



A Resource for those Working with Young People in Youth Work Settings



HEALTHY EATING, ACTIVE LIVING



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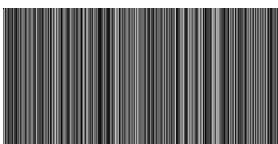
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The term 'worker(s)' is used throughout this resource to refer to all those working with young people in Youth Work settings in either a paid or voluntary capacity.

Introduction

The Irish Heart Foundation and the National Youth Council of Ireland formed a partnership to develop a Healthy Eating, Active Living resource for the Youth Sector, through the sharing of expertise and information. Initial research was carried out to assess what resources and support were available to youth workers, and following this, the National Youth Council of Ireland and the Irish Heart Foundation conducted a series of focus groups throughout Ireland. The focus groups explored the areas of healthy eating and active living among workers and young people in each of the youth organisations and identified key areas to be addressed in this resource.

We kindly acknowledge the contributions of the workers and young people who participated in this process and hope this resource will be of benefit to you.

This resource aims to equip youth workers with the skills necessary to create a healthy eating, active living environment in their organisation by providing information on health education, healthy eating, active living, policy guidelines and key contact information.

National Youth Council of Ireland

The National Youth Council of Ireland is a membership-led umbrella organisation that represents and supports voluntary youth organisations and acts on issues that impact on young people.



For more information on programmes/ resources available from the National Youth Council of Ireland or its' National Youth Health programme, please visit the websites: www.youth.ie or www.youthhealth.ie.

Irish Heart Foundation

The Irish Heart Foundation is the national charity fighting stroke and heart disease, the combined biggest cause of death in this country. The charity relies on donations for 90% of its funding which goes to support their work in promoting healthy living across all ages to reduce the risk of cardiovascular disease; vital heart and stroke research; patient support; resuscitation training and advocating better patient services and a healthier environment.



For more information please visit the websites: www.irisheart.ie or www.stroke.ie



1

Setting the Scene

Section 1: Setting the Scene

Healthy Eating, Active Living in Ireland

At any stage of life, healthy eating and physical activity are vital for good health and well-being, but especially for young people as they contribute to growth and development – physically, psychologically and socially.

Youth organisations are young people’s spaces, where they feel safe and operate on their own terms with adults they know and trust. Therefore, this setting offers good potential for addressing the issue of healthy eating and active living.

Irish data confirms poor nutrition among Irish adolescents and declining levels of physical activity especially among teenage girls:

- Irish teens have a high consumption of high fat, sugar and salt foods such as snacks, sugary carbonated drinks and confectionary and low consumption levels of iron, calcium and essential vitamins (Irish Universities Nutrition Alliance, 2008).
- Fifty six percent of young people aged 15-17 years do not meet current recommendations for physical activity (i.e. at least 60 minutes of moderate intensity physical activity every day) and are classified as not regularly active. Females are significantly less likely to meet minimum physical activity recommendations than males (Woods et al, 2005).

The escalating problem of overweight and obesity among young people has added further urgency to addressing the health of young people. There is a need to focus on educating and encouraging young people to be healthy and adopt healthier behaviours.

Overweight, obesity and impact on young people:

Being overweight or obese can affect young people physically and psychologically. Physical effects can include high blood pressure, high cholesterol and diabetes while the psychological impact can include low self-esteem, negative body image and depression.

Maintaining a healthy weight involves balancing the energy taken into the body (food) with the energy used by the body (activity). The Food Pyramid provides guidance on key healthy eating messages including recommended portion sizes. Regular physical activity (60 minutes of moderate intensity every day) uses up the energy provided by food, preventing weight gain.

The report of the National Taskforce on Obesity (2005) identified the rising levels of obesity of young people in Ireland as a major concern, and observed that a multifaceted approach through the education sector, in workplaces and communities is necessary in order to protect future generations from premature death, ill-health, psychosocial problems and associated economic costs that will occur.



One in five Irish children and young people under 18 years is overweight or obese.

(IUNA, 2005; IUNA, 2008)

Approximately 300,000 children are overweight or obese on the island of Ireland, rising by a rate of over 10,000 per year.

(National Task Force on Obesity, 2005).

The Role of Youth Work in Addressing Young People's Health

Youth work is a planned programme of education designed to aid and enhance the personal and social development of young persons through their voluntary participation. This education is complementary to their formal, academic or vocational education and training and is provided primarily by voluntary youth work organisations.

Each youth organisation has its own philosophy, programmes and structures, but all have the following characteristics:

- An active model of learning – ‘learning by doing’
- Young people's involvement on a voluntary basis
- Beneficial and enjoyable experiences
- A partnership approach between youth leaders and young people
- A community context
- A recognition of inequalities in the lives of young people
- Active participation of young people in the processes of decision-making, planning, organisation and evaluation.

Given the broad nature of youth work, youth organisations are constantly developing their work to ensure that they can meet the needs of young people in this ever evolving situation.

Addressing health issues such as smoking, alcohol, drugs and sexual health has been an integral part of youth work. The areas of healthy eating and physical activity have been increasingly recognised as important health issues due to poor nutrition in Irish adolescents, declining levels of physical activity, especially in adolescent girls and increasing levels of overweight and obesity.

It is now accepted that health needs to be considered in its broadest terms, emphasising mental and social as well as physical aspects of health.

The World Health Organisation views health as being: *“a resource for everyday living, not an object of living; it is a positive concept emphasising social and personal resources as well as physical capacities”* (WHO, 1986).

This resource will therefore look at the implications of healthy eating and active living for young people in this broader context. In order to fully appreciate the potential role of the youth organisations in healthy eating and active living, the cornerstones of Health Promotion as identified by the Ottawa Charter (WHO, 1986) guide this work as follows:

Developing Personal Skills:

Through the broad range of programmes and activities delivered to young people, which positively influence the development of personal skills, e.g. activity to understand how the Food Pyramid guides healthy eating.

Creating Supportive Environments:

Through creating supportive, safe and secure physical and social environments, which provide young people and staff with opportunities to discuss and explore health issues and practice health-enhancing behaviours, e.g. providing healthy food options in the tuck shop.

Strengthen Community Action:

Through developing partnerships and alliances with other organisations and sectors in the community, youth organisations can build capacity and positively influence health within the wider community, which in turn, can continue to support the health of their target groups who live in the community e.g. delivering parent focused programmes.

Developing Healthy Public Policy:

Having in place health related policies for the youth organisation, e.g. a healthy eating and active living policy, supports the education and practice being promoted. Additionally, youth organisations have a key role to play in raising and advocating for public policy change and development in order to support their health-related work.

Reorient the Health Services:

Advocating for the development and provision of health services that can respond to the health needs of young people.

Health as a Whole Organisation Approach

Using a whole organisation approach, workers and young people can create a culture, reflected in the policy, where healthy eating and active living is the 'norm' in the organisation.

Creating a culture of healthy eating and active living using a whole organisation approach entails:

- A recognition of the importance of healthy eating and active living for the young people and workers in the organisation.
- A shift from a focus on individuals directly involved in the issue, to that of creating healthy systems in order to support a healthier lifestyle.
- An acknowledgment that by creating a culture of healthy eating and active living that it will improve the overall quality of life of both young people and workers in the organisation.
- To create an understanding of healthy eating and active living.

By creating a positive culture in the organisation on healthy eating and active living, young people and workers are made aware of the traditions in the organisation and what is expected from them. This entails a whole organisational approach addressing healthy eating and active living at a number of levels illustrated on the next page such as:

- **Ethos and environment;**
- **Programmes, activities and events;**
- **Partnerships and services;**
- **Policies, procedures and guidelines.**

Ethos and Environment

Ethos is the tone, character and quality of an organisation. It should:

- Take care of individuals, be fair and promote respect for self, others, the wider community and the environment.
- Promote a sense of responsibility in individuals for their own actions.
- Encourage and empower young people and workers to give of their best and to build on their achievements.

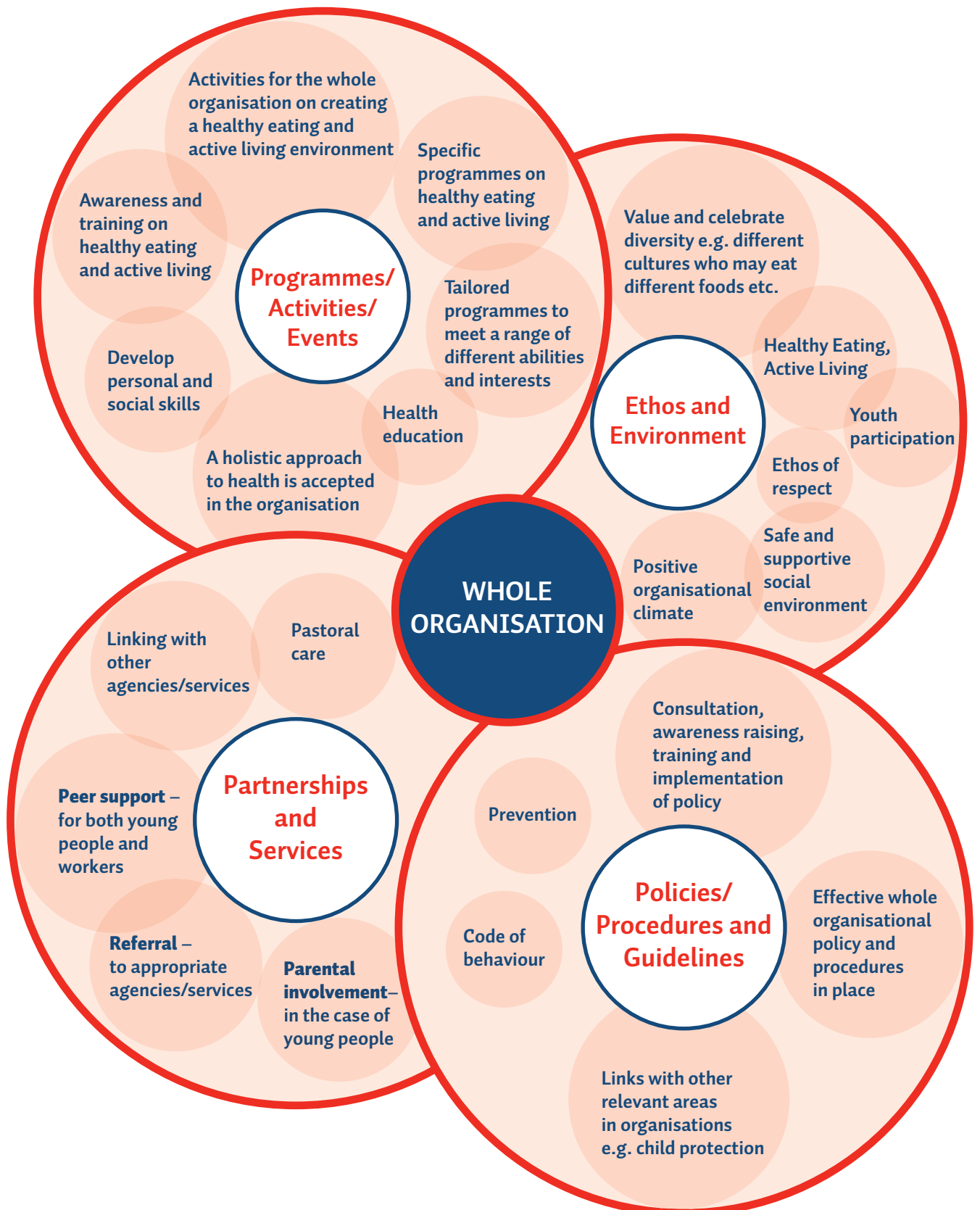
Environment can be considered in terms of both the physical (e.g. provision of healthy food choices) and social (provision of activities appealing to and enjoyed by the whole group) and which is very much linked to and influenced by the organisation's ethos.

