

# **A FITTER FUTURE FOR ALL**

## **Framework for Preventing and Addressing Overweight and Obesity 2012–2022**

**Progress Report on 2015–19 outcomes  
(June 2016– June 2017)**



Department of  
**Health**

An Roinn Sláinte

Máinnystrie O Poustie

[www.health-ni.gov.uk](http://www.health-ni.gov.uk)

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## EXECUTIVE SUMMARY

This report outlines the current progress (June 2016 to June 2017) 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>.

## BACKGROUND

In 1998, the World Health Organisation (WHO) highlighted that obesity was becoming one of the most important factors contributing to ill–health, with increases in prevalence of obesity across the globe. Furthermore, in 2012 WHO stated that ‘Obesity has reached epidemic proportions globally, with at least 2.8 million people dying each year as a result of being overweight or obese. Once associated with high–income countries, obesity is now also prevalent in low– and middle–income countries<sup>iii</sup>’.

Epidemiological research has indicated that being obese can increase the risk of a range of health conditions such as Type II diabetes, some cancers and heart disease. The financial costs of obesity are high and rising, as the prevalence of obesity increases and its impacts are felt across the Life-course. Preventing the rise of obesity will have a positive impact on the health of our communities in the future.

*A Fitter Future for All* acknowledged that change will not come overnight, but that by working together and recognising the impact this will have on future generations, we can collectively make a difference. The document therefore sets a challenging target of reducing levels of obesity over its ten year life span – this is more demanding than previous targets which sought to halt the rise in levels of obesity.

## 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.

## LONG-TERM OBJECTIVES

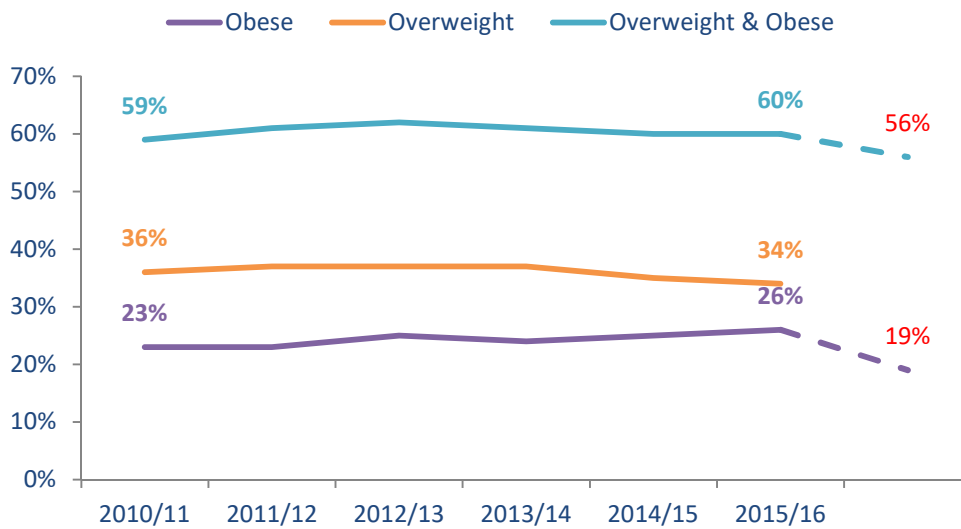
There are two overarching objectives within the Framework which address two main areas. These are to:

- 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.

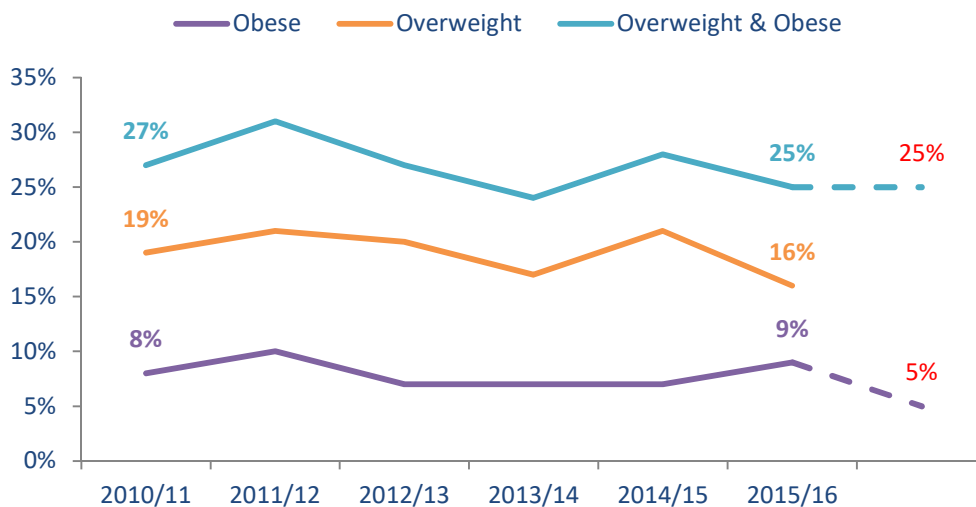
## TARGETS AND INDICATORS

The Framework committed the Department to monitoring and overseeing a range of related statistics and indicators – the most recent figures from the Health Survey (HSNI) are included below.

### Obese & Overweight - Adults (aged 16+)



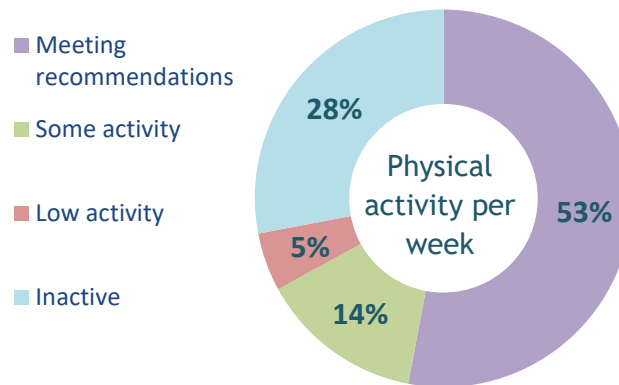
### Obese & Overweight - Children (aged 2-15)



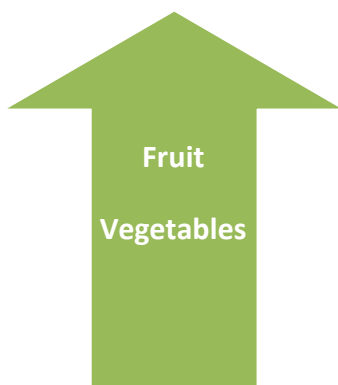
## Physical Activity

Since 2011 when the revised CMO Physical Activity Guidelines were launched, the 2012/13 and 2013/14 health surveys have included a physical activity module. The next update will be available from the 2016/17 health survey.

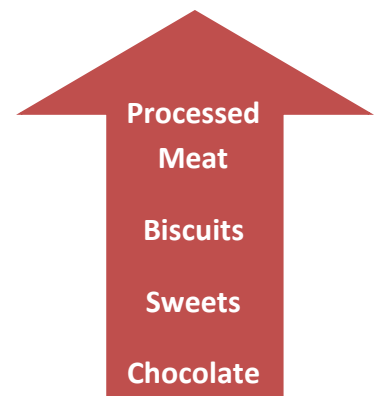
The 2012/13 and 2013/14 surveys reported similar levels of physical activity with just over half of respondents (53%) meeting the recommendations.



## Food and Nutrition

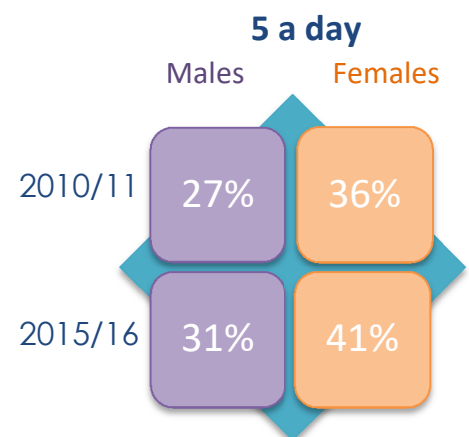


Since 2010/11 the proportion of people eating fruit and vegetables on most days of the week has increased however there has also been an increase in the proportion of people eating processed meat, biscuits, sweets and chocolate.



