

ANNUAL REPORT 2002-2003



Health
Promotion
Agency

Mission:

To make health a
top priority for
everyone in
Northern Ireland.



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8.45am-5.00pm on weekdays
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Other formats:

Copies of this *Annual Report* may be produced in alternative formats on request. A portable document file (PDF) of this document is also available to download from our corporate website.

Our corporate website provides more detailed information about all of our work and many published resources are available to download as PDFs. It also provides links to our other health-related websites and to many other relevant sources of information on health and health promotion.

Chair's report



I am pleased to present the *Annual Report* of the Health Promotion Agency for Northern Ireland (HPA) for the year 2002/03 and trust it provides you with an overview of our activities and achievements.

Our work this year has been both challenging and wide ranging, with major public health information campaigns such as 'Every cigarette is doing you damage' and '... nobody enjoys a drunk' attracting considerable interest and comment from the general public and health professionals.

Highlighting these particular public health issues in this way is necessary if we are to improve the quality of life for individuals and help meet the Government's objectives in the *Investing for Health* strategy. The HPA has responded positively to this strategy and we are pleased to be involved in a number of its programmes which are excellent examples of interdepartmental and cross-party working.

We fully recognise that the development of collaborative partnerships between Government departments and statutory, community, voluntary and private sector organisations is essential if the health of the population is to improve. Particular partnerships such as those with schools to promote the Fresh Fruit in Schools programme have had great success as has 'Mind your head', – a partnership with student organisations to promote positive mental health. We also welcome the support, skills, expertise and energy of our partners in helping the HPA deliver its objectives and we acknowledge the continued success of partnership working with our colleagues throughout Europe and in the Republic of Ireland.

The Board and I commend the Chief Executive and his staff for maintaining the highest standards across all their work whilst continuing to look for innovative approaches to cost-effective ways of working. We congratulate them on their achievements, including the reaccreditation of Investor in People (IIP) during the year.

We wish those members of staff who have left the HPA every success in their new careers, and welcome new staff and Board members Janet Leckey, Valerie Owens and Gemma Harkin - we trust they will enjoy the scope of the work. We also thank Margaret Cupples and Paul Burns, who retired from the Board this year, for their unstinting time and contribution to the HPA.

We express our thanks to the Ministers responsible for health during the past year and Departmental officials for their help and support.

Finally, as we go to press, the Government's recent proposals to increase the official retirement age to 70 will be a challenge to us all! The HPA looks forward to exploring the implications of this proposal for health promotion.

A handwritten signature in black ink that reads "Alice Quinn". The signature is written in a cursive, flowing style.

Alice Quinn, Chair

Chief Executive's report



The HPA continues to provide regional leadership and direction for health promotion in Northern Ireland and to play an important role in providing policy advice on many public health issues to the Minister responsible for health, via the Department of Health, Social Services and Public Safety (DHSSPS) and to other Government departments.

We have highlighted the need for collaborative work across all sectors to reduce inequalities in health in Northern Ireland and we actively support *Investing for Health*, the Government's new strategy for public health. We continue to work to put health promotion and disease prevention on the policy agenda so that the health implications of decisions taken by all Government departments are taken into consideration.

I welcome the setting up of the Regional Health Promotion Planning Forum. It is in its infancy but I am confident there is a determination by its members to derive the maximum benefit from collaborative working among those whose aim is to promote good health.

Our programme of research and information has helped identify need and shape the development of appropriate and effective programmes. Research confirmed the need to highlight the ill effects of binge drinking especially among young people. The integration of the Alcohol Strategy with the Northern Ireland Drugs Strategy has allowed more attention and resources to be focused on this important public health issue. The HPA's public information campaign has helped to raise awareness of the dangers inherent in alcohol misuse.

Our work on tobacco control has continued to develop on a collaborative basis. The public information campaigns, not just about the effects of smoking on health, but promoting the Helpline, have continued to provide updated information to smokers who wish to stop and need support. The integration of these campaigns with cessation clinics at local and primary care level has been one of the major achievements of work in this area.

A wide range of training opportunities, including workshops and specialist seminars on health promotion and public health issues, were designed to develop professional practice and increase capacity in health promotion.

We continue to work at the forefront of health development and health promotion initiatives in Northern Ireland. This reflects the quality and skills of all our staff and the commitment of the Chair and Board to our work. I would like to thank everyone at the HPA for their support during the year. As the HPA continues to develop, we can look forward to meeting and surmounting new challenges.

A handwritten signature in black ink that reads "Brian Gaffney". The signature is written in a cursive, flowing style.

Dr Brian Gaffney, Chief Executive

The role of the Health Promotion Agency

Good health enables us to get the most out of our lives, and in Northern Ireland people are living longer and their health has improved greatly over the last century. But too many still die young or experience illness or disability which could have been prevented.

The HPA, set up in 1990, aims to provide leadership, strategic direction and support to all those involved in promoting health in Northern Ireland. The strategic aims and objectives of the HPA are set within the context of the Government's public health strategy *Investing for Health*, which advocates prevention through addressing the wider determinants of health. It also recognises the importance of partnership working and collaboration.¹

We work to facilitate and foster such collaboration in the development of regional programmes which aim to support more localised health promotion work carried out by Health and Social Services Boards, Trusts and a range of statutory, voluntary and community groups throughout Northern Ireland.

Statutory functions

The HPA is a special agency of the DHSSPS operating under the direction of a management board. Its statutory functions are:

- advising the DHSSPS;
- undertaking health promotion activity;
- commissioning and carrying out research and evaluation;
- providing training and professional development;
- providing information to the public and professionals;
- working with and supporting other organisations;
- organising Board meetings. The Board meets four times a year usually in February, May, August and November. Details of actual dates, times and agendas are available from the HPA.

Targeting Social Need

The HPA is committed to contributing to the Government's New Targeting Social Need (TSN) initiative. New TSN seeks to tackle disadvantage by directing efforts and resources towards individuals, groups and areas objectively defined as being in greatest need.

Priority areas

Priority areas of work include nutrition, physical activity, drug and alcohol misuse, smoking, mental health and sexual health. We are committed to reducing the incidence of coronary heart disease and cancers - Northern Ireland's biggest killers. We work to protect the public's health by contributing to screening, immunisation and professional information initiatives. We also target specific groups and settings in promoting a holistic approach to health.

Business areas

The work of the HPA is carried out through four core business areas:

Policy development and advice

Research, information and analysis

Public and professional information

Training and professional development

Using this report

This report aims to give a brief synopsis of the breadth of work in which the HPA is engaged and to show how each element of this work has contributed to meeting our objectives for 2002-2003.

