



An Roinn Sláinte
Department of Health



Review of the Obesity Policy & Action Plan (2016-2025)

November 2022



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1. Introduction

1.1 The Obesity Policy and Action Plan 2016-2025

*A Healthy Weight for Ireland, the Obesity Policy and Action Plan (OPAP)*¹, was launched in September 2016 under the auspices of the Healthy Ireland Framework (*Healthy Ireland: A Framework for Improved Health and Wellbeing 2013-2025*²). It was developed in recognition of the growing need for a co-ordinated policy response to the increasing problem of obesity in Ireland and the increasing burden placed on individuals and society.

OPAP covers a 10-year period up to 2025 and aims to reverse obesity trends, prevent health complications and reduce the overall burden for individuals, families, the health system, and the wider society and economy. It recognises that obesity is a complex, multi-faceted problem and needs a multi-pronged solution, with every sector of society playing its part. Childhood obesity is a key priority under OPAP, as is reducing the inequalities seen in obesity rates, where children (and adults) from lower socioeconomic groups have higher levels of obesity.

Implementation of the OPAP is overseen by a cross-sectoral and cross-Departmental group, the Obesity Policy Implementation Oversight Group (OPIOG) chaired by the Department of Health and established in October 2017. Two Sub-Groups of the OPIOG were set up, one on Healthy Eating and one on Food Reformulation. In 2021, following the launch of the *Model of Care for the Management of Overweight and Obesity*³, a Healthcare Sub-Group was established. Later in 2021, following the publication of *A Roadmap for Food Product Reformulation in Ireland*⁴, and the establishment of a dedicated, resourced Food Reformulation Task Force, the Sub-Group on Reformulation was discontinued.

1.2 The Ten Steps

The OPAP included 60 actions grouped under Ten Steps to combat overweight and obesity:

1. Embed multi-sectoral actions on obesity prevention with the support of Government Departments and public sector organisations
2. Regulate for a healthier environment
3. Secure appropriate support from the commercial sector to play its part in obesity prevention
4. Implement a strategic and sustained communications strategy that empowers individuals, communities and service providers to become obesity aware and equipped to change, with a particular focus on families with children in the early years
5. Provide leadership, (through Department of Health/Healthy Ireland) to engage and co-ordinate multi-sectoral action and implement best practice in the governance of the OPAP
6. Mobilise the health services to better prevent and address overweight and obesity through effective community-based health promotion programmes, training and skills development and through enhanced systems for detection and referrals of overweight and obesity patients at primary care level

7. Develop a service model for specialist care for children and adults
8. Acknowledge the key role of physical activity in the prevention of overweight and obesity
9. Allocate resources according to need, in particular to those population groups most in need of support in the prevention and management of obesity, with particular emphasis on families and children during the first 1,000 days of life
10. Develop a multi-annual research programme that is closely allied to policy actions, invest in surveillance and evaluate progress on an annual basis.

Within the context of preparing a review of OPAP, the School of Public Health in UCC was commissioned to carry out an independent evaluation. This evaluation covers the period January 2016 to May 2021 and is published in tandem with this Review.

This Review provides an update as to the current status of some of the main deliverables in the Ten Steps to end October 2022. It also aligns the Ten Steps suite of population-health approaches in OPAP with the *WHO European Regional Obesity Report 2022*⁵ and the policy options the WHO recommends on managing obesity throughout the life course, thus signposting key actions to consider out to 2025.

The publication of this Review is itself an action under the Plan (Action 10.11).

1.3 General Context

Obesity is a complex multifactorial disease defined by excessive adiposity and is linked to an increased risk for many non-communicable diseases (NCDs).

WHO European Region recent estimates suggest that overweight and obesity is the fourth most common risk factor for NCDs in the Region, after high blood pressure, dietary risks and tobacco. It is also the leading risk factor for disability, causing 7% of total years lived with disability, and obesity is linked to greater morbidity and mortality from COVID-19. Early studies from a number of countries in the WHO European Region indicate that the prevalence of overweight and obesity and/or mean body mass index has increased in children and adolescents during the COVID-19 pandemic⁶.

The WHO Obesity Report 2022 highlights the importance of including prevention and control of obesity within measures to build back better in the wake of the COVID-19 pandemic. Addressing obesity is critical towards achieving the Sustainable Development Goals and is a priority in the *European Programme of Work 2020–2025: United Action for Better Health*.⁷

In Ireland, overweight and obesity poses an increasing challenge, with one in five children and almost 60% of the adult population now living with overweight or obesity. (Healthy Ireland survey 2019⁸).

Recent considerations

During the COVID-19 pandemic, people living with obesity were more likely to experience severe outcomes of the COVID-19 disease spectrum, including intensive care unit

admissions and death. UK evidence suggests that many of the restrictions related to containment of the pandemic has led to an increase in exposure to some of the risk factors that influence a child's likelihood to experience obesity or overweight, such as an unhealthy diet or sedentary lifestyle. The UK National Child Measurement Programme 2020/21 revealed that obesity rates increased by 4.5% in 4-5 year olds and 4.5% in 10-11 year olds in one year. The report also revealed that boys have a higher obesity prevalence than girls in both age groups. Children living in the most deprived areas were more than twice as likely to be obese as those living in the least deprived area.

Relevant national and international policies and strategies

A wide range of policy levers and programmes exist at national and international level through different strategies and policy documents which assist, both directly and indirectly, in addressing overweight and obesity.

Overall policy framework: Healthy Ireland

In 2013 the Department of Health launched *Healthy Ireland, the National Framework for Improved Health and Wellbeing* which set out a vision of a Healthy Ireland, where everyone can enjoy physical and mental health and wellbeing to their full potential, where wellbeing is valued and supported at every level of society and is everyone's responsibility.

The Framework aims to shift the focus to prevention, seeks to reduce health inequalities, and emphasises the need to empower people and communities to better look after their own health and wellbeing. The Framework seeks to address the wider social and environmental factors that impact on health and wellbeing, for example, housing, education, transport, and the physical environment.

Since the publication of the Framework, the Health and Wellbeing Programme has worked to build relationships and strengthen partnerships with other Government Departments, Local Authorities, the education sector, as well as the wider business and voluntary and community sectors. The Programme also works closely with the Health and Wellbeing unit in the HSE to drive that element of the overall health reform agenda.

Current political context

The *Programme for Government*⁹, recognises that a healthy lifestyle is one of the foundations of a better quality of life and affirms that the State has a major role to play in promoting good health.

To support the continued health and wellbeing of everybody, the Programme for Government identifies the following commitments regarding tackling obesity:

- Work with key stakeholders to introduce a Public Health Obesity Act, including examining restrictions on promotion and advertising aimed at children.
- Ensure that all local authorities embed actions on obesity prevention in future County and City Development Plans.

Significant progress has been made on important developments under the auspices of Healthy Ireland and Sláintecare since the publication of the OPAP in 2016 which are set out below, in chronological order.

2016: Healthy Ireland Fund

In 2016, the Government approved the creation of a Healthy Ireland Fund to establish and support the implementation of Healthy Ireland programmes and projects in a variety of settings.

The primary aim of the Fund is to support innovative, cross-sectoral, evidence-based projects and initiatives that support the implementation of key national policies in areas such as obesity, smoking, alcohol, physical activity and sexual health. Healthy Ireland funding has been provided to local authorities via the Local Community Development Committees to activate health and wellbeing objectives contained in the Local Economic and Community Plans. Other key national agencies for health and wellbeing are also supported.

2016: HSE Healthy Eating and Active Living Programme

The Healthy Eating and Active Living Programme (HEAL) was established in late 2016 as a Policy Priority Programme within the HSE. It works to co-ordinate and lead activity across the health services to ensure implementation of the OPAP and the *National Physical Activity Plan*¹⁰. Both the National Lead for HEAL and the Clinical Lead for Obesity Management sit on the Obesity Policy Implementation Oversight Group.

2018: Healthy Ireland Outcomes Framework

The *Healthy Ireland Outcomes Framework*¹¹ was published in 2018. The Outcomes Framework aims to provide a structured approach to collecting and reporting relevant and appropriate data which can be used to build awareness of the social determinants of health, to support assessment of the impact of policies on the agreed outcomes, and to monitor progress on the whole-of-Government response needed to improve health and wellbeing.

The Report's findings highlight many positive factors, including rising life expectancy, declining trends in incidence and mortality rates for many cancers, high levels of participation in screening and immunisation and high retention rates in terms of education. Improvements have been noted in terms of some lifestyle risk factors; indicators such as smoking and drinking rates and levels of overweight and obesity have shown declines since 2015 or are broadly stable. Physical activity rates in adults have risen.

*The Healthy Ireland Outcomes Framework: First Report*¹², published in September 2022 highlights some issues of concern, notably the socio-economic and health impacts of COVID-19, the impacts of high housing costs, pollution and climate change, and the need for continued vigilance in terms of reducing lifestyle related risks to public health in the context of an ageing population.

2018: Healthy Weight for Children Framework

The *HSE Healthy Weight for Children (0-6 years) Framework*¹³ was published in November 2018. It was developed jointly by the HSE Healthy Childhood Programme and the Healthy Eating and Active Living Programme, to give strategic direction for a national and sustainable approach to facilitating healthy weight and prevention of obesity in early childhood. The Framework informed the development of the *Model of Care for the Management of Overweight and Obesity* (see below), and the *Healthy Weight for Children HSE Action Plan 2021-2023*¹⁴ serves as an implementation guide for Levels 0, 1a and 1b of the *Model of Care for the Management of Overweight and Obesity*.

2018: Joint Committee on Children and Youth Affairs – “Report on Tackling Childhood Obesity”

During 2018, the Joint Committee on Children and Youth Affairs held a series of meetings on the subject of “Tackling Childhood Obesity”. The Committee heard from the Department of Health and from other relevant Departments and stakeholders during the course of its deliberations, and also received a number of written submissions. The Committee’s “*Report on Tackling Childhood Obesity*” was published in November 2018 and contained 20 recommendations.¹⁵ The Department of Health provided an update to the Committee on the recommendations in December, 2021.

2018: First 5

*First 5, A Whole-of-Government Strategy for Babies, Young Children and their Families 2019-2028*¹⁶ was launched in November 2018. It commits to major initiatives on family leave, children’s health services, parenting supports, child-friendly communities and Early Learning and Care services. A number of measures introduced under the OPAP, such as the *Healthy Eating Guidelines for 1-4 Year-Olds*¹⁷ are also relevant to First 5.

2019: EU Child Guarantee

The EU Child Guarantee was created to ensure that every child in Europe at risk of poverty or social exclusion has access to the most basic of rights, including healthcare and education.

It aims to prevent and combat social exclusion by guaranteeing the access of children in need to a set of key services, namely:

- early childhood education and care
- education (including school-based activities)
- healthcare
- nutrition
- housing

One of the key pillars in line with the EU Strategy on the Rights of the Child is the provision of a school meal to every school child.

2020: Food Vision 2030 – A World Leader in Sustainable Food Systems

The 10-year strategy *Food Vision 2030: A World Leader in Sustainable Food Systems*¹⁸, adopted by Government for the Agri-food sector, promotes an integrated food systems approach. The Strategy’s Mission 3, “Food which is Safe, Nutritious and Appealing; Trusted and Valued at Home and Abroad”, and related Goal, “Prioritise Coherent Food and Health Policies to Deliver Improved Health Outcomes”, contain a number of actions about health and nutritious food. These include effective citizen engagement, and are informed by scientific evidence and expert advice and input from stakeholders representing all aspects of the food and health systems. Other actions include ensuring that the healthy and sustainable choice is made as accessible to consumers as possible, promoting best practice on labelling, implementing the Roadmap for Food Product Reformulation and investing in the food, health and diet/consumption systems research required to generate the evidence base to inform our national policies.

2020: Food – Environment Policy Index (Food-EPI)

The Food-EPI was developed by the International Network for Food and Obesity/NCDs Research, Monitoring and Action Support (INFORMAS). The Food-EPI for Ireland was compiled by the School of Public Health, University College Cork (UCC), and assessed the Government’s implementation of policies and infrastructure support for improving the healthiness of the food environments against international best practice. Assessment was made by an expert panel consisting of 20 representatives from academia, the Food Safety Authority of Ireland, Safefood, the HSE, and charity organisations.

The Food-EPI was the tool used for the evaluation of the implementation of A Healthy Weight for Ireland.

2020: EU Best-ReMaP (Best Practice in Reformulation, Marketing and Public Procurement)

EU Best-ReMaP is an EU Joint Action that commenced in October 2020 under the 3rd EU Health Programme. Ireland is participating in two of the three core workshops, the reducing marketing of unhealthy foods to children and adolescents and reformulation. These are two critical areas under the OPAP, and Ireland is a co-leader in the work package on reducing marketing of unhealthy foods to children and adolescents, in which 17 EU countries are pooling expertise. There is a key focus on digital marketing. Ireland’s work on the reformulation work package is being led by the Food Safety Authority of Ireland and has now been taken on by the Food Reformulation Task Force.

