

Excess Weight in Childhood: National Child Measurement Programme, 2024/25

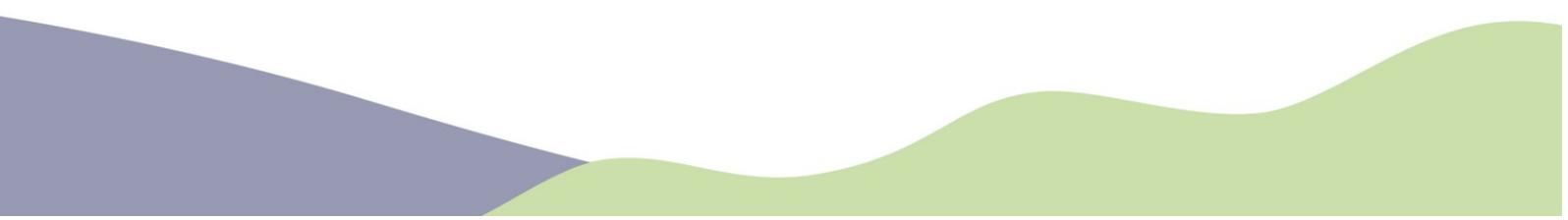
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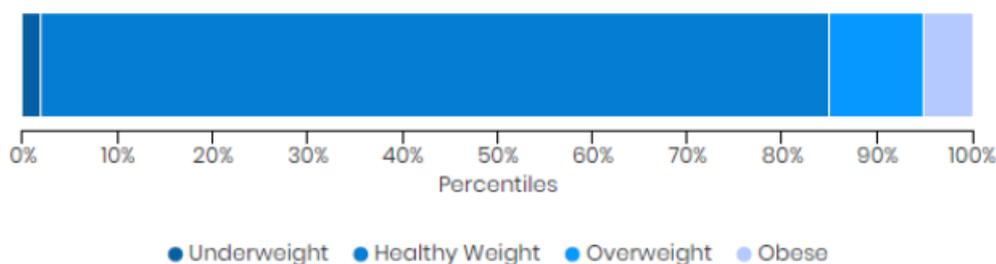
Overview

The National Child Measurement Programme (NCMP) for England is an annual record of height and weight measurements of children in state-maintained schools in reception (aged 4-5 years) and year 6 (aged 10-11 years)¹. The programme was launched in 2005/06 and now holds a robust dataset covering the 2006/07 to 2024/25 school years. Measurements from special schools and independent schools are excluded from the analysis; in West Sussex, there are no measurements from these schools, and nationally they represent only 0.3% of the total cohort. The Office for health improvement and disparities (OHID) published the most recent release in November 2025².

The NCMP provides robust data for the child excess weight indicators in the Public Health Outcomes Framework and is a key element of the Government's approach to tackling child obesity.

The NCMP uses the British 1990 (UK90) growth reference to assign each child a body mass index (BMI) centile whilst taking into account weight, height, age and gender. They are grouped using the following thresholds:

- **Underweight:** up to the 2nd BMI centile
- **Healthy weight:** between the 2nd and 85th BMI centile
- **Overweight:** between the 85th and 95th BMI centile
- **Obese:** at or above the 95th BMI centile
- **Overweight and obese combined:** combined data of children measured overweight or obese.



The population monitoring cut offs for overweight and obesity are lower than the clinical cut offs (91st and 98th centiles for overweight and obesity) used to assess individual children. This is to capture children in the population in the clinical overweight or obesity BMI categories and those who are high risk of moving into the clinical overweight or clinical obesity categories. This helps ensure that adequate services are planned and delivered for the whole population.

This briefing summarises the recent child weight figures that were released by OHID in November 2025 and uses the population cut off. Data are available at national, regional, and local authority level and are derived from the postcode of the child residency (unless stated otherwise).

¹ [National Child Measurement Programme \(NCMP\) annual report, academic year 2024 to 2025, England - GOV.UK](#)

² [Obesity, physical activity and nutrition | Fingertips | Department of Health and Social Care](#)

Why is it important to monitor child weight?

Rates of overweight and obesity continue to rise among both adults and children. In England in 2022, around 29% of adults were living with obesity, and 64% were either overweight or living with obesity³. Among children aged 2 to 15, the prevalence of obesity was 15%, while the prevalence of overweight (including obesity) reached 27%³.

Globally, the pattern is similar. Between 1990 and 2022, the proportion of children and adolescents aged 5 to 19 years living with obesity increased fourfold, rising from 2 % to 8 %¹. Over the same period, the proportion of adults aged 18 years and older living with obesity more than doubled, increasing from 7 % to 16 %. These trends highlight the growing global burden of obesity across all age groups⁴. It is estimated that more than 107 million children worldwide are affected by obesity, and in high income- countries the prevalence of paediatric obesity now exceed 20%⁵.

Monitoring child weight is essential because obesity in childhood is associated with a wide range of negative health and emotional outcomes, including increased risk of bullying, low self-esteem and poor body image, as well as early development of long-term conditions such as type 2 diabetes and cardiovascular disease². Evidence shows that younger generations are becoming obese earlier and remaining obese for longer, which increases the likelihood of carrying excess weight into adulthood and experiencing premature mortality⁶. Although underweight status is not always a cause for concern, low weight in childhood can sometimes indicate underlying medical conditions, emotional or behavioural difficulties⁷, or wider safeguarding issues at home, highlighting the importance of early identification and support. Regular measurement through programmes such as the NCMP enables schools, local authorities and health professionals to identify trends, target resources effectively and develop interventions that support healthy weight from an early age. Ultimately, consistent monitoring helps to protect children's current wellbeing while reducing the risk of serious health problems later in life.

³ [Health Survey for England, 2022 Part 2 - NHS England Digital](#)

⁴ <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>

⁵ Haqq AM, Kebbe M, Tan Q, et al. *Complexity and Stigma of Paediatric Obesity*. Child Obes. 2021 Jun;17(4):229-240. doi: 10.1089/chi.2021.0003. Epub 2021 Mar 29. PMID: 33780639; PMCID: PMC8147499.

⁶ Horesh A, Tsur AM, Bardugo A, et al. *Adolescent and Childhood Obesity and Excess Morbidity and Mortality in Young Adulthood*. Curr Obes Rep. 2021. <https://doi.org/10.1007/s13679-021-00439-9>

⁷ Donkor HM, Toxe H, Hurum J, et al. *Psychological health in preschool children with underweight, overweight or obesity: a regional cohort study*. BMJ Paediatr Open. 2021 Mar 15;5(1):e000881. doi: 10.1136/bmjpo-2020-000881. PMID: 33817347; PMCID: PMC7970241.

Key points

Reception (4-to-5-year-olds):

- Around 22% of children were overweight or obese (excess weight) in West Sussex, equating to around 1,840 children.
- Prevalence of excess weight was **lower** in West Sussex (22.3%) than England (23.5%)
- Variation exists within the county - Arun had the highest prevalence of excess weight (27.5%), and Mid Sussex had the lowest (20.2%)
- Prevalence of excess weight among reception children has **increased significantly** in the latest time period (2024/25) compared to 2023/24 in West Sussex

Year 6 (10-to-11-year-olds):

