

## Harrow child weight in 2018/19: National Child Measurement Programme data

### Introduction

The National Child Measurement Programme (NCMP) weights and measures English school pupils in Reception (4–5 years) and Year 6 (10–11 years), calculates their body mass index (BMI), and uses national growth centile charts to categorise children as underweight, healthy weight, overweight or obese. The programme has 13 years of robust data (since 2006/07). The table below shows that Harrow participation rate for 'Reception' at 98.2% and Year 6 at 98.4% (with total participation rate of 98.3%) was higher than all comparison geographical areas (including Nearest Neighbours - NN, London and England).

Indicator	Period	Harrow	Neighbours average	London	England
Participation rate: Total	2018/19	98.3%	95.7%	94.9%	94.7%
Participation rate: Reception	2018/19	98.2%	95.5%	95.3%	95.2%
Participation rate: Year 6	2018/19	98.4%	95.9%	94.5%	94.3%

### Key messages for Harrow

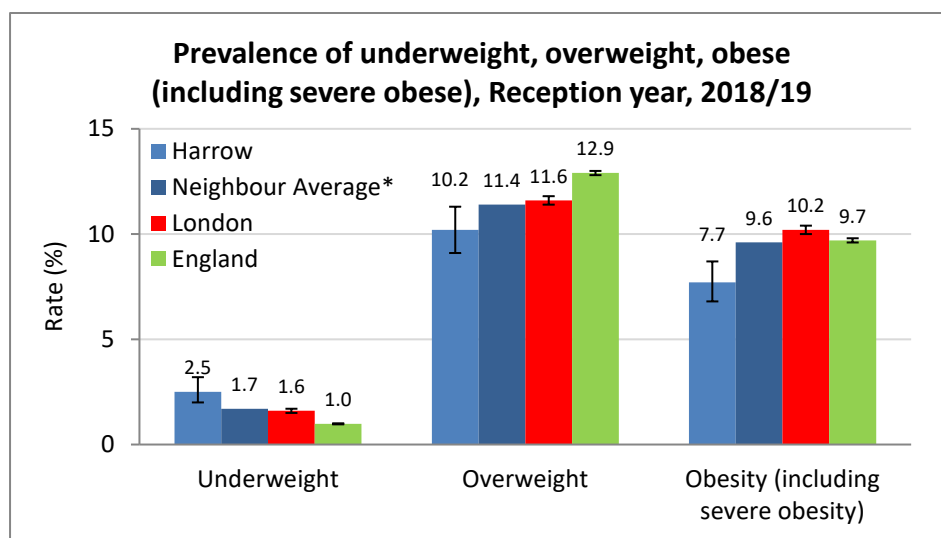
- Combined three years data (2016/17 to 2018/19) shows that 18.4% of 4–5 year olds and over one-third (36%) of 10–11 year olds were either overweight or obese.
- Obesity levels in 10–11 year olds (at 20.6%) were 2.4 times as high as in age 4–5 year olds (at 8.5%).
- Harrow's level of excess weight in 2016/17 to 2018/19 for reception children was significantly lower than England, however for Year-6 it was significantly higher than England (data for London is not provided).
- Five years combined data (2014/15 to 2018/19) shows the prevalence of obesity (including sever obesity) for both reception and Year 6 children in Harrow is significantly lower than London but compared to England it shows also lower for reception but higher rate for Year 6. By breaking down this data by gender, it shows that the Harrow female group both in reception and Year 6 have significantly lower prevalence of obesity than London and England.
- Looking at severe obesity through 2018/19 data, for reception children there has not been significant difference between Harrow, London and England but for Year 6 Harrow had a significantly lower rate than London but was similar to England.
- In 2018/19 Harrow had significantly higher rate of underweight and lower rate of overweight reception children compared to Nearest Neighbour Average (NNA), London and England. The obesity (including sever obesity) rate in reception year was significantly lower than London, NNA and England.

- In three year period 2015/16 to 2017/18, levels of 'underweight' did not differ significantly by ward for reception year. However for Year-6 the prevalence for 'Queensbury' ward (at 4.9%) was seven times and significantly higher than the 'Harrow on the Hill' (at 0.7%).
- For reception children in 2016/17 - 18/19 the 'excess weight' rate in the ward with the highest level was 45% higher than the ward with the lowest level. 'Wealdstone' ward with 22.5% had the highest and 'Headstone North' with 15.4% had the lowest Excess weight rate. There has not been any significant difference between wards compared to the Harrow average. For reception children in 2016/17 - 2018/19 the obesity rate in the ward with highest level was more than twice as high as in the ward with the lowest-obesity rate. For Year 6 children the obesity rate in the ward with highest level was 1.6 times higher than the ward with the lowest level.
- Looking at 5-years (2014/15 - 18/19) data combined, ten to 11 year olds in the most deprived areas had 40% higher the obesity level of those in the least deprived areas; for 4–5 year olds levels were not significantly different.
- Three years combined data (2015/16 – 2017/18) shows that there has been a significant higher underweight prevalence for Asian children both in Reception and Year-6 compared to all other ethnic groups and Harrow average. Also underweight level for White reception children was significantly lower than all other ethnic groups and Harrow average.
- Five-years (2014/15 - 18/19) data combined shows White and Black reception children had significantly higher levels of obesity (including sever obesity) than Asian; for Year 6 children the obesity rate in Black children is significantly higher than both White and Asian.
- The proportion of 4–5 year old children who are underweight has not changed since 2008/09; for the same period of time there has been slight decrease of underweight rate but not significant for Year 6.
- Data doesn't suggest any significant changes in the prevalence of 'overweight' and 'obese' children from 2008/09 to 2018/19.

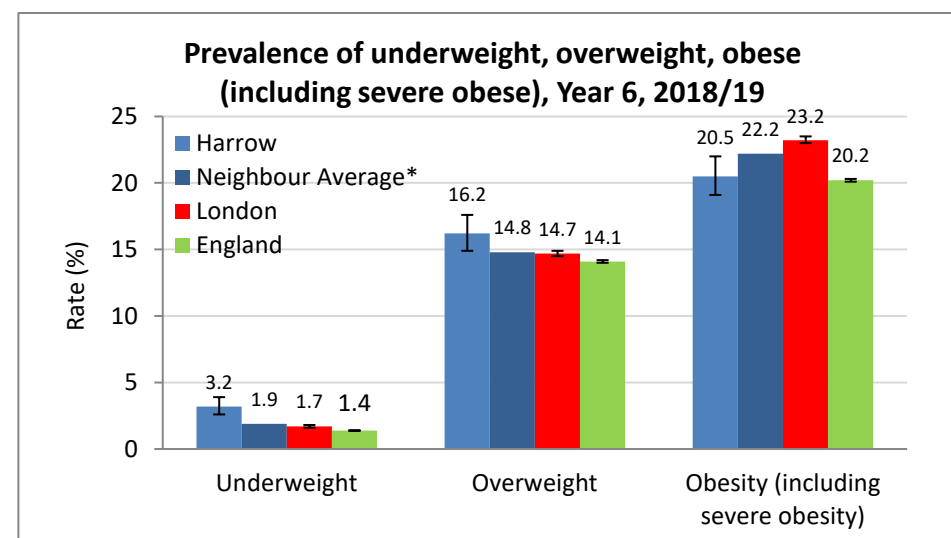
## Unhealthy weight overall

- In 2018/19, 2.5% of Harrow 4–5 year olds were underweight, 10.2% overweight and 7.7% were obese, while 3.2% of Harrow 10–11 year olds were underweight, 16.2% overweight and 20.5% were obese (Fig. 1a and b).
- In 2018/19 Harrow had significantly higher rate of underweight and lower rate of overweight reception children compared to Nearest Neighbour Average (NNA), London and England. The obesity (including sever obesity) rate in reception year was also significantly lower than London, the NNA and England.
- In 2018/19 Harrow had significantly higher rate of underweight and overweight Year 6 children compared to NNA, London and England. The rate of Year-6 obese (including severe obese) children was significantly lower than London but the same level as NNA and England.

