

# At home

We encourage all parents to send in healthy snacks and packed lunches for their child where appropriate. We also stress the importance of children receiving nutritional meals before and after school to help sustain their diet, and if possible include the child in the preparation or buying of foods.

Along with diet physical activity is a very important role in keeping children healthy.

There are a range of clubs run outside school which provide regular physical activity, the main one of which Special Olympics East Herts which offers:

- ◆ Athletics
- ◆ Basketball
- ◆ Boccia
- ◆ Dance
- ◆ Fitness
- ◆ Football
- ◆ Golf
- ◆ Hockey
- ◆ Netball
- ◆ Swimming



Along side these clubs it is important to spend time with your children doing outside activities such as; going on a walk, going to the park, swimming etc.

Change for life

Whoever we are,



whatever we do,



We can get better

In the context of our own ability

# Obesity Linked With Disability



Amwell View School and  
Specialist Sports College

For more information please visit:

<https://www.gov.uk/government/news/obesity-and-disability-children-and-young-people>

<http://www.specialolympicseastherts.org/>

<http://www.nhs.uk/livewell/goodfood/Pages/Goodfoodhome.aspx>



## Why are children with disability at greater risk

'Children and young people with disabilities are more likely to be obese than children without disabilities and this increases with age' (Gatineau, 2014, Public Health England).

Research has shown that both boys and girls aged between 2-15 with a limiting long-term illness are significantly more likely (35%) to be obese than those without a limiting long-term illness.

The risk of obesity among children and young people with disabilities may be related to personal factors such as genetic or metabolic complications, or use of medications with a side-effect of weight gain. However, one of the main factors is poor or unusual dietary patterns. For example, children with autism may be averse to certain textures, flavours, colours leading them to eat a limited range of foods.



Another major factor is lack of physical activity, where there are a number of reasons for non participation by children. For example, lack of physical and social skills, the child's preference, fear and lack of knowledge about exercise, parental behaviour, negative societal attitudes to disability, inadequate facilities, lack of transport, lack of programmes, lack of staff capacity and cost.

## Disability- Related Obesity

### Learning Disabilities-

Obesity represents a significant secondary health problem among young people with learning disabilities. Research has found that children with developmental delay were significantly more likely to be obese than those without.

### Prader Willi Syndrome-

Is associated with learning disabilities and typically causes a chronic feeling of hunger that can lead to excessive eating.

### Down's Syndrome-

Is a genetic condition that typically causes some level of learning disability. Research has shown that young people aged between 12-18 with Down's syndrome had greater risk of being overweight (55% compared to 28.8%).

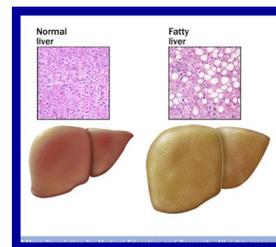
### Physical Activity Limitations-

Research has found that children aged 6-17 with health problems that limit their ability to walk, play or run, were significantly more likely to be overweight than those without physical activity limitations (29.7% versus 15.7%)

## The effects of obesity

Whether or not children and young people have disabilities, those who are obese are at greater risk for developing chronic health conditions compared to their healthy weight counterparts. This can mean that young people with disabilities face external health challenges in addition to those associated with the health conditions or impairments primarily associated with their disability. Childhood obesity has been linked to a number of secondary health problems including: hypertension, dyslipidaemia, type 2 diabetes, fatty liver disease, sleep apnoea, asthma and psychosocial disorders.

Obesity-related conditions can add to the medication and equipment needs of children with disabilities, which may also result in additional healthcare costs.



## At school

### Healthy menu

It is important to offer our children healthy options at snack time, such as fruit. We also create our own menu which enables us to provide our students with nutritional meals, ensuring a balanced diet.

### PSHE

PSHE is used as an effective time to promote the importance of healthy eating and regular exercise as well as washing regularly.

### Fitness suite

We have a fitness suite on the school site. This is used by whole classes and individuals with a fitness programme.

The fitness suite has a BMI machine to help keep track of the pupils weight, height and BMI.

### Health and Wellbeing Assistants

Amwell has two Health and Wellbeing TA's, who's role it is to focus on encouraging health and wellbeing to the students, in particular those who are overweight or don't enjoy sport as much. They look at alternative ways of exercise, finding a positive state of physical and mental wellbeing and healthy eating.

### Lessons and clubs

During the school week our pupils participate in PE, swimming, dance and food tech lessons, all of which help give them an understanding of a healthy lifestyle through being active and healthy eating.

There are also lunchtime and after school clubs which allow our pupils to socialise, get involved in something they enjoy and be active, such as; boccia, football, health and wellbeing, cooking, dance and swimming club.