

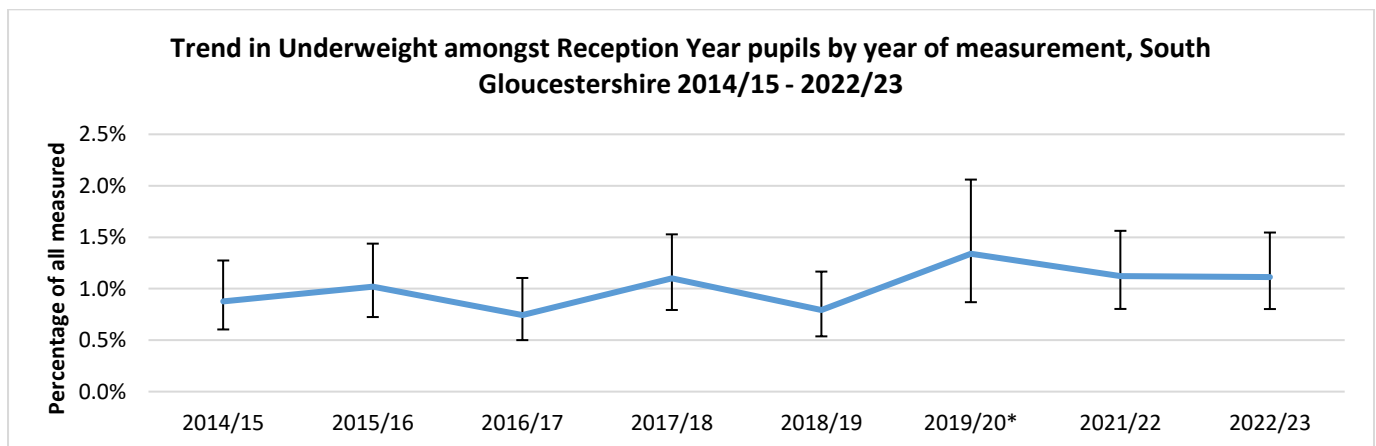
National Child Measurement Programme (NCMP)

22/23 Programme Update - Underweight Cohort

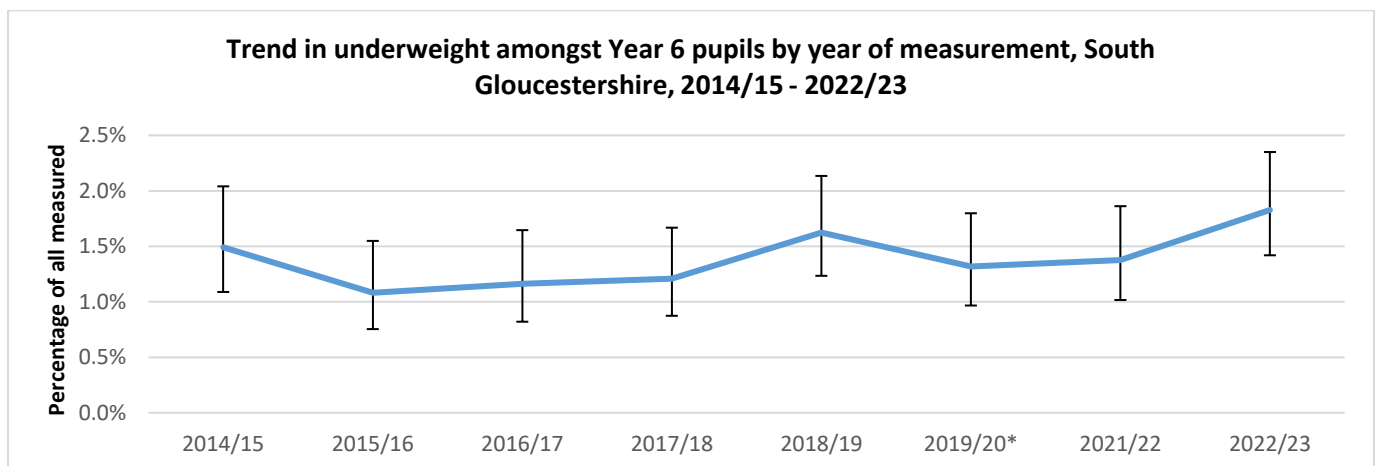
Launched in 2005/2006 the National Child Measurement Programme is a mandatory function of Local Authorities and has collected robust, reliable child weight population level data for many years. (for more information on the NCMP visit [The National Child Measurement Programme - NHS \(www.nhs.uk\)](http://www.nhs.uk)) This reliable data is used to inform the planning and delivery of interventions and commissioning decisions to tackle child obesity. National programme guidance sets out the aims of the programme, outlines delivery and encourages the provision of weight status feedback to parents and carers (1). In South Gloucestershire, School Nursing Services (SNS) are commissioned to measure the height and weight of children in reception and year 6 in all state funded infant, primary and junior schools.

