

Together towards a healthier Risca



CWTSH

Integrated Wellbeing Network OUTLINE PLAN



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NETWORKS

Original draft version - November 2023
Updated version - July 2024

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EXECUTIVE SUMMARY

Like other valleys communities across Wales, the Risca area has some considerable health and wellbeing challenges. These include heart and lung disease, obesity, and Type 2 diabetes, and the reported high incidence of mental health issues in the area.

These health inequalities severely impact the quality of life in our communities with people living healthy lives for far fewer years than those in more affluent areas. In addition, it places extra demands on already stretched health and social care services which exacerbates the situation. This needs to and must change.

No single organisation alone can successfully address these challenges and deliver the changes needed. Moreover, it requires working together with people, so they participate and are empowered. Within our communities, we have assets vital to achieving the change needed – people, places, and provision of services.

The **Integrated Wellbeing Networks (IWN) Outline Plan** based on IWN work done in the area to date highlights what people have said they want to see, including:

- Thriving community hubs, services, and businesses work well collaboratively to support wellbeing and health
- People of all ages enjoy good mental health
- Inclusive local food initiatives and projects support good health
- People of all ages are not feeling isolated or lonely
- People of all ages are included and valued and enjoy healthy ageing
- Local outdoor spaces support wellbeing and health
- People are not digitally excluded

This outline plan is aimed at contributing to achieving these outcomes. It is not a standalone plan and must complement other projects and initiatives. It is not intended to be prescriptive or definitive, but an outline plan that crucially requires wider community involvement and greater collective action with three main aims:

- To catalyse more and wider conversations and encourage greater involvement in enhancing wellbeing and health in our communities
- To stimulate further action *working together* based on what's good and strong in the area to improve wellbeing and health, building on progress to date
- To initiate new actions led by the community, supported by participatory budgeting, working with services to make real differences to the area's wellbeing and health.

We warmly welcome everyone living and working in the area to be part of the change.

STRUCTURE OF THE OUTLINE PLAN

The first section sets out the aims of this outline plan, its background, and the underlying rationale. It is followed by a brief review of the health and wellbeing challenges in the area before describing the development work undertaken to produce the plan.

The main section provides more detail on the desired outcomes drawn from the development work, indicating what people felt was good, what could be developed or improved, and some indicative actions to achieve those outcomes.

Finally, there are some concluding comments with proposed next steps and actions indicating how the outline plan fits within the IWN principles work moving forward.

ACKNOWLEDGEMENTS AND CONTACT DETAILS

We thank everyone who has contributed to the work to date as part of the collaborative and outside it.

Any omissions or errors are totally my responsibility.

We warmly welcome feedback on this outline plan and encourage wider involvement in taking it forward.

Thank you very much for taking the time to read it – Diolch yn fawr iawn.

David Llewellyn (IWN Lead, Caerphilly County Borough area)

November 2023

Contact Details Update - July 2024

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1. AIMS AND BACKGROUND

Aims of the outline plan

The **IWN Community Wellbeing Outline Plan** is based on what people, primarily in the local IWN wellbeing collaborative, have said they would like to happen to improve wellbeing and health in the Risca area.

It is neither a prescriptive nor definitive final plan. It is an outline plan which indicates what members of the community and some services to date feel might be done. Circumstances will potentially change, and it will and should evolve as more people have their say, get involved and provide more input and ideas. We need to include as many people as possible in our communities to continue the conversations, get more involved, and work together to make the changes happen.

As such, it has three main aims:

1. To catalyse more and wider conversations and encourage greater involvement in enhancing wellbeing and health in our communities.
2. To stimulate further action *working together* based on what's good and strong in the area to improve wellbeing and health, building on progress to date.
3. To initiate new actions on the ground led by the community to make real differences to the area's health and wellbeing.

The outline plan will support and be supported by the new **participatory budgeting** process in the area to help deliver some of its aims. Importantly, too, we fully recognise the impacts of the other wider determinants on health and wellbeing that must be and are being addressed. As such, it is not a standalone plan and should complement other projects and initiatives in the area.

We hope you will find this outline plan informative and use it as intended - to have or start conversations about making change happen, to remain or get involved going forward, and to shape and to help deliver collectively the health and wellbeing changes we want and need in our communities.

Background and rationale for the outline plan

Many areas in the south Wales valleys struggle and grapple with some of the worst health and wellbeing challenges in Wales and the UK. Statistics and data suggest these are challenges are perhaps less marked in the Risca area compared to say

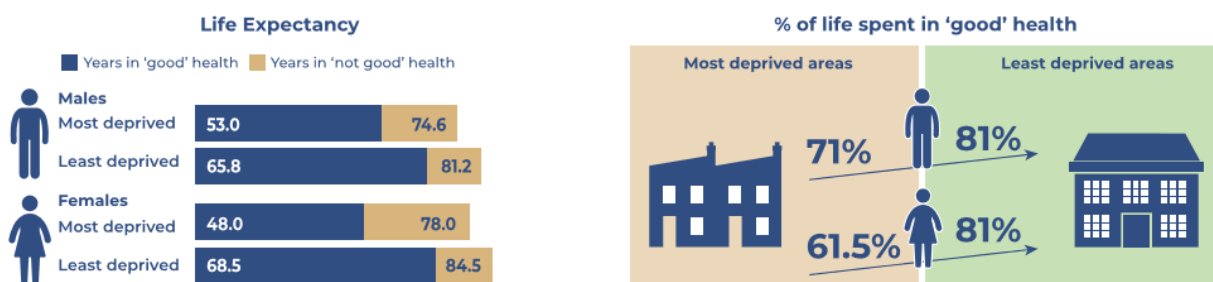
localities in the heads of the valleys area, but nevertheless they exist and need to and can be addressed.

Most importantly, unfortunately, these challenges impact dramatically on people’s quality of life in our communities. The major aim of the Integrated Wellbeing Networks programme is that people enjoy a healthy life for as long as possible, increasing their ‘**health span**’.¹

Healthy Life Expectancy (at birth) is *the average number of years a person would expect to live in good health in a particular area*. In Caerphilly County Borough as a whole, Healthy Life Expectancy for males is 56.7 years and 57 years for females. The respective figures for Monmouthshire, which are 68.7 years and 69.3 years, which indicates the challenges.

