Single Integrated Plan -Needs Assessment

Key Issues

Needs Assessment

• SIP should be based on 'a comprehensive needs assessment...with a specific focus on groups who are disadvantaged, vulnerable, or at risk of becoming vulnerable'

The needs assessment should:

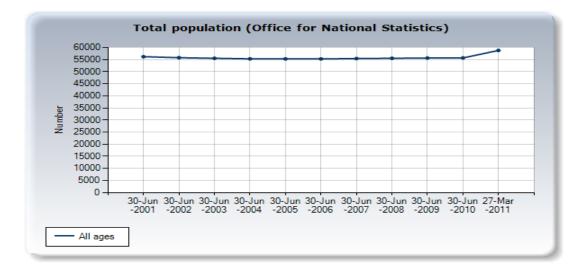
- Show local context through baselines and trend data
- Utilise research literature, evaluation reports and consultation data
- Use spatial evidence to examine which neighbourhoods are most affected by social problems

Framework of needs assessment

- 2. Improving educational outcomes for children, young people and families living in poverty/Improving the skills of young people and families
- 3. More inclusive and cohesive communities
- 4. Improving health outcomes of children, young people and families living in poverty/Preventing poor health and reducing health inequalities
- 5. Ensuring people receive the help they need to live fulfilled lives
- 6. Creating sustainable places for people

Population Overview

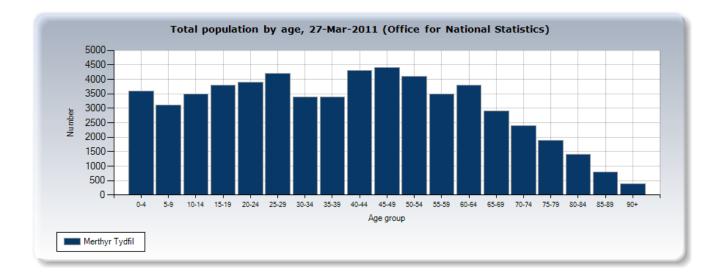
Between the 2001 and 2011 Census, the population of Merthyr Tydfil grew by 4.6% to 58,800. There were 24,300 households, and increase of 4.5% since 2001. The population of Wales grew by 5.3% over the same time period.



- 49% of the population is male, 51% female. This is inline with the gender split nationally.
- The population projections for the area had estimated a slow steady growth of 3.6% to 58,069 by 2033 however the Census 2011 show that we have already passed that projection.

Population Overview

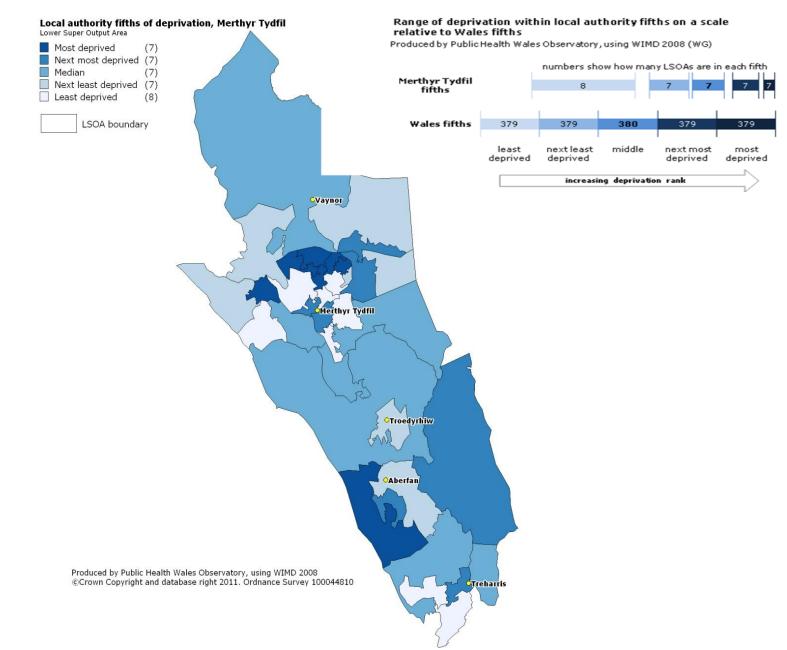
- The overall shape of Merthyr Tydfils population pyramid represents an ageing popultion. For both men and women there has been considerable growth in the number of people in their 60s, as well as growth in the number of people in their 80s and 90s. The base of the pyramid widens from age nine downwards showing an increased number of births in recent years.
- The percentage of the population in Merthyr Tydfil aged 65 and over is 16.7%. This is an increase of 741 (8.2%) people in this age category since 2001. There were 15,800 residents aged 45-64 in 2011 (26.8% of the population), compared with 13,713 in 2001. This is an increase of 15.2%. In 2011 there was an increase in the number of residents aged 15-19, up 1% from 2001 to 3800 people. There has been a decrease in the number of 0-14 year olds, however there was an increase (up 10%) in the number of children under 5.



Population Overview

- The population of those aged 65 years and older is projected to rise from 9,800 in 2011 to 13,800 by 2033.
- The proportion of the overall population aged 75 years and over is projected to increase from 8% to around 12.5% by 2033.
- Merthyr Tydfil has a minority ethnic (ME) population of approximately 3,167 (5.4%) individuals out of a total population of 58,802 (2011 Census).
- Findings from the WIMD 2011 show that Merthyr Tydfil is ranked the most deprived local authority in Wales. Of its 36 LSOAs, one in four (25%) are ranked within the top 10% of most deprived areas in Wales. Overall 78% of the LSOA were identified as being in the top 50% most deprived areas in Wales.
- The three most deprived LSOAs in Merthyr are: Penydarren1, ranked 4 out of 1896
 Gurnos2, ranked 13 out of 1896
 Merthyr Vale2, ranked 17 out of 1896.
- Deprivation fifths for each local authority are produced by ranking all Lower Super Output areas (LSOAs) within the local authority and grouping them into fifths, based on the Welsh Index of Multiple Deprivation (WIMD). The relationship between local and national fifths is illustrated in the map on the next slide.
- The map shows that the LSOAs in Merthyr Tydfil are concentrated towards the most deprived end of the national deprivation scale.

The allocation of Merthyr Tydfil LSOA between the range of most deprived to least deprived across Wales 2011



Key issues

- In 2010 the profile of maternal age in Merthyr Tydfil is very young compared to the rest of Wales, with 35% of all births to mothers aged under 24 years, the 2nd highest percentage of all local authorities. Wales average is 31%.
- Teenage conception rates increased between 2010 and 2011, up from 44.5% to 54.1%, the highest in Wales. In the ten years since 2001 teenage conception rates in Merthyr Tydfil have dropped by 21.2% compared to a 11.3% drop nationally.
- According to the Infant Feeding Survey 2010, smoking during pregnancy is far more common among younger mothers. Pregnant women under the age of 20 were three times more likely to smoke throughout pregnancy than mothers aged 35 or over (10% compared to 32%). This point is particularly important given the age profile of women giving birth in Merthyr Tydfil, and the increased health issues for births to younger mothers.
- Recent reports have suggested that maternal smoking very early in pregnancy may increase the risk of obesity in the unborn child in later life. This provides further support for promoting smoking cessation before rather than during early pregnancy. Further studies are needed to confirm these results.
- The Royal college of Speech and Language Therapists, Manifesto (NAW) identifies that around 9,874 in Wales between the ages of six and ten have a need of S&L therapy and that early intervention policy would have profound benefits for the Welsh economy, delivering net benefits of over £36 million per year.
- The combination of a relatively **high** Low Birth Weight (LBW) rate together with **low** infant mortality rate would appear to indicate that Merthyr Tydfil may experience a higher proportion of children with complex and multiple disabilities, than that indicated by prevalence rates from research.

- Results from the EPPE (Effective Provision of Preschool Education) study shows that one in three children were 'at risk' of developing learning difficulties at the start of preschool, however, this fell to one in five by the time they started school. This suggest that pre-school can be an effective intervention for the reduction of special educational needs (SEN), especially for the most disadvantage and vulnerable children.
- Child poverty is considered to be the greatest threat to children's health and wellbeing and children living in workless households have been shown to be at greater risk of future child poverty.
- According to the HM Revenue and Customs, the most recent data (August c2010) indicates that 28.2% of all children living in Merthyr Tydfil live in families deemed to be in poverty. These levels of families with children deemed to be living in poverty is far greater than the Welsh average of 22.2%.
- Across Merthyr Tydfil as a whole, just over one third of all children aged 0-3 years live in a household claiming one or more benefit(s). This rises to 53.6% of all households in the current Flying Start areas, and exceeds 70% in some Flying Start areas.
- Research from the UK and US provides compelling evidence that family income does have a direct impact on a child's educational attainment and is not only a transmission route for other socio-economic factors such as parental education.
- For example, analysis of the National Child Development Survey by Gregg and Machin found that childhood poverty is strongly linked to poorer economic and social outcomes, such as low income and the likelihood of being unemployed for long spells at 23 and 33.

