

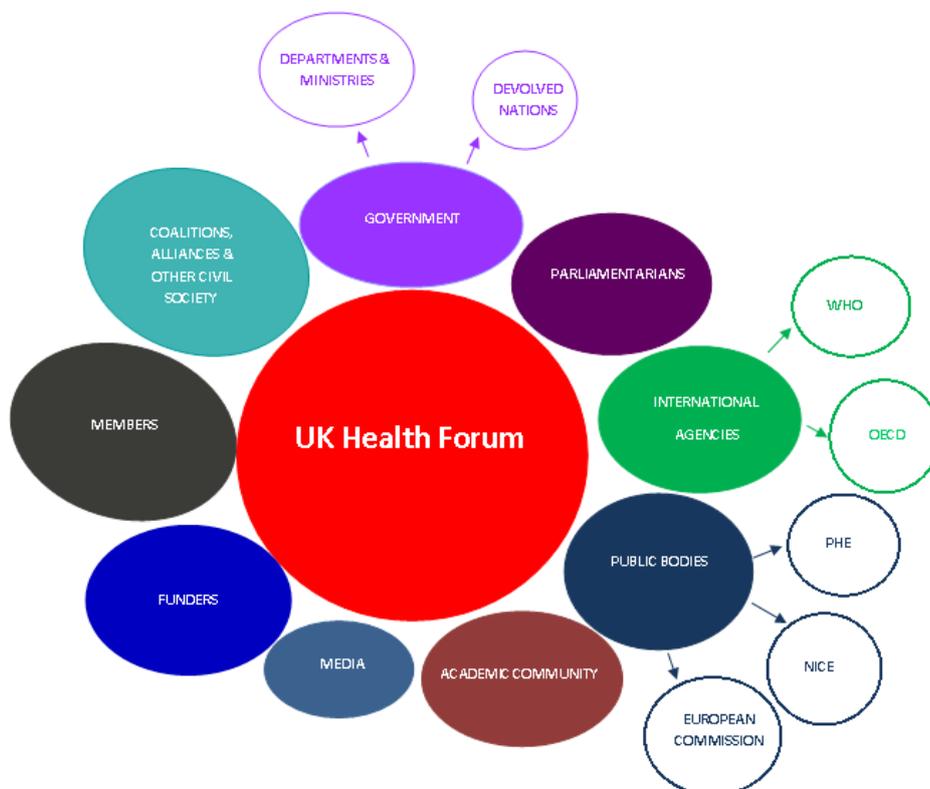
Healthy Policy: Healthy People: Healthy Planet

Impact Report 2015-16 No. 03

This is the third impact report of the UK Health Forum (UKHF). It is intended to show members, partners and funders how we make a difference to the prevention policy agenda by highlighting some of our achievements and significant contributions over the last 18 months. Impact evaluation is built into our project plans and funding proposals. It is also important that we monitor the policy developments and reports to understand where we may have influence. Feedback on our previous reports was positive.

