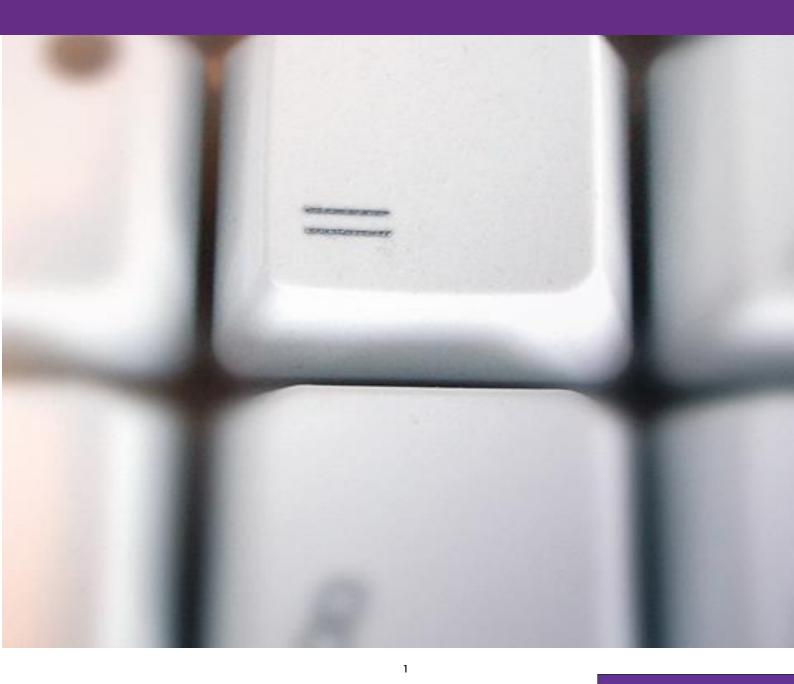


Audit of Inequalities and S75 Action Plan – 1 January 2017 to 31 December 2019



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To contribute to public health and well-being, by promoting food safety and healthy eating on the island of Ireland.

*safe*food

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Audit of Inequalities

1. Purpose of Audit

Section 75(1) of the Northern Ireland Act 1998 states that in carrying out functions relating to Northern Ireland, public bodies such as *safe*food are required to have due regard to the need to promote equality of opportunity between:

- persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation
- men and women generally
- persons with a disability and persons without
- persons with dependants and persons without.

Section 75(2) of the Act states that in addition and without prejudice to the obligations above, *safe*food is required to have regard to the desirability of promoting good relations between persons of different religious belief, political opinion or racial group when carrying out its functions in relation to Northern Ireland.

Under these provisions *safe***food** is required to develop an Equality Scheme. This Scheme is to be reviewed on a five year basis. The Equality Scheme 2011 to 2016 is due to be reviewed and as part of this review and, as recommended by the Equality Commission for Northern Ireland, an Audit of Inequalities will be carried out. This Audit of Inequalities will inform the development of an Action Plan. An Audit of Inequalities is a systematic review and analysis of inequalities which exist for service users and those affected by a public authority's policies. The audit can be used by a public authority to inform its work in relation to the Section 75 equality and good relations duties. It can also enable public authorities to assess progress on the implementation of the Section 75 statutory duties as it provides baseline information on existing inequalities relevant to a public authority's functions. Where inequalities have been identified, specific action measures and outcomes to promote equality and good relations for the relevant categories can be developed and linked to achievable outcomes which should be realistic and timely. The resulting Action Plan is thus a mechanism 4for the realisation of measures to achieve equality outcomes for the Section 75 equality and good relations categories.

2. *safe*food – its origins and functions

*safe*food is a North-South Body, responsible for the promotion of food safety and healthy eating on the island of Ireland. It was established in 1999 under the terms of the <u>British-Irish Agreement Act 1999</u> and the North-South Co-operation (Implementation Bodies) Northern Ireland Order 1999. The establishing legislation provides for:

- the promotion of food safety and healthy eating;
- research into food safety;
- the promotion of scientific cooperation and linkages between laboratories, and,
- surveillance of food-borne diseases.

There is also a requirement to provide nutritional advice and to provide an independent scientific assessment of the food supply.

Funding is provided by the Oireachtas in the Republic of Ireland and by the Northern Ireland Assembly. Seventy per cent of the funding is provided by the Department of Health (DOH) in the Republic of Ireland, and the balance (thirty per cent) is provided by the Department of Health in Northern Ireland (DOHNI).