Fig. 1 Prevalence of underweight, overweight, obesity (including sever obesity) in 'Reception' (a) and 'Year 6' (b) resident in Harrow, Nearest Neighbours (NN) ^, London and England in 2018/19



(a)



(b)

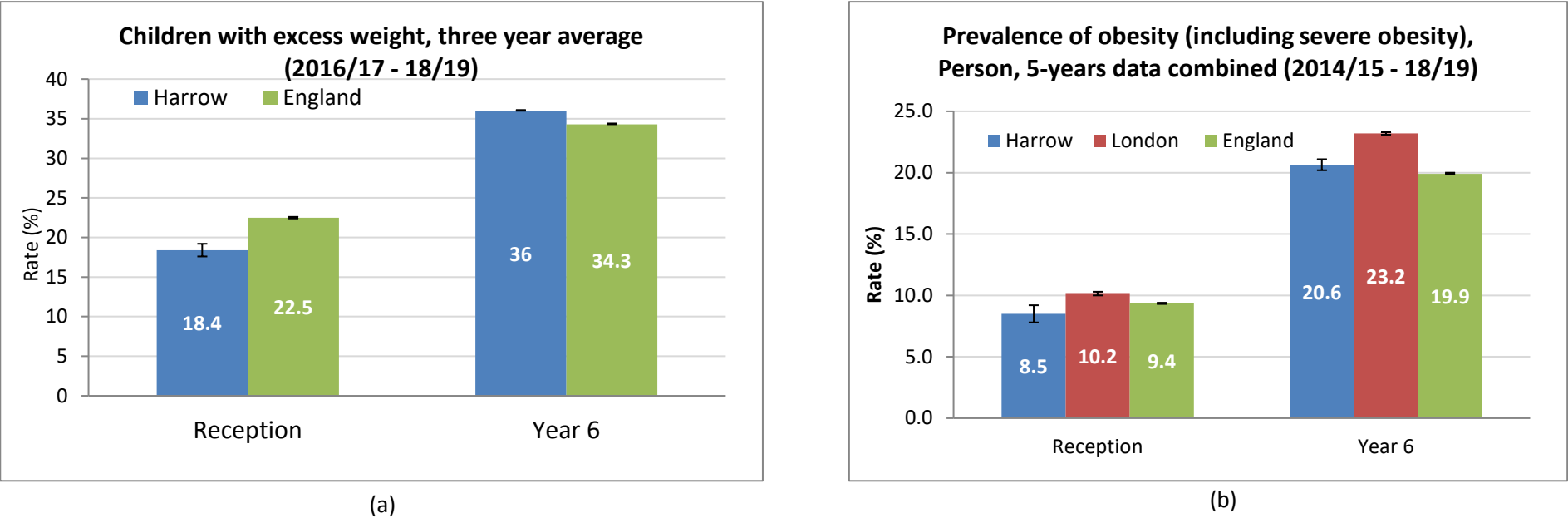
\* Confidence interval value for Nearest Neighbours average is not available

Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

^CIPFA's (Chartered Institute of Public Finance and Accountancy) Nearest Neighbours (2018): Barnet, Bexley, Brent, Bromley, Croydon, Ealing, Enfield, Harrow, Hillingdon, Hounslow, Kingston upon Thames, Merton, Redbridge, Richmond upon Thames, Sutton and Waltham Forest

- Harrow levels of excess weight in 2016/17 to 2018/19 for reception children was significantly lower than England, however for Year-6 it was significantly higher than England (Fig.2a).
- Five years combined data (2014/15 to 2018/19) shows the prevalence of obesity (including sever obesity) for both reception and Year 6 children in Harrow is significantly lower than London but compared to England for reception it is not significant different but for Year 6 it is significantly higher. By breaking down this data by gender, it shows that the Harrow female group both in reception and Year 6 have significantly lower prevalence of obesity than London and England.

Figure 2 Prevalence of excess weight (a) and obesity (b), Reception and Year-6 children a) Prevalence of Excess weight (3 years average), b) Prevalence of obesity including severe obesity (5 years average)



*Note: London data is not provided*

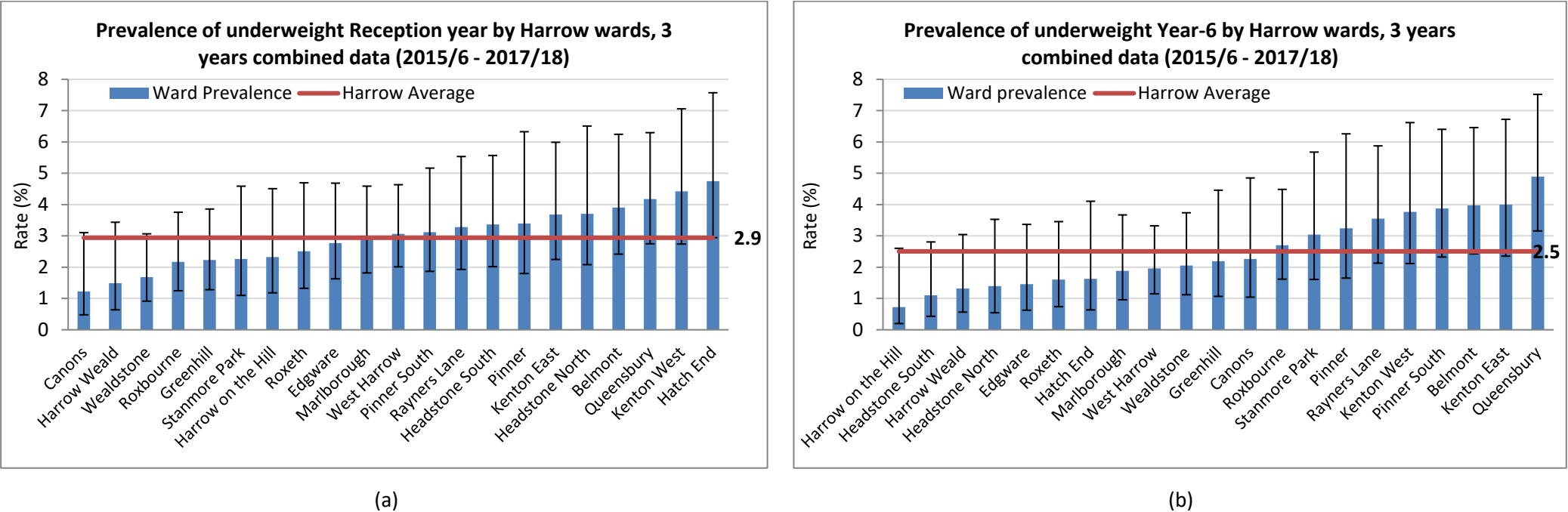
Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

Unhealthy weight by ward

Underweight by ward

- In three year period 2015/16 to 2017/18, levels of ‘underweight’ did not differ significantly by ward for reception year (Fig. 3a). However for Year-6 the prevalence for ‘Queensbury’ ward (at 4.9%) was seven times and significantly higher than the ‘Harrow on the Hill’ (at 0.7%)(Fig.3b). By increasing the sample size and adding up more data (e.g. 5 years combined data); the inequality between more wards can be identified.

