

Protecting and improving the nation's health

Consistent messaging to promote a healthier weight

Core messages to support health and care professionals to deliver brief conversations

Preconception and maternity

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Why is a healthier weight important?

What happens before and during pregnancy impacts on a child's physical and emotional health all the way through to adulthood 1.

Research shows that women who are obese when they become pregnant face an increased risk of complications during pregnancy and childbirth 2.

Obese women may also experience reduced choices about where and how they give birth. There may be restrictions on home births, the use of birthing pools and types of pain relief that can be given 2.

Babies born to obese women also face several health risks for example a higher risk of foetal death, stillbirth, congenital abnormality and future childhood obesity 2.



2

What factors influence healthy weight management?

Diet and physical inactivity

Causes of obesity are multi-factorial, including biological; physiological; psycho-social; behavioural; and environmental factors.

Obesity is generally caused by consuming more calories – particularly those in fatty and sugary foods – than you burn off through physical activity. The excess energy is stored by the body as fat. Consumption of free sugars is a risk factor both for obesity and dental caries. Tooth decay is caused by increased consumption and frequency of eating foods with high levels of sugar. Poor dental health impacts on children and families' wellbeing 3.

Around a third of adults in England are damaging their health through a lack of physical activity 4. Increasing activity and healthy eating can help minimise weight gain. 5.







Smoking

Women who smoke find it harder to get pregnant. Men, as well as having reduced quality sperm, can have erection difficulties. Smoking during pregnancy is the main modifiable risk factor for a range of poor pregnancy outcomes, including miscarriage, stillbirth, premature birth, low birth weight as well as development and behavioural problems in childhood 6. Smoking damages fertility in women and men.



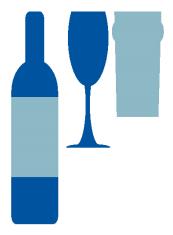
Research suggests that some people may gain weight when they stop smoking. Some of the reasons for this include; smoking can suppress an individual's appetite and food may taste better after they stop smoking. It's possible to mistake nicotine cravings for feeling hungry, or to eat to distract away from the cravings. Eating a healthier diet and increasing physical activity can help minimise weight gain <u>r</u>.



Alcohol consumption

Drinking in pregnancy can lead to long-term harm to the baby, with the more alcohol consumed, the greater the risk. Alcohol consumption during pregnancy increases the risk of miscarriage. Excessive alcohol consumption during pregnancy is associated with foetal alcohol syndrome, which can cause facial abnormalities and long-term learning and behavioural disorders, some of which can be permanent §.

Alcohol is also high in calories and can contribute to weight gain. Regularly drinking more than the Chief Medical Officers' low risk guidelines can have a noticeable impact on an individual's waistline as well as cause less obvious but more serious health problems 8.



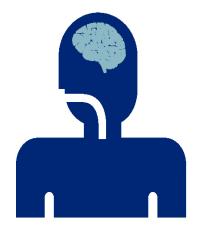


Mental health

The relationship between obesity and common mental health disorders is complex. Evidence suggests that there are bidirectional associations between depression and obesity 9.10.

Mental health problems in the perinatal period are very common, affecting up to 20% of women. Examples of these illnesses include antenatal and postnatal depression, anxiety, obsessive compulsive disorder, post-traumatic stress disorder (PTSD) and postpartum psychosis. Perinatal mental health problems occur during the period from conception to the child's first birthday 11.

Children of affected mothers and fathers are at higher risk of poor mental health, physical health, social and educational outcomes. Perinatal mental illness can impact on a mother's and father's ability to bond with their baby and be sensitive and attuned to the baby's emotions and needs. This in turn will affect the baby's ability to develop a secure attachment. Untreated perinatal mental illness can have a devastating impact on mothers, fathers and their families 11.



Skills to deliver brief interventions

Skills for healthy weight conversations

What can I do in my role?

As a health and care professional, you are in a unique position to raise awareness and motivate women of childbearing age, those planning a pregnancy and pregnant women to achieve or maintain a healthier weight. Making Every Contact Count (MECC) enables the opportunistic delivery of consistent and concise healthy lifestyle information and enables individuals to engage in conversations about their health 12.

By utilising your skills to deliver brief healthy weight conversations through MECC you can help to inform, engage and support women to make healthier choices which could significantly reduce the risk of ill-health 12.

