

# **A FITTER FUTURE FOR ALL**

**Framework for Preventing and  
Addressing Overweight and Obesity  
2012 - 2022**

**Progress Report on 2015–19 short-term  
outcomes  
(June 2018 - June 2019)**



Department of  
**Health**

An Roinn Sláinte  
Máinystre O Póistie

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## EXECUTIVE SUMMARY

This annual report outlines the progress (June 2018 to June 2019) made under the current implementation<sup>i</sup> of the ten year obesity prevention framework *A Fitter Future for All 2012–2022*<sup>ii</sup>.

### AIM

The overall aim of the framework is to:

*Empower the population of Northern Ireland to make healthy choices, reduce the risk of overweight and obesity related diseases and improve health and well-being, by creating an environment that supports a physically active lifestyle and a healthy diet.*

### TARGET

In addition, the following overarching targets have been set:

- **Adults** – To reduce the level of obesity by 4% and overweight and obesity by 3% by 2022.
- **Children** – A 3% reduction of obesity and 2% reduction of overweight and obesity by 2022.

The targets are in two parts; the proportion that are obese and the proportion that are overweight and obese. These targets were established based on the Health Survey Northern Ireland (HSNI) 2010/11 results which reported that:

- 59% of adults aged 16 and over were either overweight (36%) or obese (23%), and
- 27% of children aged 2–15 years of age were overweight (19%) or obese (8%) – based on the *International Obesity Task Force* (IOTF) cut-off points of the BMI percentiles.

For information: the target is to reduce the figure of adults aged 16 and over who are overweight or obese from 59% to 56% and those who are obese from 23% to 19%. For children aged 2-15 years the target is to reduce the figure of overweight and obese children from 27% to 25% and obese children from 8% to 5%. This is shown diagrammatically in the charts below.

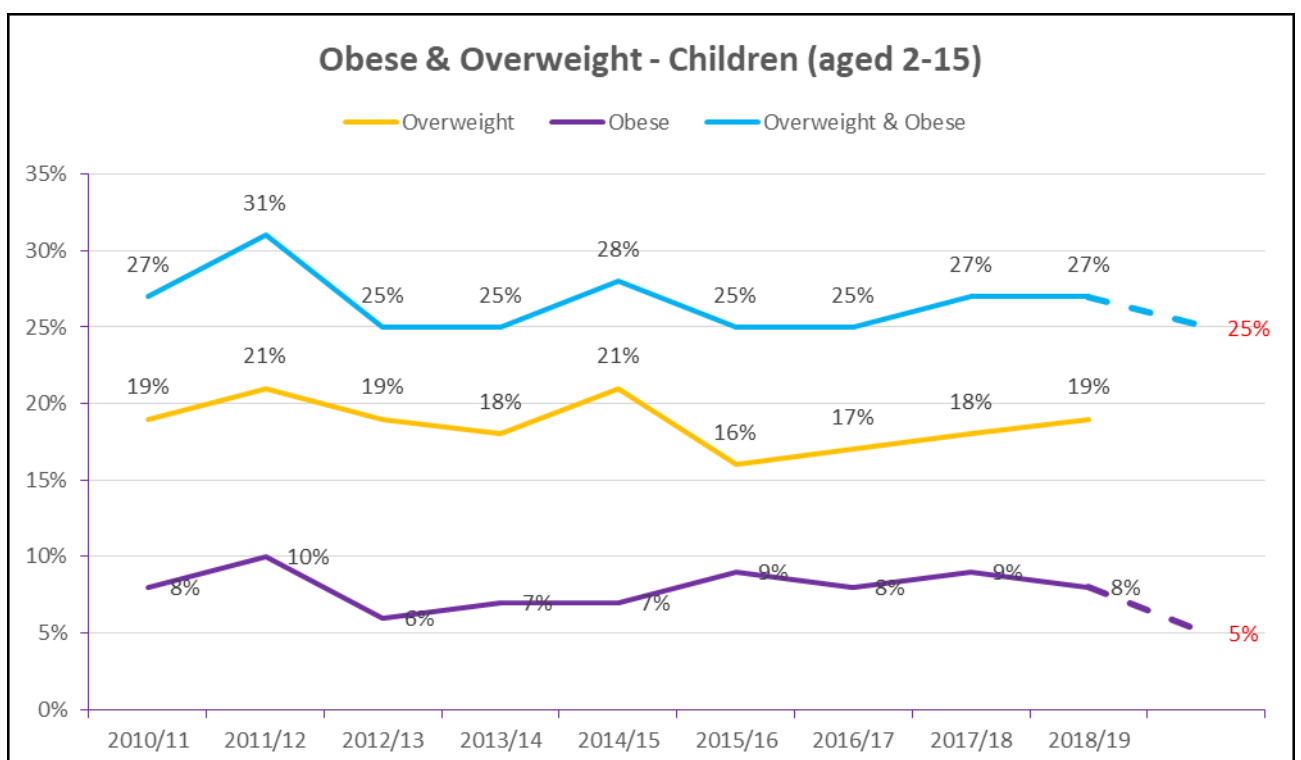
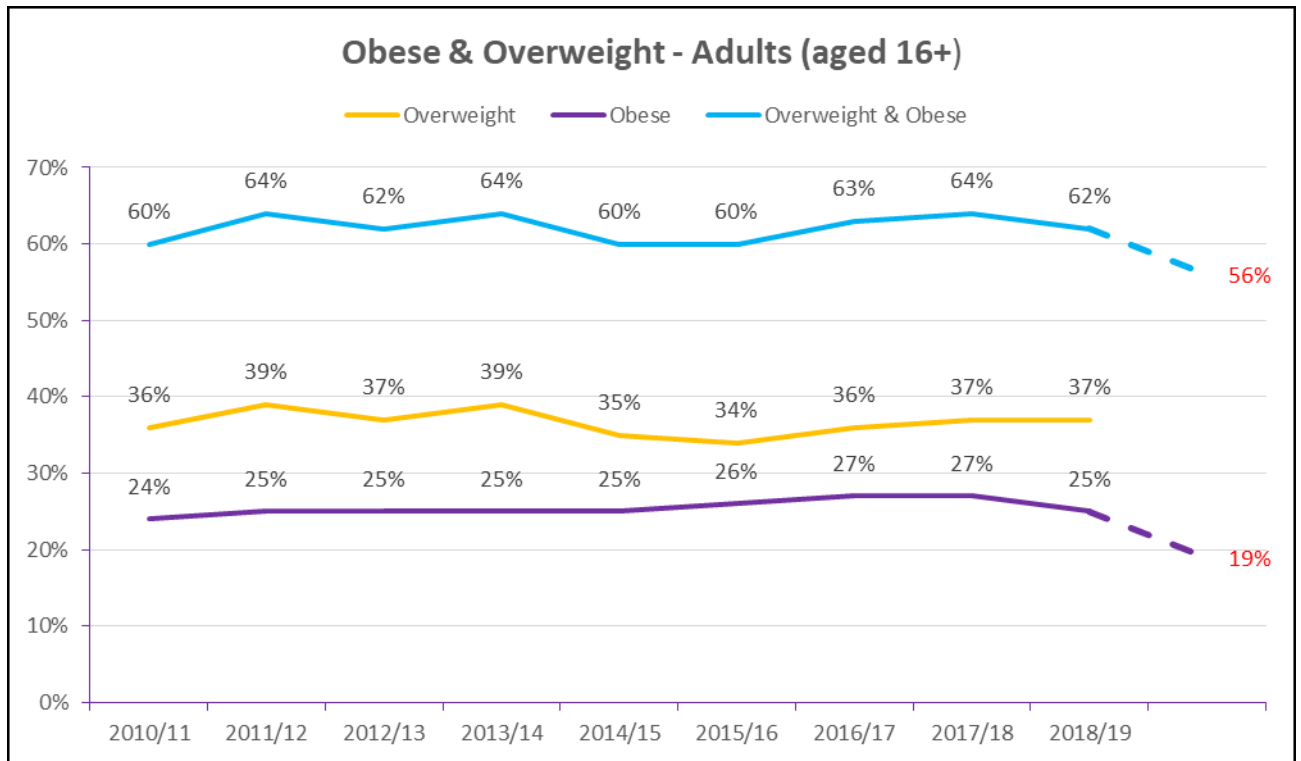
### LONG-TERM OBJECTIVES

There are two overarching objectives within the Framework which address two main areas. These are to:

- increase the percentage of people eating a healthy, nutritionally balanced diet; and
- increase the percentage of the population meeting the CMO guidelines on physical activity.

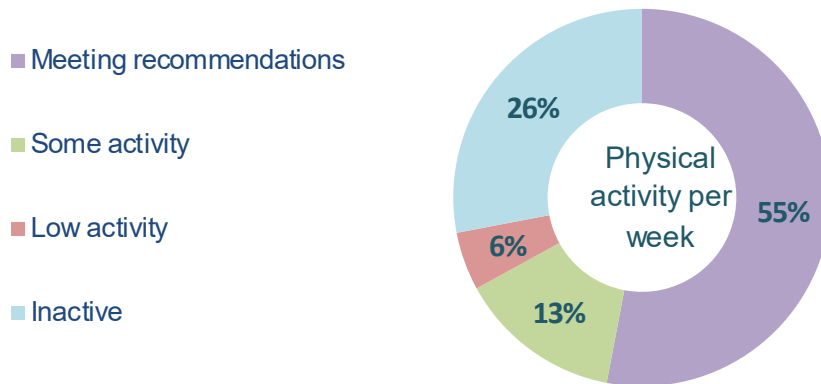
## TARGETS AND INDICATORS

The Framework committed the Department to monitoring and overseeing a range of related statistics and indicators – recent figures from the Health Survey (HSNI) 2018-2019 (the most recent available within the reporting parameters) can be accessed at <https://www.health-ni.gov.uk/publications/health-survey-northern-ireland-first-results-201819>, are summarised in Annex A and illustrated below (red figures indicate the target and dotted lines indicates the direction and degree required to achieve it).

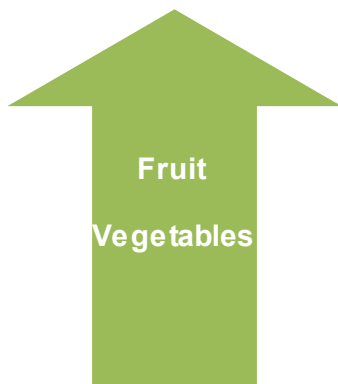


## Physical Activity

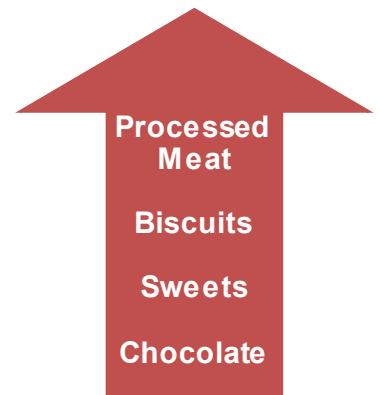
Since 2011 when the revised CMO Physical Activity Guidelines were launched, the 2012/13, 2013/14 and 2016/17 health surveys have included a physical activity module. The physical activity module was not included in the 2017/18 or 2018/19 health surveys. The Northern Ireland Health Survey for 2016/2017 reported the following data:



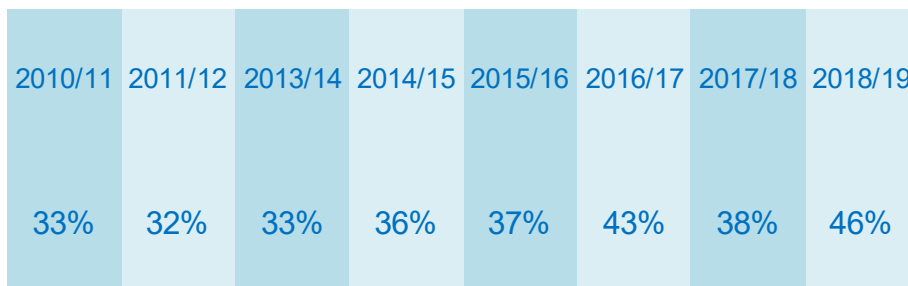
## Food and Nutrition



Since 2010/11 the proportion of people eating fruit and vegetables on most days of the week has increased. There has also been an increase in the proportion of people eating processed meat, biscuits, sweets and chocolate.

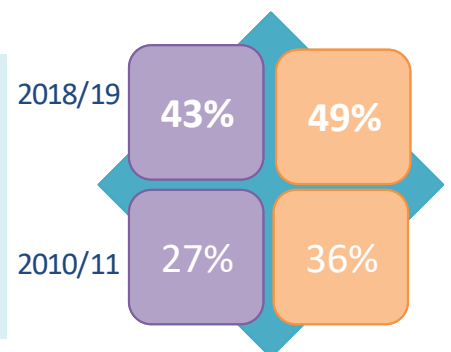


In 2018/19 46% reported that they ate the recommended five portions of fruit and vegetables a day, an increase from 33% in 2010/11