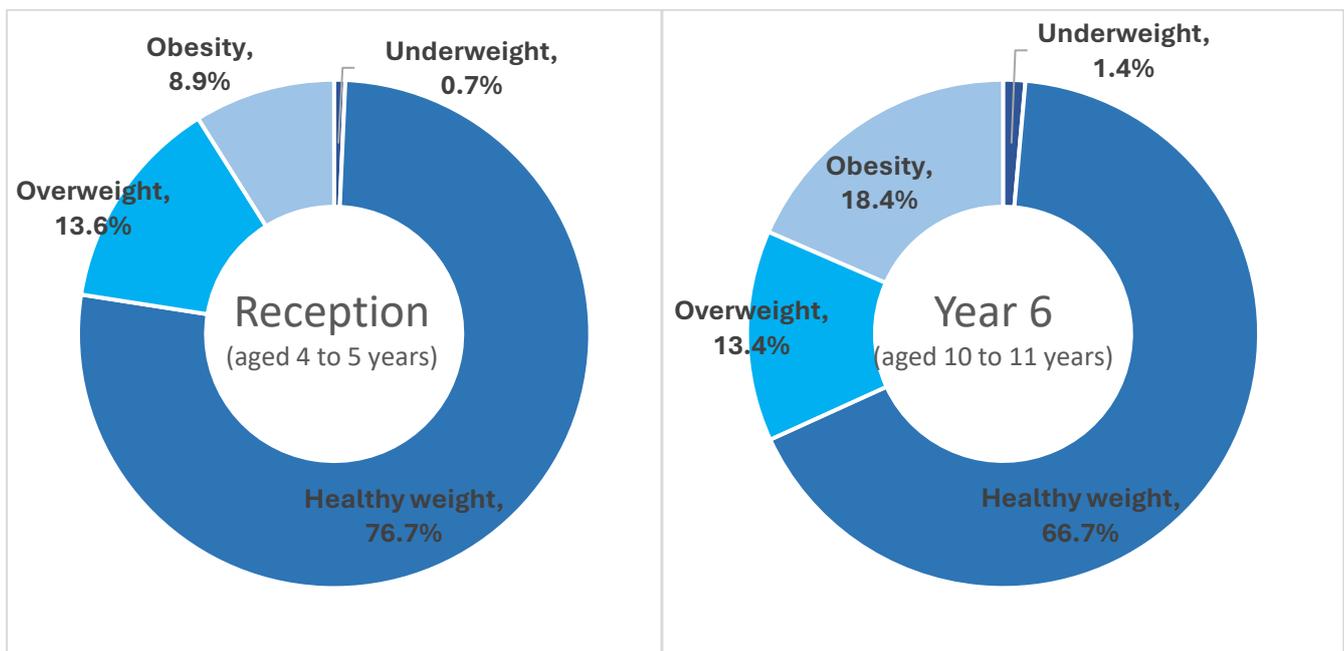
- 31.8% of Year 6 children were overweight or obese in West Sussex, equating to around 2,805 10–11-year-olds
- Prevalence of excess weight was **lower** in West Sussex (31.8%) than England (36.2%)
- Variation exists within the county - Crawley had the highest prevalence of excess weight (36.4% - **higher** than the county average), and Mid Sussex had the lowest (26.3% - **lower** than the county average)
- Prevalence of excess weight among children in Year 6 in West Sussex has **increased significantly** in the post pandemic period compared with pre-pandemic levels



BMI status (West Sussex)

In 2024/25, most children in West Sussex were a healthy weight: 76.7% in Reception and 66.7% in Year 6. Among Reception children, 0.7% were underweight, 13.6% were overweight, and 8.9% were living with obesity, including 2.1% in severe obesity. For Year 6, 1.4% were underweight, 13.4% were overweight, and 18.4% were living with obesity, with 3.9% in severe obesity. Obesity prevalence in Year 6 (18.4%) was more than twice that in Reception (8.9%), equating to approximately 1,620 children compared with 735 in Reception. Severe obesity also more than doubled from Reception to Year 6 (2.1% to 3.9%), and underweight prevalence was slightly higher in Year 6 (1.4%) than in Reception (0.7%). These figures highlight the growing challenge of excess weight as children progress through primary school.

BMI status of children by age in West Sussex: 2024/25



Source: National Child Measurement Programme (NCMP) 2024/2025 via OHID (Fingertips)

Reception (4- to 5-year-olds)

West Sussex comparison

Figure 1 shows that in 2024/25, approximately 22% of reception-aged children in West Sussex were overweight or obese, equating to around 1,840 children. The prevalence of excess weight in West Sussex (22.3%) was significantly lower than the England average (23.5%). Within the county, Adur recorded the highest prevalence at 27.5%, which is significantly worse than the national average, while Mid Sussex had the lowest at 20.2%. Overall, most local authorities in West Sussex had a lower or similar prevalence compared to England, with the exception of Arun, which was higher.

Figure 1, Reception prevalence of overweight (including obesity) in West Sussex: 2024/25

Area	Number of children	Number of children measured	Prevalence (%)	Lower CI	Upper CI	Versus England
Adur	120	560	21.4	18.6	25.5	Similar
Arun	365	1,325	27.5	25.0	29.8	Worse
Chichester	210	1,025	20.5	18.2	23.1	Better
Crawley	305	1,425	21.4	19.3	23.5	Similar
Horsham	280	1,325	21.1	19.1	23.5	Similar
Mid Sussex	320	1,585	20.2	18.3	22.3	Better
Worthing	240	995	24.1	21.6	27.0	Similar
West Sussex	1,840	8,240	22.3	21.5	23.3	Better
South East	20,035	89,605	22.4	22.1	22.6	Better
England	128,255	545,589	23.5	23.4	23.6	Not compared

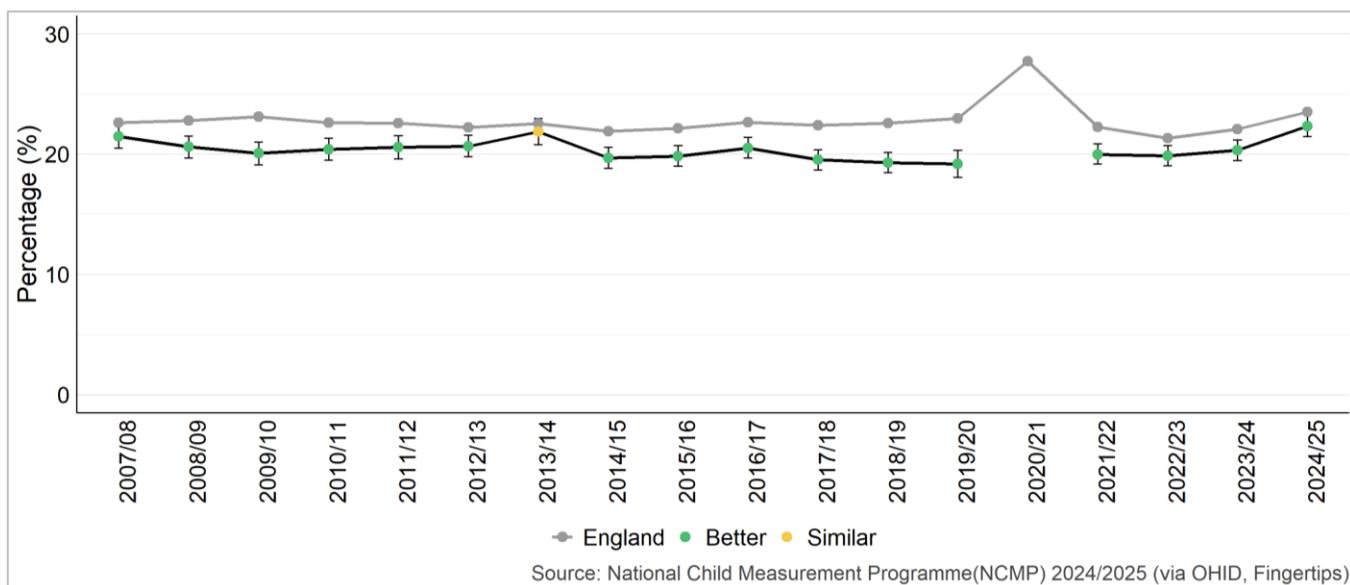
Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips)

West Sussex Trend

Prevalence of excess weight among reception-aged children in West Sussex has remained broadly stable over time; however, in the latest year (2024/25) it increased significantly to 22.3% (figure 2). Despite this rise, prevalence in West Sussex continues to be significantly lower than the England average. Nationally, the sharp increase in excess weight observed in 2020/21 coincided with the COVID-19 pandemic^{8,9}; however, this estimate is derived from weighted data based on a sub-set of the cohort, which should be considered when interpreting the findings.

It is important to note that reception-aged children in West Sussex were not measured in 2020/21, so local trends for that year are unavailable.

