

Minutes of OPIOG Meeting 17 June 2021, 10.30 am

Held remotely via Microsoft Teams

Present

Laura Magahy	Department of Health (Chair)
Angela Robinson	Department of Agriculture, Food and the Marine
Prof Ivan Perry	University College Cork
Anne-Marie Brooks	Department of Children, Equality, Integration, Disability and Youth
Jason Taylor	Department of Housing, Local Government and Heritage
Prof. Donal O'Shea	HSE
Sarah O'Brien	HSE
Dr. Catherine Conlon	<i>safefood</i>
Frank McGeough	Department of Social Protection

Apologies

Dr. Pamela Byrne	FSAI
Ronan Kielt	Department of Education

Department of Health officials

Tom James
Ursula O'Dwyer
Seamus O'Reilly
Caitríona Connolly
Ashley Lowry
Greg Straton (Item 3)
Fiona Gilligan (Item 4)
Sheila Caulfield (Item 4)

1. Welcome from Minister Feighan, introductions

The Chair introduced Minister of State for Public Health, Wellbeing and the National Drugs Strategy, Frank Feighan, who addressed the meeting.

Minister Feighan stressed his interest in the area of obesity, in particular childhood obesity. He stated that a lot had been learned from the COVID-19 crisis, and looked forward to continuing to work with the OPIOG as the country emerged from the pandemic.

The Chair also introduced Tom James, the new Head of Health and Wellbeing.

2. Minutes of last meeting

The minutes of the meeting of 24th March 2021 were approved, with one correction relating to the number of schools participating in the hot meals programme.

3. Sláintecare Healthy Communities Programme

Greg Straton of Health & Wellbeing gave a presentation on the Sláintecare Healthy Communities Programme.

The programme aligns with a number of commitments in the Programme for Government, in particular to introduce a “DEIS” style programme for Health, and it is an important element of Sláintecare Reform Programme 2 “Addressing Health Inequalities: Towards Universal Healthcare”.

Socio-economic differentials in mortality have been rising since the 1980s. This Programme takes a place-based approach to addressing this, with Phase 1 including 19 areas for 2021 expected to become operational in Q3/4, increasing to up to 51 by Phase 3 in 2023, subject to budgetary approval. Selection of the areas is based on the Pobal HP Deprivation Index. In each area a core group of initiatives will be established to support a Healthy Community. Overweight and obesity will be a key focus of the Programme, including with the rollout of the Healthy Food Made Easy programme. The implementation structures will have national, regional and local elements, with Local Implementation Teams of community-level stakeholders.

The initiative was welcomed by the Group. CC suggested that there could be a commissioned research piece on improving ownership of health – the All-Island Food Poverty Network in September will be focusing on socio-economic determinants of health. The Chair said it would be useful to keep Healthy Communities as a standing agenda item.

4. Adult Obesity Campaign

Healthy Ireland Presentation (Fiona Gilligan/Sheila Caulfield)

FG and SC presented on an outline approach to a campaign. Adult obesity has yet to be addressed from a broad communications perspective. It will need to be a 3-5 year campaign with a structured and systematic approach and a focus on changing specific health behaviours. The OPIOG was requested to consider all three presentations and advise on the following: (1) Initially targeting weight stigma as a disease?; (2) the target audience segmentation for an adult obesity campaign; (3) whether to focus on how to lose weight or how to maintain a healthy weight.

The general consensus following the presentations in relation to the three questions was (1) yes; (2) start with the 25-34 year olds; (3) Focus on those with a healthy weight and how to maintain this, and for those who are overweight not to increase it, and where possible to achieve and maintain a 5% reduction.

Informing DoH Communications Strategy (Sarah O’Brien)

This presentation was on behalf of the Healthcare Sub-Group. There is a need for formative research with target audiences to ensure campaigns focus on salient issues. There are significant, well-resourced competing agendas: in 2017, the snack and convenience food

sector spent €19.5million on product advertising. Body weight is not a behaviour, and the role that health behaviours play in overweight and obesity is complex; key behaviours include diet, physical activity, sleep and stress. Experiences of judgment and shame prevent people with obesity from seeking help. The key focuses should be on helping those with a healthy weight to maintain it, and for those who have overweight to not increase it, and where possible to achieve and maintain a 5% reduction. There are significant increases in the prevalences of both overweight and obesity in the decade from 24 to 34 for both men and women, and the Sub-Group recommended that this group be targeted for the Healthy Weight Campaign.

There are a number of learnings from the START campaign. It is challenging to effectively address multiple behaviours in one campaign, so the recommendation is to focus on behaviours that have the highest potential for impact. Many actions that could have provided significant strategic support for the campaign are named as priorities in the Healthy Ireland Strategic Action Plan 2021-2025. In terms of communications, it is a very crowded market where the investment is very much focused on opposing agendas.

Desk research (TBWA – Anne Cotte, Suzan Tosun, Paula Kelly)

This presentation looked at a number of approaches from around the world.

The Canadian approach takes the stigma out of the issue and focuses on the health aspects. The NHS in the UK used the COVID-19 crisis as a way to encourage behaviours that reduce the risk of obesity, targeting a collective to make a change rather than pointing the finger at individuals. Other examples used unhealthy or gruesome visual images to call out problem behaviours, which is not a recommended approach.

Campaigns need to be sensitive about how they address people's bodies; they need to encourage healthy behaviours, not dismiss any body type. It is also very important for healthcare professionals to be careful with language when discussing body weight. The sensitivity of the issue has been exacerbated by an increase in junk food consumption during the pandemic.

The Canadian approach was well received by the group. It was agreed that the language used would be really important, and that this should remain as a standing item on the agenda.

Remaining items

The remaining items on the agenda were not reached due to time pressure, but updates were circulated to the group on the Obesity Clinical Programme (re the Healthcare Sub-Group), the Reformulation Roadmap and the "Ten Steps".

AOB/Date of next meeting

The next meeting will be held in September, on a date to be scheduled.