2020: The EU Farm to Fork Strategy¹⁹

F2F aims to accelerate our transition to a sustainable food system that should:

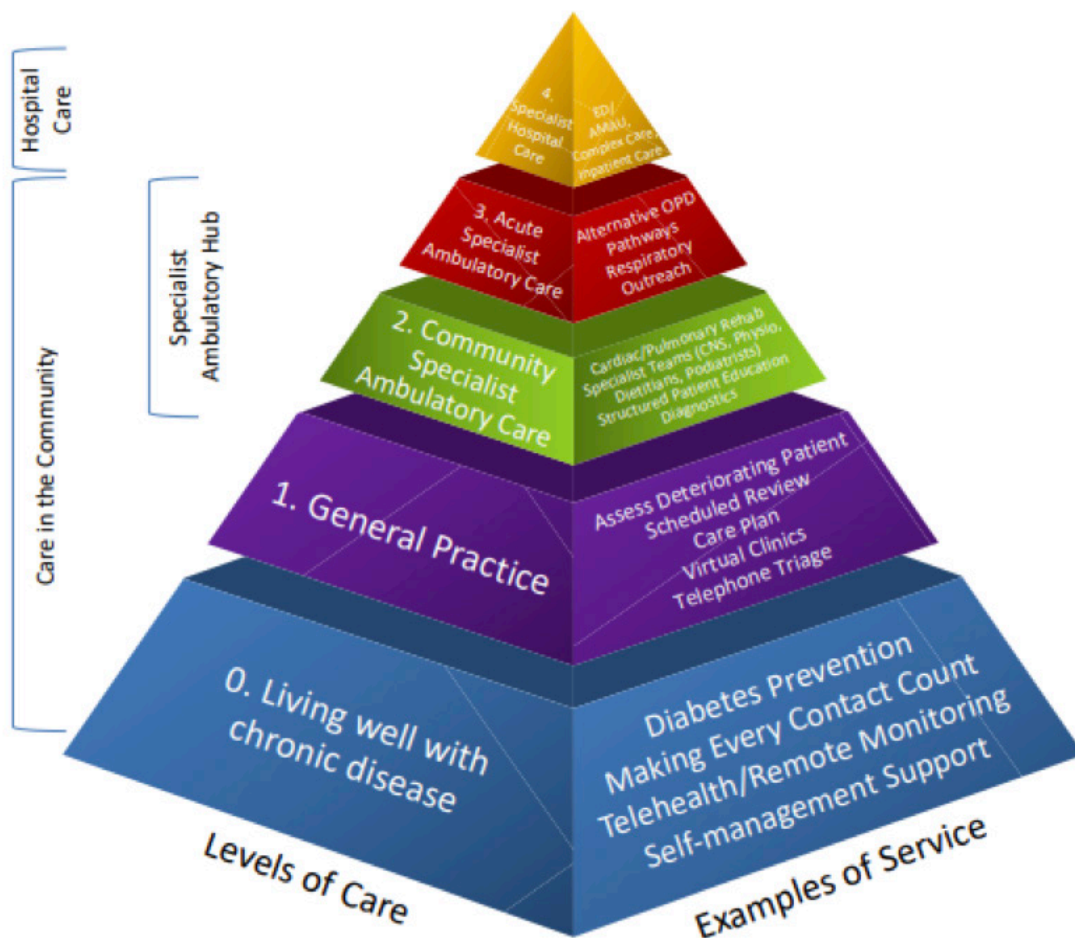
- have a neutral or positive environmental impact
- help to mitigate climate change and adapt to its impacts
- reverse the loss of biodiversity
- ensure food security, nutrition and public health, making sure that everyone has access to sufficient, safe, nutritious, sustainable food

- preserve affordability of food while generating fairer economic returns, fostering competitiveness of the EU supply sector and promoting fair trade.

An Interdepartmental Working Group has been established to take this forward and the Department of Health is represented by Health and Wellbeing and the Food and Environmental Unit.

2021: Model of Care for the Management of Overweight and Obesity (MOC).

The MOC was developed by the HSE and the Royal College of Physicians in Ireland and launched on March 4th 2021 (World Obesity Day). The MOC sets out the services needed to provide end to end care for prevention and treatment of overweight and obesity in children, young people and adults. The levels of the MOC cover the full range of services required for the prevention and treatment of overweight and obesity, from community programmes, general practice and primary care, through to specialist care and hospital care including surgery. The MOC is highlighted in the *HSE Corporate Plan 2021-24*²⁰, which includes as one of its six Objectives “Prioritise prevention and early intervention services focusing especially on children’s health, obesity and alcohol harm”.



2021: Healthy Ireland Strategic Action Plan 2021-2025

The *Healthy Ireland Strategic Action Plan 2021-2025*²¹ was published in May 2021. The Plan was developed to guide delivery of the Healthy Ireland Framework over the final five years of the initial Framework. The Plan recognised that, while there had been substantial progress made in the implementation of the objectives of Healthy Ireland across the broader population, there was a pressing need to address health inequalities and place a greater emphasis on promoting Healthy Ireland among disadvantaged and harder to reach communities. As a result, and in line with the approach set out in the *Sláintecare Implementation Strategy and Action Plan*, a new theme of “Reducing Health Inequalities” was introduced. “Eating Well” is a Priority Focus Area of the Plan for the period 2021-2023.

2021: Sláintecare Implementation Strategy and Action Plan 2021-2023

Following on from the publication of the *Sláintecare Report*²² in 2017 and the publication of the initial *Sláintecare Implementation Strategy*²³ in 2018, a further strategy, the *Sláintecare Implementation Strategy and Action Plan 2021-2023*²⁴, focuses on two Reform Programmes. These are: (1) Improving Safe, Timely Access to Care and Promoting Health & Wellbeing and (2) Addressing Health Inequalities. The prevention objectives of Healthy Ireland were thus prominently featured in the Strategy and Action Plan, while the objective of Reform Programme 2, Project 4 was to “Implement the Obesity Policy and Action Plan 2016-2025”.

2021: Sláintecare Healthy Communities Programme

A key element of the *Healthy Ireland Strategic Action Plan 2021-2025*, reflecting the new theme of “Reducing Health Inequalities”, is the implementation of the Sláintecare Healthy Communities Programme, which was launched in October 2021. Launched in November 2021, Sláintecare Healthy Communities is a cross-Government initiative, with annual funding of €13m from the Department of Health. The programme is a partnership with the HSE, local authorities, local communities, statutory, voluntary and community groups to address health inequalities in 19 communities around the country. Partnering with the Local Authority sector, a national Development Officer and 19 Local Development Officers have been recruited to work within these communities. Once off “Enhancement Scheme Funding” of €4.75m was provided in 2021 to support the development of a number of community projects, for example outdoor exercise equipment and accessible walking trails.

Among the services to be delivered by the HSE and their community partners across the 19 areas are parenting programmes, social prescribing, Making Every Contact Count and Healthy Food Made Easy. The Programme also involves the recruitment of a Community Food and Nutrition Worker in each of the 19 Healthy Communities areas, to work with local statutory and voluntary partners to improve the food environment.

Once off “Enhancement Scheme Funding” of €4.75m was provided in 2021 to support the development of a number of community projects, for example community kitchens, outdoor exercise equipment and accessible walking trails.

2022: WHO European Regional Obesity Report

The *WHO European Regional Obesity Report 2022*, warns of the serious health risks associated with rising levels of obesity. Almost two thirds of adults and one-in-three children in the WHO European Region are overweight or obese, and these levels continue to grow. Obesity is among the top determinants of death and disability in the region. Obesity increases the risk of noncommunicable diseases and is considered a cause in at least 13 different types of cancer. It needs to be treated and managed by multidisciplinary teams.

In the European Region, overweight and obesity have reached epidemic proportions, with prevalence levels higher among males (63%) than among females (54%). The rates tend to be higher in countries with higher incomes. Educational inequalities are widespread, with higher obesity prevalence found in people with lower educational attainment.

The COVID-19 pandemic has made the obesity problem even more pressing, with obese patients more likely to experience complications and death from the virus, and many of these patients have experienced disruptions in accessing obesity management services. Preliminary data also suggest that during the current pandemic, people have had higher exposure to obesity risk factors, including an increase in sedentary lifestyles and consumption of unhealthy foods.

The report predicts that, in the coming decades, obesity will overtake smoking as the main risk factor for preventable cancer in some countries in the region. The report also highlights that obesity is a condition, not just a risk factor, that needs to be specifically treated and managed.

The WHO report stresses that given the complexity of obesity, policies to address it must be wide-ranging and comprehensive, reaching individuals across the life course and targeting inequalities. The report concludes by recommending a suite of population-level interventions and policy options for Member States to consider in preventing and tackling obesity, with an emphasis on building back better after the COVID-19 pandemic. These include restricting the marketing of unhealthy foods to children, taxation of sugar-sweetened beverages and improving health system response for obesity management.

2. Progress on the Ten Steps under the Obesity Policy and Action Plan

In the context of preparing a review of the OPAP, as committed to in the Action Plan, UCC was commissioned to carry out an independent evaluation. This evaluation covers the period January 2016 to May 2021 and is published in tandem with this Review; a summary of the UCC evaluation is set out below.

This Review provides an update as to the current status of the main deliverables in the Ten Steps updated to end October 2022, set out in Table 2 below. In addition, this Review captures the overall policy context regarding obesity policy, aligned with the *WHO European Regional Obesity Report 2022* and signposts next steps for delivery of the OPAP out to 2025.

2.1 Evaluation and Evidence Review conducted by the School of Public Health, UCC (2021)

The Evaluation examined how the Ten Steps have been implemented from January 2016 to May 2021. Within each step, a number of actions, sixty in total, are identified as necessary to achieve the desired targets and outcomes of the policy. The aim of the Evaluation Report is to present the results of a midway independent expert-led evaluation of the OPAP using the internationally recognised Healthy Food Environment Policy Index (FOOD-EPI). The FOOD-EPI is a tool is described briefly on page 6. The FOOD-EPI evaluation assessed independent expert opinions on the implementation of the OPAP actions.

Evidence of implementation for each OPAP action was initially compiled by researchers in the School of Public Health, University College Cork into an evidence document. This document, which addresses the implementation of each of the 60 actions during the reporting period, was validated by Government officials for completeness.

The evidence document was subsequently circulated to an expert panel consisting of 51 independent, non-Government experts from organisations and academic institutions with expertise in public health nutrition. Drawing on the evidence document, the panel rated the extent of implementation via an online survey.

Key findings of the UCC Evaluation

The assessment showed areas of high levels of implementation, while also highlighting areas of limited action. Overall, across all actions (short-term, medium term and long-term) 10% (6/60) were rated by the expert panel with high levels of implementation, and 23% (14/60) with high levels of progress. Half of all actions (30/60) were rated with medium level of implementation and 53% (32/60) with medium rates of progress. Thirty percent (18/60) of actions were rated with low levels of implementation and 17% (10/60) were rated with low levels of progress. Finally, 10% (6/60) of actions were rated with very little implementation, with progress on 8% of actions (5/60) rated as 'very little'.

The evaluation concluded that current health status, including the high rates of obesity of people living in Ireland, urgently needs to be addressed through upstream actions addressing our food and physical activity environments and the wider built environments. These actions should be combined with effective policies and programmes targeting individuals and families in diverse settings both outside and within the health sector. While much progress has been achieved, continued commitment across Government Departments to support the OPAP is required.

2.2 Update on status of OPAP Actions at end October 2022

Table 2 below provides an update as to the current status of the main deliverables in the Ten Steps at end October 2022. In addition to reporting on the Ten Steps, it reports on a number of additional actions undertaken that were identified subsequent to the publication of the OPAP, including where there is a relevant action in the *Healthy Ireland Strategic Action Plan 2021-2026*, where a relevant commitment has been entered into, or where there have been developments at an EU or international level.

The OPAP sets out the cross-sectoral Healthy Ireland approach, acknowledging interdependencies and addressing government policy and action in a wide range of areas that will impact on the determinants of overweight and obesity. To facilitate implementation, it identifies the lead Government Departments, agencies, partners and timelines over the lifespan of the Policy.

Some Government Departments have changed titles since the OPAP was published:

- DES (Department of Education and Skills) now DoE (Department of Education)
- DCYA (Department of Children and Youth Affairs) now DCEDIY (Department of Children, Equality, Disability, Integration and Youth)
- DELG (Department of Environment and Local Government) now DHLGH
- DJEI (Department of Jobs, Enterprise and Innovation) now DETE (Department of Enterprise, Trade and Employment)

Table 2 update on status of OPAP Actions at end October 2022

OPAP Actions and Roles

Current status on OPAP Actions

Action 1.1

As an integral part of the ‘healthy school’ concept, develop and implement a ‘whole of school’ healthy lifestyle programme (including, but not limited to, the curriculum, on nutrition, physical activity, smoking, alcohol and mental wellbeing), incorporating knowledge, skills and greater understanding of environmental factors that influence children and young people. National food standards for primary schools will be developed.

Lead/Partners:

DOES, DOH, DSP, DCEDIY, safefood, HSE, schools

The HISAP 2021-2025 has an Implementation Action 2.13.3 to “Continue to support and develop the School Meals Programme” with DSP and DOE as lead Departments. *Nutrition Standards for School Meals*²⁵ were published in 2017 and *Nutrition Standards for Hot School Meals*²⁶ were published in 2020. This Scheme has been augmented by the DSP and a comprehensive evaluation of the School Meals Programme was announced earlier this year (2022). Supports and training are provided by the HSE Healthy Schools to help schools to develop and implement healthy eating policies.