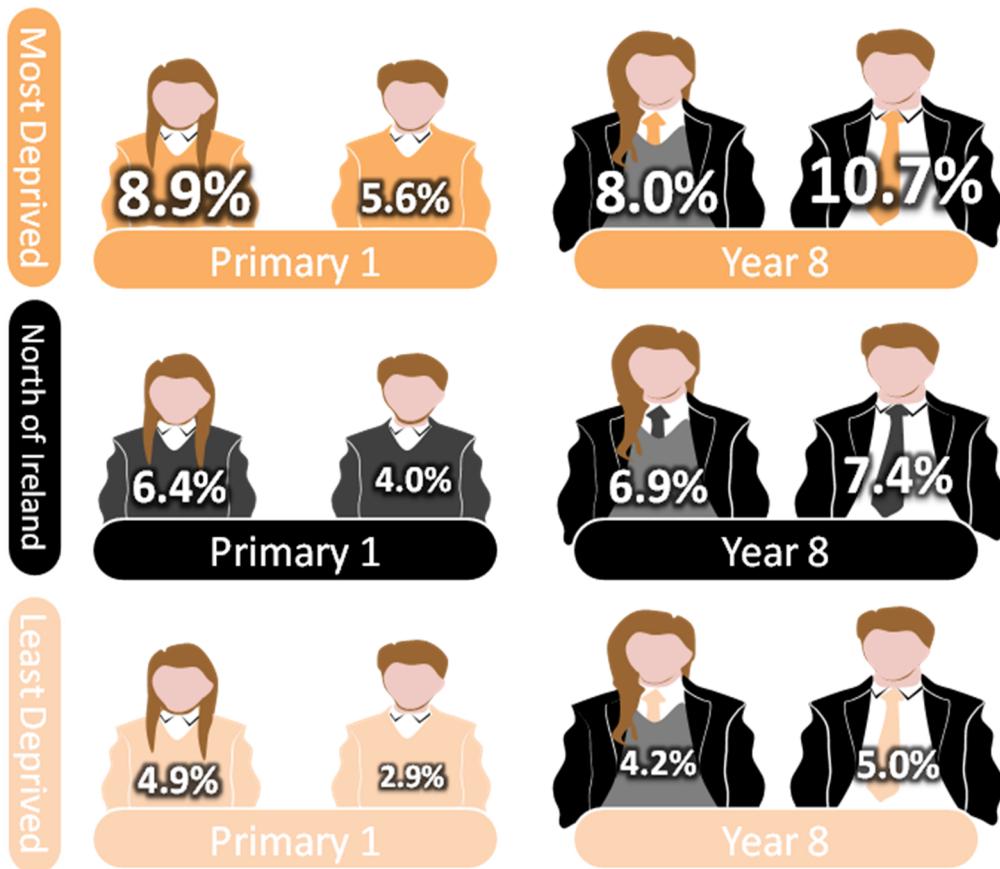
Almost four in ten respondents (37%) ate the recommended five portions of fruit and vegetables a day, an increase from 33% in 2010/11

| Year       | 2010/11 | 2011/12 | 2013/14 | 2014/15 | 2015/16 |
|------------|---------|---------|---------|---------|---------|
| Percentage | 33%     | 32%     | 33%     | 36%     | 37%     |



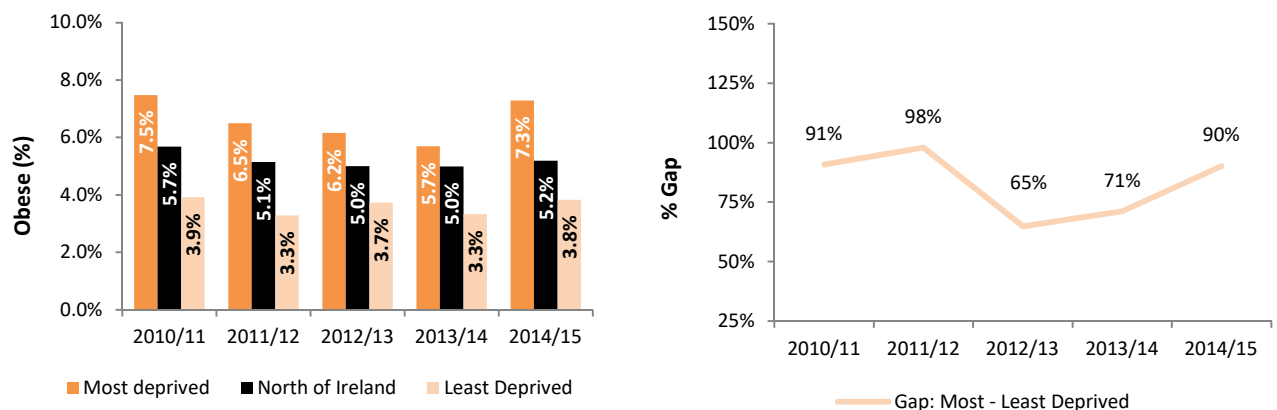
## Health Inequalities

Deprivation analysis of Primary 1 and Year 8 Obesity by Gender, 2014/15:

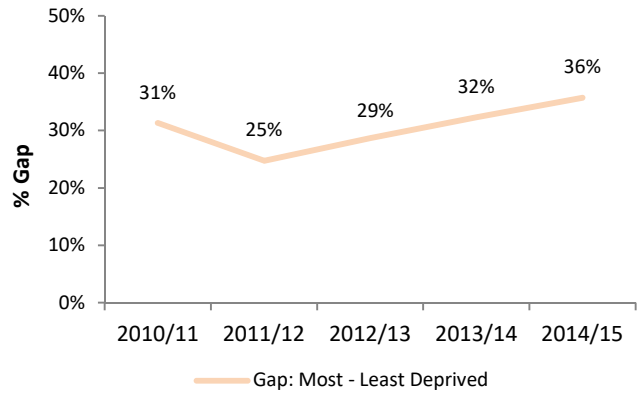
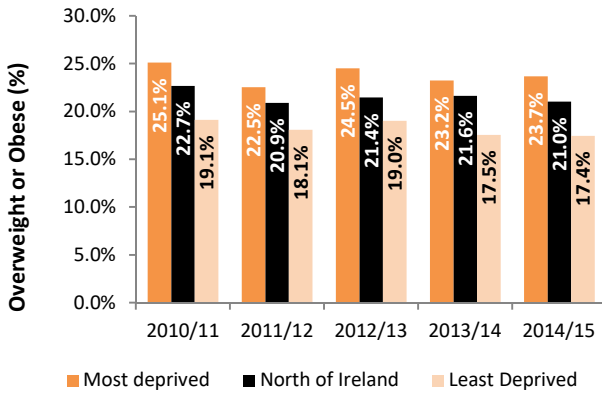


Generally, inequality gaps relating to levels of childhood overweight or obesity fluctuated over the period analysed, with the exception of Primary 1 BMI: Overweight or Obese which widened, despite improvements in rates across the region. The inequality gap for dental registrations narrowed over the period, with improvements in the proportion of the population registered with a dentist seen in both the most and least deprived areas.

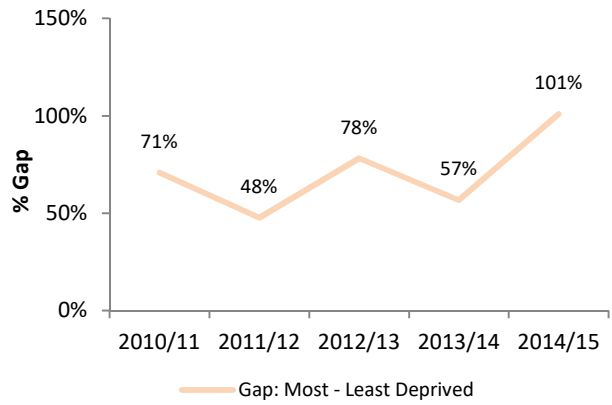
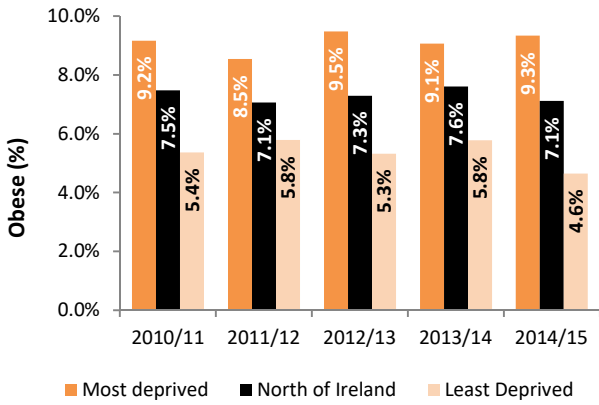
### Primary 1 BMI - Obese



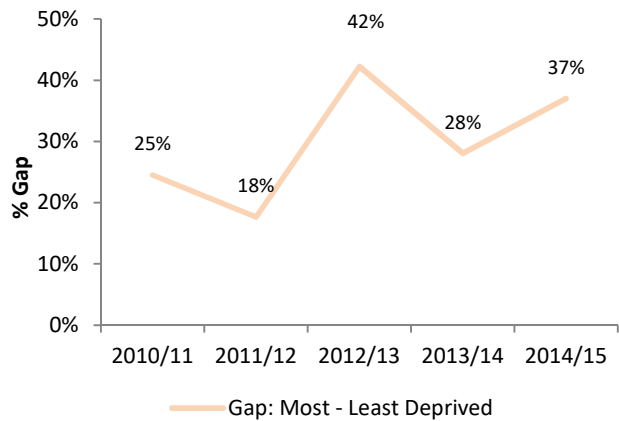
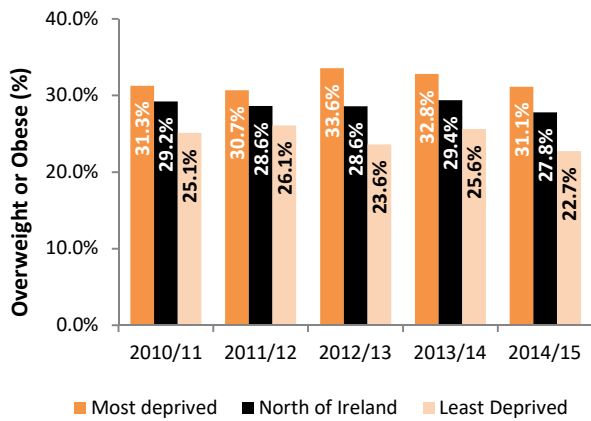
### Primary 1 BMI – Overweight or Obese



### Year 8 BMI – Obese



### Year 8 BMI – Overweight or Obese



## THE OUTCOMES

A range of outcomes were developed to deliver the long-term aims of the Framework. Following the logic model approach, a number of long-term outcomes were initially developed, and these were supported by the subsequent development of a number of short and medium-term outcomes and outputs. These provide the focus for activities and future work.

