



## Healthy Ireland Fund 2023-2025 Local Strategy for

# Meath County Council





## **SEPTEMBER 2022**

THIS STRATEGY MUST BE COMPLETED AND UPLOADED AS PART OF THE ONLINE APPLICATION

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#### 1. Introduction

Local Authorities are required to submit a 3-year strategy as part of the application process under HIF 2023-2025.

The Healthy Ireland Fund Local Strategy (HIFLS) 2023–2025 will set out the Local Authority (LA) priorities under the Healthy Ireland Fund for the period. The strategy will provide a rationale for the selection of Healthy Ireland outcomes under HIF and identify how work under HIF will be aligned with wider health and wellbeing policy and interventions locally.

The Healthy Ireland City/County Coordinator (HC/CC) will lead the development of the strategy together with colleagues and members of the LCDC. The strategy will be informed by meaningful community consultation, aided by an analysis of local health risk profiles.

Please increase the size of the text boxes if necessary. Please also note that this document should not exceed 20 pages.

## 2. Methodology

Please outline the approach that was adopted by the Local Authority in developing this Local Strategy.

Include details on the approach to local planning and application completion with associated local co-design and engagement processes, including HSE CHO and Health and Wellbeing representatives' early input and feedback on the prioritisation of outcomes and related activities. Please outline the means of consultation within the area and evidence of cross-sectoral representation of agencies at local levels in the outcome selection process and in the design phase of the HIFLS.

An open and transparent process was adhered to in order to select the most appropriate project outcome indicators for County Meath in line with the requirements set out by Pobal. Both secondary and primary research methods were applied to ensure that the selection of outcome and target groups were evidence based, in line with local knowledge and existing health needs in the area.

#### **Secondary Research Methods**

County Meath Demographic Profile -Utilising the provisional data for the Irish Census 2022 and the full data from the Irish Census 2016, County Meaths demographic profile was examined. A summary of these data are available in the City/County Profile Section of this Strategy.

HSE's Health Atlas database - The HSE's Health Atlas Finder database was accessed which provides an estimate of health issues at a local level from The Healthy Ireland Survey 2018 & 2019 and The Irish Longitudinal Study on Ageing 2018 (TILDA). This data does not allow for comparisons within the County by area or with other County's and percentage figures are not available only the *n* value. Data pertains to prevalence of chronic diseases and risk factors in adults aged 50 and older and prevalence of unhealthy lifestyle behaviours (diet, smoking, alcohol consumption, body weight and physical activity) of adolescents aged 15 to 17 and adults aged 18 and older. These databases were reviewed for the County of Meath. This database also identified areas of deprivation in the County using the HP Deprivation Index.

Health Population Dataset by Local Authority in Ireland Report- The 'Health Population Dataset by Local Authority in Ireland Report' a dataset of 21 indicators from the Healthy Ireland Outcomes Framework was provided in a report format (Kelly 2022). This report presents a heat map of health indicators and specifics the prevalence of these issues locally and compares them to the national average. The data for County Meath were reviewed.

Rapid Literature Review – An informal rapid literature review was undertaken to investigate published local and national data sources pertaining to the health and wellbeing of the Irish and County Meath populations. These data were considered when deciphering which Outcome Indicators to select for County Meath to support the planning process for HIF 2023-2025.

#### **Primary Research Methods**

The Healthy Meath Public Consultation Survey 2022 - In order to investigate the local health needs of the population of County Meath the Healthy Meath Public Consultation Survey was undertaken. This survey was created using Microsoft Forms and made available online and in hard copy format (Appendix A). The survey employed a mixed methods approach as questions were asked in both quantitative and qualitative formats. As with all research methods surveys have a potential for error however they have been described as 'a useful and legitimate approach to research that has clear benefits in helping to describe and explore variables and constructs of interest' (Ponto 2015). The aim of the survey was to gather the input of individuals, agencies, groups and organisations based in County Meath to identify the health risks, health priorities and associated target groups across County Meath in line with the HIF 2023-2025 guidelines. In order to engage as much of the population of County Meath as possible several recruitment strategies were employed. The survey was advertised on Meath County Councils website, Facebook, Twitter and Instagram social media accounts, and through Meath's Public Participatory Network (Poster available in Appendix B). An advertisement was also posted in local papers in October including the 'Meath Chronicle', 'Drogheda Leader' and 'The Meath Topic' throughout October. Posters advertising the survey were hung in various locations throughout Meath including the 12 libraries, local arts centre, family resource centres, swimming pool, unity centre, community centres. In order to recruit specific target groups to complete the survey contact was made with organisations working with young people and adolescents (Youth Work Ireland Meath, Involve Youth Project Meath, Family Resource Centres, Comhairle na nOg AGM attendees), members of the travelling community (Navan Travellers Workshop), migrants, ethnic minorities & asylum seekers (Cultur Meath), older persons (Meath Age Friendly Network) disadvantaged

women, men and families (Family Resource Centres), the general public (GAA club members, online social media) inviting their members to complete the survey by providing an online advertisement for them to share and a poster to hang in their premises. The Healthy Ireland Coordinator for Meath also attended public locations (libraries, shopping centres, public workshops etc.) to invite participation in the survey. In total 551 people completed the survey. Demographics of the survey respondents are outlined in The Survey Results Section in the Supporting Documents. The results of the survey were analysed and utilised to inform the HIF 2023-2025 planning process.