Figure 2, Reception prevalence of overweight (including obesity) in West Sussex; 2007/08 to 2024/25



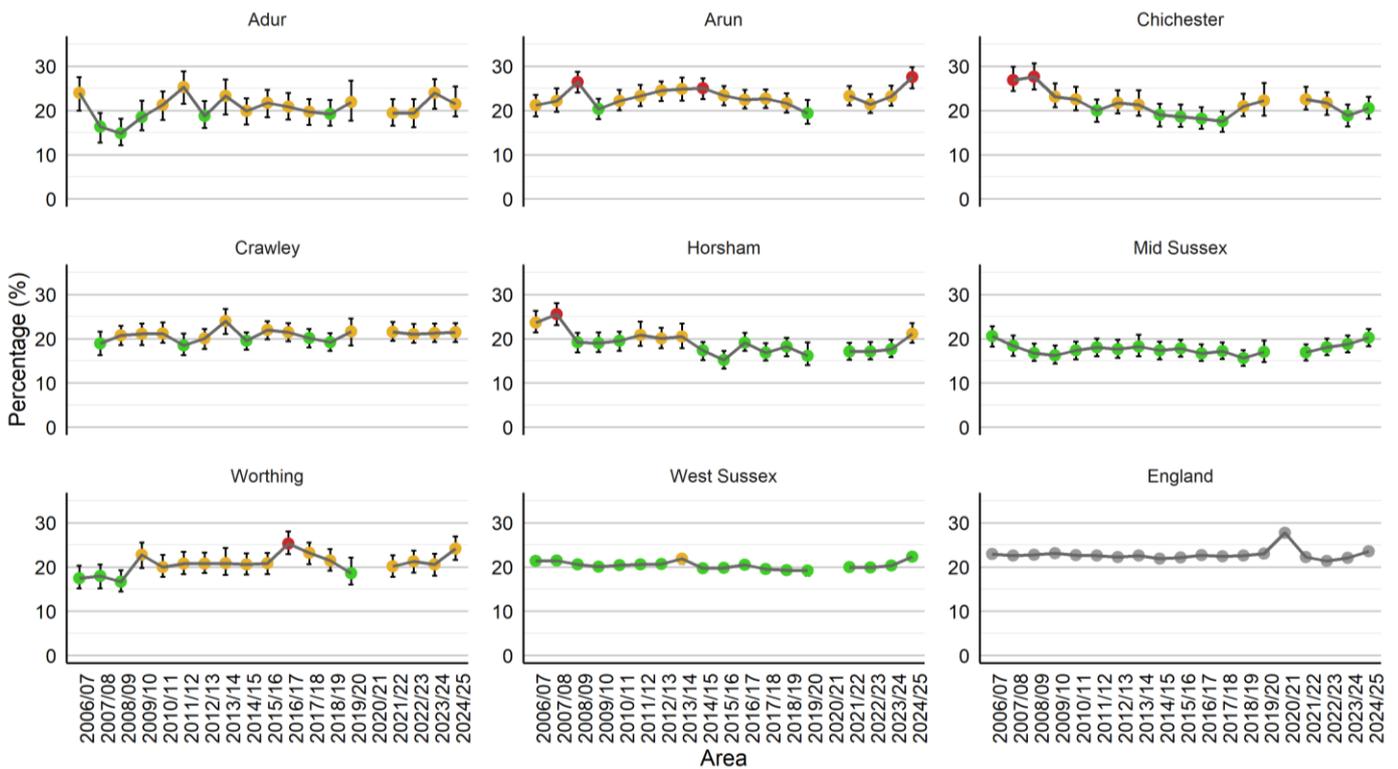
⁸ Fewer children were measured in 2019/20 (around 75% of usual sample) and 2020/21 (25% of usual sample) due to school closures.

⁹ [NCMP data for the 2020 to 2021 academic year by upper tier local authority: short statistical commentary - GOV.UK](#)

Local authorities trend

Across the districts and boroughs within West Sussex, the prevalence of excess weight among reception-aged children has remained broadly stable over the past five years, with no significant changes observed in any area. In the latest year, only Arun recorded a prevalence that was worse than the England average, while all other areas were similar to or better than England (figure 3).

Figure 3, Reception prevalence of overweight (including obesity) in West Sussex lower tier authorities; 2007/08 to 2024/25



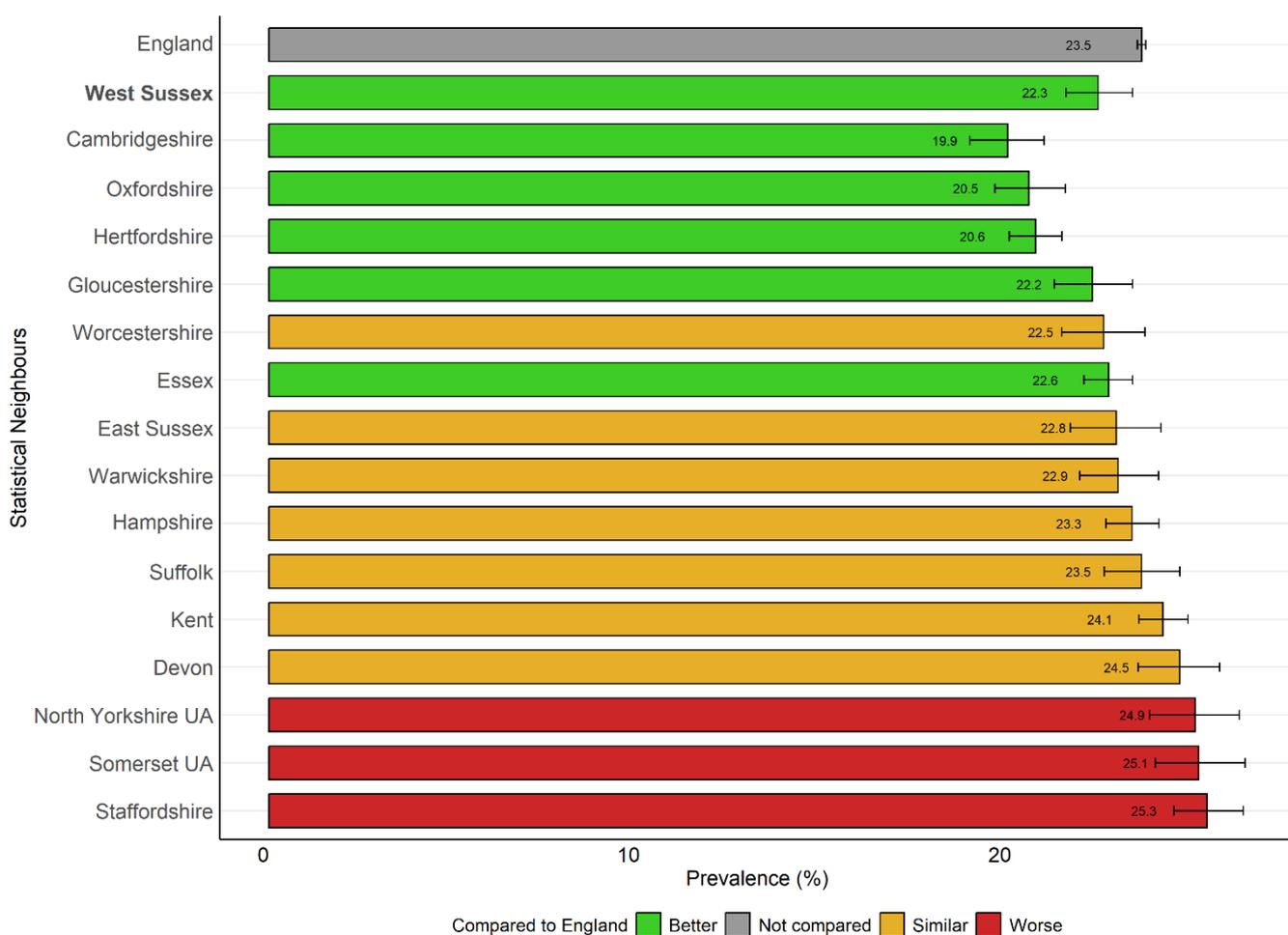
Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips)

Statistical neighbours

Statistical neighbours are local authorities that have been identified as having the most similar demographic, socioeconomic, and structural characteristics to one another, based on a statistical neighbour model¹⁰. These models use a set of comparable indicators (such as population size, levels of deprivation, age structure, and urban–rural composition) to determine which areas are most alike. The resulting group of matched authorities enables fair and meaningful benchmarking of performance, outcomes, and progress.