Outcomes are measured, and the overall success or otherwise of achieving the long-term aims is also captured. 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 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.

Quick identification of progress to targets is indicated via a Red, Amber, and Green (RAG) status:

| <b>(% of 50 outcomes – rounded)</b> |  |     |
|-------------------------------------|--|-----|
| <b>Green</b>                        | On track for achievement / achieved          | 88% |
| <b>Amber</b>                        | On track for achievement but with some delay | 12% |
| <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<br>Safefood<br>FSA<br>Com/Vol | <p><b>PHA</b> – All pregnant women continue to receive the pregnancy book which is updated on an annual basis and contains information on healthy eating and physical activity. Information on nutrition for those trying to conceive and in pregnancy is available online at <a href="http://www.enjoyhealthyeating.info">http://www.enjoyhealthyeating.info</a>. Specific resources on folic acid and Vitamin D supplements in pregnancy, and for those trying to conceive, continue to be disseminated through HSC services. Women participating in the Weigh to a Health Pregnancy programme (WTHP) are provided with information and signposted to web-based information specifically for pregnant women with a high BMI.</p> <p><b>Safefood</b> – Up-to-date information on healthy eating during pregnancy is available at <a href="http://www.safefood.eu">http://www.safefood.eu</a>. The folic acid campaign re-ran from the 14<sup>th</sup> November 2016 for three weeks across digital, social and PR. The next phase of the campaign is currently being planned.</p> <p><b>NICHs</b> - The Northern Ireland Baby Hearts Study (“Baby Hearts”) was funded by NI Chest, Heart and Stroke for the period December 2013 – October 2016, with preliminary results available from May 17. The findings will be used to help provide advice to women of child bearing age and to the clinical and public health professions on how to modify risk factors so that babies may be born with healthy hearts. Preliminary results show a high prevalence of unhealthy risk factors such as low consumption of fruit and veg, and high consumption of fizzy drinks during pregnancy.</p> | Lower prevalence of overweight and obesity in pregnant women. |

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

| Short Term Outcomes   | RAG | Delivery Partners                          | Update  | Long Term Outcome   |
|---|-----|--|---|---|
| <p>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.</p> |     | <p><b>HSC</b><br/>Councils<br/>Vol/Com</p> | <p><b>PHA</b> – The WTHP programme is offered to all pregnant women with a BMI of 40 and above at booking. Following a successful pilot and evaluation in 2015/16, the programme has now been mainstreamed and the PHA has updated the WTHP programme information leaflets in response to evaluation findings. Recurrent funding has been secured to extend the eligibility criteria to include women with BMI&gt;38. Connected Health will be withdrawing Tele-health support at end of September 2017. PHA is working to secure an alternative solution involving provision of Blue-tooth scales and a hub.</p> <p><b>Councils</b> - Council commissioned physical activity based projects include Closing the Gap and Nutritional based activities include Sure Start’s Mums Health Matters.</p> | <p align="center">Lower prevalence of overweight and obesity in pregnant women.</p> |

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

| Short Term Outcomes  | RAG | Delivery Partners                            | Update   | Long Term Outcome  |
|--|-----|--|--|--|
| <p>3. Information published for employers and employees to promote the provision of supportive environments for breastfeeding.</p> |     | <p><b>HSC</b><br/>DoH<br/>Private Sector</p> | <p><b>DoH</b> – Resources available (through the PHA with the HSE for NI), to provide information and practical support to both breastfeeding employees and their employers. There has also been engagement with Unions, Business in the Community (BITC) and the Equality Commission to ensure staff and employers are signposted to these resources.</p> <p><b>PHA</b> - The Breastfeeding Welcome Here scheme has now increased membership to over 550 members and a new interactive map has been added to <a href="http://www.breastfedbabies.org">www.breastfedbabies.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-supporting-breastfeeding-employees-0">http://www.publichealth.hscni.net/publications/sample-policy-supporting-breastfeeding-employees-0</a></p> <p><b>Belfast City Council (BCC)</b> – City Hall and 35 other council-run buildings are registered for the <i>Breastfeeding Welcome Here</i> Scheme. Continue to engage with the business sector to promote the <i>Breastfeeding Welcome Here</i> Scheme in Belfast Cafes and restaurants.</p> <p><b>Early Years</b> – Early Years has registered 6 offices for the <i>Breastfeeding Welcome Here</i> Scheme.</p> | <p>The majority of mother's breastfeed and delay weaning until 6 months.</p> |

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

| Short Term Outcomes  | RAG    | Delivery Partners | Update   | Long Term Outcome   |
|--|--------|-------------------|--|---|
| 4. Public consultation informs the proposed introduction of legislation to support mother's breastfeeding their children in public places. | Yellow | DoH<br>Councils   | <p><b>DoH</b> – Initial exploratory work has been undertaken. However, the development of specific breastfeeding legislation is still under consideration.</p> <p><b>Councils</b> – A number of Councils support the provision of supportive environments for breastfeeding throughout council owned premises. Others actively promote the PHA breastfeeding initiative during programmed inspections of relevant businesses and referring details to the PHA.</p> | The majority of mother's breastfeed and delay weaning until 6 months. |
| 5. Regulations developed by 2015 on foods for specific groups including foods intended for infants and young children.                     | Green  | FSA               | <p><b>FSA</b> – The Food Safety (Information and Compositional Requirements) Regulations (for Northern Ireland) 2016 came into operation on 20th July 2016 allowing the implementation of Regulation EU no. 609/2013, of the European Parliament and of the Council on Food intended for infants and young children, food for special medical purposes and total diet replacement for weight control.</p>  |   |
| 6. Child care facilities' compliance with <i>Nutrition Matters for the Early Years</i> monitored by Early Years teams.                     | Yellow | HSC<br>EYPs       | <p><b>PHA</b> – Review of Nutrition Matters for the Early Years training materials is being undertaken by the Public Health Dietitians Group.</p> <p><b>Councils</b> – Actions across various council areas include minimum nutritional standards distributed to nursery schools, Nutritious Nursery Nosh, Guidance for Nursery Staff and ongoing intelligence gathering to support intervention.</p>  | Consistent approach to healthy food within Early Years settings.      |
| 7. Child carers' attendance at <i>Nutrition Matters for the Early Years</i> training a requirement for registration.                       | Green  | HSC<br>EYPs       | <p><b>PHA</b> – Training offered to all childcare providers across all Trust areas and will continue to be rolled out as needed.</p> <p><b>Safefood and Early Years in association with PHA</b> – launched June 2016, 'Little Bites' is a single resource linking early years providers to key information and resources in relation to food in their setting.</p>   |   |

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

| Short Term Outcomes   | RAG | Delivery Partners                                   | Update   | Long Term Outcome   |
|---|-----|---|--|---|
| <p>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.</p> |     | <p><b>HSC</b><br/>EYPs<br/>Vol/Com<br/>Councils</p> | <p><b>PHA</b> – Cook It! updated and delivered in all Trust areas. New Cook It! modules for BME groups produced and disseminated. The new <i>I Can Cook It!</i> developed and rolled out for people with learning disabilities.</p> <p><b>Safefood</b> – The Community Food Initiative (CFI) Programme 2016-2018 was established with 13 projects (4 in NI) across the island. An evaluation is underway.</p> <p><b>NICHS</b> – commissioned an external evaluation of the Health &amp; Homeless programme (which promotes healthy lifestyles and skills to families and young people who are homeless in Belfast and surrounding areas).</p> <p><b>Councils</b> – A number routinely deliver Cook It! <i>Food Hygiene training</i> and <i>Weigh to Health</i>, as well as delivering food labelling advice. In some socially deprived Council areas work is ongoing with Chinese takeaways to provide healthy options and display calories on menus.</p> <p><b>Early Years</b> - Continued delivery of Family Health Initiative in SHSCT to children and families (6 prevention, 4 management). Funding extended by PHA until 31<sup>st</sup> March 2018.</p> | <p>Consistent approach to healthy food within Early Years settings.</p> |

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

| Short Term Outcomes   | RAG | Delivery Partners  | Update  | Long Term Outcome  |
|---|-----|--|---|--|
| <p>9. All early years settings provide a supportive environment for young children to achieve the CMO recommended levels of physical activity.</p>  |     | <p><b>HSC</b><br/>EYPs<br/>Vol/Com<br/>DE<br/>Councils<br/>Playboard</p> | <p><b>PHA</b> – Delivery of <i>Early Movers</i> and <i>Start to Play</i> training is ongoing across all Trust areas. This training will continue for as long as a need is identified.</p> <p><b>Councils</b> - A number of physical activity related programmes are run in various Council areas and these include: training coaches to help increase participation amongst girls, delivery of local Summer Schemes and through the Healthy Towns programme.</p> <p><b>DE/Playboard</b> –Monitoring, verification and support of play based childcare provision of 78 projects, funded under rounds 1 and 2 of the Bright Start School Aged Childcare Grant Scheme.</p> | <p>Physical Activity levels of children are increased.</p> |
| <p>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.</p> |     | <p><b>HSC</b><br/>Vol/Com<br/>DE</p>                                     | <p><b>PHA</b> – Delivery of <i>Early Movers</i> and <i>Start to Play</i> training is ongoing across all Trust areas. This training will continue for as long as a need is identified.</p>   |  |