The EU Child Guarantee, adopted in June 2021, calls on Member States to guarantee for children in the EU the following: free access to early childhood education and care; education (including school-based activities); and healthcare; and to ensure effective access to healthy nutrition, a healthy meal each school day and adequate housing. This action is being led by the DCEDIY and a National Action Plan on the Child Guarantee is being finalised.

The Programme for Government contains a commitment to “Establish a new Primary School Healthy Eating education programme”. DCEDIY is preparing a new primary school curriculum. In Stages 1 and 2 (Junior Infants to Second Class), Wellbeing is referred to and in Stages 3 and 4 (Third to Sixth Class) it splits into two areas named Physical and Health Education and Social, Personal and Values Education. Healthy Ireland will provide support as needed.

The DOH set up a Food in Schools Forum with all Departments and partners to meet annually to share information on actions taking place in schools. A mapping exercise of healthy eating initiatives in schools has been completed.

OPAP Actions and Roles

Current status on OPAP Actions

Action 1.1 (continued)

Healthy Weight for Children: HSE Action Plan 2021-2023 contains an action to provide training and classroom resources to support the implementation of the Wellbeing Framework in schools. The draft Primary Curriculum Framework, published for consultation in 2020, includes Wellbeing as a curriculum area.

The Active School Flag (ASF), which aims to help more schools to be more active, more often is led by the Department of Education and co-funded by HI. More than 2,000 schools, mostly at primary level, have engaged with the programme since inception in 2009. In recent years, an ASF Post Primary programme has been piloted in secondary schools, with over 30 engaged in the ASF PP programme in 2022. Research has shown ASF can improve attendance, concentration and learning in participating schools, as well as reducing the gender gap in sport and PA participation. The increase in activity levels promoted by ASF is also likely to support the maintenance of healthy weight.

Action 1.2

Develop and implement an integrated and holistic health and wellbeing model for early childhood services (Outcome 1 in Better Outcomes, Brighter Futures).

Lead/Partners:

DCEDIY, Childcare committees in LCDCs, HSE, DES, TUSLA, DSP

A landmark development in this area was the launch of *First 5:- A Whole-of-Government Strategy for Babies, Young Children and their Families 2019- 2028* (First 5) in November 2018. The Foreword to the *First 5 Implementation Plan 2019-2021* by the then Minister for Children states that the plan “describes the bold steps we will now take to reform the architecture of early childhood services”. A suite of Healthy Eating Guidelines²⁷ and a Children’s Food Pyramid were published in 2020. Nutrition Standards for Early Learning and Care Services will be published shortly.

Action 2.8.1 of the HISAP 2021-2025 refers to “Implementation of the next iteration of Better Outcomes, Brighter Futures and First Five, which recommends the examination of new funding models for childcare and outlines new poverty prevention methods”. These actions are being taken forward by DCEDIY and DSP respectively. The DSP has established an IDWG on Food Poverty.

OPAP Actions and Roles

Current status on OPAP Actions

Action 1.3

Develop and implement training programmes, including brief interventions, and courses on overweight and obesity, including anti-stigma, for and by teachers

Lead/Partners:

DES, Teacher colleges, HSE

The Professional Development Service for Teachers (PDST) primary Health and Wellbeing Team does not develop and implement training programmes, interventions or courses specifically on overweight and obesity.

However, it facilitates CPD opportunities such as seminars, workshops and in-school support, and develops resources that aim to enable teachers and school leaders to use the SPHE and PE curricula to support the holistic development of all children in school.

CPD provision references lessons about self-esteem, confidence and body image through the SPHE curriculum and signposts participants to Bodywhys and Dove resources as well as the NCCA toolkit.

The objectives of these CPD opportunities are to enable teachers and school leaders to establish and maintain high quality PE and SPHE programmes in their schools, and to enhance wellbeing promotion so that children can explore factors that contribute to a healthy lifestyle and overall sense of wellbeing.

CPD provided by PDST for senior cycle Home Economics helps teachers support their students' decision-making, and understanding of nutrition and food studies and to develop life skills that ultimately help students make better life choices therefore reducing their overeating/unhealthy food choices and habits, and obesity potential.

Action 1.4

Provide potable water in all learning centres (from preschool and crèches to universities and adult learning centres) and ensure all new builds provide potable water on opening.

Lead/Partners:

DES, pre-schools, schools, colleges, universities

The Department of Education is satisfied that all primary and post-primary schools already provide free tap drinking water to their students.

All 21 university and college campuses surveyed confirmed access to potable water, with some responses noting that not all buildings have potable water available within them. All campuses reported that new buildings on campuses include access to portable water. Currently, in HEA capital projects procurement, projects are required to provide potable water on each level of all new buildings.

OPAP Actions and Roles

Current status on OPAP Actions

Action 1.5

Expand parenting programmes that incorporate healthy lifestyle and behavioural change.

Lead/Partners:

DCEDIY, HSE

First 5 commits to improve parenting supports. *Supporting Parents: A National Model of Parenting Support Services*²⁷ was published in April 2022 to implement this commitment.

As well as the First 5 commitment, the Programme for Government contains a commitment to “Expand access to parenting support programmes that have been proven to be effective”.

Evidence-based parenting programmes that incorporate healthy lifestyle and behaviour change are included in the range of Health and Wellbeing programmes funded as part of Sláintecare Healthy Communities Initiative.

Action 1.6

Examine expansion of current effective programmes, such as Food Dudes and The Incredible Edibles and develop further opportunities for collaboration with other government departments and state agencies in the promotion of fresh produce and its role in a healthy, balanced diet (Foodwise, 2025; Department of Agriculture, Food and the Marine, 2015).

Lead/Partners:

DAFM, DOH, DSP, DF, DES

Healthy Ireland has explored opportunities to expand support for fruit and vegetable programmes. Increased funding to support the Incredible Edibles and the Food Dudes programmes was provided in 2022.

In Food Vision 2030, Mission 3, Goal 1 is to “Prioritise Coherent Food and Health Policies to Deliver Improved Health Outcomes”. There are a number of actions under this Goal, including Action 1: “Improve coherence of policies for food, health and nutrition through the establishment of a high-level group co-chaired by the Departments of Health and Agriculture, Food and the Marine”. This group is currently being convened. The European Commission’s “Farm to Fork” Strategy, launched in 2020, has a strong emphasis on sustainable food systems. Its Draft Action Plan, attached as an Annex to the Strategy, envisages a Proposal for a legislative framework for sustainable food systems. Other possible measures contained in the Action Plan include measures on minimum mandatory criteria for sustainable food procurement, and “a review of the EU school scheme legal framework with a view to refocus the scheme on healthy and sustainable food”. DAFM established an IDWG on Farm to Fork in 2021. In 2022 the WG made progress on identifying the key Departments and Partners responsible for actions in the Action Plan.

OPAP Actions and Roles

Current status on OPAP Actions

Action 1.7

Monitor compliance with the *International Code of Marketing of Breast-Milk Substitutes*²⁹

Lead/Partners:

HSE, FSAI

The principles of the WHO Code of Practice are reflected in EU Delegated Regulation 2016/127, which came into force in February 2020.

A HSE Policy for staff on the Marketing of Breast Milk Substitutes came into effect in October 2021. It requires that all services comply with the WHO Code.

The rules on the labelling, presentation and advertising of infant formulae and follow-on formulae are harmonised at EU level.

The Department of Tourism, Culture, Arts, Gaeltacht, Sport, Media and Gaeltacht have brought the Online Safety and Media Regulation Bill 2022 to the Oireachtas. The Bill, which has passed all stages in the Seanad and has moved to the Dáil, where it has passed the first three stages.

The Bill will dissolve the BAI and establish a new regulator, Coimisiún na Meán. Under the Bill, broadcasting codes will ultimately be superseded by media service codes, which will apply to both video-on-demand and broadcasting services. Furthermore, An Coimisiún will be enabled to make online safety codes which apply to designated online services, such as video-sharing platform services (e.g. YouTube). Similar to broadcasting codes such as the CCCC, media service and online safety codes may provide for the regulation of commercial communications relating to foods or beverages which may be the subject of public concern in respect of the general public health interests of children. As the Department responsible for public health policy, the Department of Health would expect to contribute to and be consulted on the making of any codes by Coimisiún na Meán relating to the advertisement of food or beverages at children.

OPAP Actions and Roles**Current status on OPAP Actions****Action 1.8**

Develop proposals on the rollout of evidence-based fiscal measures to support healthy eating and lifestyles.

Lead/Partners:

DOH, DF

The Sugar-Sweetened Drinks Tax was introduced in 2018 and is currently being evaluated. A literature review and a data scoping exercise form part of this evaluation.

The Commission on Taxation and Welfare (COTW) was established, as provided in the Programme for Government, in April 2021. Its Terms of Reference include to “Examine how effectively good public health is promoted in Ireland, and present relevant reforms to advance and incentivise this goal”. Healthy Ireland has met with the COTW at official level. The Department of Finance submission to the COTW has as a key message that “By acting as a catalyst for changing behaviour, taxing carbon, tobacco, sugar, etc. can have positive effects, including better health outcomes and a cleaner environment”.

Fruit, Vegetables and Milk are subsidised under the under the EU School Scheme.

Action 1.9

Develop proposals for a levy on sugar sweetened drinks.

Lead/Partners:

DOH, DF

The Sugar-Sweetened Drinks Tax was introduced in 2018.

Action 1.10

Review the evidence, including the effectiveness of implementation, for fiscal measures on products that are high in fat, sugar and salt to reduce their consumption.

Lead/Partners:

DOH, HRB, IPH, DF, academic institutions

Fiscal measures on other products high in fat, sugar and salt have been introduced in other jurisdictions with varying levels of success – some have rescinded the tax. Further research could help inform the current EU developments on these other products.

The HISAP 2021-2025, Implementation Action 1.7.6, is to “Undertake an evaluation of the sugar sweetened drinks tax against the stated aims of the tax”. This is currently underway (ref actions 1.8).

OPAP Actions and Roles

Current status on OPAP Actions

Action 1.11

Develop joint proposals with relevant departments such as, but not limited to, DAFM, DES, DF, DELG, DJEI and HSE, on measures to incentivise healthier behaviours.

Lead/Partners:

DOH, As appropriate

Theme 2 Of the HISAP 2021-2025 covers Partnerships and Cross-Sectoral Work. A number of Strategic Actions under this involve collaboration with other Government Departments and other bodies to promote health and wellbeing – this will be carried out as part of the implementation of the HISAP.

Action 2.1

Develop guidelines and support materials for those working in developing the built environment for urban development and planning in relation to reducing the obesogenic environment.

Lead/Partners:

DOH, HSE, County/City Councils, DHPLG

The co-chairs of the *National Physical Activity Plan* Implementation Group are represented on the Town Centres First Group, which has the purpose of considering a collaborative and strategic approach to the regeneration of towns and villages in line with the NPF and commitments in the Programme for Government.

The Programme for Government contains commitments to “Ensure that all local authorities embed actions on obesity prevention in future County and City Development Plans” and to “Introduce planning restrictions on outlets selling high calorie ‘junk-food’ and beverages adjacent to schools”.

The HISAP 2021-2025 contains a Priority Focus Area for 2021 to “Form a working group in partnership with relevant stakeholders to look at how planning can be used to address the obesogenic environment” and one for 2022 for “Implementation of the commitment to use planning to address the obesogenic environment”.

Strategic Action 2.2 of the HISAP 2021-2025 aims to “Engage and collaborate with the Department of Housing, local Government and Heritage to align policy and initiatives with Healthy Ireland policy”. This is supported by Implementation Action 2.2.2, “Implementation of the commitment to use planning to address the obesogenic environment”, and by Implementation Action 1.7.10: “Work with

OPAP Actions and Roles

Current status on OPAP Actions

Action 2.1 (continued)

Government to support the planning restrictions on outlets selling high calorie ‘junk-food’ and beverages adjacent to schools”. DHLGH is represented on OPIOG.

Some consideration has been given to NZ work on No Fry Zones which places limits on the proximity of fast food outlets to schools. This is an area which needs further focus over the remaining years of the OPAP, with responsibility for planning resting with DHLGH, but there are many challenges in making progress. Healthy Ireland has built up relationships with local authorities through the Healthy Cities and Counties Network and the Sláintecare Healthy Communities Programme, and this should be beneficial in progressing measures, particularly in the development of the Local Authorities’ Local Economic and Community Plan (LECPs).

Action 2.2

Develop, implement and evaluate calorie posting legislation.

Lead/Partners:

DOH, Public sector organisations

Work on developing legislation for mandatory calorie posting on menus began in 2019. A consultation with food business operators to inform the development of the legislation was carried out between 6 January and 14 February 2020. The development of the legislation was suspended when the personnel involved were redeployed to work on COVID-19.

Action 2.3

Review EU consumer information labelling of food products with a view to its application in the Irish market.