Moreover, the disparities in this health span between the more socio-economically areas in Caerphilly and the most affluent areas of Monmouthshire for example are even bigger, as shown in the recent **Building a Fairer Gwent** report, which demonstrates the crucial impacts and influences of the wider determinants of health, such as poverty, employment, and housing.²

As well as the unacceptable personal impacts on people, their families, and friends, and indeed the wider community, these inequities produce additional stresses and strains on already stretched health and social care services, exacerbating the situation in our communities. This must change and this outline plan is aimed at contributing in that.



The socioeconomic gap in healthy life expectancy has remained largely unchanged at 13 years for men, but has widened to 20 years for women over the period 2011-13 to 2018-20. This means that on average, a man living in the most deprived communities in Gwent today lives just 53 years of life in good health and a woman lives just 48 years of life in good health

The aim of the **Integrated Wellbeing Networks (IWN)** programme is to enhance wellbeing and health in our communities by working *with* people and the services that serve them.

¹ <https://dictionary.cambridge.org/dictionary/english/healthspan>

² <https://abuhb.nhs.wales/healthcare-services/staying-well-and-healthy/building-a-fairer-gwent/>

Despite the challenges, there are many positive assets in our communities all of which have important roles in addressing those challenges – people, places, and provision of services. The IWN programme uses a ‘*what’s strong, not wrong*’ assets-based approach focusing upon connecting, strengthening, and developing those assets to address the issues that impact upon community health and wellbeing.³ It is a preventative approach, working together *with* people helping to enable them to live healthy, fulfilled lives and addressing the health inequalities faced by our communities. This is the major objective of the Building a Fairer Gwent initiative, and why Gwent is now a so-called Marmot region.⁴

A key part of the IWN approach is to bring people and services together in a locality and empower communities to find and lead solutions. In the areas of Caerphilly County Borough where the IWN programmes is focused upon localities, we call these our **Cwtsh Collaboratives**. These are open to *everyone* whether a service provider, a community group, or a resident in the area. Our community health and wellbeing are everybody’s business, and everyone needs to be engaged and involved.

The Cwtsh Collaboratives work to understand the positive changes in health and wellbeing local people want to see and make happen in our communities, explore how we can best do this together, and help to deliver those changes collectively.

The basis of this outline plan has come primarily through the work with the local collaborative, but also importantly from work outside that. The work started just prior to the Covid pandemic which, unsurprisingly, severely interrupted its development. However, whilst the pandemic as well as the subsequent and continuing Cost of Living crisis has undoubtedly exacerbated the health and wellbeing challenges faced, it is important to note that these inequalities existed before.

³ <https://researchoutreach.org/articles/whats-wrong-whats-strong-guide-community-driven-development/>

⁴ <https://www.instituteoftheequity.org/resources-reports/building-a-fairer-gwent-improving-health-equity-and-the-social-determinants>

2. HEALTH AND WELLBEING CHALLENGES IN THE AREA

Wellbeing is not just the absence of disease or illness. It's a complex combination of a person's physical, mental, emotional, and social health factors. Wellbeing is strongly linked to happiness and life satisfaction and could be described as how you feel about yourself and your life⁵. Feelings of wellbeing are fundamental to people's overall health whilst conversely your health can impact upon your wellbeing.

The aim and approach of the IWN programme is to actively help and encourage people and our communities to take control of their wellbeing, taking advantage of activities and support available, and becoming more confident and able to lead healthier and happier lives.

Evidence from a variety of sources indicates the continued health challenges faced by people in the Risca area. The challenges include:

- Type 2 diabetes
- Hypertension (high blood pressure)
- Coronary heart disease
- Obesity
- Chronic Obstructive Pulmonary Disease (COPD)
- Worsening mental health, depression, and anxiety

Dementia is also increasingly an issue within our communities as is loneliness and isolation. Social isolation is associated with about a 50% increased risk of dementia and other serious medical conditions including cardiovascular disease.⁶

These health data and issues are backed up anecdotally in conversations in our collaboratives, from discussions at other meetings and events, and from general everyday chats with people in our communities.

Many are struggling with these conditions and with data showing an increasing ageing population, the challenges will intensify. We must address those factors that impact adversely upon our health and wellbeing through preventive approaches working with and empowering people in our communities to have greater control over their own health and wellbeing and ensuring that services can function effectively in our communities.

⁵ <https://www.wpa.org.uk/health-wellbeing/articles/importance-of-wellbeing>

⁶ <https://www.nature.com/articles/d41586-024-00900-4>

3. WORK UNDERTAKEN FOR THIS OUTLINE PLAN

Integrated Wellbeing Networks (IWN) programme

Integrated Wellbeing Networks (IWNs) seek to improve and strengthen wellbeing by connecting and enhancing community assets for people to build relationships and find the things that matter to them.

They are not about creating more services or 'sticking plasters' that attempt to solve people's problems. Rather, the aim is to build on what is already available locally and bring in the unique strengths and assets that are within individuals and communities. These assets exist within all communities and contribute to good health and wellbeing.

There are four elements to the IWN programme:

1. Encouraging place-based collaboration and community-led action
2. Connecting and enhancing community-based hubs and activities
3. Supporting and connecting services and support in an area
4. Enabling easier, inclusive access to wellbeing information in communities

More details on the IWN programme and the underlying principles can be found at: <https://abuhb.nhs.wales/hospitals/staying-well-and-healthy/integrated-well-being-networks-in-gwent/>

Whilst the team supporting the delivery of the IWN programme is hosted by Aneurin Bevan Health Board, we realise fully that no single organisation or body can deliver the actions and changes needed. They require effective networking between relevant partners ranging from local authorities, health boards, other statutory bodies, voluntary organisations and most importantly groups and people in our communities.

IWN work, area collaboratives, and scoping exercises

The Risca area was not a locality for the IWN programme which commenced back in the middle of 2019. Whilst the assets and opportunities exist in all our communities to address health and wellbeing challenges collectively, with small resource, it was decided initially to focus upon the upper Rhymney valley where the data showed arguable more significant challenges.

In spring 2020, the pandemic inevitably disrupted local delivery of the IWN programme with the IWN team understandably called upon to support community wellbeing in the face of Covid across the whole borough. This brought opportunities

to support community groups and initiatives in the Risca area, such as the-then RCV-19 volunteers.

