'How Poverty Affects the Obesity Crisis'

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EYST:

Selima Bahadur (Chair/Host), Twahida Akbar (co-Host) & Judy Li (co-Host & Tech)

Key Speakers/ Panellists:

Mizan Rahman - Football Development Officer, coach education Course Director & Tutor of Football Association Wales & Football Coach

Hannah Sabatia – BAME Outreach Programme Development Officer at Swansea Council for Voluntary Service (SCVS)

Attendees (13 total): Arlete Morais (EYST Wales), Jennie McClymont (NHS Wales), Bilqis, Elle Henley-Herat (Future Generations Wales), Fikayo Ilori (Swansea MAD), Huw Cook (NHS Wales), Deepika Bagga (Cardiff Council), Mei Lee (Women Connect First), Theresa Shields, Mohammed Azhar Haniffa, Rhian Hughes (MAPS – Money & Pensions Service), Denise Hammond-Webb (NHS Wales), Carole Phillips (Kidscape)

EYST Introduction to topic:

Today we will be looking at the topic 'How Poverty affects the Obesity Crisis'. Some of the things that we will discuss today include:

-cost of living

-eating habits within ethnically diverse communities

-how the obesity crisis has gotten worse - we know it's always been there

-how covid affected peoples eating and exercise habits

To start, there is a quick look at some statistics (for adults) from the gov.uk website:

- In the year to November 2020, 62.8% of adults (people aged 18 and over) were overweight or obese, a similar percentage to the previous year (62.3%)

- 67.5% of Black adults were overweight or obese – the highest percentage out of all ethnic groups
- 32.2% of adults from the Chinese ethnic group were overweight or obese – the lowest percentage out of all ethnic groups
- percentages were broadly similar to those from the year ending November 2016 for all ethnic groups – this was except for White British people, where it went up from 62.0% to 63.7%, and for Black people, where it went down from 72.8% to 67.5%

Overweight and Obesity

Excess weight and obesity are becoming more common in Wales, and at the same time our collective ability to recognise what being a healthy weight looks like is reducing. This is a cause of significant public health concern, since carrying excess weight can have significant implications for an individual's physical and mental health. At its simplest being overweight or obese is the result of an energy imbalance. It occurs when the amount of energy we take in through food, is much greater than the energy we use going about our daily lives. Therefore, being overweight or obese describes someone who is carrying an excess of body fat. Obesity prevalence is rising in Wales, as it is globally, and the healthcare costs associated with treating obesity are high and continuing to increase.

Being overweight or obese increases the risk of a wide range of chronic diseases, principally type 2 diabetes, hypertension, cardiovascular disease including stroke, as well as some types of cancer, kidney disease, obstructive sleep apnoea, gout, osteoarthritis, and liver disease, among others. Obesity is also associated with and contributes to a shortened lifespan. It can also impair a person's well-being, quality of life and ability to earn. Poor diet and a sedentary lifestyle are the main causes of overweight and obesity. Some people may also experience psychological problems such as low self-esteem, poor self-image, and low confidence levels. Weight loss reduces all of these diseases in a dose-related manner: the more weight lost, and the closer to a healthy weight the individual becomes, the better the outcome. Obesity leads to an increased number of years of life lived with a disability and lowers life expectancy.

Obesity isn't just someone who eats fast food all the time. Obesity is the result of a sedentary lifestyle. Obesity is the result of reduced access to healthcare. Obesity is the result of poor living conditions that people can't afford to remedy. Obesity is the result of having to buy food in quantity, instead of quality.

Nearly a quarter of people in Wales are in poverty. There's lots of reasons for that, some of those are things that have affected people across the whole country. We've seen, for example, our social security system be weakened a lot in recent years, so it provides much less protection for people.

The proportion of children and adults in Wales who are of a healthy weight is dropping.