The functions of the Body are carried out by the Chief Executive Officer (CEO) under the policy direction of the North-South Ministerial Council (NSMC). There is a twelve-member Advisory Board and a twelve-member Advisory Committee (SAC) to assist and advise the CEO in the discharge of *safe*food's functions.

3. Background to *safe*food

*safe*food's mission is to contribute to public health and well-being, by promoting food safety and healthy eating on the island of Ireland. Its over-arching aim is to communicate positively, in a direct and clear manner, to move consumers and those involved in the food chain towards a better understanding of food safety, nutrition and healthy eating. This aim will always be supported by sound and authoritative science.

4. Functions which do not apply to *safe*food

*safe*food is a small public body based in Cork without any employees in Northern Ireland. It is not a health provider. It does not provide direct services to the public in Northern Ireland as its primary role is to commission research, disseminate information and promote awareness of safe and healthy eating throughout the island of Ireland. Therefore, the areas of inequality which have emerged from this audit do not closely match those which traditionally emerge from large health providers in Northern Ireland – i.e. they exclude concerns re employment or direct service provision.

5. Current position and challenges for *safe*food

Food safety and healthy eating continue to be of increasing national and international importance from a health perspective and underpin *safe*food's approach to delivering targeted consumer supports. The current obesity epidemic on the island of Ireland poses a major public health challenge.

*safe*food's research and work has highlighted the various political, economic, social and technological issues that impact on its key objectives, such as:

- Developing a complementary and collaborative approach in the area of public health with the many stakeholders on the island of Ireland. The current uncertainty around BREXIT could bring further challenges.
- Working in an environment where commercial interests do not always support safe and healthy food choices.

- A growing public health concern with regards to excess weight and obesity.
- The changing economic, social and cultural factors that influence consumers and their perceptions about food across the island of Ireland.
- Developing a wider awareness around the food chain, food hygiene and safe and healthy food.
- Promoting an environment where attitudinal change occurs towards healthy eating.
- Recognising that inequalities in access to a healthy diet are issues for a significant proportion of the population on the island of Ireland. It is important that the needs of the disadvantaged groups on the island of Ireland are addressed. Many of determinants of food poverty are beyond the remit of this organisation.
- How lifestyle changes, the impact of technology on consumer behaviour, media and digital emphasis on parenting, treat culture, confusion among consumers around what to buy, increasing inequalities all impact on *safe*food's message of safe and healthy eating.
- Developing campaign messages that recognise the increasing smart phone ownership, device reliance, ad blocking on digital media, social media algorithms, etc.

These challenges are applicable across multiple identity groups and *safe*food firmly believes that a cooperative, collaborative approach among concerned stakeholders is required to influence behavioural change.

6. Importance of nutrition and food safety to health

The prevalence of overweight and obesity worldwide has increased markedly over the past three decades. In 2014, the World Health Organisation (WHO) recently estimated that more than 1.9 billion adults aged 18 and older were overweight. Of these, over 600 million adults were estimated as obese. An estimated 41 million children under the age of 5 years were overweight or obese.¹

In Ireland, the Healthy Ireland Survey 2015² found that 37% of Irish people were overweight with a further 23% classed as obese. Whilst men were more likely to be overweight than women (43% men; 31% women), the

¹ WHO: <u>http://www.who.int/mediacentre/factsheets/fs311/en/</u>

² Healthy Ireland Survey 2015 - <u>http://health.gov.ie/wp-content/uploads/2015/10/Healthy-Ireland-Survey-2015-Summary-of-Findings.pdf</u>

proportions that were obese were more closely aligned (men: 25%, women: 22%). One in four children were overweight or obese. The same research found that:

- Only one in four reported that they ate five or more portions of fruit and vegetables a day.
- Over one in five reported that they ate no fruit or vegetables daily.
- 65% reported that they consumed snack foods or sugar sweetened drinks daily.

Research carried out in Northern Ireland³ found that 60% were either overweight or obese with 25% classed as obese. Males (66%) were more likely than females (56%) to be overweight or obese. It was found that 28% of children were classed as overweight or obese. The research also highlighted that:

- Only 36% of respondents indicated that they ate the recommended five portions of fruit and vegetables a day.
- Over a third of 16-24 year olds ate savoury snacks most days.
- Nearly 50% of the respondents eat biscuits regularly.