West Sussex continues to perform strongly compared to its nearest statistical neighbours. Figure 4 shows that in 2024/25, West Sussex recorded the fifth lowest prevalence of excess weight among children aged 4–5 years within this group. Prevalence among nearest neighbours ranged from 19.9% in Cambridgeshire to 25.3% in Staffordshire, positioning West Sussex towards the better-performing end of the spectrum.

Figure 4, Reception prevalence of overweight (including obesity) among West Sussex statistical neighbours: 2024/25



Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips)

¹⁰ Office for National Statistics (ONS), released 14 February 2025, ONS website, methodology, [Clustering similar local authorities and statistical nearest neighbours in the UK, methodology](#)

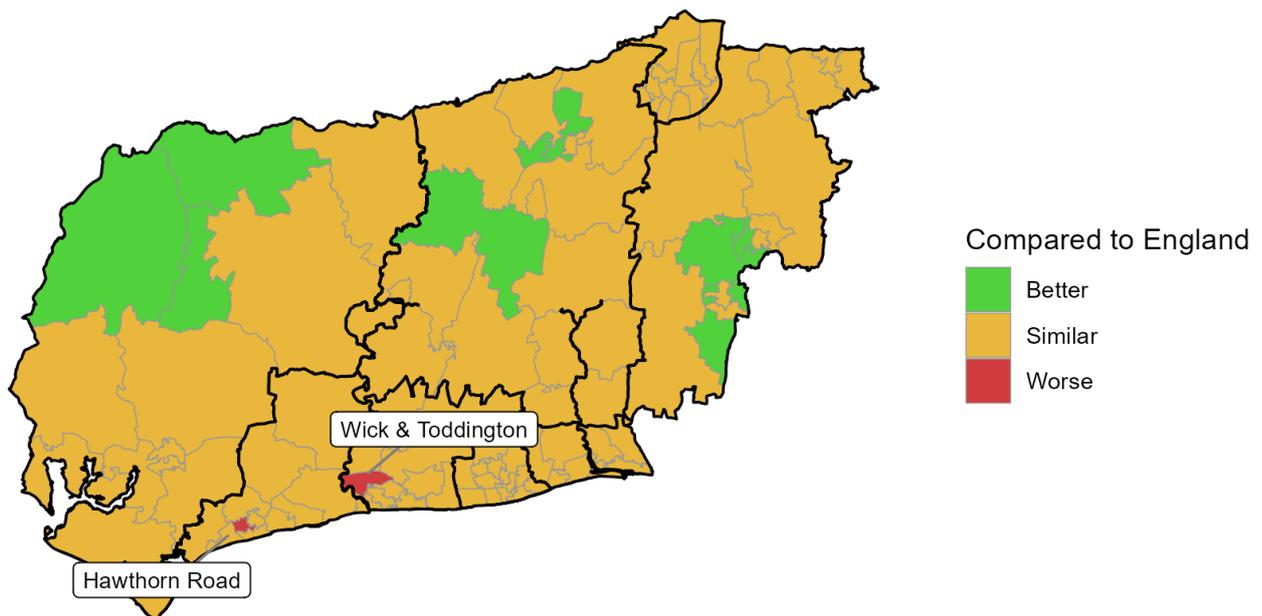
MSOAs

Prevalence of excess weight among children in reception varies within West Sussex. Figure 5 shows, in 2022/23 to 2024/25, two small areas (MSOAs) in West Sussex have a significantly higher prevalence of excess weight than England (22.3%). These areas all fall within Arun district and include:

- Hawthorn Road (32.6%)
- Wick & Toddington (27.6%)

In contrast, the small area with the lowest prevalence was Milland & South Harting (10.0%) in Chichester.

Figure 5, Reception prevalence of overweight (including obesity), 3 years data combined West Sussex MSOAs; 2022/23-24/25



Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips).

Year 6 (10- to 11-year-olds)

West Sussex comparison

In 2024/25, 31.8% of Year 6 children in West Sussex were overweight or obese, equating to approximately 2,805 children aged 10–11 years (figure 6). This prevalence was significantly lower than the England average of 36.2%. There is notable variation within West Sussex. Crawley recorded the highest prevalence in 2024/25 at 36.4%, which is above the county average, while Mid Sussex had the lowest at 26.3%, below the county average. Despite these differences, all local authorities in West Sussex have a prevalence of excess weight that is lower than or similar to the England average.

Figure 6, Year 6 prevalence of overweight (including obesity) in West Sussex: 2024/25

Area	Number of children	Number of children measured	Prevalence (%)	Lower CI	Upper CI	Versus England
Adur	215	670	32.1	29.0	36.1	Better
Arun	510	1,455	35.1	32.6	37.5	Similar
Chichester	330	1,025	32.2	29.3	35.0	Better
Crawley	560	1,540	36.4	34.0	38.8	Similar
Horsham	375	1,405	26.7	24.4	29.1	Better
Mid Sussex	440	1,675	26.3	24.3	28.5	Better
Worthing	375	1,060	35.4	32.6	38.3	Similar
West Sussex	2,805	8,825	31.8	30.8	32.8	Better
South East	31,505	96,360	32.7	32.4	33.0	Better
England	217,097	600,304	36.2	36.0	36.3	Not compared

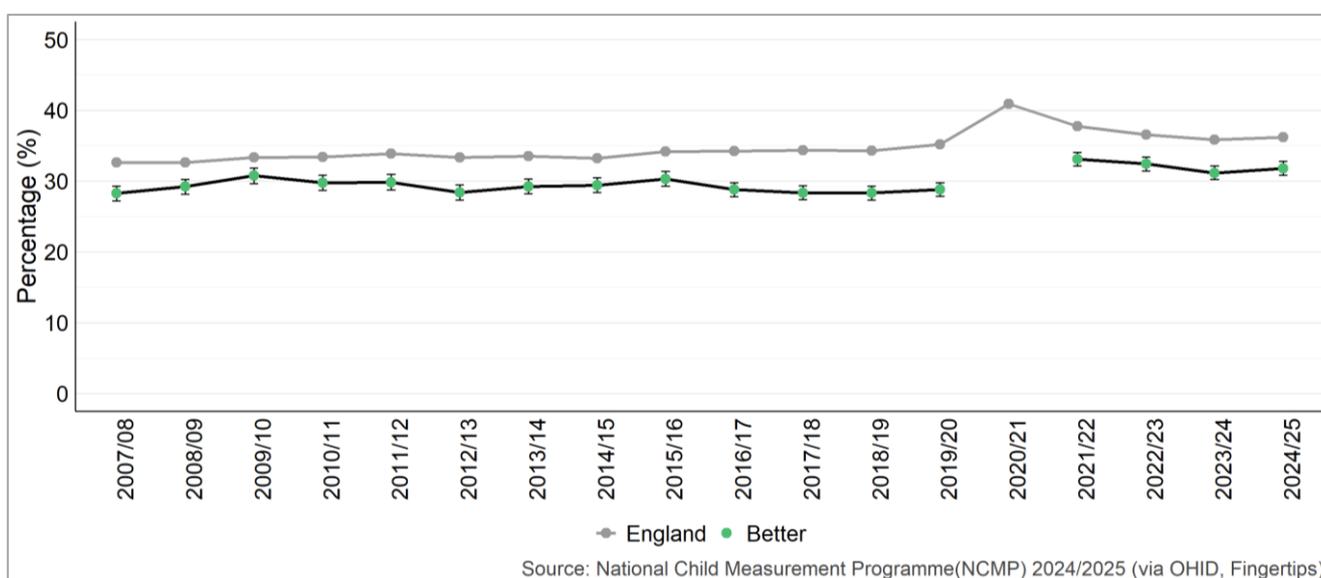
Source: National Child Measurement Programme(NCMP) 2024/2025 (via OHID, Fingertips)

West Sussex trend

Prevalence of excess weight among Year 6 children in West Sussex has increased over the past five years, although it remains significantly lower than the England average (figure 7). The national rise in prevalence during 2020/21 coincided with the COVID-19 pandemic^{11,12}; however, this estimate is derived from weighted data based on a sub-set of the cohort, which should be considered when interpreting the findings.