Lead/Partners:

DOH, FSAI, DAFM

Food labelling in the EU is governed by Regulation (EC) No. 1169/2011 on the provision of food information to consumers (the FIC Regulation).

Under the EU *Farm to Fork* Strategy, proposals to revise certain aspects of the FIC Regulation are being developed, including the introduction of harmonised FOPNL; the setting of nutrient profiles to restrict the use of health and nutrition claims on high fat, sugar and salt products; the extension of mandatory country of origin or provenance to more products; and the revision of date marking (“use by” and “best before” dates). A draft EU proposal is expected in the first half of 2023.

In preparation for this draft proposal, in 2021 the FSAI and Department of Health held a public consultation on voluntary Front of Pack Nutrition Labelling (FOPNL).

OPAP Actions and Roles

Current status on OPAP Actions

Action 2.3 (continued)

The Food and Environmental Unit in the Department is leading on this action. It has undertaken a national consultation, established an internal Working Group including HSE and safefood representatives, and established an Interdepartmental Working Group (IDG) to help inform a national position on the revision of the FIC Regulation. Voluntary labelling is the preferred option for some members of The IDG Working Group on FIC. The DoH position is in favour of mandatory, research-focused clear FOPNL.

Action 2.4

Provide a submission to the Broadcasting Authority of Ireland's Review of the Children's Communication Code on advertising of energy dense food and drinks.

Lead/Partners:

DOH

The Department participated in the consultation process for the Review of the Children's Commercial Communications Code (CCCC)³⁰. This Review, which was published in 2020, found the Code to be a regulatory leader regarding children's linear audio-visual commercial communications, and one of the few codes that addresses the issues in a single concise document.

The consultation process for a new CCCC is expected to be undertaken by the new Media Commission, Coimisiún na Meán, following the enactment of the Online Safety and Media Regulation Bill, which was published in 2022.

The Bill, which has passed all stages in the Seanad and has moved to the Dáil, where it has passed the first three stages, will dissolve the BAI and establish a new regulator, Coimisiún na Meán. Under the Bill, broadcasting codes will be ultimately be superseded by media service codes.

Similar to broadcasting codes such as the CCCC, media service and online safety codes may provide for the regulation of commercial communications relating to foods or beverages which may be the subject of public concern in respect of the general public health interests of children. As the Department responsible for public health policy, the Department of Health would expect to contribute to and be consulted on the making of any codes by Coimisiún na Meán relating to the advertisement of food or beverages at children.

OPAP Actions and Roles

Current status on OPAP Actions

Action 3.1

Agree food industry reformulation targets and review progress.

Lead/Partners:

DOH, IBEC, FDII, FSAI, DAFM

Implementation Action 1.7.7 of the HISAP 2021-2025 is to “Implement the roadmap for reformulation of food and drink with industry”.

A Roadmap for Food Product Reformulation in Ireland was launched in December 2021, with Healthy Ireland funding provided for a dedicated Food Reformulation Task Force, situated in the FSAI, to implement the Roadmap.

An Oversight and Monitoring Group for the Reformulation Task Force (which includes a non DoH member from OPIOG) meets quarterly, to review progress. The Task Force will also produce an annual progress report.

The Task Force is to operate until the end of 2025, and for that period the focus in reformulation will be on the work of the Task Force, incorporating the work ongoing in the Best-ReMaP Joint Action Work Package on reformulation, which runs until September 2023. As per the Reformulation Roadmap, legislative measures may be considered if sufficient progress is not made through this means (subject to developments at EU level).

The Farm to Fork Draft Action Plan includes an action to “Launch initiatives to stimulate reformulation of processed food, including the setting of maximum levels for certain nutrients”.

Action 3.2

Develop, implement and evaluate a code of practice for food and beverages promotion, marketing and sponsorship.

Lead/Partners:

DOH, Food industry, HSE, DCYA, safefood, FSAI, advertiser organisations

While the codes of practice are in place, implementation and monitoring arrangements have not been put in place.

However, the Advertising Standards Authority of Ireland (ASAI) in 2021 issued an amended Section 8 (Food and Non-Alcoholic beverages) of the ASAI Code to integrate the HFSS marketing communications and sponsorship provisions of the Voluntary Codes of Practice for non-broadcast media. This brings the

OPAP Actions and Roles

Current status on OPAP Actions

Action 3.2 (continued)

relevant provisions within the complaints mechanism of the ASAI Code. The provisions came into effect on 1st December 2021, with the exception of the sponsorship provisions which will come into effect on 1st December 2022.

Following on from Ireland's work in developing the Voluntary Codes of Practice, under the EU Joint Action Best-ReMaP, Ireland and Portugal are co-leading on the Work Package on "reducing marketing of unhealthy food products to children and adolescents". This work commenced in October 2020 and will take place over three years. This will identify best practices, develop monitoring tools, and provide guidance for national implementation in this area.

Implementation Action 1.7.3 of the HISAP 2021-2025 is to "Set up an implementation and monitoring framework, with respect to determining the most robust monitoring mechanism to preserve the integrity of the implementation of the Voluntary Codes of Practice on the advertising and marketing of food and non-alcoholic beverages".

Implementation Action 1.7.5 of the HISAP 2021-2025 is to "Develop a guideline to address the issue of sponsorship of sports, festivals and other activities by food and alcohol providers".

The Programme for Government Commitment to "Work with key stakeholders to introduce a Public Health Obesity Act, including examining restrictions on promotion and advertising aimed at children".

The consideration of legislation in the area of advertising aimed at children will need to be considered in the context of the work under Best-ReMaP, the revision of the ASAI Code, and the enactment of the Online Services and Media Regulation Bill.

OPAP Actions and Roles

Current status on OPAP Actions

Action 3.3

Establish a forum with industry to review and implement best practice initiatives towards a healthy food environment.

Lead/Partners:

DOH, Food Industry

Under the Food Reformulation Task Force, a “Reformulation for Health” forum is to be held annually with industry. The first of these will be held in December 2022.

An information webinar to update interested parties took place in May 2022.

Mission 3 in Food Vision 2030 recognises that food security, food safety and nutrition are key components of Sustainable Food Systems, particularly the link between food and health.

DAFM is funding specialist equipment in the Prepared Consumer Foods Centre (PCFC) that allows companies to pilot new food processes including reformulation.

Action 3.4

Develop proposals on the scope of corporate social responsibility relating to obesity prevention promoting overall health and well-being in the workplace.

Lead/Partners:

DOH, DJEI, CSR forum

The *National Framework for Healthy Workplaces in Ireland 2021-2025*³¹ was launched in December 2021. The Framework provides strategic direction for workplaces to enhance the health and wellbeing of all workers in both the public and private sectors.

An Implementation Group has been established to oversee the rollout of the Healthy Workplace Framework. The first meeting was held in May 2022.

The development of an action plan to guide implementation has also commenced with ongoing engagement of partners and other Government Departments.

One of the priorities for 2022 is the development of the Healthy Workplace Website which will provide content on workplace related health and wellbeing as well as interactive tools to support workplaces TO deliver and evaluate wellbeing interventions in their organisations. Work is advanced in the finalising of the prototype and the content for the website.

Healthy Ireland hosted a Workplace Seminar in May 2022 with 70 delegates from the public and private sectors.

OPAP Actions and Roles

Current status on OPAP Actions

Action 3.5

Consider measures to introduce maximum portion sizes for relevant foods and drinks, on a voluntary basis initially. The effects of measures implemented should be regularly monitored.

Lead/Partners:

DOH, Food Industry

Recommended portion sizes are visually represented in the Healthy Eating Guidelines.

The issue of portion sizes was considered in A *Roadmap for Food Product Reformulation in Ireland* published in 2021.

The Food Reformulation Task Force has been charged with implementation of the Reformulation Roadmap, and the issue of portion size reduction measures falls within this work.

Action 4.1

Develop consecutive five-year evidence-based communication strategies aimed at creating behaviour change, including the development of print, online and social media resources. The strategies should place a special emphasis on reducing inequalities. The strategy will bring a consistent approach with regards to information and messages across a number of sectors, including schools

Lead/Partners:

DOH, HSE, Safefood

The START childhood obesity communications campaign (which commenced in 2017) is being reviewed and evaluated in 2022 and while this is in progress the campaign has been extended to 2023. The campaign in 2022 focused on treat foods.

An Adult Healthy Weight Campaign - Prevention was launched in September 2022. This social media campaign is aimed at 25-34 year olds and seeks to reframe the conversation around overweight and obesity.

Action 5.1

The Department of Health will provide overall stewardship for the Policy and continue to work collaboratively with international organisations including the WHO and the EU, as well as on a North-South basis.

Lead/Partners:

DOH

As referenced above, the Department of Health convenes and chairs the cross-sectoral and cross-Departmental group, the Obesity Policy Implementation Oversight Group (OPIOG).

The Department continues to collaborate with the EU and the WHO. Collaboration at EU level has strengthened since the outset of the pandemic (EU4Health, EU NCDs Initiative)

HISAP 2021-2025 Implementation Action 1.7.4 is to “participate in EU Joint Action on best practices

OPAP Actions and Roles	Current status on OPAP Actions
<p>Action 5.1 (continued)</p>	<p>in reformulation, marketing and procurement”. This is the Best-ReMaP Joint Action in which Ireland is co-leading on the marketing Work Package and participating in the Reformulation Work Package.</p> <p>The Department continues to participate in all-island fora such as the All-Island Obesity Action Forum and the All-Island Food Poverty Network.</p>
<p>Action 5.2 Develop and implement a nutrition policy and action plan.</p> <p>Lead/Partners: DOH, All stakeholders</p>	<p>Implementation Action 1.7.9 of the HISAP 2021-2025 is to “Set out a nutrition and healthy eating policy”.</p> <p>The OPAP nutrition actions are aligned with the WHO Second Action Plan on Food and Nutrition and many of these have been implemented. In 2020 Healthy Ireland consulted with the WHO on the range of nutrition policy actions needed. These are outlined in Appendix 3 and are being addressed under OPAP to date and over the next three years.</p>
<p>Action 5.3 Develop a suite of healthy eating guidelines for the general population as well as for one to five year olds, and a weight loss food guide.</p> <p>Lead/Partners: DOH, All stakeholders</p>	<p>Healthy Eating Guidelines for Adults, Teenagers and Children 5 years and older were published in 2016.</p> <p><i>Healthy Eating Guidelines for 1 to 4 year-olds</i> were published in 2020.</p> <p><i>Nutrition Guidelines for Food Parcels</i>³² were published in 2022.</p> <p>Healthy Eating Guidelines for over-65s and Healthy Eating Guidelines to increase plant-based foods in your diet are under development.</p> <p>The FSAI Scientific Committee are preparing Scientific Food-Based Dietary Guidelines for Teenagers which will then be translated into Healthy Eating Guidelines resources for this age group by Healthy Ireland. These Guidelines will include sustainability.</p> <p>In line with the increasing demand for plant -based foods in the diet, a resource is being developed by the OPIOG Healthy Eating sub-group to provide the consumer with accurate information on such foods.</p>

OPAP Actions and Roles	Current status on OPAP Actions
<p>Action 5.3 (continued)</p>	<p>This resource will be published in Q4 2022.</p> <p>The Healthy Eating suites of resources have been developed by the OPIOG Healthy Eating sub-group.</p>
<p>Action 5.4 Establish a multi-stakeholder partnership to share knowledge and experience on healthy weight initiatives.</p> <p>Lead/Partners: DOH, safefood, NGOs, HSE, TUSLA</p>	<p>Partnerships, such as the All-Island Obesity Action Forum and the All-Island Food Poverty Network have been established and are ongoing.</p>
<p>Action 5.5 Continue to develop, implement and review the healthy lifestyles programme in schools.</p> <p>Lead/Partners: DES, DOH, HSE schools, children and young people, teachers, parents</p>	<p>The Programme for Government contains a commitment to “Establish a new Primary School Healthy Eating education programme”.</p> <p>HISAP 2021-2025, Action 2.1.5, is to “Establish a new Primary School Healthy Eating Programme and build on a range of current initiatives to support healthy eating education”.</p> <p>The draft Primary Curriculum Framework includes wellbeing as a curriculum area. In Stages 1 and 2 (Junior Infants to Second Class), Wellbeing is referred to and in Stages 3 and 4 (Third to Sixth Class) it splits into two areas named Physical and Health Education and Social, Personal and Values Education. Healthy Ireland will provide support as needed.</p>
<p>Action 6.1 Include obesity prevention and care as part of the GP contract. This will build on the previous developments for the under six years of age GP contract.</p>	<p><i>Making Every Contact Count (MECC)</i>³³ was included in the 2019 GMS GP Agreement. MECC has also been expanded under the Sláintecare Healthy Communities Programme.</p> <p>The HSE <i>Model of Care for the Management of Overweight and Obesity</i>, launched in 2021, includes a critical role for GPs in both the adult and children</p>

OPAP Actions and Roles

Current status on OPAP Actions

Action 6.1 (continued)

Lead/Partners:

DOH, HSE, GPs, allied healthcare professionals

models of care, and states “This model of care supports the extension of access to GP care without fees, on a phased basis, to all children of primary school age as outlined in the GP Contract (2019) to support early identification and brief advice provided to children and young people over 6 years old”.