Through this, it became apparent there was an appetite to explore whether the IWN approach could operate in the Risca area which provided some different opportunities and challenges to those in the initial focus areas. With that, we held some initial online meetings in the late summer of 2020 and continued since. It is probably fair to say the programme has not worked on the ground as intensively as in those areas. This to an extent reflects the arguably greater community activity already in the area, but also because much of the period after starting still was punctuated with dealing with the Covid pandemic and lockdowns.

The upshot is that initial community engagement approaches undertaken in the other communities such as Postcard from The Future exercises to identify some desired outcomes did not happen in Risca. Nevertheless, in keeping with the IWN approach, we worked collectively to produce similar wellbeing asset maps as shown in Annex 1. In addition, however, we decided we could embrace some different approaches to other areas, such as the Hack of Kindness to unearth challenges and explore the opportunities collectively with community – see below.

'Post-COVID' IWN collaborative conversations and events

In late 2020 and throughout 2021, we conducted a series of in-depth online discussions in our collaboratives, including the newly formed Risca one. The contributions across all the IWN areas highlighted some key common issues exacerbated by the pandemic and the measures taken. These included:

- Worsened mental health and resilience
- Social isolation affecting people's health and wellbeing
- Seeming increases in obesity and Type 2 diabetes through inactivity
- Impacts of Covid, exacerbating existing respiratory and other conditions and causing new ones including Long Covid

This work also highlighted challenges people felt there were in accessing services, including health services, and the impacts of digital exclusion, especially at a time when people were increasingly dependent on online activities and information.

It was also clear that in some cases wellbeing assets in our localities had been adversely impacted; community centres and venues were struggling to recover because volunteers needed to help run them were not well enough or decided not to continue in their roles.

In October 2021, we staged a community '**Hack of Kindness**' held at Channel View Community Centre and facilitated by the Wales Cooperative Centre (now Cwmpas).

This took place during pandemic restrictions (such as numbers of attendees) with logistical issues that undoubtedly hampered what we had hoped and envisaged could be achieved. Despite this, the ideas put forward offered invaluable insight into the challenges, what was considered desirable and potentially possible. We also worked with community groups to stage a modest, but week-long 'pilot' **Risca Wellbeing Festival**, designed to connect and publicly promote the wellbeing assets of the area. Whilst again the restrictions inevitably impacted, this again proved useful as it highlighted some of the area's assets and opportunities to address the health and wellbeing challenges.

Continued community intelligence and input since 2022

In early 2022, IWN collaborative meetings in Risca and elsewhere resumed, initially as hybrid meetings where people could attend in person or online via Zoom. These together with other 'post-COVID' discussions with communities and services and direct conversations with people in the area, have added more information and input. We have also conducted recent Community surveys on specific issues such as women's and men's health, again vitally adding context and evidence to this outline plan.

In the middle of 2022, we initiated our IWN Cwtsh Connections funding initiative through GAVO to support community projects and activities that would help reconnect people and address some of the post-Covid challenges identified.

These again gave valuable insight into the issues as perceived by community groups and organisations. Over two funding rounds, 32 projects were supported in total across the IWN focus areas, seven of which were for groups and activities in the Risca area. These included supporting the wellbeing of people at risk of homelessness through Llamau, a young people's breakfast initiative at the-then We Connect Cafe, development of communal outdoor space at TLC, support for SHADE activities and support for St John Ambulance Hall to put on more activities.

We have also monitored the development of the Risca area Cwtsh guide to understand what is available and where there is potential demand for support and activities.

The information from all these events and activities, along with reference to relevant data, has informed and shaped this outline plan. It provides a basis for moving forward to contribute to achieving the outcomes indicated.

We have produced outline plans for the other IWN areas which as stated above had different initial approaches. These plans nevertheless have undoubted similarities with respect to some of the desired outcomes. This is unsurprising because there are some health and wellbeing challenges in common, but also because

communities recognise the assets that exist in most places which can be brought to bear in addressing them.

Nevertheless, there are important differences between the plans. This is intended to be a place-based plan for the Risca area specifically which has different assets and opportunities to the others.

4. DELIVERING BETTER HEALTH AND WELLBEING OUTCOMES

Social inequalities such as poverty, employment, housing, and other important factors influence and affect our health and wellbeing. The current cost of living crisis has impacted upon people's mental health. For example, a recent UK-wide survey by the Mental Health Foundation showed many people are feeling anxious and stressed because of their current financial situation.⁷

The work undertaken by local authorities, other public bodies such as the health board, and organisations in the voluntary sector is vital in addressing these and are key elements of the Building a Fairer Gwent initiative for example. The IWN programme seeks to involve all these and support them and their work.

To complement and augment that, the work here specifically set out to understand what communities and some of the services in them feel are amongst the major health and wellbeing challenges, what they understand to be the area's assets, and what outcomes they want to see.

With the need to include and involve more people, the outcomes are not all encompassing and there will be challenges and opportunities not yet articulated or covered. Indeed, other opportunities clearly exist and need to be encouraged. Nevertheless we believe this is a strong starting point for moving forward collectively.

In the Risca area, we have drawn out the following interrelated outcomes based on the work to date. They are not listed in any order of priority and have obvious overlaps and links between them, which could allow some to be combined as we move forward. A major task now is to continue and encourage more community conversations whilst moving from planning to delivering more actions to make change happen. The desired outcomes covered are:

- Community hubs, services and businesses are thriving, better connected, and work collaboratively to support wellbeing and health.
- People of all ages enjoy good mental health.
- There are inclusive local food initiatives and projects supporting good health.
- People of all ages are not feeling isolated or lonely.
- Local outdoor spaces support wellbeing and health.
- Generations have been brought together with increased understanding and young people's wellbeing is well-supported.
- People are no longer digitally excluded.

⁷ <https://www.mentalhealth.org.uk/about-us/news/stress-anxiety-and-hopelessness-over-personal-finances-widespread-across-uk-new-mental-health-survey>

Importantly, we did provide the chance for people to list other opportunities in the World-café session. We have sought to incorporate these in the outcomes above for now as appropriate.

We set out these outcomes in the following section set out as follows:

- **Background and context**
This includes some evidence from wider work that underpin the outcome.
- **What people said - what's good, what could be improved or developed**
This emanates from the World Café-type sessions where we encouraged people to say what is good now and what could be improved or provide additional opportunities.
- **What could be done together going forward?**
Again primarily emerging from the World Café-type sessions, these are some future actions put forward by people to achieve those outcomes. Together with existing and continued actions, and others yet identified, these provide a basis for more detailed delivery plans.

