UNIVERSITY^{OF} BIRMINGHAM

Effectiveness and cost-effectiveness of The Daily Mile on childhood weight outcomes and wellbeing

Peymane Adab Professor of Public Health



- What is the Daily Mile
- Why evaluate
- The Birmingham Daily Mile evaluation
- Discussion of findings

THE DAILY MILE

Started in Scottish school to improve children's fitness Also reported to improve:

well being

Motivate through

autonomy

- social interaction
- concentration levels

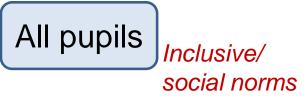
own pace

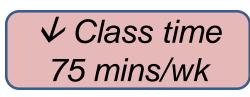
when/how

reduce obesity



15 mins (~1mile) In school uniform Capability/ competence Free?





UK CHILDHOOD OBESITY PLAN CHAPTER 2 (JUNE 2018)



New measures to halve the number of obese children by 2030 have been announced by Health and Social Care Secretary Jeremy Hunt.

Published 24 June 2018 From: Department of Health and Social Care



Schools included as having important role:

HM Government

Chapter 2

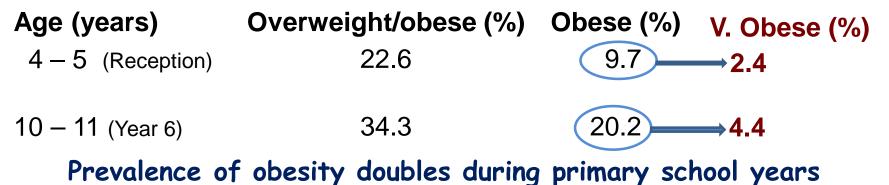
Childhood obesity: a plan for

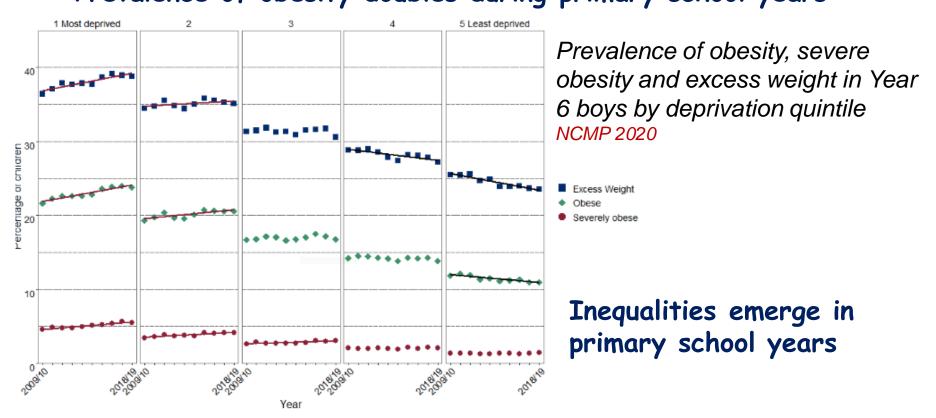
"...we will promote a national ambition for every primary school to adopt an active mile initiative, such as the Daily Mile."

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/718903/childhood-obesity-a-plan-for-action-chapter-2.pdf

Childhood overweight/obesity in UK

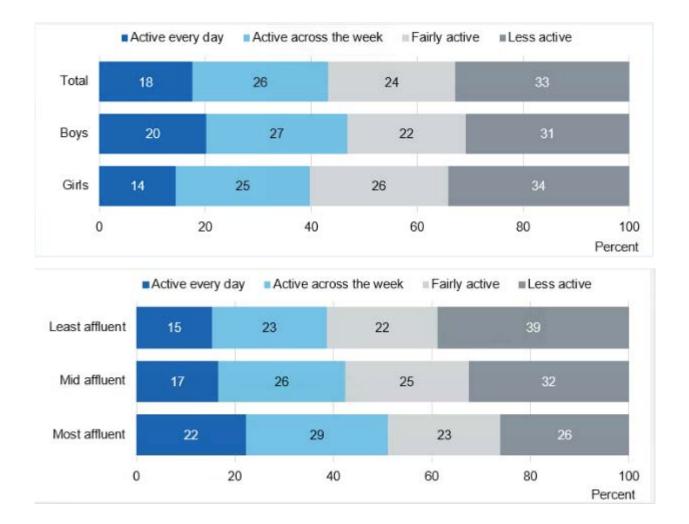
Prevalence (National Child Measurement Surveillance Programme)