See action 7.2 below regarding clinical practice guidelines.

Action 6.2

Strengthen the capacity of primary care teams to support obesity prevention and evidence based weight management services.

Lead/Partners:

HSE, GPs, allied healthcare professionals

The HSE *Model of Care for the Management of Overweight and Obesity* includes a level 1A (children and young people model) and Level 1 (adult model) for General Practice and Primary Care Teams and sets out how these should be resourced and provided over three phases through to 2031. Under the adult model, in line with the Integrated Care Programme for Chronic Disease (2020) it is anticipated that GPs and primary care team staff will work together as integrated multidisciplinary teams at CHN level to provide early identification, brief advice and signposting or referral to services as required.

Through the Enhanced Community Care programme, the HSE is investing in 96 dietitians to facilitate delivery of structured patient education programmes – Diabetes Prevention and Best Health Weight Management Programmes – in community health networks.

Action 6.3

Develop and implement appropriate child development and growth monitoring system with appropriate recording and response programmes. This will build on the work on the under six years of age GP contract, the development of the Child Health Information System and the

Healthy Weight for Children: HSE Action Plan 2021-2023 includes HSE Action Area 5: Improve Population Area Modelling and Data Collection, which contains actions on growth monitoring. It also provides for Public Health Nurses, Community Medical Officers, and paediatric staff to complete the HSE e-learning module on growth monitoring.

The Child Health Record for Public Health Nursing and Community Doctor Services has been

OPAP Actions and Roles	Current status on OPAP Actions
<p>Action 6.3 (continued)</p> <p>National Healthy Childhood Programme – a universal child health framework.</p> <p>Lead/Partners: HSE</p>	<p>implemented in all 9 CHOs since February 2021 and includes growth monitoring. It will next be reviewed in 2023.</p>
<p>Action 6.4</p> <p>Implement the brief intervention model (outlined in Making Every Contact Count) as per Healthy Ireland in the Health Services Implementation Plan. A training programme is in development with a target to begin delivery to the first cohort early in 2017 (this will include a focus on physical activity, healthy eating and weight management).</p> <p>A programme of work has commenced with universities and training institutions to integrate chronic disease prevention into undergraduate training programmes for all healthcare staff.</p> <p>Lead/Partners: HSE, GPs, allied healthcare professionals</p>	<p>Making Every Contact Count (MECC) and brief intervention (and training for same) are crucial to the <i>HSE Model of Care for the Management of Overweight and Obesity</i>. An eLearning module on Talking about Overweight and Obesity was developed for the Make Every Contact Count training programme in 2021. The module was launched on HSeLanD in June 2022.</p>
<p>Action 6.5</p> <p>Integrate obesity prevention, early detection and self-care into integrated care programmes.</p> <p>Lead/Partners: HSE</p>	<p>The <i>Model of Care for the Management of Overweight and Obesity</i> is aligned to the <i>National Framework for the Integrated Prevention and Management of Chronic Disease in Ireland 2020-2025</i>.³⁴ The Model of Care is also underpinned by the HSE Self-Management Support Framework and the Make Every Contact Count Framework, and states that the “National Clinical Programme for Obesity will work with [HSE] Health and Wellbeing to develop guidance</p>

OPAP Actions and Roles

Current status on OPAP Actions

Action 6.5 (continued)

for community based self-management support programmes”.

In relation to Integrated Care Programmes, obesity prevention is evidenced by integration and delivery of MECC, early detection by routine BMI data collection and monitoring such as in GP Chronic Disease Management Programme. Self-care is evidenced by referral to structured patient education programmes such as Diabetes Prevention Programme, Best Health Weight Management Programme and Living Well Programme.

Action 6.6

Review and implement the HSE-ICGP weight management algorithms for children and adults and their healthy weight management guidelines before, during and after pregnancy.

The *Model of Care for the Management of Overweight and Obesity* references the HSE-ICGP weight management algorithms for children and adults (which were developed in 2011). The Model of Care states that “No dedicated resourcing was aligned to enable implementation of the algorithms”. The ICGP algorithms require updating informed by MoC and the forthcoming Clinical Guidelines for Obesity Management.

Lead/Partners:

HSE, GPs

Action 6.7

Develop and integrate evidence based, effective, community-based health promotion programmes targeted at high-risk groups within all community health organisations.

The Sláintecare Healthy Communities Programme is progressing this.

Lead/Partners:

HSE, All stakeholders

Action 6.8

Include services users (including children and young people) in the development and implementation of programmes in which they are involved.

This is widely implemented, including through the use of focus groups in the development of the various life-course Healthy Eating Guidelines. Co-creation is a core principle in the development of the START campaign. Focus testing and engagement with representative groups is also used in the development of Healthy Ireland Citizen engagement campaigns, such as the current Healthy Weight Campaign.

Lead/Partners:

DOH, DCYA, HSE, All stakeholders

OPAP Actions and Roles

Current status on OPAP Actions

Action 6.9

Develop quality assurance guidance for the commercial weight loss sector.

Lead/Partners:

DOH, Weight loss organisations, HSE

The *Model of Care for the Management of Overweight and Obesity* recognises the role of “Approved evidence based commercial weight management programmes which align with the principles of the model of care”.

Action 6.10

Investigate the role of new drug therapies in reducing over weight and obesity.

Lead/Partners:

DOH, HSE (NCPE) (National Centre for Pharmoeconomics)

There is a National Application, Assessment & Decision Process for new medicines, which is underpinned by Primary Legislation (Health (Pricing and Supply of Medical Goods) Act 2013) put in place by the Oireachtas. The HSE must comply with the relevant legislation when considering investment decisions around new medicines. In line with the 2013 Health Act and the national framework agreed with industry, a company must submit an application to the HSE to have a new medicine added to the reimbursement list.

Saxenda® (liraglutide) is licensed in Ireland and has gone through the national pricing and reimbursement process and has received a positive reimbursement recommendation. Wegovy® (semaglutide) was authorised for use in the EU by the EMA in March 2022.

Action 6.11

Implement and monitor the forthcoming breastfeeding action plan. Implementation will require investment in whole-time equivalents across acute and primary care settings in addition to enhanced training, provision of supports to mothers and social marketing.

Lead/Partners:

DOH, HSE

The Programme for Government contains a commitment to “Promote an increase in the number of new mothers breastfeeding, by increasing support in our maternity hospitals and primary care centres, through access to lactation specialists and public health nurses”. This commitment is also reflected in Implementation Action 4.1.5 of the HISAP 2021-2025.

Funding for the recruitment of 24 lactation consultants was announced by the Minister for Health in 2021, additional to the 10.5 posts funded under the *National Maternity Strategy*³⁵. 20 of the 34.5 of the new posts have been filled to October 2022, with a further 11 in recruitment.

OPAP Actions and Roles

Current status on OPAP Actions

Action 6.11 (continued)

The *Breastfeeding in a Healthy Ireland, Health Service Breastfeeding Action Plan 2016-2021*³⁶ is the framework for progressing supports for breastfeeding.

Due to the impact of the COVID-19 pandemic on the delivery of some actions, the HSE will extend the implementation of the *Breastfeeding Action Plan* into 2023 and continue to work on priority outstanding actions.

The *National Healthy Childhood Programme*³⁷ has progressed the development of a standardised blended breastfeeding education programme for Midwives and Public Health Nurses. The HSE Healthy Weight for Children Action Plan provides for staff working in maternity, child health and primary care to complete HSE e-learning modules on breastfeeding and infant nutrition.

The HSE delivers an annual breastfeeding campaign as well as year-round promotion of breastfeeding information and supports via social media – as evidence of social marketing.

Action 6.12

Develop and implement training programmes and courses on overweight and obesity, including anti-stigma, for staff of all functions and disciplines in health services.

Lead/Partners:

DES, HSE, Training Colleges

Progress has been made in this area through such programmes as the Sláintecare Implementation Fund project through the RCSI - "*Facilitating Integration of Childhood Obesity Services in Primary Care through Education*"³⁸, which by moving online due to the pandemic, actually facilitated a greatly increased level of training to what was originally envisaged. Healthy Ireland is now funding the continuation and further development of this programme.

In 2022 the HSE commissioned the National Institute for Preventative Cardiology (NIPC) to develop and deliver an accredited course for health professionals on evidence-based obesity management and launched a new MECC module: Talking about overweight and obesity.

OPAP Actions and Roles

Current status on OPAP Actions

Action 6.13

Review and improve the quality of food in hospitals; develop a food and nutrition policy for hospitals.

Lead/Partners:

HSE

The *HSE Food, Nutrition and Hydration Policy for Adults in Acute Settings*³⁹ was launched in 2019. The HSE Vending Policy was also updated in 2019.

A *Food, Nutrition and Hydration Policy for Adults Accessing Disability Services*⁴⁰ was published in 2020.

*Nutrition Standards for food and beverage provision for staff and visitors in healthcare settings*⁴¹ have also been published.

Training for catering staff and healthcare professionals to support implementation of Food, Nutrition and Hydration policies has been developed and is available on HSELand.

Action 7.1

Appoint a clinical lead on obesity to provide a model of care for children and adults and oversee its implementation.

Lead/Partners:

HSE, RCPI, relevant stakeholders

The HSE Clinical Lead for Obesity has been appointed. The *HSE Model of Care for the Management of Overweight and Obesity* was launched in 2021.

Action 1.7.2 of the HISAP 2021-2025 is “Support the implementation of the HSE Healthy Weight for Children (0-6 years) Framework (2018) and HSE Model of Care for the Management of Overweight and Obesity in line with plan and funding”.

The *Healthy Weight for Children HSE Action Plan 2021-2023* is an implementation guide for Level 0, 1a and 1b of the *Model of Care for the Management of Overweight and Obesity*.

Implementation of the Model of Care is being monitored by the Healthcare Sub-Group of the Obesity Policy Implementation Oversight Group (OPIOG). There is also a National Oversight Group for the *Healthy Weight for Children Action Plan*.

OPAP Actions and Roles

Current status on OPAP Actions

Action 7.2

Develop standards, clinical guidelines and quality assurance programmes for obesity and weight management services in the health sector.

Lead/Partners:

DOH, HSE, HIQA, NCEC

*Clinical practice guidelines for the treatment of obesity for adults*⁴² were launched in October 2022. Ireland was one of two countries selected to participate in a project to adapt the Obesity Canada Clinical Guidelines. This work was led by ASOI. The HSE worked with NCEC to adopt these as national clinical guidelines for obesity management in adults, the first of their kind in Europe. The guidelines will be available to GPs to support the reduction of bias and stigma around the disease both among the public and healthcare professionals.

Action 7.3

Plan for and support the development of specialist, consultant-led multidisciplinary care, based on the chosen model of care and the RCPI report, for adults on an equitable geographic basis (one within each hospital group) and one for children at national level.

Lead/Partners:

HSE, DOH, RCPI, relevant stakeholders

The HSE has developed a comprehensive business plan to inform investment in and development of specialist Level 3 & 4 adult services in SAOLTA, IEHG, SSWHG and aligned RHA's as well as Level 3 specialist service in Children's Hospital Ireland.

Action 7.4

Develop and implement integrated clinical care models for adults and children (including chronic diseases and services for people with disabilities) with appropriate clinical care pathways for all patients.

Lead/Partners:

HSE

The *Model of Care for the Management of Overweight and Obesity* sets out the care models for adults and children, with pathways to ensure a continuum of appropriate care. Regarding those with chronic disease, disability, etc, the Model of Care states that "It is a priority for the National Clinical Programme for Obesity to work with the relevant national clinical programmes responsible for these groups to ensure obesity treatment pathways are resourced appropriately and integrated into these settings. The delivery of the services that emerge from the implementation of this model of care will need to be supported by the development of national and local clinical guidelines and clear patient pathways".

OPAP Actions and Roles	Current status on OPAP Actions
<p>Action 8.1 Implement the National Physical Activity Plan for Ireland.</p> <p>Lead/Partners: DOH, DTTS, All stakeholders</p>	<p>A <i>Review of the National Physical Activity Plan</i> ⁴³ has been completed and has been published on the Healthy Ireland website in July 2022. Progress Reports for 2017-2020 are also available on the site.</p>
<p>Action 8.2 Develop guidelines to reduce sedentary levels in the population.</p> <p>Lead/Partners: DOH, Relevant stakeholders</p>	<p>Action 28 of the <i>National Physical Activity Plan</i> (NPAP) is to “Develop national guidelines on sedentary behaviour”.</p> <p>An Evidence Base Hub was established for the Department, in collaboration between the HRB and the Department’s Research Services and Policy Unit. A comprehensive research and guidance paper, “An Evidence Brief on International Guidelines on Sedentary Behaviour” around developing guidelines for Ireland has been developed to inform consideration of appropriate guidelines. The NPAP Review recommends that the guidelines should be completed at an early stage of the next NPAP.</p>
<p>Action 8.3 Develop a specific physical activity plan to address the needs of severely overweight and obese individuals.</p> <p>Lead/Partners: DOH, HSE, Relevant stakeholders</p>	<p>The HSE and Sport Ireland have been funded in 2022 to commence work on a Physical Activity Pathways in Healthcare Model that will improve access to activity for patients facing challenges in being sufficiently active; those who may be older, frailer and or living with chronic conditions or a disability. It may be possible to look at the needs of people living with obesity in this context.</p>
<p>Action 9.1 Review progress in achieving the inequalities target, with a view to assessing the need for additional targeted actions for disadvantaged groups.</p> <p>Lead/Partners: DOH, DTTS, All stakeholders</p>	<p>The <i>Report of the 5th Round of data collection, 2018-2020: WHO the Childhood Obesity Surveillance Initiative (COSI)</i> ⁴⁴ was published in October 2020, and anthropometric measurements for this survey were carried out between October 2018 and January 2019. This report found that overall levels of overweight and obesity among primary school children stood at 19.1%, and that these levels appeared to be continuing to plateau. However, the report found levels continued</p>

OPAP Actions and Roles

Current status on OPAP Actions

Action 9.1 (continued)

to rise in DEIS schools. The 6th Round will be reported in 2023.

