and on local authority expenditure for children's services published annually by the Department for Education for 2010/2011 to 2017/2018 inclusive.



To assess whether the association between spending cuts and obesity prevalence varied by level of deprivation in a local authority, the researchers looked at the spend on Sure Start and the average 2015 Index of Multiple Deprivation score.

And to assess trends in obesity prevalence before austerity began in 2010, the researchers looked at spending on children's services and the average annual change in obesity prevalence from 2007/2008 to 2010/2011 inclusive.

Analysis of the data showed that spending on Sure Start children's centres halved, on average falling by 53%, between 2010/11 and 2017/18, with deeper cuts in more deprived local authorities.

Spending in the most deprived fifth of local authorities fell by £422 per child between 2010 and 2016, compared with a fall of £133 per child in the least deprived fifth.

Each 10% spending cut in a financial year was associated with a 0.34% relative increase in the prevalence of obesity the following school year.

This corresponds to 4575 more obese children or 9174 more overweight/obese children than would be expected had funding levels remained the same, estimate the researchers.

The association between spending and obesity within local authorities was stronger in areas where the prevalence of obesity had been falling up to 2010/2011.

"Our findings suggest that cuts to local authority spending on children's centres since 2010 were associated with increases in childhood obesity, large enough to have seemingly reversed some gains made prior to the introduction of austerity measures," note the researchers.



"Our finding that effects of spending cuts were stronger in areas that hadbefore austerity- seen declining obesity prevalence, suggests disinvestment in Sure Start may be undermining strategic progress in the important goal of reducing the prevalence of childhood obesity," they add.

"The UK Government has declared its aim to 'significantly reduce the gap in obesity between children from the most and least deprived areas by 2030. Yet this gap continues to grow across all age and sex groups," they point out.

"Looking ahead to what is likely to be a period of increased financial pressure on local government due to the pandemic, if funding for these services cannot be restored, we may see obesity rates in young children increasing and inequalities in the early years and beyond widening further," they conclude.

In a linked editorial, Professor Tim Huijts, Research Centre for Education and the Labour Market, Maastricht University, The Netherlands, points out that the findings correspond to a relative increase of about 1.5-2% in obesity over the study period.

"This relative increase may appear to be modest, but in absolute terms the number of children affected is considerable, and given the longer term impact of obesity the consequences are potentially life-changing," he writes.

"This pandemic will further increase social and geographical inequalities in the social determinants of health, and is therefore also likely to exacerbate <u>obesity</u> levels, especially among <u>children</u> living in the most deprived areas," he adds.

More information: Impact of cuts to local government spending on



Sure Start children's centres on childhood obesity in England: a longitudinal ecological study, *Journal of Epidemiology & Community Health*, DOI: 10.1136/jech-2020-216064

Commentary: Examining the impact of cuts to local government spending on Sure Start Children's Centres on childhood obesity: a commentary, *Journal of Epidemiology & Community Health*, DOI: 10.1136/jech-2021-217190

Provided by British Medical Journal

Citation: Cuts to children's support centres in England linked to thousands more kids with obesity (2021, June 21) retrieved 19 November 2023 from https://medicalxpress.com/news/2021-06-children-centres-england-linked-thousands.html

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