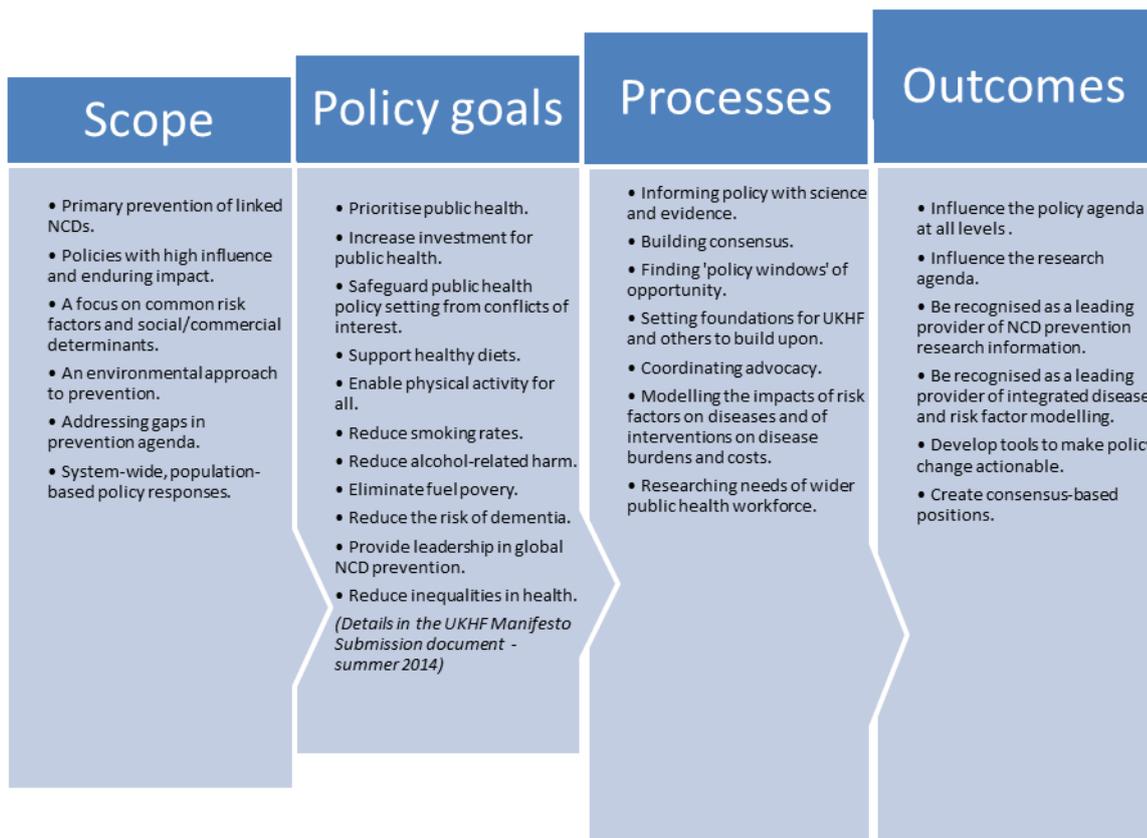
The UKHF is both an organisation and an alliance of organisations, and it is important we try to evaluate our unique efforts and our contributions to collective advocacy. We work with a wide range of partners and seek to influence a variety of audiences at both national and international levels as shown in Figure 1. We provide expert advice on a broad range of issues relevant to our work to statutory, voluntary and academic sector partners. This year the UKHF has contributed to 30 advisory groups (Annexe A). The UKHF has also contributed to science and policy literature (Annexe B).

Figure 1: Who do we work with?



The UKHF's scope, strategy and ways of working are summarised in the advocacy model shown in Figure 2. Achieving change in public policy is challenging and often takes decades to show results in terms of improved public health. Our long-term impact must be assessed within the context of changing health trends, but in the short- and medium-term it is important that we monitor and report how well we achieve outcomes that create the necessary conditions for better, more effective policy making.

Figure 2: UKHF advocacy model



Below we present a series of short descriptions of just some of our projects and activities and indicate how our work is helping to achieve the desired outcomes shown in Figure 2. More information is available on the UKHF website:

www.ukhealthforum.org.uk

Policy development and advocacy: Sugar reduction

What we did: In 2014 we scoped the options for action on sugar reduction in England and co-hosted consultations on priorities with academia, NGOs and industry actors with Public Health England (PHE). During 2015 we supported PHE with the production of its comprehensive evidence review, “Sugar Reduction: The evidence for action.” PHE commissioned evidence reviews on two of the top three priority actions for sugar reduction which were identified by the public health community: fiscal measures targeted at high sugar food and drinks and marketing strategies targeted at high sugar food and drinks. We provided expert input as members of the project steering groups which oversaw these reviews.

Impact: Fiscal measures on sugary drinks and marketing restrictions on unhealthy food and drink were included among the priority interventions which PHE recommended in its published advice to government for tackling obesity. A sugary drinks levy on industry was subsequently announced by the government among the key measures identified to support the Childhood Obesity Plan.

Who we reached: Policymakers; health and social care professionals; local public health professionals; academics and civil society, advocacy organisations; the food industry; regulatory authorities; and the general public.

Policy development and advocacy: The official Eatwell Guide to healthy eating

What we did: In 2014/15 we participated in the Expert Reference Group convened by PHE to review and update the UK's food-based dietary guidelines. The review was instigated by the Scientific Advisory Committee on Nutrition's updated recommendations on Carbohydrates and Health which were published in July 2015. As part of this process, we consulted extensively with our members and the wider public health community and identified consensus on the key elements which we wanted included as part of the update process. This included a strong recommendation that the revised guidelines should support the objectives within the Sustainable Development Goals (SDGs).