Poverty

Poverty can mean having no money in your pocket, your children going to school hungry, or to bed without enough food. It can mean not being able to afford a winter coat or heat your home. But it can also be about living for years without work or hope, cut off from opportunities and change. And people in poor communities have worse health and shorter life expectancy.

It used to be said that work was the best route out of poverty, but increasingly it isn't a route out at all. Half of Welsh households experiencing poverty have someone bringing home a salary.

Poverty is the state of having few material possessions or little income. Poverty can have diverse social, economic, and political causes and effects. When evaluating poverty in statistics or economics there are two main measures: absolute poverty compares income against the amount needed to meet basic personal needs, such as food, clothing, and shelter; relative poverty measures when a person cannot meet a minimum level of living standards, compared to others in the same time and place. The definition of relative poverty varies from one country to another, or from one society to another.

Poverty in Wales

Latest figures show that 1 in 4 people in Wales live in relative income poverty, and this figure has remained largely unchanged for a decade.

An estimated 29% of children live in poverty – more than two thirds of which live in households where at least one person is in work.

25% of jobs pay below the real Living Wage.

1 in 6 people who are referred to food banks are in work. (OXFAM)

<u>What is the cost-of-living crisis?</u>

The 'cost of living crisis' refers to the fall in 'real' incomes (that is, adjusted for inflation and tax) that the UK has experienced since late 2021. It is being caused by a combination of high inflation outstripping wage increases and upcoming tax increases that have squeezed incomes for many households.

<u>Introduction of Key speakers</u>

MR - This area interests me because I've always been in the fitness industry/health sector, and I've always been into sports. I grew up playing sports as I think that was the only relief I had with the busy lifestyle, being brought up in a South Asian family. It was very disciplined; working part time since I was 14 years old and then at 16, I was working at my father's restaurant which I did for many years and then ended up completing a couple of PT courses and ended up becoming a personal trainer. I was a personal trainer for many years as well as working in the restaurant for my dad. I went into personal training courses purely to get away from the catering industry because it wasn't very social; my friends would have the weekends off and our busy period were the weekends, so I was trying to get away from it to try and establish working in the gym. In 2008 I was fortunate enough to work for the Welsh FA (Welsh Football Association of the governing body of football in Wales). I was there 11 years and in 2018 taught PE at a comprehensive School. Currently I'm with the English FA, (England Football Association) and covering West Midlands. I still work for the Welsh FA where I am a part time tutor. The Welsh Football Association have certain level of courses

that run for football coaches, so I'm course director of Wales for them on a part time basis and with the English Football Association of Football Development Officer covering inclusion and diversity. I'm also an online coach as I'm very passionate about personal training and healthy eating so I do that very small-scale working, few individuals who like to get coaching for competitions for bodybuilding etc.

I also coach the Aston University men's team currently, as well which is part-time during term time. Something that interests me on the obesity side of things comes from doing body building competitions for many years. I started in 2014 and for six years competed in various sort of competitions internationally and nationally and I was really close to becoming professional, but then work took over and then injuries etc and then covid happened. How we do in terms of depression and anxiety and mental health, things like that, so when covid hit, I was floating around 95 kgs which we call an 'off season weight' for body building. You may have seen in magazines or TVs, a really lean person, so when you go into a competition you're actually leaner. So that's called a stage weight like probably 2% modified, 3% body fat which is not healthy, it's just for one off competition basis. So, when I'm on stage I'm usually about 86, 87 kgs, but when I'm off season I'm usually 95kg which is my cruising weight if you like, when I'm not competing; healthy balanced diet etc. When lockdown hit , the first three months I maintained as much as I could; I was outdoor training and I was enjoying it to be fair, because I was always so busy with work etc and that time off, I was really enjoying it as we were on furlough, getting paid and doing nothing. Then it carried on and as time went on I just became too relaxed, I think my weight out of the last lockdown was 110 kgs. So from 95 to 110! The last 15 kgs of weight was from just pure eating rubbish and I was really content to be fair. I was happy and enjoying foods and as South Asians we love our greasy food and the sweet foods etc. I moved to Birmingham, which is probably the worst thing because the restaurants there and the offers are just too good to miss out. There's so many types of food that I wanted to try too. This actually affected me mentally. I used to be quite active on my social media pages - fitness related page. I have a sponsorship from a nutrition company, who sponsor me and pay for me to go internationally etc, so I used to do it mainly for them as well as doing it for myself so I was