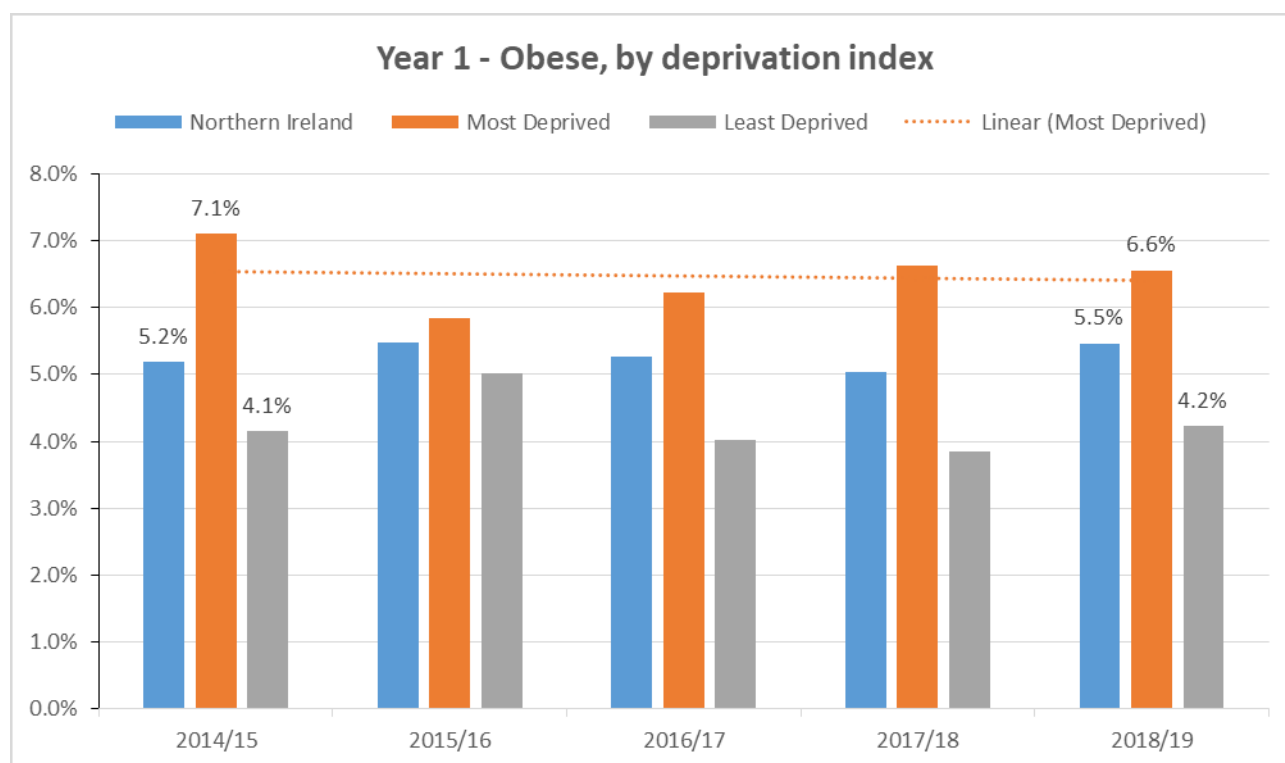


### Respondents meeting '5 a day' guidelines (by sex)

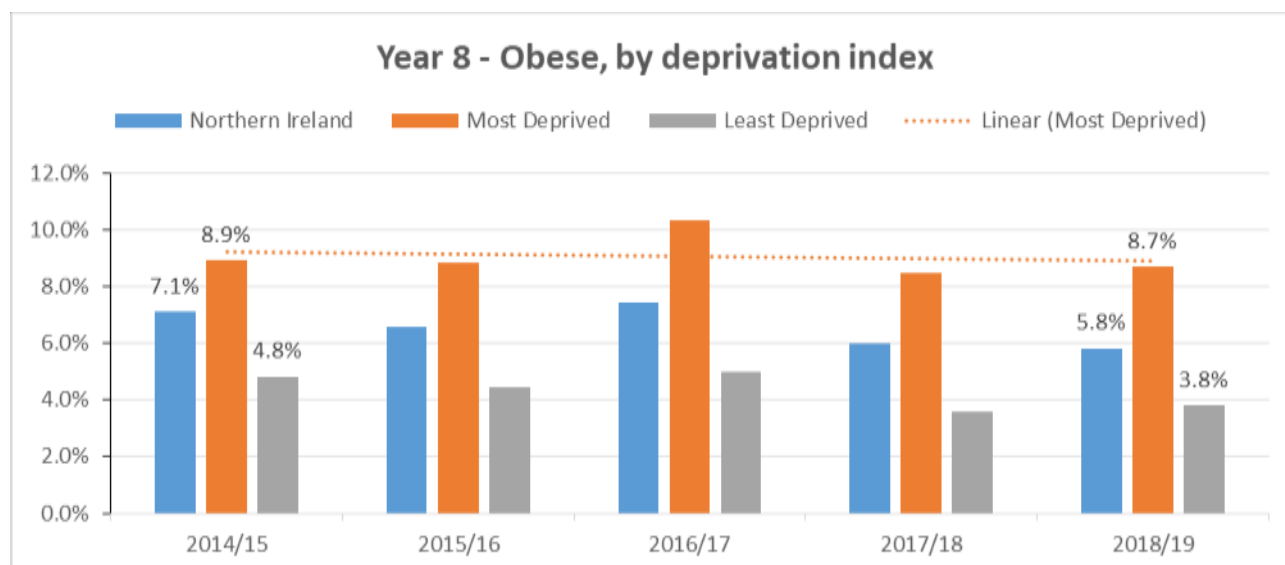
Male / Female



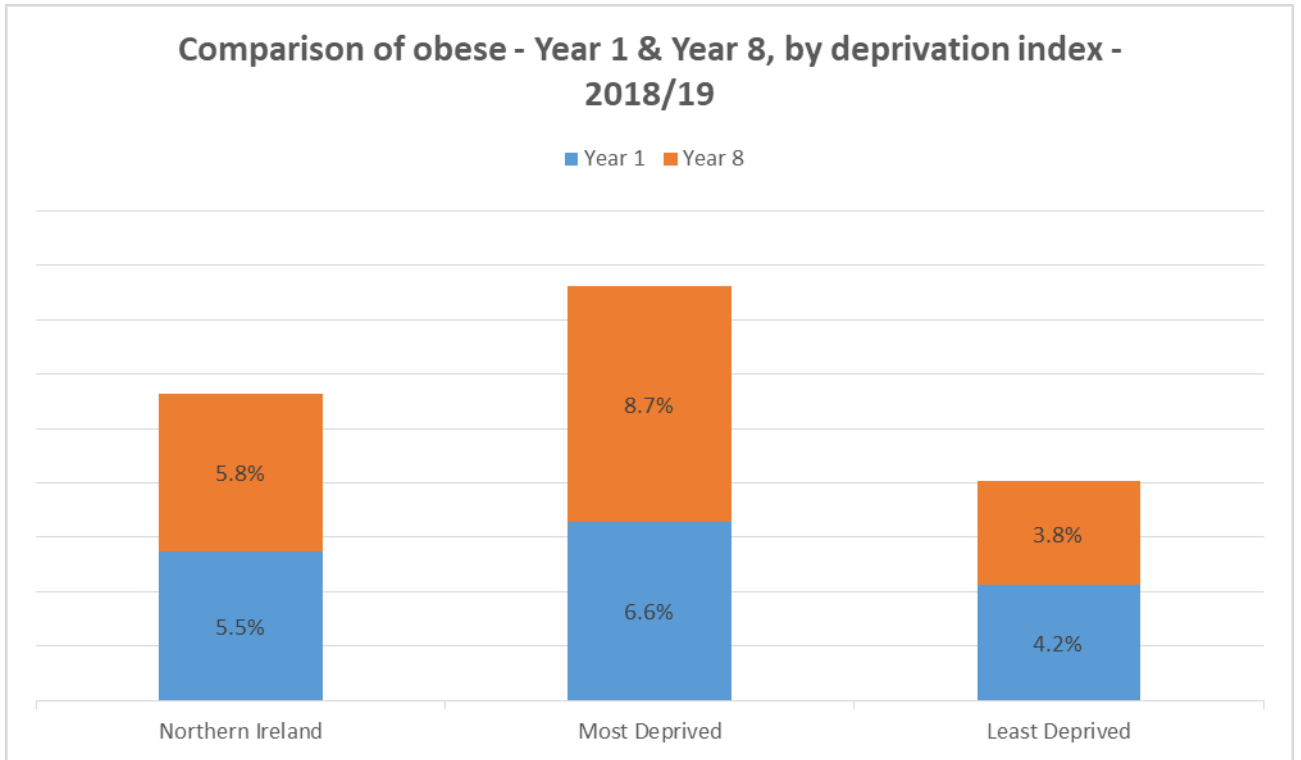
## Health Inequalities



The inequality gap for Year 1 obesity has narrowed over the last five years due to 0.5% improvement in the most deprived areas, shown by the trendline in the chart above. However obesity levels increased in the least deprived areas and at the overall NI level.

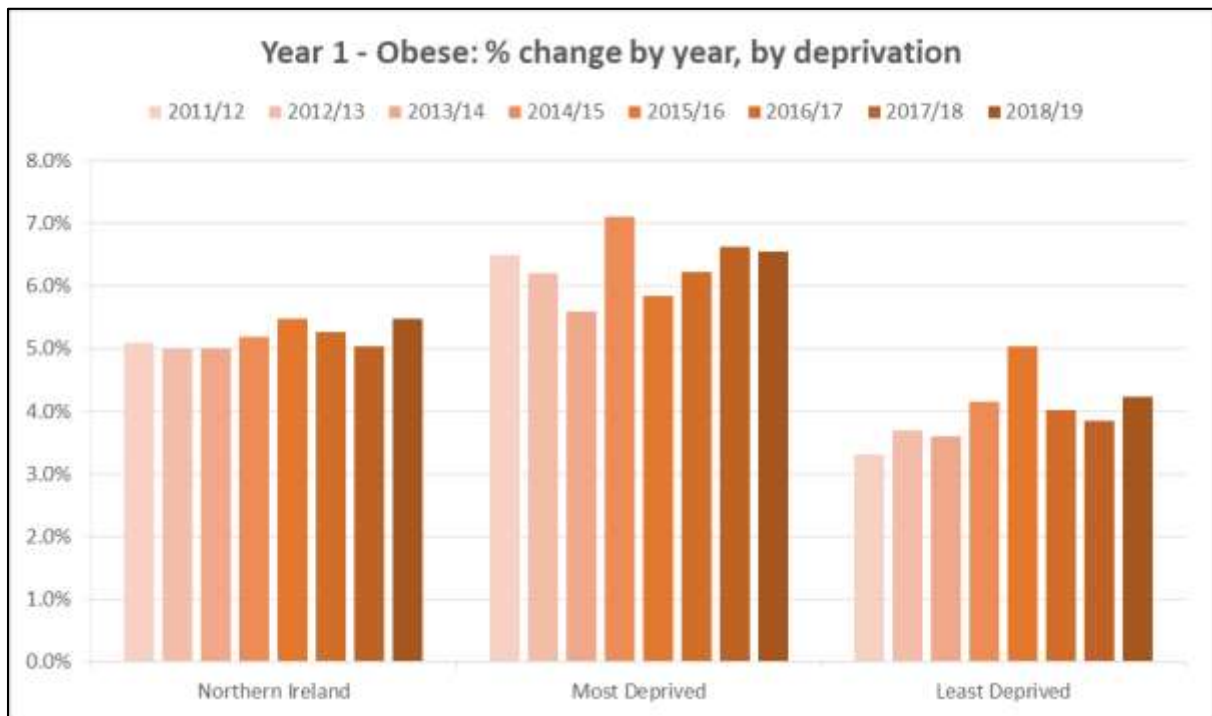


The Year 8 obesity inequality gap widened over the same period due to an improvement in the least deprived areas and the overall NI average while there was no significant change in rates within the most deprived areas, shown in the trendline above.



By comparing both Year 1 and Year 8 data for 2018/19 by deprivation index, it is clear that the most deprived areas have the highest percentages of children with obesity, with the least deprived areas having smaller than NI average percentages at both ages.

## Year 1 – Children with obesity

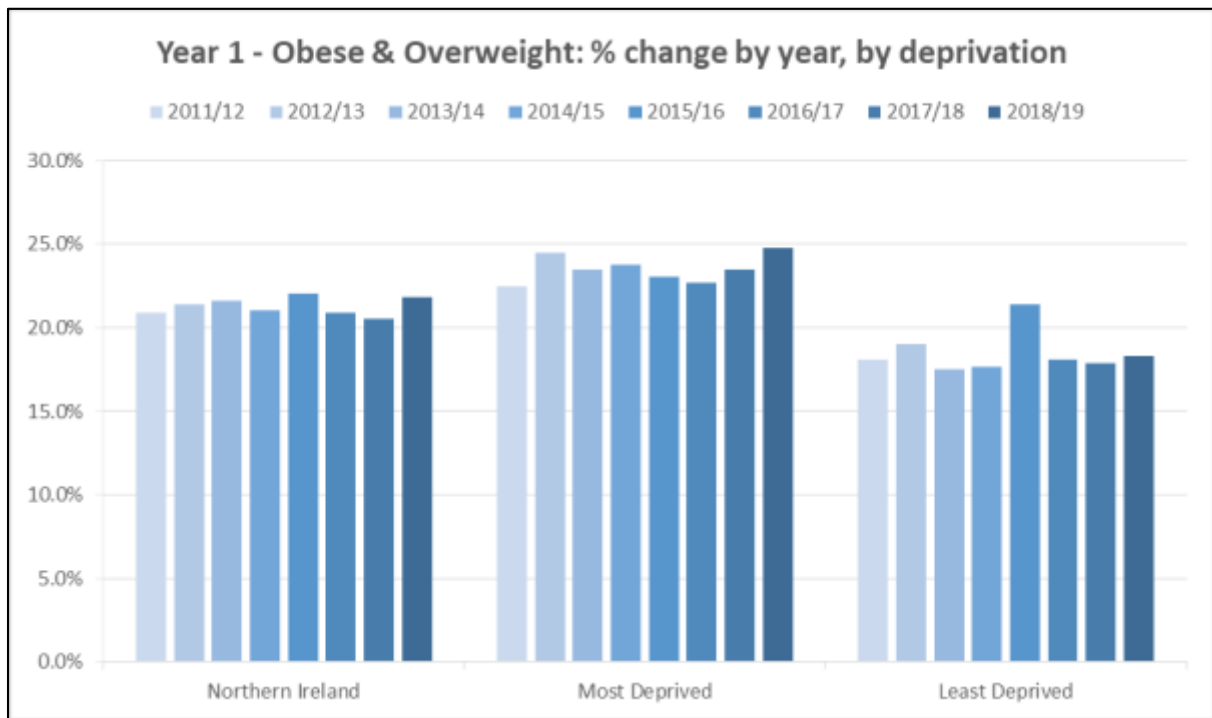


For Year 1 children with obesity, there has been a general rise in the rates of obesity over the course of A Fitter Future For All, to date. The largest percentage increase is among the least deprived, with a 0.9% increase in the percentage of Year 1 children with obesity between 2011/12 and 2018/19. The percentage increase in the most deprived over the same period is 0.1% - although this demographic is still 55% more likely to be obese. The overall Northern Ireland position shows an increase in the number of children with obesity of 0.4% since 2011/12.





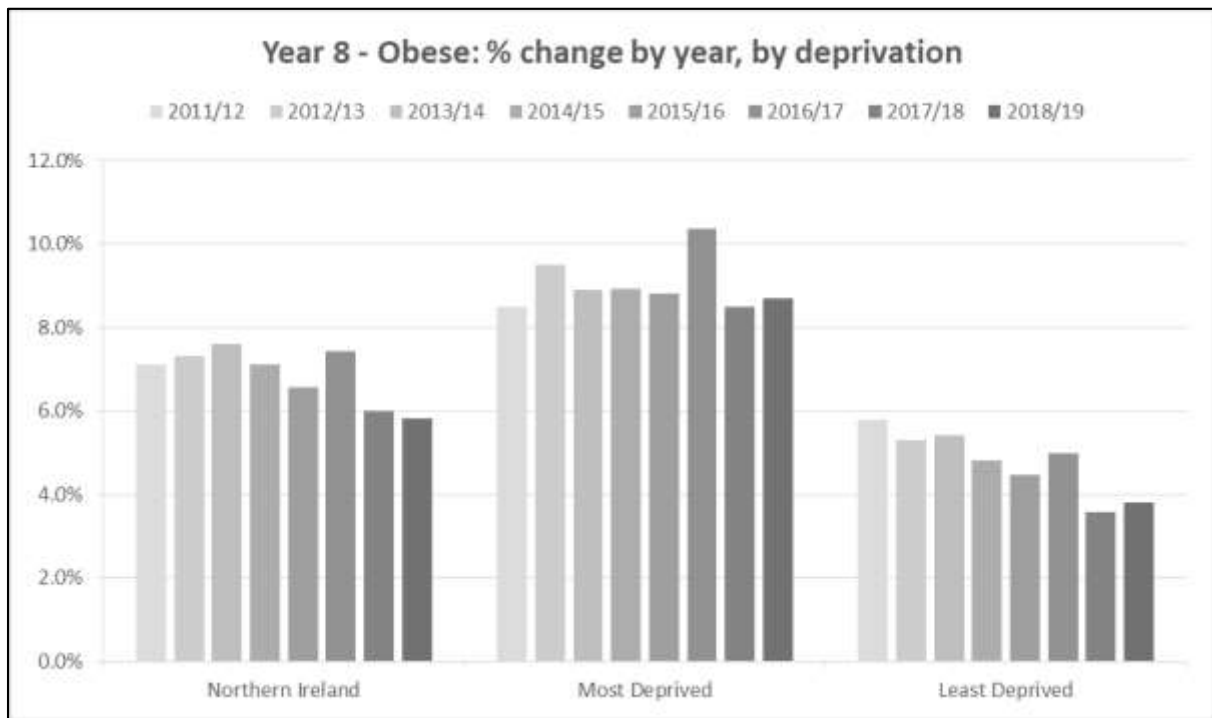
## Year 1 – Children with overweight or obesity



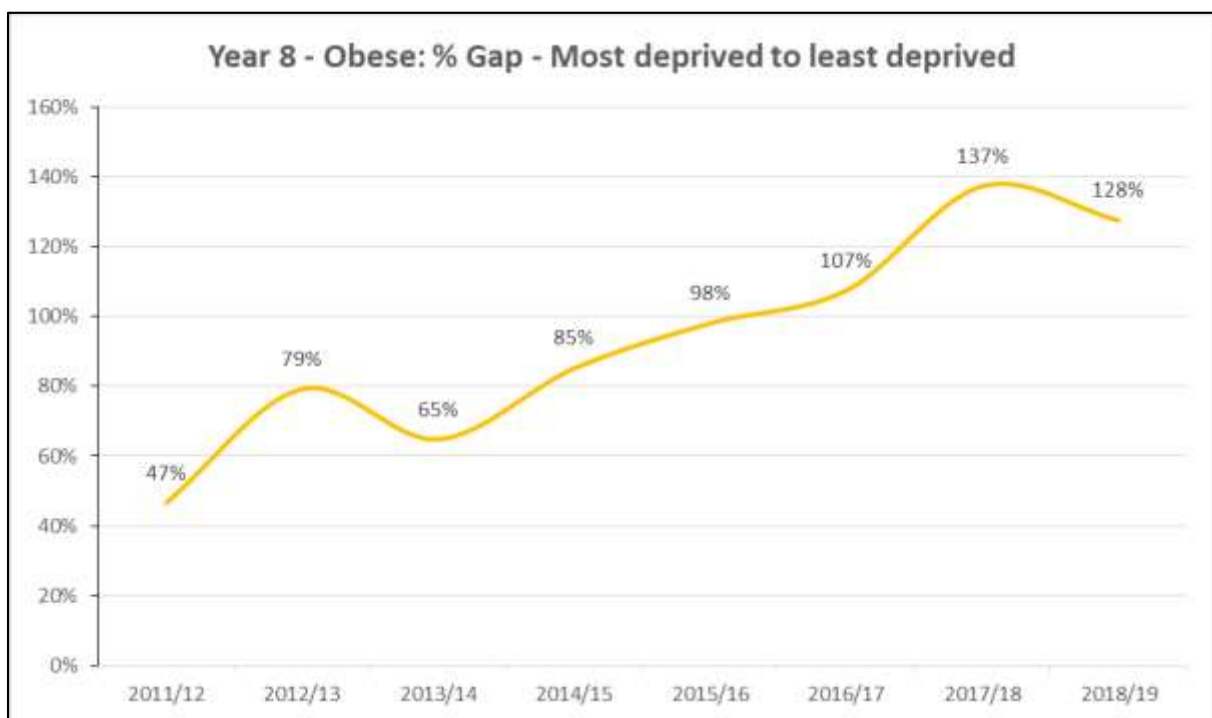
The rates of children with overweight or obesity have also risen for all three groups. For the least deprived children in Year 1, rate of children with overweight or obesity has risen by 0.2%. However, the trend for the most deprived and Northern Ireland as a whole has risen by larger percentages – by 2.3% and 0.9%, respectively. The most deprived year 1 children are now 36% more likely to have overweight or obesity compared to the least deprived, a trend which has risen from 24% in 2011/12.