This is the second full year of NCMP measurement following incomplete years in 2019/20 and 2020/21 when NCMP was postponed due to the Covid 19 pandemic. As a result, the data represented in this update does not contain full years' worth of measurements for that period or is removed due to small numbers. (*)

Trends (Figures 1 and 2)



Latest data (22/23) indicates overall prevalence of underweight in South Gloucestershire is low at around 1.1% for reception and 1.8% for year 6. For both age groups, this is statistically similar to the England rate (1.2% and 1.6% respectively) and has not changed significantly in the last 10 years.



Sex

Figure 3 illustrates the trend in underweight prevalence of reception aged children (4-5 years). Prevalence is consistently low over time (>1% for females and >2% for males). Despite some fluctuations and although not statistically different we can see that the prevalence of underweight males continues to be higher than the prevalence of underweight among females. In 2022/23 the prevalence of underweight among males was statistically higher than the prevalence among females. This is the only year during the period charted where there is a statistical difference in prevalence.

Figure 3

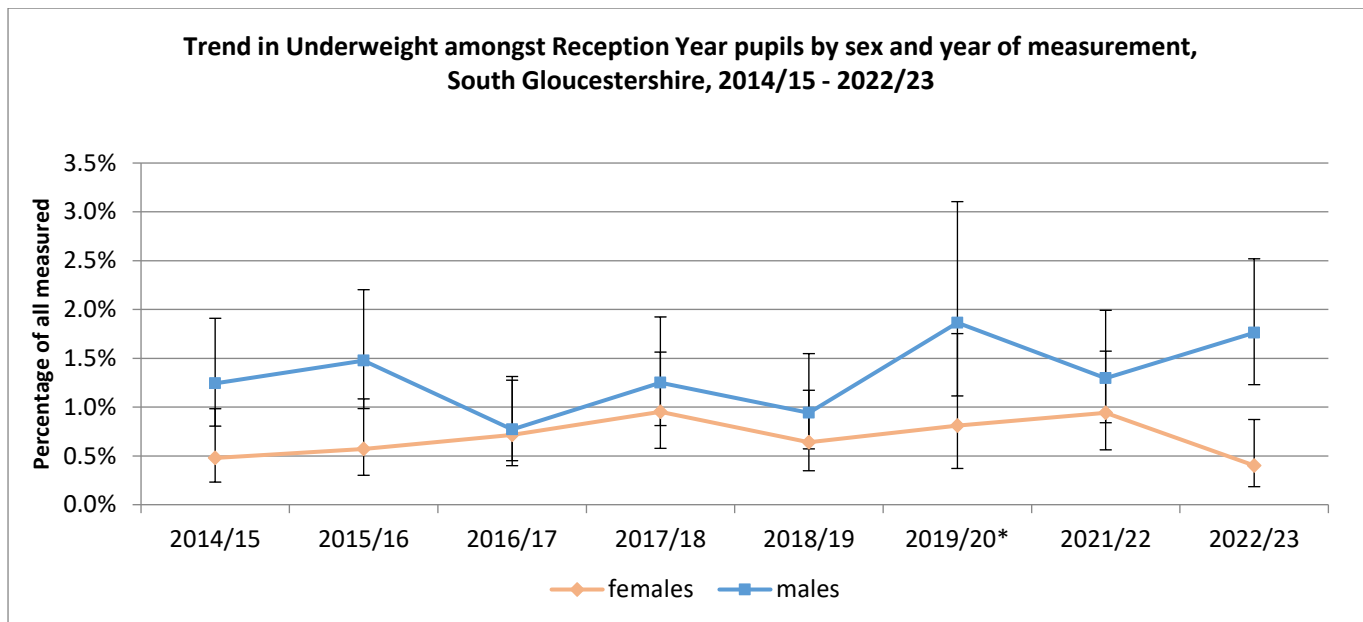
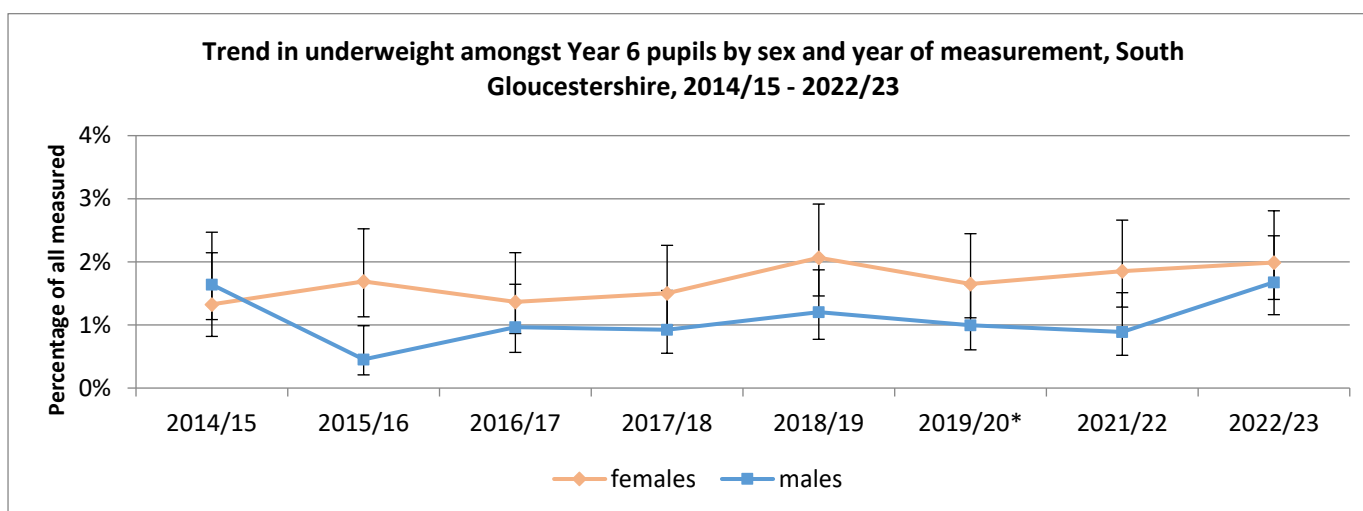