confident within myself. But since lockdown I hardly post anything. It did knock my confidence a lot being that weight. Some people still see me and think I look great but because I'm used to a certain weight it affected me mentally. Now, I have just come back into a routine of eating healthily and that is reducing the sugars, fast food etc. I'm really interested in this area.

HS - I'm Hannah Sabatia and I work for SCVS in Swansea on a project called 'Ethnic minority Outreach Programme' which is funded by the Swansea Bay Health Board in partnership with CVS's (Swansea&NeathPT). This project was started because of the impact of covid on people, especially Black Asian and minority ethnic. Prior to this project I worked with people seeking asylum, helping them to settle in, through the 'Better Welcome' Project at SCVS. This gave me the experience of working with different people from different backgrounds. I am originally from Kenya and that's where I did my BSc Food, Nutrition and Dietetics. I specialised in Nutrition management of Diabetes, and I love to talk about food and nutrition topics. Currently with the Outreach Programme, as part of community engagement, I run Level 1 community food and nutrition from Nutrition Skills for Life. This helps people to learn health ways of living when making choices about food. Some with less and making their money count etc. Being able to adapt recipes and prepare different menus, they learn various ways helpful to support behaviour changes. I grew up around people with the mentality that if a person did have a 'big belly' then one was 'well off'! I don't know whether that is familiar to all cultures, but where I lived, that was the mentality. I did believe it because when I looked around me all those people who had more money and properties, most of them had 'big bellies' and it was acceptable that way. However, in the Western world, the narrative has changed; it's been a natural inclination to believe that everybody who is overweight or obese is from a deprived community, and sometimes that's not true. It just made me think that the view about relationship between obesity with poverty does change with where you are. It makes it look like poverty and obesity is for those people without money?!

We are here to find out what we can do to reduce obesity. The statistics are alarming, and research has shown that healthy foods are more expensive than unhealthy food and this is

so especially now when the prices are going up. If you look at what World Bank says, 'The poor cannot afford to purchase those things that are needed for good health included sufficient quantities of quality food and health care'. They also mention that food inflation can have a particularly devastating impact on poor families. A typical person in a low-income country spends about two thirds of their resources on food, while some figures show for a typical person from high income countries it's closer to 25%. You can see the disparities when it comes to less money, less resources, and the link with obesity. Obesity is that abnormal, excessive accumulation that presents a risk to health. So fat accumulation leads to diseases that impact on the body and it's bad and that's what causes health problems in a lot of our people.

So what could be causing obesity? I want to mention social economic status where some people with money feel that they can reward themselves! This attitude can be very dangerous especially when the rewards are unhealthy choices. Due to the sedentary lifestyle, people end up eating more, resulting in unnecessary weigh gain. Food choices affect much of what you eat, as Mizan above said it's about the love of food. I love African food and I will make dishes and eat them because it's giving me the memories of home and before I know it, I'm eating more than I need. What about education? How much people know affects their choices! This lack of knowledge is causing people to eat foods high in fat, salt, and sugar. If we do not have places to carry out physical exercise, then this also becomes a big problem – we accumulate body fat that we don't need. Food insecurity is linked to low income. Poor Living conditions can cause people's choices to go downhill. We've seen that a lot of people affected by migration. Living conditions affect people's choices especially when the living conditions are chosen for them. It can trigger mental health, which in turn can affect people's food choices. I just wanted to share a little, a little motivator - Don't laugh, but just take the message in. It covers what I wanted to say, and I have done this in a creative way!