Fig. 3 Prevalence of underweight for Harrow residents; Reception year (a) and Year-6 (b) by ward, three years combined data (2014/15 to 2016/17)

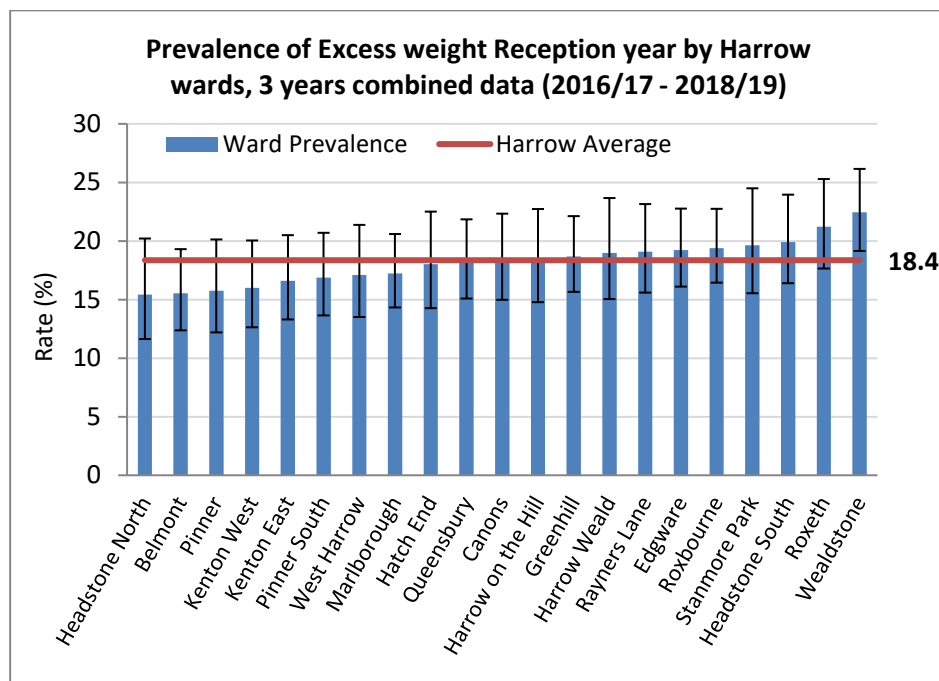


Sources: Public Health England (National Child Measurement Programme Pupil Enhanced Dataset); Office for National Statistics (ward codes)

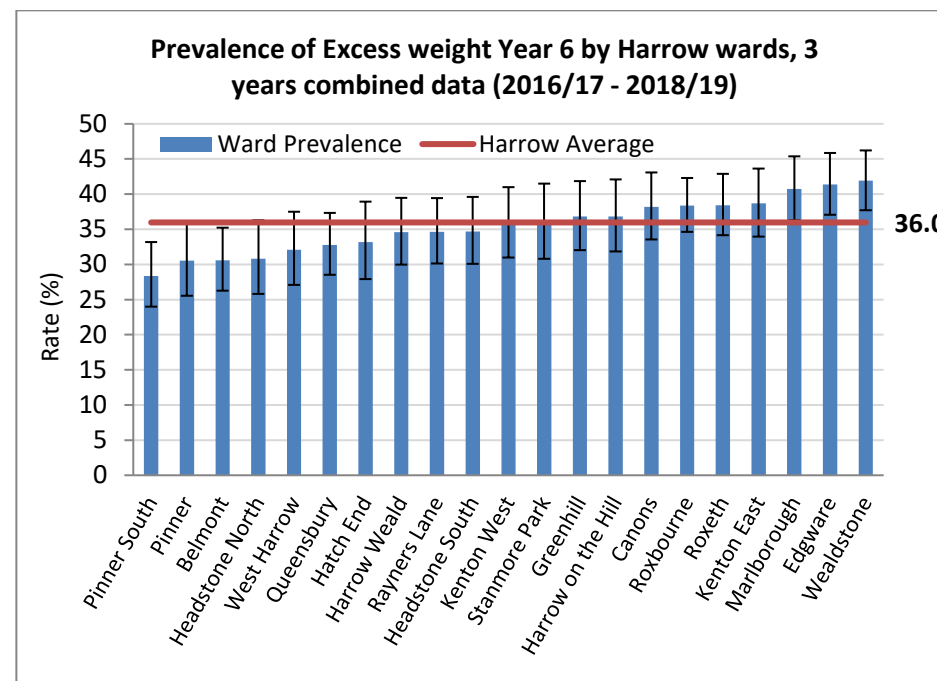
## Excess weight by ward

- For reception children in 2016/17 - 18/19 the 'excess weight' rate in the ward with the highest level was 45% higher than the ward with the lowest level. 'Wealdstone' ward with 22.5% had the highest and 'Headstone North' with 15.4% had the lowest Excess weight rate. There has not been any significant difference between wards compared to the Harrow average (Fig 4a).
- For Year 6 children the 'excess weight' rate in the ward with the highest level (Wealdstone, 41.9%) was 48% higher than the ward with the lowest level (Pinner south, 28.4%). Wealdstone and Edgware had significantly higher level of excess weight compared to Harrow average and it was significantly lower for Pinner south and Belmont. There has not been any significance between all other wards and Harrow average (Fig 4b).

Fig. 4 Prevalence of Excess weight for Harrow residents; Reception year (a) and Year-6 (b), by ward, 2016/17 - 18/19



(a)



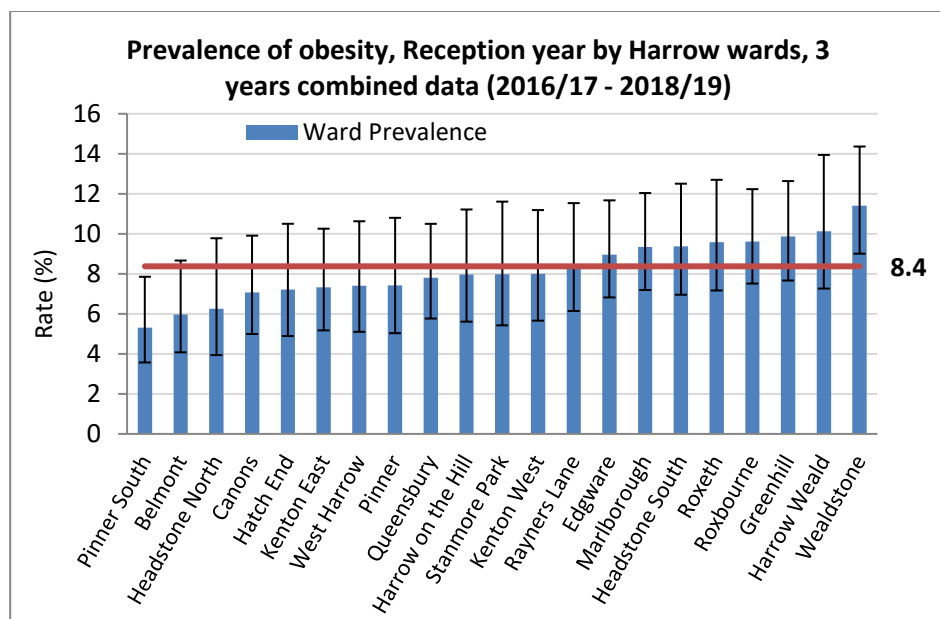
(b)

Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

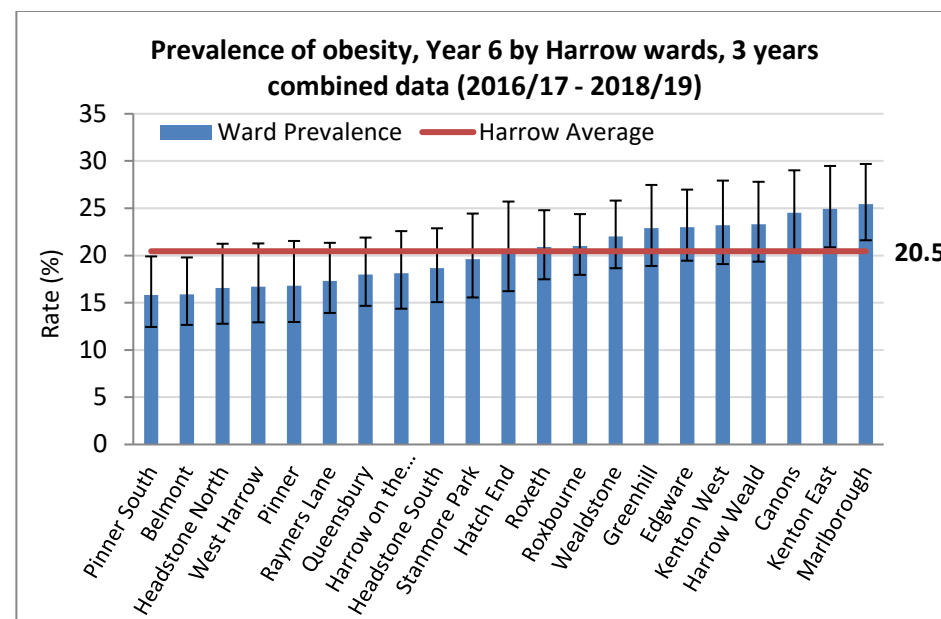
## Obesity by ward

- In 2016/17 - 2018/19, obesity levels in 4–5 year olds in Wealdstone (11.4%) was significantly higher than those in Pinner South (5.3%) and Belmont (6%). Wealdstone had significantly higher and Pinner South had lower rate of obesity compared to Harrow average but for all other wards there have not been any significant difference (Fig. 5a). Obesity levels in 10–11 year olds in Marlborough (25.4%), Kenton East (24.9%), and Canons (24.5%) were significantly higher than in Pinner South (15.8%) and Belmont (15.9%). Compared to Harrow average Marlborough and Kenton East had significantly higher; Pinner South and Belmont had lower rate of obesity but for all other wards there have not been any significant difference (Fig. 5b).
- For reception children in 2016/17 - 2018/19 the obesity rate in the ward with highest level was more than twice as high as in the ward with the lowest-obesity rate. For Year 6 children the obesity rate in the ward with highest level was 1.6 times higher than the ward with the lowest level.
- For all local wards, obesity levels in Year-6 were significantly higher than in Reception; the proportional difference (Year-6 versus Reception) ranged from 2.3 times higher in Pinner (16.8% versus 5%) to three and half times higher in Kenton East (24.5% versus 7.1%).

Fig. 5 Prevalence of obesity for Harrow residents; Reception year (a) and Year-6 (b) by ward, 2016/17 - 2018/19



(a)



(b)

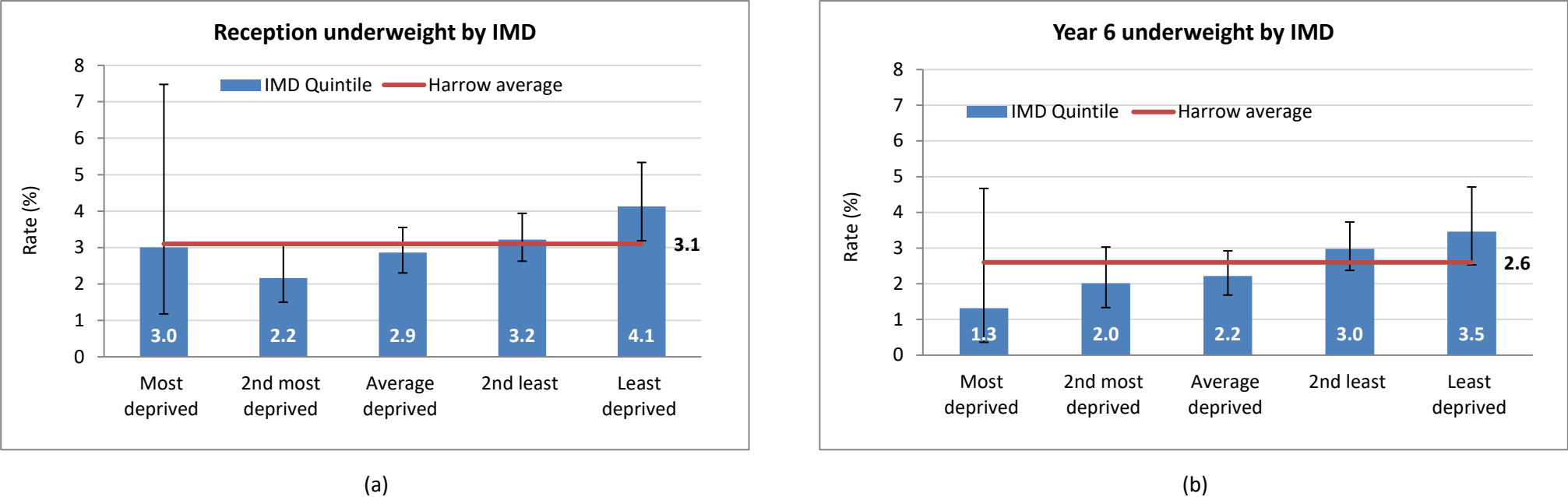
Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

Unhealthy weight by deprivation level

Underweight by deprivation level (Index of Multiple Deprivation 2015-IMD)

- Combined three years NCMP data (2015/16 – 2017/18) shows for reception children in Harrow those leaving in the ‘Least deprived’ quintile had significantly higher rate of underweight compared to the ‘2<sup>nd</sup> most’ deprived quintile but it does not show any significant difference between other quintiles. For Year-6 children it doesn’t show any significant difference between different quintile areas (Fig. 6a and b).
- The level of underweight reception children at ‘Least deprived’ quintile was significantly higher than those Year-6 children from 2<sup>nd</sup> most and average deprived quintiles.

Fig. 6 Prevalence of underweight for Harrow residents; Reception year (a) and Year-6 (b) by ward, three years combined data (2015/16 to 2017/18)



Sources: Public Health England (National Child Measurement Programme Pupil Enhanced Dataset); Office for National Statistics (ward codes)