Healthy Meath Focus Groups - Focus groups were held with the aim of gathering a more in-depth view on what priority health issues are prevalent in County Meath that impact specific population groups, why they occur and gather stakeholder opinions on how they should be addressed at a local level. Development Perspectives was engaged to design and facilitate the focus group sessions. Two of the sessions outlined below were facilitated by the HI Coordinator for Meath and four of the sessions were facilitated by Development Perspectives. The focus groups incorporated the groups prioritised by Pobal in the consultation requirements and people who live and work in County Meath in a health and wellbeing capacity. Appendix C provides full details of and a list of who attended the focus groups. Participants were asked a series of questions throughout the focus group session and given time to discuss together and with the wider group. All responses and discussion points were recorded on a flip chart by the facilitator. Questions asked included:

- What is the biggest health issue facing your community?
- Discuss the survey prioritised Lifestyle & Behaviour areas (Sedentary Behaviour, Obesity, Chronic Diseases and Healthy Eating/Nutrition)
- Discuss the survey prioritised Wellbeing & Environmental areas (Mental Health, Depression, Lack of Opportunity to Engage in Social Leisure Activities)
- Discuss the survey prioritised Socio-Economic Factors (Poverty and Basic Deprivation, Income Inequality, Unemployment)
- Who should the target groups be for the HIF 2023-2025?
- Ideas on Actions & Opportunity to Co-Design for HIF 2023-2025 (specific to a target group)

A written report was prepared by the Facilitator which summarised the findings of the focus groups. Both the report and the focus group content were reviewed by the HI Coordinator for Meath to inform the HIF 2023-2025 planning process.

HSE Consultation - Several meetings were held with the Team lead for Meath's HSE Health Promotion and Improvement and their extended team were also invited to complete the survey, attend the Focus group sessions and Co-design workshop. Other representatives from the HSE were involved in the focus groups and other discussions as outlined in Appendix C. Their input will be used to inform the HIF 2023-2025 planning process.

LECP Meath County Consultation Paper – DRAFT Statement and High Level Goals – At the time of the HIF 2023-2025 application submission a draft statement on the high level goals for County Meaths LECP was available for review and this report was analysed to incorporate the findings into the HIF 2023-2025 planning process.

Co-Design Workshop - Following approval of the HIF 2023-2025 priority Outcome areas by the LCDC a final workshop was held in January 2023. Those in attendance were working in either a mental health or chronic disease capacity in County Meath in line with the Outcome Indicators selected. Attendees at the workshop were invited as an opportunity to co-design the Workplan component of the HIF Application & avoid duplication with other work currently happening in County Meath under these Outcome Areas. Participants were split into groups and asked to ideate potential actions / programmes to be delivered under the two outcome areas, target groups, to discuss potential partners, areas of innovation and to consider how the programme could be developed over the 3-year period. Ideas were presented back to the group and a discussion took place. The ideas presented by the groups were reviewed by the HI Coordinator for Meath following the workshop to inform the HIF 2023-2025 planning process.

Other meetings took place regarding the co-design of the workplan with Meath Travellers Workshop, Meath Local Sports Partnership, the HSE Health Promotion team, Social Farming Ireland, The Irish Heart Foundation, The National Screening Service.

Analysis and presentation of findings of the consultation process for HIF 2023-2025 to LCDC - Once the research/consultation process was completed the Healthy Ireland Coordinator for Meath analysed the results and used these outputs to inform their decision for outcome(s) selection for HIF 2023-2025. The findings were summarised and presented to the LCDC at the December meeting for approval. Once the workplan, strategy and application were completed a summary of these were presented to members of the LCDC and approved at the January LCDC meeting on the 27th of January 2023.

## 3. City/County Population Profile

Please outline key socio-economic demographics for your city/county, highlighting in particular health data and disadvantaged or hard to reach groups or communities based on evidence and/or local knowledge. Please include details of target groups representation and participation including qualitative information and lessons gathered via e.g., focus group discussions. This should include evidence of representation and/or participation of target groups in the prioritisation of outcome selection process particularly youth, disadvantaged women, persons living with a disability and target ethnic minority groups.

Please refer to **Appendix 3 Data Sources** in the Guidelines for some suggested data sources that may assist.

At the time of this strategy preparation only preliminary data from the 2022 census of Ireland were available therefore the section titled 'Population levels and growth between 2016 and 2022' is based off data from the 2022 Census of Ireland whilst the rest of the city/county profile for County Meath will be based off data from the 2016 Census of Ireland.

#### Key Socio-Economic Demographics for County Meath.

Population levels and growth between 2016 and 2022 - County Meath is the second largest county in Leinster and while it has some large urban centres, it is still a relatively rural county with 41.4% of the population living in rural areas. County Meath is the 4<sup>th</sup> largest local authority area in Ireland in terms of population level with a population of 220,296 recorded in the 2022 census. Meath had the second highest percentage population growth between 2016 and 2022 at 13% (25,252) which is considerably higher than the national average of 8% population growth. County Meath had a birth to death ratio of 2.77 in 2022 indicative of a younger population as, areas with a higher birth to death ratio have a population with a younger age profile. Net migration figures for Meath were the third highest in Ireland at 14,921 people.

Age profile and age dependency - Meath has the 6th youngest population of all local authorities in Ireland with 29.3% of the population aged under the age of 18. The youth age dependency ratio stands at 39% reflecting the young population profile in the county, higher than the national figure of 32.3%.

Ethnicity & Nationality - Most people living in the county of Meath are classified as Irish with 10.1% of the population identifying as non-Irish nationals (19,601). The majority of non-Irish nationals come from Poland (4,460), Lithuania (3,443) and the UK (3,251) and reside primarily in the main urban centres of Navan, Ashbourne and Kells. There are 971 people from the Travelling community identified in Meath in the 2016 Census (although it is acknowledged that the Traveller identifier is often under-reported). The majority of these reside in Navan town (664 in total or 2.2% of the population), well above the State figure of 0.5% and the county wide figure of 0.7%.

Family Structure - Nearly 40% of households comprised of married couples with children in Meath in 2016. 15.4% of families with children under the age of 15 are headed by a lone or single parent.

Education - Just over one in ten people in the county (11%) have no formal education or have primary level education only. One in every four persons with poor educational attainment reside predominantly in the north, north-west and south-west of the county. A total of 18.4% of the population has attained a degree and/or postgraduate degree which is just below the state figure of 20.8%.