HS plays a short clip – of her running in Swansea Bay with a positive message showcasing it can be done without spending money at the gym etc!

The point of that little video is that poverty is not just the reason for obesity. There are other reasons that we need to explore, and some of those reasons we can do something about it. For example, the motivation to be active is out choice to make and the rest we can leave to the policy makers and governments to bring together.

Question and Answer Session

Question for MR: Did your family and friends support you with your eating habits and training?

MR - My parents didn't understand why I wasn't eating curry for so many years. I wanted to compete in body building, so I wanted to have chicken, broccoli and rice! As it was just mentioned, a healthy look to a certain society is a big belly. The bigger your belly, the happier you are. This makes sense to some extent as food does make you happy. My mum was getting worried that I was losing weight as I was losing weight to quite an extreme for a competition. My friends would joke about my situation quite a lot as they were not familiar with the industry that I was in, with competing in competitions etc. When we used to go out for Christmas do's etc and we went to have food, I would find the healthiest option and then from the restaurant if we went elsewhere I would have a protein bar in my pocket, which I would bring out to eat it and while everyone would be having a glass of whatever drink I would be drinking water. I did have the mick taken out of me but deep down they were always respecting and understood what I was doing, and congratulated me for my discipline and hard work. With the family side of things there were always questions as to why I was eating the way I was. Not due to my competition purposes but due to my learning through my education and training. I would try and help educate my family members, saying how bad it is to have certain things in certain ways, such as too much sugar, too much salt etc which can be really bad for you as salt holds water in your body which has a negative impact on ones body. So once I started explaining the health benefits of the way I was eating, not to the extreme, but in the middle somewhere, my Mum started

changing her ways and then she started lecturing her friends and explaining to them how they could make small and subtle changes to their diet and lifestyle. So, at the beginning she was sad and disappointed that I was not eating her food that she cooked. After competing at the competitions, I used to enjoy whatever my mum would cook which she loved. I suppose I probably ended up eating a week's calories in a day because she just missed feeding me! Long term my mum changed her ways. For example, the blue top milk which is the pasteurised milk, my family would drink that, I used to drink the red top but then we found the middle and started drinking the green top which is the semi skimmed. My mum started drinking that on a regular basis. It's not a massive difference but it is little things like that. Another example is boiled vegetables whereas in the South Asian culture, when we have vegetables we tend to have it quite heavily oiled and spiced. My mum meets at the middle ground if you like. She will still eat her rice and curry dish but will have a vegetable dish which is boiled vegetable as a side just to sort of compensate certain things that we are eating. So, it's had a positive knock-on effect on the rest of my family as they are conscious of what they eat as well, which is good. It's still not the best but it's a work in progress!

Question for HS: Can you please share what kind of issues you face when supporting people from minority ethnic backgrounds around this topic? Also do you feel there is enough support there for minority ethnic communities?

HS - I work a lot with the community, so basically, I'm a community health worker out there trying to motivate people to take up what is available. It appears there is a cycle that never seem to end for the ethnic minorities. Poverty related issues you will see include insecurity, isolation, loneliness, poor living conditions, Depression, stress, anxiety etc, All these may even encourage or make people live sedentary lifestyles and that sedentary lifestyle would lead to obesity or overweight due to lack of motivation to make healthy food choices. So it seems to be going on and on and as one of my colleagues said, we've been talking about these things for 20 years and we are still talking about them! So this is the current situation. When I'm delivering the food and nutrition sessions or any other health and well-being session, I can see a lot of barriers for some of the learners; one being digital issues. This may