A detailed description of our work under each business area can be found online at <http://www.healthpromotionagency.org.uk>



Investing for Health

Investing for Health, officially launched on Wednesday 27 March 2002 after extensive consultation, sets out the Northern Ireland Executive's views on how health in Northern Ireland can be improved and health inequalities reduced.¹

One of the main aims of this strategic initiative is to address key determinants of health such as poverty, education and the environment, with action to promote good health and prevent illness given the same priority as treatment and care. The HPA is committed to working across sectors to help ensure that local communities are engaged in identifying opportunities to improve and protect their health.



Investing for Health

To help implement the *Investing for Health* agenda, the HPA contributed to a range of strategies including the *Teenage Pregnancy and Parenthood Strategy*, the *Strategy for reducing Alcohol-Related Harm*, the *Promoting Mental Health Strategy*, the *Tobacco Action Plan*, the *Drug Strategy for Northern Ireland* and the *Breastfeeding Strategy for Northern Ireland*. We also participated in the consultation on the review of strategies for physical activity and food and nutrition.^{2,3,4,5,6,7}

Health Promoting Schools

The HPA took a leading role in Health Promoting Schools, an *Investing for Health* initiative, through membership of a partnership including the Health and Education Liaison Group (HELG) and the five Education and Library Boards. The partnership received funding for a two year period (2002-2004) to assist 10% of schools in planning and implementing action towards health improvement. Five local coordinators and a regional coordinator were appointed during its first year.

Health promoting workplaces

The HPA provided input to the development of *Working for Health* – the workplace health strategy for Northern Ireland.⁸ In addition, a

proposal to facilitate the development of a network of health promoting workplaces was prepared and submitted for funding.

Fresh Fruit in Schools

We also worked with the *Investing for Health* team and the Health Action Zones to develop a two year pilot scheme which provides a free piece of fruit daily for each child in Primary 1 and 2 in 85 schools. Launched in October 2002, Fresh Fruit in Schools aims to encourage the habit of eating fruit as part of a healthy diet and raise awareness of the benefits of healthy eating.



The HPA produced resources to support the scheme, including teaching materials, information for parents, and a website www.thesnackpack.net. We are also responsible for evaluating the scheme. Funding for the scheme was secured by the DHSSPS through the Ministerial Group on Public Health.

See also: www.thesnackpack.net



Enjoying their fresh fruit at the launch of the Fresh Fruit in Schools initiative are, from left, Amy Stewart and Stacey Best from Lowood Primary School, Belfast.

Drugs and alcohol

Alcohol and drug misuse are two major public health issues in Northern Ireland. The main aim of the HPA's work in these areas is to contribute significantly to meeting the targets set out in the regional drugs and alcohol strategies and to provide support to the Drugs and Alcohol Strategy Team. We supported a number of key objectives of the strategy through the following activities.

Binge drinking

We commissioned qualitative research to gain a better understanding of the drinking patterns of 18-35 year olds and published the findings in *Attitudes and behaviour of young adult drinkers in Northern Ireland*.⁹ It showed that a substantial proportion of this age group concentrate their drinking into one or two heavy sessions at the weekend. Such 'binge drinking' has become a real public health problem not just in Northern Ireland.

The findings were used to inform a public information campaign on binge drinking. In February we launched a TV advertising campaign targeted at young adult drinkers and focusing on the message, 'Everyone can enjoy a drink – nobody enjoys a drunk'. We also hosted an expert seminar on binge drinking with over 200 people attending.



Quantitative research into the drinking trends of adults was also published by the HPA. *Adult drinking patterns in Northern Ireland* was the first major research into alcohol consumption here since 1990 and revealed not only how often people drink, but also how much they drink.¹⁰ Of those who completed a seven day drinking diary, 37% of men and 20% of women were shown to be drinking enough to put their health at risk.

Volatile substance abuse

Another major issue which continues to attract concern is that of volatile substance abuse (VSA). Following earlier research by the HPA, we produced a resource aimed at all those who work with young people. *Volatile substance abuse: a professional's guide* was reinforced by a public information campaign and leaflet to raise parents' awareness about the dangers of solvents.¹¹

Drugs

The focus of our work on drugs was a targeted advertising campaign, using a new series of posters developed for display in the toilet areas of pubs and nightclubs popular with 18-30 year olds. These aimed to reduce drug-related harm by providing information about the harmful effects of drugs and the concept of 'safer dancing'.

Website

Throughout the year we continued to update our successful drugs prevention website which was shortlisted for a major award for excellence in website design.



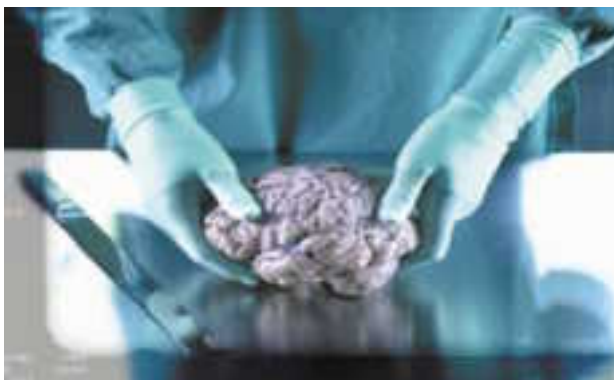
We also expanded the site to include information on alcohol and this new approach was reflected in a new domain name, www.drugsalcohol.info

Tobacco

Smoking is the single largest preventable cause of disease, disability and premature death in Northern Ireland. Every year it causes around 2,800 deaths and millions of pounds are spent on hospital costs associated with smoking-related diseases.¹² The issue of tobacco control - through prevention, cessation and advocacy - continues to be a key objective for the HPA and we aim to achieve this through contributing to meeting the targets on smoking set out in the regional Tobacco Action Plan and the Programme for Government.^{5,13}

Anti-smoking campaign

We continued to develop our anti-smoking public information campaign with the second phase of 'Every cigarette is doing you damage', a hard-hitting campaign targeting adults and focusing on the effects of smoking on health. The central television advertisement showed in graphic detail the link between smoking and strokes by featuring a blood clot in the brain of a 38 year old smoker.



Further support to help smokers who are trying to quit was promoted with a re-run of the nicotine replacement therapy television advertisements, entitled 'Stressed mother' and 'Football supporters'. Other promotional activity included a series of radio advertisements, billboard poster advertising and advertising on buses. The 'Artery' advertisement from phase one of the campaign was also broadcast to remind smokers of the link between smoking and heart disease.