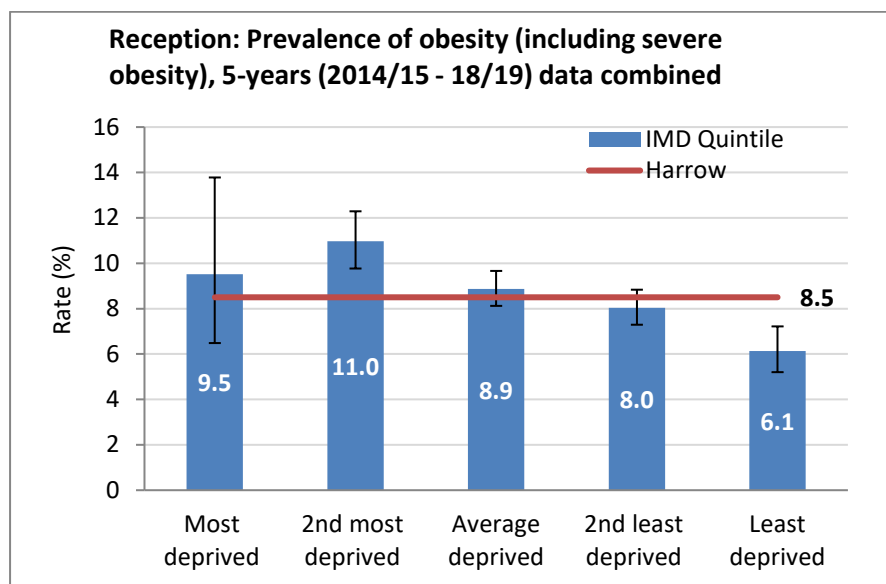


## Obesity by deprivation level

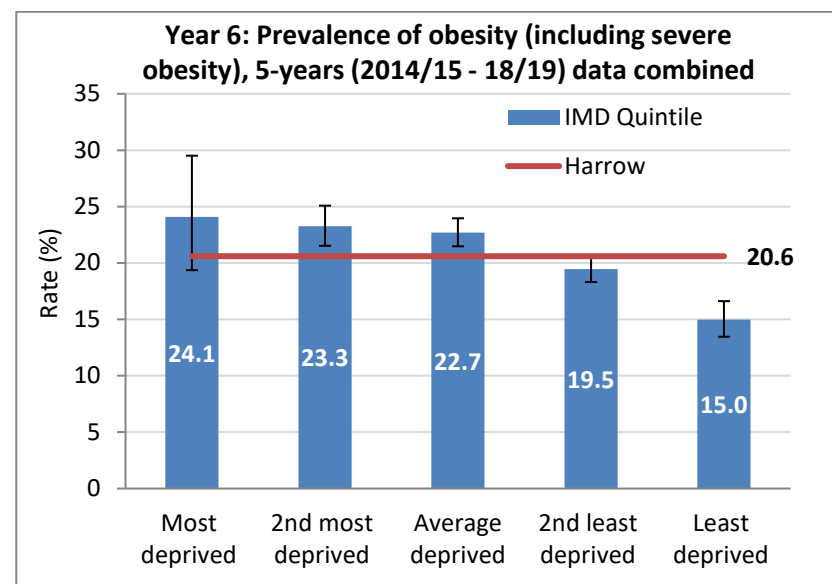
### Obesity by IMD

- Harrow five years combined NCMP data (2014/15 to 2018/19) doesn't show any significant difference of obesity level for Reception children living in the most and least deprived area (possible the sample size is too small). However, it shows a significant difference between the 2<sup>nd</sup> most deprived area and the Least, 2<sup>nd</sup> least and average deprived areas. Also the Least deprived area had significantly lower obesity rate (6.1%) and the 2<sup>nd</sup> most deprived had significantly higher obesity level (11%) than the Harrow average (8.5%). The obesity rate for those in the 2<sup>nd</sup> most deprived quintile is 80% higher than those living in the least deprived area (Fig. 7a).
- Year-6 Harrow school pupils living in the most, 2<sup>nd</sup> most and average deprived area had significantly higher obesity levels than those in the least and 2<sup>nd</sup> least deprived areas. Obesity rate for those in the most deprived (24.1%), 2<sup>nd</sup> most deprived (23.3%) and average deprived areas (22.7%) is respectively 40%, 55% and 53% higher than those in the least deprived quintile (15%). The least deprived quintile also has significantly lower obesity rate than all other quintiles. The 2<sup>nd</sup> most and average deprived areas (23.3% and 22.7% respectively) have significantly higher obesity rate than Harrow average at 20.5% (Fig.7b).

Fig. 7 Prevalence of obesity (including severe obesity), 5-years (2014/15 - 18/19) data combined by deprivation quintiles in England (IMD2015); Reception year (a) and Year-6 (b)



(a)



(b)

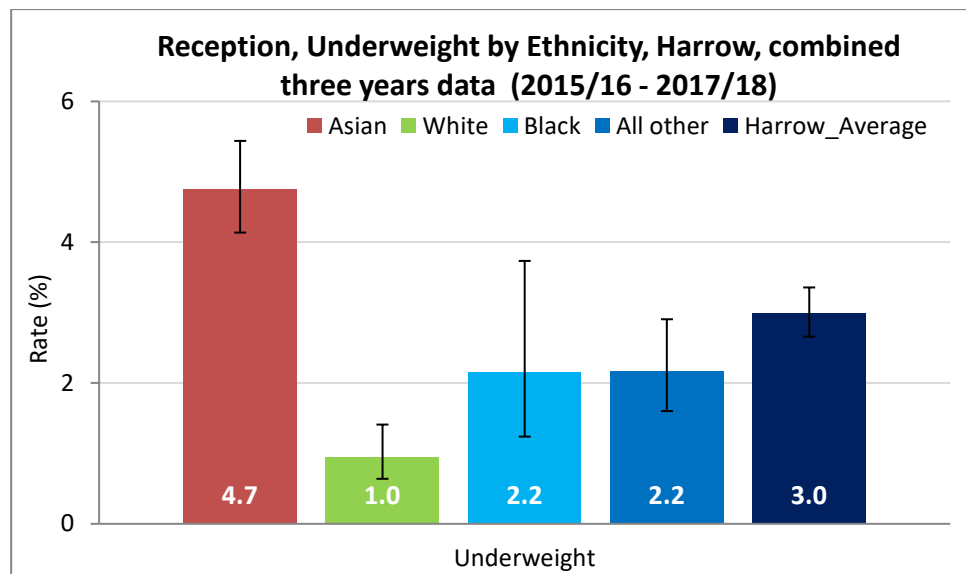
Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

## Unhealthy weight by ethnic group

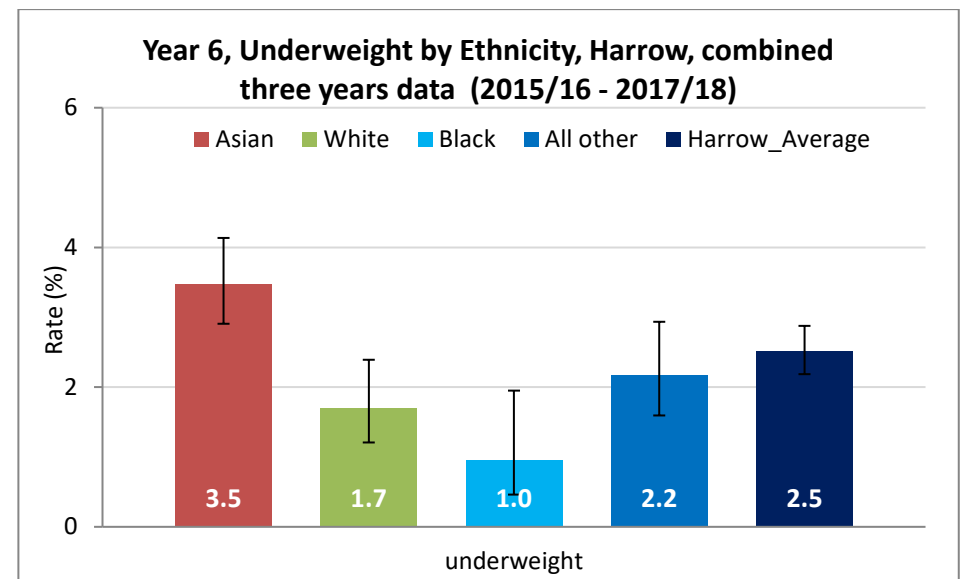
### *Underweight by ethnic group*

- Three years combined data (2015/16 – 2017/18) shows that there has been a significant higher underweight prevalence for Asian children both in Reception and Year-6 compared to all other ethnic groups (White, Black and all others merged) and Harrow average.
- Underweight level for White reception children was significantly lower than all other ethnic groups and Harrow average (Fig. 8).