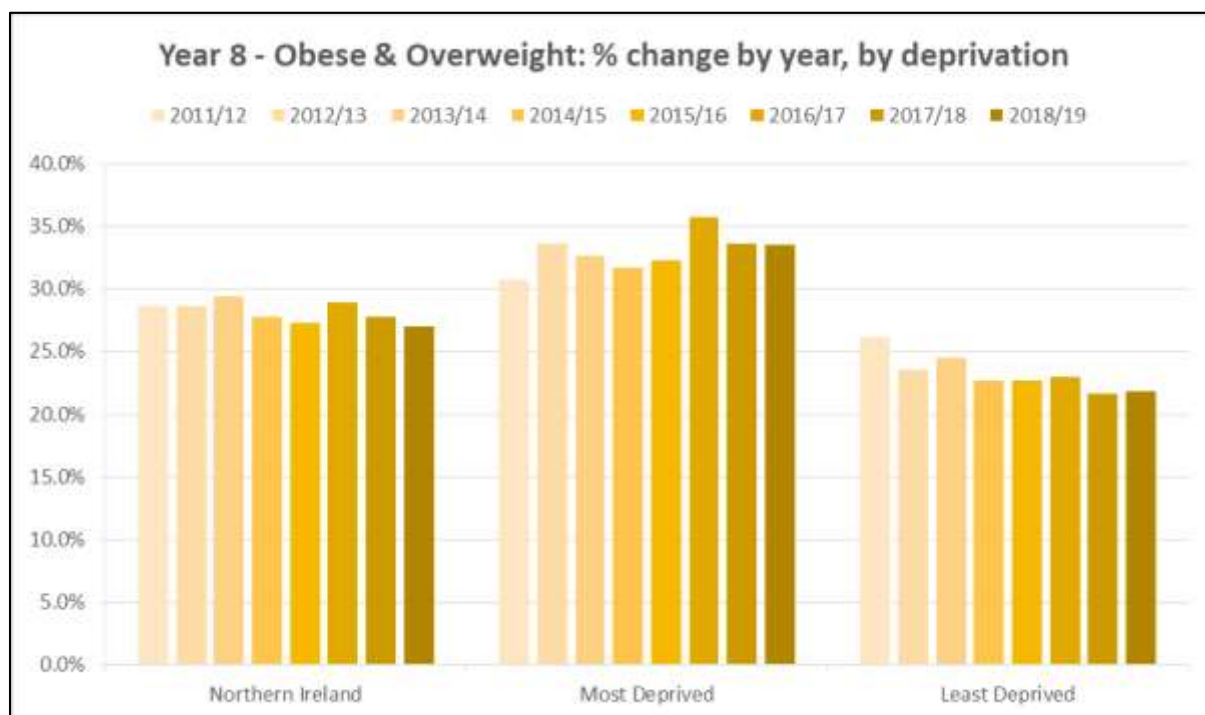
## Year 8 – Children with obesity



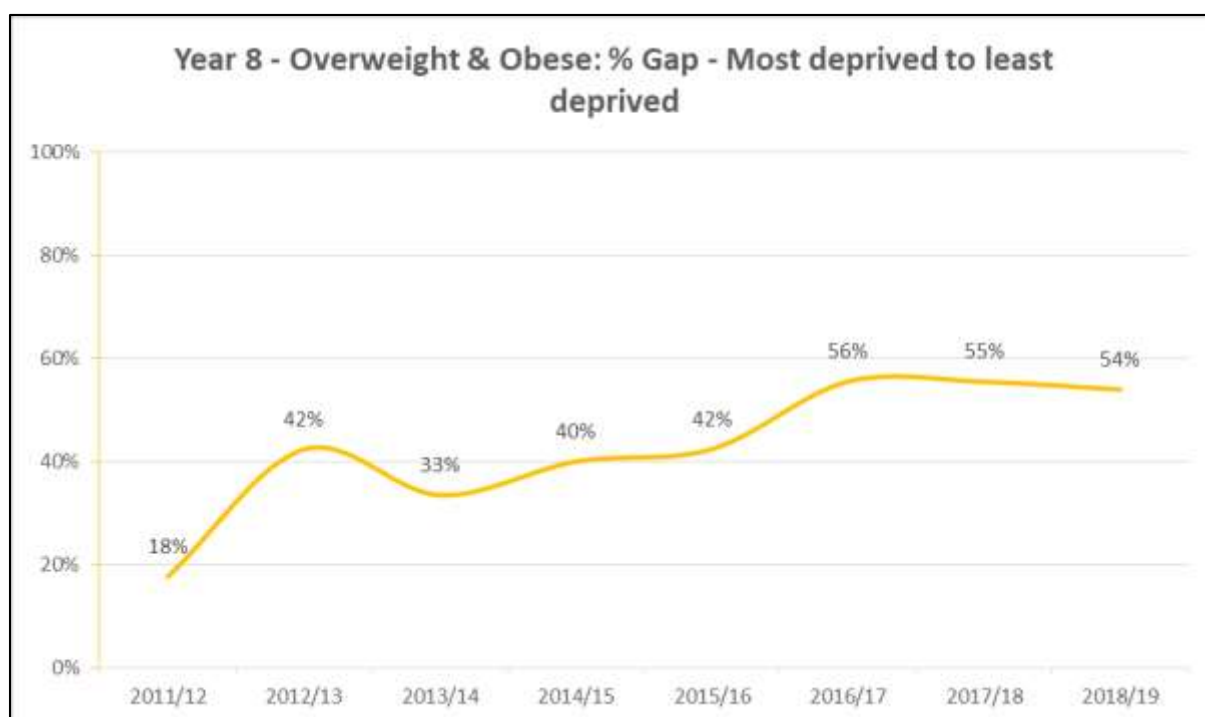
For Year 8 children with obesity, there has been a general fall in the rates of obesity since 2011/12, except for the most deprived. The largest percentage decrease is among the least deprived, with a 2% decrease in the percentage of Year 8 children with obesity between 2011/12 and 2018/19. The overall Northern Ireland position shows an decrease in the number of children with obesity of 1.3%. The percentage increase in the most deprived over the same period is 0.2% - and this demographic now 128% more likely to be obese, compared with 47% in 2011/12.



## Year 8 – Children with overweight or obesity



Again, for the most deprived children in Year 8, the percentage rate of children with overweight or obesity has risen – from 30.7% in 2011/12 to 33.6% in 2018/19. The trend for the least deprived demographic and Northern Ireland as a whole has fallen by 1.6% and 4.3%, respectively, over the same period. Year 8 children are 54% more likely to have overweight or obesity compared to the least deprived, a trend which has generally risen since 2011/12, when the rate was 18%.



## THE OUTCOMES

A range of outcomes were defined at the launch of *A Fitter Future for All* in 2012, to deliver the long-term aims of the Framework. Following the logic model approach, the long-term outcomes were supported by the subsequent development of a number of short-term outcomes and outputs. These provide the focus for activities and future work and have been reviewed every three years. The current set of short-term outcomes cover the period 2015-2019.

The outcomes were structured in a manner that not only demonstrated their sequential nature, but also their relationship with the themes, long-term aims and objectives.

The outcomes were grouped within three life-course stages:

- Pre-conception, Antenatal, Maternal and Early Years;
- Children and Young People; and
- Adults and the General Population.

The PHA leads on the implementation of actions to deliver the majority of non-Departmental outcomes. The Food Standards Agency (FSA) is the lead delivery partner for outcomes involving food manufacturers/retailers and food labelling.

The table below summarises progress made in the year June 2018 to June 2019 against the short-term outcomes set for 2015 – 2019.

Quick identification of progress against the outcomes is indicated via a Red, Amber, and Green (RAG) status:

(% of 50 outcomes – rounded)		
<b>Green</b>	On track for achievement / achieved	84%
<b>Amber</b>	On track for achievement but with some delay	14%
<b>Red</b>	Not on track for achievement	0%

## Outcomes 2015–2019

PRE-CONCEPTION, ANTENATAL, MATERNAL AND EARLY YEARS 2015–2019				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
1. People trying to conceive and expectant parents continue to receive information and guidance on nutrition and recommended levels of physical activity.		HSC safefood FSA Com/Vol	PHA - provides a range of information resources which include healthy eating and physical activity recommendations for pregnant women, these are reviewed and as necessary updated on an annual basis. Pre-conceptual information is included in the Pregnancy book and information on Folic Acid is available online at <a href="https://www.publichealth.hscni.net/Folic_Acid">https://www.publichealth.hscni.net/Folic_Acid</a>	Lower prevalence of overweight and obesity in pregnant women.
2. Pregnant women who are overweight or obese have access to evidence based weight management interventions during their pregnancy and into the post-natal period.		HSC Councils Vol/Com	PHA - The PHA Weigh to a Healthy Pregnancy programme (WTHP) continued across each HSCT and extended to include women with BMI>38 since April 2018. The team have worked with Tele-health managers to find a solution to the withdrawal of tele-health services. The importance of making healthier eating choices and appropriate physical activity is promoted by dietitians, physiotherapists and midwives to women on the programme, with weekly recording of weights by women aiming to support them to limit their gestational weight gain to within recommended levels.	
3. Information published for employers and employees to promote the provision of supportive environments for breastfeeding.		HSC DoH Private Sector	PHA - The Breastfeeding Welcome Here scheme has now increased membership to over 600 members and a new interactive map has been added to <a href="http://www.breastfeeding.org">www.breastfeeding.org</a> PHA publications for women combining breastfeeding with returning to work and for employers have been reprinted. A Workplace Sample Policy can be downloaded from: <a href="http://www.publichealth.hscni.net/publications/sample-policy-supportingbreastfeeding-employees-0">http://www.publichealth.hscni.net/publications/sample-policy-supportingbreastfeeding-employees-0</a>	The majority of mothers breastfeed and delay weaning until 6 months.
4. Public consultation informs the proposed introduction of legislation to support mother's breastfeeding their children in public places.		DoH Councils	PHA - Social media was used to follow-up on the PIC NotSorryMums which ran in February and March 2018. DoH policy leads started work on drafting legislation which would protect a mother from being challenged while breastfeeding in public. Progress is reported to the Breastfeeding Strategy Implementation Steering Group.  PHA support Breastival and in August 2018 the event attended by almost 800 parents at the Ulster Museum provided the opportunity to raise awareness of the need for legislation, this included involvement of elected representatives who are supportive of the proposed legislation.	

**PRE-CONCEPTION, ANTENATAL, MATERNAL AND EARLY YEARS 2015-2019**

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
5. Regulations developed by 2015 on foods for specific groups including foods intended for infants and young children.		<b>FSA</b>	<p><b>FSA</b> – Regulation (EU) No 609/2013 on food intended for infants and young children, food for special medical purposes, and total diet replacement for weight control ('Food for Specific Groups') has applied since July 2016. It set general compositional and labelling rules and required the Commission to adopt, through delegated acts, specific compositional and labelling rules for:</p> <ul style="list-style-type: none"> <li>• Infant and follow-on formula;</li> <li>• Processed-cereal based food and other baby food;</li> <li>• Food for special medical purposes;</li> <li>• Total diet replacement for weight control.</li> </ul> <p>It simplified the regulatory framework, eliminating unnecessary and contradictory rules and by replacing those with a new Framework which takes into account the developments on the market and in EU food law.</p> <p>Enforcement for this in NI is provided for by the Food Safety (Information and Compositional Requirements) Regulations (NI) 2016.</p> <p>Infant formulae and follow-on formulae - Directive 2006/141/EC (Infant formulae and follow-on formulae) is replaced by delegated Regulation (EU) 2016/127 and will come into force in February 2020, with provisions for formulae manufactured from protein hydrolysates coming into force in February 2021.</p> <p>Processed cereal-based foods and baby foods for infants and young children - current legislation (2006/125/EC) remains in force and more substantial work is being undertaken to form draft legislation.</p>	The majority of mothers breastfeed and delay weaning until 6 months.
6. Child care facilities' compliance with <i>Nutrition Matters for the Early Years</i> monitored by Early Years teams.		<b>HSC EYPs</b>	<p><b>PHA</b> - Review of Nutrition Matters for the Early Years training materials was undertaken by the Public Health Dietitians Group. PHA is working with NICMA to encourage uptake of the training by childminders.</p> <p>Early Years Teams distribute the document on their inspections and encourage settings to adhere to these guidelines. However, as they are not mandatory, they do not monitor compliance. Child Care settings are monitored against the Childminding and Daycare Minimum Standards which contain standards on food and drink.</p>	Consistent approach to healthy food within Early Years settings

**PRE-CONCEPTION, ANTENATAL, MATERNAL AND EARLY YEARS 2015-2019**

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
7. Child carers' attendance at <i>Nutrition Matters for the Early Years</i> training a requirement for registration.		HSC EYPs	<b>PHA</b> - Training is offered to all childcare providers across all Trust areas and will continue to be rolled out as needed. PHA is working with NICMA to encourage uptake of the training by childminders. However, training is not a mandatory requirement for registration. Child care workers are, however, monitored against the Childminding and Daycare Minimum Standards which document the minimum level of service that has to be provided in order to be registered with a HSC Trust and meet the inspection standards.	Consistent approach to healthy food within Early Years settings
8. Evaluated programmes in place to increase practical food skills, awareness and knowledge of parents/carers to enable them and young children to make healthy choices.		HSC EYPs Vol/Com Councils	<b>PHA</b> - A suite of courses is delivered in all Trust areas, including <i>Cook It, I Can Cook It, Food Values</i> and the <i>Good Food Toolkit</i> . PHA working with a range of partners to develop an early years obesity prevention programme which will include healthy eating as a core component.  <b>Councils</b> – A number routinely deliver Cook It! Food Hygiene training and Weigh to Health, as well as delivering food labelling advice.	
9. All early years settings provide a supportive environment for young children to achieve the CMO recommended levels of physical activity.		HSC EYPs, DE Vol/Com Councils Playboard	<b>PHA</b> - Delivery of Early Movers and Start to Play training is ongoing across all Trust areas. This training will continue for as long as a need is identified. PHA working with a range of partners to develop an early years obesity prevention programme which will include physical activity as a core component.  <b>DE</b> - Pathway funded projects supported children within physical activity programmes in 2018/19.  Play remains one of the six core services provided by each of the 38 projects in the DE Sure Start programme.  Voluntary and community pre-school settings encourage physical development and movement skills for young children as part of the pre-school play based curriculum.	Physical Activity levels of children are increased.

**PRE-CONCEPTION, ANTENATAL, MATERNAL AND EARLY YEARS 2015-2019**

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
10. Training delivered to support the interpretation of the early years section of <i>Start Active, Stay Active</i> guidelines for those who work in these Settings, particularly through <i>Early Movers</i> and <i>Start to Play</i> training.		HSC Vol/Com DE	PHA - Delivery of Early Movers and Start to Play training is ongoing across all Trust areas. This training will continue for as long as a need is identified.	Physical Activity levels of children are increased.



## CHILDREN AND YOUNG PEOPLE

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
11. Children who are obese, or at risk of obesity, identified and their families signposted to appropriate, evidence based interventions.		HSC Vol/Com Councils	<b>PHA</b> - A range of programmes are currently delivered linked to local need. A new regionally consistent, evidence-Childhood Obesity Prevention programme is being developed. The programme will target families of children aged 0-5 through Sure Starts and the Health Visiting Service.	Early identification of children who are obese or are at risk of obesity.
12. Support and training provided to health professionals on how to constructively discuss the issue of childhood overweight with parents and children.		<b>safefood</b> HSC (via HSCB) RCGP	<b>safefood</b> - in ROI the e-learning module called Checking the weight of children is being reviewed and updated in 2020. It is hoped that this resource will be made available for Northern Ireland once the update has been completed through the faculties of the ICGP / RCGP NI.  <b>PHA</b> - Training for health professionals will be a core component of the new Childhood Obesity Prevention programme referred to at no 11.	
13. Campaign delivered to raise public awareness of healthy eating; physical activity and weight management aimed at parents of children aged 2-12.		<b>safefood</b> HSC	The START campaign builds on previous childhood obesity campaigns and aims to help families start to take small daily wins towards a healthier lifestyle for their children. It is led by <b>safefood</b> in partnership with PHA and DH. The following phases of the campaign were run between June 2018 and June 2019 <ul style="list-style-type: none"> <li>• In May 2019 parents were encouraged to give their children healthier snacks. Research from diets of children in NI showed that almost a quarter of children's diets are made up of foods/drinks high in fat, salt and sugar.</li> <li>• The 'Pause for Play' phase was run from 3rd September to 14th October 2018 across TV, radio outdoor and digital platforms. It encouraged parents to reduce family screen time and be more active together.</li> </ul> <b>PHA</b> - START campaign ran <b>Wednesday, 22<sup>nd</sup> May 2019</b> across TV, radio, PR outdoor and digital media. The campaign encourages families to take the first step towards a healthier lifestyle for their children by supporting them to achieve one daily win, and to persist with the changes, no matter how difficult they become.	Children and young people make healthy food and physical activity choices.