Evaluation of the campaign was very positive, with 83% and 91% of respondents recognising the 'Artery' and 'Brain' advertisements



Photographed during the launch of 'Every cigarette is doing you damage' are, from left, Dr Henrietta Campbell, Chief Medical Officer DHSSPS; Dr Brian Gaffney, Chief Executive HPA and Mrs Louise Warde-Hunter, Chief Executive Action Cancer.

respectively, 70% recognising the female support advertisement, and 62% recognising the male support advertisement. Fifty six percent of regular and occasional smokers said the advertisements made them more likely to quit, and 72% of recent ex-smokers reported that the campaign helped them to stay off cigarettes.

'Sick of Smoking'

We developed a television advertisement to promote the 2003 No Smoking Day (NSD) theme of 'Sick of Smoking'. The campaign centred on a countdown of the days to No Smoking Day and featured a different message each day to encourage smokers to stop. The new Smokers' Helpline 0800 85 85 85, a free phone service which provides help and advice to smokers trying to quit, was also promoted.

We also commissioned research to evaluate the 2003 No Smoking Day campaign and this was very positive, with 82% of all adults aware of the day. This is higher than in 2002 when 65% of adults were aware of the day, and also higher than in Great Britain (64% of adults). The proportion of smokers aware of No Smoking Day here who made a quit attempt was 15%, again higher than in Great Britain where 12% made a quit attempt.

Nutrition

Good nutrition is vital to our health, helping to protect against obesity, diabetes, heart disease and some cancers. This year the HPA pursued its strategic objectives by continuing to work in partnership with colleagues in health and other sectors to support people here in making healthier food choices.

Healthy eating at school

The HPA worked with the *Investing for Health* team and the Health Action Zones in each Board area to develop the Fresh Fruit in Schools scheme, one of the first major initiatives to come out of the new public health strategy. For further details, see the 'Investing for Health' section.

We also contributed to the development and implementation of new nutritional standards for school meals as part of the School Meals Advisory Group working with the Department of Education to carry out a training needs assessment with school meals staff.

Weight Wise



We supported the UK-wide Weight Wise campaign, coordinated by the British Dietetic Association. This aims to highlight the health risks of being overweight and to encourage weight control through dietary changes and

physical activity. We produced a leaflet entitled *Small changes, big benefits*, which included a step-by-step guide to weight loss and a chart to help people assess if they are overweight. Promotional posters were also produced and the initiative was promoted through media activities throughout June 2002.

Eating well at any age

Following the success of *Nutrition matters for the early years*, the HPA's nutrition guidelines for nurseries and playgroups, work has been undertaken in association with the Northern



Ireland Childminding Association to develop guidelines especially for childminders.¹⁴

We were also involved in the development of *Dish It Up*, a project coordinated by the University of Ulster,

with funding from the Food Standards Agency. This interactive CD-ROM for 11-12 year olds aims to foster positive attitudes to healthy eating and a healthy lifestyle. Based on a virtual day, the activities encourage young people to think for themselves and to look critically at their attitudes and lifestyle choices.

Wider dissemination of *Cook it!*, our community-based nutrition programme, continued with a two day training workshop in October 2002. Delegates attended from a wide range of backgrounds, including Sure Start, Action Cancer and First Key. *Cook it!* aims to increase knowledge and understanding of key nutritional messages, demonstrate how these can be translated into enjoyable, inexpensive family meals, and improve cooking skills.

Physical activity

Physical activity plays an important role in preventing serious conditions such as obesity, heart disease and Type 2 diabetes. In line with its key objectives in this area, the HPA continued to facilitate the Northern Ireland Physical Activity Strategy Implementation Group (NIPAIG), and to support the Strategy through research, training and public information. The NIPAIG annual report is available from the HPA upon request.¹⁵

Actively Ageing Well

The Actively Ageing Well initiative - developed by Age Concern Northern Ireland and the HPA with a five year grant of £1 million from the New Opportunities Fund (NOF) - aims to provide a series of physical activity programmes for older people and training to support this work.

In its first year, the initiative succeeded in involving 60 community and older people's groups. A newsletter to highlight outcomes was established, and an evaluation framework has been developed.

Get a life, get active

The Get a Life, Get Active campaign continued this year with a re-run of the 'Go walking' television advertising campaign. This was supported by leaflets and an information booklet.

This year's Get Active in the Community Awards scheme allocated grants of up to £500 to 150 physical activity projects, helping over 9,000 people of all ages and abilities to get more active. Evaluation showed that projects increased awareness of the benefits of physical activity and of local facilities, and allowed participants to learn new skills.

Getting active together conference

Promoting good practice was the theme of the all-island physical activity conference focusing on local initiatives, which was held in November as a joint initiative between the HPA and the Department of Health and Children, Republic of Ireland. More than 200 delegates heard experts present case studies of good practice and attended open forums and workshops.

Measuring effectiveness

To inform future work, we commissioned a survey on the current evaluation practices and experiences of physical activity practitioners. The survey also explored the needs and expectations of policy makers, stakeholders and funding bodies.

Training

A number of training initiatives from 2001-2002 continued to be disseminated this year. Following the launch of the Class Moves! pilot project last year, we evaluated the initial teacher training and the subsequent use of the resources in the classroom and 93.5% of respondents rated the overall value of the training day as good or very good. Training on the *Physical activity toolkit for primary care*, launched by the HPA in 2002, continued at Board level, with 817 health professionals taking part by March 2003.¹⁶

In May we organised an advanced physical activity course for those working with frailer older people, or people with reduced mobility. In June, trainers from the four HSS Boards and Trusts were trained to deliver a leadership training course on chair-based exercises. The pilot was funded by NIPAIG and coordinated by the HPA.



Getting active at the all-island physical activity conference are, from left, Patricia Dawson, Go For Life, Dublin; Frank Ahern, Assistant Secretary General, and Chris Fitzgerald, Principal Officer, both Department of Health and Children, Republic of Ireland.

Sexual health

The HPA aims to enable people to make informed decisions that positively influence their sexual health through increasing awareness and knowledge about sexual health issues. We have met our strategic objectives through work on a number of strands, including sex education, family planning, the prevention of unplanned teenage pregnancy and the prevention of sexually transmitted infections (STIs)

Sexual health posters

Following positive evaluation of previous sexual health poster campaigns in the toilet areas of pubs and clubs, a new series of posters targeting 18-30 year olds was launched. Fourteen new posters were developed to address a wide range of sexual health issues.

Two posters deal with the issue of STIs in general, and three others focus on syphilis, chlamydia and gonorrhoea. One was also designed specifically to encourage people to not be complacent about HIV/AIDS and to promote World AIDS Day in December. The poster also promotes local Genito Urinary Medicine (GUM) services and useful contact numbers.