Social Class - The population of Meath who fall into the Professional Workers category (7.7%) is in line with the national average whilst the population of Meath who fall into the Managerial and Technical Workers category (30.5%) is higher than the national average. The population of Meath who fall into the Non-Manual Workers category (18.4%) and Skilled Manual Workers category (16.3%) are higher than the national average. The population of Meath who fall into the Semi-Skilled Workers category (10.3%) and the Unskilled Workers category (3.6%) are in line with the national average. The population of Meath who fall into the all others gainfully occupied & unknown category (13.2%) is lower than the national average

Employment and Unemployment - There was a relatively strong labour force participation rate in Meath in 2016 (64.2%) which is slightly higher than the national figure of 61.4%. The 11.2% unemployment rate in 2016 is down significantly from 18% in 2011. Areas to the west, north-west of the county record much higher unemployment figures and they include: Oldcastle (23.2%), Kilmainham Wood (23.1%), Ballivor (21%), Drumconrath (20%), Kells (19.1%) and Nobber (17.8%).

Live Register - In November 2022 there were 3,688 people residing in County Meath who were on the live register which was higher amongst males than females.

Housing – In late November 2022 there were 190 adults accessing emergency accommodation in County Meath. Whilst in the Mid-East region which Meath is a part of there were 88 families of which 40 were single parent families (including 152 adult and 163 child dependents) accessing emergency accommodation (Department of Housing, Local Government and Heritage 2023).

#### **Health and Wellbeing Data**

In 2016, 63% of the population of Meath rated their health as very good, 26.5% rated their health as good, whilst 7% rated it as either fair, bad or very bad. The areas that rate their health less positively are those areas with a high proportion of older people.

*Disability* - 11.6% people in county Meath have a disability which is lower than the State figure of 13.5%. 426 children in Meath have an intellectual disability which is the 12th highest rate per county in the State.

*Self-Harm* - In 2019, 285 residents of Meath, 132 male and 186 females, presented to hospital due to self-harm. Presentations were highest in females aged 0-19 years and males aged 25-34 years. Taking into account the population, the rate of persons presenting to hospital following an act of self-harm was 136 and 189 per 100,000 for males and females respectively in Meath.

Suicide - Meath provisionally recorded a suicide rate of 8.1 per 100,000 population in the 2019 – 2021 period, which is 0.5 times higher than the national average of 7.6 per 100,000 (NOSP 2022). This is a reduction from the 2018-2020 recording period where it was 9.7 per 100,000.

#### Disadvantaged / Hard to Reach Groups

Deprivation level - The county of Meath as a whole is ranked as 'Marginally Above Average' on the deprivation scale, relative to other areas in the country. Meath has more affluent areas (19%) than the national average according to the HP deprivation Index and areas classified as very (5.9%) and extremely affluent (1%) are in line with the national average. Meath has more areas classified as marginally above average (30.9%) and marginally below average (26.2%) than the national average according to the HP deprivation index. Meath has less areas classified as disadvantaged (12.4%), very disadvantaged (3.7%) and extremely disadvantaged (0.8%) than the national average according to the HP deprivation index.

#### Target group representation

Disadvantaged Communities - The Ceannanus Mor (Kells) electoral district is the only one that falls into the 'disadvantaged' category. There were 53 small areas in Meath classified as 'disadvantaged' (46 small areas) or 'very disadvantaged' (7 small areas) in 2016. Six of these 'very disadvantaged' small areas are in Navan and one located in Trim. There are significant pockets of disadvantaged dotted around the county in Navan, Trim and Kells and in the west, northwest and southwest of the county. Details of the survey and invites to the focus groups were administered amongst communities of disadvantage via family resource centres and community groups working in these areas through Meath's Public Participatory Network and a focus group was held in both Kells and Navan.

Ethnic Minority Group - Traveller Community and Disadvantaged Women - Navan town has the 6<sup>th</sup> highest population of Travellers in Ireland. This community were engaged in the consultation process through the survey, a targeted focus group and co-design workshop with Meath Traveller Workshop and the HSE Traveller Community Primary Care Team for Meath which incorporated consultation with women from a disadvantaged background. An invite to undertake the survey and attend the focus groups was also administered to Involve Youth Project Meath an organisation based in Trim who work with members of the Travelling community.

Adolescents & Young People - Meath has a high population of adolescents and young people relative to the national average, adolescents and young people themselves (n108 survey respondents were Adolescents or Young People), organisations working with adolescents and young people and representatives from the LGBT+ community (n49 survey respondents were from the LGBT+ Community) including Youth Work Ireland Meath, Outcomers, Involve Youth Project, GAA clubs, Jigsaw amongst others were invited to complete the survey, attend the focus groups and co-design workshop. Specifically, the HIC for Meath attended the Comhairle na nOg AGM in October 2022 and hosted a focus group specifically with Youth Work Ireland Meath members.

People With Disabilities - 10% of the survey respondents said they had a disability which is aligned with the data for Meath from the Census 2016. In order to ensure in-depth consultation with persons living with a disability a targeted focus group was held with Prosper Meath a day care service for adults with intellectual disabilities. Attendees included Prosper Meath service users, care providers and managers. Other representatives from Prosper attended the focus groups in Kells and Navan.

The General Population - 320 respondents to the survey were from the General Population this population group were engaged via the survey which was advertised as outlined in the Methodology section. Local elected representatives were also invited to attend the focus groups and co-design workshops to speak on behalf of their constituents.

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## 4. City/County Health Risk Summary.

Please provide an analysis of the health data based on evidence and local knowledge. This should include a profile relating to outcome indicators that are a priority in your area and that are being considered for selection. For example, there may be four priority indicators in your area, and you are trying to select one outcome indicator for the application.

Please outline **key health statistics/metrics** for your city/county, **highlighting in particular health data and at-risk groups/populations** based on evidence and/or local knowledge.

Please refer to **Appendix 3 Data Sources** in the Guidelines for some suggested data sources that may assist.