## 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.               |     | <b>HSC</b><br>Vol/Com<br>Councils               | <p><b>PHA</b> – A range of programmes are currently delivered linked to local need. A new Childhood Obesity Prevention and Weight Management programme is being developed in order to have a regionally consistent, evidence-based programme in place from the early years onwards.</p> <p><b>Early Years</b> – Continued delivery of Family Health Initiative in SHSCT to children and families (6 prevention and 4 management). Funding extended by PHA until 31<sup>st</sup> March 2018.</p>   | 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><br>HSC<br>(via<br>HSCB)<br>RCGP | <p><b>Safefood</b> – the new online blended learning pack is now live and available to GPs. A new communication plan is being developed to promote the resource to general practice teams through the Royal College of General Practitioners (RCGP) and the Health and Social Care (HSC) Group.</p> <p><b>PHA</b> - training for health professionals will be a core component of the new Childhood Obesity Prevention and Weight Management programme referred to at no 11.</p>  | Children and young people make healthy food and physical activity choices. |
| 13. Campaign delivered to raise public awareness of healthy eating; physical activity and weight management aimed at parents of children aged 2 to 12.  |     | <b>Safefood</b><br>HSC                          | <p><b>Safefood</b> – The childhood obesity campaign campaign was delivered across 2014, 2015 and 2016. Evaluation has been completed and is currently being written up. Based on the findings a strategy document is being produced to inform future communications on childhood obesity. The new campaign launched in September 2017.</p> <p><b>Belfast City Council (BCC)</b> – support a range of partnership campaigns / promotional events including ‘Choose to Live Better’ and the Active Belfast Challenge, as part of the work of Belfast Strategic Partnership (BSP).</p> | 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   |
|---|-----|--|---|---|
| <p>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.</p> |     | <p><b>FSA</b><br/> <b>QUB</b><br/> <b>UU</b><br/>                     Colleges<br/>                     HSC<br/>                     Safefood<br/>                     DfE<br/>                     Councils</p> | <p><b>QUB &amp; UU</b> – continue to work with respective Students' Unions to campaign to improve wellbeing, including fitness and general health.</p> <p><b>DfE</b> – FE colleges carry out a range of activities including health clinics, health promotion tutorials, eating disorder seminars, and engagement with college catering providers and the students.</p> <p><b>Councils</b> – A number of Councils deliver Cook It!, <i>Weigh to Health</i> programmes, and provide nutrition information sessions to youth groups. Also 'Fresh Food Route to Healthy Living' publication, 'Growing Communities' supporting community gardens, and <i>Closing the Gap</i>.</p> <p><b>Safefood &amp; FSA</b> – The <i>Eat right</i> resource updated in line with changes to Eatwell Guide (NI) and to include sport/energy drink information. The resource was promoted via e-mailer and postal mail in 2016.</p> <p><b>NICHS</b> - Delivers a 3 week Chesters Challenge Programme (3 x 1/5 hour workshops for 7-9 years olds in schools with greatest needs – free schools meals). Annual internal evaluation conducted showing statistical improvements in knowledge. An External evaluation will be carried out from Sept 2018. Other VOs such as Action Cancer &amp; Cancer Focus also deliver schools based health promotion initiatives. A new Well Schools focus with 'Commit to Fit' initiatives will run from April to June, with a physical activity social marketing campaign running during summer months, supported by Ulster Wildlife, National Trust and others. NICHS is pushing for high quality PE in all primary schools, working with Ulster University and others with a seminar taking place in June 2017.</p> | <p>Children and young people make healthy food and physical activity choices.</p> |



## CHILDREN AND YOUNG PEOPLE

| Short Term Outcomes   | RAG | Delivery Partners                                 | Update   | Long Term Outcome  |
|---|-----|---|--|--|
| 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. |     | DE<br>EA<br>DoH<br>HSC<br>FSA<br>Saferood<br>CCEA | <p><b>DE</b> – The implementation of the Food in Schools policy is monitored through the Food in Schools Forum. The Forum agreed an action plan for 2016/17 which included a number of routine actions as well as:</p> <ul style="list-style-type: none"> <li>• Review of catering for special diets.</li> <li>• Review of nutritional standards.</li> </ul>   | Children and young people are making healthy food choices. |
| 16. Evaluation of the <i>Healthy Breaks Scheme</i> completed and further developed as appropriate.  |     | HSC<br>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. After consideration the findings will be used to influence roll out of schemes promoting healthy breaks and healthy lunchboxes.</p>   |  |
| 17. Support provided for further restrictions of advertising products with high fat, salt, sugar and alcohol to children and young people.  |     | UK-wide   | <p><b>DoH</b> – this is a reserved/excepted matter. The Department continues to advocate for a 9pm watershed on advertising.</p> <p><b>Councils (MUDC)</b> – has identified a new vending partner and will now provide healthy options available across a range of facilities.</p> <p><b>Councils (BCC)</b> – with its strategic partner for leisure (GLL), ensure the provision of healthy options across its leisure facilities.</p> <p><b>NICHS</b> – is calling for minimum pricing on alcohol (MUP) with expert speakers presenting on this topic at a recent seminar. Other charities have signed up to this campaign.</p> |  |

## CHILDREN AND YOUNG PEOPLE

| Short Term Outcomes  | RAG | Delivery Partners                         | Update  | Long Term Outcome  |
|--|-----|---|---|--|
| 18. Youth sector settings have healthy food policies in place.   |     | <b>DE</b><br><b>HSC</b><br>EA<br>Councils | <b>DE</b> - Joint Youth Services Group – this issue is a key action in the Senior Managers Action Plan – this is reviewed regularly. Controlled Provision – Each unit Controlled Delivery Agreement for 2017/18 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 units Service Level Agreement for 2017/18 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. The EA is currently devising a Healthy Eating Policy; determine procedures for healthy tuck shop provision; provide a curriculum programme to share good practice on key issues supporting healthy eating and exercise. | 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><br>Vol/Com<br>Councils         | <b>Councils</b> – A number of councils are delivering Cook It!, <i>Weigh to Health</i> , and nutrition information sessions to youth groups. ‘Kids in Care’ is also delivered in some council areas focussing physical activity opportunities for those aged 16+ living in or leaving care. <i>Slow, Energy efficient</i> , aims to target vulnerable client groups such as young carers/those leaving fostering system/isolated elderly with a 2-3 hr session on use of a slow cooker.   |  |

## CHILDREN AND YOUNG PEOPLE

| Short Term Outcomes   | RAG | Delivery Partners   | Update  | Long Term Outcome  |
|---|-----|---|---|--|
| 20. Councils supported to have a play and leisure policy and action plans in place.   |     | <b>Councils</b><br>Playboard<br>DE  | <p><b>Playboard</b> – Completed development of overarching play strategies for a number of councils. Work focused on the completion of play value assessments and enhancement recommendations for all fixed play areas, alongside recommendations for the development of new fixed play provision and the development of free/community play initiatives. Delivered volunteer community play sessions at 8 locations in July/Aug 2016. Delivered play training to a group of volunteers with further sessions planned for summer 2017. Work is ongoing with Causeway Coast and Glens to develop a play investment strategy.</p> <p><b>DE</b> – DE has recently secured funding through EITP for a project focussed on play and leisure. An element of the proposal focussed on providing training, guidance and support for those who “influence or shape play”. Work has only begun on the design of the project however an element could include working with Councils.</p> | A greater proportion of children and young people are achieving recommended levels of physical activity. |
| 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. |     | <b>DfC</b><br>DE<br>EA<br>HSC<br>Sport NI<br>Councils<br>Playboard<br>DoH | <p><b>Sport NI</b> – invested over £13m into the employment and deployment of 106 FTE coaches across the 11 District Council areas that have resulted in the realisation of over 4m participant opportunities. Many of these have been in primary school extra-curricular settings. The Active Communities Programme has now been replaced by the Everybody Active 2020 Programme which launched on 1 April 2016. It is a four strand investment programme being delivered in partnership with local district councils. Every Body Active 2020 encourages individuals to be more active, more often by offering a wide range of activities at a time and place to suit the participant.</p>   |  |

## CHILDREN AND YOUNG PEOPLE

| Short Term Outcomes  | RAG | Delivery Partners | Update  | Long Term Outcome   |
|--|-----|-------------------|---|---|
| 21. <i>Continued.</i>  |     |                   | <p><b>Playboard</b> – During 2016/17 Playboard established its Taking Outdoor Play Seriously (TOPS) quality programme for schools. The programme is focused on supporting the transformation of outdoor playgrounds into an environment that support active and creative play through the incorporation of loose parts play opportunities. Initial evaluation indicates that as a result of transforming the playgrounds through TOPS children’s engagement in physical activity has increased. To date 5 Primary Schools have successfully completed the 9 month programme, securing the TOPS quality award.</p> <p><b>NICHS</b> – is calling for 2 hours per week high quality physical education within curriculum <u>for all</u> primary schools children and high quality physical activity. NICHS has funded a PhD in Physical Activity to inform the development of local evidence based approaches and interventions and this year’s summer campaign is using social marketing approach and targeting an increase in physical activity for young people and their families.</p> <p><b>Councils</b> – Continue to deliver a range of sports development initiatives including the <i>ClubMark</i> accreditation scheme. Many councils also provide support to a range of community based sport and physical activity programmes through the <i>Support for Sport</i> grant scheme, <i>Amateur Boxing Strategy</i> and holiday play schemes. Other schemes include the <i>School Swim Programme</i> and the <i>Peaceplayers Basketball programme</i>.</p> | <p>A greater proportion of children and young people are achieving recommend –ed levels of physical activity.</p> |
| 22. Subject to DE budget allocations, continued delivery of the Curriculum Sports Programme (CSP). |     | <b>DE</b>         | <p><b>DE</b> – DE continued to fund the Curriculum Sports Programme in 2016/17. During the year, coaches from the IFA and GAA delivered the Programme in 450 primary schools, reaching just over 36,000 pupils.</p>   |   |