OUTCOME – Community hubs, services and business are thriving better connected, and work collaboratively to support wellbeing and health

Background and context

Growing evidence shows that feeling and being part of a community is good for wellbeing and health. Community participation can empower people to be positive and more involved with greater influence in the places they live, provide important communal networks that support mental and physical wellbeing, help combat social isolation across all ages, and help 'buffer against disease and influence health-related behaviour and management of long-term conditions.⁸

Community venues and organisations provide important opportunities for people to come together. They also provide activities that improve wellbeing and health and offer opportunities to obtain support, advice, and even care in the community. In short, they are vital to community wellbeing.

Community services delivered by statutory bodies and the third sector are vital in keeping people well, treating and managing acute illness and long-term conditions, and supporting independent living.

Businesses can have many positive impacts on community health and wellbeing. This includes work force wellbeing programmes but can extend beyond the workplace itself in supporting communities and protecting the environment for example.⁹ There is also increasing recognition that vibrant town centres contribute positively to health and wellbeing.¹⁰

What people said - what's good, what could be improved or developed

In the Risca area, there are excellent community organisations with a variety of different hubs accessible to many people.

Support services are available and operating well in the area such as for example, Communities for Work and Supporting People.

Businesses in the area were recognised for their role in supporting the wellbeing of local people. The Smart Towns app is advantageous in supporting local trade and

⁸ <https://ukhsa.blog.gov.uk/2018/02/28/health-matters-community-centred-approaches-for-health-and-wellbeing/>

⁹ <https://www.health.org.uk/publications/how-can-businesses-contribute-to-people%E2%80%99s-health>

¹⁰ <https://www.nhsconfed.org/publications/health-high-street>

people (Note - it was felt that parking could be improved, e.g. rugby club car park to make the high street more attractive to visitors).

Community engagement in Risca is considered to be good but could be improved, whilst it was felt that better collaborative working between community venues and organisations and services to complement each other's activities would be beneficial to all.

The area Cwtsh guide was considered very useful in informing people what is available and in helping with networking - could it be improved allowing providers to directly upload info?

More notice on funding opportunities should be given to organisations to make sure they can take advantage.

There are lots of services available across the different sectors but may not be getting to everyone that would benefit from those services. It was felt that improved risk assessments and safeguarding should be undertaken before CCBC, community groups and other groups support or promote groups and charities.

What could be done together going forward?

- Continued support from Cwtsh Network could help ensure collaborative work from businesses and groups so Risca continues to thrive, but more engagement is needed to ensure additional organisations etc are part of the network.
- Ensure the Cwtsh guides are as inclusive as possible by getting all organisations to be included, e.g. local churches and chapels. Could it or another site be used to highlight collaboration opportunities?

OUTCOME – People of all ages enjoy good mental health

Background and context

The health and wellbeing impacts of the pandemic upon people of all ages have been apparent. The disruptive effects on schooling were detrimental for example and young people of school age and beyond suffered with poorer mental health.¹¹

Moreover, it is sometimes overlooked that young people can experience high levels of loneliness and social isolation, which affects their health. This is also true for older members of our communities, whose confidence too was severely impacted by the pandemic.¹²

In Cwtsh collaborative online meetings in the period of lockdowns, it was felt people's mental health in the Risca area across all ages was significantly worsened by the pandemic. Data collected by the Institute for Health Equality for the Building a Fairer Gwent programme indicates the rates of people with GP-recorded mental conditions are higher in the Risca area than elsewhere in the Caerphilly County Borough area.

What people said - what's good, what could be improved or developed

Community groups and local businesses supporting each other gives sense of community and helps local people feel connected and supported. It was felt there is good community spirit and people engage in Risca though could be further enhanced (see section above)

Third sector organisations, community groups, churches and local businesses deserve a lot of credit for their work in supporting mental health in the Risca area - "it would be a very different and bleak place without them". Examples include SHADE, CVW, TLC, Time Wellbeing Centre/The Hive.

The Melo website (www.melo.cymru) is a good resource in supporting people's mental health. Cwtsh guides are good in publicising what is available online.

Communication however is not reaching everyone, there is a need to get information out further - individuals who need support are sometimes missed and not heard. There is a need to get louder and wider community voice on the issues and challenges - a better presence at school during events and meetings could gather views from parents and pupils for example. More intergenerational work with schools

¹¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9883078/>

¹² <https://www.gov.wales/age-friendly-wales-our-strategy-ageing-society-html>

and older generation could help. There is support from the town/community councils, but enhanced involvement would be beneficial.

Opportunities for evening and weekend support could be expanded. It was Face to face meetings work better than online.

Need to reduce 'hoops' such as paperwork in staging events and activities such as Fun on the Field, that can support wellbeing and health.

What could be done together going forward?

- Get more information out wider in the community, online and offline, e.g. Newsletters through letterboxes, digital display boards at venues, better information at surgeries and community venues.
- Community Councils' representation at Cwtsh and other meetings
- Need more community groups for men's wellbeing - Walking football for example.
- More wellbeing events with feedback forms to get enhanced input and knowledge of what's working and needed.
- Schools need to be more involved and engaged.
- People who often need help are disadvantaged by poor transport and costs – need to address this.

OUTCOME – Inclusive local food initiatives and projects support good health

Background and context

The physical health benefits afforded by good food and nutrition are obvious, but they are also connected with positive mental health and wellbeing. In addition to directly affecting mood, learning to cook and grow food can improve personal self-esteem, confidence and can be relaxing. Communal food preparation and meals also promote an enhanced sense of belonging and overall inclusion that can increase happiness, decrease depression, and lead to positive wellbeing.¹³

The rise in foodbanks over the last decade or so is indicative that access to (good) food is not equitable with people on low incomes struggling. Moreover, this has been and is being exacerbated by the cost-of-living crisis which again is impacting disproportionately on the poorest in our communities.

The Food Foundation states that “poor diet is now the biggest risk for preventable disease, placing massive strain on our NHS”¹⁴ whilst the personal impact upon the lives of people and their families is unacceptable. They have highlighted the need for affordable healthy and sustainable food for all, to ‘stop junk food cycles’, to improve children's diets, make it easier to eat sustainably, and to realise the full potential of our food systems.