MECC is an approach to behaviour change that uses day-to-day interactions to support individuals in making positive changes to their physical and mental health and wellbeing. It provides an opportunity to actively engage individuals in a brief intervention that will support positive change. This can help an individual in increasing their psychological capability for behaviour change e.g. by helping raise awareness of their risk factors for activity such as smoking, whilst also contributing to their motivation to take action 12.

Skills for healthy weight conversations

There is a 3 step framework at the core of delivering brief intervention. The three steps are Ask, Advise & Assist 12.

- **1. ASK** Be alert to opportunities to raise the issue sensitively and listen for any verbal cues e.g. "how would you feel about discussing your weight?"
- 2. ADVISE Listen for verbal cues and try to reflect on things that have been mentioned/are important for the individual. Adopt a positive approach that conveys belief in the individual when speaking about improving their lifestyle. Provide information if relevant.*
- **3. ASSIST** Supporting the person to take the first steps, to feel in control of their choices e.g. by providing information and signposting to support services.

If the individual isn't interested at this time – leave the door open to support them to make positive lifestyle changes in future e.g. "I understand that this can be difficult to talk about. If this is something you want to talk about in the future, I'm here to help and keen to support the family."

Training and support available

A brief intervention can support and empower people to make change; helping raise an individual's awareness of their risk factors, while contributing to their motivation to take action.

- The 'Let's Talk About Weight' tools provides a step by step guide to conversations on weight management, offering practical tips and guidance on raising the issue of weight, referral considerations, making the offer of referral and following up with patients https://www.gov.uk/government/publications/adult-weight-management-a-guide-to-brief-interventions 13,14.
- The Childhood Obesity Animation demonstrates for all health and care professionals their vital role in supporting children, young people and families in maintaining a healthy lifestyle to prevent and reduce childhood obesity https://www.youtube.com/watch?v=gQK4vj1Lzlg 15.
- There are a suite of MECC practical resources to support training and implementation of MECC https://www.gov.uk/government/publications/making-every-contact-count-mecc-practical-resources
- The MECC website includes links to e-learning, guidance, shared learning and practice examples and a national MECC community of practice http://www.makingeverycontactcount.co.uk/ 12.

Training and support available

E-Learning for healthcare modules available https://www.e-lfh.org.uk/;

Healthy child (pregnancy – age 5)

- Nutrition before and during pregnancy
- Infant feeding
- Healthy eating for toddlers 1 -4 years
- Weighing and measuring infants and children
- Growth charts and their interpretation
- Feeding children with development difficulties
- Obese toddlers and infants
- Obesity prevention in children

Healthy school child (school age children)

- Growth and nutrition
- Understanding and tackling obesity

Adolescent health

- Development of normal eating behaviour
- Body shape and body image in adolescence
- Obesity in young people
- Public health and community management of adolescent obesity
- Medical assessment and management of obesity

General E- learning modules

- Introduction to obesity
- Identifying unhealthy weight and risk factors for weight gain
- Managing obesity: supporting behaviour change
- Guiding and enabling behaviour change

Core messages for women of childbearing age and those planning a pregnancy



Core messages to promote a healthier weight for women of childbearing age and those planning a pregnancy

Why is a healthier weight important?

What happens before and during pregnancy impacts on a child's physical and emotional health all the way through to adulthood. Research shows that women who are obese when they become pregnant face an increased risk of complications during pregnancy and childbirth.

Babies born to women with obesity are at a higher risk of future obesity.





Daily supplements:

- 400 micrograms daily of folic acid before and during the first 12 weeks of pregnancy.
- Do not take supplements containing vitamin A or eat liver or liver products.
- At risk individuals such as people with dark skin from African, African-Caribbean and south Asian backgrounds or people who get little or no sun exposure are advised to take a supplement of vitamin D.