## CHILDREN AND YOUNG PEOPLE

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
14. Programmes and resources in place which promote healthy lifestyles including healthy eating, developing practical food skills and physical activity in education and 'out-of-school' settings (e.g. youth clubs) with a particular emphasis on those who are NEET.		<b>FSA</b> QUB, UU Colleges HSC, DfE safefood Councils	<p><b>Councils</b> – A number of Councils deliver Cook It!, Weigh to Health programmes, and provide nutrition information sessions to youth groups. Also 'Fresh Food Route to Healthy Living' publication, 'Growing Communities' supporting community gardens, and Closing the Gap.</p> <p><b>Safefood</b> and FSA NI – eatright.eu online resource for early school leavers available and updated with topical information.</p> <p><b>FSA</b> – The FSA continue to be active members of the Food in Schools Forum which recently reviewed the nutrition standards for school catering. The FSA is also a member of a Resources Subgroup of the Food in Schools Forum which ensures the provision of nutrition resources and support to schools and 'out of school' settings. The FSA continues to provide key nutrition resources to schools and community and voluntary organisations to include Eat Well Guide leaflets, Z cards, posters, Eat Well Bingo, Eat Well play mat, Traffic Light Labelling information cards and green light recipe books.</p>	Children and young people make healthy food and physical activity choices.
15. Continue to implement and monitor the Food in Schools Policy across all schools so as to educate and support children and young people to make healthy food choices and seek opportunities to resolve the legislation gap on 'other food and drinks' in school.		<b>DE, EA</b> DoH, HSC FSA safefood CCEA	<p><b>PHA</b> - Co-funds with DE a Food in Schools Co-ordinator who supports schools to implement the Food in Schools Policy, and chairs the Food in Schools Management Group to ensure the action plan is being delivered.</p> <p><b>Safefood</b> continued to actively participate in the food in schools work including the review of the nutritional standards for school meals</p>	Children and young people are making healthy food choices.
16. Evaluation of the <i>Healthy Breaks Scheme</i> completed and further developed as appropriate.		<b>HSC</b> DE	<p><b>PHA</b> - Evaluation of the regional healthy breaks scheme for all nursery and primary schools was completed in February 2017 and has been published on the PHA website. The findings have influenced the development of the revised Nutritional Standards for School Meals and will be used to influence roll out of schemes promoting healthy breaks and healthy lunchboxes.</p>	

CHILDREN AND YOUNG PEOPLE				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
17. Support provided for further restrictions of advertising products with high fat, salt, sugar and alcohol to children and young people.		UK-wide	<b>DoH</b> – Broadcast advertising is a reserved matter, the Department has continued to advocate with the UK Government for further restrictions on HFSS advertising as part of the Childhood Obesity: A Plan for Action – Chapter 2 framework.	
18. Youth sector settings have healthy food policies in place.		<b>DE, HSC</b> EA Councils	<b>DE</b> - Joint Youth Services Group - The EA implemented a Healthy Eating Policy (01/09/2017). Controlled Provision - Each unit Controlled Delivery Agreement for 2018/19 will contain a target to ensure that a healthy eating policy is implemented - progress is reviewed quarterly. Voluntary Provision (local units and Regional Voluntary Youth Organisations) - Each unit Service Level Agreement for 2018/19 will contain a target to ensure that a healthy eating plan is implemented - progress is reviewed quarterly. Within youth work programmes and interventions - healthy eating programmes delivered at a regional and local level will be reviewed and models of good practice shared.  Further to this the EA have sought specification from the voluntary sector under the EAs New Funding Scheme to develop this area of work.	Children and young people are making healthy food choices.
19. Young people in or leaving care, provided with opportunities to develop knowledge and practical food skills through appropriate nutrition skills programmes.		<b>HSC</b> Vol/Com Councils	<b>PHA</b> - Looked After Children encouraged to take part in nutrition education programmes – Cook it!  <b>Councils</b> – A number of council areas continue to deliver CookIt! And Weight to Health programmes, and nutrition information sessions to youth groups. The SHSCT in conjunction with the MUDC deliver 'Kids in Care' which has a focus on physical activity for those in or leaving care.	

## CHILDREN AND YOUNG PEOPLE

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
<p>20. Councils supported to have a play and leisure policy and action plans in place.</p>		<p><b>Councils</b> Playboard DE</p>	<p><b>Councils</b> (Ards and North Down) – Sport NI EveryBody Active 2020 initiative: This council had 5,594 participants 1,322 of which were sustained participants (attending 11+ times).</p> <p><b><u>PlayBoard</u></b></p> <ul style="list-style-type: none"> <li>• Play strategy developed for Causeway Coast and Glens Council Area</li> <li>• Play Strategy commenced for Derry and Strabane Council</li> <li>• Support provided for the ongoing roll-out and implementation of Newry, Mourne and Down Play Strategy (including 232 children actively involved in decision making regarding capital play delivery)</li> </ul> <p>Support provided for ongoing roll-out of Armagh, Banbridge and Craigavon Play Strategy</p> <p><b>DE</b> - Using funding from the Early Interventions Transformation Programme the Department of Education contracted PlayBoard NI to deliver the Play Shaper programme during from April 2018 to March 2019.</p> <p>The programme required PlayBoard to deliver the programme at a community planning partnership level. This included working with all 11 local councils. Significant work was undertaken within individual areas to embed an understanding and recognition of play and leisure. Key elements delivered by PlayBoard at a community planning / local council level included:</p> <ul style="list-style-type: none"> <li>• Play Shaper sessions - 44 (4 sessions per Community Planning Area x 11 areas)</li> <li>• Programme delivered in 11 CP areas over 44 sessions with 4 sessions per CP area to 213 individual</li> <li>• In addition informal support was provided to 792 individual contacts across community planning areas including local councils.</li> </ul> <p>The expected longer terms impacts of the programme were:</p> <ul style="list-style-type: none"> <li>• An improved recognition and understanding of play amongst service providers and policy makers; and</li> <li>• The embedding of play within community planning partnerships/ plans. (Work included a range of support sessions and information to a variety of key stakeholders including government.)</li> </ul> <p>The post project evaluation highlights an improved awareness, knowledge and understanding of play from those who participated.</p>	<p style="text-align: center;">A greater proportion of children and young people are achieving recommended levels of physical activity.</p> <p style="text-align: right;">20</p>

## CHILDREN AND YOUNG PEOPLE

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
21. Every child over the age of 8 provided with the opportunity to participate in at least 2 hours per week of extra-curricular sport, physical recreation or play.		DfC, DE, EA, HSC Sport NI Councils Playboard DoH	<p><b>DfC</b> - Neighbourhood Renewal continues to work collaboratively with organisations, including statutory, in the provision of sporting facilities, equipment and revenue projects that promote youth physical activities.</p> <p><b>DE</b> - The Department of Education's guidance recommends two hours of quality education each week. The Department will be undertaking a survey of PE in schools through the School Omnibus survey to ascertain the extent to which this guidance is met.</p> <p><b>PlayBoard</b></p> <ul style="list-style-type: none"> <li>PlayBoard's Positive PlayGrounds programme, which supports the development of an active play ethos and introduces new active play opportunities within Primary Schools and school grounds was delivered within 13 primary schools, enhancing pupil opportunities to engage in active play at break times and as part of the wider educational curriculum</li> <li>Four schools successfully completed PlayBoard's 'Taking Outdoor Play Seriously' (TOPS) play quality award. Through TOPS's PlayBoard worked with teaching, non-teaching staff and children within the schools to transform the outdoor space, introducing a wide range of playable, active elements aimed at encouraging children to play more outdoors during recess time. As a result of the programme 2 schools increased the amount of activity time available at recess periods.</li> </ul>	A greater proportion of children and young people are achieving recommended levels of physical activity.
22. Subject to DE budget allocations, continued delivery of the Curriculum Sports Programme (CSP).		<b>DE</b>	<b>DE</b> - Funding was provided to provide the CSP in this period to provide coaching to young people at KS2. This also includes education on healthy lifestyles and using sport to develop resilience and mental health.	

CHILDREN AND YOUNG PEOPLE				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
23. Increased awareness of the CMO's recommended levels of physical activity amongst children and young people.		HSC, DoH Sport NI DE, DfC safefood Playboard	<p><b>PHA</b> - The CMO guidelines for children are promoted through initiatives and programmes e.g. Active School Travel Programme, Obesity Prevention Initiatives for Children, Council supported programmes and Trust funded training initiatives. Guidelines are promoted to partners through representation by PHA on a variety of fora at regional and local level. PHA continues to promote the guidelines through a range of media opportunities. Infographics of the CMO guidelines have been distributed to health professionals including GP practices. A new resource for parents of children with a disability was developed in 2017/18.</p> <p><b>DfC</b> - Neighbourhood Renewal continues to work collaboratively with organisations, including statutory, in the provision of sporting facilities, equipment and revenue projects that promotes youth physical activities.</p> <p><b>Safefood</b> continue to do this through the START campaign (<a href="http://www.makeastart.org">www.makeastart.org</a>)</p>	A greater proportion of children and young people are achieving recommended levels of physical activity.

CHILDREN AND YOUNG PEOPLE				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
24. Increase opportunities for participation in play and physical activity for children and young people particularly in areas of deprivation.		DfC, HSC Councils Playboard DE	<p><b>DfC</b> - Neighbourhood Renewal continues to work collaboratively with organisations, including statutory, in the provision of sporting facilities, equipment and revenue projects that promote youth physical activities.</p> <p><b>PHA</b> - The PHA as part of Active School Travel, is promoting the Daily Mile in participating schools. It is working with DoH, DE and EA to promote the scheme more widely.</p> <p><b>PlayBoard</b></p> <ul style="list-style-type: none"> <li>• 882 children of compulsory school age participated in 22 outdoor, active play sessions over the months of July and August in rural locations and areas of deprivation. Programme delivered by PlayBoard in conjunction with Newry, Mourne and Down District Council</li> <li>• In supporting above delivery, PlayBoard delivered play volunteer training to 24 community based volunteers enhancing their ability to plan and deliver active play sessions supported by access to a number of play pods provided by NMD council</li> <li>• 902 children and young people participated in community based free play sessions with a focus on increasing active play with a focus on areas of deprivation</li> <li>• 2,537 children involved in play supporting SAC settings benefitted through ongoing work with settings to enhance play spaces and opportunities</li> </ul>	A greater proportion of children and young people are achieving recommended levels of physical activity.

## CHILDREN AND YOUNG PEOPLE

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
25. Increased participation in active travel to and from school through the Active School Travel programme and other initiatives.		DfI, DE HSC	<p><b>DfI</b> - The Active School Travel programme (AST) - DfI and PHA continue to co-fund the AST programme which is delivered under contract by Sustrans NI. The most recent Annual Monitoring Report for the programme (September 2018 to June 2019) shows 180 schools received direct support (60 Level 1, 60 Level 2, and 60 Level 3) and 169 received light touch support at the Extended Support level. In total 349 schools participated in the programme.</p> <p>The overall percentage of pupils that usually travel actively to school increased from 35% at baseline to 53% at the end of 2018/19 school year across those schools receiving direct support (180 no. schools).</p> <p><b>DE</b> - Supervised walking to and from school with a parent or other responsible adult aligns well with the personal, social and development requirements of the Curricular Guidance for Pre-School Education, through which young children can acquire experience of their immediate surroundings.</p> <p><b>PHA</b> - Active School Travel Programme continues and 60 new level 1 schools joined the scheme in 2017- 2018. A total of 289 schools participated during the school year. The 2017-18 evaluation report showed that at participating schools there was a 10 percentage points increase in children actively travelling to schools (walking and cycling) from 34% to 44%. The percentage of children who normally travelled to school by car fell from 58% to 47%.</p>	A greater proportion of children and young people are achieving recommended levels of physical activity.



**LIFE-COURSE / ADULTS AND THE GENERAL POPULATION**

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
26. An integrated regional campaign to raise public awareness of healthy eating, physical activity and weight management delivered based on evidence and evaluation.		<b>HSC</b> FSA <i>safefood</i> Com/Vol	<p><b>PHA</b> – At the Department’s request, the Choose to Live Better Campaign did not run during this period. However, PHA made use of social media to present information to the public.</p> <p><b>Safefood</b> - See outcome 13 – START campaign</p> <p><b>FSA</b> - Building on the success of the ‘Know your Calories’ consumer campaign in 2018, phase 1a of the campaign was delivered during 2019. This involved digital advertising, video-on-demand and social media advertising of existing resources to continue to raise awareness of the recommended daily calorie intake for men and women and where to find calorie information when shopping and eating out. Evaluation of Phase 1 and 1a has been used to inform Phase 2 of the consumer campaign currently being delivered in partnership with PHA.</p>	Levels of overweight and obesity in the general population reduced.
27. Co-ordinated pilots developed, delivered and evaluated, which specifically deal with improving the obesogenic environment.		<b>Councils</b> HSC, DoH Vol/Com private sector	<p><b>FSA</b> – The Innovation Lab team (DoF) provided feedback to partners FSA, PHA, <i>safefood</i> and DoH on their 2018/19 project to apply behavioural insights to the application of the minimum nutritional standards for catering in HSC settings. The project findings were inconclusive due to the complexity of the catering environment, but learning achieved was useful to consider in the 2019/20 review of the minimum nutritional standards.</p>	
28. Evidence based weight management interventions available in a range of settings.		<b>HSC</b> Councils	<p><b>PHA</b> – A community based ‘Choose to Lose’ 12 week weight management programme has been delivered in all five Trust areas. It is currently being evaluated</p> <p><b>Councils</b> – A number of council areas continue to deliver CookIt! And Weight to Health programmes, and nutrition information sessions to youth groups. The SHSCT in conjunction with the MUDC deliver ‘Kids in Care’ which has a focus on physical activity for those in or leaving care.</p>	Levels of overweight and obesity in the general population reduced.
29. Development, dissemination and evaluation of a self-led weight loss programme for individuals providing tools to help people to lose weight in a healthy and sustainable way.		<b>safefood</b> HSC	<p><b>Mid Ulster Council</b> - deliver the Make a Change project - one to one support for individuals interested in changing their lifestyle to become more active or eat more healthily. Health and wellbeing Officers support individuals over a period of time to set goals and motivate them to achieve behavioural change. This councils also delivered 5 CookIt! Programmes in 2018/19.</p> <p><b>Mid Ulster Council</b> - In addition a pilot slow cooker recipe booklet was produced containing a small number of healthy eating recipes. The pilot is currently being evaluated with the view of rolling this initiative out to further communities in the</p>	

LIFE-COURSE / ADULTS AND THE GENERAL POPULATION				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			<p>future. In 2018/2019, the Council organised a 'Making Links to Workplace Health' event in partnership with Northern Ireland Chest Heart and Stroke and the NHSCT. The event was developed to benefit workplace health champions through raising awareness of local health initiatives and to help support workplace health and well-being plans. There was a focus at the event on healthy eating, physical activity and mental health.</p> <p>Mid Ulster Council also promote nutrition and physical activity messages to all staff through work of the internal health and well-being group.</p> <p><b>Safefood</b> - the weightMate App was available to general public</p>	
30. Work undertaken with the food and retail industry to ensure provision of appropriate portion sizes in public, restaurant and catering settings.		<p><b>FSA</b> Councils <i>safefood</i> Food Industry</p>	<p><b>FSA</b> – The FSA is continuing to lead on the Eating Well Choosing Better programme which supports a reduction in portion size across the food industry as one method of meeting PHE’s sugar and calorie reduction targets. A <a href="#">nutrition sampling survey</a> conducted in partnership with the 11 District Councils during 2017/18 highlighted the large portion sizes of scones sold in coffee shops across NI. Follow up work involved commissioning CAFRE to conduct reformulation trials of scones to meet government guidelines for fat, sugar, salt and calories and the production of guidance for caterers on how to produce healthier scones which included creative methods of reducing the portion size. A successful industry event for bakeries and coffee shops was used to launch the guidance with 73% of caterers attending the event intending to reduce their portions sizes.</p> <p>Two successful industry events for ice cream manufacturers, delivered in partnership with CAFRE, emphasised the scope to reduce portion size with ice cream products.</p> <p>FSA led research on '<a href="#">consumer perceptions to reformulation</a>' conducted during 2018 demonstrated a broad acceptance among NI consumers of smaller portion sizes within certain food categories such as biscuits, yoghurts, ice-cream, puddings, cake and morning goods.</p> <p>Promotion of the <a href="#">Calorie Wise</a> scheme and the <a href="#">MenuCal</a> tool has continued through FSA one-to one support for caterers wishing to achieve the award. The voluntary scheme requires businesses to standardise their portions in order to accurately calculate the energy value of their meals on MenuCal.</p> <p><b>Councils</b> – Councils are continuing to promote FSA’s MenuCal database to</p>	<p>A greater proportion of adults eat a healthy diet.</p>