Contraceptive Education Service

The HPA works in collaboration with fpaNI (Family Planning Association) to make information accessible and available through the Contraceptive Education Service (CES), which is part-funded by the HPA.

In the provision of information, a total of 6,696 telephone calls, 2,559 visitors and 1,028 letters were responded to. The highest number of enquiries continues to be on unplanned pregnancy, location of family planning clinics and emergency contraception. The recently published *Northern Ireland review of family planning services* states the need for greater access to information on sexual health issues. CES contributes to meeting this need.¹⁷

Teenage pregnancy and parenthood

The HPA is a member of the Teenage Pregnancy and Parenthood Strategy Implementation Group.

Supporting the aims and objectives of the *Investing for Health* Teenage Pregnancy and Parenthood Strategy, the HPA facilitated media training for practitioners of sexual health promotion in Northern Ireland. The participants were from the Regional Sexual Health Information Exchange Group and from a range of voluntary and community organisations.

Prams, pee and poo!

The HPA and Shankill Sure Start jointly published a leaflet – *Prams, pee and poo!* – aimed at young men aged 15–25 from the Shankill. The resource was produced to support this pilot project which offers information and facts about being a father as well as tips on relationships and communication skills, sex, contraception and benefits.



Colin Brown, West Kirk Community Project, and Jim Weir, Forum for Action on Substance Abuse, are left holding the babies during the launch of *Prams, pee and poo!* along with Lynn Black, Regional Health Promotion Manager (Children and Young People) at the HPA.

The Fairy Godfather

This video resource for schools developed in partnership with fpaNI was disseminated through a series of workshops for teachers and others working to support relationships and sexuality education in schools. The video workshop focused on developing and implementing policy and action to support such education. Extremely positive teachers' evaluations have been received from among the 37 schools involved.

Mental and emotional health

Good mental and emotional health is associated with having a positive self-image, satisfying relationships with peers and family, and skills and competencies in areas such as decision making, problem solving and self motivation. The HPA aims to encourage good mental health by contributing to meeting the targets set out in *Investing for Health* and the regional *Promoting Mental Health Strategy*. This year's activities have focused on partnership working to deliver information initiatives for targeted groups and professionals in a range of forums.

Mind your Head

The HPA in conjunction with the Northern Ireland office of the National Union of Students UK and the Union of Students in Ireland (NUS-USI) secured £10,000 from the Investing for Healthier Communities grant programme to develop an information booklet, *Mind your head*, for university students and an accompanying support guide for student advisers, parents, tutors and staff.



Forgetful student Emma Louise, otherwise known as television personality Nuala McKeever, helps launch *Mind your head*.

The initiative aimed to offer first-year students attending Queen's University and the University of Ulster the information they need to make informed choices regarding their mental wellbeing and includes practical tips on improving emotional health, relaxation techniques, exercise, nutrition, studying and useful local contact numbers. The support guide provides advice on how parents, tutors and staff can promote mental and emotional wellbeing on campus.

Design for Living

The Design for Living conference, organised in partnership with Action Mental Health and the Youth Council for Northern Ireland was aimed at practitioners working with or for young people. It focused on the importance of good relationships and communication skills and how these impact on the mental health of young people.

The conference was used to launch two new resources on young people's mental and emotional wellbeing: *Sound Mind*, a leaflet aimed at young people aged 13-18 years old and containing tips and advice on maintaining mental and emotional wellbeing and managing stress, and an accompanying support guide. This can be used for discussion on various aspects of mental health and wellbeing and includes several exercises for group work.

Boy to Man: Survival Skills

This one day seminar provided an opportunity to share examples and practical ideas to promote young men's mental and emotional wellbeing. A range of speakers from Ireland and the UK also shared their expertise of working with young men through a series of keynote addresses and practical, interactive workshops.



Separating the men from the boys at the survival skills seminar are, from left, Colin Ashford, Olympia Men's Health; Mat Crozier, Youth Action; Barry McGale, Suicide Awareness Coordinator WHSSB and Trefor Lloyd, Working with Men, London.

Breastfeeding

Although breastfeeding is widely acknowledged to have great health benefits for both mother and baby, Northern Ireland has the lowest breastfeeding rates in the United Kingdom and one of the lowest rates in Europe and beyond. The Northern Ireland Breastfeeding Strategy is helping to create an environment where mothers choose breastfeeding as the primary form of nutrition for their babies and to promote best practice in breastfeeding among health professionals.⁷



The implementation of the strategy is supported by the HPA to promote best practice among all health professionals who support breastfeeding in both hospital and community settings, to coordinate action ensuring an evidence based, culturally appropriate approach, to monitor progress and assist with the collection and collation of statistics, and to encourage and facilitate a cross-border approach to breastfeeding.

The first regional conference on breastfeeding was organised by the HPA in association with the DHSSPS's Breastfeeding Strategy Implementation Group. The event attracted over 200 delegates from across Northern Ireland including health visitors, community and hospital midwives, parentcraft coordinators, education professionals, paediatric dietitians, health promotion coordinators and voluntary breastfeeding supporters.

Breastfeeding Awareness Week

Activities took place across Northern Ireland to support National Breastfeeding Awareness Week 2002, under the strapline 'Mother's milk: the perfect takeaway'. During 2002 a range of materials was also developed and tested to support National Breastfeeding Awareness Week 2003.

Keeping abreast

We began production of *Keeping abreast*, a twice yearly newsletter published on behalf of the Breastfeeding Strategy Implementation Group. This newsletter aims to keep all those involved in working with mothers and babies up to date with progress towards achieving the aims of the Breastfeeding Strategy.



A forum was established to support health professionals employed as Breastfeeding Coordinators in Northern Ireland. Training was organised in February to provide guidance on issues such as effective information-giving, supervised clinical practice, managing change and auditing practice.

Breastfeeding in Northern Ireland. A summary report on knowledge, attitudes and behaviour was published. It explores the level of knowledge about the health benefits of breastfeeding and how mothers decide how to feed their baby. It also examines attitudes towards breastfeeding. The main findings highlight the need for better education on the benefits of breastfeeding targeted at the general public and in particular young women from lower income groups.¹⁸

Health protection

Health protection is concerned with the elimination or control of external threats to public health, including environmental threats and infectious diseases. This area of work includes initiatives such as immunisation and screening. We continued to increase the uptake of information and interventions offered to protect and maintain the health of those in a range of target groups, by working collaboratively with a variety of organisations within the health and social services and beyond.

Immunisation

Childhood immunisation continued to be a priority area. The DHSSPS decided to offer a booster dose of the Hib vaccine to all children aged between six months and four years on 1 April 2003, following a small rise in cases of Hib disease throughout the UK. The HPA was commissioned by the DHSSPS to produce a leaflet for parents and information to support health professionals in preparation for this work.