Every cigarette is harmful to both mother and baby. Stopping smoking completely will help immediately, removing harmful gases such as carbon monoxide and other damaging chemicals. Offer a referral to a local stop smoking service The safest approach for women planning a

pregnancy is not to drink

alcohol at all

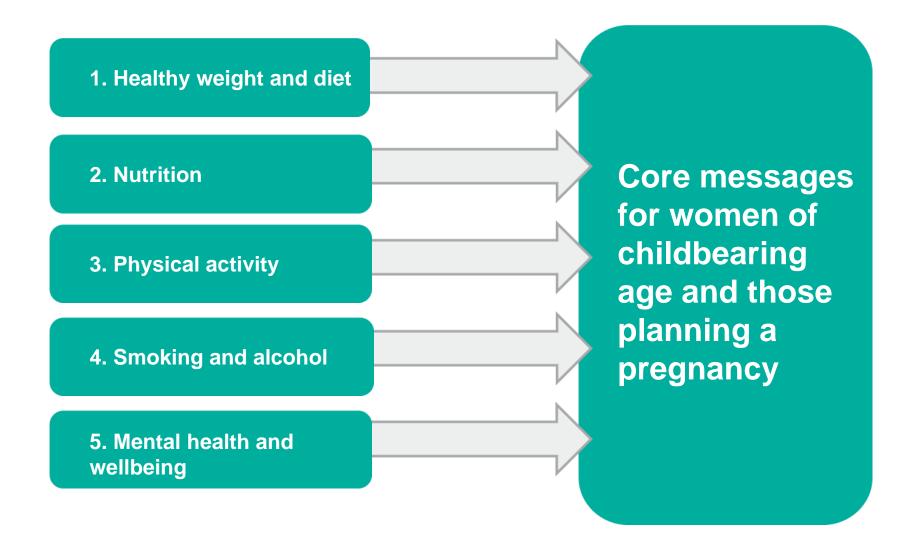


Eat healthier - Promote the Eatwell Guide. Foods and drinks high in fat, salt and sugar should be eaten infrequently.

Encourage women and partners to plan pregnancies to achieve a healthier weight before and between subsequent pregnancies. Ensure access to contraceptive advice and for individuals with excess weight gain, offer a referral to a local weight management service.



Undertake strengthening activities in major muscle groups on at least two days a week. Accumulate at least 150 minutes moderate intensity. 75 minutes vigorous intensity activity, shorter amounts vigorous intensity activity or a combination each week. Minimise long periods on inactivity.



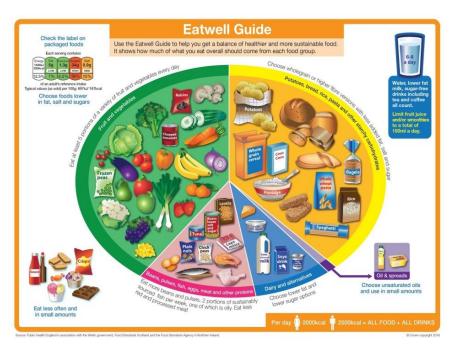
Healthy weight and diet – planning a pregnancy

A healthy Body Mass Index (BMI) is in the 18.5 to 24.9 range. **Being a healthy weight will increase a woman's chance and their partner's chance of conceiving.**

Inform women sensitively that **maternal obesity is associated with still birth and foetal, neonatal and infant death**. Risk increases with increased BMI. Offer to make a referral to their local weight management service <u>2</u>.

Promote the Eatwell Guide to support individuals to get a healthy balanced diet.

Eating healthily often means just changing the amounts of different foods individuals eat so that their diet is balanced, rather than cutting out certain food groups. Eat plenty of fruit and vegetables because these provide vitamins and minerals, as well as fibre, which helps digestion. Foods which are high in fat, salt and sugars should be eaten infrequently and in small amounts 16.



Nutrition - planning a pregnancy

Recommend a **400** microgram (mcg) folic acid supplement before pregnancy and everyday until the end of the first trimester (12 weeks), as this helps with the development of an unborn baby. However, women who suffer from diabetes, or have had a previous neural tube defect affected pregnancy, or have a history of spina bifida or similar conditions in the family, should consult their doctor as they may need to take a daily dose of 5mg of folic acid <u>17.</u>



Having large amounts of vitamin A can harm an unborn baby. For women thinking about having a baby, **advise them not to take supplements that contain vitamin A or eat liver or liver products**, such as pâté, because these are very high in vitamin A. Recommend for them to speak to their GP / midwife if they would like more information 18.

All adults should consider taking a daily supplement containing 10mcg of vitamin D, particularly during autumn and winter. **People who have a higher risk of vitamin D deficiency are being advised to take a supplement all year round**. At-risk groups include people whose skin has little or no exposure to the sun. People with dark skin, from African, African-Caribbean and South Asian backgrounds, may also not get enough vitamin D from sunlight in the summer 18.

Physical activity – planning a pregnancy

Promote adults to be active daily. Recommend accumulating at least 150 minutes of moderate intensity activity per week or 75 minutes of vigorous intensity activity or a combination of both 19, 20.