LIFE-COURSE / ADULTS AND THE GENERAL POPULATION				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			businesses wanting to participate. MenuCal will continue to be signposted during food standards inspections. <b>Safefood</b> - serving size information available online	
31. Support provided for calorie labelling of alcoholic beverages.		FSA, DoH UK-wide Alcohol Industry	<b>FSA</b> - Following the submission of the industry self-regulatory proposal in March 2018, a series of bilateral dialogues with the sectors took place to encourage them to improve the level of their commitment.  In June 2019 the SpiritsEUROPE Annual Congress in Paris, representatives of the spirits' industry signed a Memorandum of Understanding on the labelling of spirits drinks in which they commit over the coming years, to provide the energy value on label and the list of ingredients off label. In addition to spiritsEUROPE, six companies signed individually as well as 4 national associations (Spain, Poland, Ireland, and the Netherlands).	A greater proportion of adults eat a healthy diet.
32. Following a rapid evidence assessment of current research, findings on insights specific to Northern Ireland, including identifying the cost of a healthy food basket, action plan developed on practical actions/further research to address food poverty issues.		<b>safefood</b> FSA HSC UU & QUB Vol/Com	<b>Safefood</b> research has inequality built into it. A number of projects were completed, published and commissioned with NI regional data between June 2018-June 2019 (see outcome 48).  The cost of an acceptable and nutritious food basket 2018 was completed during the timeframe of this progress report.  The food poverty network: <ul style="list-style-type: none"> <li>• Shared <a href="#">local research</a> and activities that were ongoing and planned through the networks actions plans and minutes to facilitate a joint up approach</li> <li>• The Network hosted a workshop in September 2018 in Belfast, the event, "<a href="#">Food for Thought</a>" looked at work delivered on the island of Ireland with social supermarkets and at the challenges homeless families in emergency accommodation face in relation food access and nutritional health.</li> <li>• The Network issued three Food Poverty Newsletters, links to those can be found here: <a href="https://www.safefood.eu/Professional/Nutrition/Food-Poverty/All-island-Food-Poverty-Network/All-island-Food-Poverty-Network-newsletter.aspx">https://www.safefood.eu/Professional/Nutrition/Food-Poverty/All-island-Food-Poverty-Network/All-island-Food-Poverty-Network-newsletter.aspx</a></li> </ul>	Healthier food options are available and accessible to the whole population.

LIFE-COURSE / ADULTS AND THE GENERAL POPULATION				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			<ul style="list-style-type: none"> <li>In March 2019, <b>safefood</b> launched their <a href="#">Community Food Initiatives (CFIs) Programme 2019-21</a>, which aims to positively influence the eating habits of families with children in low-income communities across the island of Ireland.</li> <li><b>safefood</b> published an overview of the evaluation of the 2016-2018 programme. <a href="https://www.safefood.eu/SafeFood/media/SafeFoodLibrary/Documents/Professional/CFI-2016-18-evaluation-two-pager.pdf">https://www.safefood.eu/SafeFood/media/SafeFoodLibrary/Documents/Professional/CFI-2016-18-evaluation-two-pager.pdf</a></li> </ul> <p><b>FSA</b> – The FSA and <b>safefood</b> continue to co-chair the All Island Food Poverty Network (AIFPN) with an aim of supporting a co-ordinated and strategic approach to tackling food poverty. Membership continued to increase from government and non-government departments and voluntary and community organisations. The network delivered their annual conference in Belfast in 2018 focusing on the role of social supermarkets in reducing food poverty and highlighting the nutritional needs of families living in emergency accommodation and people experiencing homelessness. The 2019 conference in Dublin explored social prescribing as an approach to addressing food poverty and introduced research from academics across the island of Ireland on food poverty.</p> <p>A secondary analysis from the FSA Food and You survey consumer attitude survey was carried out on food security and healthy eating in Northern Ireland. The <a href="#">findings</a> were presented at the 2018 conference and are available on the FSA website.</p> <p>A subgroup of the AIFPN, was set up in 2018 to review the existing food poverty indicators in NI, assess their relevance and make comparisons with the indicators used in ROI, UK and other countries. The subgroup is chaired by FSA and includes representation from Safefood, DoH, NISRA and the Economic and Social Research Institute. A position paper was produced in 2019 to outline the changing methods and frequency of monitoring of food poverty and food security in NI.</p> <p><b>PHA</b> - The PHA, FSA and <b>safefood</b> officials jointly produced Minimum Nutritional Standards in Health and Social Care in Northern Ireland which were launched in June 2017. The standards cover food and drink served in all catering and retail outlets for staff and visitors across Trust sites including vending and have been modelled on the Eatwell Guide and based on, with kind permission of, Public</p>	

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Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			Health England's publication 'Healthier and More Sustainable Catering: A toolkit for serving food to adults'. An action plan with objectives and outcomes has been developed for the next phase of the project, and implementation of the standards is due to start across all HSC settings which serve food to staff and visitors. The three organisations have recruited a procurement dietitian/nutritionist, employed by SEHSCT to implement the standards and a steering group has been established to monitor implementation. The vision for these standards is that they will be rolled out across local government services and the wider public sector. Innovation Lab - In May 2018 the FSA, PHA, safefood, DoH and SEHSCT began working in partnership with the Innovation Lab team (DoF) on a project to apply behavioural insights to the application of the minimum nutritional standards for catering in HSC settings. The project will apply psychological and social science insights to the implementation of the standards with the specific aim of changing or influencing people's behaviour. An important part of this work will be to use randomised control trials to test the effectiveness of the chosen intervention. A project plan has been created dividing the work into five phases and a project board established to oversee the project with representation from all partner organisations. In October 2017 a workshop was held with key stakeholders to identify where best to roll out a behaviour change initiative along the process of implementation of the standards. The project team are currently conducting a review of the evidence about changing behaviour in relation to food choices in workplace restaurants with a literature review report produced in May 2018. The team are also conducting a scoping exercise of HSC catering outlets to inform the design of the trial.	
33. Nutritional standards in place for staff and visitors in HSC settings and across local government including guidance on procurement and provision, and appropriate vending in HSC settings.		HSC DoH HSCB Councils FSA	<p>Current project led by <b>safefood</b>, PHA and FSA NI:</p> <ul style="list-style-type: none"> <li>• Assessment of foods currently on contract, to determine current compliance with Standards.</li> <li>• Self-assessment tool for caterers designed.</li> <li>• Menu databases evaluated to assess compliance with the Standards</li> <li>• Initial work with BSO re discussions with suppliers on sourcing alternative products.</li> <li>• Training resources reviewed. Nutrition training for Catering staff being planned.</li> </ul>	Healthier food options are available and accessible to the whole population.

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Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			<ul style="list-style-type: none"> <li>Workshop with Innovation Lab to design an intervention to encourage customers to choose healthier foods.</li> <li>Members of the steering group recently met with representatives of the Department of Finance to update colleagues on the progress in healthcare facilities and to discuss the potential of rolling out the standards to other public sector catering facilities.</li> </ul> <p><b>safefood</b>, PHA and FSA NI are working on the revision of the standards to publish the updated version in 2020.</p> <p><b>FSA</b> – Enhanced support provided for implementation of the standards in both HSE and local government settings during 18/19, including procurement and vending. The Nutritionist and Dietitian leading implementation in both settings provide regular updates to the steering group which includes members from the funding partners FSA, PHA and <i>Safefood</i> as well as HSC dietetic, catering and procurement representatives from SESCHT. A review of the standards is ongoing and considers changes to DHSC Government Buying Standards, the PHE Healthier Catering Toolkit and feedback from key staff leading implementation of the standards in HSC and local government.</p> <p>Early discussions have taken place with DoH about wider implementation of the standards across public sector catering.</p>	
34. Key foodstuffs in the marketplace, with the highest contribution of saturated fat, fat, sugars, energy and salt in consumers' diet, identified and a programme of action developed to address this.		FSA CAFRE Councils Food Industry	<p><b>FSA</b> – The FSA continues to work with the local food manufacturing, retail and out of home sectors on the 4-5 year 'Eating Well Choosing Better' programme, which supports local SMEs with food product improvement through reformulation and reduction in portion size to make the healthy choice the easy choice for the NI consumer. The FSA led programme is supported by an EWCB steering group with representation from the manufacturing, retail and out of home sectors, district councils and knowledge providers. The action plan continues to align with DHSC's Childhood Obesity Plan and PHE's Reduction and Reformulation targets.</p> <p>Industry engagement continues through biannual meetings of the FSA led Retail Forum and the Knowledge Provider Working Group. A second successful ice-cream reformulation workshop was delivered in partnership with CAFRE in 2019. A <a href="#">nutrition sampling survey</a> conducted in partnership with the 11 District Councils during 2017/18 highlighted the poor nutritional value and large portion sizes of some scones sold in</p>	Healthier food options are available and accessible to the whole population.

LIFE-COURSE / ADULTS AND THE GENERAL POPULATION				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			<p>coffee shops across NI. Follow up work involved commissioning CAFRE to conduct reformulation trials of scones to meet government guidelines for fat, sugar, salt and calories and the production of guidance for caterers on how to produce healthier scones which included creative methods of reducing the portion size. A successful industry event for bakeries and coffee shops was used to launch the guidance with 73% of caterers attending the event intending to reduce their portions sizes.</p> <p>The FSA is currently providing enhanced support to the bakery sector with a Food technologist leading reformulation trials on a number of bakery products with three pilot bakeries. The trials and resulting report will inform guidance for the bakery industry on successful reformulation which will be launched at an industry event.</p> <p>FSA led research on '<a href="#">consumer perceptions to reformulation</a>' conducted during 2018 demonstrated a broad acceptance among NI consumers of reformulated and resized food products provided that the new products matched old ones in terms of taste, value and the perceived healthiness or allergy risks posed by replacement ingredients.</p> <p>Healthy Catering Guidance for seven different catering sectors in NI is currently being drafted based on the PHE publication, 'Healthier Catering for Different Types of Businesses'. This is due to be published in 2020 and will be distributed to relevant businesses by district council EHOs.</p> <p><b>Councils</b> – A number of Councils continue to deliver a reduced salt campaign, by providing salt shakers with fewer holes to hot food takeaways/fish &amp; chip shops.</p>	
35. Pre-packed foods are labelled with revised mandatory nutrition declaration of energy, fat, saturated fat, sugars, and salt by Dec 2016.		FSA Councils Food Industry	FSA - Mandatory nutrition labelling requirements came into force on 16 <sup>th</sup> December 2016 for prepacked foods. The standardised nutrition declaration requires energy, fat, saturates, carbohydrates, sugars, protein and salt. The FSA and district councils continue to provide support and guidance to Northern Ireland businesses on mandatory nutrition information on pre-packed foods The FSA has developed a <a href="#">webpage</a> explaining the requirements of mandatory nutritional labelling	
36. Manufacturers / retailers supported to provide voluntarily, the repetition of key nutrients on front of pack, to allow customers at a glance to make		FSA Food Industry Councils	FSA – The FSA has continued to engage and support manufacturers and retailers to provide voluntary front of pack labelling. Enhanced support has been provided through partnerships with local Knowledge Providers who encourage SMEs to display voluntary Front of Pack Nutritional Labelling (FOPNL) when undertaking reformulation trials.	Healthier food options are available and accessible to the whole

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an informed choice.			The FSA has developed a <a href="#">webpage</a> explaining the requirements of voluntary front of pack labelling which includes a short video on the scheme.	population.
37. On completion of specific research (to Northern Ireland), work will be undertaken with retailers to increase consumer accessibility to healthier food products sold on promotion.		FSA CCNI Food Industry	<p><b>FSA</b> – Work continues supporting retailers under the FSA led Eating Well Choosing Better (EWCB) programme. Feedback on retailer progress with reformulation, reduced portion size and the development of healthier food and drink products is obtained through the biannual FSA Retail Forum and retailer contribution to the EWCB steering group where case studies have been presented in relation to successful reformulation of own brand products.</p> <p>The FSA continues to access Kantar purchasing data to monitor progress in NI.</p> <p>FSA led research on ‘consumer perceptions to reformulation’ conducted during 2018 demonstrated a broad acceptance among NI consumers of reformulated and resized food products provided that the new products matched old ones in terms of taste, value and the perceived healthiness or allergy risks posed by replacement ingredients.</p>	
38. Food retailers encouraged and enabled to consider reducing point of sale placement of foods which are high in fat, salt, sugar and increasing exposure to healthier foods.		FSA HSC Councils Invest NI Safefood Food Industry	<p><b>FSA</b> – The outcomes of PHE’s Reduction and Reformulation programmes will reduce consumer exposure to food high in fat, salt sugar and calories in retail outlets across the UK including NI. The FSA will use Kantar purchasing data to monitor this progress in NI.</p> <p><b>Safefood</b> - through START campaign parents are encouraged to look at the proportion of HFSS foods and drinks in their supermarket trolley. Promotions and marketing strategies are highlighted to support the public to make changes and to support those working directly with retailers to make change</p>	
39. Caloriewise campaign rolled out in Northern Ireland and improved display of calorie content on menus through the promotion of the ‘MenuCal’ calculator.		FSA Councils Food Industry	<p><b>FSA</b> – The FSA has continued to lead the development of the voluntary calorie labelling scheme ‘<a href="#">Calorie Wise</a>’ in partnership with the 11 District Councils and in particular with the Council Led Health and Wellbeing Working Group. The working group reviewed the scheme in 2018 using feedback from caterers and EHOs, leading to the introduction of a tiered approach to the scheme with the provision of a Silver or Gold award for varying levels of calorie labelling. The FSA worked in partnership with the 11 District Councils to deliver 19 Calorie Wise/MenuCal workshops for caterers across NI from 2017 – 2019 securing 288 attendees</p>	Healthier food options are available and accessible to the whole population.



**LIFE-COURSE / ADULTS AND THE GENERAL POPULATION**

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			<p>representing 191 businesses. An increasing number of businesses achieved the Gold award in 2018/19 to include a national fast food chain with 29 outlets, six hospital sites in the NHSCT and a number of independent fish and chip shops. Enhanced support is being provided by FSA in 2019/20 with one-to-one support available to caterers wishing to apply for the award. This led to the support of over 40 catering businesses in NI by mid 2019 with two more Health Trusts working towards the award in 2019.</p> <p>The MenuCal tool continues to be promoted at events, workshops and at industry updates and presentations. The number of users has showed a steady increase from 2017 – 2019 with a significant increase in the numbers of recipes inputted and returning sessions by existing users.</p> <p><b>Councils</b> –The eleven District Councils in Northern Ireland agreed during April 17 to develop and implement a joint initiative with FSA NI on the Caloriewise scheme. A number of Councils have delivered MenuCal workshops in conjunction with FSA. EH teams will provide ongoing signposting to interested businesses. Other Councils are in the process of arranging similar workshops. Focusing on businesses the EH team will provide ongoing signposting to interested businesses.</p>	
<p>40. Active Travel Plan for Belfast implemented and evaluated and consideration given to the wider roll-out of this model.</p>		<p><b>Dfi</b> Councils HSC</p>	<p><b>Dfi</b> - A public consultation on the draft Belfast Bicycle Network was held in January 2017 and in early 2018 a consultation report was published. Dfi has since done further work on developing an active travel feasibility study for north and west Belfast as the lack of good infrastructure in these areas was specifically identified. It was intended that this would feed into the final Network. Some work has been undertaken to revise the proposed network in light of this but the final document has not been produced.</p> <p>Following the four enhanced bicycle routes built in Belfast city centre (Alfred Street / Upper Arthur Street, Durham Street / College Square North, Queen Street and Middlepath Street) further trial cycle lanes have been put in place in Dublin Road, Grosvenor Road, Crumlin Road and Oldpark Road Belfast. There have also been a number of widened footway schemes in Adelaide Street, Linenhall Street, Dublin Road and parts of Wellington Place and Chichester Street. Proposals are also being developed and will be taken forward in parallel with the rolling out of the draft Belfast Bicycle Network when it is agreed. Work continues on the design of one other schemes at High Street and Queens Square.</p>	<p>A greater proportion of adults achieving the recommended levels of physical activity.</p>