A whole organisational response in relation to ethos and environment involves promoting an ethos of respect, where diversity is valued and celebrated, leading to a positive organisational climate. The work of the organisation is strongly influenced by youth participation, where young people have a say in the running of the organisation.

Programmes, Activities and Events

Dealing with healthy eating and active living from a whole organisational perspective entails having general programmes and activities that provide appropriate challenge, participation and support for all young people and workers and have a positive effect on their overall health and well-being. Specifically, young people and workers need to be aware of and understand the importance of healthy eating and active living.

The Whole Organisation Approach



Partnerships and Services

In order to encourage healthy eating and active living from a whole organisational approach, youth organisations need to have a commitment to partnership working and collective responsibility that actively involves and reflects the views of young people themselves, workers, parents, the wider community and key agencies. Circumstances may arise that require specific advice or expertise which is beyond the remit of the organisation and this may entail involvement or referral to another agency/organisation to avail of certain specialist services, e.g. dietary advice and education.

Adhering to a whole organisation approach in effect would help ensure a supportive and health promoting environment approach whereby the healthier choice is the easier choice, which facilitates *“the process of enabling people to increase control over and improve their health”* (WHO, 1948).

Policy, Procedures and Guidelines

A policy is a statement of the ethos and values of an organisation. It defines a boundary within which issues are accepted. It also clarifies roles, relationships, and responsibilities and can serve as a basis for decision-making. Policies tell people what to do in any given situation, while procedures and guidelines tell them how to do it.

In relation to this area, a whole organisational approach may include:

- The development of specific healthy eating and active living policy, procedures and guidelines for young people and workers.
- The implementation of good practice guidelines in relation to healthy eating and active living.
- The identification of links with other relevant policy areas such as guidelines in relation to guest speakers (see Appendix A).



2



Policy Guidelines

Section 2: Policy Development

Introduction to Policy Development

Over the past number of years, the area of policy has developed significantly within youth organisations, due to a number of factors. There is a growing recognition of the importance of the role that policy plays in the planning and delivery of safe and effective youth work services. Some policies have been driven by legislative requirements, some by changes to programmes and others by the complex social issues organisations now have to face.

Policy development serves a number of purposes:

- Enables organisations to reflect on their ethos and position in the work they do.
- Encourages good practice.
- Supports workers, volunteers, management and the young people within the organisation.
- Meets the specific needs of the organisation's target groups.
- Provides a framework for interagency co-operation.
- Enables organisations to reflect on the needs and aspirations of the community in which they work.
- Provides consistency in how to respond to health issues.



For more information on policy development refer to the National Youth Council of Ireland's, Youth Health Programmes 'Youth Health Promotion – A Practice Manual'

www.youthhealth.ie

The following are suggested headings for consideration when developing a healthy eating, active living policy for your organisation.

1. Will the organisation devise a separate healthy eating and active living policy or will healthy eating and active living be incorporated into the organisation's overall health promotion policy?
2. What is the organisation's understanding or definition of healthy eating and active living?
3. Who is the policy aimed at?
4. What are the procedures for implementing the policy? (e.g. will a steering committee oversee the implementation of the policy?).
5. What are the good practice guidelines to help the organisation adhere to the policy?
6. Will implementing the policy require extra resources (e.g. funding, personnel or equipment)?
7. Will an evaluation/review be carried out in the future, and if so, when and by whom?

Organisations should endeavour to develop a healthy eating, active living policy for their organisation or incorporate healthy eating and active living into their overall health promotion policy.

The following section outlines key healthy eating and active living considerations that organisations should take into account, when developing a policy in this area.

A step-by-step guide to policy development along with a policy framework can be found in 'Youth Health Promotion, A Practice Manual' (National Youth Council of Ireland's National Youth Health Programme 2006 / www.youthhealth.ie).

If your organisation already has a healthy eating, active living policy in place, see Appendix B for 'Organisation Checklist'.

Healthy Eating and Physical Activity Policy

Considerations for Inclusion in a Physical Activity, Healthy Eating Policy

- All young people should be made aware of/informed of the benefits of physical activity and the role of active living in healthy lifestyles (see page 23).
- All children and young people (aged 2 – 18 years) should be active, at a moderate to vigorous level, for at least 60 minutes every day. Include muscle-strengthening, flexibility and bone-strengthening exercises 3 times a week (DoHC, 2009).
- For children and young people who are not active start off slowly. Build up to an extra 1 – 30 minutes of moderate intensity activity 1 – 2 days a week. Then aim for 30 minutes of activity on most days of the week. Becoming active for longer is the goal – include some days with 60 minutes or more vigorous activity. As you progress you will get closer to the goal (DoHC, 2009).
- The youth organisation should allocate adequate time for health education on physical activity and health.
- The youth organisation should allocate adequate time for unstructured physical activities or active transport e.g. walking to the local leisure club instead of going by bus.
- Youth organisations should try to ensure that adequate resources, including budget and facilities are allocated for physical activities throughout each year.
- Any physical activity programmes should meet the needs of the young people in the organisation. Before developing a physical activity programme, it is advisable to carry out a needs assessment with young people to identify what activities they would like to have available in the youth organisation.
- **The youth organisation should strive to:**
 - Promote participation in enjoyable activity for the different groups within the youth organisation, school, community and home.
 - Link young people to community-based physical activity programmes and use community resources to support physical activity and active transport; e.g. community gym, local running track, cycle lanes.
 - Provide a range of developmentally appropriate community sports and recreation programmes that are attractive to all young people.
 - Make available to young people a wide range of activities including non-traditional, non-competitive games, structured and unstructured; passive and active; individual and team; indoor and outdoor and soft to hard outdoor adventure.
 - Measure young people’s attainment of physical activity knowledge and adoption of healthy behaviour.
 - Increase opportunities for physical activity that are popular and appropriate for young girls, such as dance, aerobics or yoga.
 - Ensure that the withholding of physical activity, games or sports is not used as a punishment.
 - Regularly evaluate the implementation and quality of the physical activity policy.

Environment

- **The youth organisation should strive to:**
 - Provide physical and social environments that encourage and enable safe and enjoyable physical activity.
 - Provide (in as much as possible) access to safe spaces and facilities for physical activity and active living.

Training

- **The youth organisation should strive to:**
 - Provide education and training to workers (paid and unpaid) on physical activity and active living (see *Key Contacts* section).
 - Train volunteers to deliver sports and recreation programmes for young people. Contact the Local Sports Partnership for more information (see *Key Contacts* section).

Education

- **The youth organisation should strive to:**
 - Implement health education programmes that help young people develop the knowledge, attitude, behavioural skills, motivation and confidence needed to adopt and maintain physically active lifestyles.
 - Develop young people's knowledge of and attitudes towards physical activity and active living (See Section 4 – *Physical Activity*).
 - Motivate young people to continue a physically active lifestyle outside of the youth centre.
 - Develop awareness of the importance of rest and activity for health and well-being.
 - Assist young people to identify possibilities for daily and weekly physical activity in their own lives through active living.

Parents

- **The youth organisation should strive to:**
 - Where possible, include parents and guardians in physical activity education and training to support the young people's participation in enjoyable physical activities e.g. summer projects.
 - Involve parents, guardians and the wider community in assisting the young people to become more physically active and promoting opportunities for active living e.g. community fund raising through a sponsored walk; liaison with local authorities to improve walkways and lighting to encourage young people to walk to the youth organisation.

Considerations for Inclusion in a Healthy Eating Policy

- Clean drinking water should be made freely available in all youth organisations.
- All young people should be encouraged to have breakfast every morning.
- The youth organisation should provide healthy foods such as those listed on page 46.
- Youth organisations should adhere to the guidelines of the Food Pyramid when educating young people on healthy eating (See Section 5 *Healthy Eating*).

Parents

- Parenting courses that are run within the youth organisation should develop and implement healthy eating and active living education as part of their programmes.
- The youth organisation should facilitate mothers who choose to breastfeed their children.
- The youth organisation may wish to provide parent(s)/guardian(s) with information around the importance of the food that they buy for the home, i.e. in relation to the Food Pyramid.

Vending machines (if in place)

- A clear code of practice should be drawn up in relation to the use and contents of vending machines in the organisation.
- Vending machines supplying healthy drinks and snacks give young people choice. It is advisable to consult the young people as to their preferences on healthier choices before stocking the vending machine (See *Healthy Options*, Page 45).
- Run in-house promotions to encourage appropriate use of the healthy options vending machine.

Sponsorship

- Where funding is required and obtained for projects, avoid use of company logos, branding or colours, when sponsorship is from manufacturers of foods high in fat, sugar and salt.
- Sponsorship by the company can still be acknowledged by the youth organisation without marketing a specific product or products.



3

Health Education

Section 3: Health Education

Introduction to Health Education

Health education is not only concerned with the communication of information, but also with fostering the motivation, skills and confidence necessary to take action to improve health. Health education includes the communication of information concerning the underlying social, economic and environmental conditions impacting on health, as well as individual risk factors and risk behaviours and use of the health system.

Effective health education programmes help young people to know and accept themselves for who they are, have increased self-esteem and make responsible decisions about their health behaviour. They can communicate with others, negotiate healthy relationships, are able to differentiate high and low risk behaviours, protect themselves and others and know how to gain access to and use health care information and services.

Good Practice Guidelines to Health Education

Good Practice Guidelines for Planning Health Education Programmes in Youth Organisations

- Always start from where the young people are at – i.e. your choice of programme content, materials and methodologies should always take account of:
 - age and development age of the young people involved;
 - gender;
 - race and ethnicity;
 - socio-economic factors;
 - sexual orientation;
 - abilities/disabilities;
 - literacy levels.
- Provide health education within the context of the ethos and values base of the organisation.
- Ideally provide health education, which addresses the physical, mental, social, spiritual and environmental aspects of health.
- Provide accurate, up-to-date information in attractive and accessible forms and language.
- Focus on the self-worth and dignity of the individual.
- Consider carefully the role of parents e.g. parental consent etc.
- Ensure that all workers delivering health education programmes with young people are adequately trained – e.g. workers should be familiar and comfortable with the language and vocabulary in relation to health issues and should not impose their own values on the young people.
- Workers should be familiar with ethical considerations in relation to specific health areas e.g. the age of consent, legalities around referral, sponsorship and marketing etc.
- Ensure that the health education programme is informed by a research and evidence base, which ensures maximum effectiveness and best use of resources, as guided by this resource pack.