look like an easy issue to resolve by just getting people gadgets, but it can start with being unable to access resources and information which means that people are not able to get the right information they need at the right time to make informed choices. I have seen mothers with babies trying to attend these nutrition sessions. Imagine when the babies need attention and their mothers want to learn, how do we go about that? And you can see that it is a barrier for that mother to sit and learn about anything that is provided. You also have a peripheral issue; people dealing with migration in the background. They can be very stressed worrying about not having a solicitor, or how they will get to an appointment or deal with the Home Office etc. All these things mentioned are going around people's mind and they do affect food choices. Or what time they eat. Or what they choose to eat. So these are the things I have noticed in my work and I can see there is never enough help and support. However, during covid there was a lot of support - money came out and it was flowing around for organisations to try and help others get this, that and the other – to get this tablet, get this digital device. I remember we held a forum to assist and to encourage Home Office to put Wi-Fi in asylum seeking households and once that Wi-Fi was put in which was very good and a great initiative, who follows to check the quality of it? Now the quality of that Wi-Fi does affect my learners who I want to attend food and nutrition sessions. For people to make those behaviour changes, all these issues need to be addressed and everybody needs to be involved. I feel there is still much that needs to be done when it comes to supporting the minority communities to help them make the right choices and make the right moves when it comes to health.

Question for MR: Did you face any barriers within the industry?

MR - There are many factors with that one. Probably my football playing when I started young. I loved football so much. I was into many sports, but football was the dominant one. I used to work for my dad and his business, he was very disciplined and quite strict. As many of you may know, who are from a South Asian or Black community, our grandparents and ancestors come over for a better life and sport isn't in the forefront or what we sort of want to encourage youngsters to do. Rather they are encouraged to get a degree, get good qualifications and earn money so sport wasn't any sort of area that my parents were keen to

sort of support. My dad's family restaurant used to close at 2am in the morning on Fridays and Saturdays as we used to have all the customers from the pub etc. So I would have to work until 2/3 o'clock in the morning and then get home, go to bed straight away and then try to wake up by 9:00 o'clock and get down to the football club where I played, finish at one and then come back straight to the restaurant. So that was the biggest challenge. I couldn't get away from it. My dad was very strict and as I was the eldest it was a bit harder on me. It was a bit of a hard rule - you either help and support the family or you leave the family. So, you know, as a child what can one do?! That was a kind of barrier.

But in terms of the fitness industry or eating healthily or trying to compete in body building, I think just being around our culture was really hard. Like I said, it was one task trying to explain to my mum why I was changing my eating habits and diet but we when we used to go visiting to families and friends if you didn't eat at their home, it can come across quite maybe offensive or a bit rude. So, to be polite you have to eat. I was quite strong willed and strong minded that I used to explain it, but even then I had to give in sometimes and eat certain foods and then justify it in my mind and think I'll do an extra half an hour running later, I'll just burn it off! I would do some additional work for me just to keep someone happy! Those are the little challenges that I faced in terms of trying to eat healthy, trying to compete in bodybuilding and being physically active.

A question from an attendee: With regards to Hannah's points - How do you control your emotional ties around food to seek comfort and food? What is the right thought processes to have to manage this problem to deal with the problem of overeating?

HS - This love of food from our country of origin, it's okay, it's beneficial in helping me to know that it's also the amount we eat of these foods. When I look at the diets from my country, there is nothing wrong with it and it is balanced, but because of that emotional attachment, you tend to eat more. I think what the question is trying to ask is how do you break that emotional tie? I think you just must distract yourself. Like I previously mentioned, we normally use dinner plates for our food, if you switch from that to a smaller plate, the portions you serve on the smaller plate will be smaller than the portions you

would have served on the bigger plate. You can eat the same food, but if you reduce the plate size then you're going to eat less. Then, try to remember that 'every time you are 80% full - Stop!'. I think that is something you can train yourself to do. I can relate with this emotional tie with food for comfort. It can be so strong, like an addiction! So like any addiction, we can get addicted to food. However good it is, however, healthy it is, too much of anything is not good for you. It's poisonous as they say. It applies even to good food. We have all heard about avoiding saturated fat, you can have unsaturated fat but in general the message is to reduce total fat, whether it is good fat or bad fat, reduce it. The point here is we must check the basis of what is causing the emotional issues. I have also lost a loved one and I have friends who lost their family members during covid and it takes a long time to get yourself together. Good association when it comes to food matters, who are you sitting around when eating matters. Is it the party attitude or you are around people who have that element of "let's make a healthy choice"? These are little suggestion that I can give. I can also recommend my simple healthy food & nutrition level 1 course. Remember when you feel you are 80% full, just stop eating and focus on something else.