In order to identify the key health issues in County Meath a stringent research process was undertaken which is outlined in the Methodology section. The results of this research are outlined below.

The Healthy Meath Public Consultation Survey highlighted the outcome areas/indicators which were a priority in Meath for respondents to the survey. These included poor nutrition/ healthy eating (50%), levels of overweight and obesity (45%) and high levels of chronic diseases (43%) as key health issues under the mortality and morbidity and lifestyle & behaviour outcome areas. It was noted by the HI coordinator for Meath that the prioritised areas are all interlinked in terms of health. Environmental Factors were not prioritised by most whilst in the wellbeing outcome area, mental health (84%), depression (60%) and lack of social leisure activities (62%) were prioritised, it is worth noting that mental health received the highest prioritisation of all the indicators. Regarding socio-economic factors, unemployment (52%) and income inequality (44%) were those most prioritised. Concerning target groups, respondents felt adolescents and young people, the general population, children, disadvantaged and marginalised groups, older persons and those with mental health issues should be considered in future planning for health and wellbeing for County Meath. A copy of the main survey results has been included in the supporting documents.

The Healthy Meath Focus Groups provided an opportunity for individuals working in a health and wellbeing capacity in Meath and residents to provide more in-depth information on the health issues for County Meath. Topics highlighted under the 'Biggest Health Issues in your community' included; difficulty accessing GPs and other health services; mental health including anxiety, depression, suicide, isolation and loneliness; obesity, poor nutrition, high cost of healthy foods; addiction in terms of level of drug use and vaping; a need for access to safe shared spaces for exercise particularly in rural parts of Meath. Under the prioritised disease, lifestyle & behaviour outcome area participants discussed; the need for safe, well lit up walking spaces; issues around nutrition including marketing of foods; low cost of unhealthy processed foods and high cost of fresh foods which is being exacerbated by the cost of living crisis; mobile phones and screen time and, the importance of parental education around healthy lifestyle behaviours so that they can act as a role model for their children and families. Under wellbeing a need for resilience building in communities, lack of opportunities for active travel and social activities, the impact of social media on mental health and anxiety, high cost of sports clubs and gyms, the importance of a healthy diet and difficulty accessing mental health services in the County particularly for children and young people were all spoken about. Regarding the socioeconomic factors the lack of and high cost of housing, poverty and inequality which is being worsened by the high cost of living, health issues which impact marginalised groups like Travellers and people living in disadvantaged communities were all key issues that were highlighted. In addition, the high cost of childcare and how this is keeping educated women out of the workforce was raised along with poor transport in pockets of the County which can impact people with disabilities. In terms of prioritisation Mental health was the main outcome indicator prioritised in each focus group. Other areas prioritised included healthy eating & nutrition, income inequality, poverty/basic deprivation and social leisure activities

The Health Population dataset identified five areas where County Meath was performing particularly worse than the National Average for outcome indicator areas including:

- CVD Myocardial Infarction Rate 209 per 100,000 (45 points higher than the national average)
- Primary Care Access- 20 per 100,000 (15.3 points lower than the national average)
- MMR Vaccine Uptake 58.9% (26% lower than the national average)
- Mental Health Suicide Rate 8.1 per 100,000 (0.5 points higher than the national average)
- 20% of population are Smokers (0.2% higher than the national average)

Demonstrating how both the burden of chronic disease and lifestyle factors which contribute to it are an issue in the county. Further the suicide rate is unacceptable and areas such as positive mental health warrant further attention across the County to improve this.

The *Health Atlas Finder database* was consulted and demonstrated that there is room for improvement from both a positive mental health and premature non-communicable disease mortality perspective. Healthy lifestyle behaviours and morbidity data were examined which estimates that in 2022:

- 57,246 of the population of County Meath consumed unhealthy foods daily which was highest in the 34-44 years and 75+ age brackets
- 77,726 of the population of County Meath were achieving the National physical activity guidelines which was lower in females and older people
- 62,195 of the population of County Meath had overweight which was highest in adults aged 45-75+ years and in males
- 38,658 of the population of County Meath had obesity which was 2 times higher in females aged 15-24 years than males in the same age bracket and highest in those aged 45-54 years
- 18,617 of the population of County Meath had high blood pressure which was higher in older females 75+ and males aged 55-69 than females in the same age bracket
- 5,299 of the population of County Meath had diabetes which was higher amongst males
- 1,436 of the population of County Meath had anxiety which was higher in females aged 55-64 years
- 3,289 of the population of County Meath have depression which was higher amongst females aged 55-64 years and males aged 55-59 years
- 10,530 of the population of County Meath had 1 chronic condition which was highest in males; 12,984 of the population of County Meath had 2 chronic conditions which was higher in females; 21,461 of the population of County Meath had 3+ chronic conditions which was higher amongst females

Other *national research* was consulted and some findings which pertain to selection of "Decrease in unconditional probability of dying (aged 30-70) from cardiovascular disease, cancer, diabetes or chronic respiratory disease" as a priority area for County Meath include:

- Cancer and circulatory disease were the biggest causes of death in Ireland in Q1 2022 accounting for 5,316 (or 55.8%) of deaths (CSO, 2022)
- Around 40 % of all deaths in Ireland in 2017 can be attributed to behavioural risk factors, a share close to the average across the EU (39 %) (OECD/European Observatory on Health Systems and Policies, 2019).
- 31% of the Irish population have a long-standing illness or health problem (Healthy Ireland Survey 2022)
- There are high rates of overweight & obesity in all age groups in the Irish population particularly amongst those from lower socioeconomic backgrounds (Childhood Obesity Surveillance Initiative; Irish Universities Nutrition Alliance; O'Donnell et al., 2020)
- Poor diets are prevalent in the Irish population and are characterised by low intakes of fruit and vegetables and high intakes of sugar sweetened beverages, fat, sugar and salt which exceed dietary recommendations (Irish Universities Nutrition Alliance; Healthy Ireland Survey 2021)
- Low levels of physical activity coupled with high levels of sedentary behaviour including screen time are prevalent in children, teenagers and adults living in Ireland (Irish Universities Nutrition Alliance; The Children's Sport Participation and Physical Activity Study 2018)
- Travellers have a lower life expectancy (65.9 years compared to 79.3 years for the general population) and a higher prevalence of chronic diseases including diabetes, CVD and Obesity (National Traveller Health Action Plan 2022-2027)
- People from a lower socioeconomic background have lower life expectancy, higher risk of chronic diseases and overweight and obesity (CSO; Healthy Ireland Survey 2021; Farrell et al., 2008)
- Poorer healthy lifestyle habits are prevalent for individuals with lower educational attainment e.g. smoking, breastfeeding, diet, physical activity (Healthy Ireland Survey 2021)
- 73% of people in the lowest income quintile (lowest 20%) assess their health as good, compared to 93% in the highest income group in 2017 (Healthy Ireland Survey 2022)

Findings from National Research which support selection of "Increase in individual's level of positive mental health as per Energy and Vitality Index" include:

- Around 14% of the world's children and adolescents aged 10-19 years have a mental health condition, with suicide the second leading cause of death among 15-29-year-olds (WHO, 2021).
- Positive Mental Health in the Irish population has reduced from 67.8% in 2016 to 62.4% in 2021 (Healthy Ireland Survey 2021)
- 23% of the respondents in Healthy Ireland Survey said they would like to improve their mental health (Healthy Ireland Survey 2021)
- Children and adolescents are spending less time in physical and leisure time activities and more time on screens (Growing Up in Ireland Study, 2022)
- A fifth of young people starting secondary school children reported experiencing anxiety (Growing Up in Ireland Study, 2017)
- 67% of respondents know someone who has died by suicide, and 6% of respondents had attempted suicide (Healthy Ireland Survey 2022)
- Suicide rates amongst the Traveller population are 6 times higher than the national average (National Traveller Health Action Plan 2022-2027)
- 63% of Traveller women said their mental health was not good for one or more days in the last 30 days compared to 20% of GMS female card holders (National Traveller Health Action Plan 2022-2027)
- 59% of Traveller men said their mental health was not good for one or more days in the last 30 days compared to 22% of GMS female card holders (National Traveller Health Action Plan 2022-2027)

Selection of the first outcome Indicator "Increase in individual's level of positive mental health as per Energy and Vitality Index" for County Meath was based on the strong research available nationally on mental health issues across Ireland and locally as it was the highest prioritised area in both the Healthy Meath survey and focus group sessions and Meath having a higher suicide rate than the national average. This topic dominated parts of the discussion in both the focus groups and the feedback received from the survey. With target groups including the Traveller Community and Adolescents and Young People particularly at risk of mental health issues whilst the general population requires more information and supports to improve and maintain their positive mental health profile.

There was also a wealth of data available to support selection of the second Outcome indicator "Decrease in unconditional probability of dying (aged 30-70) from cardiovascular disease, cancer, diabetes or chronic respiratory disease". Due to the cluster of factors identified through the local and national research e.g. poor nutrition and healthy eating habits, high levels of overweight and obesity amongst all age groups, difficulty in accessing primary care services in Meath, high myocardial infarction rate in Meath, cancer and CVD being the biggest killers in Ireland in 2022 and the topics prioritised in the Disease Lifestyle and Behavior sections of the survey and focus groups pertaining to chronic disease strongly suggest that a focus on this outcome indicator is warranted for the duration on the HIF 2023-2025.

## 5. Outcome Selection and Target Group Prioritisation.

**Project Outcomes** are the overall changes the project intends to achieve. These should be related directly to the high-level programme outcomes chosen from the <u>HI Outcomes</u> <u>Framework Indicator Set.</u> Project Outcomes should be measurable and related to baseline data. This will help illustrate the impact of the intervention undertaken.

**Project Outputs** refers to data from activities and helps to show the results of the project. They are usually described in terms of the percentage change in the behaviour of the chosen target groups, in different areas relating to the intervention undertaken. These outputs help to demonstrate how the project outcomes above are achieved.

Examples of both are shown below for selected Outcomes Indicators:

**Example 1**: Reduce the percentage of people aged 50+ with moderate and severe levels of depression.

## **Example of project outcomes:**

- Reduce the proportion of people in the target groups who self-reported their depression as moderate or severe
- Increase the proportion of people in the target groups who are availing of support for their depression.

#### **Example of project outputs:**

- % of target group who reported seeking formal help/ supports for their mental health
- % of target group receiving counselling supports for depression
- % of target group who self-reported their depression as moderate or severe.

**Example 2**: Decrease in the number of homes above the national Reference Level for Radon Levels.

#### **Example of project outcomes:**

- Decrease in the number of homes testing above the national reference level for Radon for the selected target group
- Increase in the % of the target group having knowledge of access to methods of radon remediation.

#### **Example of project outputs:**

- % of target group who have tested and retested levels of radon in their homes
- % of target group who score high/very high on the Radon Awareness Survey
- % of target group who have accessed one or more method of radon mediation.

**Example 3**: Decrease in proportion of people who smoke daily/occasionally.

#### **Example of project outcomes:**

- Reduce the number of people in the target group who self-report smoking daily/occasionally
- Increase in the number of people in the target group with taking part in smoking cessation groups.

#### **Example of project outputs:**

- % of target group who have reduced their monthly smoking (e.g., 0-5, 6-10 cigarettes per month reduction)
- % of target group taking part in smoking cessation groups/activities
- % of target group who have ceased smoking.

Project outcomes and target group selection must be evidence based and incorporate local knowledge of the current relevant health issue. Several data sources can be utilised to show the evidence base for the projects undertaking and some examples are shown below.