Adults should aim to be physically active every day. Any activity is better than none, and more is better still. Aim to minimise time spent being sedentary, and break up long periods of inactivity with at least light physical activity 19, 20.

Physical activity also has an important role in maintaining a healthy weight. Moving more helps prevent individuals getting serious health problems and it can help them sleep better 19, 20.



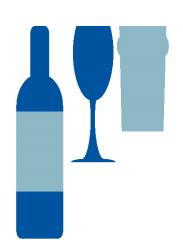
Smoking and alcohol - planning a pregnancy

Smoking damages fertility in women and men. Women who smoke find it harder to get pregnant. Men, as well as having reduced quality sperm, can have erection difficulties.

Offer to make a referral or recommend for them to contact their local stop smoking service to make an appointment with a stop smoking adviser 21. If they don't want to take up this option, suggest stop smoking aids (prescription tablets, nicotine replacement therapy or e-cigarettes) to improve their chances of quitting successfully.

Women who are planning to become pregnant should be advised that the safest approach is not to drink alcohol at all, this will contribute to keeping the risks to their baby to a minimum. If a woman finds they are pregnant after having drunk alcohol during early pregnancy, they should be advised to avoid further drinking 22.







Mental health and wellbeing - planning a pregnancy

Encourage parents and carers to be aware of their emotional wellbeing, knowing when they should seek help and have support systems in place can help prevent issues becoming more serious. Promote the Five Ways to Wellbeing (connect, be active, take notice, keep learning and give) 23.

Discuss with all women of childbearing potential who have a new, existing or past mental health problem:

- the use of contraception and any plans for a pregnancy
- how pregnancy and childbirth might affect a mental health problem, including the risk of relapse
- how a mental health problem and its treatment might affect the woman, the foetus and baby
- o how a mental health problem and its treatment might affect parenting 24.





When prescribing psychotropic medication for women of childbearing potential, take account of the latest data on the risks to the foetus and baby. Do not offer valproate for acute or long-term treatment of a mental health problem in women of childbearing potential.

Women of childbearing potential with a severe mental health problem are given information at their annual review about how their mental health problem and its treatment might affect them or their baby if they become pregnant 24.

Core antenatal messages



Core antenatal healthy weight management messages to promote during pregnancy

Why is a healthier weight important?

What happens before and during pregnancy impacts on a child's physical and emotional health all the way through to adulthood.

Babies born to women with obesity are at a higher risk of future obesity.

Obese women may also experience reduced choices about where and how they give birth.



Measure BMI - Measure and record weight and height at the first contact with the pregnant woman, being sensitive to any concerns expressed about her weight. Do not weigh repeatedly. Only weigh again if clinical management can be influenced or if nutrition is a concern.



Every cigarette is harmful to mother and baby. Stopping smoking completely will help immediately, removing harmful gases such as carbon monoxide. Offer a referral to a local stop smoking service. The safest approach for women planning a pregnancy is not to drink alcohol at all.



Eat for you, not for two. Only in the last 3 months of pregnancy do a women's energy needs increase by around 200 calories a day. Promote the Eatwell guide. Dieting is not recommended during pregnancy.