Figure 4 however shows that by year 6 this pattern has changed; the prevalence of underweight is generally higher among females compared to males. However, figure 2 does illustrate that they are statistically similar.

Figure 4



When we closely consider the prevalence pooled over recent years, figure 5 illustrates that at ages 4-5 the prevalence of underweight is statistically higher among males than it is among females. However, by age 10-11 (figure 6) the prevalence of underweight among females has increased, the prevalence of underweight males has decreased and although not statistically different there is some evidence of a higher prevalence among females compared to males.

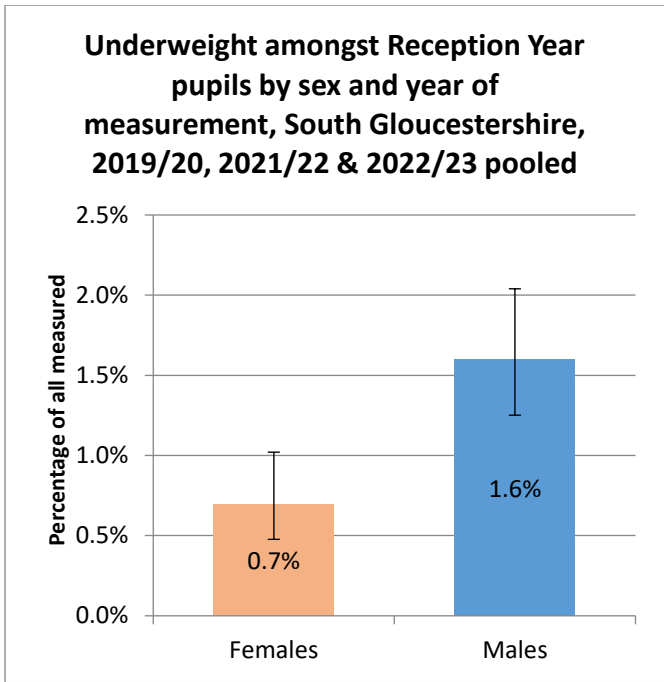


Figure 5

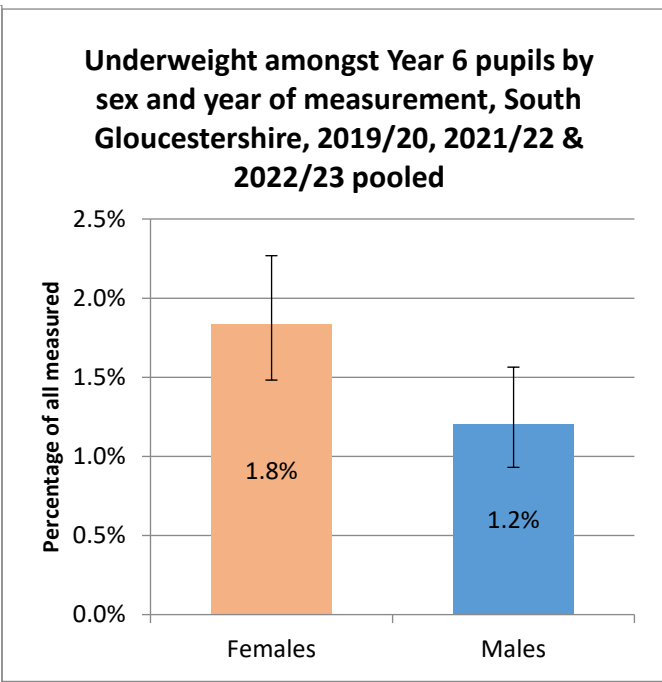


Figure 6

Ethnicity

Due to the small number of children recorded as underweight, there are limitations to how much we can explore variations and detect meaningful differences within this group. The exception is in the Asian ethnicity where we do see a higher prevalence of underweight at both reception and year 6, compared to the total South Gloucestershire population.

This is consistent with national NCMP data, which shows a higher prevalence of underweight among Asian ethnicities. ([Part 3: Ethnicity - NHS England Digital](#))

Deprivation

As with ethnicity, due to the small number of children recorded as underweight, there are limitations to how much we can explore variations and detect meaningful differences within this group. Analysis of underweight prevalence by area deprivation does not show any variation.

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