West Sussex achieved sufficient coverage for Year 6 pupils in 2020/21, with 91% participation. This participation rate, though high, is lower than pre-pandemic years where participation had been at 95% since the data collection in 2014 to 2015¹². During this year, 35.7% of Year 6 pupils were overweight or obese, representing a significant increase compared with the previous year, when prevalence was 28.8%; however, this change is not shown in figure 7 as local data was not reported nationally for the year 2020/21.

Figure 7, Year 6 prevalence of overweight (including obesity) in West Sussex; 2007/08 to 2024/25



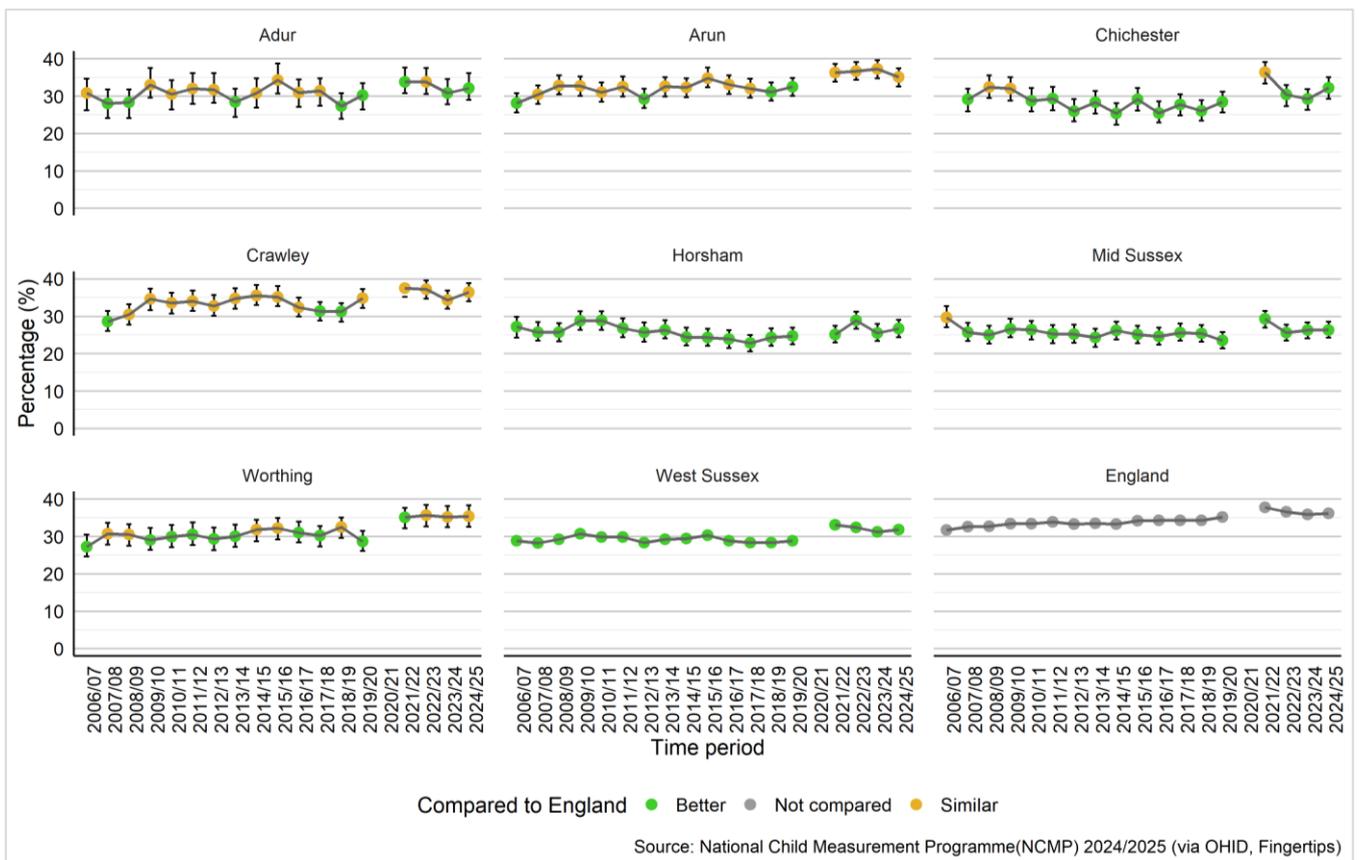
¹¹ Fewer children were measured in 2019/20 (around 75% of usual sample) and 2020/21 (25% of usual sample) due to school closures. Year 6 measurements were submitted for West Sussex in 2020/21, although are not presented in the figure.

¹² [NCMP data for the 2020 to 2021 academic year by upper tier local authority: short statistical commentary - GOV.UK](#)

Local Authorities trend

Prevalence of excess weight among Year 6 children varies across West Sussex districts (figure 8). Crawley consistently records the highest levels, reaching 36.4% in 2024/25, which is above the county average but, similar to England. Arun has shown an upward trend over time, with recent years also approaching England’s levels. In contrast, Mid Sussex and Horsham has the lowest prevalence, remaining around 26–28% and consistently better than England. Other areas, including Adur, Chichester, and Worthing, have shown relatively stable prevalence over time. Some areas experienced increases after the pandemic period, although the duration of these changes varies. For example, Mid Sussex showed only a temporary rise, whereas Worthing’s increase has persisted. Overall, most districts perform better than England, but variation persists within the county.