Following the publication of the Eatwell Guide, in June 2016 we produced a joint NGO statement of support which was endorsed by over 20 organisations to help publicise the key changes to the guidelines and demonstrate the strength of support for the updated guidelines from the public health community.

Impact: We were able to secure the inclusion of the majority of our recommendations within the updated Eatwell Guide. Among them i) the Eatwell guide was revised to include sustainability considerations on the environment for the first time, making the UK one of a handful of countries worldwide to do so ii) the section on foods which are high in fat, salt and sugar was removed from the plate and put to one side as an indication that they were not a necessary component of a healthy diet and iii) a new section on hydration was included within the guideline which recommended the consumption of water and unsweetened tea, coffee and milk drinks.

Who we reached: Policymakers; health and social care professionals; local public health professionals; academics and civil society, advocacy organisations; the food industry; and the general public.

Policy development and advocacy work in progress: Alcohol marketing and young people

What we did: We were commissioned by PHE to undertake a literature review and mapping exercise on alcohol marketing and young people which aimed to:

- Update the evidence on the association between drinking patterns among children and young people and their exposure to alcohol marketing in all media.
- Address questions about the use of digital marketing and if it influences their behaviour and alcohol consumption; what methods are being used; whether specific groups are being targeted and whether the use of digital media is linked to violations of marketing codes and regulations.
- Identify potential strengths, weaknesses and gaps in UK regulations governing alcohol marketing.
- Identify lessons from international experience which could usefully inform any review of UK regulations.

Impact: This report will contribute to PHE's alcohol harm reduction evidence review expected late 2016. It is anticipated that this evidence review will be paired with a set of recommendations to Government to take forward for the reduction of alcohol harm.

Who we reached [expected]: Policymakers; health and social care professionals; local public health professionals; academics and civil society, advocacy organisations; the alcohol industry and regulatory authorities; and the general public.

Policy development and advocacy work in progress: Addiction Alcohol Marketing Series

What we did: We secured funding for and co-ordinated input into a special supplement of Addiction journal, for final publication in early 2017. The papers are largely already on-line and citable and so we have started to make the most of them with key audiences. The steering group includes Tom Babor and David Jernigan, two of the most significant alcohol control advocates in the US, Maristela Monteiro the alcohol lead for the Pan American Health Organisation (PAHO) who has hosted a number of workshops on alcohol marketing and has supported the paper development process, and Katherine Brown of the Institute of Alcohol Studies, and James Nicholls from Alcohol Research UK. The papers cover a range of areas including the evidence for the impact of alcohol marketing on vulnerable groups, the effectiveness and self compliance to self regulation from the alcohol industry, the use of digital media in alcohol marketing, the opportunities for a global standard on alcohol marketing, and what can be learned from other codes and standards in health.

Impact:

- Papers have been shared in citable format to PHE. The UKHF and project partners are exploring the possibility of a seminar at the WHO EURO national alcohol focal point meeting in Slovenia.
- The papers have also been cited in a response to WHO on best buys bolstering the claim for alcohol marketing restrictions to remain a best buy.
- PAHO has used the papers in seeking to inform its recommendations on the marketing of alcohol in the member states across the Latin American and the Caribbean region.

Who we reached: Within the UK we circulated online and citable copies of the papers to Public Health England; Alcohol leads, ahead of their evidence review on alcohol policy. Outside the UK we reached WHO Regional Office for Europe, ahead of the 7th International symposium on alcohol policy at the end of November; WHO Global 'best buy' review team; PAHO alcohol leads and experts meetings.

Policy development and advocacy: Public-private interactions for NCD prevention

What we did: Public private interactions to address non-communicable diseases (NCDs) can present challenges when they involve commercial entities whose products which are high in fat, salt and sugar raise the risk of obesity and NCDs. The UKHF has been coordinating a project on strengthening the governance of public-private interactions on nutrition for the prevention of NCDs, in collaboration with the Institute of Population and Public Health of the Canadian Institutes of Health Research (IPPH-CIHR) and International Development Research Centre (IDRC). In 2015, we hosted a meeting at the Rockefeller Foundation's Bellagio Centre with 20 stakeholders from 14 countries who had backgrounds in research, academia, funding, civil society, and national and governmental institutions.