What people said - what’s good, what could be improved or developed

There was a strong feeling in supporting this outcome. Some considered the support through a good mix of available food share projects and foodbanks plus cooking initiatives in Risca as good.

Moreover, there was a feeling of good relationships between providers and those accessing food poverty projects with these projects also signposting to other forms of support needed by people. The Risca Foodbank and Y Pantry were considered to work well for example.

However some also felt that projects and initiatives could work together better to avoid competition. It was also felt there could be better promotion and advertising as well as more and clearer information as to who was eligible - “can you just turn up or do you need referral?”.

Some believe food banks can be abused – “People to be told that foodbanks are there to help in a crisis not expect Job Centre to stop sending people down to us” -

¹³ <https://www.communityfoodandhealth.org.uk/our-work/mental-health-wellbeing/>

¹⁴ <https://foodfoundation.org.uk/initiatives/election-2024-nourishing-nation>

and food share should be more encouraged. Others commented that unfortunately there can be abuse directed at providers and volunteers.

Foodbanks could deliver as well as use hubs as some people feel embarrassed and don't want to be seen using them

What could be done together going forward?

- Address the root causes of the need for food support.
- More food surplus needs to be directed to food initiatives - need a way of promoting surplus food and arrange delivery to food initiatives.
- Local business engagement to work with initiatives to help increase footfall, promote business, and promote community.
- Develop even better links between support services and community groups and services.
- Develop and create local growing opportunities and initiatives linking to community food and cooking projects.
- Better promotion through all partners including GP surgeries

OUTCOME – People of all ages are included in community life and not feeling isolated or lonely.

Background and context

A growing body of evidence shows that feeling and being part of a community is good for wellbeing and health. Community participation can empower people to be positive and more involved with greater influence in the places they live, provide important communal networks that support mental and physical wellbeing, help combat social isolation across all ages, and help 'buffer against disease and influence health-related behaviour and management of long-term conditions.¹⁵

Community venues and organisations provide important opportunities for people to come together. They also provide activities that improve wellbeing and health and offer opportunities to obtain support, advice, and even care in the community. In short, they are vital to community wellbeing.

What people said - what's good, what could be improved or developed

There is a good variety of groups working hard across the area to support people for example and venues such as CVW, Risca senior citizens group, TLC, community centres etc. Online support like *Ffrind i mi* help.

Cwtsh guides are good at advertising what is on locally, but need offline too, and with isolated people often lacking confidence, this needs to be complemented by introducing them to groups and supporting them to go to events and activities.

Community (Wellbeing) connectors can help in this regard - having a presence in local GPs to target and support individuals that need it especially around mental health.

There are transport schemes to support people to get to events and support groups e.g. Transport 2Health, but vehicle security/investment and fuel costs make this difficult. CVW work hard to reduce isolation but transporting people is expensive. Transport buddy schemes could help. Some felt access to GPs was "almost impossible" and initiated this NCN statistics on health and wellbeing of people in area might underestimate the real situation.

Need to support people of all ages as isolation is not age specific. Could digital gaming sessions help younger people? Get Cwtsh guides out more to younger

¹⁵ <https://ukhsa.blog.gov.uk/2018/02/28/health-matters-community-centred-approaches-for-health-and-wellbeing/>

people Digital isolation is an issue in the older generation. We need more intergenerational work which will address this across ages.

What could be done together going forward?

- More community events, i.e. concerts, teas, and special events (St David's Day, Community Harvest Festival, Wellbeing Festival) would be beneficial and could specifically help target isolation – Cwtsh Café type of activity for example.
- Advertising at GPs on screens and support at venues – better advertising including digital screens at community venues.
- Schools (IT platform) and churches publicising Cwtsh guides.
- Fuel costs and vehicle support for groups to provide transport - community councils?
- Greater spread of initiatives like Ffrind i mi, (ABUHB), CCBC befriending.
- More collaborative use of centres – providing hot-desking, support remote working and give space and support to young

OUTCOME – Local outdoor spaces support wellbeing and health

Background and context

There is considerable evidence to show connecting with nature and being active outdoors can improve people's health and wellbeing. The benefits include better weight management, helping to prevent chronic diseases such as Type 2 diabetes and hypertension, and improving mental wellbeing and health by reducing stress and anxiety.

Communal outdoor activities also promote and create social connections with others, again supporting and enhancing wellbeing. Such activities can include walking, outdoor exercise activities, birdwatching, mindfulness in nature sessions, and gardening for example.

Community growing can also provide a good source of environmentally sound, healthy, locally-sourced food for people. Moreover, there are studies showing that good quality green spaces can lower levels of stress, reduce depression and anxiety, and improve general wellbeing. They can also improve air quality which is important especially with the incidence of respiratory conditions in our communities.

We are fortunate in the valleys to be surrounded by wonderful natural landscapes as well as excellent urban parks. The Risca area is no exception with its adjacent mountain slopes, Cwmcarn Forst nearby, and parks such as Parc Waunfawr Park.

What people said - what's good, what could be improved or developed

Some felt local outdoor spaces are not utilised by people as much as they could and should be - it was suggested by some that access needs to be improved and better promoted.

Provision of more outdoor activities equipment and bike storage might support greater take up.

There are local walking groups that are excellent and promote greater socialising as well as activity, but people with mobility issues are often excluded from such activities. There is a Nature Prescribing programme now operating - www.naturewellbeing.wales - that promotes and supports outdoor activities for health and wellbeing.

Friends of Waunfawr Park are excellent. Children's activities have been planned for Risca park - we should encourage more activities outdoors for children and young people - summer schools for school holidays?

Reduce red tape to encourage and support community groups and organisations to organise groups or event in an outdoor space

It would be good to provide more outdoor activities on weekends so more people, especially those working, can get involved.

Provision of more outdoor activities equipment and bike storage to support greater take up.

What could be done together going forward?

- Improved and promote access (with better facilities) to outdoor spaces.
- Develop more outdoor activities especially on weekend.
- Support local groups to have greater ownership of underused spaces.
- Work with CCBC to have a delivery plan for local unused spaces - dedicated to and run by community groups - connect them up. Get more volunteers supported and involved – need to know and get funding local council? Cwtsh?
- Community allotments and more growing spaces could be developed.
- Assign dedicated green spaces for youth groups, families, and elderly and/or people with disabilities or mobility issues.
- Encourage more involvement from the town/community councils.
- GP surgeries and others to promote and encourage outdoor activities.
- Outdoor gym equipment in parks.