**CHILDREN AND YOUNG PEOPLE**

| Short Term Outcomes  | RAG | Delivery Partners  | Update   | Long Term Outcome  |
|--|-----|--|--|--|
| <p>23. Increased awareness of the CMO's recommended levels of physical activity amongst children and young people.</p> |     | <p><b>HSC</b><br/>DoH<br/>Sport NI<br/>DE<br/>DfC<br/>Safefood<br/>Playboard</p> | <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 are have been distributed to health professionals including GP practices.</p> <p><b>NICHS</b> – evaluation of <i>Chesters Challenge</i> schools programme has shown an increase in awareness in PA levels for young people.</p> <p><b>Sport NI</b> – continues to use its investment programmes and communications resources to promote the awareness of the need for a physically active lifestyle.</p> <p><b>BCC</b> – support the promotion of CMO Guidelines for physical activity through the work of <i>Active Belfast</i>, as part of the work of BSP.</p> <p><b>Safefood</b> - physical activity information for parents continues to be available online at <a href="http://www.safefood.eu">http://www.safefood.eu</a></p> <p><b>Playboard</b> – All play training programmes provide a focus on CMO's recommended guidance – <i>TOPS programme</i> incorporates recommended levels of physical activity on award banner.</p> | <p>A greater proportion of children and young people are achieving recommend–ed levels of physical activity.</p> |

## 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<br>HSC<br>Councils<br>Playboard<br>DE | <p><b>Sport NI</b> - An interdepartmental partnership initiative supports the promotion of sport and physical recreation amongst people with learning difficulties and to encourage competitive success through Special Olympics Ulster. Also delivered is the '<i>Women&amp;Girls – Active, Fit and Sporty</i>' initiative designed to encourage greater numbers of women and girls of all ages and abilities to participate in sport and physical recreation.</p> <p><b>PHA</b> - The PHA as part of Active School Travel, is promoting the daily mile in participating schools. Primary schools in Neighbourhood Renewal Areas in the West are also being offered support to roll out the daily mile initiative. A small number of grants have been allocated to schools or community groups under the Active Belfast Grants Scheme to encourage children to become more physically active.</p> <p><b>Dfi</b> – the third year of the <i>Active School Travel</i> programme (jointly funded with PHA) finished in July 2016. A further five year programme started in August 2016. This continues to provide school children at participating schools with opportunities to travel to school through physical activity means like walking and cycling.</p> <p><b>Councils</b> – Activities include the School Swim Programme and provision of Everybody Active 2020 coaches. Councils are currently developing the community plan for their areas, and through the process are identifying rural areas and areas of high social need as areas which need to be addressed.</p> <p><b>Councils (BCC)</b> – provide a comprehensive range of play and physical activity opportunities for children and young people through its community centres, parks outreach programme, sports development programme and community grants schemes including Support for Sport and Active Belfast (in partnership with PHA).</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. <i>Continued.</i> |     |                   | <p><b>Playboard</b> – Over 800 children participated in community play sessions across the Newry, Mourne and Down council area during the summer of 2016. Further sessions are planned for summer 2017.</p> <p><b>DE</b> - As part of the Active Living, No Limits 2016-2021 action plan, DE asked CCEA to develop and publish guidance for schools on the inclusion of children with disabilities in school sport and PE. This guidance, which is due to be launched on 30 August 2017, will take the form of a website called Every Sport for Everyone. CCEA has been working with a range of sporting organisations and with teachers to develop content for this website. DE has recently secured funding through EITP for a project focussed on play and leisure. An element of this proposal is to provide support for parents to ensure they understand the importance of play.</p> <p><b>DE/TBUC</b> – The Summer Camp programme is a headline action described in the Together: Building a United Community (T:BUC) strategy which was announced by the Northern Ireland Executive during 2013. With 101 camps in 2015/16 and 103 camps in 2016/17. Given TEO commitment for funding Camps in 2017-18 the EA have been asked to proceed with awards for individual camps given success to date.</p> | <p>A greater proportion of children and young people are achieving recommended levels of physical activity.</p> |

**CHILDREN AND YOUNG PEOPLE**

| Short Term Outcomes  | RAG | Delivery Partners                | Update   | Long Term Outcome   |
|--|-----|----------------------------------|--|---|
| <p>25. Increased participation in active travel to and from school through the Active School Travel programme and other initiatives.</p> |     | <p><b>DfI</b><br/>DE<br/>HSC</p> | <p><b>DE</b> – supports DfI/PHA’s Active School Travel Programme through the installation of cycle storage facilities in a number of schools who have participated fully in the programme and who have a recognised deficit in cycle parking provision. In 2015/16 £100,000 was invested in the installation of cycle shelters at 17 schools across the north of Ireland. DE will consider making capital funding available in the future for schools who participate in the programme and who require infrastructure improvements to encourage increased levels of cycling/scooting to school; this will be assessed against competing priorities within the available capital budget.</p> <p><b>DfI/PHA</b> – Active School Travel Year 4 was completed in June 2017 and a further 60 schools will join the programme in Sept 2017. There are now 208 participating schools across NI. A report from the first three years of the programme (Sept 2013 – August 2016) showed that at participating schools, walking and cycling increased from 40% to 55% and children being driven to school decreased from 54% to 42%.</p> | <p>A greater proportion of children and young people are achieving recommended levels of physical activity.</p> |



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

| Short Term Outcomes   | RA<br>G | Delivery<br>Partners                               | Update   | Long Term<br>Outcome   |
|---|---------|--|--|--|
| <p>26. An integrated regional campaign to raise public awareness of healthy eating, physical activity and weight management delivered based on evidence and evaluation.</p> |         | <p><b>HSC</b><br/>FSA<br/>Safefood<br/>Com/Vol</p> | <p><b>PHA</b> – A second phase of the <i>Choose to Live Better</i> multimedia public information campaign was launched in June/July 2016 and ran again from Jan-March 2017. The campaign encourages people who are overweight or obese to make small changes to eating habits by reducing the ‘extras’ and increasing activity levels by building up steps. At the Department’s request, there will, however, be no campaigns during 2017/18. The PHA is also working with HSCB to deliver a 2-month obesity awareness campaign in pharmacies across NI, enabling staff to support customers who wish to manage their weight.</p> <p><b>Safefood</b> – Childhood Obesity Campaign – A multi-media public information campaign was delivered across 2014, 2015 and 2016. Evaluation has been completed and currently being written up. Based on the findings a strategy document is being produced to inform future communications on childhood obesity. The new campaign will be launched in September 2017.</p> <p><b>FSA</b> – The Eatwell guide was launched by the FSA in March 2016 to replace the Eatwell plate to reflect the updated dietary recommendations including those on sugar, fibre and starchy carbohydrates from the SACN report on Carbohydrates and Health in 2015. Eatwell Guide resources have been created and distributed to all schools and dietetic departments to ensure consistent messaging from September 2016.</p> | <p>Levels of overweight and obesity in the general population reduced.</p> |

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

| Short Term Outcomes   | RAG | Delivery Partners   | Update  | Long Term Outcome   |
|---|-----|---|---|---|
| <p>27. Co-ordinated pilots developed, delivered and evaluated, which specifically deal with improving the obesogenic environment.</p> |     | <p><b>Councils</b><br/>HSC DoH<br/>Vol/Com<br/>private<br/>sector</p> | <p><b>DfI/PHA</b> – A further 60 schools participated in the fourth year of the Active School Travel (AST) Programme. A further 60 have been recruited for 2017-18, bringing the total involved to 280.</p> <p><b>DE</b> – supports DfI/PHA’s Active School Travel Programme through the installation of cycle storage facilities in a number of schools who have participated fully in the programme. Future installations will be considered against competing priorities within available capital budget allocation.</p> <p><b>Councils</b> – Councils support a range of work to improve the obesogenic environment by programmes such as <i>Snack Smart</i> (council vending), <i>Small Steps to Healthier Choices</i> (SStHC – takeaway food) and the <i>Community Diet and Nutrition Education Programme</i>. Most council areas also support a variety of walking and cycling groups, programmes and initiatives for example the <i>Couch to 5k</i> and <i>Park Runs</i>.</p> | <p align="center">Levels of overweight and obesity in the general population reduced.</p> |
| <p>28. Evidence based weight management interventions available in a range of settings.</p>   |     | <p><b>HSC Councils</b></p>  | <p><b>PHA</b> – Building on the workplace based ‘£ for lb’ weight loss programme, the PHA worked with BITC to develop a resource to support workplaces to deliver their own in-house ‘£ for lb’ programme. A ‘£ for lb’ Champion’s Toolkit has been produced and launched. The community based ‘<i>Choose to Lose</i>’ 12 week programme, which was piloted in Northern HSC Trust area in 2016, is being rolled out across the five Trusts from March 2017 and will be evaluated in early 2018</p> <p><b>Councils</b> – Councils routinely deliver the Cook It! Programme, <i>Weigh to Health</i> programmes to community groups. In addition, some council areas also run projects such as <i>Biggest Loser</i> and <i>Healthy Chinese</i>.</p>  |   |