Fig. 8 Prevalence of underweight for Harrow residents; Reception year (a) and Year-6 (b) by ward, three years combined data (2014/15 to 2016/17)



(a)



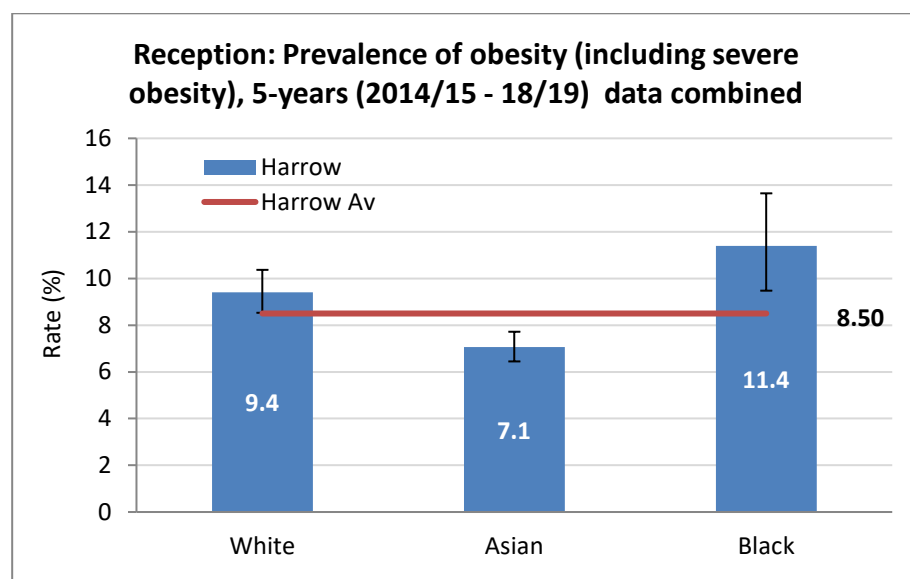
(b)

Sources: Public Health England (National Child Measurement Programme Pupil Enhanced Dataset); Office for National Statistics (ward codes)

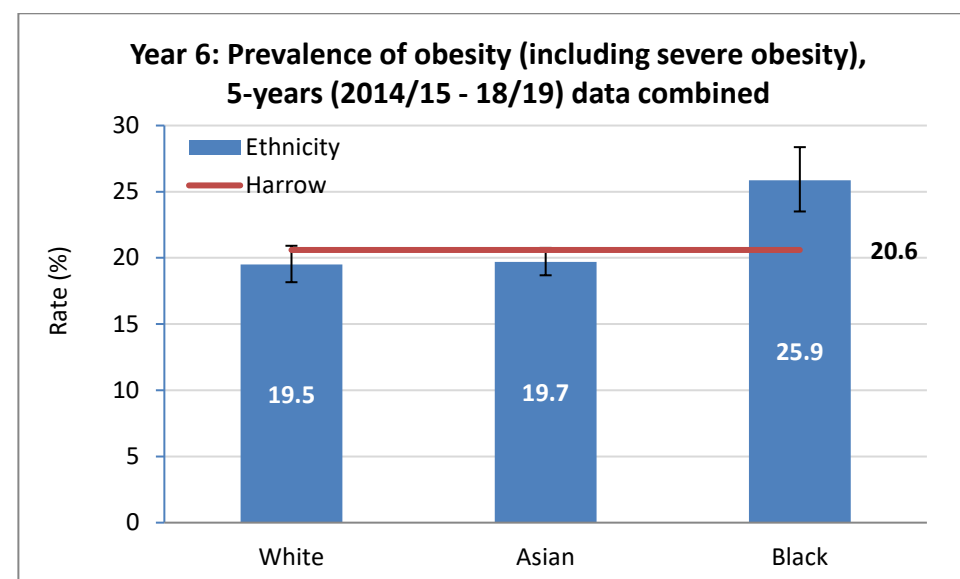
### Obesity (including sever obesity) by ethnic group

- 5-years combined NCMP data (2014/15 to 2018/19) shows the obesity level for Reception children were significantly higher for Black and White pupil (at 11.4% and 9.4% respectively) than Asian (at 7.1%). The obesity rate for Asian children was significantly lower and for Black children it was significantly higher compared to Harrow average (Fig. 9a).
- Obesity levels for Year-6 children were significantly higher in Black children (at 25.9% - also more than 5% higher compared to the previous years) than White and Asian children at 19.5% and 19.7% respectively. Compared to the Harrow average (20.6%) Black pupils had significantly higher obesity rate (Fig. 9b).
- Obesity levels were significantly higher in 10–11 year olds than in 4–5 year olds. It was 2.8 times higher for Asian, 2.3 times higher for black and 2.1 times for white children.

Fig. 9 Prevalence of obesity for Reception (a) and Year-6 (b), Harrow school pupils by ethnic group, 5-years combined NCMP data ( 2014/15 - 2018/19)



(a)

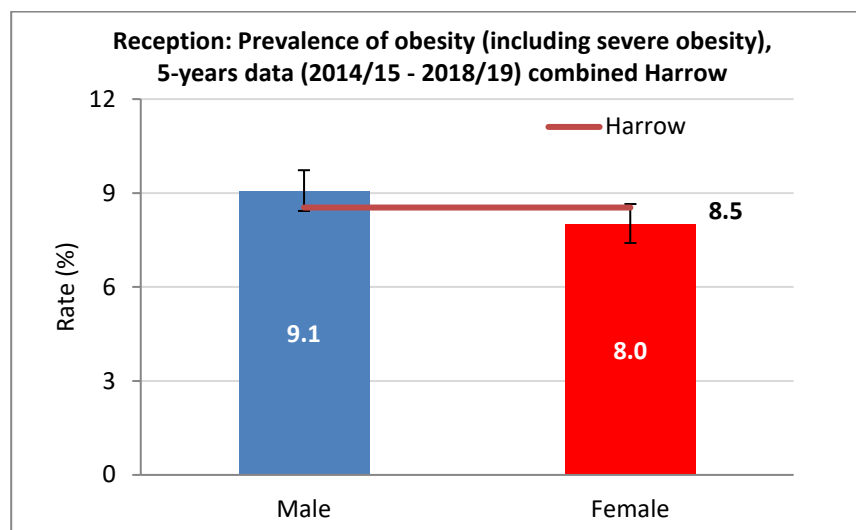


(b)

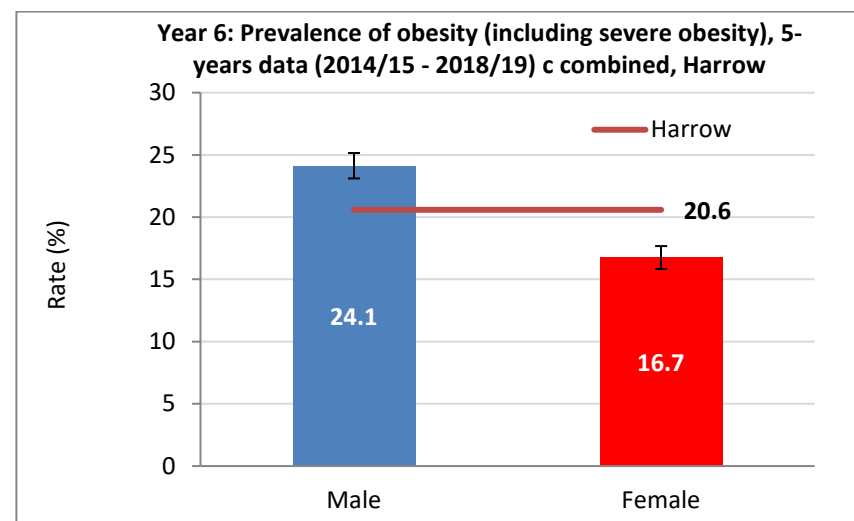
### Obesity (including sever obesity) by Gender

- 5-years combined NCMP data (2014/15 to 2018/19) shows the obesity level for Reception children were higher (not significantly) for male (at 9.1%) than female (at 8%) (Fig.10a). For Year-6 children it was significantly higher for male (at 24.1%) than female (at 16.7) (Fig.10b).
- Obesity levels were significantly higher in Year-6 than in Reception year. It was 2.6 times higher for boys and 2.1 yimrd higher for girls.
- The graph below shows the gap between male and female is much wider for Year-6. For reception children the obesity level for boys was 1.1 times but for Year-6 children, obesity level for boys shows 1.4 times higher than girls.