While the COVID-19 pandemic has severely impacted on data collection in relation to obesity, it is unlikely that the inequalities target has been reached. For this reason, there is a renewed focus on combatting obesity by Government, with a particular emphasis on addressing health inequalities in socioeconomically disadvantaged areas, through measures such as the Sláintecare Healthy Communities Programme.

An Interdepartmental Committee on Food Poverty was established in 2021, chaired by Joe O'Brien T.D., Minister of State at the Department of Rural and Community Development.

The HISAP 2021-2025 also contains a commitment (Implementation Action 2.13.2) to "Implement the cross Departmental delivery of Roadmap [for Social Inclusion] Commitment 61: Develop a comprehensive programme of work to further explore the drivers of food poverty and to identify mitigating actions".

Action 9.2

Scale up effective community based programmes with a focus on disadvantaged areas to enhance knowledge and skills with regard to healthy eating and active living. Special emphasis should be placed on providing guidance, advice and training to parents on healthy food and healthy eating.

Lead/Partners:

HSE, TUSLA, LCDDC, DCYA, DSP

The Sláintecare Healthy Communities Programme is designed to take this approach, under Strategic Action 6.1 of the HISAP 2021-2025, "Develop and implement the Sláintecare Healthy Communities Programme to facilitate an area-based approach to health and wellbeing".

The work of the national Development Officer and 19 Local Development Officers recruited will include working with the existing Community Food Initiatives developed by safe food. This approach will add capacity and experience to the community setting.

OPAP Actions and Roles

Current status on OPAP Actions

Action 9.3

Develop programmes to improve healthy eating for mothers, pre-conception, and for infants and children up to two years.

Lead/Partners:

HSE, DCEDIY

Early Learning and Care (ELC) Services are required to develop a Policy on Healthy Eating under the Childcare (Early Years Services) Regulations, 2016. Nutrition Standards for Early Learning and Care Services will be published shortly.

The *HSE Healthy Weight for Children Action Plan* contains an action to “Update MyChild.ie preconception section to include content on healthy weight and healthy lifestyles”.

The “First 5” strategy commits to review and enhance the delivery of the Healthy Ireland SMART Start (HISS) Programme by revising content to address gaps, extending to children under 3 and expanding to all ELC services. The HISS initiative now consists of two individual health promotion programmes, one of which is for staff working with children from birth to 3 years. An Interdepartmental Working Group has been established to take forward the commitments in the First 5 Strategy.

The *HSE Healthy Weight for Children Action Plan 2021-2023* provides for Child Health and primary care staff to complete HSE nutrition e-learning modules. There are six modules including “Formula feeding”, “Introducing family foods”, and “Healthy START for toddlers”. It also includes an action to provide Healthy Ireland SMART Start training to the preschool sector.

Action 10.1

Develop a multi-annual obesity research plan within the context of the overall research plans of the Department of Health in particular those elements that focus on population health.

Lead/Partners:

DOH, HRB

Behavioural research has been carried out by the ESRI on a number of topics (calorie posting, portion size, Nutrition labelling), under the Department of Health’s Research Programme.

Research projects have also been undertaken by the Health Research Board to support the implementation of OPAP. In 2021, using a HRB commissioned *Health Research Board, Interventions that promote increased breastfeeding rates and breastfeeding duration among women*⁴⁵, €1.58M was secured for 24 new Lactation Consultant posts - the

OPAP Actions and Roles

Current status on OPAP Actions

Action 10.1 (continued)

full complement required in the *National Breastfeeding Action Plan*. (A review of practices that increase breast feeding: the organization and implementation of systematic practices to facilitate and encourage breastfeeding in three countries, HRB, 2017).

Action 10.2

Develop proposals for implementation of a nutrition health surveillance system.

Lead/Partners:

DOH, safefood, DAFM

Irish Universities Nutrition Alliance (IUNA) has produced regular dietary research studies, the most recent being the *National Children's Food Study II*⁴⁶ and the *National Teens Food Survey II*⁴⁷.

Safefood convened a planning group to develop a "Framework for a nutrition surveillance programme". In drawing up a suitable framework, the planning group determined that it should be capable of providing data for both nutrition and chemical exposure purposes, that it should represent value for money by avoiding duplication of effort whilst meeting health, agriculture and food industry needs, that it should encourage the collection of data on a rolling basis rather than periodically so as to provide continuity and allow trends to be identified, serve the needs of the whole of island of Ireland, and be capable of being phased in as resources and the timetables of existing surveillance programmes permitted.

Action 10.3

Investigate the effectiveness (including cost effectiveness) of obesity interventions and programmes.

Lead/Partners:

DOH, HRB, IPH

Evaluation will be a crucial component of Healthy Ireland programmes going forward. In particular, the Sláintecare Healthy Communities Programme will be evaluated on an ongoing basis using appropriate methodologies to enable both programme development and the consideration of context and mechanism in evaluating success.

The 5-year START behaviour change campaign includes a baseline survey of key behaviours and an annual tracking survey. An interim evaluation took place in 2021 and a full evaluation will be completed in 2023.

OPAP Actions and Roles

Current status on OPAP Actions

Action 10.4

Develop and implement a national physical activity surveillance system.

Lead/Partners:

DOH

Action 50 of the *National Physical Activity Plan* (NPAP) is to “Establish a Systematic, Regular, and Long-Term National Surveillance System to Monitor Physical Activity Levels in Each Target Group”. The NPAP Research Subgroup decided that the development of a single national surveillance system capable of covering a sufficiently large cohort of the population and all age ranges would not be feasible. Instead data from existing and current studies, including the Healthy Ireland Survey, the Irish Sports Monitor and the Children’s Sport Participation and Physical Activity Study, is used to compile comprehensive baseline data. Planned waves of all relevant studies are monitored by the Subgroup to assess progress.

Action 10.5

Sustain ongoing obesity surveillance through Healthy Ireland and COSI as a means of monitoring progress.

Lead/Partners:

DOH, HSE

The Healthy Ireland and COSI surveys are ongoing. Current COSI research reporting will occur in 2023.

Action 10.6

Develop an obesity database for surveillance and planning purposes within the dataset arising from the GP contract.

Lead/Partners:

DOH, HSE

The 2019 GP Contract clinical data repository will have data on BMI, waist circumference and comorbidities. At present this is only for over-70s but it is planned to roll it out to all of the GMS adult population.

The *Model of Care for the Management of Overweight and Obesity* recommends that the following registries be established:

- A national database for growth measurements for children and young people.
- A national register for obesity-related data for adults.
- A national bariatric surgery register.

OPAP Actions and Roles

Current status on OPAP Actions

Action 10.7

Enhance the research capabilities, training and capacity to provide for knowledge translation.

Lead/Partners:

DOH, HRB, IPH, HSE, safefood, academia

The Childhood Obesity LANDSCAPE Project has the aim of furthering knowledge on factors that can facilitate or hamper the provision and access to treatment services for children and adolescents with obesity. The LANDSCAPE study is being undertaken as part of a HRB applied partnership award between the RCSI, CHI at Temple Street, and the HSE Health and Wellbeing Division. It is included in the *HSE Healthy Weight for Children Action Plan 2021-2023*.

IUNA national surveys and COSI surveys contribute to capacity building in surveillance.

Safefood regularly funds work in this area, including recent reports such as *"What's on your child's plate"*⁴⁸ and the *"Exploring the World of Food"*⁴⁹, reports on public perception of policies to address obesity, whole systems approach to childhood obesity, cost of a healthy food basket and supports knowledge transfer through disseminates to key stakeholders, the media and public.

Action 10.8

Develop an obesity 'knowledge translation' programme to inform the Action Plan.

Lead/Partners:

DOH, HRB, IPH, HSE

The evaluation is a reflection of the absence of a particular obesity "knowledge translation" programme to inform OPAP.

However, the HSE has produced a number of guides on *"Knowledge Translation, Dissemination and Impact – A Practical Guide for Researchers"*⁵⁰.

The *HSE Action Plan for Health Research 2019-2029*⁵¹ emphasises the importance of knowledge translation and states that "The HSE Research and Evidence function is working now to strengthen and embed a culture of knowledge translation, data informed decision making and evidence-based practice into healthcare delivery".

OPAP Actions and Roles

Current status on OPAP Actions

Action 10.9

Align targets with outcome indicators in the Healthy Ireland Outcomes Framework. Develop a suite of performance indicators to monitor progress on the implementation of the Obesity Policy and Action Plan.

Lead/Partners:

DOH, HRB, IPH, HSE

The *Healthy Ireland Outcomes Framework* was published in 2018. The *Healthy Ireland Outcomes Framework First Report* was published in September 2022. Healthy Ireland participates in the cross-government development of the Well-being Framework for Ireland, led by D/Taoiseach and D/PER. *Understanding Life in Ireland: The Well-being Framework Second Report*⁵² was published in July 2022.

Action 10.10

Develop an annual bulletin or score card on progress in relation to the Obesity Policy and Action Plan and disseminate results.

Lead/Partners:

DOH, CHDR

While an annual scorecard has not been developed, the significant progress made in implementing the OPAP has been captured by both the UCC independent Evaluation and Evidence review and this OPAP Review.

Action 10.11

Conduct a mid-term review of the Obesity Policy and Action Plan

Lead/Partners:

DOH, CHDR

An independent Evaluation and Evidence review was carried out by the school of Public Health in UCC, covering the period 2016 to May 2021 and is published alongside this Review. This Review covers the period to October 2022 and completes the commitment given under this action.

3. Delivering on the OPAP to 2025 - Next Steps

Effective action on the risk factors and determinants of obesity, including social, economic and environmental determinants, requires multisectoral and multistakeholder support for the policies to have long-term effectiveness and sustainability. This cross-sectoral approach taken by Healthy Ireland in implementing OPAP shows that progress has been made on the vast majority of the OPAP Ten Steps actions, recognising that the implementation is ongoing. In addition, new actions have been introduced to incorporate developments at national and EU level.

From the outset, it was clear that an OPAP needed to outline a range of population-health policy options. No single intervention can halt the rise of the obesity epidemic on its own. A range of policies and interventions implemented together are needed to target the prevention and control of obesity. These policy actions are synergistic in that they support each other in being effective (for example, labelling policies can incentivise reformulation of products). Many of these policy actions have been ongoing for the duration of OPAP and will continue to need to be implemented after 2025.

It is important for the implementation of OPAP to remain agile and flexible so that adjustments can be made to achieve maximum effect or to respond to any environmental, social or cultural change. Ongoing monitoring and evaluation is included in Step 10 of OPAP and this has been implemented through progress reports and the UCC Evaluation. Identifying barriers for implementation, evaluation and review of the policy environment provides valuable guidance for policy priority-setting. A clear example of this is the unforeseen impact and consequences of the COVID- 19 pandemic.

3.1 International developments with relevance for the implementation of OPAP: WHO European Regional Obesity Report, 2022

Working with an advisory group of experts across Europe, the WHO have identified key principles that need to underpin effective policy actions in the Obesity Report 2022. It is interesting to note that most of these principles were also included in OPAP and many are being actioned as is evidenced in Table 2.

WHO key principles that need to underpin effective policy actions

- As no single intervention can halt the growth in the obesity epidemic on its own, a comprehensive approach is needed.
- Promotion of health and prevention of obesity across the life course is vital.
- A national strategy must provide clear definitions and monitoring frameworks for all stakeholders including national governments, NGOs, industry actors and local government, which has a particularly important part to play in creating supportive environments and tackling inequalities.
- The support of lower socioeconomic population groups should be a priority in any obesity prevention strategy, as these groups face more constraints and limitations on making healthy choices.
- Health system response for the management of obesity needs to be strengthened with appropriate guidelines and training for multidisciplinary teams universal health care

- Governments need to “build back better” after the COVID-19 pandemic, recognising that human, animal and environmental health are all connected.

While the above principles have been addressed in the Ten Steps, as stated previously, many policy actions are ongoing and these will continue to be the cornerstone of OPAP implementation. Also, there are some outstanding actions that need to be addressed as outlined in the Review Table on pages 9-33.

3.2 Population Interventions

The WHO have prioritised a range of population interventions that focus broadly on diet, physical activity and the food environment. Healthy Ireland will use these priority actions as a key focus of the OPAP implementation for 2022- 2025.