Good Practice Guidelines for Implementing Health Education Programmes in Youth Organisations

- Ensure that the learning environment is suitable from both a physical and psychological basis – comfortable, warm, clean and a nice place for young people to learn.
- Use a wide range of different methodologies to maximise learning and enjoyment for the young people (See *Activities* in Physical Activity and Healthy Eating Sections)
- Enable young people to develop practical skills e.g. negotiation or assertiveness skills, as key elements of health related decision-making.
- Consider the involvement of parents in the programme as a support to the programme and the worker and how might this happen.
- Offer support to young people in making healthy choices.
- When working with mixed groups of young people it is good practice for workers to work in pairs, preferably ensuring a gender balance.
- Always consider the safety of both the young people and the workers – any health-related work with young people should always take account of the organisation's child protection policy and procedures.
- Address the issue of confidentiality as a priority within the youth organisation's guidelines and policy.
- Create opportunities for maximising discussion, reflection and exploration of issues, attitudes, values and beliefs in relation to health.
- If required establish a protocol for referral, both internally and with relevant external agencies.



4

Physical Activity

Section 4: Physical Activity

Physical Activity and Young People

Physical activity is defined as all forms of movement – and for young people includes occupational activity, active transport (such as walking, cycling, climbing stairs), informal play, recreational games, active hobbies, exercise for fitness, physical education, and competitive sport.

Physical activity is one of the most important steps to improve health for people of all ages. Regular physical activity benefits young people in several ways. All of the benefits are important to the overall health of young people. These include physical health benefits, social health benefits and emotional/mental health benefits.

Benefits of Regular Physical Activity		
Physical	Social	Emotional / Mental
<ul style="list-style-type: none">– reduces the risk of developing heart disease, some cancers and diabetes in later life– improves and maintains key elements of physical fitness including flexibility, muscle strength, coordination and balance, speed, agility, and aerobic fitness– develops bone strength– helps manage weight and a healthy fat:lean muscle ratio– develops and improves motor skills and sports skills	<ul style="list-style-type: none">– meeting other people– making new friends– having fun– laughing– helping others– being included– doing something you like– being part of a team	<ul style="list-style-type: none">– feeling good– laughing– problem solving– relaxing– learning new things– building confidence– relieving stress– reducing anxiety– improving self-esteem

How Active are Young People in Ireland?

A number of studies have been carried out in recent years that show a pattern of decreasing activity levels by young people, and that an increasing number of young people are becoming quite inactive in their daily lives. The IUNA study in 2008 investigated young people's means of travelling to school: two thirds used inactive ways to get there (41% car, 25% public transport), while one-third active methods (28% walk and 6% cycle).

The key findings from the Health Behaviours in School Children (HBSC, 2006) survey revealed that over half of primary school aged children did not achieve the recommended level of physical activity. As young people get older, activity levels decrease with almost 9 out of 10 girls (15 years of age) and 7 out of 10 boys (15 years of age) not achieving the recommended level of physical activity (HBSC, 2006).

Percentage of children who get the recommended level of physical activity (60 minutes a day)

Age	Boys (%)	Girls (%)
11 years	51	38
13 years	39	29
15 years	27	13

FIGURES HBSC, 2006

Key Recommendations

To ensure that young people incorporate physical activity into their everyday lifestyle, it is important for them to:

- experience a range of types of activities in order to ensure everyone finds an activity or activities they enjoy doing.
- have positive experiences of physical activity. This is important if they are to continue being active as adults.
- place a positive value on physical activity and integrate it into their daily routine.

From a physical fitness perspective any physical activity is good and better than inactivity.

In order to maintain a healthy level of physical fitness, however, the key recommendations for young people are;

- to accumulate at least 60 minutes of aerobic activity every day. Aerobic activities are any activities that make them go ‘pew’ – such as brisk walking, jogging, cycling, basketball, tennis or dancing. Aerobic activities are important for a healthy heart and lungs, and help burn fat. Inactive young people should participate in moderate activity for at least half an hour per day. It is important to note that the hour of aerobic activity can be accumulated over the course of the day - so a number of short slots for different activities are as good as one longer session of one activity. For example, while one young person might play Gaelic Football for an hour, another might combine a 30 minutes brisk walk to school in the morning, with a 10 minutes bout of social basketball at lunchtime, and 20 minutes of fun games at the youth club meeting that evening.
- to do resistance activities at least twice a week. Resistance activities help develop strong muscles and dense bones and involve applying a force (sometimes with a ‘grunt’!). Good examples are climbing, pushing, pulling, jumping or hopping – and can include gardening (e.g. digging, raking), hill-walking or rock-climbing, gymnastics or weight training.
- to engage in flexibility activities as often as possible. Flexibility activities involve bending, twisting, leaning, or stretching. and include dance, swimming, gymnastics, and yoga.

Factors Influencing Physical Activity Levels and Choices

A variety of factors influences a young person's physical activity levels and patterns, they include;

Personal Factors

- family background.
- family support. Young people who feel they have higher family support for involvement in activity are significantly more likely to be regularly active. Boys perceive this support more than girls.
- socio-economic status. Young people from higher socio-economic groups are more likely to form a lifelong activity habit than those from lower socio-economic groups.
- gender.
- age.

Peer Influences

The influence of peers can have both a positive and negative impact on activity levels. Not surprisingly, it is unlikely that a young person will be regularly active if friends are not interested in physical activity.

But, peers can influence positively in a number of ways such as:

- mutual influence into starting physical activity;
- friends that are already active;
- the possibility of making friends in different social circles.

Social Reinforcement

Many young people partake in physical activity in order to be part of a group (team or supporters). While team sports can be popular as a form of social activity, an over-emphasis on competition may decrease girls' interest in physical activity both in school and outside the school environment (Fahey et al, 2005).

Environmental Factors

Environmental factors are outside the young person's control and can include;

- **access to facilities**
Easy access to services and facilities is a significant factor in influencing participation. Key facility-related issues include proximity, hygiene, safety and 'age-appropriateness'.
- **media**
The increased popularity of elite sports in the media may result in more positive attitudes to physical activity and increased participation levels. On the other hand, decreased participation may result due to the portrayal of sport as entertainment, encouraging sedentary activities such as watching sport on television or as sport as being unrealistic and de-motivating.

Promoting Physical Activity in Youth Organisations

Youth organisations can play a very positive role in influencing a young person's activity levels and choices.

A supportive environment can be created by planning and providing opportunities that are fun and which do not over-emphasise competition and encourage participation by all. Discussion with young people (and taking on board all views) is a crucial factor in influencing choice of activities provided and the levels of participation – and will help identify potential barriers.

From a broad policy perspective the following questions are useful:

- does the organisation have a physical activity policy in place?
- is an active lifestyle encouraged and supported?
- do young people know and value the health benefits of regular activity?
- is there motivation to be active and a good example set by staff and volunteers?
- is the facility supportive of physical activity (e.g. safe storage of bicycles, spacious, safe, etc)?
- is physical activity part of the normal ongoing programme and is the activity *menu* broad ranging?

Practical examples of what youth organisations can do to promote physical activity include:

- sport tournaments with other youth organisations (e.g. soccer, tag rugby, basketball).
- links with local gyms where the youth organisation negotiate a reduced rate (perhaps at specific times).
- working with the Local Sports Partnership to organise a Sports Taster event where young people have the opportunity to try different sports/activities not normally available to them.
- inter-group Fun Runs or Walks.
- organising and playing group games at weekly meetings.

Examples of What You Can Do in Your Organisation

- Soccer (or other sports) tournaments with other youth clubs/organisations
 - Link with local gym – negotiate reduced rate for youth organisation
 - Membership or specific access times at a reduced rate
 - Link with Local Sports Partnership for Sports Taster Day/Activity evenings where young people have the opportunity to try different sports/activities not normally available to them
 - Annual 5 km Fun Run
 - Group Activities* (see following section).
- * As with all learning in large or small groups, no matter what format, whether discussing, brainstorming or formal presentation ensure that either individual members, the group as a whole or you as leader recap on the main learning points at the end of each session.

Activity 1: Walking All Over The World

Objectives:

Set up a walking club within the organisation; track the combined progress of the group on a local/national/global map.

Materials:

Information on local walking routes (e.g. Irish Heart Foundation Slí na Sláinte routes), safety information, notebook to record distance walked by all members, map.

Introduction:

Walking is a great form of physical activity that can be enjoyed by people of all ages without being too expensive. Walking to and from the youth organisation or for leisure is a good way for young people to keep active. Tracking the progress of the group on a large wall map encourages group participation and provides a visual motivation tool to continue with the activity.

Method:

Begin with a group discussion on the benefits of walking for health.

Measure the distance from each members home/school to the youth organisation. Measure popular walking routes in the area. Appoint one person to record the combined distance travelled by the group on a weekly basis. Once a week plot the distance travelled on the map.

Questions for Discussion:

- What new routes could the group take to vary the activity?
- Discussion groups relating to the area on the map covered by the group, e.g. cultural issues/ what do the group know about the particular place?
- Other activities the group would like to try.

Suggestions:

- Begin the activity with a local map and gradually build to larger geographical areas.
- Provide motivation and reward when the group reaches specific milestones.
- Provide incentives for the person who has walked the furthest distance (e.g. voucher for sports shops).

Activity 2: Walking/Pedometer Challenge

Objectives:

To increase physical activity levels among participants by recording daily levels of activity over a four-week period.

How:

By setting a personal target of walking for at least 30 minutes on five days a week over four weeks and recording the amount of activity on a record card, the participant can then earn a certificate of recognition or other award.

Materials:

Challenge cards and pedometers, available from the Irish Heart Foundation ([see Key Contacts](#)) (nominal charge for pedometers).

Introduction:

Walking is a great form of physical activity that can be enjoyed by people of all ages and is low in cost – all that is needed is a pair of good walking shoes or runners. The Irish Heart Foundation's Walk or Step Challenge provide easy to use programmes that record levels of physical activity each week, motivating the participant to maintain or improve on their weekly totals over the four week period.

What to Do:

- Contact the Irish Heart Foundation for information on these programmes and to order materials ([see Key Contacts](#)).
- Hold a discussion group with participants to introduce the activity and to give them information on the benefits of walking for health – the latter activity could be a brainstorming session where the group identify the benefits.
- If any member of the group would prefer to do jogging or cycling instead that is fine – they need only do so for 15 – 20 minutes each day.
- This activity can be an individual, partner or group activity, but for motivation and enjoyment encourage the group to find a partner with whom to walk on most occasions.
- Plan at least one or two group walks during the period. As a motivation, ideally add in a fun element such as a draw for a free prize for all who take part.
- Check with the group regularly how they are getting on.
- Remind them that if they have lapsed in their activity starting again is positive. This activity is only for themselves.
- Nominate a group member to collect and return the completed challenge cards to receive a certificate of completion. Depending on the group and their interests other incentives, such as a draw for all who take part (e.g. for music vouchers) could be considered.

Questions for Discussion:

- How much walking do you do in a day?
- How would you improve on this?
- Ask group about ways to stay motivated.
- Other activities the group would like to try.

Activity 3: How Can Activity Help Me?

This activity may work best over two different times and the second day should start by recapping on discussion and findings from first day.

Objectives: The youth group should:

- Learn the benefits of physical activity for health
- Understand what motivates them to be active
- Consider what are the barriers for them being active; and
- Understand and know how much activity they need for good health.

Materials:

Flip chart, paper and pens for each participant.

Introduction:

From a physical fitness perspective any physical activity is good and better than inactivity. Regular physical activity benefits young people physically, socially and emotionally/mentally.

What to Do:

The following activities should be done first in small groups of 3 – 4 and then discussed with the main group. If the group is small enough then in one group and ideally not all done in one session.