Fig. 10 Prevalence of obesity for Reception (a) and Year-6 (b), Harrow school pupils by Gender, 5-years combined NCMP data ( 2014/15 - 2018/19)



(a)



(b)

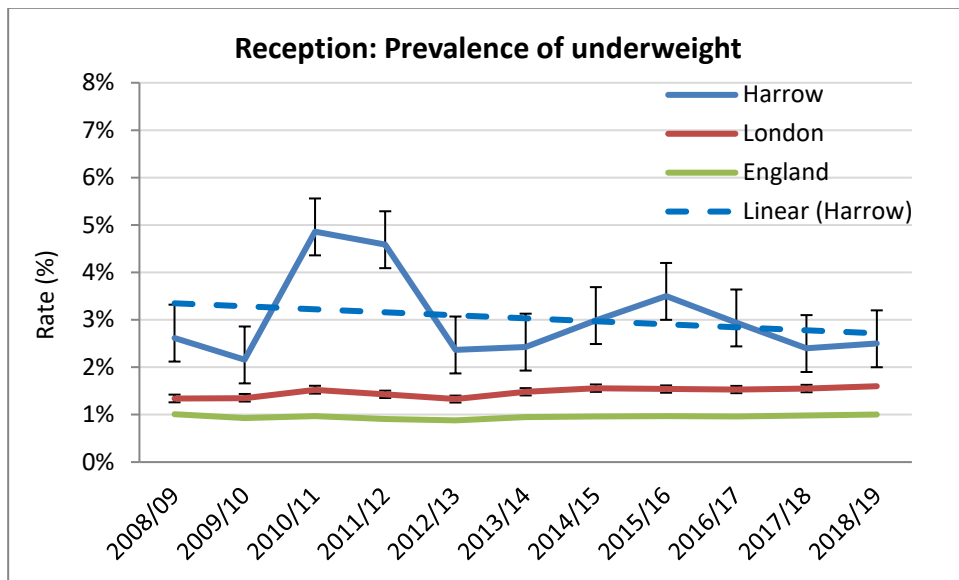
Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

### Unhealthy weight time trends

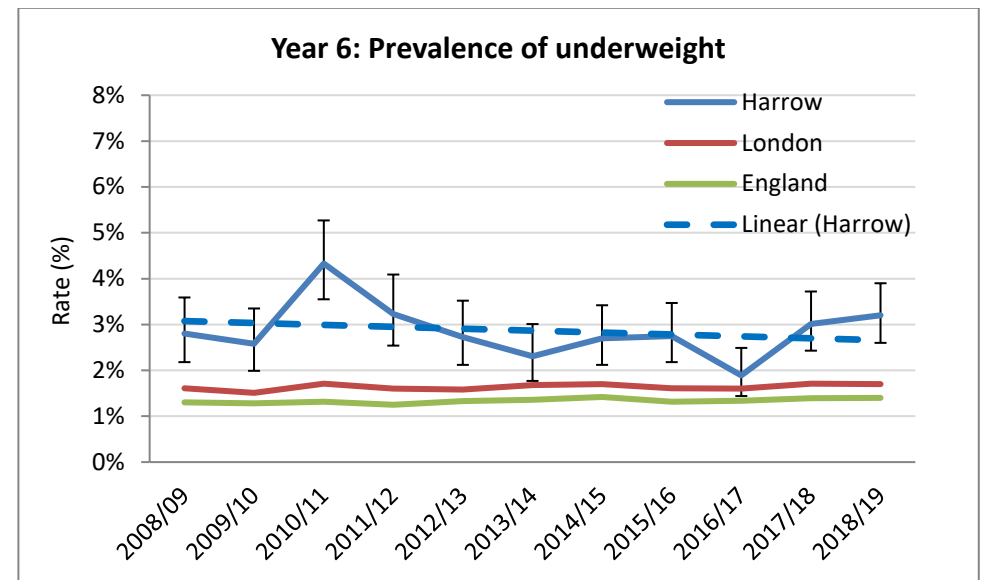
### Underweight time trend

- The dashed linear trend line in the graphs below show the underweight levels in 2018/19 did not differ significantly from those in 2008/09 for Reception or Year-6 (Fig.11a and b).
- The trend at region and national level has also stayed steady (Fig 11).

Fig. 11 Underweight prevalence time trend in Reception (a) and Year-6 (b) attending Harrow schools, 2008/09 to 2018/19



(a)



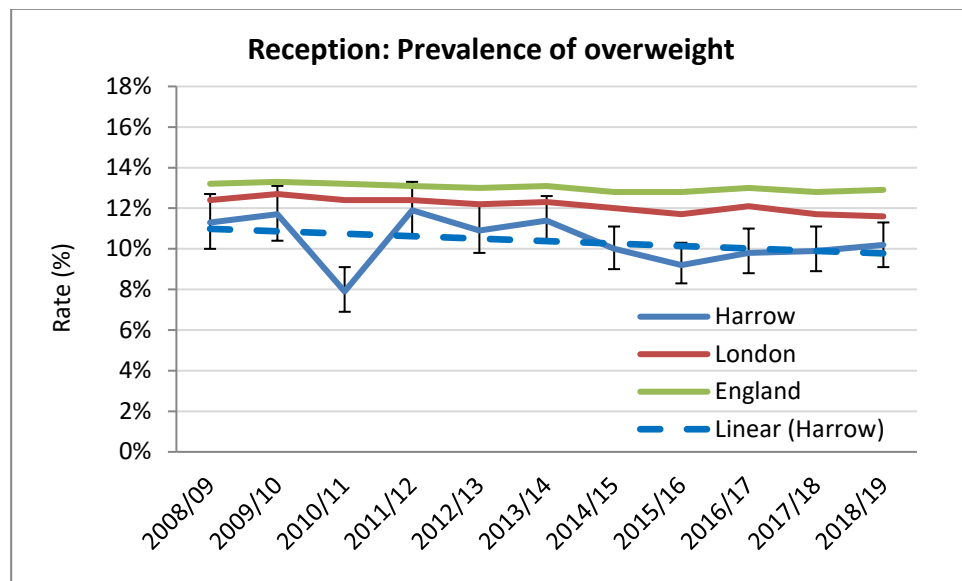
(b)

Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

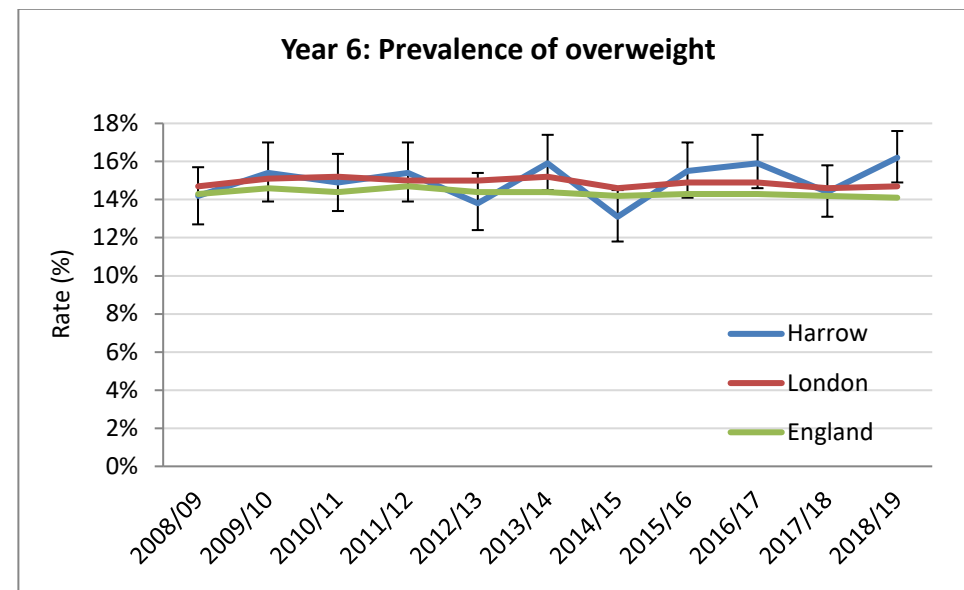
### Overweight time trend

- The graphs below show the overweight levels in 2018/19 did not differ significantly from those in 2008/09 for Reception or Year-6, however it shows a downward trend (not significant) for Reception (Fig 12).
- The trend at region and national level has also stayed steady (Fig 12).