Table 3

Policy recommendations for all age groups



Diet	Surveillance	Physical activity	Obesity management
<ul style="list-style-type: none"> • Tax unhealthy foods • Marketing restrictions • Subsidies for fruits and vegetables consumption • Mandatory front-of-pack nutrition labelling • Mass-media campaigns on healthy diets • Regulations on food outlets • Healthy public food procurement and service policies 	<ul style="list-style-type: none"> • Monitoring of obesity across the life course • Monitoring of other important indicators • Monitoring food and physical activity environments (including digital environments) and policy actions at country level • Adoption of COSI 	<ul style="list-style-type: none"> • Convenient and safe access to quality public open space • Encourage active travel • Improve urban design • Mass-media campaigns, community-based programmes • Physical activity counselling and referral as part of routine primary health care services through brief interventions 	<ul style="list-style-type: none"> • Equitable access to integrated healthcare services for management of overweight and obesity as part of universal health coverage • Equitable access to family-based, multicomponent, lifestyle weight management services for children and young people who are living with obesity

Source: WHO European Regional Obesity Report 2022.

Below outlines a list of the WHO recommended interventions for each of the above and shows where actions are underway or being developed relevant to Ireland:

Diet Target Interventions

- **Implement nutrition labelling**

Action: being undertaken as part of a proposed EU harmonised food labelling.

- **Limit portion and package size to reduce energy intake and the risk of overweight and obesity**

Action: being undertaken by the Reformulation Task Force and behavioural research by the ESRI study.

- **Implement subsidies to increase the intake of fruit and vegetables**

Action: the EU school scheme supports the distribution of milk, fruit & vegetables to millions of children, from nursery to secondary school, across the EU.

- **Reduce sugar consumption through effective taxation on SSBs**

Action: Sugar sweetened drinks tax implemented, with evaluation underway.

- **Implement nutrition education and counselling in different settings to increase the intake of fruits and vegetables**

Action: being undertaken through expansion of “Incredible Edibles” and “Food Dudes”.

- **Implement mass media campaigns on healthy diets, including social marketing**

Action: being undertaken through START; Healthy Weight Campaign; and Healthy Ireland citizen engagement campaigns.

- **Broaden taxes to incorporate unhealthy food products (high in fats, sugar and salt)**

Action: Taxation policy is ultimately a matter for the Department of Finance. However, consideration will be given to the findings of the SSD tax evaluation and to the recommendations of the Commission on Taxation in terms of DoH making proposals as appropriate.

- **Restrictions on multi-buy and other price promotions on unhealthy food**

Action: being undertaken as part of the implementation of the Irish Codes of Practice following the EU Best ReMaP Guidance currently being developed.

- **Restrictions on the marketing of unhealthy foods, including social and digital media**

Action: provision for this action being undertaken by the Media Commission. The Department of Health will assist the Media Commission where relevant. The EU Best ReMaP Joint Action work package on Restricting the marketing of unhealthy foods to children and adolescents includes a major focus on Codes of Practice and is developing a digital marketing monitoring framework.

- **Make mandatory clear front-of-pack labelling on all foods**

Action: being undertaken as part of an expected Commission proposal for an EU harmonised food labelling system. Behavioural research on NutriScore labelling has been conducted by ESRI.

- **Implement healthy public food procurement and service policies in public settings**

Action: there are a number of examples of such policies being agreed and rolled out in public settings: including IHF Happy Heart at Work; Healthy Ireland Healthy Workplace Framework. More work needs to be done in this area.

- **Recognize that the digital environment is a determinant of health**

Action: being undertaken by developing the Best ReMaP digital monitoring- framework.

Physical Activity Target Interventions

Physical activity measures are implemented through the National Physical Activity Plan and National Sports Policy, in collaboration with the Department of Tourism, Culture, Arts, Gaeltacht, Sport and Media and other members of the NPAP Implementation Group, which includes other Government Departments, agencies and the research sector.

- **Provide convenient and safe access to quality public open space and adequate infrastructure to support walking and cycling**

Action: collaboration with other members of the NPAP IG and Department of Transport to improve access to walkways, greenways, cycle ways, cycling lanes, green spaces and trails. The Departments of Health, Transport and DTCAGSM are co-funding the Walk 21 conference in 2022; the Healthy Ireland Fund, through Sport Ireland, supports Get Ireland Walking, Cycling, Running and Swimming.

- **Ensure that macro-level urban design incorporates the core elements of residential density, connected street networks that include sidewalks, easy access to a diversity of destinations and access to public transport**

Action: Healthy Ireland was consulted in the development of the National Planning Framework in 2017-2018; synergy with the Healthy Ireland Framework is included in the NPF. A Stakeholder Forum on the Built Environment was supported by the Departments of Health, Transport, Tourism and Sport, and Housing, Planning and Local Government in 2018. The Departments of Housing, Local Government and Heritage and Rural and Community Development are represented on the NPAP IG; representation from the built environment sector is also included in Ireland's Physical Activity Research Collaboration.

- **Implement a community-wide public education and awareness campaign for physical activity that includes a mass media campaign combined with other community based education, motivational and environmental programmes aimed at supporting behavioural change in physical activity levels**

Action: Physical activity is a core component of the Healthy Ireland citizen engagement campaigns and Healthy Ireland also supports and co-funds Sport Ireland campaigns aimed at increasing participation in sport and physical activity.

- **Provide physical activity counselling and referral as part of routine primary healthcare services through the use of a brief intervention.**

Action: The HSE and Sport Ireland have been funded in Budget 2022 to commence work on a Physical Activity Pathways in Healthcare Model that will improve access to activity for patients facing challenges in being sufficiently active; those who may be older, frailer and or living with chronic conditions or a disability.

- **Promote physical activity through organized sport groups and clubs, programmes and events**

Action: The Healthy Ireland Fund provides support and funding to Sport Ireland every year to promote participation in sport and physical activity, including the Sport Ireland Let's

Get Back campaign in 2021-2022. Healthy Ireland also supports the Irish Physical Activity Research Collaboration, <https://i-parc.ie/>, which aims to inspire the best use of evidence, effective delivery methods, and supportive environments for improving physical activity levels in Ireland. The HSE provides funding to parkrun through Section 39. Healthy Ireland also supports the GAA to progress and expand its Healthy Clubs initiative and, through the Women's Health Fund, is currently supporting the It's My Time campaign for women aged 40 and over, to increase their PA levels.

Weight Management Target Interventions

- **Provide equitable access to integrated health-care services for management of overweight and obesity**

Action: being undertaken by continuing investment to support establishment of early intervention and specialist services for management of overweight and obesity as per HSE business case for Phase 1 implementation of the Model of Care.

- **Provide equitable access to family-based, multicomponent, lifestyle weight management services for children and young people who are living with obesity**

Action: the HSE is establishing two multi-disciplinary community-based specialist weight management services for children and young people that will deliver family-based, multi-component care.

Surveillance/Monitoring Target Interventions

- **Monitoring of obesity across the life course to help support policy efforts through systems**

Action: Monitoring and evaluation of children and young people is being undertaken through participation in the Growing Up in Ireland, WHO Childhood Obesity Surveillance Initiative (COSI), Health Behaviour in School Children (HBSC) surveys; The Healthy Ireland Surveys and the TILDA Studies (The Irish Longitudinal Study on Ageing). The Healthy Ireland Survey monitors height, weight, waist circumference and BMI measurements in adults, approximately every two years.

- **Include other important indicators, such as socioeconomic status to help inform and monitor policy action to address the social determinants of health**

Action: being undertaken as part of the Sláintecare Healthy Communities

- **Continue monitoring food and physical activity environments – including digital environments and policy actions at country level**

Action: Both food and PA monitoring are being undertaken through HBSC, HI Surveys and COSI surveillance. Physical activity and sport participation are measured in children and young people through the Children's Sport Participation and Physical Activity Study (led by Sport Ireland and co-funded by Healthy Ireland). The Irish Sports Monitor measures physical activity and sport participation in everyone aged 16 and over. Ireland participates in the EU Policy Evaluation Network – Food Epi and Physical Activity EPI initiatives and the safefood funded CLICK research is also of relevance.

4. Conclusion

As mentioned, UCC considered the implementation of the Ten Steps actions from the launch of the Obesity Policy Action Plan in September 2016 through to May 2021 and the Evaluation and Evidence Review prepared by UCC is published alongside this Review.

This Review of the OPAP provides an update as to the current status of some of the main deliverables in the Ten Steps to end October 2022. This Review also sets out priority population health interventions for effective prevention and management of overweight and obesity to consider over the remaining years of the OPAP. These proposed priorities are guided by the *WHO European Regional Obesity Report 2022*.

It is important to recognise that there may be a need to increase efforts on OPAP actions from now until 2025 in order to take account of the consequences of the COVID-19 pandemic. The WHO recommends that Governments need to “build back better” recognising that human, animal and environmental health are all connected.

While already stated, it is important to emphasise that no single intervention can halt the growth in the obesity epidemic on its own. The OPAP recognised this at the outset and set out the Ten Steps forward approach identifying a range of policy actions that need to be implemented and the cross- departmental, cross-sectoral involvement necessary to deliver results. To achieve this, the OPAP was endorsed as a whole-of-Government Action Plan and an Obesity Policy and Implementation Oversight Group (OPIOG) with cross-Departmental and cross-sectoral representation was established. OPIOG Sub-Groups further helped foster this cross-sectoral approach.

From the work carried out to date, there is a clear understanding that policy approaches must be comprehensive, must be based on in-depth understanding of human behaviour and local context, must reach individuals across the life course and must target inequalities. Sláintecare Healthy Communities, an intervention in the 19 most deprived communities in Ireland, facilitates the implementation of these policy approaches. The nineteen Community Food and Nutrition Workers recruited will help to further this work and Appendix A outlines considerations for obesity prevention policy options for each of the stages in life from preconception until old age. These can help guide healthcare professionals, teachers and all those working together to help prevent overweight and obesity.

Between Sláintecare Healthy Communities and the Healthy Cities and Counties Programme, Healthy Ireland are funding 50 full time health promotion positions in local authorities, as well as a National Coordinator. These individuals work with communities to identify local needs and are crucially feeding into the development of the long-term strategic plans (LECPs) of each local authority ensuring health and wellbeing, including obesity prevention, is at the heart of long term plans. Funding for actions in each local authority, from Round 4 of the Healthy Ireland Fund, will be based on analysis of health profiles of each county to ensure that the greatest level of impact on public health can be achieved.

Prevention is the best policy option and this begins with the pre-natal health of the mother. It is well-recognised that efforts to prevent obesity need to consider the wider determinants of the disease. There will be an increased focus on this starting with the Healthy Ireland Healthy Weight Campaign being launched in September 2022. This social media campaign is aimed at 25-34 year-olds and will seek to reframe the conversation around overweight and obesity; Phase 1 includes four pillars which are healthy eating, physical activity, sleep and reducing stress.

The aim of the campaign is to change knowledge and attitudes reflecting current scientific evidence that weight is impacted by factors beyond our control (such as genetics and environmental factors), and not just by individual choices about physical activity and food. The tone and message of the awareness phase of the campaign aims to help ensure sensitivity towards obesity stigma and reduce social stereotypes and misconceptions about people living with obesity.

The START Childhood Obesity Campaign is continuing until end 2022. An evaluation of the current campaign will commence in Q 4. Ongoing evaluation of each phase has been carried out and lessons learned have been used to adjust the campaign messages, in particular to focus more on reducing high fat, sugar and salt foods and drinks. Prevention of childhood overweight and obesity is a key priority.

Changing the food environment is one of the most important policy actions for helping prevent overweight and obesity. An action in the OPAP previously referred to is the Roadmap for Food Product Reformulation in Ireland. Over four years (2021-2025), the Department of Health aims to reduce calories, saturated fat, sugar and salt in the Irish diet. Food companies are being asked to use less of these target nutrients in many everyday foods and to reduce portion sizes of high calorie foods that are poor nutritional choices. To progress the implementation of the Roadmap a Food Reformulation Task Force has been established; this is a strategic partnership between The Food Safety Authority of Ireland and Healthy Ireland (Department of Health).

The targets in the Roadmap are:

- **Salt** A 10% reduction focused on the food groups that contribute most to people's salt intakes
- **Sugar** A 20% reduction is proposed in the sugar content of nine food categories* that are currently the focus of the Public Health England sugar reduction programme
- **Saturated Fat** A 10% reduction in the saturated fat content of processed foods that contribute most to saturated fat intakes in Ireland is proposed.
- **Energy (Calories)** A 20% reduction in calories is proposed, focused on product categories that contribute significantly to children's calorie intakes (up to the age of 18 years) and where there is scope for either substantial reformulation and/or portion size reduction.
- **Products targeted explicitly at babies and young children** The FSAI will develop targets for this category based on its previous work in this area (2012 and 2018).

Management of overweight and obesity within the health-care sector is becoming more comprehensive, encompassing primary health care, utilizing multidisciplinary teams and providing effective guidelines to support actions. This approach is being led out through the HSE Clinical Lead for Obesity and Obesity Clinical Advisory Group based on the *Model of Care for the Management of Overweight and Obesity* launched in 2021, completing the Models of Care for children and adults.