Influenza

We continued to help protect the health of older people and those in 'at risk' groups who are vulnerable to infection, through implementation of a public information campaign to promote the influenza vaccine. Under the banner 'Protect yourself - catch the vaccine, not the flu', the campaign involved television, radio and bus advertising as well as printed leaflets and posters. The leaflet was available from the HPA website and the DHSSPS's site in four ethnic minority languages.

Antenatal screening

Following new guidelines issued by the DHSSPS, we developed an antenatal screening leaflet for pregnant women, which explained about the blood tests carried out during a woman's first antenatal visit. The leaflet, *Protecting you and your baby*, contains a consent form, and was pretested at focus groups throughout Northern Ireland before distribution to Trusts providing antenatal services. It was made available through both the HPA and DHSSPS's websites in six minority ethnic languages.



Protecting their health. Photographed at the launch of the immunisation campaign to fight the flu at Lisburn Health Centre are, from left, Margaret Campbell, Elsie Vance and May Stewart.

Breast screening

Leaflets and letters used to support the Northern Ireland breast screening programme were revised. The information material targets all women aged 50-64 years, inviting them for breast screening and notifying them subsequently of the result of their mammogram. Three leaflets including *Breast screening: your early warning system*, *Breast screening: what to expect at your second visit* and *Breast awareness: looking out for changes* were produced after pretesting. Two were translated into five minority ethnic languages for website use.

Antibiotic resistance

Research was undertaken as part of the HPA's contribution to the implementation of the DHSSPS's Antimicrobial Resistance Action Plan (AMRAP).¹⁹ See 'Research and evaluation' section for further details.

Research and evaluation

The research and evaluation function remains a vital element in the HPA's work. The results of baseline research, testing and evaluation form the basis of many of our programmes, and adds value and credibility to a wide range of our outputs.

The depth and scale of the research and evaluation input to our work is highlighted throughout this Annual Report, with specific reference to research, testing and evaluation, especially in respect of alcohol, breastfeeding, smoking, physical activity and sexual health.

AMRAP

Research undertaken as the HPA's contribution to the Antimicrobial Resistance Action Plan (AMRAP) was designed to inform the development of a possible public information campaign aimed at reducing expectation for, and usage of, antibiotics among the general public. The research involved interviews with a representative sample of 1,000 members of the Northern Ireland adult population (aged 16+), as well as interviews with a sample of 200 GPs. Results showed the public had a good understanding of the benefits of antibiotics; however, their expectation of antibiotics was considered unacceptably high by GPs.

Activity review



The 2001-2002 review covered a range of research and evaluation work carried out during the year.²⁰ This included research into measuring effectiveness of physical activity activities and secondary analysis of physical activity campaign evaluation surveys. It also reported on the evaluation of three major public information campaigns addressing smoking (the 'Every cigarette is doing you damage' campaign), sexual health and drugs poster campaigns aimed at 18-30 year olds, and physical activity ('Get a life – get active'). In addition, there were reports on the evaluations of No Smoking Day 2002 and the Get Active in the Community Awards scheme of 2001.



Pictured at the launch of the report *Towards better sexual health* are, from left, Professor Bill Rolston, University of Ulster; Dr Audrey Simpson, Director fpaNI; Dirk Schubotz, Chief Researcher fpaNI; and Dr Brian Gaffney, Chief Executive HPA.

Research reports

"It (five to ten bottles of beer) acts as a starter for the night" is just one quote from the *Attitudes and behaviour of young adult drinkers in Northern Ireland* report published by the HPA. This and other reports, including *Adult drinking patterns in Northern Ireland*, the No Smoking Day evaluation, and a breastfeeding research report are all available as PDFs on our website.

As well as carrying out corporate research and evaluation, we are also committed to the wider support of research and evaluation initiatives that address health promotion and health issues.

Training and professional development

The HPA is committed to addressing the continuing training and professional development needs of all those involved in promoting health in Northern Ireland. In line with our key objectives, we provide a comprehensive high quality programme comprising training events as well as support services and advice for the development and delivery of training and education in health promotion.

Training approaches

We work in partnership with other organisations to assess need and provide focused, targeted programmes of quality training and assistance in curriculum development at the best value to a wide-ranging audience. A training needs assessment questionnaire is distributed to over 3,000 individuals and organisations to identify the key training and development needs for practitioners which result in increased education opportunities.

Our training features a range of events including workshops, seminars, conferences and courses. In 2002-2003 we offered a comprehensive programme of multi-disciplinary training opportunities to almost 350 individuals which aimed to increase knowledge and understanding of health promotion issues and to improve health promotion practice.

Training review

We published online evaluations from all our training courses conducted between April 2001-December 2002. This can be downloaded from our website. The evaluations of the training courses were overwhelmingly positive, with many participants adding encouraging comments.

In line with our strategic objective to increase access to health promotion training using electronic media, we began the development of an interactive website on smoking cessation for primary care professionals.

Health Service Managers Award

Since 1997 we have held the stewardship of the Association of Health Service Managers (AHSM) Award fund, which was donated by the former Association of Senior Managers to fund



HPA Chair Alice Quinn, left, with Diabetes seminar speakers, Dr Mark Davies, Belfast City Hospital, and Tracey Douglas, Community Dietitian, North & West Belfast Health and Social Services Trust.

health promotion with a specific emphasis on education. Each year the award is offered to a student from the MSc in Health Promotion course who achieves the highest marks in the 'Management by communication' module. This year's award went to Elizabeth McClure.

Communications

The HPA is committed to achieving high quality standards in all aspects of our communications practice and we actively look for innovative and effective ways of making communications more accessible to everyone, including producing resources in alternative formats and languages.

This year saw another comprehensive programme of communications activity designed to increase understanding of our aims and objectives and support colleagues in providing information to the professionals and the public.

Communications Strategy

The HPA's Communications Strategy was reviewed and revised, covering all aspects of internal and external communication. A set of protocols was developed to support the implementation of the strategy and to set quality standards for best practice in communication.

Campaigns



Public information campaigns were designed and carried out on smoking, the dangers of solvent misuse, binge drinking, flu, and Hib immunisation. A new series of targeted posters and leaflets providing information on a wide range of sexual health issues and on

drugs was also developed.

Websites/electronic communications



Work was undertaken in the areas of internet and intranet development. We relaunched our corporate website, www.healthpromotionagency.org.uk, in response to feedback received through our online web survey. A CD-Rom was distributed to colleagues in the New Year promoting the site re-launch.

Many publications were added to the corporate site together with information on where they can be found and how they can be downloaded.