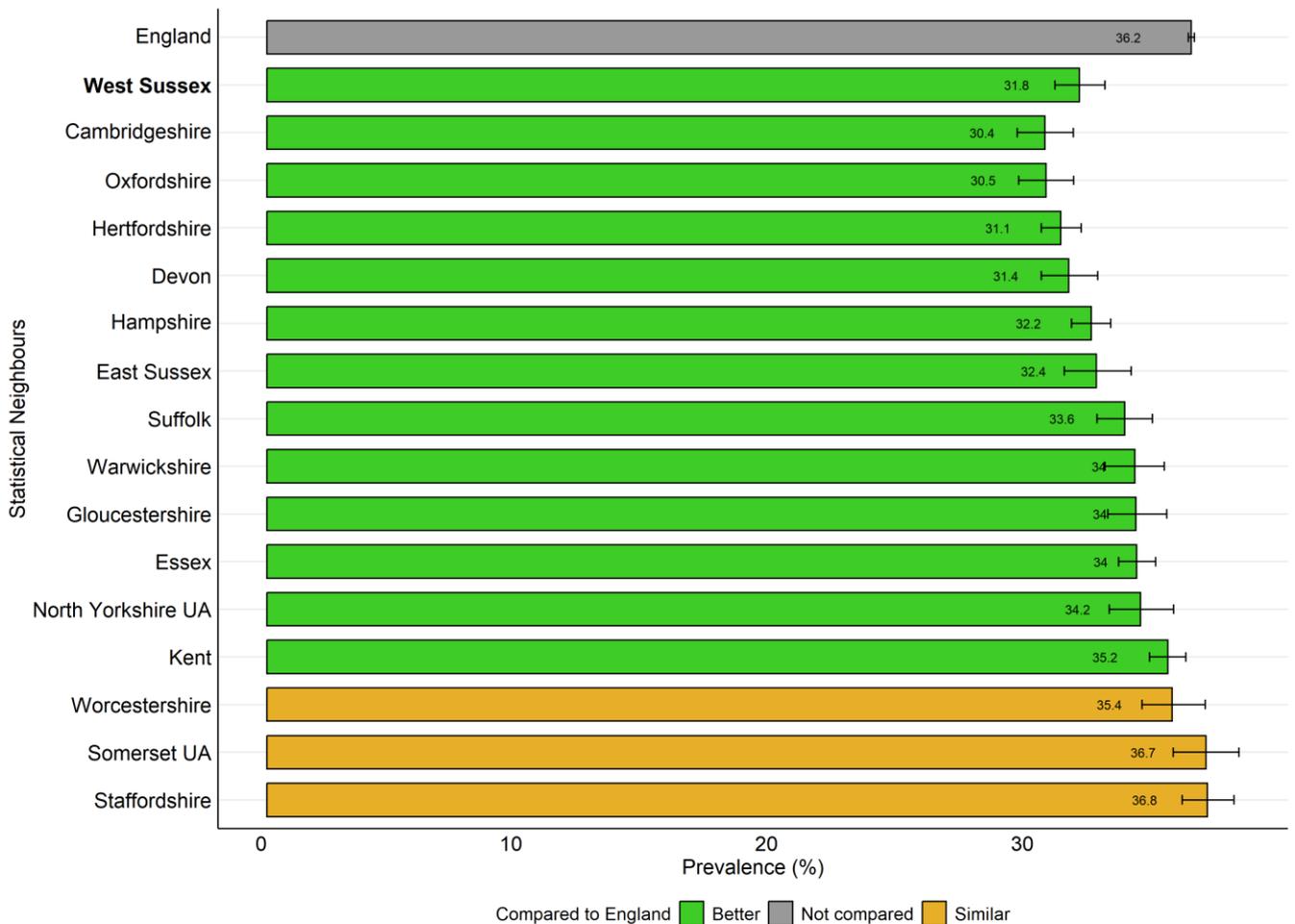
Figure 8, Year 6 prevalence of overweight (including obesity) in West Sussex lower tier authorities; 2007/08 to 2024/25



Statistical neighbours

West Sussex generally performs well when compared to nearest neighbours. Figure 9 shows, in 2024/25, West Sussex had the fifth lowest prevalence of excess weight among 10-11-year-olds when compared to nearest neighbours. Excess weight prevalence for nearest neighbours of West Sussex ranged from 30.4% (Cambridgeshire) to 36.8% (Staffordshire). Most nearest neighbours have a lower prevalence of excess weight among 10-11-year-olds than England.

Figure 9, Year 6 prevalence of overweight (including obesity) among West Sussex statistical neighbours; 2024/25



Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips)

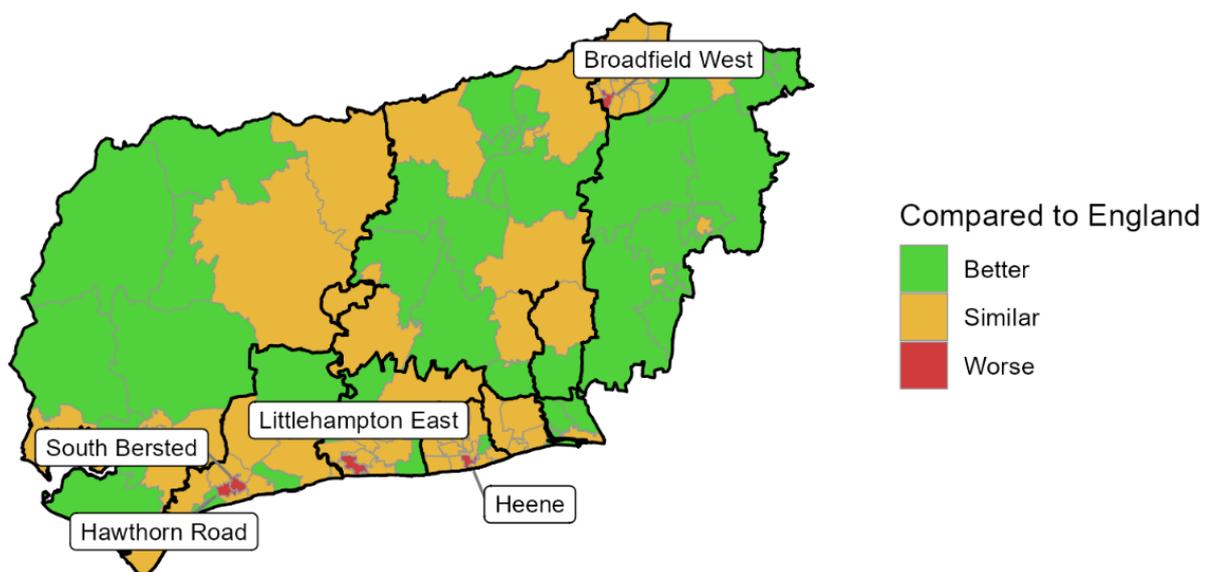
MSOAs

Prevalence of excess weight among Year 6 children varies significantly across West Sussex (figure 10). Between 2022/23 and 2024/25, five MSOAs recorded prevalence rates significantly higher than the England average (36.2%). These areas include:

- South Bersted (46.9%)
- Heene (44.1%)
- Littlehampton East (43.8%),
- Hawthorn Road (43.1%)
- Broadfield East (41.2%)

In contrast, the lowest prevalence was observed in Fernhurst and Northchapel at 17.8%.

Figure 10, Year 6 prevalence of overweight (including obesity), 3 years data combined West Sussex MSOAs: 2022/23 -2024/25



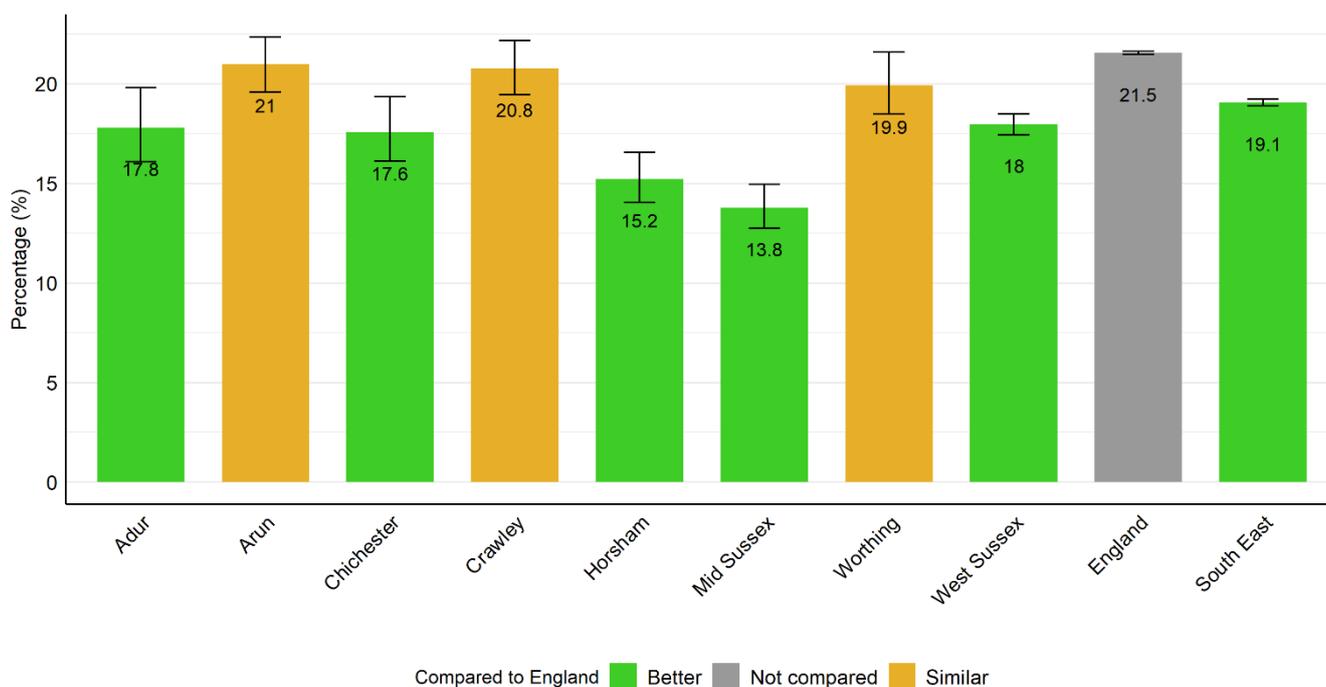
Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips).