The meeting identified a number of key actions to help move work in this area forward, with an overarching priority to raise awareness of the conflicts of interest challenges in nutrition-related NCD policy. Outputs include a report, summary of key-informant interviews and Bibliographic review of the evidence. Funding has since been secured from IDRC and IPPH-CIHR to produce a Casebook on experiences of public-private interactions from around the world.

Impact: The UKHF's project lead, Dr Modi Mwatsama, was invited to participate in the WHO Technical consultation on addressing and managing conflicts of interest in country nutrition programmes and is supporting the development of related WHO guidelines. The project has informed the development of several other institutional guidelines. The meeting's findings have been presented to national and international audiences and meetings including the WHO, World Public Health Nutrition Association, London School of Hygiene and Tropical Medicine and The University of Edinburgh.

Who we reached: Policy makers, governments, researchers, academic institutions, funding institutions and civil society organisations across six continents including Africa, Asia, Australia, Europe, Latin America and North America.

Modelling: Making the economic case for prevention

What we did: Recognising UKHF expertise in dynamic microsimulation modelling, we were commissioned by Cancer Research UK to evaluate the effect of obesity and smoking prevalence on the future burden of related NCDs by projecting trends in risk factor prevalence forward from 2015 to the year 2035.

For this project we developed the UKHF's existing microsimulation model to include population projections, indirect costs, and to test different types of intervention, including a 5% tobacco duty escalator and sugar sweetened beverage (SSB) tax.

We were able to estimate the long-term impact on NCDs and related cost savings to the health care and wider society of a 20% SSB tax and 5% tobacco duty escalator to make the economic case for prevention.

The reports can be found here:

http://www.cancerresearchuk.org/sites/default/files/tipping_the_scales_-_cruk_full_report11.pdf

<http://www.ukhealthforum.org.uk/who-we-are/our-work/ukhf-whats-new/?entryid70=54921>

Impact:

- The project made a significant impact in informing government policy in relation to the SSB tax, as well as receiving substantial news coverage.
- We were notified by HM Treasury that the analysis was very helpful in informing their assessment of the sugary drinks industry levy.
- HM Treasury have shown interest in the tobacco duty escalator work.
- The obesity and cancer report has been incorporated into the NHS cancer plan.
- Two papers have been drafted for submission in Tobacco control: Hunt et al, Modelling the implications of reducing smoking prevalence: the public health and economic benefits of achieving a 'tobacco-free' UK, Submitted November 2016; and Knuchel-Takano et al, Modelling the implications of reducing smoking prevalence: the benefits of increasing the UK tobacco duty escalator to public health and economic outcomes, submission November 2016.

Who we reached: Health policy-makers, academics, health professionals and chronic disease alliances across the UK.

Modelling the long term cost-effectiveness of a brief intervention in primary care: The BWEL study

What we did: Using our microsimulation software, we modelled the the long-term cost-effectiveness of the BWEL trial (led by Oxford University). This trial tested the impact of a very brief, physician-delivered opportunistic intervention in primary care. The project was funded by UK National Prevention Research Initiative.

Impact:

- The results have been published in the Lancet, and two additional cost-effectiveness papers have been drafted for submission for peer-reviewed publication.
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2816%2931893-1/abstract>
- The project received substantial news coverage.

Who we reached: Primary care physicians, health professionals, academics, chronic disease alliances across the UK.

New Networks and Alliances: The UK Public Health Network

What we did: The UKHF supported the development of the UK Public Health Network and hosted it through its first year of operation. A Chief Executives' Coordinating Group was set up to oversee the development of the Network with staff on secondment to UK Health Forum providing a small secretariat. The Network provides a unique forum that brings together both statutory and non-government agencies from England, Wales, Scotland and Northern Ireland. Board members, Chief Executives, Presidents, Chairs and policy leads from 20 organisations with a generic public health remit have initiated discussions on common strategic issues.

Impact:

- Policy leads are sharing work in progress, particularly where findings might create sensitivity.
- Do-once-and-share initiatives, such as the weekly scan of consultations and a reading list on Brexit, are improving capacity across the system.
- Collective discussions have begun on securing greater investment in public health, the need for a new UK health and wellbeing Act, and managing the opportunities of Brexit.
- Organisational tensions appear to be decreasing as new collaborations are emerging and joint statements, for example to House of Commons select committees, are being produced.
- A proposal was submitted by the Chief Executives' Coordinating Group to the Law Commission to review elements of current public health legislation that require clarification.