The website www.drugsprevention.net secured funding from the Drugs and Alcohol Strategy for its continued development. Work to include information on alcohol under the renamed www.drugsalcohol.info site was carried out.

A website was developed to support the all-island physical activity conference at www.getalifegetactive.com. It contained information about the conference, post-conference materials and speaker presentations.

To support the *Investing for Health* pilot project Fresh Fruit in Schools, www.thesnackpack.net was launched. It provides backup information and support materials for teachers in participating schools. The HPA's site for young people on smoking, www.up-2-you.net, was also updated.

Corporate communications

There were four issues of the HPA *Promoting Health* journal produced during the year. Individual editions looked at *Investing for Health*, children's health, cancer prevention and community approaches to improving health.

Six issues of the newsletter *Inform* were produced to keep colleagues up to date about ongoing HPA work and relevant issues in health promotion.

Resource development

Several core leaflets, booklets and posters, covering nutrition, physical activity and sexual health were updated and reprinted at the request of the Central Health Promotion Resource Services of the four HSS Boards.

Press and publicity

We continued to provide a service as a leading source of health information, with our Public Relations Officer responding to more than 360 media enquiries. Our profile was also raised through substantial press and television coverage.

International collaboration

Investing for Health states, 'Where societies face similar challenges, it is sensible to share ideas and learn from one another's experience. International cooperation also opens up new opportunities to pool resources, for example in the search for new measures to prevent disease.'

To this end the HPA continues to contribute to the wider international health promotion arena through its links outside Northern Ireland.

World Health Organization

We continued to develop our role as a World Health Organization (WHO) Collaborating Centre for Training and Research in Communications and Information Technology in Health Promotion and Disease Prevention. We do so through our contribution to agreed programmes of activity as an internationally recognised centre of excellence. The HPA was a major contributor to the European Health Report 2002.¹²

We are working with WHO in a number of areas including the Countrywide Integrated Noncommunicable Diseases Intervention (CINDI) Programme, research surveys, projects aimed at further developing health promoting settings and a variety of communication, education and training initiatives.



The CINDI Programme is a major initiative of WHO which promotes healthy lifestyles and collaborative working to tackle the lifestyle factors which are linked with noncommunicable diseases. Northern Ireland is the UK's 'demonstration area' for the CINDI Programme.

The 28 member countries of the CINDI network share information and promote best practice in

tackling issues such as smoking, poor nutrition, diabetes, alcohol misuse, physical inactivity and psychosocial stress.

This year, we published the eighth edition of *CINDI Highlights* which is used to promote the work of the CINDI member countries and to lobby for more funding for health promotion work in Europe and beyond.

Cancer Consortium

The Ireland-Northern Ireland-National Cancer Institute (NCI) Cancer Consortium is a unique partnership among the governments of Northern Ireland, Ireland and the United States working together in cancer research, treatment and prevention. The HPA is part of the Consortium's Cancer Prevention Working Group and contributed to a major cancer prevention conference in Belfast in October.

Cross-border health promotion

In line with the requirements of the Belfast (Good Friday) Agreement, to develop and implement cross-border working in a number of key areas, links were further strengthened by the HPA's involvement in an all-island physical activity conference which took place from 27-28 November 2002.

The joint initiative between the HPA and the Department of Health and Children, Republic of Ireland, entitled 'Getting active together! Promoting good practice in physical activity', provided a unique forum for bringing together policy makers and practitioners concerned with improving health by getting people to be more active.

During the conference, delegates learned of the latest models and approaches aimed at reducing inactivity, together with examples of good practice. The role of partnership working was also examined to show how all sectors can work together to enhance the development, delivery and evaluation of future programmes.

Copies of speakers' presentations can be accessed at www.getalifegetactive.com

Corporate business

The HPA has continued to work to deliver a number of corporate responsibilities and objectives which set parameters for the range of work undertaken and the type of approaches developed by the organisation.

Investors in People

We were assessed against the IIP standard and were successful in retaining the accreditation. During the assessment, HPA development processes were reviewed and staff interviewed by an IIP practitioner. We continue to build on the good work started as part of the first IIP assessment in 1999 and are committed to the ongoing training and development of staff.

Equality

We continued to work towards the implementation of our Equality Scheme, which was approved by the Equality Commission in April 2001. In conjunction with other HPSS agencies, we undertook an Equality Impact Assessment (EOIA) of flexible working policies on the groups covered by Section 75 of the Northern Ireland Act 1998.

To date, all members of staff have received training in equality awareness and key staff have received training on disability awareness and human rights legislation. In conjunction with other HPSS organisations, we are also carrying out Equality Impact Assessments on public information campaigns.

Corporate planning

The HPA helped to establish a Regional Health Promotion Planning Forum to help improve the coordination of planning and programmes in health promotion.

IT development

We continued to review and develop our IT systems and are currently producing an IT strategy concerning all aspects of IT development within the organisation. New software for human resources and accounts was installed, and all internal software was upgraded, with associated competency training.



Comments and complaints

Four positive comments were forwarded formally to the HPA in recognition of its work this year. No complaints were received. We are committed to openness and continual improvement and welcome comments on our work. Complaints are investigated promptly and in accordance with our published guide. If you wish to make a formal comment or complaint please contact: The Complaints Officer, Health Promotion Agency for Northern Ireland, 18 Ormeau Avenue, Belfast BT2 8HS.

More information

To find out more about any aspect of our work, please refer to our corporate website at www.healthpromotionagency.org.uk

Accounts

Revenue income and expenditure for the year ended 31 March 2003

Year ended 31 March 2002		Year ended 31 March 2003
£	INCOME	£
1,428,000	Cash advances made available by DHSSPS	1,618,000
1,115,547	Other income	1,961,183
2,543,547	Total income	3,579,183
	EXPENDITURE	
	Programme expenditure	
190,222	- Policy development and advice	251,147
215,807	- Research, information and analysis	319,754
154,116	- Training and professional development	171,669
1,441,062	- Public and professional information	2,217,198
557,131	Operational costs	590,306
2,558,338	Total expenditure	3,550,074
	Excess/(deficit) of income over expenditure before notional capital charges	29,109
(14,791)	Adjustment to offset notional capital charges	25,523
34,673	Excess/(deficit) of income over expenditure	54,632
19,882		

Capital income and expenditure account for the year ended 31 March 2003

Year ended 31 March 2002		Year ended 31 March 2003
25,000	INCOME	
25,000	Capital advances made available by DHSSPS	0
	Total income	0
	EXPENDITURE	
44,663	Capital expenditure	54,312
44,663	Total expenditure	54,312
(19,663)	(Deficit) of income over expenditure	(54,312)