Child BMI tracker

Healthy weight to overweight

There is concern about the rise of childhood obesity and the implications of obesity persisting into adulthood. The risk of obesity in adulthood and risk of future obesity-related ill health is greater as children get older. Studies tracking child obesity into adulthood have found that the probability of children who are overweight or living with obesity becoming overweight or living with obesity as adults increases with age ¹³. Between 2021/22 and 2023/24, the percentage of children moving from a healthy weight in reception to overweight or obese in Year 6 varied across West Sussex districts. England's rate was around 21%, while West Sussex overall was lower at 18%, performing better than England (figure 11). Mid Sussex (13.8%) and Horsham (15.2%) had the lowest transition rates, significantly better than England. In contrast, Arun and Crawley recorded the highest rates (around 21%), similar to England but above the county average. Other districts, including Adur, Chichester, and Worthing, were better or similar to England.

Figure 11, Percentage of children moving from healthy weight in reception to overweight (including obesity) in year 6; West Sussex lower tier authorities; 2021/22 -2023/24



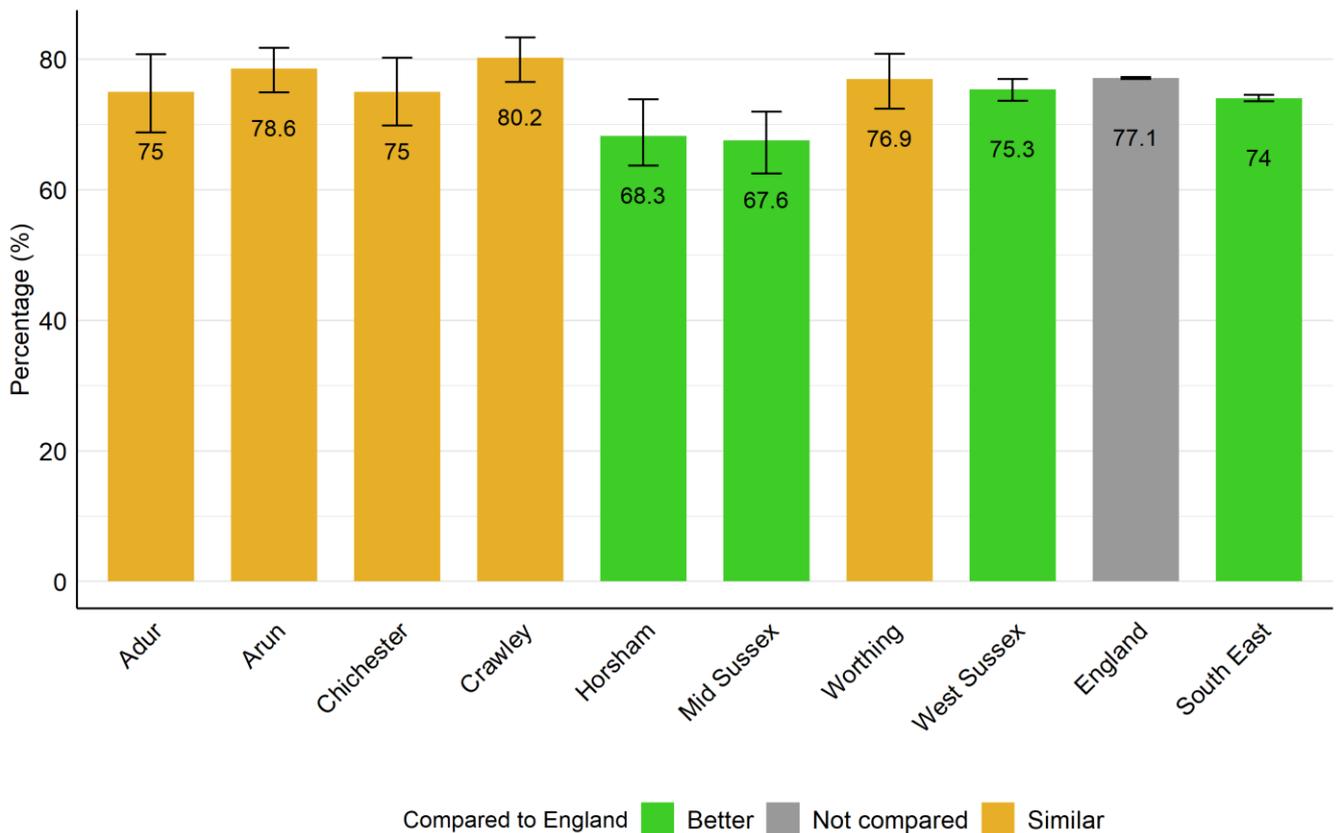
Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips)

¹³ Vidmar, S., Tomac, I., Jamnik, M., et al. (2021) *Tracking excess weight and obesity from childhood to young adulthood: a 12-year prospective cohort study in Slovenia*. **Public Health Nutrition**, 24(12), pp. 3715–3724. <https://doi.org/10.1017/S1368980021001296>

Remaining overweight

Between 2021/22 and 2023/24, the majority of reception children in West Sussex who were overweight remained overweight by Year 6, with rates varying across districts. England's rate was 77.1%, while West Sussex overall was slightly lower at 75.3%, performing better than England (figure 12). Horsham (68.3%) and Mid Sussex (67.6%) had the lowest persistence rates, significantly better than England. In contrast, Crawley (80.2%) and Arun (78.6%) recorded the highest rates, both similar to England and above the county average. Other districts, including Adur, Chichester, and Worthing, were similar to England.

Figure 12, Percentage of reception children remaining overweight (including obesity) in year 6: West Sussex lower tier authorities; 2021/22 -2023/24



Source: National Child Measurement Programme (NCMP) 2024/2025 (via OHID, Fingertips)

