



Population Needs Assessments

Cwm Taf Morgannwg

2022-2027

0.1

Initial Document

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1. Introduction and background

In 2014, the Welsh Government published the Social Services and Well-being (Wales) Act 2014. The Act put a 'duty' on Local Authorities, Cwm Taf Morgannwg University Health Board and partners (including the voluntary sector) to think about the overall 'well-being' of people who use care and support services and the carers who help them.

As part of the Act, there was a requirement to jointly carry out an assessment of the care and support needs of our population and the needs of carers. The range and level of services required to meet those needs as well as the range and level of preventative services.

The original Assessment was published in 2018. Note that the 2018 Assessment was completed prior to health board boundary changes that saw the creation of a new Regional Partnership area with the inclusion of Bridgend.

The information within this document provides a summary of Population Needs assessment as compiled for original assessment (including additional information relating to Bridgend that was outside of the original scope), national survey information regarding the impact on specific priority groups and local intelligence including feedback from Strategic Sub Groups of the RPB and 100 days of engagement.

The headline information is based on what we have found through available data and research and from speaking to people across Cwm Taf Morgannwg via the 100 days of engagement.

This information has been analysed to identified need, demand and key messages and will be used to help build a picture of care and support needs for people in Cwm Taf Morgannwg.

We can use what we have learned in this Assessment to think about the ways in which we provide care and support services and, more importantly, how we can work better together to make sure that our services are doing the best for individuals and our communities.

The Social Services and Well-being (Wales) Act is about improving the well-being of people who need care and support and carers who need support. Under this Act, the Cwm Taf University Health Board, Rhondda Cynon Taf County Borough Council, Merthyr Tydfil County Borough Council and Bridgend County Borough Council and their partners have jointly published their Population Assessment.

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3. Methodology

The method used to undertake this assessment was primarily a desktop analysis of available data and engagement activities. There was a requirement to hold stakeholder discussions via interviews and group sessions where further information or gain a greater understanding of the needs for our priority groups. This mixed process provides a balance between quantitative and qualitative information to ensure a comprehensive overview of the needs across or communities, which is vital to ensure the needs of vulnerable individuals were accurately represented and evidenced.

This combination of information will be presented in each section and subsection throughout the report and will attempt to present current levels of need, trends and start to explore possible future demand.

4. Structure of the report and how to use it

This assessment contains data, research and information from our engagement activities relevant to people living across Cwm Taf Morgannwg.

The primary population groupings for the information contained within the assessment are older people (including those aged over 18 where relevant) and children and young people.

The categories, that sit under both population groupings, focus on the priority groups as detailed in the SSWB Act, which are:

- Carers;
- People with learning disabilities;
- People with mental health problems/illness;
- People with physical disabilities;
- People with sensory impairments; and
- People who have experienced violence against women, domestic abuse and sexual violence

In addition to the priority groupings, there are additional themed categories used to capture information that doesn't fit neatly into the prescribed areas above, these are:

- Economic wellbeing
- Skills and knowledge
- Safety
- Housing
- Social connectedness

Category structure

The assessment has been structured to aid ease of use with 2 distinct population sections, both with consist subcategories.

Each category of this assessment is supported by a detailed level of data and information as follows:

- Primary measures - Measures that say something of importance for the priorities and themes, the ones do we want to impact as a region?
- Messages from engagement – Key information from the engagement activity, what are people telling us about each priority/theme.
- Research - Additional research that provides some key messages for the priority or theme that will help inform our future direction.
- Impact of covid – Specific information relating to the impact covid has had on each priority and theme.
- Overview – Three key messages to take away.
- Bring together the key messages from the information in 3 points. Summarising the current need, demand and where possible predicting future demand.

How to use

The primary purpose of this assessment is to identify the level of demand for care and support services across our population, better understand the severity of these needs and determine the type of services required to address these needs. To enable us to do this as effectively as possible the assessment contains a lot of very useful information crossing multiple areas, themes and priority groups.