Question for HS: **Please share what you observed about how Covid has affected ethnic minority communities, in relation to trying to eat healthier or to stay active.**

HS: When covid started and lockdown was being implemented, one thing we saw was people started panic buying. You could go to the shelves in stores and see them empty. We forgot that some people do not have access to bank accounts, some people don't have access to buy online because of digital poverty. So these people would only be able to get fresh food if they walked to the supermarkets. We were allowed to do that, but what if you went in and found the shelves empty? This did affect a lot of people who we were working with, and we ended up having to divert people to food banks, and food banks would take the excess from the shops to avoid waste and then people were able to get some help.

Covid also exposed some mental health issues and whether these are coming from stress, anxiety, depression, loneliness or isolation, these issues have had a big impact on peoples journey to eating well. The more they stayed at home, the more they stayed away from

health activities or healthy choices and that's how people's lives were sedentary which then accelerates obesity. So, it's a cycle that Covid has brought.

We also have families who have immigration issues. I would like to mention this because this is always left behind and with ethnic minority people, there are categories of people; you have people who are struggling to stay in the UK, you have people who have no recourse to public funds meaning they cannot access benefits and then you have people who are settled. So if you look at the comparison of issues, we as Support Workers have been pulled back to those people who are still struggling with migration and we have seen more issues perhaps than somebody who would have settled well, who is allowed to work etc. Covid has had a big impact on those people. For example, a married man who came here and left his family behind is only getting 35 pounds a week, he's not allowed to work so that 35 pound a week, the family back home are asking for it because they don't anything. That man is the breadwinner. He sends that money and then he is left with nothing. I can't tell you how many came to me during covid; they came and said 'Hannah, I am so sorry I had to send my money to my wife and my children, so I have nothing'. That was an effect of covid because as we got locked down here it was worldwide. Here we were fortunate to have benefits. What about those get locked up in Kenya? You're not allowed to go out, but there's no benefits. So where do you get sustenance? Every penny I get, my family is crying for it and it's genuine. It was bad and it is too bad because the cost of living has gone up everywhere. It's not just UK, when we're talking to our families abroad, the money can't go far and they need help.

There is also the lack of confidence. this has affected people, perhaps being indoors and lonely for a long time. It has affected people's ability to feel that they can go out in the park, play around or play games, join some sports etc. there has been a lack of motivation. As shown in my video, that's what helped me survive during lockdown because we were allowed to go out to exercise. So, I would just go and just walk around the beach and then walk back. So, if people are not motivated to do little things like those for themselves, perhaps they haven't seen the benefit, then it's likely that they will not do anything about it. So covid has had a lot of impact on people's choices.

Question for MR: How does obesity affect the health of children?

MR: You have the bullying factor in schools. I feel parents have a lot of responsibilities in this area; eating habits, physical activity etc. You see at homes now, they have one or two consoles, and they're always playing games and not enough physical activity outside. When I was younger, growing up in secondary school from age 14 onwards, straight after school I would get on my bike, taking a football down the park and meet the boys where we would play football for hours, come home sweating and, tired, ready to eat food and go to bed. This was nearly every day so you can imagine how many calories you are burning all the time right. Now you have kids coming in switching the computer on at home, processed foods, quick foods, not all families but some families, quickly a burger or fish and chips from the oven and put in front of them and they're just playing their game. Parents will just chill out then, watch TV etc. There's not a lot of physical activity happening which has obviously had a knock-on effect on them gaining weight. As they get older you got the bullying elements; if you're slightly oversized or big, I've seen it happen. This then leads to poor mental health. As they grow older, they start to isolate themselves where they feel they don't fit in, it could lead to other issues such as depression and things like that. I know you'll see a lot of youngsters in University and early 20s, or young people who went into their first job, where they're quite quiet, they are quite isolated and that could have led on from being overweight since a young age and they have not been able to change it due to the lifestyle; what they eat and what they enjoy. When they are set into that way of life it is very hard to get out of. If you're not involved in any physical activity like Hannah mentioned, it's hard.