OUTCOME – Generations have been brought together with increased understanding and young people’s wellbeing is well-supported

Background and context

The health and wellbeing impacts of the pandemic upon people of all ages have been apparent. We know that many older people withdrew from or lost activities that supported their health and wellbeing, including in care homes and sheltered settings.

The disruptive effects on schooling were detrimental for example and young people of school age and beyond suffered with poorer mental health.¹⁶ Moreover, it is sometimes overlooked that young people can experience high levels of loneliness and social isolation, which affects their health. This is also true for older members of our communities, whose confidence too was severely impacted by the pandemic.¹⁷

We need to enable people in our communities to age well and enjoyable healthier lives – this needs to be addressed across all ages. Older people can often be perceived and pigeon-holed as being vulnerable whilst young people can be misunderstood and sometimes marginalised in communities. We need to move from being vulnerable to valued and being marginalised to mainstream.

Intergenerational opportunities can help in this.¹⁸ Linking older adults with younger people can be advantageous for older and younger people. It can give a sense of purpose for all, offer up opportunities for learning new skills, reduce isolation of older adults and indeed young people, engender greater understanding and respect reducing fears, invigorate older adults, and help young people to understand and later accept their own ageing.

What people said - what’s good, what could be improved or developed

It was considered that Risca enjoys good community spirit on the whole with people looking after each other, and excellent groups and organisations enriching community life with their activities. Nevertheless, it was felt more could be done to support people of different ages and to bring them together.

More youth activities are needed with funding for these and support with risk assessments and safeguarding etc. More community spaces could be used and supported for youth activities. May need to move away from or add to the youth club model of provision.

¹⁶ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9883078/>

¹⁷ <https://www.gov.wales/age-friendly-wales-our-strategy-ageing-society.html>

¹⁸ <https://www.tnlcommunityfund.org.uk/media/documents/ageing-better/Ageing-Better-Intergenerational-working.pdf>

Play therapists funded in community groups, churches, toddlers (groups) and youth clubs.

There was strong support for encouraging and developing intergenerational projects linking up schools with older people's venues and activities.

What could be done together going forward?

- Get more intergenerational activities started.
- Greater development of creative activities (supported by CCBC Arts Development and others?)
- More engagement from local police in supporting work with younger and older people.
- More mental health support for young people.
- Need to support youth building which is at risk - the initiative is great but not enough is happening to ensure it works.

OUTCOME – People are no longer digitally excluded

Background and context

For many, accessing the internet and obtaining or using digital information is a common, everyday occurrence. However, for people who have little or no access to online provision, or lack the skills or equipment to do so, it can severely impact on their quality of life.

It can be a barrier to good wellbeing and health since they might not be able to access important and necessary wellbeing or community information such as Melo, or the Dewis or Cwtsh websites, to book GP or other health appointments or make benefit claims.

Moreover, they lack the opportunity to connect with online communities, support networks and simply entertainment which are increasingly part of everyday lives.

In online meetings (ironically) held during the pandemic lockdowns, people in the Risca Cwtsh Collaborative certainly felt that digital exclusion was a major issue that needed to be addressed to ensure people are included in community life and accessing the services and information they need.

What people said - what's good, what could be improved or developed

Risca Library offers good support for people who are looking to improve their digital skills.

It was suggested that more people amongst the older populations are increasingly digitally excluded, which contributes to isolation and impacts upon wellbeing. Suggestions to address this included one-to-one digital support be given in people's homes if house bound. Could there be digital training for community groups with workers from Platform, CCBC, Gwent Carers etc joining local groups to support them and bring back volunteers to libraries to support people with mobile phones, laptops etc. Face to face support was felt to be necessary.

Whilst addressing digital exclusion through improved access and skills is necessary, other delivery methods are still needed at the moment. There is definite need to support people who are not online - local paper copies for those who don't use or have digital access to ensure they are well informed as to activities and support available in the area and beyond.

For example, a lot of SHADE members are not online so Cwtsh guides are printed for them.

What could be done together going forward?

- Volunteers in libraries to support people with mobile phones, laptops.
- Enhanced local councils support through notice for offline information - access to notice boards dotted around the communities
- Information through printed local newsletter delivered through letter boxes.
- Digital display boards in the centre/more local community notice boards in the shopping area - one on Well Pharmacy.
- Opportunity to connect younger and older people with support

5. CONCLUDING COMMENTS AND NEXT STEPS

This outline plan is based on community input to date; from individuals, groups, and some of the services that work in those communities. It is not all encompassing or perfect. Indeed, we fully recognise the need to engage more people to provide their views and input and to involve and enable for people to take action, whether personally or at community level.

We expect some will disagree with some or perhaps even much in this plan. That is warmly welcomed because continued constructive challenge and dialogue is needed to make progress in addressing our wellbeing and health issues together.

No one organisation can address or solve the challenges in our communities – it must be a collective approach and effort. The scope of this outline plan does not *directly* address some major factors that impact health and wellbeing. There is ongoing work being undertaken across sectors to address those wider determinants like housing, education, and employment.

This outline plan must be viewed in that context and complement that work. Effective community voices and informed, empowered communities are absolute necessities. The participatory budgeting process about to commence will provide a chance for local people to get more involved and devise and decide upon ideas and initiatives to address some of the challenges and opportunities.

Next steps and actions

We propose the next steps to take this forward

- Disseminate the outline plan through our channels and through those of the Cwtsh Collaborative to **get wider community and service input and involvement**.
- Use the outline plan as a basis to support and deliver **participatory budgeting** in the area to enable and empower community-led action.
- Create **action areas with measurable delivery plans** based on the indicative outcomes. We propose **locally-led** action groups for each area (these could be combined considering the overlaps). We will encourage and invite people and organisations to be part of these. This will ensure delivery and demonstrable progress in each area and monitor the impact in making a difference.

Alongside this, we will continue seek to improve what we do as an IWN programme through our four work areas.

1. Encouraging place-based collaboration and community-led action

IWN meetings will continue - we will ensure these are more regular on a quarterly basis, but we will support the action area groups outside these.

2. Connecting and enhancing community-based hubs and activities

We will continue to support the development of activities at hubs and encourage enhanced collaborative working between them.