- However results from the EPPE (Effective Provision of Preschool Education) study show that the link between *poverty and education is not inevitable*. A high quality pre-school provision combined with long duration has a greater effect on literacy than is even possible with a missive increase in household income. The effect on literacy of three years of high quality preschool compared to no preschool provision is 7.78 months. Increasing household income from zero to £67,500 only delivers a literacy effect of 6.25 months.
- The most significant general priority in relation to emotional wellbeing and mental health for children and young people relate to addressing issues that are 'family related'. Specifically, issues related to parenting, deprivation, parental substance and alcohol misuse and family breakdown including domestic abuse.
- For the year ending December 2012, 63% (643) of domestic abuse referrals into Teule MAC, involve families that disclosed they have children.
- In a survey of 356 young people in the Cwm Taf LSB area, (219 from Merthyr Tydfil), found that one in 10 young people felt that their life is not going well, and close to one in three young people indicated that they wished they had a different kind of life. This is not consistent with the Partnership Board aims of promoting the emotional wellbeing and mental health of young people.
- The 2011 CiN census showed that there were 530 Children in Need in Merthyr Tydfil, a rate of 435 per 10,000 people aged 0-17 years. This is the 2nd highest rate of all local authorities in Wales.
- In Merthyr Tydfil Domestic abuse (48%) and parental substance or alcohol misuse (44%) were the most frequently recorded parenting capacity factors, for CIN refarrals in 2011, the highest rates of any local authority

- In Flying Start areas all CIN cases and those involving 0-4 year olds are at their highest levels in the four years since Flying Start began operating. The Flying Start evaluation argues that this illustrates that the extended contact with families occurring under the Flying Start programme in these areas maybe making identification of children in need more possible and potentially earlier before issues escalate.
- Flying Start areas accounted for 27% of all CIN cases in Merthyr Tydfil in 2011, but for cases involving 0-4 year olds the Flying Start areas account for 33 per cent of all cases.
- The number of children on the Child Protection Register as at 31st March 2012 was **105** (62 in 20010/11). There had been a steady decline in the numbers registered over the last three years to the lowest point since March 2007. However 2011/12 has seen a significant increase (69%).
- There are a number of factors which have influenced this including an increase in larger families, the 'trickle down' effect of the 'baby P' case and the realignment of thresholds in order to strike the correct balance between early intervention / prevention and protection. This is a trend mirrored nationally, however the overall trend continues to be an increased number of registrations.
- **74%** of the children on the register are under 9 years of age (a higher percentage than last year **42%** and 2009/10 **60%**). The increase in this age groups registration largely accounts for the overall increase.
- As of October 25th 2012 the authority was the corporate parent to 183 looked after children (LAC). At any one time 70 – 75% of looked after children will be of compulsory school age or in receipt of post 16 education.

- Children in need have a far lower attainment levels than their peers at each of the Key Stages. Children in need who are looked after have slightly better attainment than those not looked after, but both groups are well below the national rate of attainment for all pupils.
- There was a very small improvement in the absenteeism rate from primary school in 2011/12, down from 7.67% in 2010/11 to 7.13% . Merthyr Tydfil is currently the lowest performing local authority in Wales. The Wales average was 6.2%
- Absenteeism and deprivation, using the proportion of pupils entitled to free school meals (FSM) as the proxy, continue to be correlated in Merthyr Tydfil, and across Wales. Schools with a lower percentage of pupils entitled to FSM have a substantially lower rate of absenteeism compared to schools with a higher rate of FSM.
- 2012 is the first year of reporting on Foundation Phase outcomes across Wales. Performance on the Foundation Phase Outcome Indicator (FPOI) in Merthyr Tydfil was below the Wales average and the worst performing local authority.
- At key stage 2, although the Core Subject Indicator (CSI) improved between 2011 and 2012, the Wales average performed better and Merthyr Tydfil was the worst in Wales.
- Children who are obese are much more likely to be obese in adulthood. Current national trends suggest that around 8% of obese 1–2-year-old children will be obese when they become adults, while 80% of children who are obese at age 10–14 will become obese adults, particularly if one of their parents is also obese.

- In Wales, a feasibility study was undertaken to measure the height and weight of children in schools. This found that the rate of overweight or obese children: Reception Year (4-5 years old)- 22%, Year 4 – 27.45%
- Children living in the most deprived areas of Wales had statistically significantly higher rates overweight and of obesity than children living in the least deprived areas.
- Live births is a key driver for future demand for childcare. In Merthyr Tydfil live births have increased (up 3.1%) between 2009 and 2010 faster than for Wales (up 2.8%) as a whole
- The 2011 Childcare Sufficiency Audit (CSA) showed that there were 9.4 childcare places per hundred children in Merthyr Tydfil significantly below the Wales average of 14.2 per hundred children.
- For the year ending December 2012, 63% (643) of domestic abuse referrals into Teule MAC, involve families that disclosed they have children.
- Children who live with and are aware of violence in the home face many challenges and risks that can last throughout their lives: including
- 1. There is increased risk of children becoming victims of abuse themselves.
- 2. There is significant risk of ever-increasing harm to the child's physical, emotional and social development.
- 3. There is a strong likelihood that this will become a continuing cycle of violence for the next generation.

<u>Analysis</u>

- "The first 1000 days" (Cwm Taf Public Health Report) identifies that the period from conception to age two significantly influences the outcomes for children, parents, and families, throughout the life course, and from generation to generation.
- Cwm Taf Local Health Board is exploring with partners the introduction of increased parenting programmes.
- Deprivation impacts significantly on child health. Emergency hospital stays, injuries, obesity and teenage pregnancy have been shown to be significantly higher in areas with high levels of deprivation. Children who grow up in poverty have increased learning and behaviourally difficulties, lower educational attainment, lower income /unemployment as an adult and increased social isolation.
- The evidence suggests that early intervention and extended contact provides the best opportunity to enable children to reach their full potential and reduce the need for later intervention which is often more expensive and more prone to fail those it is working with.
- There is a significant research base on the effective engagement and support strategies for parents in helping to improve the emotional wellbeing and mental health for children and young people. Invariably parenting programmes and support for effective parenting also links to wider issues of addressing specific challenges such as domestic abuse, parental mental health needs, substance misuse, household poverty and worklessness each of which impact on the family.

- Children with no (or limited) pre-school experience have poor cognitive attainment, sociability and concentration when they start school. Pre-school education can help to alleviate the effects of social disadvantage, combating social exclusion and promoting inclusion by offering disadvantaged children, in particular, a better start to primary school.
- David Webster President of the Association of Educational Psychologists reported that the expansion of preschool provision for three and four year olds was easing traditional anxiety around starting primary school by giving children early experience of time away from their parents.
- School readiness can make a significant contribution to later attainment. There is clear evidence that initial achievement on school entry can set the tone for later achievement, by shaping the expectations of teachers, parents and children themselves.
- An evaluation of Family Support Services (FSS) in Merthyr Tydfil showed that children from Flying Start areas tended to be better prepared for school, demonstrated higher levels of social development and had many more experiences than they otherwise would not have had, than other children.
- The early contact made by health visitors in Flying Start areas is an example of how early intervention can help to identify 'risk' factors. 33% of all Children in Need referrals were made by health visitors are from Flying Start areas.
- Evidence from the National Institute for Health and Clinical Excellence advocates for partnership working and clear leadership to tackle the obesity epidemic. 2-5 years is a key age at which to establish good nutritional habits, especially with parents involved. The importance of consultation with and the active involvement of children and young people is also advocated.