Although my parents weren't all for physical activity, I was around my group of friends that played a sport that I really enjoyed. My dad did take me to martial arts and that's because I got bullied and he got really annoyed with me as to why I got bullied and he said 'right, that's it, you aren't ever coming back home complaining about them' and then took me into martial arts. What I'm trying to say is that I think it is a cohesion of parental upbringing as well as the bubble in terms of the friends they hang around with. Some mixture that leads them to get to that certain weight or position where there's a knock-on effect as they get older, it seems that they could get isolated and then mental health issues come along. Like

we said, once you're fit, active, healthy and you look better, you are more confident. As Hannah mentioned earlier how some people get to comfort eat and then it just grows and grows and some cases can get quite severe and then it's just too late to make a difference. This can affect relationships with a partner and all these effects just add on, which is a shame really. It isn't set in stone that people don't change, there are people that suddenly feel they will make a difference and change but as Hannah mentioned you have to want it.

The only reason I decided to go with that level of fitness or low body fat and things like that is because I wanted to experience something first and see what it's like to get on stage and so forth. And then it opened a lot of doors, the sponsorship company came and they offered me a deal, etc.

There has to be a goal tying into people wanting to lose weight, whether it's going on holiday etc. If there's no goal it is very hard for anyone to be self-motivated to do these things. It could be that they want to join the football team or that they want to do a marathon or even that they want to go on holiday and look good in a bikini or swimming shorts or whatever it is, but you need to have a goal. When I say about the children, they're in school until they're 16 then they go to college, they don't have a goal apart from finishing their qualifications, and then university. It is hard for them to set goals outside to make them be healthy and lose weight and all those things if that makes sense because their only goal is to finish the education then get into a job. This is why I say it's important for parents to have that culture change of how they cook food at home etc

A lot of the elderly people lived longer back in the days because there was a lot of home grown, organic food but now a lot of the food is genetically modified food, for example, the bananas and all the other fruits are all genetically modified unless you get the organic from the organic section which is again more expensive. If you get the cheaper option, they are genetically modifying those to keep the bananas and apples looking fresher for longer. That's not good for us! If you go to McDonald's you can get a burger and a drink for a pound these days, but that's because the things they make the burger with didn't cost the company anything, it's just waste of the actual meat, maybe they use the more expensive

burger but they want to utilise it so they progressively condensed into a burger type and there's probably 20% meat in that one and 80% of rubbish left over, so they can afford to give away for cheap. Don't forget it's a business at the end of the day and that's what they want to make. Unfortunately, everyone's going for the cheaper option due to the obvious reasons, which is the poverty line

An attendee comments:

We deliver anti bullying workshops in schools and obviously bullying is something that's always been around but what we've seen through covid and since covid is that bullying has not gone away. The physical bullying as Mizan has said, is about body shaming and I think that's more pronounced if a young person is a little larger than other children in their cohorts. We do an exercise within our workshops where we talk about the narrative being positive as opposed to negative, if they're dealing with negative behaviour. So what we ask the children, through roleplay, is if someone was to call you ugly, what are the things you normally say back? And they all smile and say, "what have you looked in the mirror?" And "is that why the mirrors cracked?" And our response is to say, let's change that. Let's flip it and say let's give something positive back. So we say if anyone ever called you ugly, say "Thank you but that's your opinion" and meet it with a positive rather than a negative. And children say, "but Miss! that's okay if you know you're not ugly, but if you get called ugly or fat or thick or stupid often enough, that's what we then believe". So, it's about changing that narrative, what children believe and it is about the confidence they have in themselves. I was very obese as a child and I still as an adult, can remember those conversations and it takes a lot of work on yourself to not believe those comments. Also children are much more isolated now than they were before covid because of the exclusion they had from peers during the pandemic So there's not that sense of belonging. There's that fracturing of friendship groups is what we are seeing in schools, and my background is in education as well and I've seen that with children there's a sense of not belonging anymore in social groups because of the pandemic. Children have been excluded because someone in their family may have had covid so they're being picked on for that. So children can be pretty mean towards other children about what they picked to pick on and we've seen a whole

