Health Promotion Alliance Ireland

Terms of Reference

July 2024

1. Introduction

Chronic diseases including heart disease, stroke, cancer, diabetes, dementia and kidney disease are collectively the leading cause of death and disability in Ireland. Chronic diseases account for 76% of all deaths annually, 40% of admissions and 75% of bed days[1]. Nearly three in ten Irish adults (28 %) reported having at least one chronic condition in 2019[2].

Yet they are largely preventable. Many conditions share risk factors and interact to increase risk. To address these major challenges, we recommend a reorientation of political focus away from encouraging individual change and towards primary prevention population health approaches. Only a stronger focus on prevention of chronic disease will be enough to enable policymakers to tackle ongoing hospital overcrowding problems, pressures on community services and the impact of changing demographics. Furthermore, citizens have a right to live in a world that supports good health instead of driving them towards preventable disease.

Much of the focus to date on disease prevention in Ireland has been on secondary prevention, or the detection and treatment of disease at an early asymptomatic stage, and tertiary prevention, which focuses on minimising the progression and/or complications of established disease. To truly address the key drivers of chronic disease a major shift in emphasis to primary prevention is required.

The World Health Organisation states that the four key risk factors for Non-Communicable Diseases are tobacco, alcohol, unhealthy diet and physical inactivity. The WHO "Best Buys" are primary prevention policy solutions that are highly cost-effective, evidence-based, and yield a significant return on investment for governments to adopt. 'Primary prevention' encompasses measures taken to prevent the onset of disease, including preventive strategies addressing the core determinants of health, i.e. the social, economic, environmental and commercial conditions in which risk of chronic disease emerges, such as tobacco taxes and restrictions on the marketing of unhealthy food to children and measures taken to limit the incidence of disease by controlling specific causes and risk factors such as smoking and high blood pressure.

[1] Department of Health. Better health, improving health care. Dublin, Department of Health; 2016 *cited in*: Integrated Care Programme for the Prevention and Management of Chronic Disease. National Framework for the Integrated Prevention and Management of Chronic Disease in Ireland 2020-2025. https://www.hse.ie/eng/about/who/cspd/icp/chronic-disease/documents/national-framework-integrated-care.pdf

[2] OECD/European Observatory on Health Systems and Policies (2021), Ireland: Country Health Profile 2021, State of Health in the EU, OECD Publishing, Paris/European Observatory on Health Systems and Policies, Brussels

Focusing on these ‘upstream’ policy-based chronic disease prevention measures is more effective, equitable and cost-efficient than ‘downstream’ preventive activities targeting individuals.

The Health Promotion Alliance Ireland is a broad coalition of organisations with a shared interest in advocating for major policy change to promote the primary prevention of chronic disease. This document outlines the terms of reference that govern the functioning, purpose, and responsibilities of the Alliance.

2. Purpose, Vision, Mission

The purpose of the Health Promotion Alliance Ireland is to collectively advocate for evidence-based policy changes that prioritise and enhance primary prevention strategies to reduce the burden of chronic diseases. By leveraging the expertise, resources, and networks of its member organisations, the Alliance aims to drive positive systemic changes and influence public health policies that empower individuals and communities to lead healthier lives while narrowing health inequalities.

Vision

A future without preventable chronic disease.

Mission

To improve the long-term health and wellbeing of the people of Ireland by:

- creating healthier physical and food environments
- reorienting the health system towards prevention
- minimising exposure to risk factors for chronic disease

3. Goals

The main goal is to effect change in key policy areas related to primary prevention of chronic diseases in Ireland by means of the following:

- Develop and advocate for evidence-based recommendations for policy changes to government bodies and relevant stakeholders.
- Raise public awareness about the importance of primary prevention of chronic disease and its impact on individual and community health.
- Foster collaboration and knowledge-sharing among member organisations to enhance the effectiveness of advocacy efforts.
- Highlight the impact of harmful industry tactics that are used to delay adoption of evidence-based health promotion practise and the continued positioning of accountability as individual responsibility rather than public health.
- Monitor and evaluate policy changes and their outcomes in terms of chronic disease prevention and public health improvement.