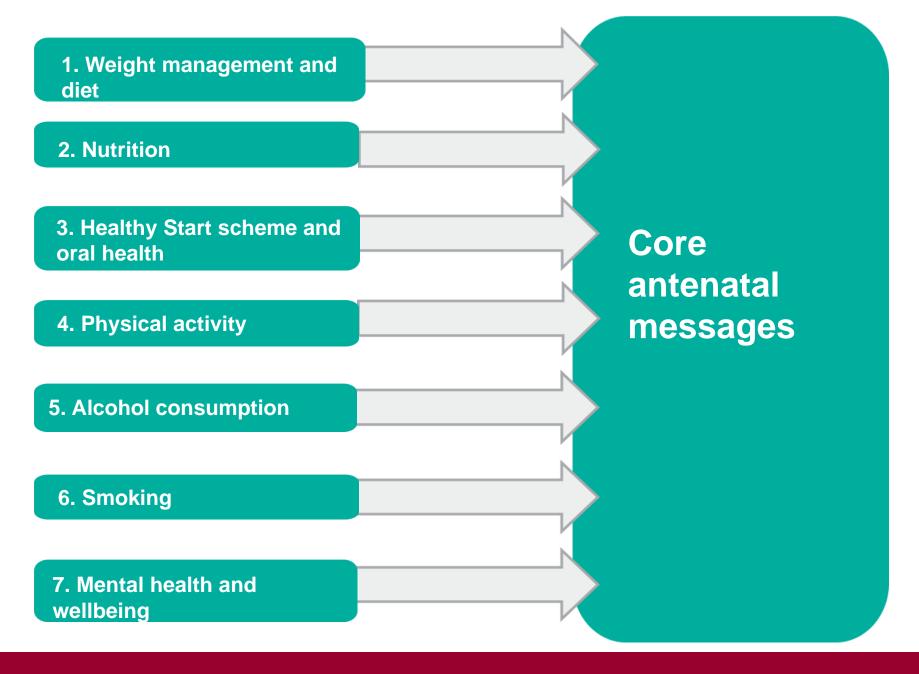


Be active - Recommended physical activity levels should also be achieved during pregnancy, with activity types reflecting pre-pregnancy activity (i.e. not vigorous if previously inactive).



Daily supplements:

- 400 micrograms daily of folic acid before and during the first 12 weeks of pregnancy.
- Do not take supplements containing vitamin A or eat liver or liver products.
- Promote the Healthy Start Scheme to those who are eligible.
- At risk individuals such as people with dark skin from African, African-Caribbean and south Asian backgrounds or people who get little or no sun exposure are advised to take a supplement of vitamin D.



Weight management and diet – during pregnancy

Promote the Eatwell Guide 15. Eating healthy is important when pregnant and will help baby to grow and develop. Pregnant women don't need to go on a special diet but it is important to eat a variety of different foods everyday to get the right balance of nutrients for both mother and baby. There are some foods to avoid or take care with when pregnant. Visit the NHS Choices website for all the important facts 25.



Women should be made aware that **putting on too much weight, or trying to lose weight in pregnancy can be harmful** to both mother and baby.

Encourage women to 'Eat for you, not for two'. It's only in the final three months of their pregnancy that they may need around an extra 200 calories a day. The additional calories required may be compensated by a reduction in daily physical activity 2.

Pregnant women will probably find that they are hungrier than usual, but they **don't need to eat for two**. Managing weight gain during pregnancy means they are likely to have fewer complications during pregnancy, labour and birth. It also means that their baby is more likely to be a healthy weight – both at birth and as they grow up \underline{a} .

Nutrition – during pregnancy

Recommend taking a **400 microgram (mcg) folic acid supplement everyday until the end of the first trimester (12 weeks)**, as this helps with the development of unborn baby. However, women who suffer from diabetes, or have had a previous neural tube defect affected pregnancy, or have a history of spina bifida or similar conditions in the family, should be advised to consult their doctor as they may need to take a daily dose of 5mg of folic acid <u>17.</u>



Having large amounts of vitamin A can harm an unborn baby. Pregnant women should be advised **not to take supplements that contain vitamin A or eat liver or liver products**, such as pâté, because these are very high in vitamin A. Ask them to speak to their GP or midwife if they would like more information 18.

All adults should consider taking a daily supplement containing 10mcg of vitamin D, particularly during autumn and winter. **People who have a higher risk of vitamin D deficiency are being advised to take a supplement all year round**. At-risk groups include people whose skin has little or no exposure to the sun. People with dark skin, from African, African-Caribbean and South Asian backgrounds, may also not get enough vitamin D from sunlight in the summer 17.

Healthy Start scheme and oral health – during pregnancy

Promote the **Healthy Start scheme**. This provides **vouchers to pregnant women and families who qualify**. The weekly vouchers can be used to buy plain cow's milk, some fresh and frozen fruit and vegetables, and infant formula milk at local shops. Individuals will also get coupons that can be exchanged for free vitamins locally 26.





Foods which are **high in fat, salt and sugars should be eaten infrequently** and in small amounts <u>16.</u>

Inform pregnant women that they are **entitled to free NHS dental treatment** and any treatment started before baby is one year old.

Physical activity – during pregnancy

Pregnant women should be encouraged to aim for at least 150 minutes of moderate intensity activity every week throughout their pregnancy. Light to moderate muscle strengthening exercises have been shown to have no adverse health effects during pregnancy and there is evidence to suggest improvements in muscle strength 19,27.