- Disadvantaged children in particular can benefit significantly from good quality preschool experiences, especially if they attend centres that cater for a mixture of children from different social backgrounds. In addition the research pointed to the benefits of pre-school in reducing the 'risk' of Special Education Needs.
- The child who has a better Home Learning Environment, goes to a quality pre-school setting and who then goes on to attend a more effective primary school has a combination of 'protective' experiences that reduce the risk of low attainment and also benefit social/behavioural development.
- In addition, it is likely that specially targeted interventions for children who are identified as particularly behind their peers in cognitive or social/behavioural development at the start of primary school will also be necessary to prevent a widening of the gap during Key Stage 1 and 2.
- The further and higher education institutions in Heads of the Valley Education Programme (HOVEP) will support the work of Flying Start and Families First through offering parental engagement programmes and opportunities for workforce development and training.
- Absenteeism is a symptom of disengagement from school rather than a cause of it. Disengagement may begin as early as primary school, when students fail to become involved in either the academic or the social aspects of school. The key to improving school attendance is to notice these behaviours and intervene at a stage when there is a chance for correction.
- There is a relationship between the proportion of pupils entitled to free school meals and the rate of absenteeism. It suggests that in general schools with a higher proportion of pupils entitled to free school meals have higher absenteeism rates

- The IHDP study found that poverty was the biggest single factor affecting cognitive development in its 'risk factors' theory and that poverty increased the chances of other risk factors being present, for example poor nutrition and a poor home learning environment.
- The Effective Provision of Pre-School, Primary and Secondary Education (EPPSE 3-16) project is a large scale, longitudinal, mixedmethod research study that has followed the progress of 3000+ children in the UK since 1997 from the age of 3 to 16 years.
- Results from the EPPE study show how high quality provision enhances the outcomes of an earlier start. The effect on literacy of three years of low quality preschool compared to no preschool provision is 4.6 months. This shoots up to 7.78 months for three years of high quality preschool provision.
- The combination of high quality and long duration has a greater effect on literacy than is even possible with a massive increase in household income. Increasing household income from zero to £67,500 only delivers a literacy effect of 6.25 months

- The EPPSE research provides new evidence concerning the *combined* effects of Home Learning Environment (HLE), preschool and primary school in shaping educational outcomes. The three key findings from the study are:
- 1. Home learning: The quality of the home learning environment (HLE) is more important for intellectual and social development than parental occupation, education or income. What parents do with their children is more important than who parents are.
- 2. **Pre-school.** The effects of pre-school, have a powerful long term impact on children right up to the age of 11-14. However it is the quality and effectiveness of the pre-school attended that predicts better outcomes (intellectual/cognitive and social/behavioural development).
- **3. Primary school**: The academic effectiveness of primary school can continue to influence students' longer term academic outcomes at secondary school. A primary school with high academic effectiveness had significant effects for English, Science and Maths, but the positive benefits were stronger for maths and science.
- One point on which all early years research studies agree is the overwhelming importance of *high quality* provision for positive child outcomes.
- The nature of quality provision depends on the age of the child. For under threes, affection, communication and responsiveness have been identified as particularly important. For older children, learning opportunities and the educational aspects of the environment become increasingly significant.

- One of the most important determinants of whether children of different ages receive appropriate and responsive education and care is the level of staff qualification. The Cost, Quality and Outcomes study demonstrated that better qualified teachers provided better quality care in the "child/teacher closeness" aspect of care and that this produced better test results in primary school.
- The study concluded: 'The quality of child care is primarily related to high staff-to child ratios, staff education, teacher turnover, administrator's experience, and their effectiveness in curriculum planning. In addition, teachers' wages, their education and specialization training were the most important characteristics that discriminate among poor, mediocre, and good quality centers.
- In order to help reduce the achievement gap for multi disadvantaged groups, actions to improve the Home Learning Environment, pre-school and primary school experiences will be needed, since improvements to any one in isolation would be insufficient to boost outcomes on its own
- As a report by the National Centre for Social Research into local childcare markets commented, 'sustainability might be particularly threatened by lack of local employment opportunities for mothers. This is likely to be an issue in most deprived areas, with the success of efforts to expand childcare provision being largely dependent on the success of employment regeneration strategies.

What does this mean?

- Improve life expectancy and healthy life expectancy
- Health inequity refers to those inequalities that are deemed unfair and also avoidable, and involve a moral judgement.

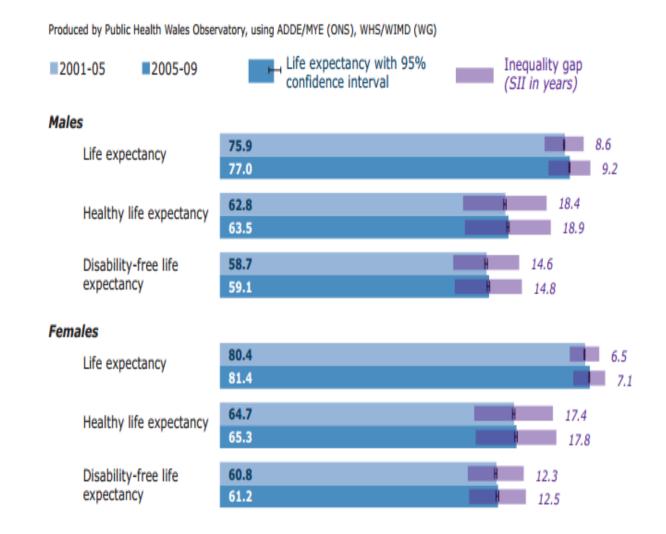
What we know?

- The 2011 WIMD health domain shows that 44% of the LSOA in Merthyr Tydfil were ranked as being within the top 10% of most deprived areas in Wales. This level of deprivation is reflected in our mortality rates and life expectancies across the borough.
- The pattern of child poverty is unevenly spread across different wards in Merthyr. Almost a third of (29.1 percent) of all children in Merthyr Tydfil live in poverty. This rises to half of the children living in Gurnos ward and over a third in Penydarren, and 35.4% in Merthyr Vale.
- Life expectancy at birth is a widely used statistical measure of the average expected years of life for a newborn based on currently observed mortality rates. As such, life expectancy at birth is also a measure of mortality across all ages
- Life expectancy at birth in the UK increased in each three-year period between 2004– 06 and 2008–10, rising from 77.0 to 78.2 years for males and from 81.3 to 82.3 years for females.
- Among the constituent countries England had the highest male and female life expectancy in each period, peaking at 78.6 and 82.6 years respectively in 2008–10. Scotland had the lowest life expectancy at birth in each period, reaching 75.8 years for males and 80.4 years for females in 2008–10.
- Life expectancy at birth in Wales, for both males and females, was second highest 77.6 years for males and 81.8 years

- Male life expectancy shows the greatest inequality across Great Britain. Overall the south of England has a longer life expectancy than Wales, northeast and northwest England, and Scotland. Female life expectancy does not demonstrate the same degree of variation
- Although life expectancy at birth has increased across Wales between 2000-02 to 2008-10, there is a clear gradient between the most deprived and least deprived areas. People living in areas of high deprivation have lower rates of life expectancy than people living in areas with less deprivation.
- Of the local authorities in Wales, Ceredigion had the highest life expectancy at birth for both males and females. Merthyr Tydfil had the lowest life expectancy in Wales for males and Blaenau Gwent the lowest for females. Life expectancy figures at local authority level in Wales differed by 5.4 years for males and 4.2 years for females. This difference between the highest and lowest local authority is smaller than the previous year (2007-09) but higher than the early 90's.
- Health inequalities are particularly stark when looking at healthy life expectancy. Healthy life expectancy (HLE) at birth estimates the number of years a person can expect to live in good health. HLE is useful in determining the health care needs of a population.
- There are also inequalities in the quality of life in terms of disability-free life expectancy. Disability-free life expectancy (DFLE) at birth estimates the number of years of life expected to be free from a limiting long-term illness or disability. People in the least deprived areas experience a substantially higher proportion of their life in good health than those in most deprived areas

- The Slope Index of Inequality (SII) measures the absolute gap in years of life expectancy between the most and least deprived, taking into account the pattern across all fifths of deprivation within the Local Authority.
- The SII shows, for example, that the gap in life expectancy in males between the most and least deprived fifth is nearly 9.4 years. When considering healthy life expectancy the gap is even greater at around 16.2 years. This is set out in Figure 1 overleaf.
- The inequalities present within Merthyr Tydfil are also present in every other local authority and LHB area in Wales, and the gap between least and most deprived is widening.
- Within Merthyr Tydfil there are huge variations in LE and HLE across our 11 wards. In Vaynor overall life expectancy is 79.4 years compared to 72.7 years in Merthyr Vale just a few miles away. Disparity in healthy life expectancy between wards is even starker, ranging from 56.6 years in Gurnos, to 66.3 years in Vaynor
- All cause mortality rate is the 2nd highest of any local authority area in Wales and is significantly above the national average. When mapped by MSOA, five of the seven areas in Merthyr Tydfil have a rate significantly higher than the national rate. The highest rate is in Gellideg.