- Ask groups of 3 or 4 members to list the benefits of physical activity for health. Ask them to consider how they feel physically and mentally after playing a match, kicking a football or dancing to their favourite music. Each small group writes answers on the sheet. Then take feedback from each group and insert benefit with discussion from each group under headings of physical, social and mental health.
- Discussion on motivation, with a view to sharing ideas from each other. Ensure motivation for males and females is considered equally.
- What type of activity do you enjoy?
- Is it possible for you to pursue your activity of choice – if yes why, if no why not – what are the barriers?
- What motivates you to be active?
- Why are males more active than females?
- Do females realise that they are putting their health at risk, if they are not active?
- What do many people use to try and lose weight? Could physical activity help?

Discussion On How Much Activity?

- How active are you?
- Could you be more active?
- What would help you do more?

Suggestions:

Follow this workshop discussion with a physical activity taster session.

Activity 4: Warming Up and Cooling Down

Objectives:

To explain the benefits of warm up and cool down activities and to demonstrate these to participants.

Materials:

Information sheet (see next page).

Introduction:

Use the information sheet to explain the role of warm up and cool down in formal exercise and the components of warm up and cool down activities.

What to Do:

- Following the explanation of Warm Up and Cool Down, break into groups of 3 or 4 and practice the movements as shown on the information sheet.
- Use Warm Up and Cool Down with group physical activities (i.e. basketball/soccer).

Questions for Discussion:

- What is Warm Up/Cool Down?
- Why is it necessary?

Warm Up and Cool Down

What is Warm-Up?

A warm-up prepares the body gradually for more demanding activity. This is done by:

1. increasing the body temperature
2. increasing blood flow to the muscles.

The purpose of Warm-Up is to:

- Increase muscle temperature
- Increase blood flow
- Check for injuries or uncomfortable points on the body
- Delay the early fatigue while doing physical activity
- Allow the body use oxygen more effectively during exercise
- Prepare the mind for physical activity.

Warm-up should consist of:

1. Pulse Raising Activities:

- Gentle aerobic activity to gradually raise the heart rate and prepare the cardiovascular system for activity. E.g. Short 5 – 10 minute walk or gentle jog around the gymnasium.

2. Joint Mobility:

- Full body movements to increase mobility of joints and to move the joints through a range of motion. These actions should be slow and controlled. E.g. arm circles or hip rotations.

3. Safe Appropriate Stretching:

- Short static stretches (see page 35 – 37) should be done as part of an activity to prevent injury.
- Each stretch should be held for 6 – 10 seconds to prepare muscles for action.

4. Activity Specific Warm-up Exercises:

- Warm-up activities need to be appropriate to the exercise, sport, game or actions that will follow. E.g. if playing football warm-up drills should include kicking, passing and running activities.

Warm Up and Cool Down...

What is Cool-Down?

The purpose of cool-down is to return the blood from the muscles to the heart and allow the body to recover gradually and return back to a resting state. More specifically a cool down helps to eliminate the build up of lactic acid in the muscles and facilitates oxygen-depleted blood to return back to the heart. This is done by:

1. slowing down the pace of the physical activity
2. stretching the muscles that were used during the class.

The purpose of Cool-Down is to:

- Lower pulse, heart rate and body temperature
- Release tension that could build up in the muscles and reduce lactic acid
- Relax the body
- Bring the body back to a resting state
- Stretch muscles to avoid injury

Cool-down should consist of:

1. Pulse Raising Activities:

- Activities to bring the heart rate back to normal and lower the body temperature e.g. walking around the gym.

2. Bring the body back to a resting state

- Gradually slow pace and stop the activity.

3. Controlled Passive Stretching

- Slow stretches to prevent stiffness holding each exercise for 10-12 seconds.

The cool down should last about 5 minutes.

Warm-up Stretches (IMAGES NEED TO BE INSERTED)



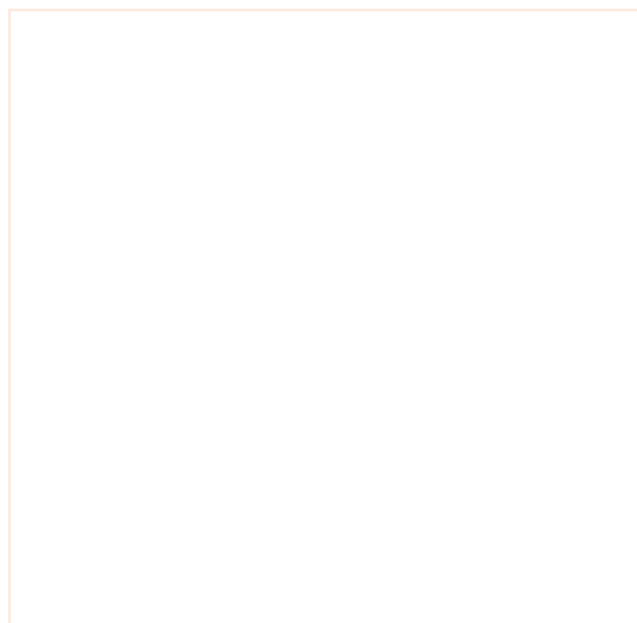
Whole Body Stretch

Stand with feet apart.
Stretch arms over head and hold.
Then spread arms out to a V shape.
Raise heels off the ground and hold for 6 – 8 seconds.



Chest Stretch

Stand with feet apart and knees soft.
Catch hands together behind back and squeeze
shoulder blades together.
Hold for 8 seconds, relax and repeat.



Cat Pose Stretch

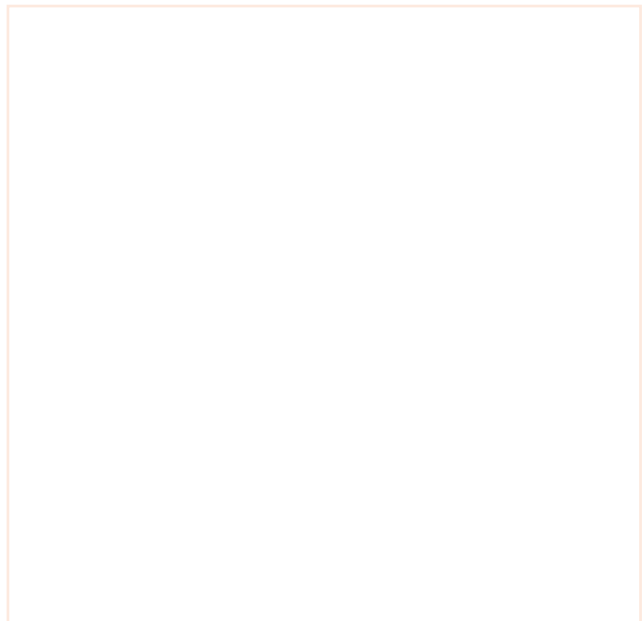
Stand with feet apart and knees bent.
Curl back over while dropping head down.
Tighten tummy muscles and round back.
Hold for 6 – 8 seconds, relax and repeat.

Warm-up Stretches (IMAGES NEED TO BE INSERTED)



Calf Stretch

Stand with one leg in front and bend the knee. Keep other leg straight and push the heel back into the ground. Keep lower back straight. Hold for 8 seconds. Switch legs and repeat.



Quadriceps Stretch

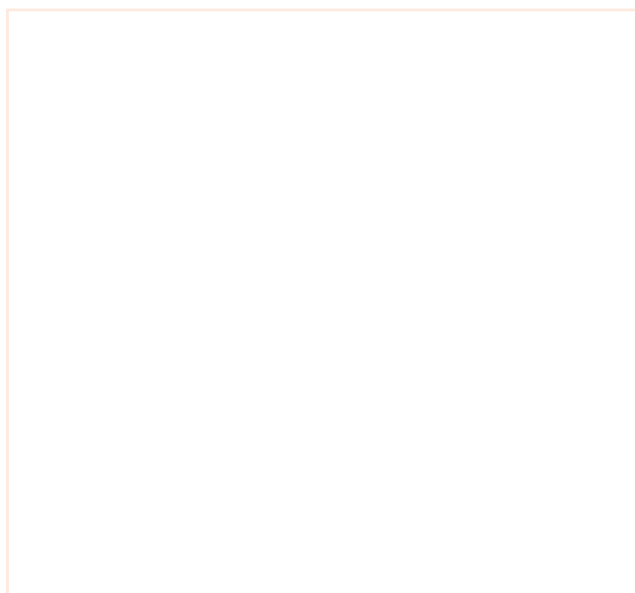
Using a wall or partner for balance or standing alone, stand on the left leg and grasp foot behind hip. Pull the foot upwards until a slight sensation is felt on the front of the right thigh. Hold for 8 – 10 seconds. Switch legs and repeat.



Hamstring Stretch

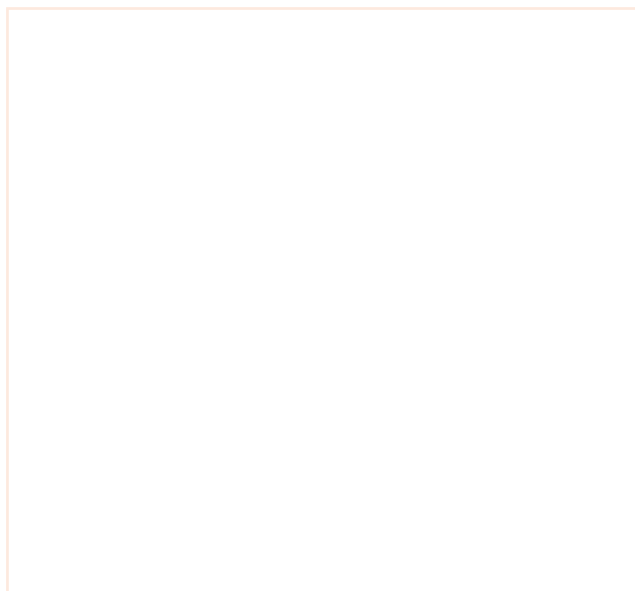
Put one leg a couple of inches in front of the other, bend the back leg and keep the front leg straight. Sit back towards rear leg. Place hands on the top of the bent thigh for balance or on the hips. Feel stretch along back of straight thigh. Hold for 8 – 10 seconds. Repeat on opposite side.

Cool Down Stretches (IMAGES NEED TO BE INSERTED)



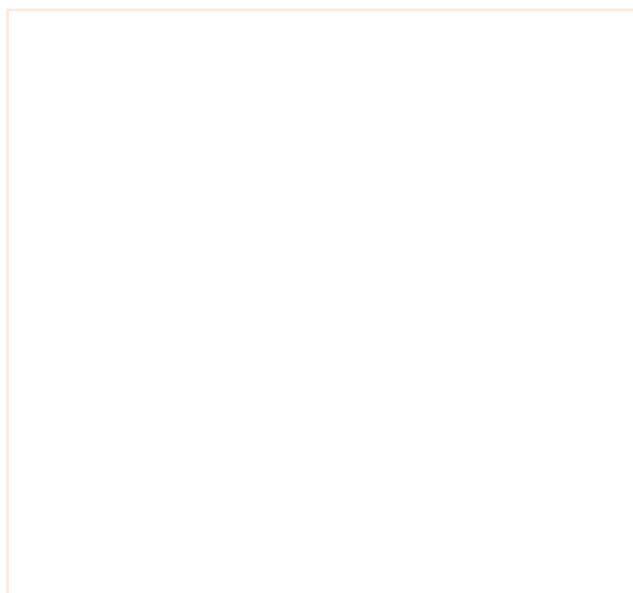
Inner Thigh Stretch

Sit on floor, knees bent and falling outward. Place hands on inside of knee and gently ease the knees out to either side while breathing out. Hold for 8 – 10 seconds, repeat with other leg.