Significant upward linear trends are indicated with a red line and downward linear trends are indicated with a black line

Physical activity levels in UK children, 2018



Only 18% meet CMO guidelines (> 60 mins PA every day)

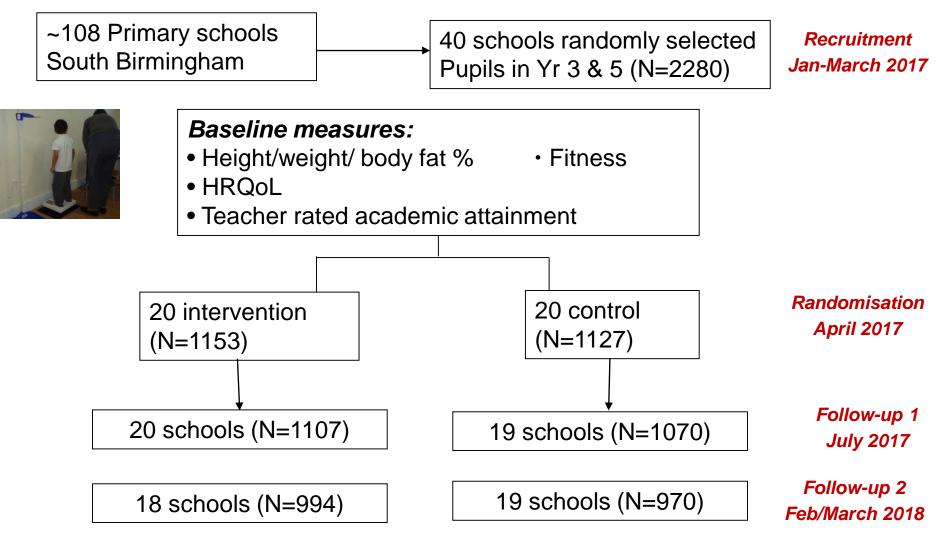
Source: Sport England: Active Lives Children and Young People Survey 2017/18

Prior evidence

Numerous trials and systematic reviews

- Love (Obes Rev, 2019)
- 25 RCTs (17 in meta-analysis)
- School based PA interventions /objective measures of PA
- No evidence of effectiveness
- Brown (Cochrane Review, 2019)
- Review of obesity prevention in children (6-12yrs)
- 14 RCTs (16,410 participants): PA interventions vs control reduce BMI (MD –0.10kg/m²)
- 8 RCTs (6841 participants): PA interventions vs control has no effect on zBMI (MD –0.02)
- Brown (Obes Rev, 2008)
- 38 trials, obesity prevention narrative review
- School PA intervention may be effective in girls

Birmingham Daily Mile Evaluation cluster RCT (2017-18)



Baseline Characteristics

Characteristics	Intervention	Control	
Female	549 (47.6)	534 (47.5)	
Male	604 (52.4)	591 (52.5)	
Mean (SD) age (years)	8.8 (1.1)	8.8 (1.0)	
White British	614 (53.3)	559 (50.0)	
South Asian	186 (16.2)	183 (16.3)	
Black African Caribbean	88 (7.6)	103 (9.2)	
Other/not specified	264 (22.9)	279 (24.8)	
Deprivation quintile: 1 (most deprived)	575 (49.9)	621 (55.1)	
2	459 (39.8)	169 (15.0)	
3	59 (5.1)	222 (19.7)	
4	60 (5.2)	58 (5.2)	
5 (least deprived)	0 (0.0)	57 (5.1)	
Mean (SD) BMI z score	0.37 (1.2)	0.38 (1.2)	
Quality of life and Wellbeing			
CHU-9D utility score: Mean (SD)	0.833 (0.2)	0.838 (0.2)	
Overall academic attainment score: Mean (SD)	7.1 (3.2); n=626	7.3 (3.2); n=625	