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

| Short Term Outcomes   | RAG | Delivery Partners                            | Update  | Long Term Outcome   |
|---|-----|--|---|---|
| 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. | G   | Safefood<br>HSC                              | <b>Safefood</b> – The weight-mate app (launched Jan 2016) will continue to be available and will be maintained throughout 2017.   | Levels of overweight and obesity in the general population reduced. |
| 30. Work undertaken with the food and retail industry to ensure provision of appropriate portion sizes in public, restaurant and catering settings.                               | G   | FSA<br>Councils<br>Safefood<br>Food Industry | <b>FSA</b> – Including portion size across industry in all policy areas, e.g. MenuCal requires caterers to consider size of each portion when entering recipe details. Voluntary FoP labelling includes consideration of portion size in retail packs. The FSA will continue to ensure portion size is included in all policy priorities with the food industry including one of three priorities in food product improvement programme noted in outcome 34.<br><br><b>Councils</b> – Councils are continuing to promote FSA’s Menucal database to businesses wanting to participate. Menucal will continue to be signposted during food standards inspections. | A greater proportion of adults eat a healthy diet.                  |
| 31. Support provided for calorie labelling of alcoholic beverages.  | G   | FSA<br>DoH<br>UK-wide<br>Alcohol Industry    | <b>DoH</b> – The Department continues to lobby for the appropriate labelling of alcohol products, both in terms of no/low/lower alcohol products and calorie labelling. This is an area of EU harmonisation, in 2015 MEPs called for the European Commission to introduce a new law that would compel all drinks producers to include the calorie content of products on labels. However, as yet this has not been taken forward.   |   |

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

| Short Term Outcomes   | RAG | Delivery Partners  | Update  | Long Term Outcome   |
|---|-----|--|---|---|
| <p>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.</p> |     | <p><b>Safefood</b><br/><b>FSA</b><br/>HSC<br/>UU &amp;<br/>QUB<br/>Vol/Com</p> | <p><b>Safefood / FSA / Consumer Council</b> – The research ‘What is the cost of a healthy food basket in Northern Ireland in 2016?’ was published in September 2016. The report was launched at the All-island Food Poverty Network workshop entitled ‘New approaches to addressing food poverty’. The research established the cost of a minimum essential food basket for households on the island of Ireland.</p> <p>An all-island food poverty network newsletter is to be developed in 2017. ‘Cooking and food skills – the current picture’ was published in February 2017. The research measured cooking and food skills among adults on the island of Ireland and their relationship with diet.</p> <p><b>Councils</b> – this is supported through the Belfast Strategic Partnership Poverty Steering Group. Enhancing the Food Bank Service is also underway including opportunities to develop the food pack with additional advice including budgeting ideas for better nutrition.</p> | <p>Healthier food options are available and accessible to the whole population.</p> |
| <p>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</p>   |     | <p><b>HSC</b><br/>DoH<br/>HSCB<br/>Councils<br/>FSA</p>                        | <p><b>PHA / FSA / Safefood</b> – A joint project has been established to develop minimum nutritional standards for HSC catering facilities which serve food to staff and visitors. Standards have been produced and launched by the Chief Medical Officer on 16 June 2017 following a consultation. 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. A dietitian/nutritionist is being recruited, funded jointly by the three lead organisations, to be employed by SEHSCT and based in BSO Procurement and Logistics Service.</p> <p><b>Councils</b> – councils are considering options to improve access to healthier vending throughout council areas.</p>  |   |

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

| Short Term Outcomes  | RAG | Delivery Partners  | Update  | Long Term Outcome  |
|--|-----|--|---|--|
| <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.</p> |     | <p><b>FSA</b><br/>CAFRE<br/>Councils<br/>Food<br/>Industry</p> | <p><b>FSA</b> – With robust evidence of the NDNS and Kantar Worldpanel purchasing data, FSA has identified foodstuffs marketed with highest contribution to local consumer diet. FSA is leading a four to five year programme on food product improvement in alignment with PHE priorities of Childhood Obesity Plan with joint ambition to remove 20% of sugar typically consumed by children in NI by 2020. The FSA-led programme in NI is with small and medium sized businesses that manufacture, sell or serve foods of concern to NI diet. FSA is engaging with industry, knowledge providers and Invest NI with an industry focussed event is planned for 27<sup>th</sup> June 2017.</p> <p><b>Councils (BCC)</b> – continue to deliver a reduced salt campaign, by providing salt shakers with fewer holes to hot food takeaways/fish &amp; chip shops in Belfast</p> | <p align="center">Healthier food options are available and accessible to the whole population.</p> |
| <p>35. Pre-packed foods are labelled with revised mandatory nutrition declaration of energy, fat, saturated fat, sugars, and salt by Dec 2016.</p>   |     | <p><b>FSA</b><br/>Councils<br/>Food<br/>Industry</p>           | <p><b>FSA</b> – Mandatory nutrition labelling came into force in December 16, requiring majority of food products to provide nutrition labelling in the declared format. FSA Guidance has been published to assist food businesses. FSA in partnership with CAFRE held a workshop specifically for local businesses and to consider the best support that can be provided through District Councils in September 2016.</p>  |  |

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

| Short Term Outcomes   | RAG | Delivery Partners  | Update  | Long Term Outcome  |
|---|-----|--|---|--|
| 36. Manufacturers / retailers supported to provide voluntarily, the repetition of key nutrients on front of pack, to allow customers at a glance to make an informed choice.          | G   | FSA<br>Food Industry Councils                                    | FSA – DH England is in informal discussions with the EU Commission on infraction. FSA continue to provide support for businesses that are interested in, and are providing, voluntary FoP labelling. The reviewed UK Guidance document includes consumer messaging and in July 2016 the FSA published research on NI consumers understanding of food labels, which included their understanding and use of FoP labelling. Findings of the report have been shared with food industry <a href="https://www.food.gov.uk/northern-ireland/researchni/understanding-ni-consumer-needs-around-food-labelling">https://www.food.gov.uk/northern-ireland/researchni/understanding-ni-consumer-needs-around-food-labelling</a> Findings from this report are providing insight to promotion of consumer messaging to raise awareness and engagement with food labels. | Healthier food options are available and accessible to the whole 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. | G   | FSA<br>CCNI<br>Food Industry                                     | FSA – specific research (for Northern Ireland) on balance of healthy and less healthy food products report was published in March 2016. FSA is planning to include the findings of this research into policy of their 4 to 5 year Food product Improvement programme with manufacturers and retailers as noted in outcome 34.   |  |
| 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.        | G   | FSA<br>HSC<br>Councils<br>Invest NI<br>SafeFood<br>Food Industry | FSA – Northern Ireland specific report considering placement of foods published in March 2016 – see also the update above. As noted in outcome 34 the FSA is engaging with both manufacturers and retailers on UK sugar reduction guidance which includes discussions around sales weighted average of products containing sugar.   |  |

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

| Short Term Outcomes  | RAG | Delivery Partners                                | Update   | Long Term Outcome   |
|--|-----|--|--|---|
| <p>39. Caloriewise campaign rolled out in Northern Ireland and improved display of calorie content on menus through the promotion of the 'MenuCal' calculator.</p> |     | <p><b>FSA</b><br/>Councils<br/>Food Industry</p> | <p><b>FSA</b> – the MenuCal tool is accessible online at <a href="http://www.menucalni.co.uk">www.menucalni.co.uk</a><br/>An accompanying e-learning training package, including promotional videos, is also available for food businesses to support ease of use of the tool. A programme of district council and industry engagement is being rolled out. In September 2016 FSA held its second industry workshop on in Derry/Londonderry. Evaluation of the Industry and District Council engagement has provided evidence for a focussed scheme for Northern Ireland to encourage food businesses to display calories on menus and to provide further targeted support to industry. The Calorie Wise scheme will be developed and implemented in partnership with District Councils.</p> <p><b>Councils general</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>Healthier food options are available and accessible to the whole population.</p> |

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

| Short Term Outcomes  | RA<br>G | Delivery<br>Partners                   | Update   | Long Term<br>Outcome   |
|--|---------|--|--|--|
| <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><br/>Councils<br/>HSC</p> | <p><b>DfI</b> – Work continues on developing a Belfast Bicycle Network. A public consultation was held between January and April 2017; three enhanced bicycle routes have been built in Belfast city centre (Alfred Street, Durham Street / College Square North and Queen Street) and work continues on the design of two other schemes (High Street and Middlepath Street) during 2016/17. Further 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.</p> <p><b>PHA</b> – the PHA continues to support and promote active travel in three key settings - Active School Travel programme, supporting a workplace active travel programme in four key workplaces in Belfast; and through a new Community Active Travel programme in 12 disadvantaged communities in Belfast.</p> <p><b>Councils (BCC)</b> – Supported the promotion and extension of the Belfast Bike Share Scheme.</p> | <p>A greater proportion of adults achieving the recommended levels of physical activity.</p> |