Obesity and the related health burden remains a major public health problem in Ireland and worldwide. Whilst the personal and social costs of the current epidemic of overweight and obesity in Ireland cannot be fully quantified, the economic costs are high, estimated at approximately €1.13 billion⁴.

*safe*food sponsored research⁵ into food and nutrient intake and attitudes to these among disadvantaged groups on the island of Ireland. The research showed that disadvantaged groups:

- had a dietary pattern that was more 'energy dense' and 'micro-nutrient poor' than their more affluent peers.
- expressed a lower interest in healthy eating and implementing dietary change.

³ Health Survey Northern Ireland First Results 2014/15 - <u>https://www.health-ni.gov.uk/articles/health-survey-northern-ireland</u>

⁴ safefood. (2012) The cost of overweight and obesity on the island of Ireland: Executive summary

⁵ 'Food and nutrient intake and attitudes among disadvantaged groups on the island of Ireland', Kearney, McCartney et al, *safefood* 2008

- found cost of food was a barrier to eating a healthy diet (but this was secondary to social stresses).
- were more accepting of being overweight and less likely to instigate changes to dietary habits.

In Northern Ireland, the First Results survey ⁶ showed that males were least likely to lose weight and were twice as likely to consume processed meats.

Research into health inequalities in Northern Ireland⁷ reveals certain equality groups are more inclined to predominate at the lower socio-economic levels e.g. men, people with disabilities, young people, young mothers. Historically, Roman Catholics have been associated with greater social disadvantages than Protestants (e.g. unemployment differentials). Whilst there has been a general convergence of employment activity levels between the two groups, other research looking at residential segregation, for example, shows that segregation still exists with different experiences felt by the two communities⁸. It would therefore be prudent to take an umbrella view that poverty and disadvantage affects all communities within Northern Ireland.

Economic circumstances, skills deficits and the proliferation of fast-food are leading to increasing issues of food poverty, defined as inadequate access to nutritious food. Households in food poverty do not have adequate nutritious food or enough food to meet the energy and nutrient needs of all of their members regularly. It is affecting a sizeable percentage of the population (one in ten is estimated to be in food poverty on the island of Ireland, as evidenced by *safe*food research⁹. This is exacerbated by the effects of the economic difficulties, particularly in lower socio-economic communities who have low incomes and relatively high levels of unemployment. Suboptimal nutrition and a lack of a healthy eating culture all contribute to high levels of chronic disease, obesity and cancers. On the other side of the coin, eating outside of the home leads to the increased consumption of more rich and processed foods and this, over time, leads to consequent health impacts including obesity.

⁶ Health Survey Northern Ireland First Results 2014/15 - <u>https://www.health-ni.gov.uk/articles/health-survey-northern-ireland</u>

⁷ Health Inequalities in Northern Ireland: Key Facts 2015

⁸ Nolan (2014) Northern Ireland Peace Monitoring Report. Number Three.

⁹ Measuring Food Poverty in Ireland (September 2012)

According to the World Health Organisation (WHO)¹⁰, more than 40% of foodborne outbreaks occur in the private home. Research commissioned by *safe*food highlighted that only one third of participants were able to identify the correct definition of a 'use by date'¹¹ when using food from their fridge. Another commissioned research showed that E.coli was present on 27.5% of household dishcloths. Good food hygiene at home can reduce the risk of illnesses associated with food poisoning.

Food safety is critical at all stages of the food chain – on the farm, during processing, storage and distribution, at retail and catering levels, and in the hands of the consumer. Recent food scares have highlighted the need for proactive measures to identify the pressures and drivers that can negatively impact on the food chain and give rise to adverse food safety events for consumers.

7. Inequalities in Access to Safe and Healthy Eating on the island of Ireland

Economic circumstances, skills deficits and the proliferation of cheaper convenience food are leading to increasing issues of food poverty, defined as inadequate access to nutritious food. Households in food poverty do not have adequate nutritious food or enough food to meet the energy and nutrient needs of all of their members regularly. It is affecting a sizeable percentage of the population (one in ten is estimated to be in food poverty on the island of Ireland, as evidenced in the *safe*food report 'Measuring Food Poverty in Ireland' (September 2012).