Figure 1 Life expectancy, healthy life expectancy and disability-free life expectancy, with inequality gap, males and females, Wales, 2001-05 and 2005-09



- Quality of life and health related risk behaviours are worse in Merthyr Tydfil than the Wales average, which has a detrimental effect on our population.
- The Welsh Health Survey, 2010/11combined, shows that for adults in Merthyr Tydfil :

24% were smokers (Welsh average 23%)
43% drink above recommended daily guidelines (Welsh average 44%)
29% binge drink, (Welsh average of 27%)
12% were being treated for a mental illness (Welsh average 11%)
64% were 'overweight or obese', (significantly above the Welsh average 56%).
31% eat 5 portions of fruit and vegetables a day (Welsh average 34%)
29% meet the physical activity guidelines (Welsh average 30%)

 The Health Behaviour in School-aged Children Survey (HBSC) 2010 indicated that for respondents aged 11 – 16 in Cwm Taf:

10% had smoked in the last 30 days (Welsh average: 12%)
5% had smoked at least once a week (Welsh average: 16%)
28% ate fruit daily (Welsh average: 31%)
23% ate fresh vegetables daily (Welsh average: 31%)
56% ate breakfast daily during weekdays (Welsh average: 56%)
41% are physically active at least 5 days a week (Welsh average: 44%)
30% consume sugary drinks daily (Welsh average: 26%)
83% self rated as being satisfied with their life.

- In Wales, a feasibility study was undertaken to measure the height and weight of children in schools. This found that the rate of overweight or obese children: in Reception Year (4-5 years old)- 22%; Year 4 – 27.45%;
- The study also found that children living in the most deprived areas of Wales had statistically significantly higher rates overweight and of obesity than children living in the least deprived areas.
- Children who are obese are much more likely to be obese in adulthood. Current national trends suggest that around 8% of obese 1–2-year-old children will be obese when they become adults, while 80% of children who are obese at age 10–14 will become obese adults, particularly if one of their parents is also obese.
- Foresight 2007 report that was commissioned by the UK Government highlighted that taking into account current trends by 2050 60% of men, 50% of women and 25% of children will be obese.
- 64% of adults in Merthyr Tydfil are overweight or obese compared to Wales average of 56%, including 28% who are obese, the highest of any local authority in Wales. In addition the rates of obesity are increasing quicker than national rates
- The greatest consequences of obesity relate to the health of affected individuals. There is good evidence that obesity is a risk factor for many chronic diseases and is overtaking smoking as a preventable cause of disease and premature death.

- Conditions such as Type II diabetes, coronary heart disease, cancers, osteoarthritis and back pain also affect children. There are also social and psychological consequences of obesity such as stigmatisation, discrimination, prejudice, poor self image, low self confidence and depression.
- In Wales Chlamydia is the most common bacterial Sexually Transmitted Infection followed by gonorrhea
- Young people and STIs : are an important risk group for acquiring a STI are more likely to have higher numbers of sexual partners use barrier contraception inconsistently are more likely to become re-infected after initial diagnosis and treatment for a STI.
- Teenage conception rates in Merthyr Tydfil increased by 21.5% between 2010 and 2011, up from 44.5 conceptions per thousand women aged 15-17 in 2010 to 34.2 in 2011, the highest rate in Wales. However in the ten years since 2001 teenage conception rates in Merthyr Tydfil have dropped by 46.5% compared to an 24.8% drop nationally
- Over the past 30 years there has been an emergent idea in public health that health can be improved and protected by focusing on the place and environment. This has become known as the settings approach to health
- Merthyr Tydfil has a significantly higher proportion of older housing stock than elsewhere in Wales. According to the 2001 Census there are currently 24,596 houses in Merthyr Tydfil; 52% are terraced houses with 45.4% of all dwellings built pre 1919. Nationally this figure is about 30 per cent, while in England only 21 per cent of houses are of that vintage.

- 39% (7,900 homes) of private sector properties score a category 1 hazard on the HHSRS (housing health and safety rating system). The most significant hazards in Merthyr Tydfil are those associated with the threat of excess cold, falls on stairs and falls on level surfaces.
- Estimates suggest that one in three people aged 65 years and over experience a fall at least once a year rising to one in two among 80 year-olds and older.
- Admissions for over 65's due to falls expected to increase by 50% in next 20 years, A&E attendance to increase by 55%

Analysis

- The first 1000 days of life, from conception to age two significantly influence the outcomes for children, parents, and families, throughout the life course, and from generation to generation.
- Children born into secure and loving families where their physical and emotional needs are met are more likely to grow up to be better educated, more financially secure, and healthier adults and they are more likely to give their own children the same good start in life.
- Children who grow up in poverty and in homes where education is not valued, have poorer health, increase in learning and behaviourally difficulties, lower educational attainment, lower income/unemployment as an adult and increased social isolation.
- It is well established that **inequalities** result in poor health, social, educational and economic outcomes across the whole of the life course for parents and children, and trap many of the most disadvantaged people in a cycle of deprivation.
- Disadvantage can start before birth and accumulate throughout the life course. Action to reduce health inequalities must therefore start before birth and be followed up through infancy and school age for maximum impact.
- Merthyr Tydfil faces many socio-economic challenges and according to the latest WIMD Index 2011, is the most deprived local authority in Wales,

- Inequality in cause of death paints a stark picture of an association between lower socio-economic status and higher death rates.
- Throughout all major causes of death there is a social gradient, which is higher for deaths among young people (under 75s) and particularly high for deaths from smoking and deaths due to alcohol. Obesity is more common in areas of high social deprivation.
- The National Obesity Observatory reported that a recent comprehensive review of 57 international prospective studies found that Body Mass Index (BMI) is a strong predictor of mortality among adults. Overall, moderate obesity (BMI 30-35 kg/m2) was found to reduce life expectancy by an average of three years, while morbid obesity (BMI 40-50 kg/ kg/m2) reduces life expectancy by 8-10 years. This 8-10 year loss of life is equivalent to the effects of lifelong smoking.
- Social determinants underlie these health gradients. Sometimes called the 'causes of the causes'. An individuals experiences in early years, education, opportunities for employment, social support, transport and access to healthy food, all contribute to a population pattern of earlier death in poorer communities.
- The 'causes of the causes' contribute to social and psychological stress, creating anxiety and reducing the ability to make positive lifestyle choices that increase long term survival. This cycle in turn adversely affects mental and physical health
- Educational attainment (literacy/numeracy) has always been a key public health objective. It is the building block to understand risk and make changes, to help lift people out of poverty by increasing opportunities for high level employment. Education is at the heart of low cost quality healthcare.

- National Institute for Health and Clinical Excellence (NICE) sets standards for quality healthcare and produces guidance on medicines, treatments and procedures.
- Evidence from NICE advocates for partnership working and clear leadership to tackle the obesity epidemic. The importance of consultation with and the active involvement of children and young people is also advocated.
- LSB partners can work collectively to make a difference to healthy life expectancy and contribute to reducing inequalities.

<u>Key issues</u>

- Since the 2001 census the population of Merthyr Tydfil has gone through a period of decline and then growth, which is likely to be linked to the arrival of new residents from other regions of the UK and from outside the UK. On the night of the Census 2011 the population was 58,800, an increase of 4.5% (2593) since 2001.
- Merthyr Tydfil has a minority ethnic (ME) population of approximately 3,167 (5.4%) individuals out of a total population of 58,802 (2011 Census).
- Poles, Portuguese, Indians and Chinese account for the largest represented minority Ethnic (ME) groups in the Borough, with smaller numbers of Pakistanis, Bengalis, Hungarians and Filipinos.
- Findings from the Merthyr Tydfil Community Cohesion and Safety survey 2011 indicate that:

68.3% respondents agreed that their local area is a place where people from different backgrounds get on well together. The 2009-10 pilot of the National Survey for Wales found that 87% of respondents agreed with this statement.

69.1% of respondents felt that they belonged to their local area. The 2009-10 pilot of the National Survey for Wales found that 87% of respondents agreed with this statement.

• Findings from the 'Community Conversation' (information gathered for MADF) highlights some of the issues faced by different communities in the borough. For e.g.

People with **physical disabilities** commented that many buildings were not accessible, and in organisations which had invested in equipment, staff were often unaware of how to use the equipment, or equipment was not always serviced or kept in working order.