Who we reached: Within the UK: Public health system leaders across the UK; UK-wide Government departments such as the Treasury and national Governments such as the Welsh Government; the Law Commission and legal experts in health across the UK; Parliamentarians. Outside the UK: OECD; Melbourne Law School.

Information provision: Supporting domestic and global health

What we do: The UKHF has developed its reputation as a knowledge broker serving to source, synthesise, disseminate and enable the exchange and uptake of information.

- Our internationally respected and evidence-based knowledge information service provides a range of free, quality assured resources and services to support global health work on NCDs.
- We develop unique tools, for example, online briefings, interactive literature updates, online sharing in communities of practice, e-learning modules.
- We undertake research into how the public health workforce and civil society need and use information, to ensure that they are listened to and supported in delivering on the prevention agenda.
- We assess the impact of our services through information needs assessments which explore questions about learning, internal processes, costs and impact on local services.

Impact: We help to improve public health and the health and care systems by providing information at the point of need.

- Our work saves users time by filling a gap in the provision of synthesised evidence and information on the prevention of NCDs, their risk factors and determinants.
- We continuously test knowledge translation methods to support capacity building. This helps us to improve the uptake of new, emerging best practice and stimulate policy dialogue at the global level.
- Common themes that emerge from user feedback is that UKHF services are 'authoritative', 'comprehensive', 'trustworthy', 'relevant' and a 'unique combination of public health information services'.

Who we reached: We reach over 90 countries around the world including low and middle income countries. Our services have reached over 60,000 individual users including thousands of regular subscribers to our briefing services and the ncdlinks.org platform.

Information needs assessment services

What we do: We provide support to organisations and agencies wishing to carry out assessments of the information needs of their stakeholders. In 2016 we collaborated with Caribapan, a civil society organisation which connects those with interests in alcohol control advocacy in the Caribbean and provided support to them in carrying out an assessment. We have also now produced an Information Needs Assessment toolkit, with funding from PHE. This toolkit can be used to support information needs assessment work in a scalable way by a range of different organisations.

Impact: As a result of the information needs assessment, a series of recommendations were made to help Caribapan identify priority information needs amongst its stakeholders. The information needs assessment aims to assist the organisation to identify how it can support capacity and capability building of its stakeholders by facilitating information sharing, learning and collaboration.

Development updates since last UKHF impact report

NCD Prevention Research:

The UKHF has been involved with developing a new framework and funding for NCD prevention research, the UK Prevention Research Partnership which builds on the review of the National Prevention Research Initiative.

Equity Action:

The UKHF has taken on a three year programme of work for the European Commission on health inequalities as a foundation for a future potential Joint Action for European Union (EU) member states. Details of the Health Equity Pilot Project are available at:

http://ec.europa.eu/health/social_determinants/projects/ep_funded_projects_en.htm#fragment1

Dementia risk reduction:

The UKHF has been on the advisory group for the new refreshed Government strategy for Dementia 20:20 which now includes priority action on risk reduction. Alzheimer's Research UK is now funding prevention research and the new NICE guidelines for mid life intervention are being disseminated and implemented. The UKHF presented on the Blackfriars consensus statement and its development at the EU's High Level Group on Dementia.

Sustainable Development Goals:

The UKHF has continued to work with global and domestic NGO partners on the development and implementation of the SDGs. In line with our calls, the final SDGs declaration includes a strong focus on tackling system-wide barriers such as trade and tax evasion, and also includes several goals on the social determinants of health and NCDs. Activities in the last year have included a presentation at PHE's annual conference in 2015; a response to the International Development Committee's consultation the government's implementation of the SDGs; and linking the SDGs to relevant policy processes such as the update of the Eatwell Guide.

Global NCDs agenda:

The UKHF has continued to support the implementation of the NCDs and global health agenda through direct advocacy and input to UK institutions such as PHE's global health committee and WHO processes including the Executive Board, World Health Assembly (WHA), Global NCD Coordinating Mechanism. We have been providing expert input to WHO's process to develop tools and guidance to member states on addressing conflicts of interests in public-private interactions on nutrition. In 2016 we wrote to the WHO Director General and the head of the UK delegation to the WHA calling for strengthened provisions on addressing conflicts of interest within the Framework Engagement with Non-State Actors. We also supported several joint statements to the WHA on the agenda items on obesity, NCDs and the SDGs.