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			<p><b>PHA</b> – the PHA continues to support and promote active travel in three key settings: schools (Active School Travel programme), workplaces (Leading the Way with Active Travel – key workplaces in Belfast and the Western area), and communities (Community Active Travel programme in 12 disadvantaged communities in Belfast).</p>	
41. Active Travel to / from workplaces further supported and work undertaken with employers on workplace physical activity schemes.		<p><b>Dfi</b>, DfE DAERA Invest NI DoH HSC</p>	<p><b>Dfi</b> - Regular messages are posted on the Share the Road to Zero social media encouraging people to walk or cycle to work, even for part of their journey.</p> <p><b>Dfi</b> continued to support events, such as Bike Week and Bike to Work Day through promotional activities.</p> <p><b>Dfi</b> launched a new cycling campaign in February 2019 encouraging people to consider cycling for shorter journeys; reminding both cyclists and drivers to be considerate when sharing the road.</p> <p>Great Things Happen', campaign that encourages more people to walk as a travel option and leave the car behind was launched in July 2020</p> <p><b>Dfi</b> HQ building (Clarence Court) has received a silver award as a cycle friendly employer and the Department are encouraging other organisations to achieve the standard.</p> <p><b>PHA</b> – A Leading the Way programme to promote active travel has continued to be delivered in Belfast, with four major employers (PHA, Belfast City Council, Belfast HSC Trust and RQIA) and in the Western area with three key employers (PHA, DCSDC, and Western Trust). These programmes are delivered by Sustrans and involve cycle training, lunchtime walks and cycles, champion training and information and events. PHA is exploring the potential to expand into other Trust areas.</p> <p><b>PHA</b> provides support directly to businesses through the Workplace health service providers, NICHS, Health Matters NI and Developing Healthy Communities. Employee engagement is used to identify and prioritise employee needs and deliver interventions in workplaces. The service is being reviewed and PPI was undertaken in preparation for the service being retendered at the end of 2019.</p>	<p>A greater proportion of adults achieving the recommended levels of physical activity.</p>
42. The Bicycle Strategy for Northern Ireland published and		<b>Dfi</b>	<p><b>Dfi</b> - The Bicycle Strategy was launched in 2015 and was followed by a draft 10yr</p>	<p>A greater proportion of</p>

LIFE-COURSE / ADULTS AND THE GENERAL POPULATION				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
supporting Delivery Plan developed.			<p>Network Plan for Belfast</p> <p>Five year delivery plans were recommended with an emphasis on 'Build' and 'Promote' in the first 10 – 15 years of the strategy and 'Support' in the later years. There were no targets in the strategy but 'ambitions' to significantly increase the proportion of journeys taken by bicycle were set out – particularly for 2025 and 2040. Currently less than 1% of all journeys in Northern Ireland are cycled. The ambition was to increase that to around 6% by 2025 and 12% by 2040.</p> <p>The Bicycle Strategy recommended that we develop urban Bicycle network plans, which we have started in Belfast. In terms of other urban bicycle networks, the aim is to improve the cycling infrastructure in our towns and cities and to bring good quality safe cycle routes within the reach of the majority of residents. A key feature of the proposals is to provide traffic-free or separated routes throughout the towns/cities – routes that will 'feel safe' and that will encourage more people to cycle for everyday journeys.</p> <p>As part of the 'Bike Life' project – in which the Department participates on behalf of Belfast – Sustrans published a report in January 2019 setting out ambitions for cycling levels in 2040 for each of the participating cities. Officials were involved in contributing to that document and the ambition published in it for Belfast is broadly similar to what was published in the Bicycle Strategy. The document can be viewed at this link: <a href="https://www.sustrans.org.uk/media/2940/2940.pdf">https://www.sustrans.org.uk/media/2940/2940.pdf</a></p>	adults achieving the recommended levels of physical activity.
43. Improved awareness and achievement of the CMO's guidelines for physical activity, including older people.		HSC DoH	<p><b>PHA</b> – The roll-out of the Moving More Often training programme is continuing across the Trusts to support increased physical activity in older people. A range of initiatives are supported through HSC Trusts, Councils and local partnerships to promote and encourage physical activity (e.g. C25K, Parkrun, walking groups, cycling initiatives, etc.). The physical activity guidelines are promoted regularly via PR/media opportunities, training programmes provided by HSC physical activity coordinators and a range of initiatives and programmes supported by the PHA. Step challenges continue to be promoted through contracts with a range of organisations as a follow on from the PHA public information campaign launched in June 2016. An evaluation of the community step challenges has recently been completed. The 'Walking for Health' programme encourages people, particularly those who take little exercise, to undertake short regular 'health' walks primarily in their communities. The PHA funds physical activity co-ordinators in local HSC</p>	A greater proportion of adults achieving the recommended levels of physical activity.

**LIFE-COURSE / ADULTS AND THE GENERAL POPULATION**

Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			Trusts who have a key role in overseeing and developing the “Walking for Health” programme in local areas. This includes the provision of training, insurance and support for walk leaders. In April 2018 the PHA insured 1840 Walk Leaders who are leading walking for health initiatives throughout Northern Ireland. PHA commissions five community gardens and allotment programmes from the Conservation Volunteers and Groundwork NI. These programmes help people to become more physically active as well as growing healthy, nutritious food.	
44. Increased promotion of physical activity within health and social care settings through development of physical activity referral pathways.		<b>HSC</b> Councils	<b>PHA</b> – A standardised regional model for Physical Activity Referral Schemes (PARS) has been developed and will be tested in 2019, prior to full roll out across all 11 Councils.	
45. Sports facility Strategy developed for Northern Ireland subject to evaluation of the 11 District Council reports on existing sporting facilities.		<b>Sport NI</b> Councils	<b>Councils</b> (Ards and North Down) – Sport NI EveryBody Active 2020 initiative: This council had 5,594 participants 1,322 of which were sustained participants (attending 11+ times).	A greater proportion of adults achieving the recommended levels of physical activity.

DATA AND RESEARCH				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
46. Robust monitoring and evaluation measures in place for every short term outcome.		All	<b>PHA</b> - The PHA continues to evaluate the impact of all new programmes or initiatives to inform future services and add to the evidence base. The Choose to Lose pilot evaluation is near completion, and an evaluation framework is being developed for the new Early Years Obesity Prevention Programme. This work is supported by the PHA Health Intelligence team. All PHA contracts with service providers are subject to quarterly monitoring.	Obesity strategy, policy, research and practice supported by a robust knowledge / evidence base.
47. AFFFA update report published annually.		DoH	<b>DoH</b> - The 2017-2018 report was published online in January 2019. The report can be viewed online at <a href="https://www.health-ni.gov.uk/publications/framework-preventing-and-addressing-overweight-and-obesity-2012-2022-progress-report-2015-19-1">https://www.health-ni.gov.uk/publications/framework-preventing-and-addressing-overweight-and-obesity-2012-2022-progress-report-2015-19-1</a>	
48. Obesity, physical activity and food and nutrition prioritised in appropriate research calls.		<b>FSA</b> , UU HSC  QUB, DoH <i>safefood</i>	<p><b>FSA</b> – The National Diet and Nutrition Survey (NDNS) assesses the diet, nutrient intake and nutritional status of the general population of the UK. The FSA, DoH and safefood co-fund a boosted sample of NDNS in NI to achieve representative data on the nutritional status of the local population. The NDNS Rolling Programme comprises of an interview, a 4-day estimated diet diary, physical measurements and a blood and urine sample. The FSA uses NDNS data to provide baseline results for population intakes of marker foods outlined in AFFFA. NDNS data is also used to inform the FSA's Eating Well Choosing Better programme by identifying key foods in the marketplace with the highest contribution of saturated fat, fat, sugar energy and salt in NI consumer diets. The data is also used to provide evidence to inform FSA's consumer campaign e.g. identifying demographic and socio-economic groups who have the unhealthiest diets. The latest NDNS data was published <a href="#">April 2019</a>.</p> <p>The Food and You consumer survey is the FSA's flagship survey. It collects information about the public's reported behaviours, attitudes and knowledge relating to food safety and food related issues. The FSA in NI fund an additional module on healthy eating which focuses on consumers eating habits and knowledge of government guidelines including the Eatwell Guide. The FSA shares this data with key stakeholders to help inform and support their work as well as allowing them to target specific areas of work or groups to encourage and improve healthy eating. The latest <a href="#">Food and You survey (Wave 5)</a> published in June 2019.</p> <p><b>QUB</b> - Relevant ongoing research:</p> <ul style="list-style-type: none"> <li>A text message delivered intervention to support weight management in the post-partum period - the Supporting MuMS (SMS) Study – NIHR funded pilot</li> </ul>	Obesity strategy, policy, research and practice supported by a robust knowledge / evidence base.

DATA AND RESEARCH				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
			<p>study underway (PI Prof McKinley).</p> <ul style="list-style-type: none"> <li>• QUB co-applicants (Prof F Kee, Prof M McKinley) on a study examining the feasibility of using text messages with or without incentives for weight loss in disadvantaged men – ‘Game of Stones’, led by Prof Hoddinott, Univ of Stirling). Feasibility study funded by NIHR underway.</li> <li>• The Healthy Habits in pregnancy and beyond (HHIPBe) study – feasibility study has been funded by CHITIN (PI Prof M McKinley) – includes four clinical partners drawn from across Island of Ireland and app and text message components; will complete /early 2022.</li> </ul> <p><b>Safefood</b> published the following <b>safefood</b> commissioned research projects with NI regional data between June 2018-June 2019:</p> <ul style="list-style-type: none"> <li>• Nov 2018 - Weaning practices – qualitative data</li> <li>• May 2019 - What’s on a child’s plate – showed nearly a quarter of food children in NI consume are high in fat, salt and sugar</li> </ul> <p><b>safefood</b> commissioned projects being funded or completed and awaiting publication</p> <ul style="list-style-type: none"> <li>• Cost of an acceptable and nutritious food basket 2018 Why parents give treat foods – qualitative data</li> <li>• Portion size tools (in field)</li> <li>• Why people take food supplements</li> <li>• The world of food – qualitative research exploring the barriers and facilitators for families to healthy eating</li> <li>• The public acceptability of obesity interventions</li> </ul> <p>Other <b>safefood</b> snapshot surveys of the nutritional content completed during the timeframe</p> <ul style="list-style-type: none"> <li>• High protein snack foods</li> <li>• Gluten-free snack foods</li> </ul>	

DATA AND RESEARCH				
Short Term Outcomes	RAG	Delivery Partners	Update	Long Term Outcome
49. Obesity related research widely disseminated as appropriate		<b>safefood</b> <b>IPH, All Stakeholders</b>	<p><b>Safefood</b> - the following conferences were held</p> <ul style="list-style-type: none"> <li>• June 2018 – Nudge, nudge- making the healthier choice the easier choice - <a href="https://www.safefood.eu/Professional/Events/All-island-Obesity-Action-Forum-Nudge-nudge.aspx">https://www.safefood.eu/Professional/Events/All-island-Obesity-Action-Forum-Nudge-nudge.aspx</a></li> <li>• November 2018 – Reformulating the obesogenic environment - <a href="https://www.safefood.eu/Professional/Events/All-island-Obesity-Action-Forum-Reformulating-our-obesogenic-environment.aspx">https://www.safefood.eu/Professional/Events/All-island-Obesity-Action-Forum-Reformulating-our-obesogenic-environment.aspx</a></li> <li>• June 2019 – Children’s rights, Children’s Weight - <a href="https://www.safefood.eu/Professional/Events/All-island-Obesity-Action-Forum-Children’s-rights,-children’s-weight.aspx">https://www.safefood.eu/Professional/Events/All-island-Obesity-Action-Forum-Children’s-rights,-children’s-weight.aspx</a></li> </ul> <p>Monthly newsletter were published highlighting new island of Ireland and international research <a href="https://www.safefood.eu/Professional/Nutrition/All-island-Obesity-Action-Forum/All-island-Obesity-News-archive.aspx">https://www.safefood.eu/Professional/Nutrition/All-island-Obesity-Action-Forum/All-island-Obesity-News-archive.aspx</a> - see outcome 48</p>	Obesity strategy, policy, research and practice supported by a robust knowledge / evidence base.
50. Targets and indicators within this framework monitored via appropriate surveys.		<b>DoH, All Stakeholders</b>	<p><b>DoH</b> - The framework continues to be monitored on an annual basis and revised accordingly. Revised outcomes have been developed for the last three years of the Framework - 2019-2022.</p>	

## UPDATE ON INDICATORS

Indicator	Survey and links	Baseline data	Current <u>available</u> stats
% of overweight/obese expectant mothers.	<b>NI Maternity System (NIMATs)</b> <a href="https://www.publichealth.hscni.net/sites/default/files/2018-12/RUAG%20Childrens%20Health%20in%20NI%20-%202017-18%20-%20Dec%202018.pdf">https://www.publichealth.hscni.net/sites/default/files/2018-12/RUAG%20Childrens%20Health%20in%20NI%20-%202017-18%20-%20Dec%202018.pdf</a>	<b>NIMATs 2010/11</b> – 16.5% of mothers, at the time of booking, were measured as obese. 48% at the time of booking considered pre-obese (overweight) or obese – based on BMI.	<b>NIMATs 2017/18</b> – <b>22.2%</b> of mothers giving birth during 2017/18 were measured as obese at time of booking appointment. This proportion has increased year on year since 2010/11.  <b>52.5%</b> of all mothers at the time of booking, are considered pre-obese (overweight) or obese in 2017/18.
% mothers breastfeeding at: <ul style="list-style-type: none"> <li>• Birth;</li> <li>• Discharge from hospital;</li> <li>• 10–14 days;</li> <li>• 6 weeks;</li> <li>• 3 months;</li> <li>• 6 months.</li> </ul>	<b>Health and Social Care Inequalities Monitoring System (HSCIMS)</b> <a href="https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research/health-inequalities-statistics">https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research/health-inequalities-statistics</a>	<b>HSCIMS 2012</b> – 42% of women in NI breastfeeding on discharge.	<b>HSCIMS 2020 Report</b> – 49% of women in NI breastfeeding on discharge (2018).  There has been a positive change from baseline to date – 7% more mothers are breastfeeding on discharge compared to baseline data
% of infants introduced to weaning foods at six months.	<b>Infant Feeding Survey (IFS)</b> <a href="https://digital.nhs.uk/data-and-information/publications/statistical/infant-feeding-survey">https://digital.nhs.uk/data-and-information/publications/statistical/infant-feeding-survey</a>	<b>IFS 2010</b> – 35% of mothers in NI had given their baby solid food by 4 months, rising to 75% by 5 months old	IFS was due to run in 2015 but did not go ahead. Now noted as 'discontinued' by NHS Digital
% of young children eating appropriate portions of fruit/veg per day.	<b>Infant Feeding Survey (IFS)</b> <a href="https://digital.nhs.uk/data-and-information/publications/statistical/infant-feeding-survey">https://digital.nhs.uk/data-and-information/publications/statistical/infant-feeding-survey</a>	<b>IFS 2010</b>	IFS was due to run in 2015 but did not go ahead. Now noted as 'discontinued' by NHS Digital



Indicator	Survey and links	Baseline data	Current <u>available</u> stats
Prevalence of diet associated risk factors diagnosed in children and young people.	<b>National Diet &amp; Nutrition Survey (NDNS)</b> <a href="https://www.gov.uk/government/collections/national-diet-and-nutrition-survey#current-ndns-results">https://www.gov.uk/government/collections/national-diet-and-nutrition-survey#current-ndns-results</a>	See additional information under Programmes, Projects and Initiatives at Annex C. The next available data from the NDNS will be available in February 2019.	<b>2018/19</b> - Data from NDNS Years 5 -9 demonstrated: <ul style="list-style-type: none"> <li>• Daily average intakes of free sugar in all children's age groups were higher than the recommended limit of no more than 5% of total dietary energy intake</li> <li>• Daily average intakes of saturated fat in all children's age groups were higher than the recommended limit of no more than 10% of total dietary energy intake</li> <li>• Average daily intake of fibre in all children's age groups was lower than the recommended minimum level for that age group</li> </ul>
% of overweight and obese children in P1.	<b>Health Inequalities Regional Report (HSCIMS)</b> <a href="https://www.health-ni.gov.uk/publications/health-inequalities-annual-report-2020">https://www.health-ni.gov.uk/publications/health-inequalities-annual-report-2020</a>	<b>2010/11</b> - 5.7% of children in P1 were classed as obese and 22.7% were classed as overweight or obese.	<b>2018/19</b> - 5.5% of children in P1 were classed as obese and 21.8% were classed as overweight or obese (2018).  Children in the most deprived group have higher levels of both overweight (24.8%) and obesity (6.6%), compared to both the NI average and the least deprived

Indicator	Survey and links	Baseline data	Current <u>available</u> stats
% of screen time spent by children and young people.	<b>Young Persons' Behaviour and Attitudes Survey (YPBAS) – 11-16 years old</b> <a href="https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey">https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey</a>	<b>YPBAS 2010</b> – the percentage of pupils who spent 10 or more hours during the last week on each 'screen-based' activity is shown below: <ul style="list-style-type: none"> <li>• Playing computer / console games – 27%</li> <li>• Watching TV, videos &amp; DVDs – 27%</li> <li>• Doing school homework – 27%</li> </ul>	<b>YPBAS 2019</b> – the percentage of pupils who spent 10 or more hours during the last week on each 'screen-based' activity is shown below: <ul style="list-style-type: none"> <li>• Playing computer / console games – 20.8%</li> <li>• Watching TV, videos &amp; DVDs – 24.1%</li> <li>• On social media – 36%</li> </ul>
% Uptake of free school meals (by entitled pupils).	<b>School Meals Census</b> <a href="https://www.education-ni.gov.uk/articles/school-meals-statistical-bulletins">https://www.education-ni.gov.uk/articles/school-meals-statistical-bulletins</a>	<b>2010/11</b> - The uptake level for free school meals by entitled pupils was 78.8%	<b>2018/19</b> - The uptake level for free school meals by entitled pupils was 80.9% (2019).
% of children with dental decay.	<b>Child Dental Survey (CDS)</b> <a href="https://digital.nhs.uk/data-and-information/areas-of-interest/public-health/children-s-dental-health-survey">https://digital.nhs.uk/data-and-information/areas-of-interest/public-health/children-s-dental-health-survey</a>  <a href="https://bda.org/news-centre/blog/Documents/Briefing-Child-oral-health-Northern-Ireland-March-2018.pdf">https://bda.org/news-centre/blog/Documents/Briefing-Child-oral-health-Northern-Ireland-March-2018.pdf</a>	<b>2003</b> - 56% of 5 year olds had obvious decay experience the primary teeth. 71% of 8 year olds had obvious decay experience in the primary teeth	<b>2013</b> - 48% of 5 year olds had clinical decay in primary teeth and 51% had clinical decay experience. 19% were affected by severe or extensive decay. 56% of 8 year olds had clinical decay in primary teeth and 64% had clinical decay experience. <b>March 2018 – BDA</b> - 72% of 15 year olds in NI have tooth decay compared to 44% in England and 63% in Wales (2018).
% of children and young people making healthier food choices consuming 5 or more portions of fruit/veg per day.	<b>YPBAS</b> <a href="https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey">https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey</a>	<b>YPBAS 2010</b> - 13% indicated they ate the recommended 5 or more portions of fruit or vegetables each day. <b>FSA NDNS 2008-2012</b> - 96% of children aged 11 to 18 years in Northern Ireland did not meet the five-a-day recommendation.	<b>YPBAS 2019</b> – 18.9% indicated they ate the recommended 5 or more portions of fruit and vegetables a day.  <b>YPBAS 2019</b> – 71.8% were aware of the 5-A-Day recommendations.