Young people talked about the lack of employment opportunities, being unable to afford to use the new facilities at the Merthyr Leisure village, lack of public transport in the evenings.

The LGBT community talked about the lack of access to support networks and the absence of symbols being displayed locally to evidence safe places that would be welcoming of them.

- Between April and March 2011/12 there have been significant reductions in the number of Theft From Motor Vehicle (down 33%, 193 fewer offences) and Theft of Motor Vehicle (down 40%, 103 fewer offences) offences, despite these reductions Merthyr Tydfil remains a hotspot area for vehicle crime.
- Between April 2012 and March 2013, there were 1021 domestic abuse referrals into the Teulu Multi-Agency Centre (who provide support for domestic abuse victims), which is a decrease of 24% (324) on the same time last year.
- It is estimated that 22% (22) of most serious violent offences are domestic violence. The Merthyr Tydfil MARAC has the highest rate of high risk domestic abuse referrals of all MARACs in the Wales, and the 3rd highest in the UK.

- In Merthyr Tydfil the breakdown of a relationship, and specifically those involving domestic violence, is the biggest cause of families moving into temporary accommodation. 53% of households were deemed vulnerable due to domestic violence in 2011/12, this compares to the Wales average of 13%.
- For the year ending December 2012, 63 per cent (643) of domestic abuse referrals into Teulu MAC, including incidents recorded via PPD1, involve families that disclosed they have children. This represents a decrease of 9 per cent on 2011's figures, and is a cause for concern as this figure is much lower than expected. It is likely that a lot of victims do not disclose they have children due to fear of children services becoming involved
- The number of people aged 65 years and over living alone in Merthyr Tydfil is predicted to rise from 4,350 in 2011 to 5,960 in 2030 (+ 37%).
- Older women are more likely than older men to live alone and the percentage increases with advancing age. Twice as many women live alone in the over 75 age group compared to men
- In Wales 43 per cent of people aged 75 and over live alone, this is lower than the proportion of older people living alone in Scotland, England and most English regions (2001 census)
- Merthyr Tydfil has the second largest percentage (46.9%) of people aged 75 years and over living alone (2001 Census).

- 17% increase in number of single occupied properties, and a 27% increase in single parent households by 2021 in Merthyr Tydfil.
- Homelessness is one of the most extreme forms of social exclusion. MTCBC action prevented homelessness for at least six months for 79% of potentially homeless households in 2011-12.
- The number of people presenting themselves as homeless for 2011/12 was 329, and decrease of 126 compared to 2010/11.
- Whilst the incidence of 'homelessness acceptance' has gradually fallen over the last few years, (20.6% in 2011/21 from 43.7% in 2006/07) the number of applications has remained approximately the same. Targeted prevention in certain areas is vital if homelessness is to be minimised in Merthyr Tydfil.
- 19 homelessness applications between August 2009-May 2010, claimed to be sleeping rough.
- 300 people living in Merthyr Tydfil have some kind of visual impairment, 220 people have some kind of hearing impairment and 135 people are registered as having a learning disability. It is estimated that there are approximately 8,600 people between 18 and 65 with a physical disability.
- It is estimated that some 12% of the population are being treated for a mental health condition, compared to the Wales average of 11% (WHS 2010 and 2011).

- 76.2% of respondents felt satisfied (30.7% very satisfied and 45.5% fairly satisfied) with their local area as a place to live. Community Cohesion and Safety survey 2011.
- Findings from the SWP Police Community Satisfaction Survey 2012 show that it is necessary to continue to improve public confidence to report hate crime. Of the respondents (110) who indicated they had been a victim of hate crime over 70% had not reported it.
- Police Strategic Assessment 2011 identified ASB related to the town centre and the daytime economy as an issue in Merthyr Tydfil.
- 36% of respondents to the 2012 Police Community Satisfaction Survey in Merthyr Tydfil said that drug use / drug dealing was a very big / fairly big problem in their area.
- 30% said that drunkenness was a very big / fairly big problem in their area.
- 65.5% of respondents believe that crime levels have remained the unchanged in the last 12 months
- During 2011/12 there were 924 referrals from Merthyr Tydfil to substance misuse services, 65.4% presented with alcohol as the main substance.
- Merthyr Tydfil is ranked the highest of the 22 local authority areas for estimated alcohol misuse referrals and the second highest for drug misuse referrals. (2011/12)

<u>Analysis</u>

- The 2009 Community Cohesion Strategy for Wales identified a clear association between basic skills and cohesion and the need to break down the circle of intergenerational disadvantage of people with poor literacy and numeracy.
- Findings from the Effective Provision of Preschool (EPPE) project indicate that preschool whilst not eliminating differences in social backgrounds, can help to promote better development and can thus help to combat social exclusion.
- 'Early intervention to provide a better start in life remains the best lever for tackling long term social inequality' (Social Exclusion Unit (2004) *Breaking the Cycle of Social Exclusion*, ODPM).
- Preventing early behavioural problems escalating into antisocial behaviour and associated negative conduct. such as criminality and drug abuse provides a huge return on public investment. Cost-benefit studies of US early intervention programmes indicate that the most significant benefits come from savings to the criminal justice system.
- The findings of the Merthyr Tydfil Community Cohesion and Safety survey suggest that there is a need to strengthen community resilience and integration between people from different backgrounds.

More inclusive and cohesive communities

- The growth in the local population is mainly driven by migration, from within the UK and international. There are also certain 'risk' factors present which may put pressure on community cohesion such as economic decline and deprivation, competition for low skilled jobs, and pressure on the local housing stock.
- According to the British Crime Survey (BCS), the risk of being a victim of crime is lower for households in least deprived areas compared to most deprived areas. This would suggest that the areas identified in the WIMD 2011 as being most deprived in Merthyr Tydfil would have a higher degree of likelihood for crime and disorder to occur.
- By tackling the particular areas of deprivation that have been identified as above average, there should be a knock on effect of reducing crime and disorder in the long term. This is a perfect example of how other non-enforcement partner agencies can contribute to crime and disorder reduction.
- Visibility has a large part to play in peoples perceptions of safety and feelings of reassurance that police and local authorities are tackling the issues that are of concern. The Police Strategic Assessment 2011, identified that individuals involved in drugs, alcohol, and retail crime hang around the Merthyr town centre which members of the public find intimidating, lowering perception levels. The image of the town centre is very crucially entwined with the regeneration plans for Merthyr Tydfil.
- Despite significant reductions in the level of crime and disorder locally, findings from the Police Community Satisfaction Survey 2011 show there is a need to communicate this message more effectively with people living in the borough.

More inclusive and cohesive communities

- Vulnerable groups such as the elderly, lone parents, homeless, ethnic minority groups, carers, people with disabilities etc, are at increased risk of loneliness and social exclusion. The World Health Organisation has rated loneliness as a higher risk to health than smoking and as great a risk as obesity.
- People with good social networks live longer, are less likely to report being depressed, and are less susceptible to infectious illness than those with poor networks.

<u>Key issues</u>

- The 2011 WIMD education domain shows that 25% of the LSOA in Merthyr Tydfil were ranked as being within the top 10% of most deprived areas in Wales.
- In 2012, Merthyr Tydfil was the worst performing local authority in Wales for the Foundation Phase, key stage 2 and key stage 4, ranking 22/22/22, against other authorities in Wales. In key stage 3, Merthyr Tydfil's performance improved slightly in 2012, (21/22) but continues to be below the LA's FSM ranking.
- The percentage of learners in Merthyr Tydfil's secondary schools gaining the level 3 threshold improved at a similar rate to Wales in 2011. However, provisional data for 2012 suggests an increase significantly greater than for Wales as a whole, with performance now just below the Wales average, and ranked 14/22.
- Performance in 2012 saw a sharp drop at key stage 4 from 39.3% to 31.9% on the level 2 threshold including English/Welsh and Maths and from 38.1% to 31.1% on the Core Subject Indicator. Merthyr Tydfil had the lowest performance in Wales for both indicators
- At KS4 CSI, the gap in performance between FSM and non-FSM pupils got wider (by 7.5 percentage points) reversing the improving trend of the previous 3 years. At the same time, the average across Wales improved
- For all but the Level 1 threshold the gap between FSM and non-FSM pupils has widened over the last 3 years (non-FSM pupils have improved whilst the figure for FSM pupils has declined). For the Level 2 including E/W and Ma and CSI the gap has doubled, with only 11% achieving these indicators in 2011.