3. Supporting and connecting services and support in an area

We will continue to work within and outside meetings to help connect services and groups. We will work to support local primary care services to link better with the communities and support initiatives such as Nature Prescribing. We will work with colleagues in Public Health on prevention, protection and promotion measures and initiatives to improve people's health in our communities.

4. Enabling easier, inclusive access to wellbeing information in communities

We will continue to provide and develop the Cwtsh website and guides as well as working to provide better offline information, support information portals including Dewis and disseminate local information through the Caerphilly Cwtsh Community Facebook site and other social media channels. We will continue with partners to support initiatives such as men's and women's health and wellbeing events.

ANNEX

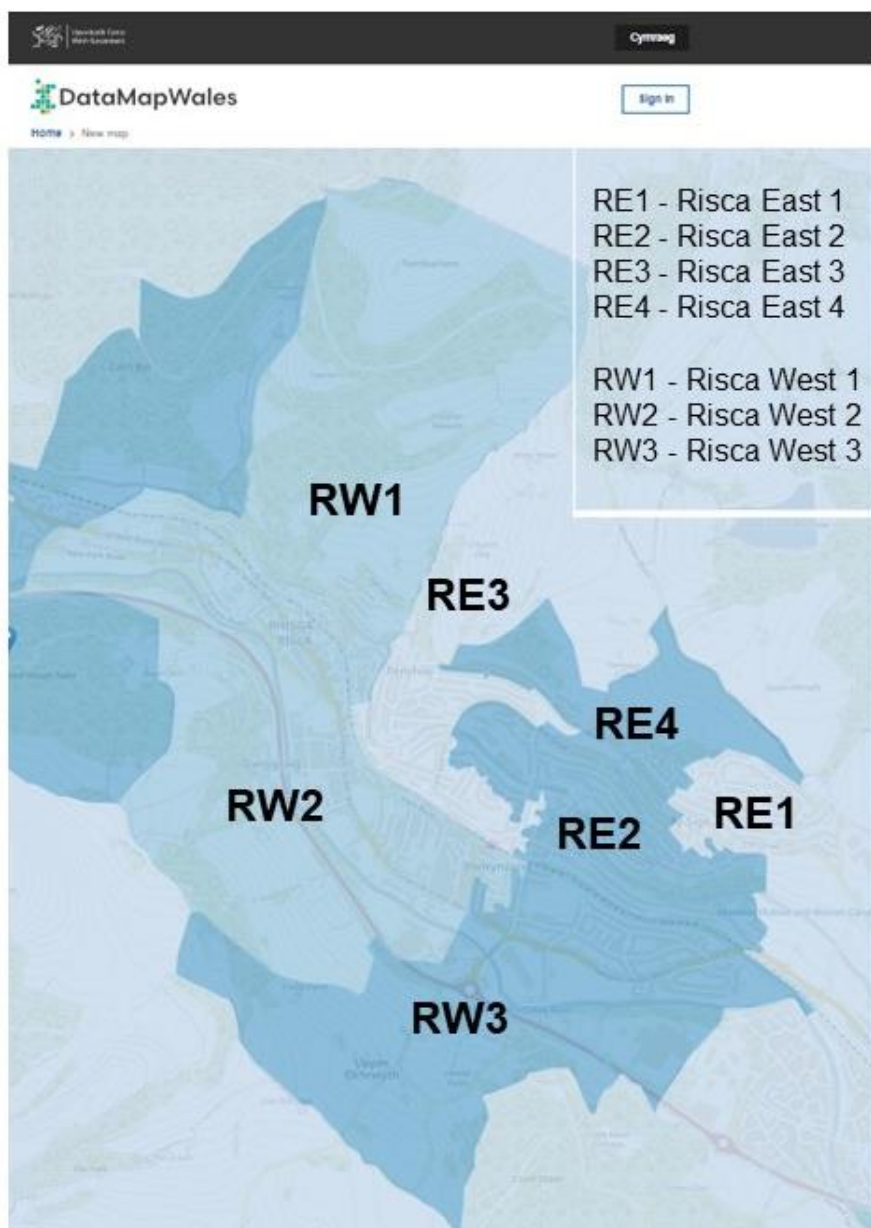
Selected Local Health and Wellbeing Data with links

a. Wales Index of Multiple Deprivation (WIMD) 2019

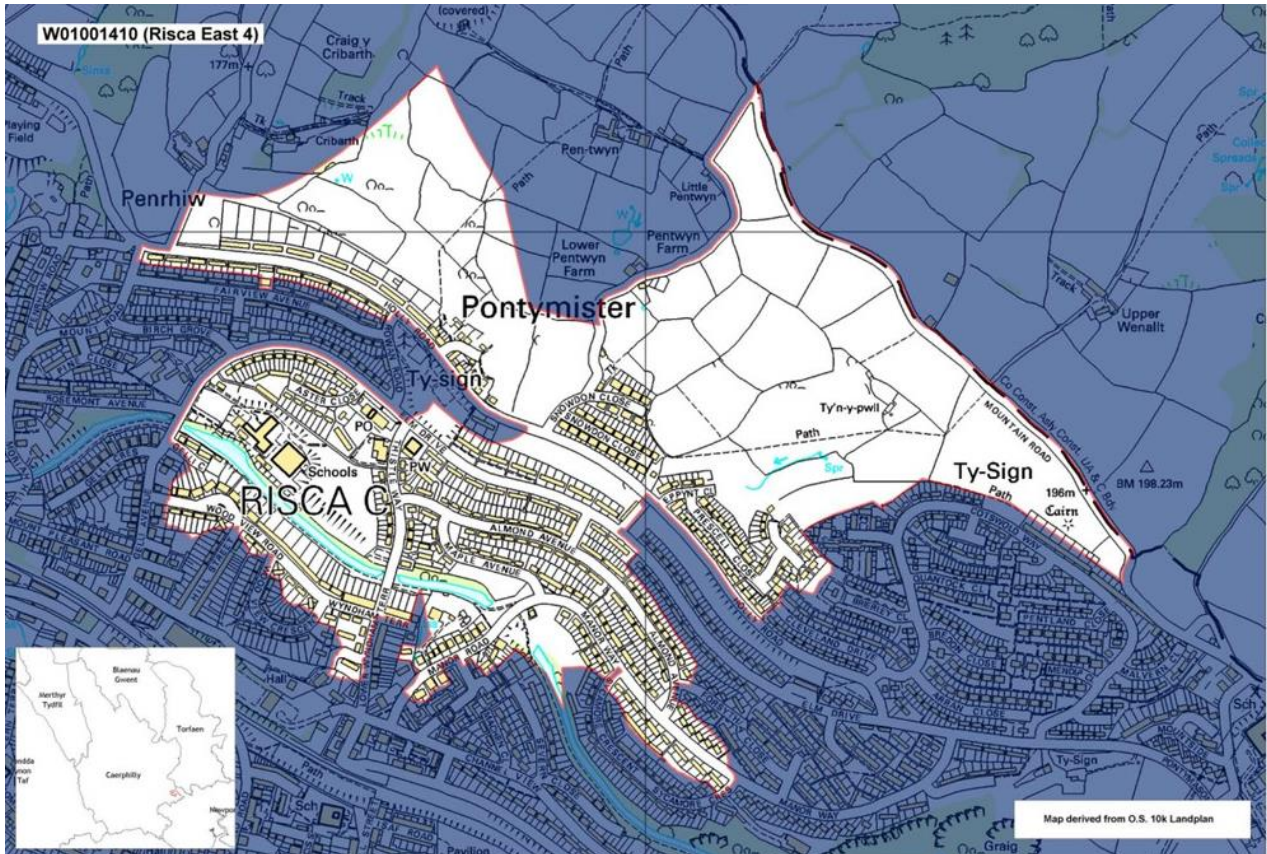
Lower Super Output Area (LSOA) statistics for the health domain of WIMD 2019 for the Risca area.