Being active during pregnancy means pregnant women are more likely to maintain a healthier weight and be able to cope better with pregnancy and labour. Being active can also, give women more energy, help them sleep better, and reduce feelings of stress, anxiety and depression 19,27.

It is important that during pregnancy women listen to their body and adapt. Physical activity during pregnancy is known to reduce high blood pressure and prevent diabetes of pregnancy 19, 27.

Women who have been sedentary before pregnancy are recommended to follow a gradual progression of physical activity building up to 150 minutes per week 19, 27.



Alcohol consumption – during pregnancy

Alcohol is not only high in calories but it increases the risk of miscarriage.

As a precaution pregnant women should be advised to **AVOID** drinking alcohol.

Alcohol crosses the placenta into the blood stream and could affect how your baby grows and develops. There is an increased risk of stillbirth in women who drink heavily as well as Foetal Alcohol Syndrome (FAS). FAS can cause problems such as facial deformities, problem with physical and emotional development and poor memory.

If a woman finds they are pregnant after having drunk alcohol during early pregnancy, they should be advised to avoid further drinking 22.

For women who are finding it hard to stop drinking alcohol, they can ask for help from their midwife, health visitor or GP 22.



Smoking – during pregnancy

Pregnant women need to be made aware that when they smoke, so does their baby. The nicotine, poisons and carbon monoxide in a cigarette can cross the placenta and affect the baby's heart and also the blood flow to the baby. This in turn can prevent adequate oxygen getting to the baby which can cause poor growth and even death. Smoking during pregnancy increases the risk of miscarriage, premature birth, stillbirth, low birth weight and other problems 6.

Support women to stop smoking. Stopping smoking early in pregnancy can almost completely prevent damage to the baby and stopping at any time during pregnancy reduces the risk of damage. Offer to make a referral or recommend for women to contact their local stop smoking service to make an appointment with a stop smoking adviser 28. If they don't want to take up this option, suggest stop smoking aids (prescription tablets, nicotine replacement therapy or e-cigarettes) to improve their chances of quitting successfully.



29.

Mental health and wellbeing – during pregnancy

It's not unusual for women to have mental health issues during and after pregnancy, even if they have not experienced these before. Mental illness in pregnancy and the first year after birth is experienced by up to 20% of women in the UK₁₁.

Encourage parents and carers to be aware of their emotional wellbeing, knowing when they should seek help and have support systems in place can help prevent issues becoming more serious. Promote the Five Ways to Wellbeing (connect, be active, take notice, keep learning and give) 23.

At a woman's first contact with services in pregnancy and the postnatal period, ask about:

- any past or present severe mental illness
- past or present treatment by a specialist mental health service, including inpatient care
- any severe perinatal mental illness in a first-degree relative (mother, sister or daughter) <u>24</u>.

Postnatal depression





Mental health and wellbeing – during pregnancy

Refer to a secondary mental health service (preferably a specialist perinatal mental health service) for assessment and treatment for all women who:

- have or are suspected to have severe mental illness
- have any history of severe mental illness (during pregnancy or the postnatal period or at any other time).
- o ensure that the woman's GP knows about the referral 24.

If a woman has any past or present severe mental illness or there is a family history of severe perinatal mental illness in a first-degree relative, be alert for possible symptoms of postpartum psychosis in the first 2 weeks after childbirth 11

If a woman has sudden onset of symptoms suggesting postpartum psychosis, refer her to a secondary mental health service (preferably a specialist perinatal mental health service) for immediate assessment (within 4 hours of referral) 24.

SKILLS

- 1. MECC, for more information on Free training and resources to support you with healthy conversation skills check out https://www.e-lfh.org.uk/programmes/making-every-contact-count/ or www.makingeverycontactcount.co.uk
- 2. The <u>'Lets talk about weight'</u> resources provide practical advice and tools to support health and care professionals make brief interventions in weight management with adults <u>https://www.gov.uk/government/publications/adult-weight-management-a-guide-to-brief-interventions</u>