Leaving without a recognised qualification

- Two 15 year old students left full-time education without a recognised qualification in 2011/12. This represents 0.3% of that cohort, and is below the Welsh average (0.4%) and an improvement in performance on 2010/11 when 10 pupils (1%) left without a recognised qualification. We are currently ranked joint 4th best performing LA.
- The NEETs (not in education employment or training) figure for year 11 has reduced over the 5-year period from 7.8% in 2008 to 6.2% in 2012, representing a fall of 16 from 60 in 2008 to 44 in 2012. Wales average 4.2%.
- The five year trend for year 13 NEETs shows a steady decline from 8.3% in 2008 to 4.3% in 2012. Wales average 5.1%
- The percentage of year 11 **pupils staying in education** has increased slightly from 73% in 2008 to 77% in 2012. However, the figures represent a **slight decrease** in numbers of 24 from 561 to 537.
- The percentage of pupils in Year 13 continuing in some form of full time education has **decreased** over the period from 79.8% in 2008 to 77.3% in 2012.

School Banding

• Two secondary schools in band 2 in 2011, one in band 4 and another in band 5. Weaker performance across all four schools in nearly all indicators in 2012 is likely to impact negatively on banding in all four schools

School attendance

- 2011/12 saw further improvements in secondary school attendance rates, moving from 11th to 10th out of the 22 local authorities. The overall rate of absenteeism from secondary schools is 7.6%, 0.2 percentage points below the Wales average.
- The rate of unauthorised absence for 2011/12 is 1%, below the Wales average of 1.4%.

Qualifications for working aged adults

- NOMIS data reported Merthyr Tydfil as having 14.8% of working aged adults with no qualifications compared with 11.4% Welsh average. The percentage has decreased by 11.7% since 2004 which compares favourably with the Welsh average decrease of 6.1%. This improvement has also seen Merthyr Tydfil improve from being the worst performing Welsh authority to currently being 18 out of 22 local authority areas.
- In 2012 59% of persons with no qualifications (who are not in full time education) are either unemployed or economically inactive. This compares to 26 per cent across the population as a whole.

- In 2012 the proportion of working age adults who held a Level 2 and above qualification was 69.3% compared to 75% nationally. There has been a positive improvement of 16.1% over a ten year period.
- Data from the 2010 Welsh Local Labour Force Survey showed that 15 per cent of employees across all industries in Wales had received in-work training in the last four weeks. Across the 22 local authorities this ranged from 18.4 and 18.3 per cent in Wrexham and Cardiff, to 10.6 and 10.4 per cent in Caerphilly and Merthyr Tydfil. Between 2007 and 2010 Merthyr Tydfil has had the lowest proportion of employees receiving in work training in the last four weeks.
- In 2012 the proportion of working age adults holding level 4 qualifications or above was 26.5%, nationally it was 33%
- Using the percentages from the National Adult Basic Skills Survey Wales 2010, we can estimated numbers of adults living in Merthyr Tydfil with basic skills Need: Literacy (9655) and numeracy (20468).
- Vulnerable Family research indicated that 54% of the 300 most vulnerable families in Merthyr Tydfil do not hold an academic qualification.

<u>Analysis</u>

- There is a wide body of research on the social and economic outcomes associated with educational attainment. A review of these studies reveals that individuals who fail to gain qualifications are clearly disadvantaged in many aspects of life—from the jobs they obtain and the wages they earn to their sense of physical and emotional well-being. Society is also disadvantaged when students drop out, since studies show that dropouts are less likely than graduates to contribute to the social and economic well-being of the country.
- Increasingly economies are being transformed into high skill economies. Data from Welsh government shows that the impact of the recession on employment rates has affected those with no or low qualifications most.
- Literacy and numeracy are fundamental skills required to function and progress in society, both professionally and socially. The 1999 Moser Report identified the numerous impacts that poor basic skills can have upon personal earnings and families, upon communities and society, and for the economy.
- The evaluation of Skills for Life in England noted "There is a clear association between poor basic skills and learning disabilities, and poor basic skills and poor health." The Moser report also noted that there is a link to both physical and mental illness' from poor literacy and numeracy.
- Since the National Survey of Adult Skills in 2004, the basic skills agenda has been highlighted fairly consistently as one of the key challenges facing Wales, both in terms of education and lifelong learning and how the issue relates to wider policy concerns, such as economic development, social inclusion and poverty reduction.

- Welsh government data shows the change in employment rates between 2001 and 2011 is smaller for higher qualification levels, suggesting the impact of the recession on employment rates has affected those with no or low qualifications most.
- There is a body of evidence to illustrate the importance of family programmes and the positive impact of improving adult literacy and numeracy skills to aid prevention of the intergenerational transfer of poor literacy, language and numeracy skills. It has been found that family learning has a wider positive impact by enhancing confidence and greater self esteem for children and their families within schools and the wider community.
- Evidence from research into school achievement highlights the drop off in achievement among disadvantaged children during the long holidays. The cumulative effect of five summers during elementary school was that low socio-economic status (SES) children gained less than one point in reading and lost eight points in maths. During the same period, high SES children gained 47 points in reading and 25 points in maths. This is known as the 'faucet effect'. The education tap is turned off for disadvantaged children during summer holidays.
- This 'faucet effect' can be overcome by a quality home learning environment. Home circumstances have the most significant impact on a child's progress and achievement. Pupils achieve higher results and are more likely to succeed when parents are involved in their education and provide continued support for learning.

Poverty doesn't equal destiny in education. It is possible to suceed against the odds.

- The OECD has recently published a study, which found that as many as a third of children from disadvantaged backgrounds can overcome socio-economic disadvantage to succeed at school.
- A new study from EPPSE and analysed by the Institute of Education finds that parent power, parent support, high quality pre-school education and high quality teachers help disadvantaged children get ahead.

The implications of the study according to the IOE are:

- 1. Recruit the best teachers to schools in disadvantaged areas;
- 2. Assess children early and provide additional support classes and teaching where necessary;
- 3. Emphasise "active cultivation" and "parent power" in parenting classes and programmes;
- 4. Promote "communities of learning" in the classroom so students can take responsibility for their and others' learning;
- 5. Schools and communities should provide extra educational experiences especially for "vulnerable" children.

Key Issues

- In 2004, only 64.4% of working aged adults (16-64) in Merthyr Tydfil were economically active. This compared with the Welsh average of 72.7% (+8.3%) and the UK average of 76.4% (+12%). In December 2012, the Merthyr Tydfil rates had substantially improved to 73.4% which is just below the Welsh average 73.5% and the UK average of 76.9% (3.4%)
- In 2012 the economic inactivity rate (excluding students) ranged from 26.2 per cent in Neath Port Talbot to 18.4 per cent in Cardiff. Merthyr Tydfil was ranked 17th out of the 22 local authorities' with a rate of 24.7 per cent, above the Welsh average of 22.2 per cent
- In 2012 average gross weekly pay (£412.50) in Merthyr Tydfil was 10% below the national average, the 2nd lowest in Wales. Only Powys earned marginally less £412.2
- The Labour Force Survey estimates for the 3 months to January 2013 show the unemployment rate in Wales was 8.4% of the economically active down 0.5 percentage points from the same period a year earlier. For the UK as a whole it was 7.8 per cent, down 0.5 percentage points from the same period a year earlier
- ILO unemployment rates: In 2012. Merthyr Tydfil had an unemployment rate of 12.1%, the second highest in Wales after Blaenau Gwent.
- Claimant Count: In January 2013, there were 2,395 adults aged 16 to 64 claiming Job Seekers Allowance (JSA), 6.3% of that cohort, compared to Wales rate of 4.2% and the GB rate of 3.8%.
- The most recent data shows that in August 2012, there were 9,440 people claiming at least one working age benefit, this is a quarter (24.8%) of the resident population in Merthyr Tydfil. The proportion claiming benefits has been decreasing over the last decade down 6.8 per cent since August 2002 from 31.6 per cent

- The latest statistical bulletin for workless households covers the period April to June 2012. For the UK as a whole around 17.9 per cent of households were workless. The workless rate varies greatly across the regions in England and countries of the UK. The North East had the highest percentage of workless households at 24.5 per cent, while the South East had the lowest at 14.1 per cent. Wales was the third highest region, with 21.6 per cent of workless households.
- Data from the 2011 Annual Population Survey shows that for the twelve months between January and December the highest percentage of workless households in Wales was in the Central Valleys, and this area was the third highest across the UK. The Central Valleys comprises of Merthyr Tydfil and Rhondda Cynon Taff, where 28.7 per cent of households were workless.
- Looking at Wales only, figures from Welsh government show that in 2011 Blaenau Gwent and Merthyr Tydfil had the highest percentage of workless households (31.8% and 30.1%), while Monmouthshire and the Vale of Glamorgan had the lowest, 16.2% and 17.3% respectively.
- 29.2% of children in Merthyr Tydfil lived in households which had no adult of working age in employment. This is substantially higher than the national rate of 18.6% and was the second highest rate in Wales, behind Blaenau Gwent (33.2%).
- The recession has hit young people in Wales hard. The most recent data from the ONS shows that 54,000 people aged 16-24 were unemployed (November 2012 to January 2013) this is an unemployment rate of 23.9 per cent, up 0.5 percentage points from August to October 2012.
- A third (33.1 per cent) of 16-24 year olds living in the borough are out of work (Sept 2012). The most recent trends show that since 2005 the unemployment rate for young people across Merthyr Tydfil has been consistently higher than the rates for Wales and the UK. (ILO unemployment rate).