range of things that children are reporting to us, but what I've seen is that definite alck of confidence is much more pronounced than it was before, About themselves! Their self-esteem and about how they look! It didn't turn results in how they feel about themselves. There's a lot of self-harming children, a lot of comfort eating as being mentioned here and we see all of that being played out in schools today.

A comment from an attendee: So, obesity can start during pregnancy with weight gain while being pregnant, there can be no control of eating at that time. Women are eating for two, themselves and the child. How do you manage obesity among women after pregnancy?

HS: What I could say about pregnancy is we encourage healthy food choices; lots of fruits and vegetables, balanced with protein and carbs etc. because of course this mother is eating for two or even three if they're twins, so it's important for mothers to have the knowledge of choices. And that's all I can say because there's no other way to manage a pregnant woman with regards to food. If they're healthy eating then that is the best - to make healthy choices and there are so many provisions through the NHS, 'Eat well' website and all other websites that support healthy eating that mums can tap into to find different ways to eat healthy. Cooking methods is another thing for mums to look at as the way we cook our food does matter a lot to how what we end up storing or what we end up gaining. Frequently eating fried food, that's not really a good choice for pregnant mothers and it's better to use methods that are leaving food with more nutrients. If a mum can make good choices when she's pregnant, then that means the baby will be getting the right nutrients. And then they will be born with the same and the same continues, so it's a trend.

So education, we need to create awareness of all these things and I'm sure at earlier visits to the hospital that all these things are mentioned and mums are told. We don't want to deny them food and nutrients for the sake of mothers losing weight. The baby needs all the nutrients to grow.

Question to MR: To what extent are obesity initiatives targeting Minority Ethnic communities?

MR: Loads of community engagement companies, organisations, charities are doing great work trying to provide these free activities and it's all being filtered down from the governing body. So sports in Wales and England, there's funding there available to take up or support with these activities. I think the most important thing is if the individual or the families take on those initiatives, they do actually want to do it. There's only so much we can do as a provider and as a service. Those great organisations are doing great work, but if they are not willing to reach out as well and meet in the middle is very hard to change the ways. We can put all the programmes in place, we can have all these projects, but it's got to be sustainable.

From a football perspective, we have free courses if you are from a BME community, for level one and level 2 if you want to do a coaching badge because we know the financial barriers are there for some. Same with other physical activity organisations, they do running and free cycling sessions, 'Mums with prams' where they go for walks and they are mums etc. But those are mums that are willing to get off their backside and arrange where they're going to meet, go, walk, meet new people and burn those calories. If people don't want to want to do it, then we can't do anything about that but I think, I personally think, there are a lot of offers there and if I'm completely honest, sometimes there is too much and that's coming from a football perspective. We got so many funders, so much support, people just don't want to get out of their own bubble. Yeah, that's my view anyway.

HS: There are so many things I can say, but not much in the remaining minute. But really this forum or these sorts of forums are very useful for this kind of discussion because the more we speak about these non-spoken topics, we come up with ideas and even as Mizan talks I'm having ideas and things come to my mind. So many people here are giving links to different places where we can find information and you can see on the chat it's lively and I really feel encouraged by that. If we can do more of these then it will be very useful for the community we support.