

Non-Communicable Disease Prevention

A collaborative manifesto for the next Assembly:
Addressing Northern Ireland's biggest killers
and supporting people to live healthier lives
by tackling health-harming products.



To download the full report visit:

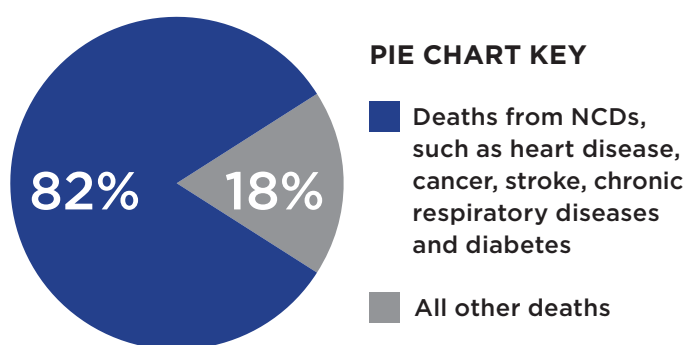
<https://www.bhf.org.uk/what-we-do/in-your-area/northern-ireland/ncd-prevention-report>

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Ahead of the next Northern Ireland Assembly elections, eight local charities are calling on all political parties to commit to taking bold action on NCDs and supporting people to live healthier lives by tackling health-harming products, such as alcohol, tobacco, and unhealthy food and drink.

Non-communicable diseases (NCDs) such as heart disease, cancer, stroke, diabetes, lung disease and liver disease are some of the leading causes of mortality and morbidity in Northern Ireland. In 2020, NCDs were responsible for over 14,000 deaths in Northern Ireland¹ — that's more than 4 in every 5 deaths, even during the global coronavirus pandemic.

Causes of death in Northern Ireland



The human and economic cost of NCDs places a huge burden on society and on Health and Social Care (HSC). Disability-adjusted life years (DALYs) is a metric used to estimate how much disease affects ('burdens') the life of the population. Each year over four-fifths of all DALYs in Northern

Ireland are attributable to NCDs.² NCDs also disproportionately affect the most deprived in our communities, contributing to health inequalities.

There is a direct link between NCDs and smoking tobacco, excessive alcohol consumption, and living with overweight and obesity. All three have been shown to increase the risk of NCDs and all three health-harming behaviours are responsible for preventable death and disease in Northern Ireland.


Tackling the commercial determinants of health and taking urgent action on health-harming products are some of the key ways in which we can reduce the number of lives lost to, or affected by, NCDs.

To reduce preventable death and disease in Northern Ireland, we have set out fourteen collective recommendations for action on health-harming products: tobacco, alcohol, and high fat, salt and sugar food and drink.

We call for action on the way these products are marketed, priced, and promoted, as well as their availability. We also call for renewed targets and strategies and greater availability of support and treatment services, to tackle rates of smoking, harmful use of alcohol, and overweight and obesity.



Around **2,300** people in Northern Ireland die each year from smoking-related illnesses.

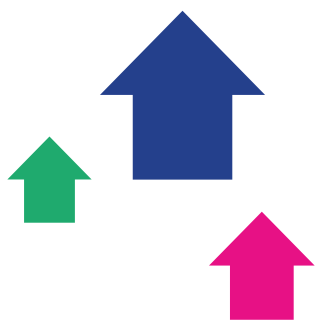


Obesity has been linked to **1 in 8** premature deaths from NCDs in Northern Ireland.



Alcohol is associated with **1,500** deaths in Northern Ireland each year.

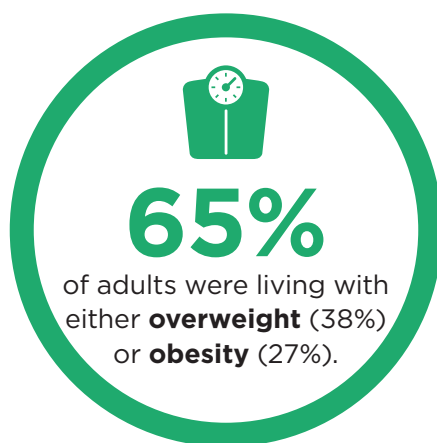
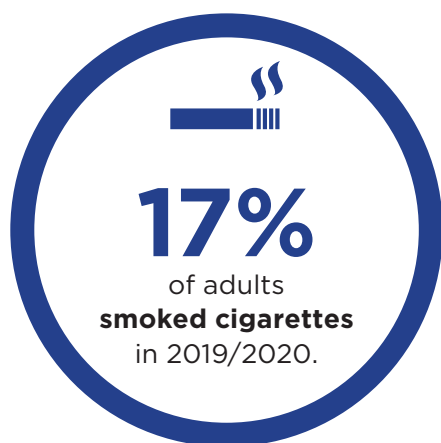
Northern Ireland's political parties must commit to taking bold action to tackle preventable mortality and morbidity from NCDs.