- Claimant Count: Jobseeker's Allowance (JSA) is paid to people under pensionable age who are available for, and actively seeking, work of at least 40 hours a week. In January 2013, there were 765 young people aged 16-24 years claiming JSA in Merthyr Tydfil, 10.9 per cent of that population. This rate is nearly twice the national rate (6.5 per cent) and is the second highest of all local authorities.
- The number of adults economically inactive due to long term sickness has historically always been very high in Merthyr Tydfil. Our current rate of 37.3 per cent of all adults aged 16-64 years is the highest of all local authority areas in Wales. There are currently 3,500 people not working because of illness or injury. This compares to the Wales rate of 26.7% and the UK rate of 22.2%. However the number and rate has decreased over the last eight years. Down from 48.7% in 2004 to 37.3% in 2012.
- Limiting long term illness is a measure of long term illness, health problems or disability that limits a person's daily activities or the work they do. Census 2011 shows that 26.9% of the population in Merthyr Tydfil have activity limitation
- Welsh Health Survey 2011 indicated that 20% of adults reported being '*limited a lot*' by either a health problem or disability, this compares to the Wales average of 16%
- According to Welsh Government statistics, Persons with a disability (DDA current disability and/or work-limiting disability) are more likely to hold no qualifications than non-disabled persons, and less likely to hold qualifications at level 2 or above.
- The 2011 Census included a question on general health and this information enables an assessment to be made about the nation's health status and to make comparisons between areas within England and Wales.

- People living in London and the South East region had the highest percentages of 'Very good' or 'Good' general health, and Wales and the North East region the lowest. In Wales only 46.6 per cent reported 'Very good' health and 7.6 per cent reported their health as 'Bad' or 'Very bad'. (Census 2011)
- According to the Welsh Health Survey (2010 and 2011), the Cwm Taff Local Health Board area has the highest percentage of people (25%) who reported their general health to be 'poor or fair'. Within Cwm Taff the results at local authority level were 27% for Merthyr Tydfil and 25% for RCT, both of which are significantly above the Welsh average (20%).
- The 2011 Census shows that in Merthyr Tydfil 12.6% (7,427) of the usual residents provide unpaid care, this represents an absolute increase of 1, but the proportion of the population has remained the same as the 2001 Census. Neath Port Talbot was the authority with the largest percentage of its population providing unpaid care at 14.6%, higher than any authority in England; Cardiff had the lowest at 10.1%.
- The Valuing People White paper suggests that one third of all adults with a learning disability living at home do so with carers aged over 70 years of age. Support for older family carers to plan for the future will be needed to avoid the risk of family breakdown.
- 300 people living in Merthyr Tydfil have some kind of visual impairment, 220 people have some kind of hearing impairment and 135 people are registered as having a learning disability. It is estimated that there are approximately 8,600 people between 18 and 65 with a physical disability.
- Over the next 10 years there will be a reduction in the numbers of adults with a learning disability accessing adult services, however a higher proportion are likely to require more intense services.

- The 2011 CiN census showed that there were 505 Children in need in Merthyr Tydfil, a rate of 410 per 10,000 people aged 0-17 years. This is the 2nd highest rate of all local authorities in Wales.
- Stability is recognised as important factor for the wellbeing of children in care. 11.4% of children looked after experienced three or more placements during 2011-12, compared to 16.2% in 2010-11. Despite the decrease the rate is above the Wales average of 9.2%
- Secondary school mobility is a predictor for lower levels of educational attainment and social behaviour. 25.6% of children looked after experienced one or more changes of school in the past 12 months, the worst performing local authority in Wales.
- Number of people aged 65 years+ with dementia predicted to increase by 55% in next 20 years in Merthyr Tydfil: 2010 640, 2030 1,000.
- Within the Cwm Taf LHB area, there is a predicted increase (54%) in both the number of older people attending A&E and the number of hospital admissions up to 2030, as a result of a fall. Many individuals can lose their independence and quality of life as a result.
- In the three years up to March 2011, prescription rates for anti-depressants have increased by 30% in the Cwm Taf LHB area.
- During 2010/11 there were 126 referrals to the Adult Protection Coordinator, which is an increase of 18% on the previous year.

- During 2011/12 the main adult service user group for Vulnerable Adults was mental health followed closely by physical disability. There has been a significant increase in referrals in the older person's category (up from 6 to 16).
- Welfare reforms could cost recipients £7million in Merthyr Tydfil.
- The abolition of Council tax benefit in March 2013 will equate to at least an additional £500,000 tax to be collected from the lowest income households in the borough (affecting almost one third of households).
- In the past decade, there has been a 99.74% increase in the price of average houses; compared to an all Wales average increase of 71.95%. Merthyr Tydfil's low average incomes and high house prices means the ability of local households to become owner occupiers is increasingly becoming unachievable.
- The Cordis Bright review (2010) of Family support caseloads showed that at least 30% of families who received Family Support services accessed debt management information and support.

<u>Analysis</u>

- There is a clear relationship between geographic location and worklessness, as as the report on the Working Neighbourhood describes "many of the most disadvantaged people in the labour market also live in the most disadvantaged places. Because disadvantaged areas often lack some of the social and economic infrastructure able to support people on their path into employment.
- Examples of this infrastructure include education, weak skills in literacy and numeracy, public transport, and childcare facilities. All of these factors have been identified as serious issues in the needs analysis for Merthyr Tydfil.
- Other barriers to employment identified in the report 'Reaching the untapped potential in the Upper Valleys' include health and medical issues, financial dis-incentives for those on benefits (ie the cost involved in returning to work), lack of work-readiness skills.
- The Welfare to Work agenda is marked by major changes in levels of benefit payment made and assessment regimes for particular benefits; whilst this is applicable to the UK its most extensive impacts are likely to be experienced in areas like Merthyr Tydfil, which have the highest levels of existing benefit claiming.
- Certain household types are also more likely to be disproportionately affected by the tax and benefit reforms, families with children, particularly the poorest families with children, non-working lone parents and workless couples with children, those with children under five and families with more than two children are most likely to be affected by the tax and benefit changes.

- Benefit level reductions, including housing benefit, will place particular pressures on family finances as cost of living rises. IFS estimates that in Wales the poorest income group will loose 3% of their overall income. Advice agencies are likely to experience increasing demand for their services due to the impact of the benefit and tax changes.
- The Citizens' Advice Bureau caseloads in Merthyr Tydfil over the past three years has reduced due to the loss of funding for a locally run debt project.
- Financial capability can help reduce child poverty and poverty among the elderly. There is also evidence that an improvement in financial capability leads to an improvement in psychological well-being.
- Data from the Merthyr Tydfil Financial Inclusion Team suggests that moving from low to average levels of financial capability:
 - Increases psychological wellbeing by 5.6%
 - Increases life satisfaction by 2.4%
 - Decreases anxiety and depression by 15%
 - The 2.4% in life satisfaction is 12 times bigger than the impact of earning an extra £1000 a year
- Support for people to participate as active citizens both economically and socially is important as a means of empowering them to take more control over their lives and avoid loneliness and isolation.

