

UK

London



Intervention area: Healthy food for all

City action: Improving healthy food knowledge and provision for children in early childhood education and childcare settings

In England, improving access to healthy food for children is a key part of the public health strategy. There is a well-developed evidence base for health promotion in schools, and it has been the focus of various national actions, most prominently the National Healthy Schools Programme (2000–2011).

Children in London, and especially those under the age of 5 years, face a number of health issues linked to diet and activity. In 2017, the Office of the Mayor of London saw an opportunity to implement a pan-London approach that could support commitments to improve health and education for school-age children and young people. The idea of a new programme dedicated to early years' health, well-being and development aligned with a number of Mayoral manifesto commitments, such as the Mayor's Health Inequalities Strategy, which promises every London child the best start possible in life.ⁱ By understanding health, well-being and development – including child nutrition within a broader context of inequality – and using the links with education, a programme was designed that allowed early years childcare settings to address health, education and equality: the Healthy Early Years London (HEYL) awards scheme.ⁱⁱ

The aim of the HEYL scheme is to help reduce health inequalities by supporting a healthy start to life across themes that include healthy eating, oral and physical health, and early cognitive development. This is done by using a whole setting approach, teaching young children, parents, caregivers and staff about healthy food and physical activity, sedentary behaviour and sleep, making sure children receive all of these at childcare and at home.ⁱⁱⁱ The programme incentivizes

participation through an awards scheme, offered to settings based on their achievements at four levels: First Steps, Bronze, Silver and Gold. By providing a public form of recognition from the Mayor's Office, the scheme acts as a quality mark for settings' commitment to health, well-being and development.

The HEYL scheme was launched in 2018, and as of July 2019, 31 of 33 London boroughs had joined it, representing a 94% uptake rate. Evaluating the programme was crucial to demonstrate its effectiveness as a policy intervention, as well as helping achieve its goals. Each participating London borough has a designated coordinator, whose role includes providing evaluation advice and support to settings involved in the scheme. With support from the Partnership for Healthy Cities initiative, the HEYL programme also developed a quality assurance framework to help boroughs assess programme outcomes. The framework design was strategic because it rooted itself in the needs of the local boroughs involved in the programme beyond health. It helps local boroughs and settings show not only how they are meeting the requirements of the HEYL scheme in terms of health – how many children are receiving healthier food, for example – but also how they are meeting requirements for education standards.¹ Its emphasis on relevance may partly explain the programme's rapid uptake.

One of the biggest challenges was getting equal buy-in from the education and health sectors, and the process of engaging both equally in the work was a delicate process of balance and negotiation. The design of the self-assessment framework itself was similarly complex, requiring blended technical input from the perspectives of health and education. Another challenge was around scaling up data collection. There is no single method or process for standardized data collection between different boroughs, which means that comparing data between boroughs or at the city level is challenging. In addition, the indicators of interest intersected with health, education and inequality, and no single entity currently collects all three. However, a positive outcome of this was that it helped trigger new thoughts about how to integrate data collection across different areas of health at a local level.

Measuring inequality is built into the programme's key metrics. Under the Mayor's Health Inequalities Strategy (2018), the programme aims to show how it supports the health, well-being and development of children from the most deprived communities in particular. So far 94% of the most deprived boroughs have signed up (16/17) and have either confirmed or are already committing local resources to the scheme. As the programme progresses, local authorities would like to continue this work by investigating other ways of measuring the participation of different socio-economic groups in various early childhood education and childcare settings. Programme reach and impact on equality is currently tracked by progress maps that monitor the number of HEYL settings in London boroughs against the Income Deprivation Affecting Children Index (see Figure 1) and the Health Inequalities Index, mapping HEYL presence against indicators on child

¹ The Office for Standards in Education, Child's Services and Skills. OFSTED inspects and regulates services that care for children and young people, and services providing education and skills for learners of all ages. The 2019 Education and Inspection framework is available at: <https://www.gov.uk/government/publications/education-inspection-framework>

health, education and equality (e.g. rates of overweight/obesity at reception age, and levels of educational development). These help boroughs assess how their work through the HEYL scheme is supporting children from more disadvantaged backgrounds, emphasizing its commitment to equality through health.