At randomisation (pre-intervention), characteristics well balanced

BMIz		Mean difference (95% CI), P value
Time point	No of participants	Intervention v control (adjusted)
4 months	Intervention n= 911 Control n=732	-0.056 (-0.103 to -0.009), 0.02
12 months	Intervention n= 850 Control n=820	-0.033 (-0.084 to 0.017), 0.20
	Girls	-0.094 (-0.158: -0.031); 0.01
	Boys	0.027 (-0.040: 0.093); 0.54



Merritts Brook @MerrittsBrook · Feb 2 Year 6 have been using maths in a variety of ways today. Firstly, they calculated the total steps each classmate did during Run a Mile using the pedometers. Following that, they then worked in teams to solve complex clues as part of a





Our daily mile @S4EHES is really helping Hollywood children run further more comfortably at @WH_FunRun part 3



Follow



Tiverton Academy

Follow

DElliotFndtn @ShirestoneAcad @S4EHES DBCCEducation @Anfieldexile Fun in the Sun s Y2 #runamile #enjoy #healthy





Other findings

	Adjusted Mean difference (95% CI) Intervention v control				
Outcomes:	4 months	Р	12 months	Р	
		value		value	
Body fat %					
	-0.18 (-0.61 to 0.24)	0.40	-0.01 (-0.42 to 0.40)	0.97	
CHU-9D utility score					
	N/A		0.01 (-0.02 to 0.04)	0.50	
MDI Wellbeing Index					
score					
	N/A		0.557 (-2.15 to 3.27)	0.69	

Large amount of missing values for fitness and academic outcomes (teacher measured)

- Overall, no significant difference between groups for other outcomes.
- In pre-specified subgroup analyses, effects were favourable for girls only

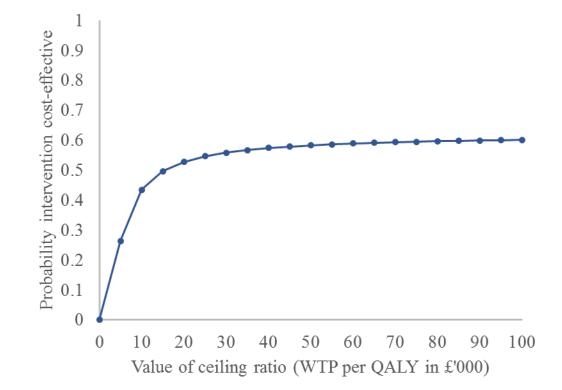
Cost-effectiveness

- Intervention costs ~£48.33 / child
- Overall there was a small gain in QALY (0.006 (95% CI: -0.005 to 0.018)
- ICER £7,455.21 per QALY gained (cost-effective using UK thresholds)

Cost-effectiveness

Using £20,000/ QALY:

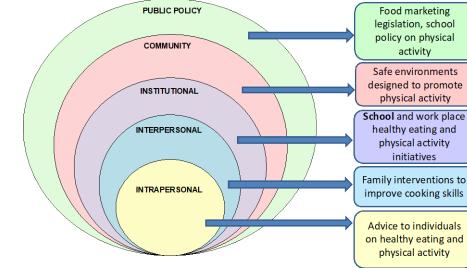
- 76% probability that Daily Mile is cost-effective
- Cost-effectiveness higher in girls (ICER £2,492 per QALY, 97% probability of cost-effectiveness)
- Low in boys: 12% chance of cost-effectiveness



Cost-effectiveness acceptability curve

Conclusions

- Daily Mile is a simple, whole school intervention, supported by the Government
- Some schools engage well and deliver this (others lack enthusiastic support)
- Enthusiasm is not always sustained
- Overall, the Daily Mile has a very small, non-significant effect on weight status at 12 months (compared to no intervention), and likely cost-effective.
- No evidence of harm on academic outcomes
- The effect is likely to be higher in girls (may be ineffective in boys)
- Schools are complex systems interventions need to be adapted to local context; RCTs should consider process of implementation (not just components)
- Schools only part of the solution: complex problem needs prevention at multiple levels



Acknowledgments



Co-investigators:

UoB: Emma Frew, Katie Breheny, James Martin, Emma Lancashire, Karla Hemming **Services for Education**: Sandra Passmore

Funding: Birmingham City Council