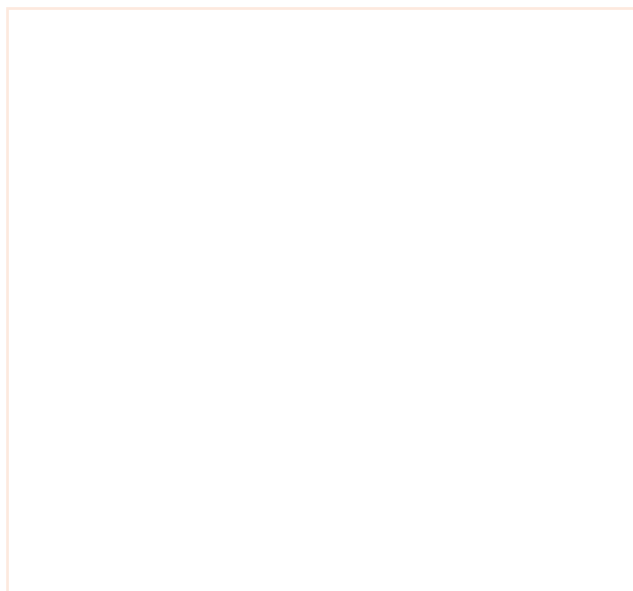
Quadriceps Stretch

Lie on side, bend bottom knee forward and pull top foot behind and into buttock. Hold stretch for 8 – 10 seconds. Repeat with other leg.



Hamstring Stretch

Lie on back, knees bent, feet flat on floor. Bring one knee toward chest. Use hands behind upper thigh to support and relax leg. Then straighten leg up toward ceiling. Hold for 8 – 10 seconds. Bend knee into chest and return to starting position. Repeat with other leg.



Calf Stretch

Sit on floor with one knee bent to side of body. Reach to catch the toes of the straight knee and gently pull toward body. Hold for 8 – 10 seconds. Repeat with other leg.

Reference: Hope, O'Sullivan Ryan, O'Loan, Burke & Tonge, 2005

Checklist

Physical Activity Promotion in Youth Group Facilities

- Is there a physical activity policy in place?
- Is active living encouraged?
- Are there facilities for safe storage of bicycles?
- Are young people encouraged to try out new activities?
- Can physical activity be included in any current programmes?
- Do young people know the health benefits of regular activity?
- Is there motivation to be active and a good example set by staff and volunteers?



5

Healthy Eating

Section 5: Healthy Eating

Healthy Eating and Young People

Link between food intake and health:

Healthy eating involves consuming a wide variety of foods in the correct portion sizes in line with Food Pyramid recommendations. A healthy, balanced diet is essential for overall good health, improves energy levels and reduces the risk of diseases such as heart disease, diabetes and obesity (Irish Heart Foundation, 2007).

Irish research shows that the amount of fruit and vegetables consumed by young people is relatively low and that consumption of foods high in fat, salt and sugar (often termed junk food) is high (Irish Universities Nutrition Alliance, 2008). Combined with low levels of physical activity, this can cause an increase in levels of overweight and obesity, which can in turn lead to development of diabetes and early signs of heart disease. These foods are heavily marketed to children and young people through television, school, the internet and other media. Educating young people on how to eat healthily and the associated benefits, and creating an environment that promotes healthy living can have a positive influence on eating habits of young people.

Food and Nutrition Intakes of Irish Teens

- Teenagers eat mainly white bread – less than half eat any brown bread.
- Meat intake comes mainly from processed meat.
- Fish consumption is very low.
- Very low fruit and vegetable intake. One third don't eat any fruit.
- Average consumption of carbonated beverages (mostly sugar containing beverages) is a glass each day.
- Teenagers, especially girls do not consume enough of some nutrients including: iron, folate, calcium, vitamin D.
- 75% of girls are not getting enough iron and 42% are not getting enough calcium.
- 56% of teens consume more than the recommended 35% energy from fat.
- 20% of teens energy intake is from sugars.

(Irish Universities Nutrition Alliance, 2008)

The Food Pyramid

The Food Pyramid is a tool used to visually communicate the healthy eating message of variety and balance in making food choices. It should be used as the basis for education on healthy eating. Choosing a variety of foods of appropriate portion size from each of the four main food shelves can help to ensure that young people are making the correct food choices for health. It should be noted that young people need five servings daily from the dairy shelf due to their greater calcium and protein requirements.

Young people need to eat a healthy, balanced diet. This means:

- 1) Eating from the different food groups, in the correct portion sizes and a variety of foods.
- 2) Maintaining a balance between food eaten and energy used by the body.

All the nutrients that the body needs – protein, fat, carbohydrate, vitamins, minerals and water – are obtained by choosing a combination of foods from all shelves. These nutrients perform many functions but are particularly important for growth and development in young people. The top shelf contains foods that should be eaten in small amounts, not every day.

Functions of Nutrients:

- **Protein** is essential for growth and tissue repair.
- **Carbohydrates** are necessary as an energy source and wholegrain sources provide fibre.
- **Fat** helps to insulate the body and protect organs such as the liver and kidneys. It is a source of energy, essential fatty acids and vitamins A, D, E and K.
- **Vitamins and Minerals** are essential for body functions. For example, calcium is necessary for building strong bones and teeth. Vitamin A is important for good eyesight, healthy skin and hair. Iron is needed to form red blood cells, prevent fatigue, aid growth and carry oxygen.
- **Water** carries nutrients to all body cells and waste products to kidneys. It aids in the digestive process and helps regulate body temperature.

Main Nutritional Concerns for Young People:

- **Good eating habits –**
encourage regular healthy meals and snacks especially eating breakfast.
- **Preventing overweight and obesity –**
young people should be aware of the balance between the energy taken into the body and the energy used by the body. Promote intake of fruit and vegetables and reduced intake of high fat, high sugar, high salt foods and drinks.
- **Preventing iron deficiency –**
encourage young people to choose red meat 3 – 4 times a week and include vitamin C rich foods and juices with meals to increase iron absorption.
- **Adequate calcium intake –**
important for healthy teeth and bones – milk and other dairy foods are a good source of calcium.
- **Folic acid –**
important before and during pregnancy to prevent defects in the baby's nervous system. Increase intake of folate rich foods (fruit, vegetables and wholegrains) and foods fortified with folic acid for example milk and breakfast cereal. In addition, all women of child bearing age who may become pregnant should have one 400 micrograms folic acid supplement everyday.
- **Vegetarians –**
alternative sources of protein and iron need to be included. Intakes of other important nutrients can also be low.
- **Sports nutrition –**
regular meals, carbohydrate rich snacks before and after training/sporting events and adequate fluids are all important.

What Can Youth Organisations Do To Influence Healthy Eating?

Youth organisations can contribute to the food choices young people make by providing healthy options while they are in the youth organisation. This can include meals that are prepared on the premises and having healthy options available in the vending machines (if present) or having drinking water available at all times.

The organisation should try to provide a culture of healthy eating where workers provide a good example to young people. A Healthy Eating Policy drawn up in consultation with young people will provide a guide for workers and young people as to what items are not permitted on the premises, e.g. take away food, sugary drinks etc.

Outlined below are the influences that impact on the choices young people make in relation to food, taken from the consultation with youth organisations carried out by the National Youth Council of Ireland's National Youth Health Programme and the Irish Heart Foundation. The following should be taken into account in planning, discussing and presenting educational interventions.

Home –

The majority of food consumed by children is consumed at home. Children and young people's food choices can be influenced by the availability of foods at home, the household food budget and the eating habits of their parents.

Accessibility –

For young people, accessibility of foods such as those available at home, in the local shop or in vending machines in the youth organisation can affect their food choices.

Peers –

What young people eat or drink can be influenced by their peers' choice of foods.

Taste –

It is important that young people experience a wide range of foods, including different fruit and vegetables, so that they have the opportunity to develop a taste for healthy options. This will help to reduce reliance on convenience foods high in fat, salt and sugar.

Convenience –

Convenience foods are popular when people are in a hurry or do not have the skills/facilities to prepare fresh meals. Convenience foods are usually pre-packaged, can be prepared quickly or eaten on the go. These need not necessarily be unhealthy snack foods. Healthy foods such as sandwiches, yogurt, fruit or cereal can be classified as convenient.

Marketing –

Foods are marketed in a particular way in order to appeal to a specific section of the population. Marketing includes various means such as advertising on TV, radio or magazines, the internet, in-store promotions, celebrity endorsements and sponsorship (see Appendix C for more information on Marketing)

Food Labelling

What does it say on the label?

Most of us know what foods to buy, but it's very easy to be lulled into a false sense of well-being by claims such as 'Fat Free' or 'Reduced Sugar'. Knowing how to read food labels and promotional claims is essential to making healthy choices. There is still a lot of variety in how food labels are written. However recent EU legislation on nutrition and health claims will soon help to protect consumers from misleading claims and allow them to use accurate information to make informed decisions about food choices. All claims must be clear and understandable by the average consumer. The new legislation means it is necessary for food companies to support any claims made (for example, 'high in vitamin C', 'low in fat' or 'calcium strengthens bones') on food labelling or in advertising with scientific studies (See Appendix D for more information on Food Labels).

Food Provision: Suggested Healthy Food Choices

The following is a list of foods categorised according to the Food Pyramid that could be made available in a youth organisation. Some of the suggestions below may not be applicable to all youth organisation facilities, especially those that do not provide hot meals.

BREAD, CEREALS, POTATOES, PASTA AND RICE

(Bottom Shelf: 6+ servings per day)

- Offer potatoes in a variety of ways – mashed, baked, boiled.
Keep chips to a minimum and remember that thick-cut and straight-cut chips absorb less fat than crinkle-cut or thin chips.
- Try potatoes in potato salad made with a little low fat mayonnaise for variety.
- Offer wholemeal, multigrain, white and brown bread rolls.
- Serve pasta in a variety of shapes and colours. Try also in salads.
- Use more pasta and less sauce. Choose tomato-based sauces more frequently than cream-based sauces.
- Rice is also good hot or cold – white, coloured or wholegrain offers variety.
- Offer a choice of breakfast cereals, including low-sugar and high fibre varieties. Porridge is ideal.
- Many breakfast cereals are fortified with iron. Offer these with vitamin C- rich food or drink to increase absorption (e.g. fruit juice, fresh fruit).

FRUIT, VEGETABLES AND SALAD

(5 servings per day)

- Offer fresh fruit daily.
- Choose fruit in season, as it is more economical.
- Serve a variety of different fruits and vegetables over a weekly menu plan.
- Incorporate fruit into baked dishes and vegetables into casseroles and stews.
- Cook vegetables with the minimum amount of water for the minimum amount of time to reduce vitamin loss.
- Serve some vegetables raw in salads or with dips.
- Do not add bread soda to the cooking water when cooking green vegetables. It causes significant loss of vitamins.
- Steam vegetables when possible to retain more vitamins. Cook until vegetables are just tender, not soft.
- Use tinned tomatoes and baked beans in meat dishes e.g. lasagne, shepherd's pie, casseroles.
It will help meat to go further.
- Try to serve dark green leafy vegetables at least twice a week as they contain iron, e.g. broccoli, cabbage.
- Salad bars are a popular way of encouraging young people to eat vegetables. Serve salads in separate bowls and offer dressings on the side where possible.
- Vegetable-rich soups are a nutritious snack.
- Include fruit in desserts such as jellies and mousses.
- Choose tinned fruit in fruit/natural juice or light syrup rather than syrup.
- Try baked apples or stewed fruit for warm dessert options.
- Add dried fruit to sponges for iron and fibre.
- Frozen vegetables are just as good as fresh.