4. Membership

Membership of the Alliance is open to NGOs, healthcare organisations, universities, unions, and professional bodies that demonstrate a commitment to advocating for policy change in primary prevention of chronic diseases in Ireland and / or Northern Ireland. Member organisations will contribute their expertise, resources, and networks to advance the goals of the alliance.

Specifically, membership is open to organisations that:

1. Advocate on behalf of patient groups, public health, represent a health professional group or have an active interest in preventing chronic disease in Ireland
2. Adhere to and uphold the mission, vision, and values of the Alliance
3. Commit to protecting public health from commercial and other vested interests
4. Are transparent and open to discussion with other members about potential conflicts of interests with their active funders, sponsors or partners

Application to join the Alliance

Organisations seeking to join the Alliance must apply to the Secretariat. Membership must be approved unanimously by existing members.

5. Governance Structure

The Alliance is composed of, and governed by, representatives of each of the member organisations. The detailed work plan of the Alliance is set by its members, who will ensure that it complements their own missions, values, and visions. The Alliance shares the collective work and is a united voice of its member organisations, and not a separate organisation.

The Alliance operates under a collaborative and inclusive governance structure, including:

- Steering Committee: Comprising representatives of member organisations, responsible for strategic decision-making, setting priorities, and coordinating advocacy efforts.
- Working Groups: Formed to address specific policy areas or projects, composed of members with relevant expertise and skills.
- Secretariat: Responsible for administrative and logistical support to facilitate the functioning of the alliance.
- Chairperson: The Alliance will be chaired by the Irish Heart Foundation, who will facilitate meetings, coordinate activities, and, unless otherwise agreed, represent the Alliance externally.

6. Responsibilities of Member Organisations

- Contribute subject matter expertise, research, and evidence to inform policy recommendations.
- Participate actively in meetings, working groups, and advocacy campaigns.
- Contribute to policy outputs and shape public communications outputs
- Collaborate with other member organisations to strengthen the collective impact of advocacy efforts.

- Allocate necessary resources to support the goals of the alliance.
- Participate in public and press events for the Alliance, agreeing for their organisations name, logo and representatives name and image to be associated with membership in images, print, online and broadcast media
- Support with the rollout of digital and social media campaign communications;

7. Advocacy and Communication

- Develop evidence-based policy recommendations and advocacy strategies to influence government bodies, policymakers, and relevant stakeholders.
- Coordinate communication efforts to raise public awareness and promote the importance of primary prevention of chronic diseases.
- Engage with the media to amplify the Alliance's messages and advance its policy objectives.

8. Decision-Making

Major decisions related to strategy, policy priorities, and allocation of resources will be made collectively by the Steering Committee, with input from member organisations. The chair will have the casting vote.

9. Meetings and Reporting

The Alliance will hold regular meetings, both virtually and in-person, to discuss progress, share updates, and plan future activities. Members will provide reports on their relevant activities' contributions, and the steering committee will issue periodic progress reports to all members. If a member of the Alliance cannot attend a meeting, then he/she may feed in comments/views by phone or email to the Alliance in advance of the meeting or nominate a colleague to attend.

10. Confidentiality and Transparency

Members will respect the confidentiality of any sensitive information shared within the Alliance. The Alliance will uphold transparency by sharing relevant information with members and stakeholders.

11. Funding and Resources

Initial seed funding for Alliance activities will be provided by the Irish Heart Foundation in addition to resourcing of the chair and secretary roles. In time, as the Alliance becomes established, member organisations may be requested to contribute funding, where possible. Resources will be allocated judiciously to support research, advocacy, communication, and other initiatives.

12. Duration

These terms of reference are valid from the date of adoption and will be subject to review every three years to ensure their relevance and effectiveness. The Alliance's duration is indefinite, with periodic assessments of its impact and effectiveness.

13. Amendment of Terms of Reference

These terms of reference serve as the guiding framework for the Alliance's activities, promoting collaboration, advocacy, and action toward achieving a healthier future for Ireland through primary prevention of chronic diseases.

Proposed amendments should be submitted in writing to the Steering Committee and will require consensus or a majority vote from member organisations.

14. Adoption and Ratification

These terms of reference will be adopted upon agreement by the founding member organisations.