Funding of the *Make Every Contact Count* (MECC) in the HSE has a specific module to assist healthcare professionals in how to engage with individuals in relation to overweight and obesity.

Healthy Ireland will continue to implement the OPAP Ten Steps guided by OPIOG, using multi-sectoral and multistakeholder approaches and with support from a partnership of relevant stakeholders. Particular emphasis will be placed on working with the food industry regarding the increased availability of healthier foods through interaction with the Reformulation Taskforce. The marketing, including digital marketing, of high fat, sugar and salt foods and drinks will be a major focus and action will be taken to counter the commercial determinants of obesity.

The OPAP has taken a life-course approach and a range of Healthy Eating Guidelines have been developed for Adults, Teenagers and Children 5 years and over and for 1-4 year-olds. Guidelines for over 65 year-olds and guidelines to increase plant-based foods in your diet are under development. The Department has requested that the FSAI develop Scientific Recommendations for Food-based Dietary Guidelines for Teenagers. In 2023, these will be translated into Healthy Eating Guidelines for this age group and will include a focus on sustainability. This will complete the suite of Healthy Eating Guidelines for all ages throughout the life-course. The HSE has developed Guidelines for Infants. Nutrition Standards for School Meals have also been developed as have Healthy Food Guidelines for Food Parcels for food banks and charities.

The EU Best ReMaP Joint Action Work Package on Restricting the marketing of unhealthy foods to children and adolescents, being led by Ireland and Portugal, will continue until September 2023. This will put forward a revised WHO Nutrient Profiling Model for use throughout Europe in implementing the Audio-Visual Media Services Directive; this model will also be used in the EU Codes of Practice templates, adaptable by Member States, for use with Non-broadcast media, including digital media; product placement (including multi-buy options) and sponsorship. As part of this Work Package, a Digital Media Monitoring Framework is being developed for EU-wide use.

The Department of Tourism, Culture, Arts, Gaeltacht, Sport, Media and Gaeltacht have brought the Online Safety and Media Regulation Bill 2022 to the Oireachtas. The Bill, which recently passed all stages in the Seanad and has passed the first three stages in the Dáil, will dissolve the BAI and establish a new regulator, Coimisiún na Meán. Under the Bill, broadcasting codes will be ultimately superseded by media service codes, which will apply to both video-on-demand and broadcasting services. Furthermore, An Coimisiún will be enabled to make online safety codes which apply to designated online services, such as video-sharing platform services (e.g. YouTube). Similar to broadcasting codes such as the CCCC, media service and online safety codes may provide for the regulation of commercial communications relating to foods or beverages which may be the subject of public concern in respect of the general public health interests of children. As the Department responsible for public health policy, the Department of Health would expect to contribute to and be consulted on the making of any codes by Coimisiún na Meán relating to the advertisement of food or beverages at children.

There is no doubt that further opportunities to enhance policy actions will present themselves over the next three years of the OPAP, and a new action plan will need to be developed to continue this work. Evidence-based research, in particular behavioural research to support action, together with building health service capacity to support adoption and implementation of obesity prevention policies will be needed.

The following are examples of opportunities using policy learning and best practices between countries:

- The Association for the Study of Obesity Ireland adapted the *Canadian Adult Obesity Clinical Practice Guidelines*⁵³ for Ireland and these were launched in October 2022. These will be developed by the HSE into NCEC National Clinical Guidelines in 2023 to guide best practice in obesity care in Ireland.
- The Safefood study "Reducing children's and adolescents' exposure to digital marketing of unhealthy foods: Implementing the World Health Organisation CLICK framework on the island of Ireland with a children's rights analysis" is being undertaken with Irish, UK and Australian partners and will be completed in June 2023. The aim of this study is to implement the WHO CLICK Framework to develop a deep, holistic view of food/beverage digital food marketing and its regulation on the island of Ireland, plus a child rights analysis.

While to date Ireland has not succeeded in reversing the obesity epidemic, it is important to recognise that none of the WHO Europe countries have been able to achieve this. With regard to the *Report on the fifth round of data collection, 2018-20: WHO European Childhood Obesity Surveillance Initiative (COSI)*, the levels of overweight and obesity in school children in Ireland has overall levelled off in recent years, although this development was not seen in those school children in disadvantaged communities. Evidence of the current situation from the ongoing COSI round will be available in 2023.

This Review provides an update as to the current status of some of the main deliverables in the Ten Steps to end October 2022 and is published alongside the external Evaluation and Evidence Review by UCC. It also highlights priority actions, guided by the recent WHO Obesity Report 2022, to be taken forward until the end of 2025.

Appendices

Appendix A WHO Policy Options for Nutrition in Ireland (2020)

Health and Wellbeing/Healthy Ireland requested support from the WHO on Policy Options for better Nutrition in Ireland in 2020. This advice was to help identify gaps for nutrition actions not included in the OPAP. The WHO recommendations are grouped around 5 key themes.

Theme 1: Healthy food and drink environments

School nutrition (including creches, kindergartens and preschools)

1. Monitoring the implementation of standards for school nutrition
2. Ban marketing of foods in and around schools
3. Regulate fast food outlets within certain distance of schools, hospitals or universities
4. Regulate fundraising within schools where ultra-processed foods are offered
5. Community and family-based programmes for nutrition education through schools
6. Provide training workshops for caterers providing food in schools
7. Online nutrition training programmes for teachers, health professionals etc.
8. Nutrition in the school curriculum
9. Provision of school meals/school feeding programme
10. School fruit and vegetable scheme
11. Monitoring of children's growth in schools
12. Implement school gardens
13. Standards on types of foods and beverages available in schools

Settings-based approaches

14. Regulate fast food outlets within certain distance from public settings
15. Provide training workshops for caterers in public settings
16. Healthy stadia
17. Enable healthy options to be provided in public institutions (e.g. lower sodium) through training, procurement policies and standards
18. Engage in cross-government collaboration to facilitate healthier food choices in settings

Economic tools

19. Taxation on HFSS foods (e.g. SSDs)
20. Remove tax from unprocessed fresh foods
21. Targeted subsidies e.g. for fresh fruit and vegetables
22. Supply chain incentives (investments in production, supply chain logistics and procurement policies)

Product reformulation

23. Salt, including setting targets levels for the amount of salt in foods and meals
24. Sugar
25. Trans fats

Marketing and promotion of unhealthy foods

26. Monitor and regulate digital marketing
27. Ban of sponsorship of events where promotion of unhealthy food is involved
28. Widespread marketing to promote consumption of unprocessed legumes, fruit and vegetables
29. Regulation of marketing of food and non-alcoholic beverages to children

Food labelling to reduce intake of HFSS foods and calories

30. Front-of-packaging
 - On packaged goods
 - For takeaway and restaurant foods

Eliminate industrial trans-fats

31. Legislation to ban their use in the food chain
32. Reformulation
33. Labelling
34. Fiscal policies
35. Agricultural policies

Measures directed at food retailers and caterers

36. Limit portion and package size, to reduce the intake of HFSS and calories and promote the intake of fruits and vegetables
37. Address the availability, affordability and promotion of fruit and vegetables
38. Utilize planning and short supply chain approaches

Theme 2: Healthy diet throughout the life-course

Nutrition in the "First 1000 Days"

39. Improving nutrition at preconception during pregnancy and among post-partum mothers
40. Promotion and counselling of exclusive breastfeeding for the first 6 months and continued breastfeeding up to 2 years and beyond
41. Baby-friendly and family-friendly hospitals
42. Implementation of the WHO International Code of Marketing Breastmilk Substitutes
43. Nutritional composition and health claims/age recommendations on baby foods
44. Multi-component interventions starting with expectant mothers, infants and preschool children and families
45. Counselling on healthy diet and nutrition during pregnancy
46. Training of health professionals on breastfeeding

Guarantee healthy ageing among older people

47. Ensure healthy nutrition in institutions

Health literacy

48. Online educational resources providing guidelines and cooking demonstrations

49. Guidance on portion sizes
50. Considering pre-school settings as well as active and working-age populations
51. Use of social media to promote healthy food choices
52. Nutrition education and counselling on healthy diet
53. Develop and promote guidelines for healthy and sustainable nutrition
54. Implement behaviour change communication and mass media campaigns
55. Implement initiatives for drinking water promotion

Theme 3: Health systems for the promotion of healthy diets

56. Brief interventions and nutrition counselling about healthy diets in health care settings
57. Nutrition policies with primary health care or people-centered health care
58. Screening for overweight and obesity
59. Training healthcare professionals on the identification of infants/preschool children at risk of obesity
60. Improve capacity and training for professionals in nutrition
61. Ensure a continuum of high quality nutrition services

Theme 4: Surveillance, monitoring, evaluation and research

62. Growth monitoring and promotion with focus on overweight and obesity
 - Primary school children
 - Under 5 years
63. Consolidate, adjust and extend existing national and international monitoring and surveillance systems
64. Establish and expand food composition databases
65. Monitor and evaluate diet-related activities, interventions and policies
66. Establish and maintain nutrition and anthropometric surveillance systems for nutritional risk factors, which allow disaggregation by socioeconomic status and gender

Theme 5: Governance and intersectoral alliances

67. Ensure coherence among all policies that influence food systems and the food supply
68. Support mechanisms that enhance multistakeholder action
69. Empower communities at local and regional levels
70. Countries to participate in and support networks of countries

Appendix B WHO Considerations for interventions across the life-course.

This appendix priorities the alignment of interventions for obesity prevention in the OPAP with the WHO Obesity Report, 2022. These interventions are targeted at each of the stages in life from preconception to old age.

Preconception and prenatal care

A woman's nutritional status during preconception and in the prenatal period may influence her offspring's health and susceptibility to obesity. Tie in Irish situation

- Provide food vouchers for new parents to subsidize the purchase of healthy foods
- Provide monitoring and counselling on nutrition and exercise before and during pregnancy, which can be used to improve health literacy as well as diet and physical activity behaviours

Infancy (0 to 12 months)

Infancy is an important time for development and growth and a key target in preventing obesity in populations as an individual's propensity to develop obesity may be influenced during foetal development and infancy.

- Promotion and support of exclusive breastfeeding for the first 6 months of life
- Implement the Baby Friendly Hospital Initiative to help mothers to breastfeed babies and provide lactation support training for health professionals
- Implement supporting policies and legislations from the range available to support breastfeeding, including universal paid maternity leave, national labour policies and workplace support for breastfeeding, along with laws to protect breastfeeding in public
- Implement restrictions on the inappropriate marketing of products that compete with breastmilk, using the international Code of Marketing of Breast Milk Substitutes as a guide
- Encourage a healthy introduction to solid food through reformulation of infant food to improve their nutritional profile along with tackling appropriate marketing of infant and baby foods
- Monitor children's growth and the micronutrient status of both the mother and newborn infant
- Provide counselling to improve health literacy and diet and physical activity behaviours

Childhood (1 to 12 years)

In the first 12 years of life children are exposed to a range of key settings impacting their later health and these should be targeted by structuring children's environments to encourage activity and discourage consumption of unhealthy foods.

- Support by extending health-promoting frameworks from schools to nurseries and kindergartens
- Implement mandatory national food standards for child-care settings, recreation facilities and schools
- Provide free meals in these settings, in particular in early school years or for those from low-income households, thus supporting healthy dietary intake for all children

- Education Make nutrition education statutory in educational curricula, in addition to the approaches above
- Include teaching of food and nutrition practical skills in the educational curricula, such as cooking classes

Teenagers (13 to 19 years)

Adolescent/teenage years are a crucial time in the development and establishment of health behaviours. Recognized as a transitional phase, habits developed during these years will often carry over into adulthood, which can have implications for the development of overweight and obesity. Schools are a key setting.

- Implement nutrition education and counselling in schools to increase the intake of fruits and vegetables
- Support healthy eating and physical activity through the implementation, maintenance and scaling-up of measures to make every school a health-promoting school
- Control the clustering of unhealthy food outlets around secondary schools to support efforts within schools for healthy eating

Adulthood (20 to 64 years)

It is important to continue obesity prevention and control across the life course, including specific policies that target adults. Individuals of employment age can be specifically targeted through improving workplaces. However, policies and interventions should also be instituted that reach beyond the workplace, targeting the unemployed, to ensure that inequalities are not widened.

- Education Implement nutrition education and counselling in workplaces to increase the intake of fruits and vegetables
- Provide opportunities to learn food and nutrition practical skills in community-based programmes, such as cooking classes
- Supported through workplace wellness programmes, that promote health and safe and resilient places of employment
- Create community health promotion programmes to reach out-of-work adults

Older people (65 years and older)

Older individuals can often be missed in obesity prevention and control programmes, so it is important to ensure that policies and approaches support healthy living in those in later life.

- Implement nutrition education and counselling in hospitals to increase the intake of fruits and vegetables
- Development of age-friendly environments, leading to cities and communities that enable people of all ages to realize their full potential for health in a sustainable and equitable way
- Support provision of healthy community centres, primary health-care programmes, assisted living facilities, hospitals and home care services
- Promote healthy nutrition in healthcare settings and residential homes and promote nutrition by improving the quality of advice that health professionals give to older people.

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