This is exacerbated by the effects of the economic difficulties, particularly in lower socio-economic communities who have low incomes and relatively high levels of unemployment. In 2014-2015, 22% of individuals in Northern Ireland were considered to be in relative poverty and 20% were considered to be in absolute poverty.¹² The HBAI¹³ further illustrates that the family type at the highest risk was single with children at 35%. More than half of children living in workless households were living in relative poverty in 2014-2015. The percentage of pensioners with no occupational/personal pension living in relative poverty was 25%. Approximately, 22% of the population with disabilities are estimated to be living in poverty.¹⁴

¹⁰ http://www.fao.org/docrep/meeting/004/x6865e.htm

¹¹ A study of domestic fridges on the island of Ireland, 2015

¹² The Northern Ireland Poverty Bulleting – June 2016.

¹³ The Northern Ireland Households Below Average Income Report 2014-2015

¹⁴ Monitoring poverty and social exclusion in Northern Ireland 2014.

Suboptimal nutrition and a lack of a healthy eating culture all contribute to high levels of chronic disease, obesity and cancers, leading to a need for directed intervention and targeted programmes. Within a complex food system, *safe*food is one of multiple organisations¹⁵ that are attempting to effect changes in consumers' behaviours. There is a crucial need to tackle this challenge and *safe*food's research and partnership work to date has emphasised the need to work in a cohesive, co-operative and strategic manner with all the stakeholders in the food system to begin to create the means to influence a cultural shift towards safer food practices and healthier food preferences.

Although finance is a major determinant of food poverty, it is a complex issue that incorporates education, transport, literacy, culture and environmental planning. Thus, food poverty is an outcome of broader determinants of health including poor housing, social exclusion and high crime. It is also recognised that other social determinants affect health such as social status, stress, early life, social exclusion, work, unemployment, addiction etc.¹⁶

*safe*food research has shown that the most vulnerable groups, and where there is likely to be inequalities in access to safe and healthy eating, are single parent families, older people, low income families with teenage children, young people and people with disabilities. *safefood* recognises that these groups are found in all the equality categories and that its communication messages must be inclusive. Food poverty and safe eating is a reality for many people on the island of Ireland. An example, of how *safefood* is working pro-actively to address these equality and access concerns is through its Community Food Initiatives (CFIs) which brings together NGO, community groups, government agencies and government departments on the island of Ireland.

8. Priorities for *safe*food

*safe*food's strategy is aligned with the targets set out by its sponsor departments. The strategy will specifically target obesity and will maintain an all-island focus whilst recognising that the two jurisdictions have different needs at different times. The initiatives will focus on those most in need.

¹⁵ Governments, food producers, individuals, schools, retailers etc.

¹⁶ Wilkinson R, Marmot M. 'The solid facts'. Copenhagen: World Health Organisation, 2003

The sponsor department targets are set out in their policy statements. In relation to obesity and overweight in the Republic of Ireland, the Department of Health's Obesity Policy and Action Plan 2016 – 2025 has set a sustained annual 0.5% decrease in the level of excess weight averaged across all adults and children. In Northern Ireland, the following targets are outlined in "A fitter Future for All – Framework for preventing and addressing overweight and Obesity in Northern Ireland 2012-2022":

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

This will be done by creating effective channels of communication that empower positive behavioural change and where education and training will be critical components.

A strong communications programme supporting the increasing need to promote food safety and hygiene to consumers will be delivered. The emphasis will be to target specific audiences who are at greater risk of food poisoning in the home because of their vulnerabilities.

There are many organisations on the island of Ireland involved in the food system. *safe*food's strategy will be to work in cooperation with these stakeholders to maximise the advantage that a partnership approach can bring and build up relevant networks that can be used as a basis for developing policy and other interventions.

With this strategy in mind, *safe*food's objectives will be to concentrate specifically on:

- Early years where lifelong impact can be made.
- Vulnerable groups such as the aging population.
- Supporting communities that are at risk of food poverty.
- Identifying other groups at risk.

safefood aims to ensure that the methods of communication are equal and inclusive and adequately reaches those groups which experience inequality in accessing nutrition or whose patterns of consumption need to change to promote healthier food for life. **safefood**'s evaluation has recognised that the groups highlighted

are less able to access its messages either because they are disadvantaged or because of lifestyle or situational factors they are less able to make informed and empowered choices. *safefood* recognises its responsibilities to address its remit to all communities but is committed to developing special initiatives to address these groups who are frequently 'harder to reach' or resistant to behavioural change messages. These will form a core part of its action measures for the Action Plan.

It is also essential that *safe*food continues to build its evidence base thereby providing solid scientific evidence that will enable and inform cultural behavioural change.