MILK, CHEESE AND YOGHURT

**(3 servings per day for adults,
5 servings for teenagers or for pregnant or breast-feeding mothers)**

- Drinking milk is a great way of increasing calcium intake. Offer flavoured milks for variety and always make sure it is served cold.
- Use milk in cooking sauces, puddings and custard.
- Remember that low-fat milk contains just as much calcium as full-fat versions.
- Milkshakes are a popular alternative to plain milk.
- Yoghurts are popular toppings for dessert.
- Frozen yoghurt is a good low-fat alternative to ice-cream.

MEAT, FISH AND ALTERNATIVES

(2 servings per day, 3 during pregnancy)

- Extend the meat in dishes by adding baked beans and pulses such as kidney beans e.g. chilli, bolognese, lasagne.
- Trim excess fat from meat and buy the leanest cuts the budget will allow.
- Drain or skim the fat from casseroles and from mince.
- Offer a variety of fish regularly – especially tinned or fresh oil-rich fish such as salmon, sardines or mackerel.
- Use tinned fish in brine rather than oil.
- Try not to add too much additional fat or oil during cooking.
- Drain food well if it has been fried e.g. on wire trays.
- Good sources of easily absorbed iron include lean meat, tinned sardines, liver and home made burgers. Including a good source of Vitamin C such as orange juice will help absorb the iron.
- Offer bean-based dishes on the menu, as they can be popular with vegetarians and non-vegetarians alike.
- If a dish contains nuts, make sure it is clearly labelled to inform anyone who may have a nut allergy.

TOP SHELF: FATS, OILS AND SUGARS

(Very small amounts)

- Use polyunsaturated or monounsaturated fats for cooking and use sparingly. Examples include sunflower oil and olive oil.
- Keep pastry based foods to a minimum. Do not serve a pastry-based main course with a pastry-based dessert.
- Grill or bake foods rather than frying e.g. sausages, fish fingers.
- Make pies with the top crust only.
- Use sauces and mayonnaise sparingly, even if they're low fat versions.
- Skim visible fat off sauces before serving.
- Try not to dust cakes and desserts with sugar.
- Offer milk, water and juices for drinks. Limit availability of soft drinks.
- Keep sugar content of desserts to a minimum.
- Instead of offering cream with dessert, try dressing it with fruit, coulis or mint.

HEALTHY SNACK IDEAS (can also be used in vending machines)

- Fruit juice (no added sugar, not labeled as “juice drink”);
- Fruit smoothie (low fat);
- Portions of fresh fruit salad in a sealed storage container;
- Fresh fruit (one whole piece of fruit, e.g. an apple);
- Plain popcorn;
- Diet yoghurts;
- Fruit and wholemeal scones with low fat spread;
- Portions of wholemeal or wholegrain bread with low fat spread;
- Sandwich selection to include wholegrain bread and wraps with low fat dressings;
- Grain cracker e.g. Ryvita and low fat cheese portion;
- Wholegrain or bran type cereal mini-pack and low fat milk;
- Dry roasted nuts (unsalted);
- Cartons of low fat milk.

If a vending machine is in place, confectionary options can include:

- Lower fat options e.g. small, slim chocolate bar;
- Wine gums, boiled sweets and mints;
- Smaller portions of confectionary e.g. fun size bar or two finger bar;
- Lower fat crisps e.g. light or low fat choice.
- Plain popcorn.

Examples of what you can try

- Install water cooler: it should be placed in a room used frequently by young people.
- Have fruit taster sessions/smoothie tasters as part of other healthy eating projects/programmes.
- Switch to low fat dairy products as the standard type on order.
- If a vending machine is in place only provide healthy snacks in the vending machine.
- Consider taking part in the Gaisce Awards – these can include a cookery element.
- Increase healthy eating culture through “Ready Steady Cook” competitions with involvement from all, including staff.

See *Activities Section* for more ideas (next page).

Activity 1: All About Food

Objectives: To discuss specific foods under the following headings:

1. The Food Pyramid – Where does the product fit in?
2. Labelling – What information is included?
3. Selling technique – Packaging and selling

Materials:

Each group member brings in wrapping from a food product they like to eat. It is advisable for the youth worker to bring in a range of products to ensure all food groups are represented.

Food Pyramid poster.

Sheets of paper and markers for feedback.

What to Do:

Divide group into small groups of 3 – 4. The group selects one product to begin with and discusses the following points making notes of their answers. All products are discussed in the small group before re-joining the larger group. The Youth Worker then facilitates a larger group discussion.

NOTE: This activity can be carried out as three separate sessions if preferred.

1. The Food Pyramid – Where does the product fit in?

Through group discussion, determine:

- Which shelf on the Food Pyramid does the product belong to?
- How much/how little should be consumed on a daily basis?
- What quantity is considered a portion?
- How much do group members consume?
- Is the product healthy? Is there a healthier version or method of preparation? (e.g. oven chips in place of deep fried chips, boiled potatoes are healthier than chips).
- Are there any food products/categories not represented by the task? Does this say anything about the food choices of the group?

2. Labelling – What information is included?

Examine the product's labelling and determine:

- What are the main ingredients?
- What ingredients are contained in the product? Is this information difficult to read?
- How much fat, sugar, salt, fibre and calories are contained in the product? Is this information provided on the label?
- What other information is contained on the label?

Activity 1 – All About Food...

3. Selling Technique – Packaging and selling

Examine each product and discuss the following:

- Does the packaging make the product more appealing?
- Is the product marketed to a particular age group? How do you know – the packaging?
- Has the product been endorsed by any celebrity?
- Where is the product sold?
- What advertisements are you aware of?
- What slogan/promotional tools are used?

Suggestions:

- Information on labelling and marketing can be found in Section 5.
- Contact your Local Health Office to order a copy of the Food Pyramid poster.
- Consider leaving the Food Pyramid poster permanently in the food area of the organisation.

Activity 2: Media Literacy

Refer to the media literacy section in this resource before beginning this activity.

Objectives: To introduce young people to the concept of media literacy.

Materials:

One product marketed to young people.

Introduction:

Media literacy is the term given to the idea of becoming more aware and more critical of the ways in which manufacturers entice consumers to buy products. The activity takes place over two weeks. In week one, the activity is introduced, group members pick one product and carry out research and give feedback in week 2.

Method:

Week 1:

Divide group into smaller groups of 3 – 4.

Groups decide on a product to research during the week (all groups to pick a different product).

Areas to consider:

1. Is this a new product?
2. Who is the target audience?
3. What price is the product?
4. Where is it sold (e.g. shop, vending machine etc)?
5. Are there any special offers or promotions?
6. Has a celebrity endorsed the product? Would you think the celebrity uses the product?
7. What kind of packaging is used? What appeals to you about it?
8. What advertisements are you aware of? (TV, magazine, radio, internet)

Week 2

- Each group presents the information they have gathered on the products.
- Discuss the questions above as a whole group.

Questions for Discussion:

- Did anything you found out surprise you?
- Would you think differently before buying a new product again?
- How has popular culture changed the way products are sold?

Activity 3: Sources of Energy

Objectives: To re-create the Food Pyramid.

Materials:

Food Pyramid poster showing portion sizes, available from your Local Health Office

Food cards available in the Downloads section – 1 set per team.

Flip chart paper with blank Food Pyramid drawn on, taped onto the floor, large space, hall or room.

Introduction:

The aim of the activity is to recreate the Food Pyramid, by placing the cards on the correct shelves of the Food Pyramid.

Method:

1. Divide group into smaller groups of four.
2. Each group lines up at one end of the room.
3. Sets of Food Pyramid cards are placed at the other end of the room.
4. Team members take turns to run and collect a card from the other end of the room.
Only one card per person per run.
5. Each team must acquire the appropriate cards to recreate the Food Pyramid correctly.
6. Each team must work in their own area to re-create the Food Pyramid on the flip chart paper.
7. The team to re-create the Food Pyramid in the shortest time wins.

Questions for Discussion:

- Which food group do you think you need to eat more or less of?
How will you do that?

Suggestions:

- The food cards provided are a sample, groups can include other foods appropriate to specific ethnic groups.

Alternative Games:

1. Students could use the cards retrieved during the game to create healthy menus for one day's meals.
2. Student collect cards from one food group only.

NOTE this quiz should be used not so much as a test of knowledge but more to encourage the group to consider the answer. The learning will be in hearing the explanation for the correct answer.

Activity 4: Healthy Eating Quiz

1. Full fat milk contains more calcium than low fat varieties

True

False

2. Bread and potatoes are fattening

True

False

3. Teenagers need 5 portions of foods from the dairy shelf every day

True

False

4. We need to drink 5 cups of water a day

True

False

5. The iron in meat is seven times more easily absorbed than the iron in green vegetables

True

False

6. A bar of chocolate is a better energy boost than a sandwich

True

False

7. An average bag of crisps contains about the same amount of salt as 2 medium slices of white sliced bread

True

False

8. Brown bread is more healthy than white bread

True

False

9. Popcorn is an example of a healthy snack

True

False

10. When we eat a meal it takes about 10 minutes for the brain to get the message that we are full

True

False

Answers to Healthy Eating Quiz

1. False

Low fat milk contains the same amount of calcium as full fat.
Calcium is important for strong bones and teeth.

2. False

Breads, cereals, potatoes, pasta, and rice are high carbohydrate, low fat foods. It's what we do to them that affects the fat content e.g. make chips out of potatoes, add rich creamy sauces to pasta etc.

3. True

Teenagers need five servings from the dairy shelf every day.
They need extra calcium and protein as their bodies are growing so much.

4. False

We need to drink 8 cups of fluid every day.

5. True

The iron in meat is seven times more easily absorbed than the iron in green vegetables. Iron helps to carry oxygen in our blood from our lungs to every body cell. A lack of iron can lead to anaemia and tiredness. Vitamin C, found in fruit and some vegetables helps your body to absorb the iron.

6. False

The sugar in chocolate is absorbed quickly into the blood, which gives you a short energy boost, followed by a sharp dip, when you'll feel hungry again. It takes longer for your body to break down bread, so you get a steady release of energy for a longer length of time.

7. True

An average bag of crisps contains 0.8g salt, while 2 medium slices of bread contains 0.83g salt.
Most of the salt in our diets comes from processed foods, including processed meats e.g. bacon and bread, soups, sauces and breakfast cereals. However, bread and breakfast cereals are nutritious foods and should be included as part of a healthy balanced diet.
Instead, reduce the intake of salty foods from the top shelf of the Food Pyramid e.g. crisps.

8. True

Brown bread contains much more fibre than white bread. The body can't digest fibre so it doesn't provide us with energy but it does help to move waste along the digestive system. It helps protect us against constipation and other bowel disorders, certain cancers and heart disease.

9. True

Unsalted popcorn is a great alternative to a packet of crisps. It's much lower in fat and salt but still gives the same crunch! Other healthy snack ideas are included in the Healthy Eating section of this resource.