In Northern Ireland, those who live in the least deprived areas are expected to live healthily for **nearly 15 years longer than those who live in the most deprived areas.**

The 2019/20 Health Survey for Northern Ireland is the most recent health survey detailing adult BMI prevalence and alcohol consumption above weekly limits. The survey reveals that rates of overweight and obesity, smoking and harmful alcohol consumption are still high. In Northern Ireland in 2019/20, one in six adults smoked cigarettes, an estimated 65% of adults are either living with overweight (38%), obesity (24%) or morbid obesity (3%), and more than one in six adults regularly exceeded national guidelines for weekly alcohol intake.³

In Northern Ireland, stark and significant health inequalities exist. This is evidenced by the alarming gap in healthy life expectancy, with those who live in the least deprived areas expected to live healthily for nearly 15 years longer than those who live in the most deprived areas.⁴ Such disparities are significantly influenced by differences in rates of smoking, overweight and obesity, and harmful alcohol consumption across Northern Ireland.



Recommendations

Bold and decisive population-level action from the next Northern Ireland Assembly and Executive is critical to tackle preventable NCD deaths and disease from health-harming products. We have identified specific priorities on which progress must be made.

The international evidence is clear about what countries can and should do to prevent the negative

impacts of tobacco, alcohol, and unhealthy food and drinks: reduce availability, manage pricing and promotion, and restrict the marketing of these products. This should be accompanied by person-centred treatment and support.

We believe the recommendations overleaf are important steps towards ensuring all people in Northern Ireland are supported to live healthier lives.

1. <https://www.nisra.gov.uk/publications/registrar-general-annual-report-2020-cause-death>.

2. British Heart Foundation analysis of Global Burden of Disease 2019 estimates. Institute for Health Metrics and Evaluation (IHME), 2020.

3. <https://www.health-ni.gov.uk/publications/health-survey-northern-ireland-first-results-201920>.

4. https://www.health-ni.gov.uk/sites/default/files/publications/health/hscims-report-2021_1.pdf.

Strategies and Targets

1. Establish a smokefree target date and develop a new Tobacco Control Strategy to achieve a smokefree Northern Ireland. This should use the learning from the 2012–2022 strategy evaluation whilst looking ahead to the future challenges in tobacco control.
2. Develop and publish, in 2022, a new evidence-based obesity prevention strategy that takes a system-wide approach.
3. Fully implement the Preventing Harm, Empowering Recovery — Substance Use Strategy (2021–2031).

Availability

The Northern Ireland Assembly and Executive should:

4. Empower and encourage local government to regulate access to unhealthy food through improved planning and registration arrangements for the out of home sector.
5. Commit to tackling the availability of alcohol through the lens of harm reduction, including implementation and delivery of the new Substance Use Strategy 2021–31.

Marketing

6. The Northern Ireland Assembly and Executive should restrict the advertising of alcohol and high fat, salt and sugar food and drink where they have the powers to do so.
7. The Northern Ireland Executive and the Public Health Agency should create and launch yearly, unique mass media campaigns that encourage smokers to quit, targeted at communities where smoking rates are highest. These campaigns should promote the use of smoking cessation services to enable people to engage with effective support to quit smoking.

Pricing and Promotion

The Northern Ireland Assembly and Executive should:

8. Legislate to restrict the use of price promotions on high fat, salt and sugar food and drink, to help make the healthiest choice the easiest choice.
9. Introduce a minimum unit price for alcohol, to reduce alcohol harm. This minimum unit price should be continuously reviewed to account for price inflation to optimise the effectiveness of the policy.
10. Gather evidence and consider the introduction of minimum/maximum unit pricing for tobacco products which would deter the supply of the cheapest products whilst also preventing the tobacco industry from shifting price increases from cheap to premium products. It is important that such an intervention would be supported with appropriate treatment services and support to help people quit smoking.

Treatment Services

11. Place the restoration of support services for weight management, alcohol treatment and smoking cessation at the heart of HSC recovery. This should include sharing learning on how technology can provide flexible and accessible options for people in need of support.
12. Enable the health and social care system to provide smoking cessation support to ensure that all smokers are offered services in primary and secondary care, as well as utilising community pharmacies and the third sector for local service delivery. This support should especially target more deprived communities with higher smoking rates.
13. Ensure equitable access to effective weight management services across all HSC Trusts.
14. Recommence feasibility study into the establishment of Northern Ireland's first bariatric surgery service as soon as is practicable.