Fig. 12 Overweight prevalence time trend in Reception (a) and Year-6 (b) attending Harrow schools, 2008/09 to 2018/19



(a)



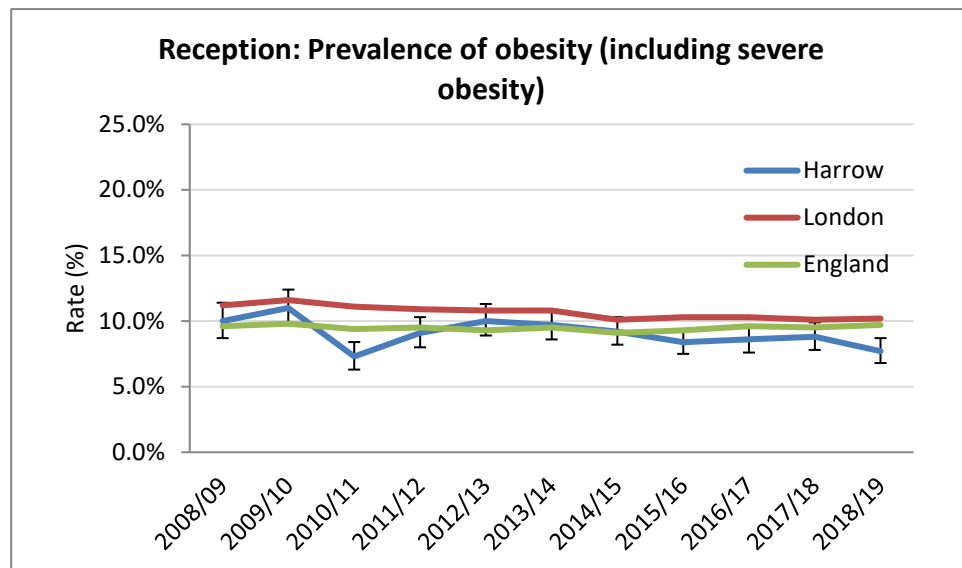
(b)

Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

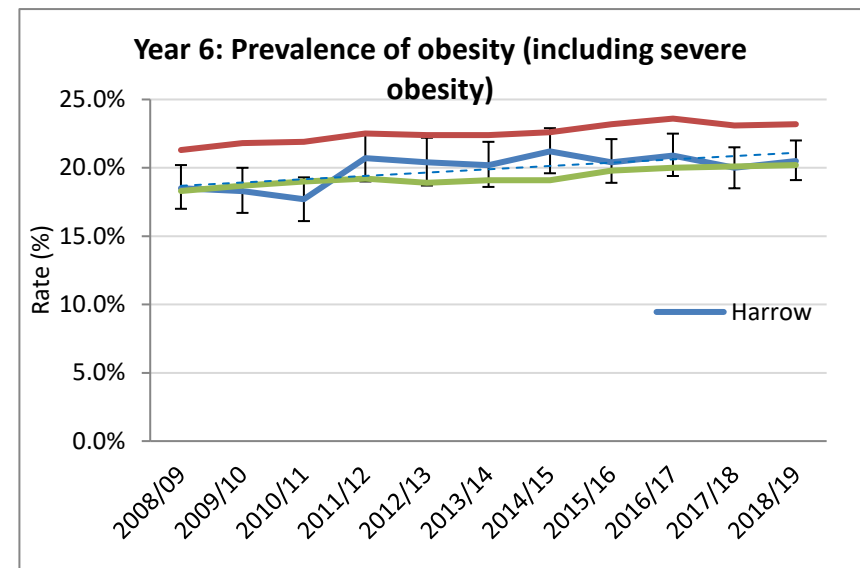
### Obesity time trend

- The graphs below show the obesity levels in 2018/19 did not differ significantly from those in 2008/09 for Reception or Year-6 (Fig.13a and b), however it shows an upward trend (not significant) for Year-6 (Fig 13b).
- The trend for Year-6 at region and national level has also shows a slight increase (Fig 13b).

Fig. 13 Obesity (including severe obesity) prevalence time trend in Reception (a) and Year-6 (b) attending Harrow schools, 2008/09 to 2018/19



(a)



(b)

Source: Public Health Outcome Framework -Fingertips (National Child Measurement Programme Pupil Enhanced Dataset)

## Methods and data caveats

The NCMP data analysed represents pupils attending government-maintained schools within the geographical area of interest. Results exclude: pupils attending privately funded schools; and pupils who were not aged 4–5 years in Reception or 10–11 years in Year 6.

Weight categories are taken from NCMP population BMI categorisation, i.e.: underweight = 2<sup>nd</sup> centile or below; overweight = on or above 85<sup>th</sup> centile and below 95<sup>th</sup> centile; obese = on or above 95<sup>th</sup> centile; and excess weight = overweight plus obese. Table A3-1 below has been copied from 'PHE NCMP guidance for analysis 2018' also is available from the following link (accessed: 09/09/2019):

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/744234/PHE\\_NCMP\\_guidance\\_for\\_analysis\\_2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/744234/PHE_NCMP_guidance_for_analysis_2018.pdf)

**Table A3-1: P scores used for population monitoring BMI classification**

Population monitoring BMI centile category	BMI centile score (p-score)	BMI centile
<b>Severe obesity</b>	≥0.996	≥99.6 <sup>th</sup>
<b>Obese</b>	≥0.95	≥95 <sup>th</sup>
<b>Overweight</b>	≥0.85	≥85 <sup>th</sup>
<b>Healthy weight</b>	>0.02 to <0.85	>2 <sup>nd</sup> to <85 <sup>th</sup>
<b>Underweight</b>	≤0.02	≤2 <sup>nd</sup>
<b>Very thin</b>	≤0.004	≤0.4 <sup>th</sup>

Ethnic group categories are taken from NCMP ethnic group categorisation.

Confidence intervals for overall weight category prevalence in Reception and Year 6 are as published by NHS Digital.

Confidence intervals for weight category prevalence amongst wards, ethnic groups and IMD quintiles are calculated using: Analytical tools for Public Health, PHE February 2018, commonly used public health statistics and their confidence intervals. Online link: <https://fingertips.phe.org.uk/profile/guidance>

Analysis of unhealthy weight at ward level used three-year averages of data from 2015/16, 2016/17 and 2017/18, as per Public Health England advice (Public Health England, National Child Measurement Programme Guidance for Data Sharing and Analysis, NCMP 2017/18, Oct 2018.

<https://digital.nhs.uk/data-and-information/publications/statistical/national-child-measurement-programme/2017-18-school-year> (accessed 10/09/2019)