By March 2020 the programme coordinators would like to see over 1330 settings from across all boroughs participating in the HEYL scheme, which would represent 10% uptake and a potential reach of around 30 000 children aged under 5 years in childcare. As of July 2019, over 1302 (98% of the March 2020 target) settings had already signed up to the programme, with some already achieving Bronze, Silver and Gold awards in recognition of their achievements.

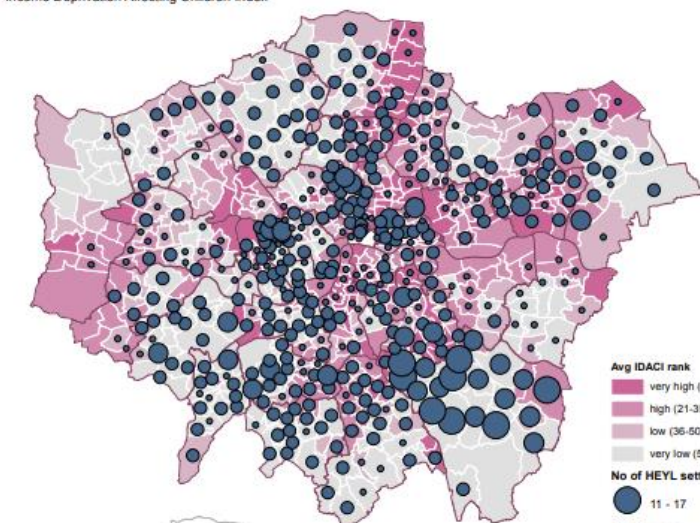
A full programme evaluation – funded by Bloomberg Philanthropies under the Partnership for Healthy Cities initiative – is underway and will be reported in December 2019. However, from the HEYL experiences it is clear that it is important to:

- understand the potential benefits of linking health and well-being with other related issues, such as education and equality.
- align with the Mayor's agenda – support from the Mayor of London's Office played a key part in highlighting the programme as a priority.
- ensure all activities have practical use value for supporting a local area's work in ways beyond the single programme or policy, to ensure longer-term sustainability.
- collect and compare data on health and inequalities to show how a health programme is supporting hard-to-reach communities across different areas of a city.

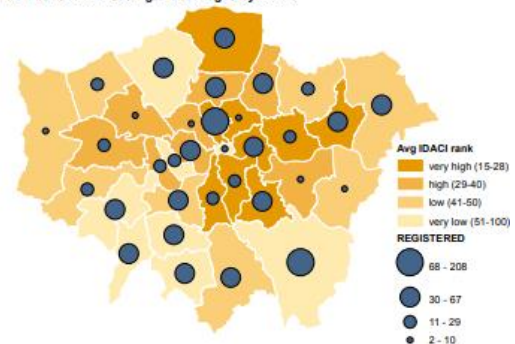
Data maps of HEYL settings compared to the Income Deprivation Affecting Children Index (IDACI) and Health Inequalities indicators (HIs)

NUMBER OF HEYL SETTINGS IN WARDS BY IDACI* JULY 2019

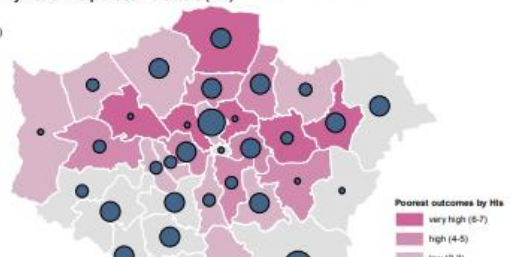
* Income Deprivation Affecting Children Index



Number of HEYL settings in boroughs by IDACI



Number of HEYL settings in boroughs with poorest outcomes by Health Inequalities indicators (HIs)



ⁱ The London Health Inequalities Strategy 2018. London: Greater London Authority; September 2018 (https://www.london.gov.uk/sites/default/files/health_strategy_2018_low_res_fal.pdf, accessed 19 September 2019).

ⁱⁱ The Healthy Early Years London [website]. London: Greater London Authority [no date] (<https://www.london.gov.uk/what-we-do/health/healthy-early-years-london>, accessed 19 September 2019).

ⁱⁱⁱ Guidelines on physical activity, sedentary behaviour and sleep for children under 5 years of age. Geneva: World Health Organization; 2019.