10. False

It takes about 20 minutes for the brain to get the message that we are full.
To avoid that 'stuffed feeling', chew your food well and take time to taste and enjoy it with family and friends, rather than speeding through your meal in front of the TV.

Checklist

Food Promotion in Youth Organisations

- Is there a healthy eating policy in place?
- Does it cover the types of food options that should be available?
- Does the policy cover food marketing/commercial sponsorship within the facilities?
- Is a vending machine available? Does it include healthy alternatives?
If not, what changes could be made?
- Is information promoting healthy eating and healthy lifestyles available?
- Could Youth Work activities involve discussion/promotion of healthy eating messages?



6

Key Contacts/Appendices/References

Section 6 – Key Contacts

If you would like advice on physical activity or healthy eating for your organisation, here are some organisations you could contact

National Organisations

Health Contacts

Irish Heart Foundation

✉ 4 Clyde Road
Ballsbridge
Dublin 4

☎ 01 668 5001

🌐 www.irishheart.ie

National Youth Council of Ireland

- Kevin O'Hagan, *Senior Project Officer*
– National Youth Health Programme
- Siobhán Brennan, *Project Officer*
– National Youth Health Programme

✉ 3 Montague Street
Dublin 2

☎ 01 478 4122

🌐 www.youth.ie

A listing of the National Youth Council of Ireland's membership contacts (over 50 organisations) is available on their website, visit www.youth.ie

Department of Health and Children

✉ ▪ Hawkins House
Hawkins Street
Dublin 2

☎ 01 635 4000

🌐 www.dohc.ie

- Health Promotion Policy Unit

🌐 www.healthpromotion.ie

🌐 www.healthinfo.ie

Health Service Executive

🌐 www.hse.ie

Find contact details for your Local Health Office here

Little Steps

🌐 www.littlestep.eu

Nutrition Contacts

Irish Nutrition and Dietetic Institute

✉ Ashgrove House
Kill Avenue
Dun Laoghaire
Co Dublin

☎ 01 280 4839

🌐 www.indi.ie / info@indi.ie

Bord Bia

🌐 www.bordbia.ie

Body Whys

🌐 www.bodywhys.ie

British Nutrition Foundation

🌐 www.nutrition.org.uk

Cool Food Planet

🌐 www.coolfoodplanet.org

The European Food Information Council

🌐 www.eufic.org

Children's Food Campaign

☎ 01 668 5001

Contact: *Children's Food Campaign Coordinator*
www.childrensfoodcampaign.net
info@childrensfoodcampaign.net

Safefood

▪ Cork Headquarters, Safefood
7 Eastgate Avenue, Eastgate
Little Island
Co. Cork

☎ 021 230 4100

▪ Dublin Office, Safefood
Block B, Abbey Court
Lower Abbey Street
Dublin 1

☎ 01 448 0600

🌐 www.safefood.ie / info@safefood.eu

Sport & Fitness

Department of Arts Sports and Tourism

✉ 23 Kildare Street
Dublin 2
☎ 01 631 3800

✉ - Frederick Buildings
South Frederick St
Dublin 2

✉ - Fossa
Killarney
Co Kerry
☎ 064 27300

🌐 www.arts-sport-tourism.gov.ie

Health Service Executive

🌐 www.hse.ie

Coaching Ireland

🌐 www.coachingireland.com

Community Games

🌐 www.communitygames.ie

Irish Sports Council

The Irish Sports Council serves as an access point for contacting the National Governing Bodies of individual sports such as GAA, soccer, rugby, basketball and cycling. The Irish Sports Council also has contact details of the following disability sports organisations: Blind Sport, Deaf Sport, Wheelchair Sport, Cerebral Palsy Sport and the Special Olympics.

☎ Top Floor Block A
West End Business Park
Blanchardstown
Dublin 15
☎ 01 860 8800

www.irishsportscouncil.ie

Find contact details for your Local Sports Partnership here

Find contact details for specific sports (e.g. athletics) here

National Council for Exercise and Fitness

✉ Head Office
PESS Building
University of Limerick
Limerick
☎ 061 202819
🌐 www.nceinfo.com

Olympic Council of Ireland

✉ Olympic House
Harbour Road
Howth
Co Dublin
☎ 01 866 0555
🌐 www.olympicsport.ie

Paralympic Council of Ireland

🌐 www.pcireland.ie

Sports Council for Northern Ireland

✉ Sport Northern Ireland
House of Sport
2a Upper Malone Road
Belfast BT9 5LA
☎ 0044 (0)28 90 381222
🌐 www.sportni.net

Sports Institute Northern Ireland

🌐 www.sini.co.uk

Appendices

A Guidelines for involving guest speakers

B A checklist for organisations that have already developed and implemented health related policy

C Food Marketing

D Food Labelling

Appendix A:

Guidelines for involving guest speakers

Sometimes an organisation may decide to enlist the help and input of specialist guest speakers to compliment their programme or to gain professional perspectives on particular health-related programme areas, e.g. dietitians, local sports partnerships co-ordinators etc.

Research has shown that many 'once-off' isolated talks prove to be of little long term benefit to young people and are therefore not recommended. However, the involvement of guest speakers – generally health professionals, can contribute greatly to any health education programme if both the young people and the guest speaker are well prepared.

The rationale for involving health professionals may, perhaps, be due to your lack of knowledge about a certain aspect of health (e.g. nutrition, impacts of environments on health) or may be related to a desire for a group to learn more about local health services and what they can offer the group. Generally, the involvement of health professionals in the programme should be to compliment and enhance the programme you are running and their involvement should be in the context of, and supported by, a comprehensive and holistic programme within the organisation.

The following guidelines for involving guest speakers / health professionals have been adapted from *Sense & Sexuality (NYCI/NYHP, 2004)*.

When requesting an input from a guest speaker / health professional:

- be clear about why you require their involvement;
- ensure that their involvement will compliment the programme you are already implementing;
- ensure that their input is not 'once off' – (i.e.

their input should not be in isolation but as part of an ongoing programme the youth organisation is delivering);

- ensure that the person you are requesting the input from is the most appropriate person to make the input i.e. that this work is within their brief and that they have the specific knowledge you require to input into your programme;
- check what ground work needs to be done with your group so that they can gain maximum benefit from the visitor's input.

When preparing the guest speaker for their involvement:

- ensure that you provide them will all relevant information about your group i.e. size of group, level of fitness, gender, cultural issues, previously relevant material covered by the group (what you have covered with them to date) and where their input fits within the overall programme. It is also important to inform them of any potential issues that might arise in their session i.e. if any members of your group might be particularly vulnerable to specific issues i.e. obesity, poor oral health etc;
- inform them about the organisational ethos and approach to the health issue being explored;
- if parental consent is required for the work, ensure that you, as the worker, have obtained it – this is not the responsibility of the guest speaker;
- ask for an outline of the session – materials and approaches to be used during the session so that you can prepare your group if appropriate;
- discuss the possible follow-up required after their input and how this can be facilitated.

When preparing your group for the involvement of a guest speaker:

- ensure that your group know why you are bringing in a guest speaker for a particular issue – clarify what their role will be;
- clarify what your role will be in the session;
- inform your group about the session content and approaches to be used if appropriate.

During the session:

- you should remain in the room during the session. This will ensure accountability and facilitate follow-up which may be needed;
- you should ensure that there is an agreed contract between your group and the guest speaker (e.g. re confidentiality, disclosures, group dynamics, timekeeping etc...);
- you can ensure that the group adhere to the working contract with the guest speaker;
- it may be appropriate for you to facilitate some part of the session with the guest speaker – this will pave the way for follow-up with the group after the guest speaker has gone;
- you can support the guest speaker, while at the same time, ensure that the ethos and policies of the organisation are being adhered to in the session.

Following the session:

- request that the guest speaker recommends relevant follow-up materials or activities to reinforce learning from the session e.g. dietary guidelines, physical activity recommendations etc;
- review/evaluate the session, with the guest speaker, against the original aim and objectives to ensure that the session achieved what it was supposed to;
- establish a mechanism with the guest speaker to maintain an ongoing working relationship with them, if appropriate, in the context of future health education programmes you may be developing;
- revisit the learning with your group at their next session – recap on what they gained from the session, evaluate the benefits of involving the guest speaker with the young people and ensure that any follow-up agreed to is put in place.

Appendix B:

A checklist for organisations that have already developed and implemented health-related policy

- Are your policy and guidelines more than three years old?
- Have your policy and guidelines been evaluated in the past three years?
- Was there a need to change policy because of evaluation?
- Are your monitoring systems successfully measuring practice?
- Are you confident that the policy is ensuring good practice?
- Have any legal or statutory details changed?
- Have the changing needs of young people affected the policy?
- Will new research and government initiatives affect your policy?
- Are you able to use your policy with partner organisations?
- May there be any changes in funding that might impact on healthy eating and active living in the organisation? E.g. funding for a vending machine or sponsorship from a private company (e.g. sugary drinks company) for an event (e.g. summer project).

Appendix C:

Food Marketing – Further information

We know from research on the eating habits of young people that one fifth of teens' energy intake comes from sugars, and that daily intake of sugary drinks averages a glass, mainly of carbonated drinks (IUNA 2008). These foods are among five food groups heavily marketed to young people, which includes snacks, fast foods, confectionary, sweetened cereals and soft drinks. These foods are found on the top shelf of the food pyramid and therefore should be eaten sparingly. Research shows that the foods marketed most strongly, particularly to young people are those found on the top shelf of the Food Pyramid. This is illustrated on the diagram opposite:

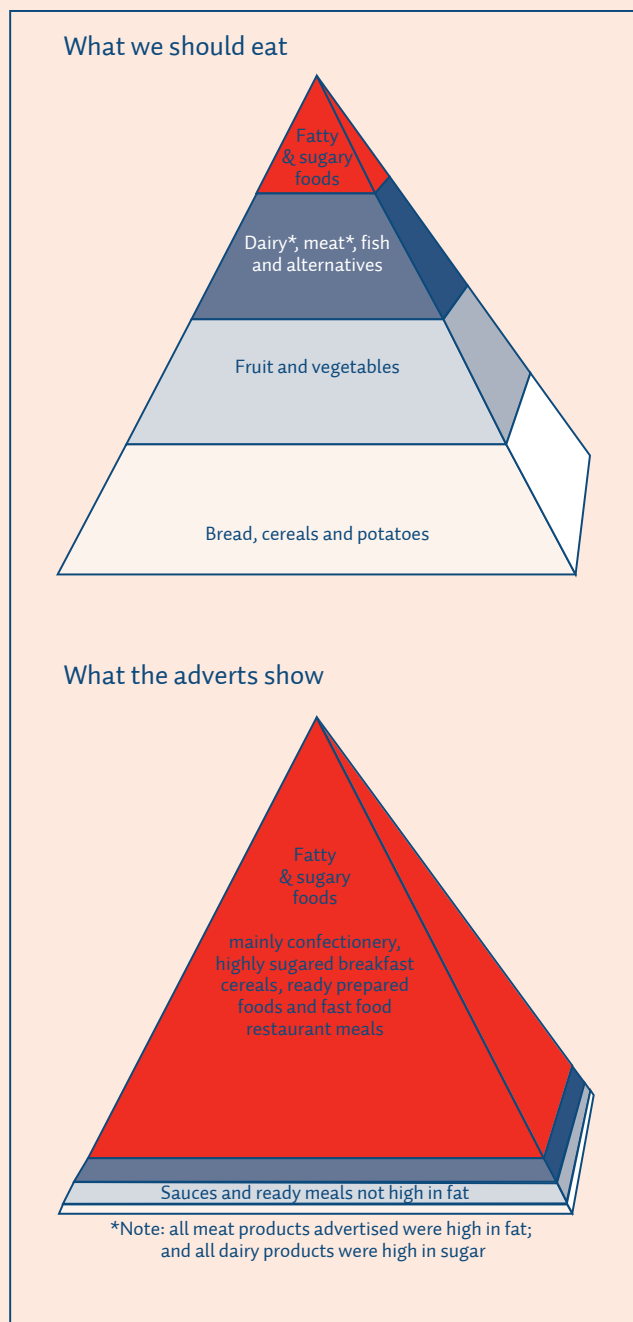
REFERENCE

A survey carried out by the European Heart Network shows that food marketing to young people exists on a massive scale in all European countries (Matthews et al, 2005). Food marketing is considered to be a major health issue for young people for the following reasons:

- Food marketing affects children's food preferences, purchase behaviour and consumption both at brand level and category level (Hastings, 2003).
- Food and drink marketing influences children up to 12 years to consume high-calorie, low-nutrient products (Institute of Medicine, 2005).
- Food and drinks TV advertising is associated with obesity in children (Institute of Medicine, 2005).