*safe*food is also particularly conscious of identifying other equality groups that are not necessarily reflected in the evidence base and research. The messages of healthy and safe eating apply to all groups equally. However, research does not reflect nor suggest any different impacts on some specifically identified equality groupings e.g. sexual orientation, religion or political view. This is why *safe*food will work closely with local community partnership levels as well as national groups to ensure its message goes out at the ground level.

9. Good relations

S75 also requires public bodies to have regard to the desirability to promote good relations between people of different religious belief, political opinion and racial background. *safefood* believes by working towards comprehensive evidence based research which allows comparison and co-operation across the island of Ireland, as well as working in active co-operation through local initiatives in communities in Northern Ireland, that it is contributing to promoting greater respect between the Protestant and Catholic and ethnic minority populations in Northern Ireland. This co-operative, collaborative approach is a hallmark of how *safe*food works.

10. Conclusion and s75 Action Plan

*safe*food, in partnership with others, has a major role in communicating to influence change in order to achieve its aim of protecting and improving public health and wellbeing on the island of Ireland. Reviewing the previous Audit of Inequalities, S75 Action Plans, Corporate strategies, business plans and key research has

given *safe*food a solid base to reflect and continue to build on its work as it affects the equality groups in the categories covered by s75 of the Northern Ireland Act 1998.

As a result of this exercise **safefood** has prepared a S75 Action Plan for the period 1 January 2017 to 31 December 2019.

S75 Action Plan – 1 January 2017 to 31 December 2019

(NB: This Action Plan does not form part of the approved Equality Scheme. It is a 'living' document and can be added to as other inequalities are identified by **safefood**. The review of the audit of inequalities on which the plan is based is thus an ongoing measure).

Introduction

safefood's over-arching aim is to influence and change consumer behaviour in relation to food safety and healthy eating on the island of Ireland. Our mission is:

to contribute to public health and well-being, by promoting food safety and healthy eating on the island of Ireland.

*safe*food has promoted food safety and healthy eating on the island of Ireland in accordance with its legislative remit since December 1999. We have made it a priority to communicate positively in a direct and clear manner to move consumers and those involved in the food chain towards a better understanding of food safety, nutrition and healthy eating and always supported by sound and authoritative science. Our goal is to influence behaviour in the overall interests of improved public health.

The consumer on the island of Ireland is at the centre of both our vision and mission, and will continue to be so over the period of this S75 Action Plan. We will build on our targeted and widely-acclaimed consumer messages to further educate, inform and motivate the consumer to put food safety and healthy eating at the centre stage of their lifestyle choices. We are conscious of the fact that economic, social and cultural factors continue to change over time, influencing consumer concerns and their perceptions of food. The food industry continues to grow globally, and from time to time, there may be outbreaks of food-borne illness or incidents that will further alter consumer perceptions and occasionally dent confidence. We will continue to monitor these concerns and will utilise our resources to appropriately inform and, where necessary, reassure consumers so that they may continue to make healthy and safe food choices.

We are aware of the wider public health context in which we operate, and we will continue to work in partnership with Governments and professional partners across the island of Ireland to inform consumers of positive lifestyle choices to improve their health, particularly nutritional advice and good food safety practice. We will continue to challenge obesity, to which the population of the island of Ireland in common with other western cultures is prone, in order to reduce risk of stroke, heart disease, diabetes and cancers. Our education initiatives will target the child, the parent and the teacher and our communication programmes will continue their aim to place the longer-term interests of consumers at the forefront.

We will continually evaluate our programmes to assess their impact and ensure that the most relevant and practical research supports our communication. We will conduct this research ourselves where we feel it supports a need, including targeting research to better understand consumer behaviour and psychology as well as to enhance the food safety capacity of the food chain. This will enable us to plan our communication programmes effectively to achieve positive outcomes for the consumer.

Through our Audit of Inequalities, we continue to be conscious of those in or at risk of food poverty and will have a targeted programme of interventions specifically aimed to support and improve the overall health of people. We recognise that we need to communicate on an equal and inclusive platform so that socially disadvantaged groups have the opportunity to become involved. Our role is to communicate. Through our research and our evaluation of campaigns, we have recognised certain groups in society as being less able to access our messages. At times, we will specifically target these groups who are either disadvantaged or because of lifestyle or situational factors are less able to make informed and empowered choices.

safefood has at its core an aim to communicate and empower. This is mainstreamed through our Corporate Plan 2017-2019. This document outlines the role that *safefood* will have in empowering consumers to make the necessary improvements to their choices and behaviour. Its core values of dignity and respect inform our Action Plan herein.