Balance sheet as at 31 March 2003

Balances at 31 March 2002		Balances at 31 March 2003
96,210	FIXED ASSETS	
	Tangible assets	132,833
	CURRENT ASSETS	
2,716	Stock	2,656
174,966	Debtors	365,427
5,567	Cash and bank balances	4,232
183,249	Total - current assets	372,315
	LIABILITIES	
177,918	Creditors: Amounts falling due within one year	366,664
5,331	Net current assets	5,651
	Total assets less current liabilities	
4,023	Creditors: Amounts falling due after more than one year	4,023
97,518	Net assets	134,461
	FINANCED BY:	
96,210	Capital account	132,833
	Net income and expenditure reserve	
118,956	- Revenue	173,588
(117,648)	- Capital	(171,960)
97,518		134,461

Accounts

Cash flow statement for the year ended 31 March 2003

	Year ended 31 March 2003	Year ended 31 March 2002
	£	£
Net cash inflow/(outflow) from Operating Activities	52,997	21,533
Capital expenditure		
Payments to acquire tangible fixed assets	(54,312)	(44,663)
Proceeds from sales of tangible fixed assets	0	0
Net cash inflow/(outflow) from investing activities	(54,312)	(44,663)
Management of liquid resources		
Purchase of current asset investments	0	0
Sale of current asset investments	0	0
Net cash inflow/(outflow) from management of liquid resources	0	0
Net cash inflow/(outflow) before financing	(1,335)	(23,130)
Financing		
Capital funding	0	25,000
Net cash inflow/(outflow) from financing	0	0
Increase/(decrease) in cash and bank balances	1,335	1,870

Statement of total recognised gains and losses for the year ended 31 March 2003

	2003	2002
	£	£
Surplus/(deficit) for the financial year		
- Revenue	54,632	19,882
- Capital	(54,312)	(19,663)
Unrealised surplus/(deficit) on the revaluation and indexation of fixed assets	2,593	1,722
Total gains/(losses) recognised	2,913	1,941

This Annual Report, including the summary financial statements, was approved by the HPA Board at its meeting on 5 August 2003.



Alice Quinn
Chair



Dr Brian P Gaffney
Chief Executive

Copies of the HPA's full annual accounts for 2002-3 can be obtained from Marie McCloskey, Finance and Administration Manager, Health Promotion Agency for Northern Ireland, 18 Ormeau Avenue, Belfast, BT2 8HS. Email m.mccloskey@hpani.org.uk

Accounts

Board members' remuneration

	2003	2002
	£	£
Chairman's honorarium and expenses	8,264	9,202
Chief Executive's emoluments	86,901	84,900
Other members' expenses	3,124	1,966
Total	98,289	96,068

No pension contributions are paid by the HPA in respect of non-executive HPA Board members.

Emoluments of Chief Executive/senior full time official

The emoluments of the Chief Executive who is an ordinary member of the HPA's pension scheme are:

	2003	2002
	£	£
Salary including employer's National Insurance contributions	80,537	78,091
Employer's Superannuation contributions	3,668	3,549
Expenses allowances (taxable)	2,696	3,260
Total	86,901	84,900

Public sector payment policy - measure of compliance

The DHSSPS requires that the HPA pays its non HPSS trade creditors in accordance with the Confederation of British Industry (CBI) Prompt Payment Code and Government Accounting rules. The Government Accounting rules require that "the timing of payment should normally be stated in the contract ... where there is no contractual provision departments should pay within 30 days of receipt of goods and services or on the presentation of a valid invoice, whichever is the later".

The HPA's compliance for 2002-2003 in a sample of 5% of non HPSS trade creditors, was:

	Number	Value
		£
Total bills sampled 2002-2003	62	100,699
Total sampled bills paid within 30 days	59	100,251
% of sampled bills paid within 30 days	95%	95%

None of the HPA Board members, members of key management staff or other related parties has undertaken any material transactions with the HPA during the year.



Report of the independent auditor of the Northern Ireland Health Promotion Agency to the Department of Health, Social Services and Public Safety

I have examined the summary financial statements set out on pages 19 to 21.

This report has been prepared for and only for the Department of Health, Social Services and Public Safety in accordance with Article 90(2) of The Health and Personal Social Services (Northern Ireland) Order 1972 (as amended by the Health and Personal Social Services (Northern Ireland) Order 1991) and for no other purpose. I do not, in giving my opinion, accept or assume responsibility for any other purpose or to any other person to whom this report is shown or in to whose hands it may come save where expressly agreed by my prior consent in writing.

Respective responsibilities of the directors and auditors

The directors are responsible for preparing the annual report. My responsibility is to report to you my opinion on the consistency of the summary financial statements within the annual report with the full financial statements and with compliance within the Health and Personal Social Services (Northern Ireland) Order 1972 and directions made thereafter by the Department of Health, Social Services and Public Safety. I also read the other information contained in the annual report and consider the implications for my report if I become aware of any apparent misstatements or material inconsistencies with the summary financial statements.

Basis of opinion

I conducted my work in accordance with the Bulletin "The Auditor's Statement on the Summary Financial Statement" issued by the Auditing Practices Board.

Opinion

In my opinion the summary financial statements are consistent with the full financial statements of the Northern Ireland Health Promotion Agency for the year ended 31 March 2003 and complies with the requirements of the Health and Personal Social Services (Northern Ireland) Order 1972 and directions made thereafter by the Department of Health, Social Services and Public Safety.

Arthur O'Brien
Appointed auditor 4 September 2003

The HPA Board

Board members at 31 March 2003

The HPA's work is managed by a Board of 10 members appointed by the Minister for Health, Social Services and Public Safety through the DHSSPS. Members contribute valuable advice and expertise as well as an independent perspective on issues of strategy and performance. The Board meets four times a year to discuss strategy,

monitor performance and assist in the development of priorities and policies. Each Board member acts in a personal, non-representative capacity, and non-executive members - with the exception of the Chair - give their services without remuneration.

A full list of members' interests is available on request.



Ms Alice Quinn

is Chair of the HPA. She joined the HPA after a senior management career in retailing with Marks and Spencer spanning almost 30 years. She is Chair of Proteus, an intermediary body for managing European Peace II funding, and is a board member of Enterprise Ulster. Ms Quinn has been appointed independent member of the Project Board for the new Public Prosecution Service.



Mrs Fiona Bagnall

enrolled as a Solicitor with the Law Society of Northern Ireland in 1986 and has been in practice with Brangam, Bagnall and Co (Solicitors). She regularly lectures within the Health and Personal Social Services to nurses and medical and administrative professionals.