- Being able to understand health information and make decisions from that information is vital to a person's well-being. Studies have shown a link between low literacy and poor health outcomes. For example:
- 1. People with lower health literacy skills had a higher incidence of diabetes-related problems (<u>Schillinger et al., 2002</u>)
- 2. Poor literacy was associated with a higher risk of hospital admission (Baker et al., 2002)
- 3. Low functional health literacy in women with diabetes was associated with factors that may negatively impact birth outcomes (Endres et al., 2004)
- 4. Inadequate health literacy was associated with poorer physical and mental health in older adults (Wolf et al., 2005)
- One of the key ways to ensure that people have healthy, meaningful and fulfilled lives is through citizenship and inclusion. To achieve this people from all sections of society must be able to enjoy full access and participation in their local communities.
- A home should help people be independent and give them the security to be active members of their communities. Many older, some young, vulnerable or disadvantaged people experience crises that affect their health or wellbeing; they need housing support to help them lead full and active lives.
- Evidence suggests that basic support to maintain and improve general well-being, together with practical help in the home and opportunities to meet with other people and prevent loneliness, avoids deterioration and the need for more intensive services.
- For disabled people of all ages, housing is a key enabler of independent living. Adapted housing enables people to maintain their independence, remain in their communities and exercise choice in the way they live their lives. Disabled Facilities Grants (DFGs) can help towards the cost of adapting a disabled person's home.

- 39% (7,900 homes) of private sector properties score a category 1 hazard on the HHSRS (housing health and safety rating system). The most significant hazards in Merthyr Tydfil are those associated with the threat of excess cold, falls on stairs and falls on level surfaces.
- As the Cwm Taf Health Board states "Mental illness is consistently associated with deprivation, low income, unemployment, poor education, poorer physical health and increased health-risk behaviour."
- As the population ages, the mental health conditions most common in this age group become more prevalent. Dementia is much more common in people over the age of 85. It is anticipated by 2030 there will be a large increase (almost double) in the number of people with dementia in the 80-84 and 85+ age groups in Merthyr Tydfil, likely to be the result greater life expectancy and the effect of the baby boom population reaching the 85+ age group during the period.
- Analysis of the 2001 census shows that carers who provide over 50 hours care per week are statistically twice as likely to suffer from poor health as other people.
- ONS statistics found that carers who no not get a break are twice as likely to suffer from mental health problems as those that do.
- Children sometimes find themselves in circumstances where they have to provide significant support for other family members. As such, these young carers also need to be supported by local authorities to ensure their health and wellbeing is safeguarded.

- As corporate parents local authorities are required to ensure the safety and wellbeing of looked after children, and to ensure that they are given the same opportunities as their peers.
- Children in need have a far lower attainment levels than their peers at each of the Key Stages.
- Children whose parents are unemployed are at increased risk for experiencing poverty, homelessness and child abuse.
- Childcare provision is important for the development of social and motor skills in young children and allowing parents to gain and maintain employment. Barriers facing families in Merthyr Tydfil are twofold, i.e. Affordability coupled with the inequality of access in certain wards.

6. Creating sustainable places for people

<u>Key issues</u>

- Joint bottom of the league table in Wales for recycling and composting. However the financial year 2011/2012 saw an substantial increase in performance (up 8% to 43%) which brings us much closer to the statutory target of 52%.
- As of April 2011 there were 725 private sector dwellings that had been vacant for 6 months or more, of these 2.1% (15) were returned to occupation through direct action by the local authority.
- Merthyr Tydfil has a significantly higher proportion of older housing stock than elsewhere in Wales. According to the 2011 Census there are 24,264 houses in Merthyr Tydfil; 49.6% are terraced houses, with 45.4% of all dwellings being built pre 1919.
- The dominant type of tenure in Merthyr Tydfil is Owner Occupier, accounting for 65.3% of the market. Private renting accounts for 11.6% of the total market, and social housing for 21.1%. (Census 2011). In 2009, 39% of households in the private sector were at risk of fuel poverty.
- The Local Housing Market Assessment 2010 identified an overall shortfall of up to 62 affordable houses a year, although this figure indicates the scale of the affordability problem rather than the solution to it. Moreover, this figure masks local need; at a neighborhood level some low demand areas have a surplus of affordable housing and some high demand areas have a substantial deficit.
- Our Local Transport Service Grant will be reduced by 27% in 2012-13 from £182,000 to £132,000
- The Bus Service Operators' Grant (BSOG) is paid to eligible bus and community transport operators to help offset the cost of duty on fuel. In 2010/11, the Welsh Government paid almost £22million to operators across the country. This figure will drop by 25% in 2012/13.

Creating sustainable places for people

- 29.7% of the resident population in Merthyr Tydfil have no access to a car or van (22.9% in Wales) the highest of all local authorities in Wales. This rises to 48.7% in the Gurnos and 34.6% in Merthyr Vale (Census 2011).
- Lack of access to personal transport has an impact on all aspects of people's lives. Difficulty in accessing childcare was highlighted as an issue for parents, lack of adequate transport is a complication to finding work, it will also affect a families' ability to access leisure and retail facilities.
- The local economy is not providing enough employment opportunities for all age groups through the economy as a whole- the ratio of vacancies to those looking for work (JSA claimants) is 1 for every 17 looking compared with 1 to 6 in Wales. This level is before more are identified from reassessments of capability across a range of working benefits.
- In August 2012, 16.2% of 18-24yr olds (835 young people) were claiming Job Seekers Allowance (JSA) nearly twice the national rate and the 2nd highest rate in Wales.
- Unemployment Rate In July 2012, 3,200 were unemployed in Merthyr Tydfil. This is a rate of 12.7%. This is much higher than the Wales average of 8.1% and the Great Britain average of 7.9%
- Gross Value Added (GVA) is a measure of the size of the economy of an area, GVA per head in 2007 stood at £11,604 in Merthyr Tydfil. This was below the Welsh average of £14,853 and the fifth lowest amongst the 22 Welsh local authorities. Between 1999 and 2007 GVA per head in Merthyr Tydfil has been below that for Wales as a whole.

Creating sustainable places for people

Analysis

- Impacts of welfare reform will be directly influenced by the strength of the economy in Wales and its ability to produce employment, but also how people change their own social and economic behaviour in response to benefit reductions.
- Extensive multi-agency working is required to ensure that the number of employment opportunities can be increased to address the current shortfall between the numbers of unemployed and available jobs.
- In July 2010, Economic Renewal: a new direction Welsh Assembly Government, highlighted the correlation between literacy and numeracy levels amongst the working population and economic development.
- Education and training must contribute to the transformation of Merthyr Tydfil, and underpin the long term aim of sustaining the regeneration of the borough. To ensure that education and training contribute to local economic growth, it is necessary to engage with employers in the development and delivery of higher learning.
- According to the WIMD 2011 people in Merthyr Tydfil have good access to services, (compared with every LSOA in Wales) however the recent Merthyr Tydfil HSCWB strategy 2011-14 highlights, "there is a need to improve access to health and social care services for the public in Merthyr Tydfil and for staff working in the area". In addition the report 'Reaching the untapped potential in the Upper Valleys' 2010, identified transport as a barrier to returning to work.
- Welsh Government have announced cuts to both The Local Transport Services Grant and the Bus Service Operators Grant. This reduction in funding will directly impact upon the availability and provision of bus services in the borough.

Creating sustainable places for people

- Many of the communities who benefit directly from both grants are from our most deprived areas. They are also geographically isolated from services and places of employment and education. Other services affected will be the community based services which provide transport outside of peak hours.
- Over the past decade the issue of empty properties has gained prominence at both a
 national and local level. Empty Homes represent waste, financial expense and missed
 opportunity. They deny homes to those in housing need, which is a particular concern
 in today's economic climate. They can blight communities, attract vandals and
 squatters and tie up the resources of local authorities and the emergency services.
- Bringing empty homes back into use is a sustainable way to meet future housing demand and helps to alleviate pressure to develop greenfield sites. Living next to an empty property can devalue a home by up to 10%. The Empty Homes Agency estimates that if just 2% of the empty private sector homes were brought back into use, the revenue would exceed £50 million per year.
- The Local Authority is committed under its Private Sector Empty Homes Strategy to tackling long term vacant properties. In this current climate where grant assistance is unavailable for bringing empty homes back into use, the Authority has to increasingly resort to enforcement activity to deal with problematic empty properties.
- There are a number of enforcement options that require owners to take action to repair, renovate or remove problem buildings. Many enforcement options allow the Council to act and do necessary works where an owner fails in their duties. The costs of doing this are recoverable. These enforcement procedures include statutory notices, management orders, enforced sale, and compulsory purchase orders.

Needs Assessment for the Merthyr Tdyfil LSB Single Integrated Plan

 Presentation data gathered by Ann-Marie McCafferty

 Once the needs assessment has been finalised, if you would like a full copy please contact the partnership team on 01685 724689