Obesity:

The UKHF has supported the development of an Obesity Health Alliance (OHA) to prevent obesity-related ill-health by addressing the influences that lead to excess bodyweight throughout life. Formed in 2015, the OHA brings together leading organisations with expertise in tackling overweight and obesity. In its first year the OHA developed a consensus statement on the 10 priority actions for tackling childhood obesity, held meetings with ministers and senior civil servants, and maintained a high profile on obesity in the media. The Government launched its childhood obesity plan in August 2016. The plan included two of the OHA's top three priorities: a comprehensive reformulation programme and levy on companies who sell sugary drinks. The OHA is now working to support implementation of the plan and encourage government to extend the TV restrictions on junk food marketing to children to the 9pm watershed.

Healthy and sustainable diets:

The UKHF has secured funding from the Health Foundation and British Liver Trust to develop a national policy framework to support the achievement of the healthy and sustainable diet objectives of the Eatwell Guide. As part of the project we are undertaking a situational analysis of the current food production and consumption patterns of the major food groups; assessing current action and opportunities presented by the post-Brexit political and economic landscape; and bringing together experts from the health, environment and sustainable development communities

in the UK to develop consensus and mobilise support for action.

EConDA:

The EConDA project, completed in December 2015 is continuing to make impact through the continued use and extension of the model within the EU-funded Joint Action on Nutrition and Physical Activity. The EConDA tool will be adapted to include cohorts of children and allow user input. This will provide greater flexibility for the user. The tool has also been disseminated beyond Europe as part of a World Bank co-funded project that is currently ongoing.

Developing the health sectors health modelling capabilities:

The UKHF has been supporting the development of NCD prevention dynamic microsimulation modelling capabilities nationwide in partnership with PHE, and globally in partnership with the World Bank.

Annexe A

The UKHF has been an active member of the following Government, professional, research and civil society advisory groups in 2015-16:

- Alcohol Health Alliance executive board
- Smoke Free Action Coalition
- Obesity Health Alliance steering group
- UK Public Health Network (including steering group)
- Centre for Workforce Intelligence Public Health reference group
- Department of Health / Public Health England / NHS England Voluntary and Community Sector strategic partnership group
- Department of Health and Public Health England public health system and stakeholders groups
- Eating Better Alliance management group
- Food Research Collaboration steering group
- Healthy Air Campaign strategy group
- London School of Hygiene and Tropical Medicine SPIRAL research advisory group
- National Research Prevention Initiative strategic review panel and the UKL prevention research partnership
- NICE programme development groups for dementia and frailty, workplace health, and air pollution
- NICE public health committees chairs group
- Public Health England global health committee
- Public Health England built environment reference group (Healthy People Healthy Places)
- Public Health England cold weather plan reference group
- Public Health England dementia governance board
- Public Health England health check advisory board
- Public Health England equity board
- Public Health England Nutrient Profiling Expert Reference group
- Public Health England Eatwell Guide External Reference group
- Public Health England PHORCaST project board (careers development in public health)
- Public Health England public health information taxonomy group
- Public Health England sugar evidence review advisory group
- Public Health England tobacco control implementation board
- Public Health Skills Framework/Passport steering group
- University College London street mobility advisory group

Annexe B

The UK Health Forum produced and contributed to the following publications during 2015-16:

- **Screening and brief intervention for obesity in primary care: a parallel, two-arm, randomised trial.** Aveyard P., Lewis A., Tearne S., Hood K., Christian-Brown A., Adab P., Begh R., Jolly K., Daley A., Farley A., Lycett D., Nickless A., Yu LM., Retat L., Webber L., Pimpin L., Jebb SA. The Lancet. 2016.
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2816%2931893-1/abstract>
- **Short and sweet: Why the government should introduce a sugary drinks tax**
http://www.cancerresearchuk.org/sites/default/files/short_and_sweet_exec_sum_live.pdf
- **Tipping the scales: Why preventing obesity makes economic sense** <http://www.ukhealthforum.org.uk/who-we-are/our-work/ukhf-whats-new/?entryid70=54573>
- **Aiming High: Why the UK should aim to be tobacco free**
<http://nhfshare.heartforum.org.uk/RMAssets/Modelling/CRUKSmoking/Tobacco%20Technical%20Report%20FINAL%20PDF.pdf>
- **Health Impact Assessments, WHO: European Commission Observatory on Health Systems and Policy Facets of Public Health in Europe** 2015, Mc Graw Hill Education, Nichola Davies and Paul Lincoln, ISBN 139780335264209
<http://www.healthobservatory.co.uk>
- **Alcohol marketing and youth alcohol consumption: a systematic review of longitudinal studies published since 2008**, Authors, David Jernigan, Jonathan Noel, Jane Landon, Nicole Thornton, Tim Lobstein
<http://onlinelibrary.wiley.com/doi/10.1111/add.13591/full>
- **The commercial use of digital media to market alcohol products: a narrative review**, Authors, Tim Lobstein, Jane Landon, Nicole Thornton, David Jernigan <http://onlinelibrary.wiley.com/doi/10.1111/add.13493/full>
- **International codes and agreements to restrict the promotion of harmful products can hold lessons for the control of alcohol marketing**, Jane Landon, Tim Lobstein, Fiona Godfrey, Paula Johns, Chris Brookes, David Jernigan,
<http://onlinelibrary.wiley.com/doi/10.1111/add.13545/abstract>
- **Improving health through better governance – Strengthening the governance of diet and nutrition partnerships for the prevention of chronic diseases. Meeting report.**
http://nhfshare.heartforum.org.uk/RMAssets/PUBLIC_BellagioNutritionGovernanceMeetingReport_FINAL.pdf
- **Joint statement in support of the government’s Eatwell Guide**
http://nhfshare.heartforum.org.uk/RMAssets/Policy/FINAL_EatwellGuide_Joint_NGO_StatementOfSupport_v10.pdf
- **Undertaking information needs assessment – a practice guide**, UK Health Forum, Research and Information Services team, March 2016, <http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=55924>
- **How to write a case study in public health**, UK Health Forum, Research and Information Services team, 2016,
<http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=55923>
- **Information needs of the public health workforce** 2015, Hughes E, Korjonen H, Keswani A & Ford J (UK Health Forum) EAHIL 12(1), 2016, <http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=55216>

- **Can Twitter improve your health? An analysis of alcohol consumption guidelines on Twitter** Hughes, E. Health Information & Libraries Journal 33(1): 77-81, March 2016, <http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=55199>
- **Every breath we take: the lifelong impact of air pollution**, Royal College of Physicians; Royal College of Paediatrics and Child Health, (Hannah Graff, our Senior Policy Researcher, is acknowledged for her contributions to the report and the literature update UKHF submitted as evidence has been included), 2016, <http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=54956>
- **Public Health on Demand: Fuel poverty and health**, UK Health Forum, 2016, <http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=54816>
- **The role of case studies as evidence in public health**, UK Health Forum, Research and Information Services team, January 2016, <http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=54564>
- **Virtual communities of practice: can they support the prevention agenda in public health?**, Ford J, Korjonen H, Keswani A, Hughes E; UK Health Forum, July 2015, <http://www.ukhealthforum.org.uk/who-we-are/our-work/research-information-services/publications/?entryid43=42220>

Pending publications:

- **Inequalities in smoking and obesity in Europe predicted to 2050: Findings from the EConDA project**, Perez-Ferrer et al, *In submission* European Journal of Public Health
- **Achieving the 2025 WHO global health BMI targets: predicting obesity trends in 53 WHO-Europe region countries**, Pineda et al, *In prep* The Lancet
- **Extended and standard duration weight loss referrals for adults in primary care (WRAP): a pragmatic randomised controlled trial**, Ahern et al, *In submission* The Lancet
- **Modelling the implications of reducing smoking prevalence: the benefits of increasing UK tobacco duty to public health and economic outcomes**, Knuchel-Takano et al, *In prep for submission to* Tobacco Control
- **Modelling the implications of reducing smoking prevalence: the public health and economic benefits of achieving a 'tobacco-free' UK**, Hunt et al, *Under review* Tobacco Control

For more information, visit the UKHF website at www.ukhealthforum.org.uk
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