Marketing to young people is mainly carried out through television, however in recent years, we have seen an increase in other forms of marketing (Matthews et al, 2005), for example:

- In schools, through sponsorship, vending machines and token collection.
- Internet through games and websites for young people.
- Celebrity/Cartoon character endorsements.
- Text messaging, often linked to websites.



A survey by the Irish Heart Foundation (2008) found that four in five Irish parents would agree to a ban of unhealthy food advertising on television up to the watershed of 9pm and nine in 10 parents said that advertising influences their children's food choices. Television advertising is controlled by the Broadcasting Authority of Ireland (BAI). The Broadcasting Act 2009 empowers the BAI to prohibit the advertising of certain foods and beverages that are of public health concern in relation to children. The Irish Heart Foundation and the National Heart Alliance (of which the National Youth Council of Ireland is a member) has called on the BAI to ban marketing of

foods high in fat, sugar and salt up to the watershed of 9pm, as large numbers of children and young people view family entertainment programmes after 6pm. New forms of marketing such as the internet are largely unregulated in terms of food marketing.

As consumers, it is important to be aware of how products are marketed, the message used in selling the product and the information contained on the packaging. Consumers need to identify the manner in which companies utilise media such as TV, newspapers, magazines, film, billboards, the internet and text messaging to promote specific food products. 'Media literacy' is the term given to the idea of becoming more aware of and more critical of all of the various methods of communication in all areas of life.

More specifically, media literacy is the ability to analyse the messages that inform, entertain and sell to us every day. It's the ability to critique media in all its forms – from music videos and the internet to product placement in films and virtual displays on screens and billboards. Being aware of media makes us ask ourselves:

- Who is this message intended for?
- Who wants to reach this audience and why?
- Whose views are considered/not considered?
- What strategies are used to get my attention?
- How truthful is the content?

Asking these questions and analysing the ways in which media operates makes us more media conscious and more empowered as consumers (Tallim, 2008).

For more information on media literacy please visit: <http://unesdoc.unesco.org/images/0014/001492/149278E.pdf>

Appendix D: Food Labelling – *further information*

At the moment, food manufacturers are only obliged by law to put nutrition information on a label if they make a claim about their product e.g. high in fibre or low in salt. If nutrition information is provided, it can be presented in two different formats.

1. Energy (calories), protein, carbohydrate and fat
2. Energy (calories), protein, carbohydrate, sugars, fat, saturated fat, fibre and sodium.

Currently, the European Union is reviewing the legislation on food and nutrition labelling and it is proposed that all food manufacturers will be obliged to provide nutrition information on the back of pack.

The Irish Heart Foundation and other heart foundations across Europe are lobbying for:

- Nutrition information on the front of pack should serve as a 'sign post' guiding consumers at-a-glance towards healthier choices. Front of pack should have no more than 4 elements including saturated fats, sugar and salt.
- Back of pack labelling should contain information energy, protein, carbohydrates, sugars, fibre, fat, saturated fats, and salt.
- Multiple colour coding should be mandatory on front of pack, with red, yellow (amber) and green indicating high, medium and low levels of these 4 elements.

Food labels – what to look for:

Calories – *What you should know!*

Energy is measured either in calories (kcal) or kilojoules (kJ). Kilojoules is the metric equivalent of calories. Most labels use calories. If you frequently eat more energy than you need for the amount of physical activity you do, you will become overweight.

- 'Reduced Calorie'
30% less calories less than the standard product
- 'Low Calorie'
Less than 40 calories per 100g

Fat – What you should know!

Fats – also listed as butter, butter milk, dripping, lard, milk fat, vegetable oil, peanut oil, vegetable fat, glycerides. Some labels may tell you if the fat is saturated or unsaturated or trans fat. Saturated fats refer mainly to animal fats. Too much saturated fat in your diet can increase blood cholesterol. Unsaturated fats refer mainly to vegetable oils. They may also be listed as monounsaturates and polyunsaturates, which are found in sunflower oil or olive oil. Trans fats means that the fat, after high heat, has acquired the same properties as saturated fat and should be limited. Eating too much fat, especially saturated and trans fat is linked with weight gain and obesity, high blood pressure and high cholesterol.

	A Lot	A Little (healthier levels)
Fat	20g	3g
Saturated Fat	5g	1g

- ‘Low Fat’
Less than 3g fat in 100g
- ‘95% Fat Free’
Contains no more than 5% fat (or 5g per 100g)
- ‘Low in Saturates’
Less than 1.5g of saturated fat and trans fat combined per 100g

Fibre – What you should know!

Fibre is vital to add bulk to your diet. It is found in fruits, vegetables, pulses like beans and lentils, wholegrain bread and high-fibre breakfast cereals.

A Lot (healthy level)	3g
A Little	0.5g

- ‘High Fibre’
Contains at least 6g fibre per 100g
- ‘Sources of Fibre’
Contains at least 3g fibre per 100g

Salt – What you should know!

Salt – also listed as sodium, sodium chloride, or monosodium glutamate (MSG), – to name but a few. To calculate the amount of salt in a food, multiply the amount of sodium by 2.5. Aim for less than 6g of salt – just over half a teaspoon – a day. Eating too much salt can cause high blood pressure and lead to heart attack and stroke

A Lot	1.5
A Little (healthier level)	0.3g

- ‘Sodium Free’
No more than 0.005g per 100g
- ‘Low Sodium’
Less than 0.12g per 100g

Sugar – What you should know!

Sugars – also listed as sucrose, glucose, glucose syrup, golden syrup, maple syrup, treacle, fruit juices, invert sugar, honey, fructose, dextrose and maltose.

Sugary foods and drinks don’t satisfy appetite as well as other foods, are high in calories and low in nutrients and are linked to excess weight, Type 2 diabetes and dental decay. General healthy eating guidelines encourage a balance of foods across all food groups based on the Food Pyramid.

A Lot	10g
A Little (healthier level)	2g

- ‘Sugar Free’
No more than 0.5g sugar per 100g
- ‘No Added Sugar’
No sugars have been added. If sugars are naturally present in the food the label must state ‘Contains naturally occurring sugars’.
- ‘Low Sugar’
Less than 5g sugar per 100g

Additives – What you should know!

All additives to food are given E numbers for reference, which assures us that additives are safe to eat in food. Additives are used to preserve a product properly or to enhance the look and flavour of the product. E162 for instance is the natural red colouring from beetroot.

References

- Department of Public Health, Health Service Executive, Cork (2005) *Our Children...Their Future...Why Weight?*
www.hse.ie/en/Publications
- Department of Health and Children (2009) *Get Ireland Active – Promoting Physical Activity in Ireland*.
Health Service Executive. Dublin
- Fahey, T., Delaney, L. & Gannon, B. (2005) *School Children and Sport in Ireland*. ESRI, Dublin.
- Food Commission, UK (2003) *Broadcasting bad health: Why food marketing to children needs to be controlled*.
A report by the International Association of Consumer Food Organisations for the World Health Organisation consultation
on a global strategy for diet and health. www.foodcomm.org.uk/Broadcasting_bad_health.pdf
- Government of Canada, Public Health Agency of Canada (1992) Healthy Living Unit.
<http://www.phac-aspc.gc.ca/pau-uap/fitness/definitions.html>
- Hastings, G., Stead, M., McDermott, L., Forsyth, A., MacKintosh, A.M., Rayner, M., Godfrey, C., Caraher, M & Angus, K. (2003)
Review of the research on the effects of food promotion to children. Final Report. Food Standards Agency.
www.foodstandards.gov.uk/multimedia/pdfs/foodpromotiontochildren1.pdf
- Hope, A., O’Sullivan Ryan, M., O’Loan, M., Burke, D. & Tonge, K. (1996) *Action for Life Health Related Exercise Programme: for
Primary Schools*. (www.irishheart.ie)
- IUNA (2005) National Children’s Food Survey. www.iuna.net
- IUNA (2008) National Teen’s Food Survey. www.iuna.net (in press)
- Health Promotion Unit (2005) Food Pyramid Poster. www.healthpromotion.ie
- Irish Heart Foundation (2005) *Your Child’s Heart for Life – with healthy eating and active living*. www.irishheart.ie
- Irish Heart Foundation (2007) *Nutrition Guidelines for Heart Health: With Policy Recommendations*. www.irishheart.ie
- McGinnis, J.M., Appleton Gootman, J. & Kraak, V. I. (2005) *Food Marketing to Children: Threat or Opportunity*.
Washington DC: Institute of Medicine of the National Academies
- McGrory, S., Monaghan, L. & Rowley, C. (2006) *Youth Health Promotion – A Practice Manual*.
National Youth Health Programme, Dublin.
- Matthews, Cowburn, Raynor, Longfield & Powell (2005) *The Marketing of Unhealthy Food to Children in Europe*. www.ehnheart.org
- National Youth Council of Ireland & Irish Heart Foundation (2006) *Consultation with youth workers*. Unpublished.
- National Taskforce on Obesity (2005) *Obesity - the Policy Challenges*.
Department of Health and Children. Government Publications Office. Dublin.
- Nic Gabhainn, S., Kelly, C. & Molcho, M. (2007) *The Irish Health Behaviour in School-aged children (HBSC) study 2006*.
National University of Ireland, Galway.
- Safefood (2004) *Consumer Tracking Research, Safetrack 2* www.safefoodonline.com
- Sense and Sexuality (2004) *A resource pack for addressing the issue of sexual health with young people in Youth Work Settings*.
The National Youth Health Programme, National Youth Council of Ireland.
- Tallim, J. (2008) *What is media literacy?*
http://www.media-awareness.ca/english/teachers/media_literacy/what_is_media_literacy.cfm
- Woods, C., Foley, E., O’Gorman, D., Kearney, J. & Moyna, N. (2004) *The Take Part study: Physical Activity Research for Teenagers*.
Dublin City University, Dublin.
- World Health Organisation (1986) *Ottawa Charter for Health Promotion, An International Conference on Health Promotion, November
17 – 21*. WHO Regional Office for Europe, Copenhagen.