Ms Liz Fiddis

is a Lecturer in Health Studies at the Belfast Institute of Further and Higher Education (BIFHE) and has a particular interest in student health issues. As Equality Officer of the National Association of Teachers in Further and Higher Education she is active on both the Women's and Disability Committees of the Irish Congress of Trade Unions.



Dr Brian Gaffney

is Chief Executive of the HPA. He previously worked as a GP and then as a Consultant in Public Health Medicine. He has a broad experience of the health service from primary care to strategic management.



Mr Anthony Harbinson

is the Head of Corporate Services for the Department of the Director of Public Prosecutions. He was previously Director of Finance for the Mater Hospital HSS Trust, the Eastern Multifund and the Eastern Ambulance Service Trust. Since 1995 he has been a member of Threshold (NI), a charitable organisation specialising in working with young people who suffer from mental illness.



Ms Gemma Harkin

lives in Londonderry/Derry and has over 20 years' experience in social welfare, housing and disability, with particular reference to service users. Since 1996 she has been a Director (community sector) with the City Partnership Board in Derry.



Dr David Higginson

has been a Consultant Cardiologist at the Ulster Community and Hospitals Trust since 1983 having previously trained in the Royal Victoria Hospital, and the Royal Postgraduate Medical School, London. He is a Fellow of the Royal College of Physicians of London and a Fellow of the European Society of Cardiology. He has served on the Council of the Irish Cardiac Society and is interested in primary and secondary prevention of heart disease.



Mrs Janet Leckey

lives in Newtownabbey and was formerly a Research Fellow in the Quality and Enhancement Department at the University of Ulster. In 1997 she was appointed a Lay Panel Member in the Family Proceedings and Youth Courts. She is actively involved with CRUSE-Bereavement Care, chairing different sub-groups within the organisation, and practised as a bereavement counsellor for many years. In May 2003 she was appointed as a Lay Assessor to the National Clinical Assessment Authority (NCAA).



**Mrs Una O'Kane
OBE**

has been Principal of St Mary's Grammar School, Magherafelt, since 1995. She was previously Assistant Director with the Council for the Curriculum, Examinations and Assessment (CCEA). Through her work in the field of education she has been involved in developing policy and practice for health education and health promotion in schools.



**Mrs Valerie Owens
OBE**

is a Probation Officer with over 30 years' experience in the criminal justice sector. She is Area Manager with the Probation Board for Northern Ireland with regional responsibilities for practice development in the field of sexual abuse and risk assessment and risk management of offenders. She represents the Probation Board on area Child Protection Committees. She is particularly interested in the development of public health approaches to the prevention of sexual abuse.

HPA staff and directors

in post at 31 March 2003

Senior management team

Dr Brian Gaffney
Chief Executive

Linda Barclay
Director of Programme Development

Maureen Gardner
Director of Communications

Kevin Doherty
Corporate Services Manager

Senior managers

Rob Phipps
Policy and Programmes

Stephen Wilson
Planning and Coordination

Chief Executive's office

Heather McDermott
Personal Assistant to the Chief Executive

Dr John Yarnell
Senior Lecturer in Cardiovascular Epidemiology
(Joint appointment with The Queen's University of Belfast)

Programme development

Lynn Black
Regional Health Promotion Manager
(Children and young people)

Janet Calvert
Regional Breastfeeding Coordinator

Maire Campbell
Regional Health Promotion Manager
(Training and professional development)

Angela McComb
Regional Health Promotion Manager
(Nutrition)

Siobhan Weir
Regional Health Promotion Manager
(Physical activity)

Research, evaluation and information

Julie Hill
Health Development Officer

Deborah Hunter
Health Development Officer

Naomi McCay
Research Manager

Dympna McKay
Health Development Officer

Kelly Warnock
Health Development Officer

Communications

Sean Arbuckle
Graphic Artist

Catherine Brown
Publications Officer

Stephen Cousins
Web Developer

Michele Crooks
Publications Officer

Sinead Curran
Public Relations Officer (fixed term contract)

Jenny Dougan
Public Relations Officer

Linda Giles
Publications Officer

Rachel Kelly
Corporate Communications Manager

Ruth Knowles
Publications Development Manager

Alan Martin
Design, Production and Electronic Communications Manager

Margaret McCrory
Marketing Manager

Arthur McVeigh
Graphic Artist

Tony Sheridan
Communications Manager

Corporate services

Lesley Blackstock
Support Services Administrator

Clare Campbell
Receptionist

Fiona Campbell
Human Resources Manager

Carrie Crossan
Support Services Administrator

Clare Hind
Support Services Administrator

Patricia Lavery
Clerical Officer

Sam Lawther
Porter

Ann Marie McCann
Support Services Administrator

Marie McCloskey
Finance and Administration Manager

Mary Patterson
Support Services Administrator

Noreen Savage
Human Resources Officer

Janet Stanage
Support Services Administrator

Jonathan Telford
Finance Assistant

Staff employed post 1 April 2003

Gillian Gilmore
Research Officer

Laura Kavanagh
Marketing Assistant
(student placement)

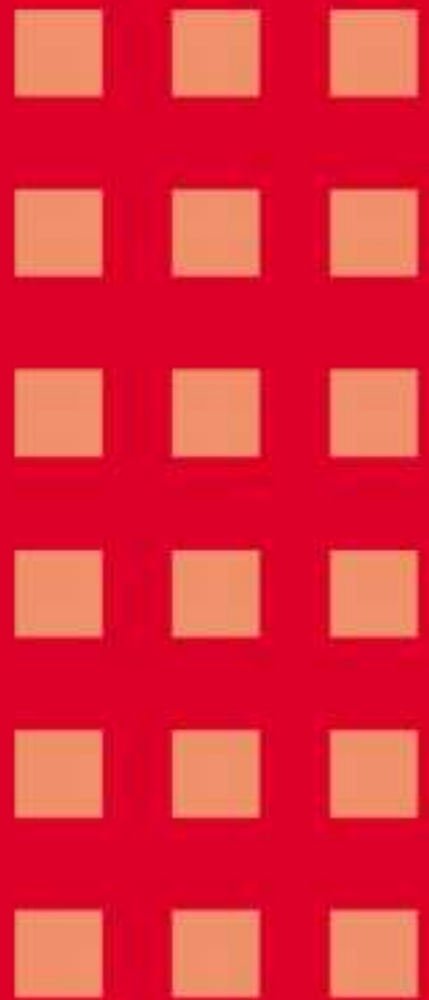
Lesley Mailey
Support Services Administrator

Adam McCune
Web Development Assistant

David Porter
Health Promoting Schools Coordinator

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Health Promotion Agency

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Collaborating Centre



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