HI Outcome Indicator	Target Group(s) or Community	Justification	Example of Project Outcomes	Example of Project Outputs
Choose from the High-Level HI Framework. Your project will contribute toward this at a local level.	State which target group(s) to work with. This choice should be underpinned by evidence (next section)	Please explain your choice of thematic area and target groups, based on evidence based, local knowledge of the health area and alignment with existing relevant health strategies.  Links to data sources available in Appendix 3 of the guidelines	These are what the project aims to achieve.  These should be clearly defined and easy to measure. This will show the impact of the programme on the target group.	These are what your project produces to show the outcomes.  These should be clearly defined and measurable.
Increase in individual's level of positive mental health as per Energy and Vitality Index	General Population  Adolescents & Young People  Traveller Community	According to the Health Population Indicator dataset Meaths suicide rate is 8.1 per 100,00 which is higher than the National Average  Mental health was the most prioritised indicator with 84% of respondents prioritising it in the Healthy Meath Public Consultation Survey  Mental Health was the most prioritised indicator in the Healthy Meath Focus Groups  Members of the Traveller community have a suicide rate which is 6 times higher than the national average and have a poorer mental health status than the national population (59% rated it as not good in comparison to 21%) according to the National Traveller Health Action Plan 2022-2027  Positive Mental Health in the general Irish population has reduced from 67.8% in 2016 to 62.4% in 2021 (Healthy Ireland Survey 2021)  23% of the Irish population said they would like to improve their mental health in the (Healthy Ireland Survey 2021)	Increase awareness of positive mental health and mental health supports/services that are available locally among the target groups.	<ol> <li>Total number of organisations who engage in Meaths' mental wellbeing network</li> <li>Total number of resources produced highlighting positive mental health supports available in County Meath</li> <li>Increase the total number of individuals within target groups who self-report an awareness of positive mental health and supports available locally to enhance their positive mental health</li> <li>Increase the total number of individuals within target groups who self-report an increase in</li> </ol>
		Around 14% of the world's children and adolescents aged 10-		positive mental health parameters

19 years have a mental health condition, with suicide one of the leading causes of death among 15-29-year-olds (WHO, 2021).  22% of school children reported experiencing anxiety when commencing secondary school (Growing Up in Ireland Study 2017)	Increase the number of people in the target groups who self-report an increase in their level of positive mental health as per	5. Increase the total number of individuals within the target groups who have engaged in local supports, community groups or social activities to enhance their own / their families / their communities positive mental health
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HI Outcome Indicator	Target Group(s) or Community	Justification	Example of Project Outcomes	Example of Project Outputs
Choose from the High-Level HI Framework. Your project will contribute toward this at a local level.	State which target group(s) to work with. This choice should be underpinned by evidence (next section)	guidelines	These are what the project aims to achieve.  These should be clearly defined and easy to measure. This will show the impact of the programme on the target group.	These are what your project produces to show the outcomes.  These should be clearly defined and measurable.
Decrease in unconditional probability of dying (aged 30-70) from cardiovascular disease, cancer, diabetes or chronic respiratory disease	General Population People living in Disadvantaged	According to the Health Population Indicator dataset Meaths' rate Myocardial Infarction is 209 per 100,000 which is 45 points higher than the national average and there is a lack of Primary Care Facilities; 20 per 100,000 which is 15.3 points lower than the national average  Diseases of the circulatory system and Cancer were the top killers in Ireland in 2022 accounting for 55.8% of all deaths (CSO, 2022).  Health Atlas Finder estimates that high blood pressure, diabetes, possession of multiple chronic conditions, poor lifestyle habits and high numbers of the population with overweight and obesity are all characteristics of the health profile of the population of County Meath.	an awareness of and who are accessing information on NCD prevention.	Total number of community groups / local organisations who participate in local NCD focused campaign      Increase the total number of individuals within target groups who self-report a better understanding of healthy lifestyle habits and awareness of supports available to reduce the risk

	Poor diets are prevalent in the Irish population including teenagers and adults with low intakes of fruit and vegetables and high intakes sugar sweetened beverages and of fat, sugar & salt which exceed dietary recommendations (Irish Universities Nutrition Alliance; Healthy Ireland Survey 2021)  62,195 of the population of County Meath had overweight and 38,658 of the population of County Meath had obesity (Health Atlas Finder 2022). There is strong research linking obesity with NCDs and Mortality (GBD, 2015)  Poor nutrition/ healthy eating habits was the most prioritised disease lifestyle and behavior factor in the Healthy Meath Public Consultation Survey and the second most prioritised area in the Healthy Meath Focus Groups. There is strong evidence linking diet to morbidity, NCDs and mortality (GBD Study, 2019)  People living in disadvantaged communities and from low socioeconomic backgrounds have poorer healthy lifestyle habits and are at greater risk of developing and dying from NCDs (HI survey 2021/2022; Irish Universities Nutrition Alliance; Farrell 2008).	Increase the number of people in the target groups who are availing of local supports,	of NCDs  3. Increase the total number of initiatives made available to target groups within their own community  4. Increase the total number of individuals within target groups who engage in local supports to reduce their own / families / communities' risk of NCDs  5. Increase the total number of individuals within target groups who report improved healthy lifestyle habits that can reduce their risk of NCDs
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## 6. Policy & Strategy Alignment.

For each outcome selected, provide information on the <u>HI Policies</u> and other national policies that will be aligned through use of the Fund. Note here any current policy gap to be addressed through use of the Fund via innovation.

Outline how the HIF Local Strategy aligns with health aspects of the (draft) LECP, the Sláintecare Healthy Communities Programme (if applicable) and other health and wellbeing related programmes delivered in your city/county e.g., the Active Cities Programme.

Please refer to **Sections 6.1.2 and 6.2.4** in the Guidelines for further information.

There are four goals of the **Healthy Ireland Framework 2013-2025** including; Increase the proportion of people who are healthy at all stages of life; Reduce health inequalities; Protect the public from threats to health and wellbeing; Create an environment where every individual and sector of society can play their part in achieving a healthy Ireland. Selection of both outcome indicators (Positive mental health, Premature Non-Communicable Disease Mortality) are aligned with these goals and the target groups outlined cover people most at risk from health inequalities whilst also incorporating a wide range of age groups.