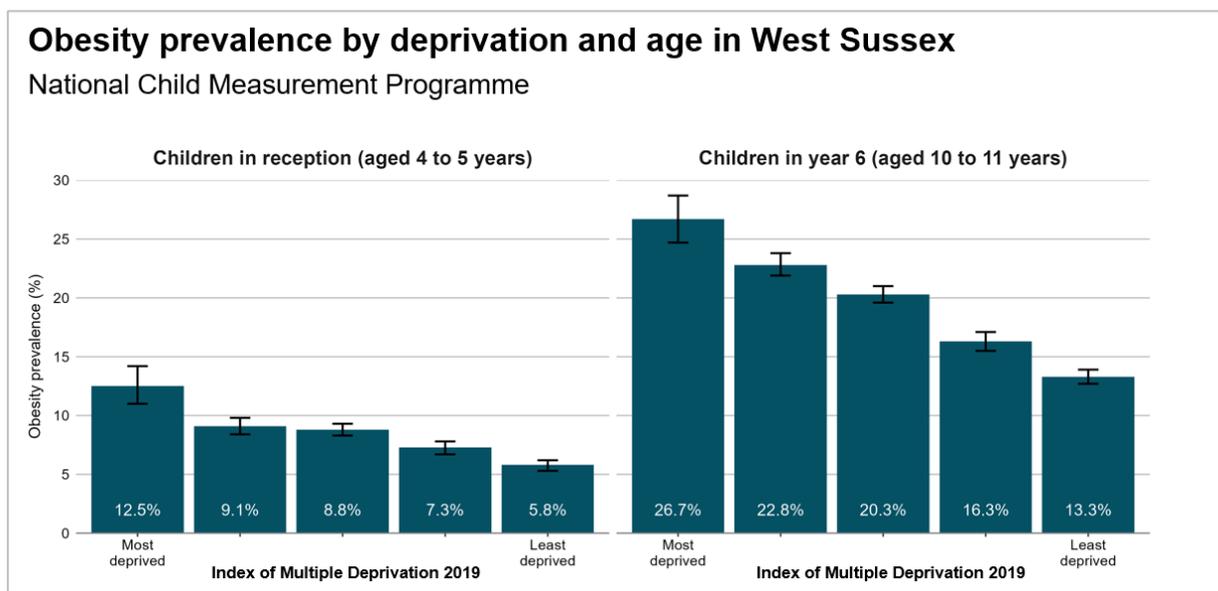
West Sussex obesity prevalence

Deprivation

Prevalence of obesity is strongly associated with deprivation. Deprivation is measured using the 2019 Index of Multiple Deprivation (IMD), which classifies children into deprivation deciles based on the child's location (1 represents the most deprived and 10 represents the least deprived). The IMD is the official measure of relative deprivation in England and forms part of the Indices of Deprivation (IoD). It defines deprivation broadly as unmet needs across various aspects of living conditions, distinguishing it from poverty, which refers specifically to a lack of financial resources. The IoD (IoD19) uses Lower-layer Super Output Areas (LSOAs) from the 2011 Census to measure deprivation at a small-area level, with 32,844 LSOAs in England, each representing about 1,500 residents¹⁴. IMD ranks neighbourhoods by their relative level of multiple deprivation using data from seven weighted domains: Income, Employment, Education, Health, Crime, Barriers to Housing and Services, and Living Environment. These rankings are grouped into deciles or quintiles for easier interpretation, with lower deciles representing more deprived areas.

Obesity prevalence in West Sussex shows a clear social gradient, with rates consistently higher among children living in more deprived areas. In Reception, obesity prevalence is more than twice as high in the most deprived areas compared with the least deprived, rising from 5.8% in the least deprived group to 12.5% in the most deprived (figure 13). This disparity widens further by Year 6, where 26.7% of children in the most deprived areas are classified as obese compared with 13.3% in the least deprived. The pattern demonstrates that inequalities in childhood obesity not only persist but become more pronounced as children get older. These findings highlight the strong and consistent relationship between deprivation and childhood obesity across both age groups.

Figure 13, Obesity prevalence by deprivation and age in West Sussex



Data combined 5-years, (2019 to 2020, 2021 to 2022, 2022 to 2023, 2023 to 2024 and 2024 to 2025)¹⁵ 95% confidence intervals are displayed on the chart. Source: Office for Health Improvement and Disparities, Fingertips

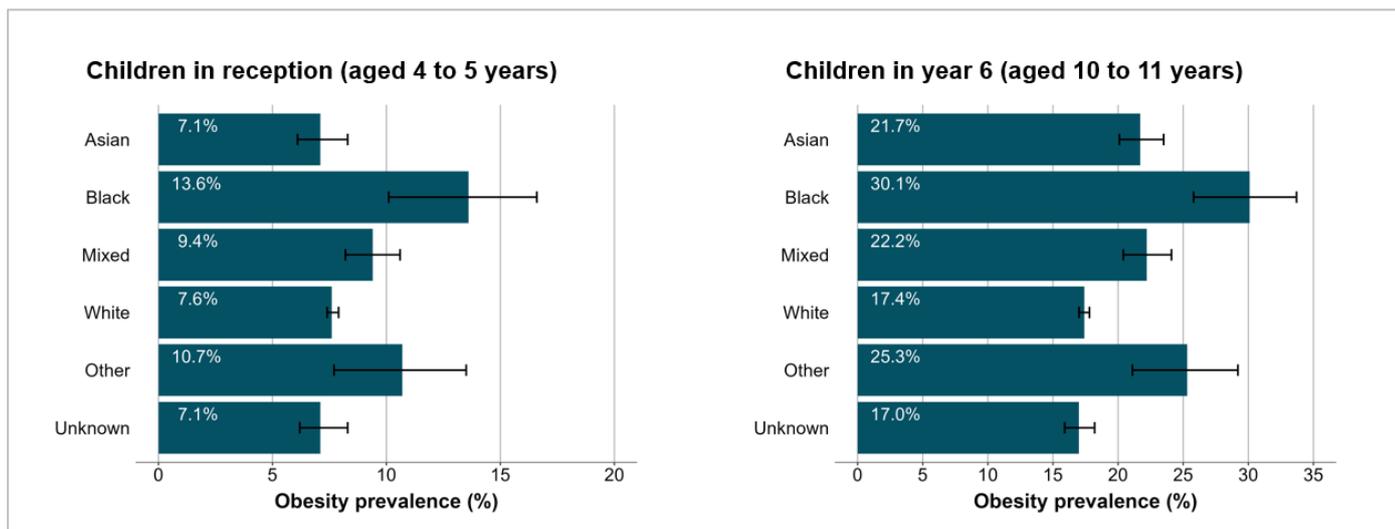
¹⁴ [The English Indices of Deprivation 2019](#)

¹⁵ In the three and five year grouped NCMP data, for ward level and local authority inequalities data, we would expect around 33% and 20% respectively of data from each contributing year. Data points are flagged if less than 20% (for 3-year

Ethnicity

Figure 14 shows that obesity prevalence varies notably by ethnic group in West Sussex. Among Reception aged children, obesity rates are highest in children from Black ethnic groups, followed by those from Other and Mixed backgrounds, while rates are lower among White and Asian groups. By Year 6, obesity prevalence increases across all ethnicities, with the largest rise seen among Black and Other ethnic groups, who continue to have the highest rates. White and Asian children have comparatively lower obesity prevalence in both school years. These patterns highlight persistent ethnic inequalities in childhood obesity that become more pronounced as children get older.

Figure 14, Obesity prevalence by ethnic group in West Sussex



Data combined 5-years, (2019 to 2020, 2021 to 2022, 2022 to 2023, 2023 to 2024 and 2024 to 2025)¹⁵ 95% confidence intervals are displayed on the chart. Source: Office for Health Improvement and Disparities, *Fingertips*. Source: Office for Health Improvement and Disparities, *Fingertips*

data) or less than 10% (for 5-year data) of data is from 2019 to 2020. The data is still considered to be reliable even with a small amount of data from 2019 to 2020. Further information on the contribution of 2019 to 2020 data to three- and five-year combined data is available [from the Obesity, physical activity and nutrition profile](#). As only a small number of areas collected robust data in 2020 to 2021, no data from 2020 to 2021 is included in the three and five year grouped data analysis.

National data

Gender differences

Prevalence of obesity is similar among boys and girls in reception. In reception, 23.6% of boys and 23.4% of girls were overweight or obese. However, in year 6 prevalence of obesity was significantly higher among boys than girls. In year 6, the percentage of boys and girls who were overweight or obese were 38.5% and 33.7% respectively.

In both school years, a greater percentage of girls were a healthy weight than boys. 75.9% of girls and 74.9% of boys were a healthy weight in reception. These percentages are lower in year 6, with 64.5% of girls and 60% of boys a healthy weight.

Deprivation

The deprivation gap, measured by the difference in overweight including obesity prevalence between the most and least deprived areas, has increased over time. In Reception, 28% of children attending schools in the most deprived decile were overweight or obese compared with 18.9% in the least deprived decile. Both figures differ significantly from the national average of 23.5%. In Year 6, the gap is even greater: 43.6% of children in the most deprived decile were overweight or obese compared with 26.1% in the least deprived decile, against a national average of 36.2%.

Ethnicity

In England, children in the ethnic groups 'Black African', 'Black Caribbean', 'Any other Black background', 'White and Black African', 'White and Black Caribbean', 'White British' and 'White Irish' were above the national average for both school years. In year 6, 'Bangladeshi', 'Pakistani', 'Any other Asian background', 'Black African', 'Black Caribbean', 'Any other Black background', 'White and Black African', 'White and Black Caribbean', 'Any other mixed background' and 'Any other ethnic group' were significantly above the national average.