S75 Action Plan 2017-2019

Inequalities	Action	Time frame and expected outcome	Measuring and Reporting Progress
Low Income households who are at risk of food poverty. Most vulnerable groups – children, elderly and single parent families.	Community food programmes (CFIs) will be supported in each of the health regions on the island of Ireland (5 in Northern Ireland and 9 in the Republic of Ireland) throughout the period of the Plan. <i>safe</i> food will fund up to forty small projects and will support capacity building of existing peer-led healthy eating programmes.	The programme will run between 2016 and 2018. Based on the success of previous CFIs, it will aim to encourage community participation, collaborative approaches and improved skill sets.	Evaluations and reports will be done on annual basis. The programme will be fully evaluated at the end of the three year programme.
	Research into the cost of a healthy food basket.	Research will be carried out on an ongoing basis from 2016 to 2019. The intended outcome is to influence government policy around social issues and inequalities.	Evaluation and reporting to government departments. Changes in policy to be monitored.
Children are a group who may not always have an input into dietary behaviours	Educational programmes to be continued through increased dissemination and promotion of <i>safe</i> food educational resources.	It is intended to continue this throughout the period of the Corporate Plan. The aim is raise awareness for two groups of people – the child and the teacher – but particularly to develop lifelong learning for the child from an early age.	To evaluate the resources used for programmes in: Little bites Lunch Box Leaflets (crèche/pre-school) safefood for Life (post primary) Eat, Taste and Grow resource Eatright.eu (early school leaver) Labelling NI and ROI resources Handwashing information Teen sports leaflet
	Development of a media literacy resource for primary school teachers.	To be launched in 2017. The aim is to empower and educate children so that they develop critical thinking about the commercial world around them. This in turn will give children a more focused understanding of advertising and ultimately help children make more informed choices around food.	Evaluation to be carried out in 2018.

S75 Action Plan 2017-2019

Inequalities	Action	Time frame and expected outcome	Measuring and Reporting Progress
Parents of all groups, in particular, those from low income groups	Campaign to address childhood obesity. In particular, research has shown that some parents are unable to recognise if their child is overweight. A campaign will focus on how to address this problem.	2017-2019. This will be an on-going campaign. It is hoped that parents will better understand the health risks associated with overweight and change their focus to healthier lifestyles for their children.	This will be on-going and evaluated throughout the three years.
Men are a group in general who find it difficult to adapt behavioural change	Campaigns, initiatives and strategies addressing food safety and health issues will give specific consideration of how best to reach this group while avoiding social stigma and blame.	2017-2019 This will be an ongoing consideration for each campaign, initiative and strategy. It is envisaged that opportunities to specifically target men will be identified and actioned to help them to adopt safer and healthier food preferences. This will be conducted over the period of both the Corporate Plan and Disability Action Plan. The aim is to remove or ease barriers to general communication	This will be on-going and evaluated throughout the three years. Monitoring and evaluation of
People with disabilities	To ensure that the Disability Action Plan targets are met. To continue to review safefood information provisions to ascertain if more tailored communication approaches required. Targeted campaigns and strategies	methods and develop positive behavioural changes. Campaigns will be delivered over the period of the Corporate Plan 2017-2019. Campaigns will be delivered over the period of the Corporate Plan 2017-2019.	Disability Action Plan Evaluation of information resources Independent review of campaigns
	addressing food safety and health issues including nutrition and obesity.		

safefood is committed through all its actions to achieving an outcome where the eating practices of people in Northern Ireland and Republic of Ireland are safe and healthy. The overall aim of the action measures listed in the Northern Ireland s75 Action Plan is that they will contribute to this outcome.

In seeking to influence behavioural change for all, **safefood** focuses on where it is most needed - specifically amongst the groups mentioned above. Evaluation of all projects and campaigns is on-going to ensure they are effective, reach disadvantaged groups and are inclusive. **safefood** believes that its programmes and campaigns will only be successful if we consult with all relevant stakeholders on a constant basis and is currently developing a stakeholder strategy to consolidate and enhance our goals. As an element of our stakeholder engagement, we will engage with advisory groups in the areas of concern with a view to developing our campaigns in a targeted and focussed fashion for maximum impact.