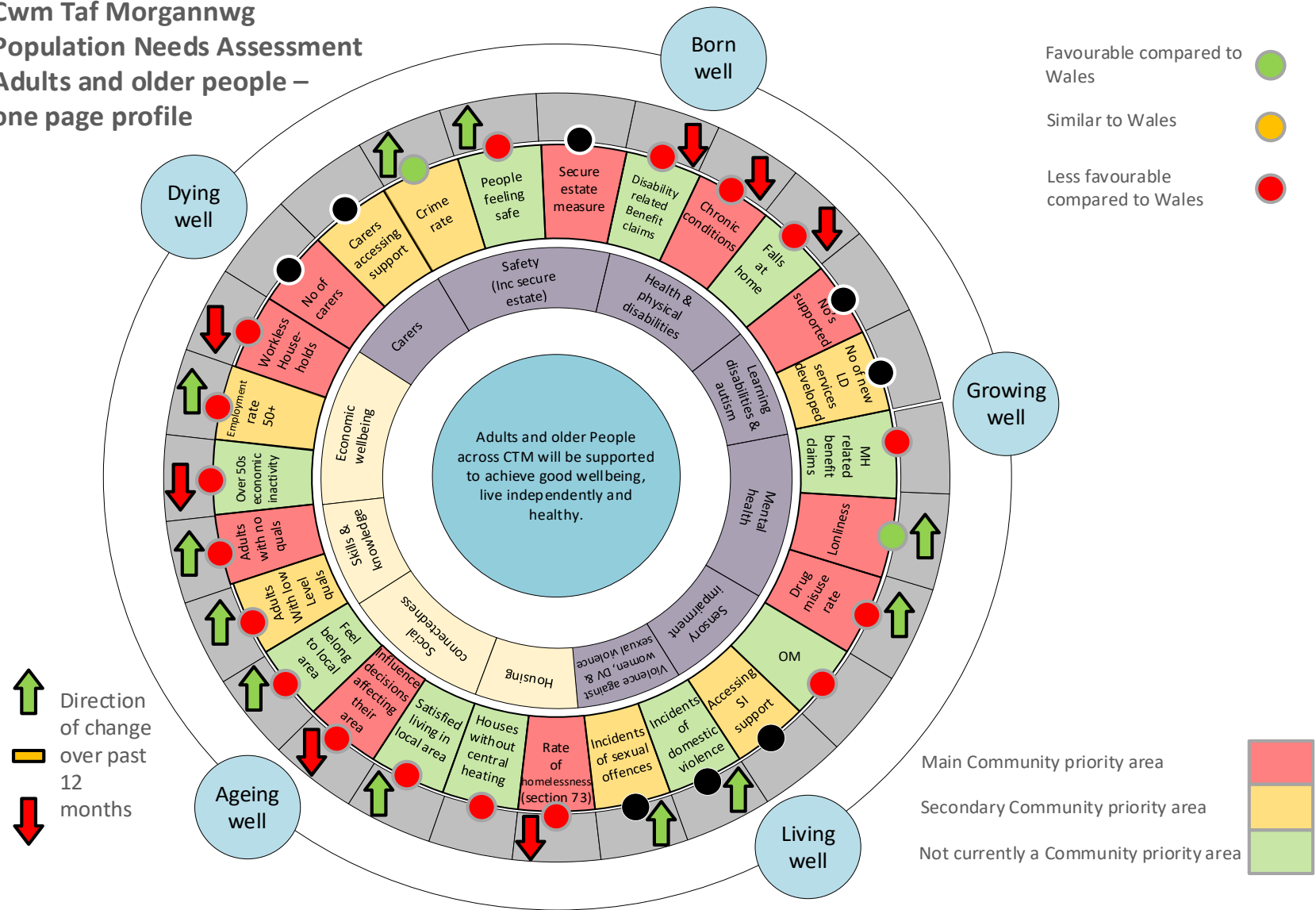
There may be instances where you require information relating to a specific section or category only. To gain quick access to this information readers can click on the relevant headings in the contents or data tables above, this will take you directly to the information.

The assessment has been structured in this way to allow each reader quicker and easier access to the data, research and engagement information they require without the need to search through the whole

document. Hopefully the combination of all the information into one report, structure against well determine groupings and themes, will encourage people to frequently use this assessment as an aide to identify future priorities and inform service decisions.

5. Older people - one page profile

Cwm Taf Morgannwg
Population Needs Assessment
Adults and older people –
one page profile



6. Key findings: Older people

The following sections provide an overview of the key demographics for older people living across Cwm Taf Morgannwg and provide further information for each of the priority groups and key themes. Each sub-section will include highlight data, feedback from engagement activities and key messages from relevant research, that will support the identification of need and inform our future priorities for health and social care.

6.1 Demographics

Cwm Taf Morgannwg is made up of three local authority areas: Merthyr Tydfil, Rhondda Cynon Taf and Bridgend. There are 449,836 people living in Cwm Taf Morgannwg, this is an increase of 8,535 since the last assessment in 2016.

Table 1 provides the number and percentage split of the population for each of the 3 local authority areas.

Table 1 – Whole population split across Cwm Taf Morgannwg:

Rhondda Cynon Taf	Bridgend	Merthyr Tydfil
241,873	147,539	60,424
53.8%	32.8%	13.4%

Sources: StatsWales

The total number of people living in Cwm Taf Morgannwg who are aged over 50 years is 178,087, this equates to 40% of the total population. Table 2 provides the number and percentage split across the region broken down by older people age categories.

