

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Atal iechyd gwael - gordewdra](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Prevention of ill health - obesity](#)

OB12 : Ymateb gan: Age Cymru | Response from: Age Cymru

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## **Prevention of Ill Health – Obesity**

### **Inquiry response**

**June 2024**

### **Introduction**

Age Cymru is the leading national charity working to improve the lives of all older people in Wales. We believe older people should be able to lead healthy and fulfilled lives, have adequate income, access to high quality services and the opportunity to shape their own future. We seek to provide a strong voice for all older people in Wales and to raise awareness of the issues of importance to them.

We are pleased to provide evidence for this inquiry as we believe the steps needed to reduce obesity would be of great benefit to older people. Though people aged 65 and over are less likely to be obese than those in younger age groups, the increasing rates of obesity will impact future generations of older people. When coupled with increases in reduced mobility for older people living with ill health, tackling obesity would be more difficult to reverse, and so we welcome improvements in this area. With an ageing population it is vital that the needs of older people are considered in tackling obesity.

With reduced mobility comes an increase in prevalence of obesity, so it is important that this inquiry has a focus on how the barriers older people face in accessing health care are holistically considered.

### **The impact of social and commercial determinants on obesity**

The 2020 [Wales Statistical Bulletin](#) on adult lifestyles shows people aged 65+ are less likely to be active for over 150 minutes a week and more likely to be active for less than 30 mins/week than other age groups.

Though increasing mobility issues and illness mean it is difficult for older people to be active, there are many external factors that are a barrier to being active for older people. Age Cymru's [Community Calculator survey](#) in 2018/19 assessed how age

friendly communities are. A truly age friendly community empowers people of all ages with facilities that help people enjoy health, wellbeing and quality of life. Being able to get out and about is a key element in reducing obesity rates. Key elements of the community calculator relevant to obesity include having services locally, good public transport, access to public toilets, public seating and places to rest, places to meet and good quality pavements. A lack of these is a barrier to older people getting out of their house and exercising as part of their daily routines. Our community calculator found little improvement over the 2010 survey. Public toilets, pavements and public seating and places to rest were given low scores by older people.

Age Cymru's [Why are we still waiting? delays in access to social care](#) for older people reports detail the impact on older people. Our forthcoming 2024 report finds that social care departments across Wales are looking at providing better community and locality based opportunities for older people and their carers. We heard from one local authority who are looking at how the erosion of public transport is affecting people's access to community hubs that are a vital source of information, advice and support. Without services, transport and wider planning being better joined up, older people's ability to be active is an increasing barrier.

Increasing activity contributes to reducing obesity levels so it is important that there is an increased focus by public and private services on the creation of age friendly communities.

### **People's ability to access appropriate support and treatment services for obesity**

Our forthcoming 2024 survey with over 1300 people across Wales shows increasing numbers of older people struggling to get face to face GP appointments. 34.5% told us it was 'difficult' or 'very difficult' to make healthcare. For those that completed paper surveys and are more likely to be digitally excluded, difficulties in access increase slightly (35%). GP surgeries have a range of leaflets, information and phone numbers for help and self-referral to earlier intervention and preventative services. Without such physical prompts available through remote access to care, opportunities are being lost for people to have the knowledge that help is available.

With the erosion of face to face appointments that began during the pandemic which have continued afterwards, older people's confidence to talk about their health issues that contribute to obesity has been eroded. The [report from the Older People's Commissioner for Wales](#) details how difficult it is for older people to comply with medical advice because of a lack of join up between various health services.

A particular area of concern is the transport barriers older people experience in getting to appointments with health professionals. Older people are less likely to drive and so can rely on lifts from friends and family or public transport. In our latest annual survey, we heard many frustrations from older people on reductions and cancellations of bus services that make it difficult or impossible to get to appointments. Some are resorting to using expensive taxis to access necessary

health care. It is vital that support is available close to people's homes to reduce barriers to access.

Consideration must be given on improving how health services communicate with each other and whether there are sufficient resources to reduce barriers to access to health care and preventative services.

## **The relationship between obesity and mental health**

More than 1 in 5 respondents to the Age Cymru 2024 annual survey reported being in a state of 'poor' or 'very poor' mental health.<sup>1</sup> Of these responses, many linked their mental state to inactivity, often brought on by physical disability or long-term illness. Similarly, many of those who reported being in 'good' or 'very good' mental health believed that an active lifestyle played a key role.

It is widely understood that there is a close link between poor mental health, physical inactivity and obesity.<sup>2</sup> Mental health conditions such as depression can often lead to inactivity, which increases the likelihood of obesity, which in turn can affect both a person's mental health and their ability to live an active lifestyle. Similarly, people experiencing long-term illnesses or disabilities may find that they are less able to live an active lifestyle, resulting in an increased risk of both obesity and poor mental health.

We are therefore concerned that many older people in Wales are experiencing the cyclical effect of poor mental health, inactivity and obesity. Any attempt to address obesity as a societal issue should thus also consider its close links to physical inactivity and poor mental health, as these three factors are inextricably linked and should be addressed holistically, rather than as individual problems.

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<sup>1</sup> Age Cymru, 'What matters to you? Current experiences of people aged 50 or over in Wales – 2024' [currently unpublished]. Our previous surveys can be found here: [Age Cymru - What Matters to You](#)

<sup>2</sup> World Health Organization, 'Global status report on physical activity 2022', 19 October 2022.

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