Irelands National Physical Activity Plan – Get Ireland Active outlines the importance of physical activity for health and wellbeing and in the reduction of NCDs for the Irish population. This application is aligned with the various action areas in this plan including action area one 'public awareness, education and communication'; two 'children and young people' and six 'sport and physical activity in the community'.

Ireland's National Obesity Policy and Action Plan – A Healthy Weight for Ireland acknowledges that overweight and obesity are significant risk factors for many non-communicable diseases and mental ill health. The proposed activities outlined for HIF 2023-2025 will focus on improving nutritional knowledge and enhancing the healthy lifestyle habits of all the target groups. Overweight and obesity levels are high across all age groups in the Irish population but particularly amongst adolescents, people from disadvantaged communities and amongst the Traveller Community.

Under Irelands **Healthy Eating and Active Living Programme Guidelines** the Healthy Food for Life resources are available which define the Irish Government recommendations on healthy eating and a balanced diet for the entire population. It is proposed that the nutrition activities incorporated into the HIF 2023-2025 application will align with **Irelands Healthy Eating Guidelines**.

**Sharing the Vision - A Mental Health Policy for Everyone** outlines the importance of primary prevention and positive mental health for the Irish population. A core component of this policy focuses on promotion, prevention and early intervention which is aligned with the activities planned for HIF 2023-2025.

The inclusion of The Traveller Community and People from disadvantaged communities as target groups in the HIF 2023-2025 application is aligned with Goal 2 of the **National Traveller Health Action Plan 2022-2027** concerning 'Increased engagement of Travellers in chronic disease prevention and treatment programmes'.

Connecting for Life Ireland's National Strategy to Reduce Suicide 2015–2020 characterises minority groups as a priority group for whom there is evidence of vulnerability to, and increased risk of, suicidal behaviour. Minority groups includes members of the Traveller community who are a target group within this strategy.

The HIF 2023-2025 application for Meath is aligned with Goal 3 of the **UNs Sustainable Development Goals,** 'Good Health and Wellbeing' the aim of which is to ensure healthy lives and promote well-being for all at all ages, whilst the selection of both the Traveller Community and those living in Disadvantaged Communities as target groups align with Goal 10 'Reduced Inequalities'.

The aim of Meath Local Sport Partnerships Strategic Plan 2014 -2017 is to have an active Meath and to have more people, more active, more often. A new strategy for Meath LSP is currently in preparation and will be examined once made available. In addition, Meath County Council and Meath LSP work with several Sports Development Officers with specific target areas. For 2023, those living in disadvantaged areas are being targeted with a view that they are provided with the opportunity to gain experience in several sports such as soccer, GAA, basketball, rugby and ladies GAA. Increased participation in physical activity for individuals living in Disadvantaged Communities will fit with the proposed outcomes for Meath.

The HIF Local Strategy, workplan and outcome indicators selected for County Meath are aligned with the Meath County Consultation Paper - DRAFT Statement and High Level Goals in particular Goal 1 - 'A healthy and resilient county' and Goal 5 'A County that works together'. Goal 1, the aim of which is to facilitate good physical and mental health for all communities and to reduce health inequalities, now and into the future is directly associated with the health needs identified to support the selection of both outcome indicators - to increase positive mental health and reduce NCDs and activities described throughout the HIF 2023-2025 project plan. In particular the key priorities of Goal 1 including; Building a healthy and resilient county; Maintaining and encouraging healthy life choices; Promoting and supporting positive mental health and wellbeing; Facilitating the delivery of community based mental health supports and services; Providing a range of accessible options to get involved in physical activities; Ensuring projects and initiatives are data-driven and consider both current and future needs; are directly linked with the project plan for HIF 2023-2025 for County Meath. A critical factor to ensure the success of HIF 2023-2025 is working in partnership with both organisations and the target groups themselves, ensuring that they are involved in the design, development and delivery of the HIF 2023-2025 programme of activities. Both the draft LECP strategy's Goal 5 and the HIF local strategy implementing partners section outline the importance of establishing and leveraging strong partnerships between organisations whilst also ensuring that information, supports and services made available are aligned with the existing health needs of the County.

Cancer was one of the top causes of death in Ireland in 2022. Cancer prevention is a cornerstone of the National Cancer Strategy 2017 – 2026 as it offers the most cost effective, long term approach for cancer control. As skin cancer is the most common cancer impacting the Irish population, there is a need to address the rising incidence of skin cancer as outlined in the Skin Cancer Prevention Plan 2019-2022. The strategy prioritises the need to develop and implement a national skin cancer prevention plan. Aligning with the Healthy Ireland framework and the National Cancer Strategy, this application sets out to enhance cross-sectoral collaboration to increase awareness and adoption of skin cancer preventative behaviours amongst the target groups.

This strategy will seek to promote local resources provided under the **Outdoor Recreation Infrastructure Scheme 2022**. This scheme will provide physical infrastructure that underpins sporting and recreational activities based on the use of the resources of the countryside; these contribute to healthy active lifestyles while building on the economic and tourism potential of the area, and so are to the benefit of both local communities and tourist visitors alike. Having more free, safe spaces and resources available outdoors to engage in activity can benefit both mental health and encourage healthy lifestyles.

The strategy is aligned with the first outcome of the **Better Outcome Brighter Futures – The National Policy Framework for Children and Young People –2014-2020** 'Active and Healthy, with positive physical and mental wellbeing' adolescents and young people are target groups under each outcome area selected for County Meath.

The health issues identified throughout the HIF 2023-2025 research process are related to the identified needs of the local LGBTI+ community as outlined in the **Now You See Us Outcomers LGBTI+ Youth Strategy Louth, Meath, Cavan and Monaghan 2023-2026.** A cornerstone of this policy is focusing on providing supports, training and resources on issues relating to LGBTI+ young peoples physical and mental wellbeing and for their families and communities.