Indicator	Survey and links	Baseline data	Current <u>available</u> stats
Level of exposure of children and young people to advertising of high salt, sugar, fat products or alcohol.	<b>OFCOM</b>	<p><b>Newcastle University (Institute of Health and Society) 2012</b> - 6.1% of adverts seen by children were about junk food.</p> <p><b>OFCOM 2007-2011</b> published 2013 - In 2011, alcohol advertising accounted for 1.4% of all television advertising seen by children aged 4-15 and 2.2% of all advertising seen by 16-24 year olds.</p>	<p>Public Health England is planning UK-wide consultation before the end of 2019, on introducing a 9pm watershed on TV advertising of HFSS products and similar protection for children viewing adverts online, with the aim of limiting children's exposure to HFSS advertising and driving further reformulation</p> <p><a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/718903/childhood-obesity-a-plan-for-action-chapter-2.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/718903/childhood-obesity-a-plan-for-action-chapter-2.pdf</a></p>
% of children (11–16 years) who are members of a club or team not connected with their school that involved them taking part in sport and physical activity.	<p><b>YPBAS</b>  <a href="https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey">https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey</a></p> <p><a href="https://www.communities-ni.gov.uk/publications/experience-sport-by-young-people-northern-ireland-2019">https://www.communities-ni.gov.uk/publications/experience-sport-by-young-people-northern-ireland-2019</a></p>	<p><b>YPBAS 2010 – ages 11–16</b>            59% are a member of other clubs or teams not connected with their school that involves taking part in sport and physical activity.</p>	<p><b>YPBAS 2019 – ages 11-16</b>            61% are members of other clubs or teams not connected with their school that involves taking part in sport and physical activity – 64% of boys and 58% of girls (2019).</p>
% of children (11–16 years) who played any sport, exercise, or played actively that made them out of breath or hot and sweaty.	<p><b>YPBAS</b>  <a href="https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey">https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey</a></p>	<p><b>YPBAS 2010 – ages 11–16</b>            90% pupils played sport, exercised or played actively that made them out of breath or sweaty in the week prior to the survey. 87% pupils played sport, did physical activity or played actively that made them out of breath or hot and sweaty for a total of at least 60 minutes each day.</p>	<p><b>YPBAS 2016 – ages 11-16</b>            92% pupils played sport or participated in physical activity or played actively that made them out of breath or hot and sweaty for a total of at least 60 minutes each day.</p> <p><b>YPBAS 2019 – ages 11-16</b>            56 % (54% of boys and 59 % of girls) aware of recommendation to spend 60 minutes per day doing moderate to vigorous physical activity (2019)</p>

Indicator	Survey and links	Baseline data	Current <u>available</u> stats
% of children (11–16years) who spent two hours or more per week doing PE or games at school.	<b>YPBAS</b> <a href="https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey">https://www.nisra.gov.uk/statistics/find-your-survey/young-persons-behaviour-attitudes-survey</a>	<b>YPBAS 2010 – ages 11–16</b> 49% pupils normally spend at least 2hrs a week doing PE or playing for a school team.	<b>YPBAS 2019 – ages 11-16</b> 62% of pupils normally spend at least 2 hours a week doing PE or games lessons at school, broken down as 66% of boys and 57% of girls (2019)
Prevalence of overweight and obesity in adults.	<b>HSNI (16+)</b> <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a>	<b>HSNI 2010</b> <ul style="list-style-type: none"> <li>• 23% obese</li> <li>• 36% overweight</li> <li>• 59% overweight and obese</li> </ul>	<b>HSNI 2018/19</b> <ul style="list-style-type: none"> <li>• 25% obese.</li> <li>• 37% overweight.</li> <li>• 62% overweight and obese</li> </ul>
Occurrences of obesity related diseases.	<b>Hospital Inpatient System (HIS)</b>	<b>HIS 2011/12 – 1399</b> individuals were admitted to NI hospitals with a diagnosis of Obesity.	<b>HIS 2018/19 – 2898</b> individuals were admitted to NI hospitals with a diagnosis of obesity.  The 2018/19 figure includes a diagnosis of obesity across 17 diagnostic fields. The previous 2011/12 figure (1145) used only the first 7 diagnostic fields, so a revised baseline figure based on 17 diagnostic fields has been included in this report.
Awareness of ‘5–a–day’ healthy eating.	<b>HSNI (aged 16+)</b> <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a>	<b>HSNI 2010/11</b> - 86% were aware of the guidelines.	<b>HSNI 2018/19</b> - 83% were aware of the guidelines (2019)
% of adults adopting the 5–a–day guidelines.	<b>HSNI (aged 16+)</b> <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a>	<b>HSNI 2010/11</b> - 33% reported meeting the guidelines.	<b>HSNI 2018/19 – 46%</b> reported meeting the guidelines (2019)

Indicator	Survey and links	Baseline data	Current <u>available</u> stats
% of adults experiencing food poverty.	<p><b>HSNI</b> (aged 16+)  <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a></p> <p>Food security questions were asked prior to 2013/14 however these were slightly different.</p>	<p><b>HSNI 2013/14</b> – 7% of households reported that there had been at least one day when they had not eaten a substantial meal in the last fortnight due to a lack of money, while 1% stated they had ever cut the size of a child’s meal because they did not have enough money for food.</p>	<p><b>HSNI 2018/19</b> – 4% of households reported that there had been at least one day when they had not eaten a substantial meal in the last fortnight due to a lack of money, while 5% of households showed signs of food poverty.</p>
% of food manufacturers currently reformulating.	<p>The Food Standards Agency</p>	<p>FSA</p>	<p><b>2018/19</b> - Data not available for NI food manufacturers.</p> <p>Evaluation of two ice-cream reformulation workshops conducted in 2018/19 indicated that 54% of businesses are currently thinking about making their products healthier, 62% are reviewing their products to make them healthier, 91% would consider reformulating ice-cream products to make them healthier and 64% would consider promoting healthier ice-cream products to customers.</p>

Indicator	Survey and links	Baseline data	Current <u>available</u> stats
<p>% of adults who are sedentary.</p>	<p>HSNI (aged 16+)  <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a></p>	<p><b>HSNI 2010/11 – aged 16+</b>            25% were classed as sedentary. It is not appropriate to compare 2010/11 findings with those from 2012/13 and 2016/17 as the questions changed significantly.</p> <p><b>HSNI 2012/13 – aged 19+</b> 45% reported being sedentary (4hrs+per day) on weekdays and 55% reported being sedentary on weekends.</p>	<p><b>HSNI 2016/17 – aged 19+</b> 44% reported being sedentary (4hrs+per day) on weekdays and 54% reported being sedentary for over four hours per day on weekends. NB these figures do not include sitting at work.</p> <p><b>HSNI 2018/19</b> – a partial physical activity module was run for part of 2018/19 and results are not comparable with previous findings derived from the full physical activity module, last run in 2016/17.</p>
<p>% of adults aware of the physical activity recommended by the Chief Medical Officer.</p>	<p>HSNI (aged 16+)  <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a></p>		<p><b>HSNI 2016/17</b> – Questions were not asked - HSNI do not capture awareness of physical activity guidelines (since the new guidelines were introduced). Alternative indicators are being considered for the revised outcomes.</p> <p><b>HSNI 2018/19</b> – a partial physical activity module was run for part of 2018/19 and results are not comparable with previous findings derived from the full physical activity module, last run in 2016/17.</p>

Indicator	Survey and links	Baseline data	Current <u>available</u> stats
<p>% of adults (19+) meeting the levels of physical activity recommended by the Chief Medical Officer.</p>	<p>HSNI (aged 19+) from 2010  <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a></p>	<p><b>HSNI 2010/11</b> - 38% met the recommendations – It is not appropriate to compare 2010/11 findings with those from 2012/13 and 2016/17 as the questions changed significantly.</p> <p><b>HSNI 2012/13</b> – aged 19+ 52% met the recommendations.</p>	<p><b>HSNI 2016/17 – aged 19+</b> 55% met the recommendations.</p> <p><b>HSNI 2018/19</b> – a partial physical activity module was run for part of 2018/19 and results are not comparable with previous findings derived from the full physical activity module, last run in 2016/17.</p>
<p>% of women (19+) meeting the levels of physical activity recommended by the Chief Medical Officer.</p>	<p>HSNI (aged 19+) from 2010  <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a></p>	<p><b>HSNI 2010/11 – aged 19+</b> - 35% met the recommendations - It is not appropriate to compare 2005/06 &amp; 2010/11 findings with those from 2012/13 and 2016/17 as the questions changed significantly.</p> <p><b>HSNI 2012/13 – aged 19+</b> 49% met the recommendations.</p>	<p><b>HSNI 2016/17 – aged 19+</b> 51% met the recommendations.</p> <p><b>HSNI 2018/19</b> – a partial physical activity module was run for part of 2018/19 and results are not comparable with previous findings derived from the full physical activity module, last run in 2016/17.</p>
<p>% of adults (19+) meeting the levels of physical activity recommended by the Chief Medical Officer through 'getting about' (which includes walking and cycling).</p>	<p>HSNI (aged 19+) from 2010  <a href="https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland">https://www.health-ni.gov.uk/topics/doh-statistics-and-research/health-survey-northern-ireland</a></p>	<p><b>HSNI 2010 – no result</b></p>	<p><b>HSNI - 2016/17</b> - no physical activity questions specific to 'getting about' were asked in this survey.</p> <p><b>HSNI 2018/19</b> – a partial physical activity module was run for part of 2018/19 and results are not comparable with previous findings derived from the full physical activity module, last run in 2016/17.</p>

## ACRONYMS

ACBCBC	Armagh City, Banbridge and Craigavon Borough Council
ANBC	Antrim and Newtownabbey Borough Council
BCC	Belfast City Council
BDA	British Dietetic Association
BITC	Business in the Community
BMC	Belfast Metropolitan College
BME	Black and Minority Ethnic
BMI	Body Mass Index
CAFRE	College of Agriculture, Food and Rural Enterprise
CCEA	Councils for the Curriculum, Examinations and Assessment
CCNI	Consumer Council for Northern Ireland
CCP	Child Care Partnerships
CDHN	Community Development Health Network
CDNEP	Community Diet and Nutrition Education Programme
CDS	Child Dental Survey
CIEH	Chartered Institute of Environmental Health
CMO	Chief Medical Officer
CYPSP	Children and Young People Strategic Partnership
DAERA	Department of Agriculture, Environment & Rural Affairs (DAERA)
DE	Department of Education (DE)
DfC	Department for Communities (DfC)
DfE	Department for the Economy (DfE)
DfI	Department for Infrastructure (DfI)
DSTBC	Dungannon and South Tyrone Borough Council
DoF	Department of Finance (DoF)
DoH	Department of Health (DoH)
DoJ	Department of Justice (DOJ)
EA	Education Authority
EH	Environmental Health
EITP	Early Intervention Transformation Programme



EYPs	Early Years Providers
EYTs	Early Years Teams
FODC	Fermanagh and Omagh District Council
FSA	Food Standards Agency
HFfA	Healthy Food for All
HSC/HSCTs	Health and Social Care/Health and Social Care Trusts
HSCIMS	Health and Social Care Inequalities Monitoring System
HSE	Health and Safety Executive
HSNI	Health Survey Northern Ireland
IFS	Infant Feeding System
IOTF	International Obesity Task Force
IPH	Institute of Public Health Ireland
MUDC	Mid-Ulster District Council
NDNS	National Diet and Nutrition Survey
NEET	Not in Education, Employment or Training
NICE	National Institute for Health and Clinical Excellence
NICVA	Northern Ireland Council for Voluntary Action
NIEA	Northern Ireland Environment Agency
NIHF	Northern Ireland Hotels Federation
NIMATs	Northern Ireland Maternity Information System
NOO	National Obesity Observatory
OPSG	Obesity Prevention Steering Group
ORNI	Outdoor Recreation Northern Ireland
PANI (Tool)	Physical Activity and Nutrition Intervention (Tool)
PHA	Public Health Agency
PHE	Public Health England
PHN	Public Health Nutrition
QUB	Queens University Belfast
RCGP	Royal College of General Practitioners
ROPIG	Regional Obesity Prevention Implementation Group
RQIA	Regulation and Quality Improvement Authority
SACN	Scientific Advisory Committee on Nutrition
SIF	Social Investment Fund
SLA	Service Level Agreement

SStHC	Small Steps to Healthier Choices
TBUC	Together Building a United Community
TEO	The Executive Office
UU	Ulster University
VOL/COM	Voluntary / Community
WTHP	Weigh To a Health Pregnancy
WHO	World Health Organisation
YCNI	Youth Council Northern Ireland
YPBAS	Young Persons Behaviour and Attitude Survey

## PROGRAMMES, PROJECTS AND INITIATIVES

### **Active8 Eatwell – FSA and Sport NI**

One of the strands within the Sport NI Active8 programme and designed to enable primary school children to lead active and healthy lifestyles by developing their awareness, understanding and appreciation of the relationship between physical activity and healthy eating.

### **Active Communities Programme – Sport NI**

A lottery funded initiative that aims to increase participation in sport and physical recreation in Northern Ireland.

### **‘Active Living – No Limits’**

Action Plan for Disability Sport. This Action plan is a partnership initiative between government and the disability sector and aims to drive the development of disability sport across Northern Ireland and will encourage access and support for people with disabilities who wish to become involved in sport, either competitively or purely for recreational purposes.

### **Active Schools Travel – DFI/PHA**

This programme encourages pupils to adopt walking and cycling as their main mode of transport to and from school.

### **Baby Feeding Law Group Ireland**

Aims to protect breastfeeding by ensuring that infant feeding choices are as free as possible from commercial interests, and that compliance with the International Code of Marketing of Breast Milk Substitutes is progressed.

### **Best Beginnings**

Set up in 2006 and became a registered charity in July 2007 with breastfeeding as its primary focus for the first two years. From autumn 2008 to November 2010 every pregnant woman in the UK received a copy of the free Best Beginnings DVD *From Bump to Breastfeeding*. Their work also includes the Small Wonders project for sick and premature babies and the Preparing for Parenthood project, both of which aim to reduce the health gap that exists for so many young children in the UK.

### **Children and Young People’s Strategy**

‘Enjoyment of play and leisure’ was identified in the Children’s Services Co-operation Act (Northern Ireland) 2015 as one of eight general parameters used to explain the term well-being in relation to children and young people. This has enabled a specific outcome relating to enjoyment of play and leisure to be developed as part of the Executive’s new Children and Young People’s Strategy. The strategy will consider how all relevant bodies will work together to improve the well-being of children and young people and secure positive outcomes in areas such as health, education, play etc. In terms of play and leisure, it will be important to consider how play could be embedded within existing relevant policies, programmes or strategies.