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

| Short Term Outcomes  | RAG | Delivery Partners   | Update   | Long Term Outcome  |
|--|-----|---|--|--|
| <p>41. Active Travel to / from workplaces further supported and work undertaken with employers on workplace physical activity schemes.</p> |     | <p><b>DfI</b><br/>DAERA<br/>DfE<br/>Invest NI<br/>DoH HSC</p> | <p><b>DfI</b> – through initiatives such as Travelwise, the Department has continued to engage with a range of sectors to promote the benefits of cycling. This includes Bike Week and Bike to Work Day, Workplace Travel Plans and the Cycle to Work Scheme. Continue to work with a range of groups to support them in encouraging their staff, customers and clients to cycle their everyday journeys and seek to develop specific interventions where possible.</p> <p><b>Councils (BCC)</b> – Integrated Active Travel as a core element of the BCC staff Health &amp; Wellbeing Strategy.</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. PHA also funds three Workplace Health and Well-being service providers across NI who are targeting support towards SME's with employees at risk including sedentary workers and transport workers.</p> <p><b>NICHS</b> – working with BIC is running a 3-year Activity Works pilot campaign to support employers to tackle sedentary behaviour by increasing activity throughout the working day by 'sweating the small things' – active travel, active meetings and breaks. Evaluation for Y1: 90% changed daily routine to increase PA; 14% increased awareness of CMO guidelines 100% engaged in active breaks; 67% in active breaks and 63% in active travel.</p> | <p>A greater proportion of adults achieving the recommended levels of physical activity.</p> |

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

| Short Term Outcomes   | RAG | Delivery Partners | Update   | Long Term Outcome   |
|---|-----|-------------------|--|---|
| 42. The Bicycle Strategy for Northern Ireland published and supporting Delivery Plan developed.               | G   | DfI               | <p><b>DfI</b> – The Strategy (<i>‘Northern Ireland Changing Gear’</i>) was published in August 2015. <i>‘Exercise – Explore – Enjoy: a Strategic Plan for Greenways’</i> was published on 9<sup>th</sup> November 2016 – this sets out plans for the development of a 1,000km Greenway Network across Northern Ireland for walking and cycling and other active travel and recreational use.</p>   | A greater proportion of adults achieving the recommended levels of physical activity. |
| 43. Improved awareness and achievement of the CMO’s guidelines for physical activity, including older people. | G   | HSC DoH           | <p><b>PHA</b> – The roll-out of the <i>Moving More Often</i> training programme is ongoing across all Trust areas to support increased physical activity in older people. A range of initiatives have been developed through local partnerships to promote and encourage physical activity (e.g. C25K, Parkrun, walking groups, outdoor gyms, cycling initiative 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. Infographics of the CMO guidelines have been distributed to health professionals including all GP Practices.</p> <p>Step challenges continue to be promote through contracts with a range of organisations as a follow on from the PHA public information campaign launched in June 2016. This involved the development of supporting resources, website information, awareness raising and community challenges which were delivered during 2016/17 and continue to be promoted.</p> <p>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 H&amp;SC 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 2017 the PHA insured 1732 Walk Leaders who are leading walking for health initiatives throughout Northern Ireland.</p> |   |

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

| Short Term Outcomes   | RAG | Delivery Partners           | Update   | Long Term Outcome   |
|---|-----|-----------------------------|--|---|
| 44. Increased promotion of physical activity within health and social care settings through development of physical activity referral pathways.       |     | <b>HSC</b><br>Councils      | <p><b>PHA</b> – A standard regional model for Physical Activity Referral Schemes (PARS) is under development and will be introduced from April 2018. It was originally planned to introduce this in April 2017 but this has been pushed back to enable full development of the electronic information system to support the scheme, the development of regional branding and resources and to address some unresolved issues in the specification.</p> <p><b>Councils</b> – a number of councils promotes PARS. Other physical activity pathways are available through cancer and diabetes services. Strength and balance classes are also available in some areas. Kids in Care is also delivered in a number of council areas focussing on those in or leaving care.</p> | A greater proportion of adults achieving the recommended levels of physical activity. |
| 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><br>Councils | <p><b>Sport NI</b> – The NI Facilities Framework (new title) is still being finalised in preparation for submission to the Executive for endorsement. Council Area Plans are still emerging through Sport NI for consideration by DfC.</p> <p><b>Councils</b> – Councils continue to develop community plans although many <i>Facilities Plans</i> are already completed. BCC continues to support its <i>Playing Pitches</i> strategy and the Leisure Transformation programme.</p>   |   |

**DATA AND RESEARCH**

| <b>Short Term Outcomes</b>   | <b>RAG</b> | <b>Delivery Partners</b> | <b>Update</b>  | <b>Long Term Outcome</b>   |
|--|------------|--------------------------|--|--|
| 46. Robust monitoring and evaluation measures in place for every short term outcome. |            | <b>All</b>               | <p><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. Recent evaluations have included the ‘Weigh to a Healthy Pregnancy’ programme, ‘£ for lb’ workplace programme, ‘Healthy breaks’ scheme in schools and the ‘Choose to Lose’ pilot. This work is supported by the PHA Health Intelligence team. All PHA contracts with providers are monitored as per HSC requirements.</p> <p><b>Councils</b> - ANBC – Further development of PHN Hub framework and population of Hub. Preparation of papers on findings from recent research, evaluations, and interventions for publication in peer-reviewed journals. CDNEP talks, visuals and interactive activities tailored based on dietary intake data by life stage and setting. The results of the audit and nutrient profiling to be taken forward under a whole systems settings approach, informing food and nutrition policy development. Recommendations from evaluation to inform phase 2 of SStHC initiative. Study designed to inform food and nutrition policy (top-down) and create demand among staff and public, (bottom-up).</p> | Obesity strategy, policy, research and practice supported by a robust knowledge / evidence base. |
| 47. AFFFFA update report published annually.   |            | <b>DoH</b>               | <b>DoH</b> – A Progress report is published online annually.   |  |

**DATA AND RESEARCH**

| <b>Short Term Outcomes</b>  | <b>RAG</b> | <b>Delivery Partners</b>                                      | <b>Update</b>   | <b>Long Term Outcome</b>  |
|---|------------|---|---|---|
| <p>48. Obesity, physical activity and food and nutrition prioritised in appropriate research calls.</p> |            | <p><b>FSA</b><br/>HSC<br/>UU<br/>QUB<br/>DoH<br/>Safefood</p> | <p><b>FSA</b> – Understanding NI Consumer Needs Around Food Labelling (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.</p> <p><b>safefood</b> – Two research projects funded. “What’s on your child’s plate? Food portion sizes and the proportion of different food groups eaten by children on the island of Ireland” and “Why are adults giving food treats to children?” ‘Cooking and food skills – the current picture’ was published in February 2017. The research included consumer surveys, focus group sessions and experimental study to understand cooking and food skills on the island of Ireland and their impact on an individual’s diet. The ‘Managing food on shift work’ report was launched in October 2016. The research involved surveying more than 1,000 people to better understand the factors that influence food choice and behaviour while working shift hours.</p> | <p>Obesity strategy, policy, research and practice supported by a robust knowledge / evidence base.</p> |

**DATA AND RESEARCH**

| Short Term Outcomes   | RAG | Delivery Partners                       | Update  | Long Term Outcome  |
|---|-----|---|---|--|
| 49. Obesity related research widely disseminated as appropriate                     |     | <b>Safefood IPH</b><br>All Stakeholders | <p><b>safefood</b> – disseminates obesity related research through the following initiatives:</p> <ul style="list-style-type: none"> <li>• All island obesity action workshop (twice a year)</li> <li>• All island obesity action forum closed meeting (twice a year)</li> <li>• All island obesity newsletter (monthly)</li> <li>• Nutrition update (six-monthly)</li> </ul> <p>A workshop took place on 8<sup>th</sup> November 2016 which was hosted in conjunction with the Association for the Study of Obesity on the island of Ireland (ASOI) and the Association for the Study of obesity (ASO) in the UK and focused on the role of appetite in obesity. The workshop examined the role of biology, eating behaviour and the environment on what we eat. Over 100 delegates attended the event and welcomed a range of national and international speakers. A workshop took place in the NIVCA centre in Belfast on 20 June (hosted by ASOI and ASO UK) and focussed on Stigma in Obesity.</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>           | <b>DoH</b> – please see the updated table of indicator and survey results at Annex B.   |  |