## 7. Implementing Partners

Identify Lead Implementing and other relevant implementing partners at local, regional and/or national level that will be directly involved in work toward the achievement of your selected outcomes including via shared activities with other Local Authorities. *Please refer to* 

Meath County Council plan to lead the implementation of activities under both the 'Positive Mental Health' and 'Premature Non-Communicable Disease Mortality' outcome indicators areas. However, it is proposed to collaborate with several partners throughout the time frame of the HIF 2023-2025. This support will potentially be sought from these partners to assist with recruitment of target groups and to ensure that the delivery of the proposed actions outlined in the workplan are completed by suitably qualified and experienced individuals and organisations. It is important to note that the following list are what is being proposed and new partners may be established throughout the timeframe of HIF 2023-2025 / it may not be possible to engage with some proposed partners due to unforeseen circumstances.

**Meath Travellers Workshop** is a voluntary community development organisation, which is a partnership of Travellers and settled people working together. A multifaceted positive mental health and Premature Non-Communicable Disease Mortality programme is planned to specifically engage with the Traveller Community in County Meath for the duration of the HIF Fund 2023-2025.

There are three **Family Resource Centres** in County Meath located in areas of disadvantage including Trim, Kells and Bettystown/Laytown. It is thought that the FRCs will be involved in delivery of some of the activities in the workplan and support recruitment of individuals from disadvantaged communities.

**Meath Local Sports Partnership** have vast experience in delivering physical activity programmes across the County, it is proposed that their support will be enlisted to deliver activities under both outcome indicators for HIF 2023-2025.

Various Meath based **Mental Health Organisations** including Jigsaw, Core Ireland, the HSE, Mental Health Ireland amongst others will potentially form a key role in the development of a mental wellbeing network for the HIF 2023-2025.

Th expertise of Meaths' HSE Health Promotion and Improvement Team will be an important partnership throughout the duration of HIF 2023-2025. Other relevant HSE contacts to partner with include the HSE Operational Lead, Integrated Care Programme Chronic Disease and the HSE Resource Officer for Suicide Prevention, Louth/Meath.

Sports organisations including a potential partnership with the **Meath GAA Health and Wellbeing Committee and The Football Association of Ireland** could be a key way to ensure that the general population and adolescents and young people are engaged in the proposed activities for HIF 2023-2025

The **Social Farming Ireland** programme will be considered for HIF 2023-2025 in terms of an activity under the positive mental health component of HIF 2023-2025 and this will lead to a continued partnership with this organisation.

The Irish Heart Foundation provide nationwide screening services for CVD it is proposed that a partnership will be enlisted to provide screening under the HIF activities for 2023-2025.

A partnership with the local contact for **The National Screening Service** who deliver on a national programme of screening for cancer and diabetes will be considered for the duration of HIF 2023-2025.

A **Facilitator** to deliver a multifaceted positive mental health programme focusing on building resilience has been identified and may be enlisted to deliver this component of the proposed activity plan.

A suitable qualified **Nutritionist or Dietitian** will be identified to provide nutrition and healthy eating support and guidance to the target groups for the HIF 2023-2025.

**Organisations working with adolescents and young people** including Youth Work Ireland Meath, Foroige, Outcomers, Jigsaw, Comhairle na nOg will potentially act as partners for the HIF activities and provide a link with adolescents and young people and their families.

The **Meath Public Participatory Network** team will be an important partnership to link with the Community groups and Organisations affiliated with this network.

Other departments in **Meath County Council** may be enlisted as partners for HIF 2023-2025 such as the Community department, the Active Travel team and Meath climate action team.

## **Section 6.1** in the Guidelines for further information.

## **Other funding sources**

Indicate other public/private sources of funding, including philanthropic sources, that may leverage selected outcomes and bolster ambitions for the Healthy Ireland Fund in your county.

It is unknown at the time of application what other funding stream/s will arise or will be identified to support the aims of the HIF 2023-2025 programme. Should the HIC for Meath become aware of appropriate funding sources they will be investigated for suitability to support ongoing HIF 2023-2025 projects.			

## 8. Communications Plan

Please provide a broad outline of main communication goals and the means and frequency with which you will promote Healthy Ireland to you target group/s as per examples below. After submission of the application this can be updated and used as a tool to benefit implementation and/or reporting.

Communication Goal	Audience	Frequency		Responsible/ Chair
Healthy Meath Steering Group communication	Members	Quarterly	In person / Online	HIC for Meath
Promotion of Healthy Meath Initiatives	General Public, Target Groups	dependent on activities	Online, Print, Events, Social Media, Meath PPN, Sports Organisations	HIC for Meath or Implementing Partner
Updates on Healthy Meath Programme	Chief Executive MCC	Monthly	Report	HIC for Meath
Updates on new HI campaigns	General Public	As campaigns are launched		HIC for Meath / MCC Social Media Team

## 9. Planning for the end of round 4

Funding for HIF Round 4 activity will come to an end in December 2025. Outline your strategy for the close out of the HIF funded work under round 4 by the end of December 2025.

The HIC for Meath will act as the main point of contact for partners if any queries / issues arise throughout the course of the project. This will help to ensure that the project will remain on track for its duration.

The HIC for Meath will seek regular updates from partners to ensure projects are on track and finish within the timelines of the HIF 2023-2025.

The HIC for Meath will request yearly reports of HIF 2023-2025 programmes ensuring alignment of project outcomes and outputs and that costs remain within the agreed budget.

Partners will be made aware of reporting guidelines and procedures once the HIC for Meath has this information and will be sent reminders of deadlines to ensure timely submission of reports.

All information, proposals, budgets etc. relating to HIF 2023-2025 will be stored in a designated folder and records will be kept up to date for the duration of the HIF 2023-2025 so that the final report will be delivered on time unless an unforeseen circumstance should arise.