The purpose of this domain is to measure lack of good health. For full details visit: <https://www.gov.wales/sites/default/files/statistics-and-research/2019-11/welsh-index-multiple-deprivation-2019-results-report-024.pdf>

As shown, Risca has areas of relatively high deprivation adjacent to seemingly more 'affluent' areas. Risca East LSOAs 2 and 4 are within the top 30% LSOAs with respect to health – these comprise primarily the Ty Sign Estate including the Holly Road area. Risca East 4 LSOA is shown as a map below to allow orientation.



https://datamap.gov.wales/maps/new?layer=inspire-wg:wimd2019_health#/



Area LSOAs ranked (2019 WIMD)

LSOA name: Risca East 2 **Rank:** 412/1,909¹⁹
Deprivation group: 30% Most Deprived

LSOA name: Risca East 4 **Rank:** 462/1,909
Deprivation group: 30% Most Deprived

LSOA name: Risca West 3 **Rank:** 495/1,909
Deprivation group: 30% Most Deprived

LSOA name: Risca West 1 **Rank:** 800/1,909
Deprivation group: 50% Most Deprived

LSOA name: Risca West 2 **Rank:** 951/1,909
Deprivation group: 50% Most Deprived

LSOA name: Risca East 1 **Rank:** 986/1,909
Deprivation group: 50% Least Deprived

LSOA name: Risca East 3 **Rank:** 1196/1,909
Deprivation group: 50% Least Deprived

¹⁹ Following the 2011 Census, Wales had 1,909 LSOAs, which increased to 1,917 after the 2021 Census. The majority (1,837) LSOAs were unchanged, 45 were merged and 58 split.

These data indicate some of the weaknesses of the LSOA approach where areas are grouped to produce the required size of an average population of 1500 people or 650 households, which can mask the real picture in an area.

Local intelligence suggests that combining adjacent areas of Risca East 2 and Risca East 4 to produce a different LSOA area would likely produce one that would rank as considerably more deprived in a number of WIMD domains, including health.

In this respect, the larger Middle Super Output Area (MSOA) data might be more revealing. Census 2021 data show that more people in the Risca East area self-report fair, poor, and bad health than the average for Wales and England - 24.3% compared to 17.9%. Interestingly, the rates of GP-recorded mental health conditions were highest in Caerphilly County Borough in the Risca East and West MSOAs in the 2021 census, though, as always, such data should be treated with appropriate caution.

b) Neighbourhood Care Networks IMTP 2020-2023

These are the overall number of patients registered at a GP practice and disease prevalence rates, using disease register data obtained through QAIF. These are lists of patients registered with GP practices who have been diagnosed with the medical condition.

Other relevant related health data can be found [here at Stats Wales](#).

Caerphilly Borough is divided into 3 Neighbourhood Care Networks or cluster areas, namely Caerphilly East, Caerphilly North and Caerphilly South.

- **Caerphilly North NCN** consists of the electoral wards of Twyn Carno, Moriah, Pontlottyn, Darran Valley, New Tredegar, Bargoed, Aberbargoed, Gilfach, St Catwg, Nelson, Ystrad Mynach, Hengoed and Maesycwmmmer.
- **Caerphilly South NCN** consists of the electoral wards of Aber Valley, Bedwas Trethomas and Machen, Llanbradach, Morgan Jones, Penyrheol, St James and St Martins.
- **Caerphilly East NCN** consists of the electoral wards of Abercarn, Argoed, Blackwood, Cefn Forest, Crosskeys, Crumlin, Newbridge, Pengam, Penmaen, Pontllanfraith, **Risca East**, **Risca West** and Ynysddu.

Disease Registers Per 10,000 GP registered population	Indicator	East	North	South
	Asthma	663	783	690
	Atrial Fibrillation	201	242	227
	COPD	218	288	228
	Cancer	268	291	335
	Coronary Heart Disease	346	412	369
	Dementia**	59	63	73
	Depression/Mental health	85	106	93
	Diabetes (Type 2)	637	761	640
	Epilepsy	74	95	78
	Heart Failure	83	106	78
	Hypertension	1567	1787	1644
	Obesity	804	1272	908

a. Caerphilly Health Inequalities Data

Aneurin Bevan Health Board area has been recently designated as a Marmot Region. See - www.gwentpsb.org/en/gwent-marmot-region/

A Marmot Region is a network of local stakeholders committed to tackling inequity through action on the social determinants of health – the social and economic conditions which shape our health. Actions are framed within eight principles:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure a healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill-health prevention
- Tackle racism, discrimination and their outcomes
- Pursue environmental sustainability and health equity together

As part of this work, the Institute for Health Equality produced data packs for each of the Local Authority areas covering the eight principles.

The Caerphilly Pack is available for download at:
www.cwtsh.wales/uploads/marmot/caerphilly_ihe_datapack.pdf