KNOWLEDGE

- 1. All Our Health Childhood Obesity consistent messages animation https://www.youtube.com/watch?v=gQK4vj1Lzlg
- 2. Evidence and guidance on childhood obesity, to help families and communities intervene and help change eating and activity habits. Childhood obesity: applying All Our Health https://www.gov.uk/government/publications/childhood-obesity-applying-all-our-health/
- 3. High impact areas: These documents identify 6 areas where health visitors have the highest impact on the health and wellbeing of children aged 0 to 5 years https://www.gov.uk/government/publications/commissioning-of-public-health-services-for-children
- 4. <u>Healthy Start</u> vouchers can be used to help families on a low-income buy basic foods such as milk and fresh or frozen fruit
- 5. Physical activity infographics 2019: https://www.gov.uk/government/publications/physical-activity-guidelines-infographics
- 6. Measuring impact Everyday Interactions Toolkit https://www.rsph.org.uk/our-work/policy/measuring-public-health-impact.html
- 7. Infographic: Improving oral health for children and young people for health visitors, school nurses and practice nurses https://vivbennett.blog.gov.uk/wp-content/uploads/sites/90/2016/11/Improving-oral-health-for-children.pdf
- 8. All Our Health Children's oral health https://www.gov.uk/government/publications/child-oral-health-applying-all-our-health

- 9. A quick guide to a healthy mouth in children/ a quick guide to a healthy mouth in adults

 https://www.gov.uk/government/publications/delivering-better-oral-health-an-evidence-based-toolkit-for-prevention
- 10. The Eatwell Guide shows the proportions of different types of foods which are needed to have a well-balanced and healthy diet:
 www.gov.uk/government/uploads/system/uploads/attachment_data/file/510366/UPDATED_Eatwell-
 - 23MAR2016_England.pdf
- 11. Healthy weight and pregnancy, visit NHS choices https://www.nhs.uk/conditions/pregnancy-and-baby/pages/overweight-pregnant.aspx
- 12. Vitamin, supplements and nutrition before and during pregnancy, visit NHS choices https://www.nhs.uk/conditions/pregnancy-and-baby/pages/vitamins-minerals-supplements-pregnant.aspx
- 13. Physical activity guidance <a href="https://www.gov.uk/government/publications/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day/health-matters-getting-eve
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- 16. Smoking in Pregnancy Challenge Group (2015). Shared Key Messages http://smokefreeaction.org.uk/wp-content/uploads/2017/06/SiPKeyMsgs.pdf
- 17. The Chief Medical Officers low risk drinking guidelines https://www.gov.uk/government/consultations/health-risks-from-alcohol-new-guidelines
- 18. To find an NHS dentist visit NHS Choices www.nhs.uk/NHSEngland/AboutNHSservices/dentists/Pages/find-an-NHS-dentist.aspx
- 19. For lifestyle tips for healthy teeth, visit NHS Choices: www.nhs.uk/Livewell/dentalhealth/Pages/Keepteethhealthy.aspx

- 20. Public Health England. Delivering better oral health: an evidence-based toolkit for prevention (updated 2017) this is an evidence based toolkit to support dental teams in improving their patient's oral and general health https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/605266/Delivering_better_oral_health.pdf.
- 21. Public Health England (2017) Guidance, Health Matters: Child Dental Health. Available at: <a href="https://www.gov.uk/government/publications/health-matters-child-dental-health/health/hea
- 22. Use of electronic cigarettes in pregnancy: a guide for midwives and other healthcare professionals http://smokefreeaction.org.uk/wp-content/uploads/2017/06/eCigSIP.pdf

- 1. <u>Public Health England (2016) Guidance: Health matters: giving every child the best start in life. Available at:</u>
 <a href="https://www.gov.uk/government/publications/health-matters-giving-every-child-the-best-start-in-life/health-matters-giving-every-child-the-best-start-in-l
- 2. <u>National institute for Health and Care Excellence (2010) Public Health Guidelines 27: Weight management before, during and after pregnancy. Available at: https://www.nice.org.uk/guidance/ph27/chapter/2-public-health-need-and-practice</u>
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- 4. Health Survey for England 2016,NHS digital https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/health-survey-for-england-2016).
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- 11. <u>Public Health England (2017) Guidance better mental health: JSNA toolkit- Perinatal mental health. Available at: https://www.gov.uk/government/publications/better-mental-health-jsna-toolkit/4-perinatal-mental-health</u>
- 12. <u>Public Health England (2016) Making Every Contact Count (MECC): practical resources. Available at: https://www.gov.uk/government/publications/making-every-contact-count-mecc-practical-resources</u>
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About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-leading science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

Public Health England Wellington House 133-155 Waterloo Road London SE1 8UG

Tel: 020 7654 8000 www.gov.uk/phe Twitter: @PHE_uk

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