## 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>  | <b>2010/11</b> - 48% at the time of booking considered pre-obese (overweight) – based on BMI.                | <b>2012/13</b> - 49% at the time of booking considered pre-obese (overweight) – based on BMI.                         |
| % 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><br><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 <u>breastfeeding on discharge</u> .<br><br><b>CHS&amp;NIMATS</b>     | <b>HSCIMS 2016 Report</b> – 46% of women in NI <u>breastfeeding on discharge (2015)</u> .<br><br>CHS&NIMATS 2014/15 - |
| % of infants introduced to weaning foods at six months.   | <b>Infant Feeding Survey (IFS)</b><br><a href="http://data.gov.uk/dataset/infant-feeding-survey-2010">http://data.gov.uk/dataset/infant-feeding-survey-2010</a>  | <b>IFS 2010</b> – 35% of mothers in NI had given their baby solid food by 4 months.                          | <b>IFS was due to run in 2015 but did not go ahead.</b>   |
| % of young children eating appropriate portions of fruit/veg per day.   | <b>Infant Feeding Survey (IFS)</b>   | <b>IFS 2010</b> –  | <b>IFS was due to run in 2015 but did not go ahead.</b>   |
| Prevalence of diet associated risk factors diagnosed in children and young people.  | <b>National Diet &amp; Nutrition Survey (NDNS)</b><br><a href="http://nationaldiet.co.uk/">http://nationaldiet.co.uk/</a>  |  |   |
| % of overweight and obese children in P1.   | <b>Health Inequalities Regional Report (HSCIMS)</b><br><a href="https://www.health-ni.gov.uk/articles/regional-">https://www.health-ni.gov.uk/articles/regional-</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>2016</b> - 5.2% of children in P1 were classed as obese and 21% were classed as overweight or obese (2014/15)      |

| Indicator  | Survey and links  | Baseline data   | Current <u>available</u> stats   |
|--|---|---|--|
|  | <a href="#">health-inequalities-statistics</a>  |   |  |
| % of screen time spent by children and young people.                             | <b>Young Persons' Behaviour and Attitudes Survey (YPBAS) – 11-16 years old</b><br><a href="https://www.nisra.gov.uk/publications/ypbas-publications">https://www.nisra.gov.uk/publications/ypbas-publications</a>             | <b>2010</b> - 27% spent more than 10hrs per week watching TV, videos and DVDs and 27% spent more than 10hrs per week playing computer or console games.       | This topic was not included in either the 2013 or 2016 surveys.<br><br><b>2016</b> reported that 8% reported no doing 60 minutes of physical activity on any day of the week.  |
| % Uptake of free school meals  | <b>School Meals Census</b><br><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>2016/17</b> - The uptake level for free school meals by entitled pupils was 82.2%.  |
| % of children with dental decay.   | <b>Child Dental Survey (CDS)</b><br><a href="http://content.digital.nhs.uk/catalogue/PUB17137/CDHS2013-Northern-Ireland-Report.pdf">http://content.digital.nhs.uk/catalogue/PUB17137/CDHS2013-Northern-Ireland-Report.pdf</a> | <b>2003</b> - 56% of 5 year olds had obvious decay experience the primary teeth.<br><br>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.<br><br>56% of 8 year olds had clinical decay in primary teeth and 64% had clinical decay experience. |
| % of children and young people making healthier food choices consuming 5 or more | <b>YPBAS</b><br><a href="https://www.nisra.gov.uk/publications/ypbas-publications">https://www.nisra.gov.uk/publications/ypbas-publications</a>   | <b>YPBAS 2010.</b><br>13% indicated they ate the recommended 5 or more  | <b>YPBAS 2016</b><br>17% indicated they ate the recommended 5 or more  |



| Indicator  | Survey and links  | Baseline data   | Current <u>available</u> stats   |
|--|---|---|--|
| portions of fruit/veg per day.   |   | portions of fruit or vegetables each day.   | portions of fruit and vegetables a day (an increase from 15% in 2007)  |
| Level of exposure of children and young people to advertising of high salt, sugar, fat products or alcohol.  | <b>OFCOM</b>  | Newcastle University (Institute of Health and Society) 2012 reported that 6.1% of adverts seen by children were about junk food.                                |  |
| % 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. | <b>YPBAS</b><br><a href="https://www.nisra.gov.uk/publications/ypbas-publications">https://www.nisra.gov.uk/publications/ypbas-publications</a> | <b>YPBAS 2010 – ages 11–16</b><br>59% are a member of other sports clubs or teams not associated with their school.   | <b>YPBAS 2016 – ages 11-16</b><br>62% are members of clubs or teams outside of school that involve sport or physical activity.   |
| % of children (11–16 years) who played any sport, exercise, or played actively that made them out of breath or hot and sweaty.                               | <b>YPBAS</b><br><a href="https://www.nisra.gov.uk/publications/ypbas-publications">https://www.nisra.gov.uk/publications/ypbas-publications</a> | <b>YPBAS 2010 – ages 11–16</b><br>90% pupils played sport, exercised or played actively that made them out of breath or sweaty in the week prior to the survey. | <b>YPBAS 2016 – ages 11-16</b><br>87% pupils played sport or participated in physical activity that made them out of breath or hot and sweaty for a total of sixty minutes at least one day in the last week |
| % of children (11–16 years) who spent two hours or more per week doing PE or games at school.  | <b>YPBAS</b><br><a href="https://www.nisra.gov.uk/publications/ypbas-publications">https://www.nisra.gov.uk/publications/ypbas-publications</a> | <b>YPBAS 2010 – ages 11–16</b><br>49% pupils normally spend at least 2hrs a week doing PE or playing for a school team.   | <b>YPBAS 2016 – ages 11-16</b><br>63% of pupils normally spend at least 2 hours a week doing PE or games lessons at school   |

| Indicator                                       | Survey and links  | Baseline data   | Current <u>available</u> stats  |
|---|---|---|---|
| Prevalence of overweight and obesity in adults. | <b>HSNI (16+)</b><br><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><br>23% obese<br>36% overweight<br>59% overweight and obese   | <b>HSNI 2015/16</b><br>26% obese.<br>34% overweight.<br>60% overweight and obese.   |
| Occurrences of obesity related diseases.        | <b>Hospital Inpatient System (HIS)</b>  | <b>HIS 2011/12</b> – 1145 individuals were admitted to NI hospitals with a diagnosis of Obesity.  | <b>HIS 2013/14</b> –1748 individuals were admitted to NI hospitals with a diagnosis of obesity:   |
| Awareness of ‘5–a–day’ healthy eating.          | <b>HSNI (aged 16+)</b><br><a href="https://www.health-ni.gov.uk/publications/tables-health-survey-northern-ireland">https://www.health-ni.gov.uk/publications/tables-health-survey-northern-ireland</a>   | <b>HSNI 2010/11</b> - 86% were aware of the guidelines.   | <b>HSNI 2015/16</b> - 84% were aware of the guidelines  |
| % of adults adopting the 5–a–day guidelines.    | <b>HSNI (aged 16+)</b><br><a href="https://www.health-ni.gov.uk/publications/tables-health-survey-northern-ireland">https://www.health-ni.gov.uk/publications/tables-health-survey-northern-ireland</a>   | <b>HSNI 2010/11</b> - 33% reported meeting the guidelines.  | <b>HSNI 2015/16</b> – 37% reported meeting the guidelines   |
| % of adults experiencing food poverty.          | <b>HSNI (aged 16+)</b><br><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><br>Food security questions were asked prior to 2013/14 however these were slightly different. | <b>HSNI 2013/14</b> - 4% 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. | <b>HSNI 2015/16</b> – 4% 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. |

| Indicator   | Survey and links  | Baseline data  | Current <u>available</u> stats   |
|---|---|--|--|
| % of food manufacturers currently reformulating.  | The Food Standards Agency   | FSA?   | FSA?   |
| % of adults who are sedentary.  | <b>HSNI</b> (aged 16+)<br><a href="https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf">https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf</a>   | <b>HSNI 2010/11 – aged 16+</b><br>25% were classed as sedentary.   | <b>HSNI 2013/14 – aged 19+</b><br>44% reported being sedentary on weekdays and 54% reported being sedentary on weekends. <b>2015/16</b> – there were no physical activity questions this year. |
| % of adults aware of the physical activity recommended by the Chief Medical Officer.                | <b>HSNI</b> (aged 16+)<br><a href="https://www.health-ni.gov.uk/publications/tables-health-survey-northern-ireland">https://www.health-ni.gov.uk/publications/tables-health-survey-northern-ireland</a>   |  | <b>HSNI 2015/16</b> - no physical activity questions this year.  |
| % of adults (16+) meeting the levels of physical activity recommended by the Chief Medical Officer. | <b>HSNI</b> (aged 16+) from 2010<br><a href="https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf">https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf</a>   | <b>HSNI 2010/11</b> - 38% met the recommendations.   | <b>HSNI 2013/14</b> - 53% met the recommendations.<br><br><b>2015/16</b> - no physical activity questions this year.   |
| % of women (16+) meeting the levels of physical activity recommended by the Chief Medical Officer.  | <b>HSWB</b> 2005–06<br><a href="http://www.csu.nisra.gov.uk/survey.asp153.htm">http://www.csu.nisra.gov.uk/survey.asp153.htm</a><br><br><b>HSNI</b> (aged 16+) from 2010<br><a href="https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf">https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf</a> | <b>HSWB 2005/6</b><br>28% met the recommendations.<br><br><b>HSNI 2010/11 – aged 16+</b><br>35% met the recommendations. | <b>HSNI 2013/14</b><br>47% met the recommendations.<br><br><b>2015/16</b> - no physical activity questions this year.  |

| Indicator   | Survey and links   | Baseline data                       | Current <u>available</u> stats  |
|---|--|-------------------------------------|---|
|   | <a href="#">analysis-2010-11.pdf</a>   |                                     |   |
| <p>% of adults (16+) meeting the levels of physical activity recommended by the Chief Medical Officer through 'getting about' (which includes walking and cycling).</p> | <p><b>HSNI</b> (aged 16+) from 2010<br/> <a href="https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf">https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsni-obesity-analysis-2010-11.pdf</a></p> | <p><b>HSNI 2010 – no result</b></p> | <p><b>2015/16</b> - no physical activity questions this year.</p> <p>There is potential for statistic recovery through DFI and Active Travel or the Health Survey (for Northern Ireland).</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 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)

## **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 – FSA –**

(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

### **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, Safefood 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.

### **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.

### **SureStart**

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.

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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>

<sup>iii</sup> <http://www.who.int/features/factfiles/obesity/en/>