### **Choose to Live Better**

This public information campaign was launched in January 2013. Supporting material, including leaflets and posters have been distributed to Trusts, GPs and pharmacies across the north.

### **Closing the Gap**

Locally trained health champions are created/developed to train the trainer programmes which aim to increase community capacity and resources. These programmes, focusing on areas of deprivation, promote healthy lifestyles including healthy eating, developing practical food skills and physical activity in education to a range of settings.

### **Community Diet and Nutrition Education Programme**

This is an ongoing initiative designed to increase nutrition knowledge and practical know-how on how to eat more healthily. It uses visuals, interactive activities and tailored talks and has been implemented across a wide range of community groups, organisations, primary schools, and secondary schools.

### **Community Food Initiative**

The new Community Food Initiative Programme 2016–2018 was launched in May 2016. Thirteen projects on the island are receiving funding including four in the north.

### **Cook It!!**

This community-based nutrition education programme aims to increase knowledge and understanding of healthy eating and good food hygiene, and to increase cooking skills. It was developed specifically for use with people living in disadvantaged circumstances.

### **Curriculum Sports Programme**

Delivered by coaches from the GAA and IFA on behalf of the Department of Education, this programme aims to develop the physical literacy skills of our youngest pupils (Years 1–4) and to support teachers in developing their confidence in delivering the PE curriculum.

### **Early Movers – British Heart Foundation**

The *Early Movers* guide was produced to help and support plans and organisation of developmentally appropriate physically active play environments for children under five. It aims to help build on existing practices by supporting the adoption of a whole setting approach to physical activity and providing ideas to extend physical activity provision.

### **Eat, Taste and Grow**

Eat, Taste and Grow aims to increase awareness among primary school children in the north of the origins of their food and local produce, and the role this plays in healthy eating.

### **Eatright.eu – safefood and FSA**

This online resource, eatright.eu, was designed for trainers and teachers working with Early School Leavers (14–16-year olds, not in fulltime employment, education or training (NEET)). The resource aims to meet the needs of early school leavers in a non-traditional learning environment using a blended learning approach to make learning. The resource complements nutrition related curriculum in a way that meets the specific nutrition needs of the Early School Leavers group. It develops practical skills that can be transferred into young people's lives outside of the centres and provides content in a format and style that is tailored to suit this group's needs.

### **The Eatwell Guide**

The Eatwell Guide is a visual representation of how different foods contribute towards a healthy balance diet and includes–Eating at least 5 portions of a variety of fruit and vegetables every day. This was revised in 2016:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/528193/Eatwell\\_guide\\_colour.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/528193/Eatwell_guide_colour.pdf)

### **Every Body Active 2020**

Every Body Active 2020 policy centres upon increasing sustained participation in sport and physical activity amongst under-represented groups and has the overarching aim to “increase quality opportunities for targeted groups to develop and sustain participation in sport across key life course transitions”.

Strand 1 of the policy, Every Body Active 2020: Opportunities invests £6.2m of National Lottery funding through Sport NI into the 11 District Councils to deliver:

- Increased participation in sport and physical activity among women and girls;
- Increased participation in sport among people with a disability;
- Increased participation in sport among socio-economically disadvantaged groups in areas of greatest need; and
- Increased sustained participation in sport and physical activity.

### **Flames**

Flames: Lighting the Way is a physical activity and health programme which aims to inspire, motivate and enthuse children and young people to be more active. The focal point of the programme is on the coaching of young leaders to deliver a programme of physical activity to primary aged children. Training, tools and resources are provided which can be embedded into a young leader's learning to help them gain the knowledge, skills and confidence to deliver health related activities.

### **Front of Pack (FoP) Labelling**

The colour coding on fat, saturated fat, sugars and salt can be used, at a glance, to determine the healthiness of a food, to compare it to other similar products and to consider the overall balance of a basket of food. Combining this, ‘at a glance’ information with the % of the daily reference intake per portion, will enable consumers to understand the contribution, per eating occasion/portion, which the food makes to their diet.

### **FoP – Guidance**

Cross-government guidance is available to assist manufacturers and retailers in the review of their labels. This guidance gives step by step assistance to ensure all labels developed meet the requirements and criteria for the new UK scheme and the guidance includes advice produced by British Retail Consortium on the design, presentation and positioning of the FoP label. The aim of the guidance is to provide consumers with a consistent, recognisable label scheme, wherever they choose to shop.

### **FSA Eat Well Calendar**

FSA produced and distributed our annual Eat Well Calendar for 2016. The calendar combines key FSA messages in relation to dietary health, food labelling and hygiene with healthy balanced recipes to help inform and educate consumers. The calendar was supplied to 60,000 consumers throughout Northern Ireland both directly and through health and social care trusts, charities, schools and community organisations.

### **FSA Understanding NI Consumer Needs Around Food**

(July 2016) following research with local consumers about their understanding and use of retail food labelling information, how this influences their behaviour, and their concerns and priorities

around labelling information. The research involved a combination of eight focus group discussions; eight accompanied shops and a survey using the FSA online panel.

### **Key findings**

Overall, participant attention to labelling information appeared to be driven by a particular need, for example, if participants were following a specific diet or had specific dietary or allergen requirements. Outside of these circumstances, participants tended only to use labels to check the “use by” or “best before” dates and occasionally checked labels when buying new or unfamiliar products.

Reasons for not checking labelling information included participants routinely buying familiar products and therefore not considering it necessary to check product information. A further barrier related to comprehension and interpretation of current labels, with people perceiving them to be overly numerical or requiring complex calculations.

In spite of these barriers, there was a general overall appetite for increased provision of labelling information, especially nutrition information and portion size as a consequence of current social trends towards maintaining a healthier diet. Participants expressed a need for greater visualisation and simplification of data which could encourage more informed, habitual usage of labelling information going forward.

[https://www.food.gov.uk/sites/default/files/consumer-needs-around-food-labelling\\_0.pdf](https://www.food.gov.uk/sites/default/files/consumer-needs-around-food-labelling_0.pdf)

### **Give it a Go!**

This was a healthy living initiative in the Southern area designed to encourage everyone to get active, eat well and ultimately feel good! ‘Give it a Go!’ operated across the four Councils with various activities taking place.

### **Green gyms**

The Belfast PHA office commissions CVNI to provide people in Belfast with opportunities to be involved in the Green Gym programme which improves the environment as well as improving positive mental health, physical activity, personal development, horticultural skills and nutrition. The Green Gym programme targets individuals and groups experiencing health inequalities, with a minimum of 200 participants per year.

### **Healthy Food for Healthy Outcomes – Food in Schools policy – (DE/DoH) Published in September 2013.**

The Food in Schools policy is an overarching policy advocating a ‘whole-school approach’ to all food provided and consumed in schools and developing knowledge and skills in relation to healthy eating and lifestyles. It comprises mandatory and discretionary elements and applies to all grant-aided schools. A supporting framework to oversee implementation of the policy is led by the Food in Schools Forum and supported by a regional Food in Schools Coordinator.

<https://www.education-ni.gov.uk/articles/food-schools-policy>

### **Healthy Start**

UK-wide statutory scheme which aims to improve the health of low-income and vulnerable families. Healthy Start vouchers can be exchanged for cow’s milk, infant formula milk, fresh or plain frozen fruit and vegetables. Healthy Start beneficiaries are also entitled to free vitamin supplements.

### **The Health Well – IPH**

The Obesity Hub / The Health Well website hosts a number of obesity–related websites: Association for the Study of Obesity in Ireland (ASOI), Weigh to a Healthy Pregnancy Webgroup, HSCT PHA Regional Physical Activity Coordinators Group, South Eastern Physical Activity Partnership and Northern Ireland Public Health Research Network (which contains a number of obesity–related Special Interest Groups). **safefood**

### **Happy Healthy Kids**

'Happy Healthy Kids' is one of 4 programmes within the Getting Ready To Learn (GRtL) project (part of the Early Intervention Transformation Programme). 'Happy Healthy Kids' seeks to encourage parents to increase the amount of time children spend on physical exercise and reduce screen time at home.

### **Hearty Lives – BHF**

This programme aims to reduce inequalities in heart disease through working in partnership with local authorities, the NHS and non–profit organisations to improve the health of people at greatest risk of CHD.

### **Inspiring Communities to Get Active Together – Councils (Western)**

The programme has focused on the potential of physical activity to achieve well–being impacts across a broad range of social domains including antisocial behaviour, tourism/access to the countryside, motivation in the workplace, addressing long term unemployment, environmental sustainability, community cohesion & social inclusion, urban rural planning & educational achievement/attendance.

### **Let's take on childhood obesity' campaign – safefood**

A 3 year all–island public awareness campaign targeted at parents of children aged 2–12 years. It encourages parents to make practical changes to everyday lifestyle habits such as portion sizes, drinks and screen time, to make a big difference to the health and wellbeing of children – [www.safefood.eu](http://www.safefood.eu). The campaign is run in partnership with Choose to Live Better.

### **Little Steps**

Developed by *safefood* and the HSE in collaboration with the PHA. The resource offers families practical advice and support in trying to make little changes to their diet and physical activity. Promotion of this page is currently via web/social media. <http://www.littlesteps.eu/>

### **Make a Change**

Part of the Joint Working Arrangements Action Plan between Cookstown, Dungannon and Magherafelt Councils, Northern and Southern HSCTs and the PHA. It is aimed at people aged 18 years or over, who are not currently in paid work and who would like to make a small change in their lifestyle for the benefit of their health.

### **MARA (Maximising Access to Services, Grants and Benefits in Rural Areas)**

The MARA project seeks to improve the health and social well–being of people living in rural areas in the north. It is funded by DAERA and delivered by the PHA. The aim of MARA is to increase awareness of, or help households/individuals access local services, grant or benefits thus supporting those rural dwellers living in or at risk of poverty and social exclusion.

### **MenuCal / Calorie Wise (FSA)**

MenuCal is a free online tool to help food businesses manage allergen information and calculate calories in the food they serve. It supports the government strategy to create 'A Fitter

Future for All', tackling overweight and obesity issues in Northern Ireland.  
<https://www.food.gov.uk/northern-ireland/nutritionni/menucal>

### **Minimum Care Standards**

This standard is based on the guidance set out by PHA in "Nutrition Matters for the Early Years". It includes detailed guidance on nutrition for the under 5s, including meals, snack, drinks; information on special dietary requirements such as for allergies, religious dietary practices, e.g. for Muslim, vegetarian children; information on how to deal with fussy eaters; Menu checklist to assess adherence with dietary guidelines; information on oral health and physical activity; and contact details for Early Years teams in Trusts.

### **National Diet and Nutrition Survey**

FSA, *safe*food and DoH, bought a boost for Northern Ireland within the UK-wide NDNS. Three years were purchased (200 respondents per year). Year 4 was then negotiated with the departments deciding not to purchase Year 5. The composite Northern Ireland report for Years 1 to 4 of NDNS (2008–2012) was published in 2015.

- The AFFFA Strategy identifies “marker foods” (fruit and vegetables; sugary, fizzy drinks and squashes; confectionery; chips and other fried foods; and meat products). The purpose of the “marker foods” is to monitor those food categories which are of public health interest.
- Overall, mean consumption of Northern Ireland “marker foods”, other than fruit and vegetables, (sugar, fizzy drinks and squashes; confectionery; chips and other fried foods; and meat products) tended to be higher in Northern Ireland compared to the UK.
- With the exception of confectionery, consumption of the Northern Ireland ‘marker foods’ (sugary, fizzy drinks and squashes, chips and fried foods and meat products) tended to be higher in the lower income/most deprived tertiles.
- Mean fruit and vegetable consumption expressed in grams and as “5-A-Day” portions showed clear differences between tertile 1 and tertile 3 when split by equivalised income and by NIMDM, with some age groups showing a pattern of increasing intake from tertile 1 to tertile 3. However, mean consumption in all tertiles was below the recommendation of “5-A-Day”. No clear pattern for total meat, red meat, total fish or oily fish consumption was observed in any age group. With the exception of fruit and vegetables, consumption of the Northern Ireland “marker foods” tended to be higher in the lower/most deprived tertiles.

<https://www.gov.uk/government/collections/national-diet-and-nutrition-survey>

### **Play and Leisure Implementation Plan**

The aim of the policy is to establish play within a policy framework that will place high value on play and leisure as an essential element in the development of children's lives, families, communities and society. <https://www.executiveoffice-ni.gov.uk/publications/play-and-leisure-plan-statement-and-implementation-plan>

### **Small Grants Programmes**

These provide a means of engaging with and providing small sums of money to community organisations, to support health improvement programmes, many of which focus on healthier eating and are located in disadvantaged areas.

### **Sport and Physical Activity Survey 2010**

A large-scale adult participation survey which provides baseline data for participation rates that is cognisant of the recommendations of the Chief Medical Officers in the UK. In addition the research provides baseline information for many of the targets identified within Sport Matters.



### **Sport Matters Strategy**

The Strategy for Sport and Physical Recreation, 2009 – 2019 – Sport Matters was developed by DfC, in partnership with Sport NI, and approved by the Executive in December 2009. Through Sport Matters DfC aspires to secure:

- A world class start and lifelong involvement in sport and physical recreation for all people.
- World class performances by teams and individuals.
- A sustainable sporting and physical recreation culture that contributes to broader Government objectives.

### **Sport Matters: Community Capital Programme**

This is a capital grants programme managed and administered by Sport NI. It aims to support the outcomes of Sport Matters and increase participation in sport for those who have not previously been engaged in sport and physical recreation. An overarching imperative for the programme is that facilities developed as a result of awards made should be open to all sections of the community for the encouragement of a wide range of sports.

### **Start to Play**

Early Years programme to engage young children (0–5 years) in physical activity and play.

### **Stop the Spread**

This *safefood* campaign encourages people to measure their waist and reflect on their own weight as individual recognition of body weight status is one of the main barriers to tackling overweight and obesity on the island. The campaign comprised of television, radio, social and digital media.

### **Sure Start**

The Sure Start programme is funded by DE and works closely with DoH to give children in areas of greatest disadvantage the best possible start in life. Sure Start offers a broad range of services focusing on Early Years Care and Education, Family Health and Improved Well Being Programmes to children aged 4 and under and their families.

### **Take Away My Way**

*safefood* in association with St. Angela's College, Sligo have launched 'Take Away My Way', a cookery competition which challenges post primary students in the north and the south of Ireland to take on their takeaway by cooking a healthier version of their favourite takeaway dish.

### **Top Marks**

This programme recognises the important role of schools in contributing to childhood nutrition and the development of the knowledge and skills necessary to make healthier food choices. As part of this programme there has been a range of resources and training provided to schools and key staff groups to support the implementation of the nutritional standards for school food and encourage schools to adopt healthier food choices.

### **Travelwise**

Travelwise is an initiative to encourage the use of sustainable transport options such as walking, cycling, public transport or car sharing.

### **Weigh to a Healthy Pregnancy**

All eligible women with a BMI of 40 or more at booking (around 500 women per year) are being recruited to the intervention which will last throughout pregnancy and until 6 weeks post-natally.

The PHA is also supporting a post–pregnancy intervention study to improve healthy eating and physical activity for women with gestational diabetes.

### **Weigh2Live**

This is an online resource which provides free, independent advice for losing weight (and keeping it off) in a healthy, sustained way. It's practical and contains interactive tools.

[http://weigh2live.safefood.eu/?ga\\_source=www.weigh2live.ie](http://weigh2live.safefood.eu/?ga_source=www.weigh2live.ie)

### **'What's on a label?'**

Developed jointly by *safefood* and the FSA, this is endorsed by the Council for the Curriculum, Examinations and Assessment (CCEA). This resource is designed to assist Home Economics teachers to deliver the food labelling content of the GCSE and GCE Home Economics specifications. It has been created to be engaging and provides many practical examples to assist students to learn in an interactive way.

### **UP4IT!**

The UP4IT! Healthy lifestyle programme aims to address childhood obesity by providing community–based, family–centred programmes. UP4IT! works with parents of under 5's, or those with an overweight child aged 8–11 years.

### **Youth Sport Trust**

Youth Sport Trust - Sport NI invests in the Youth Sport Trust as part of the Active, Fit & Sporty project. Youth Sport Trust delivers the 'Girls Active' Programme in partnership with Armagh, Banbridge & Craigavon District Council and Lisburn City & Castlereagh Borough Council.

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<sup>i</sup> <https://www.health-ni.gov.uk/sites/default/files/publications/DoH/obesity-fitter-future-framework-ni-2012-22.pdf>

<sup>ii</sup> <https://www.health-ni.gov.uk/sites/default/files/publications/DoH/obesity-fitter-future-outcome-framework-2015-19.pdf>