Table 2 – Age breakdown

Local authority	Over 50s		Over 65s		Over 75s		Over 85s	
Rhondda Cynon Taf	38.8	93,953	19.3	46,755	8.6	20,725	2.2	5,335
Bridgend	41	60,492	20.4	30,168	9.3	13,766	2.4	3,494
Merthyr Tydfil	39.1	23,642	18.9	11,394	8.4	5,064	2.1	1,239
Cwm Taf Morgannwg	39.6	178,087	19.5	88,317	8.8	39,555	2.2	10,068

Source: StatsWales

Over the next 10 years our population is predicted to rise to 463,809 (3%) and to 475,229 over the next 20 years (5%). It is predicted that the population aged 64 years and under will decrease but we are expecting an increase in the number of people aged 65 years, with the most significant increase in those aged 85 years and over. This is going to have a considerable effect on individuals, their communities and the services that support them.

7. Health and physical disabilities (SSWB PG)

7.1 Life expectancy

The life expectancy figures are constructed from the estimated population and total deaths based on a three-year average.

The average life expectancy for people born in Cwm Taf Morgannwg is 79.1 (2017-19 figures), which is below the Wales average of 80.4. When we look at the gender split across the region females are predicted to live for 3.7 years longer than males.

Table 3 provides the breakdown of males and females aged over 65 living in each of 3 local authority areas. It indicates that across all 3 areas the life expectancy of females aged over 65 is higher than males. The female population over 65 are expected to live longer in Bridgend than the other 2 areas but the male population with the longest life expectancy is in Rhondda Cynon Taf.

Table 3 – Older people life expectancy by local authority

Local authority	Males over 65	Females over 65
	2017-2019	2017-2019
Bridgend	17.6	19.8
Rhondda Cynon Taf	17.7	19.7
Merthyr Tydfil	17.4	19.2
Cwm Taf Morgannwg	17.6	19.6

In addition to life expectancy, it is important to consider healthy life expectancy, which represents the number of years a person might expect to live in good or very good health. Across the Cwm Taf Morgannwg region males can expect to live in good or very good health until they are 61.1 years old and females until they are 62.8 years old. For both genders it is considerably lower than the Wales average of 65.3 and 66.7 respectively.

7.2 Chronic conditions

Table 4 provides an overview of the prevalence of each chronic condition in the adult population for Cwm Taf Morgannwg compared to Wales.

The prevalence of chronic disease is generally higher in Cwm Taf Morgannwg than the Welsh average.

Table 4 – Chronic conditions prevalence rates

Prevalence in Adult Population	CTM UHB	Wales
Asthma	7.40%	7.10%
CHD	3.90%	3.60%
COPD	2.70%	2.40%
Diabetes	6.60%	6.10%
Stroke +TIA	2.30%	2.10%
Dementia	0.60%	0.70%

Source: QOF data 2019

In addition to a higher-than-average percentage of people with chronic conditions across CTM, a pilot in the Rhondda found that it was more common for individuals to have multiple chronic conditions than just one. The pilot found that 53% of Rhondda population have one or more chronic conditions with 31% having two or more. It also evidenced that a significant proportion of patients with a chronic condition also had a mental health diagnosis (pre-COVID-19), E.g.

nearly 20% of patients with COPD also have a mental health diagnosis.

7.3 Falls at home

Table 5 and 6 provides the total number of the falls across Cwm Taf Morgannwg for the past 3 years that required an ambulance call out, plus the age breakdown for the last 12 months. There has been a significant increase in the calls since the 2018/19 year, with the 2020/21 numbers over 80% higher than 2018/19. The age breakdown for 2020/21 indicates almost 50% of the 6,573 falls requiring an ambulance involved people aged over 80.

Table 5 – Falls by region requiring an ambulance

Local authority	2018/19	2019/20	2020/21
RCT	1,971	3,678	3,548
Bridgend	1,117	2,022	2,107
Merthyr Tydfil	560	945	918
CTM	3,648	6,645	6,573

Source: Welsh ambulance service

Table 6 – Age breakdown of people falling and requiring an ambulance

Local authority	<60	60-64	65-69	70-74	75-79	80-84	58-89	90+
RCT	799	182	218	315	388	520	532	542
Bridgend	374	91	138	200	262	371	332	323
Merthyr Tydfil	180	52	39	89	119	145	143	139
CTM	1353	325	395	604	769	1036	1007	1004

Source: Welsh ambulance service

Table 7 provides a breakdown of the prevalence rates of fall victims across Cwm Taf Morgannwg. The table predicts that the number of people requiring an hospital admission due to a fall will increase over each of the reporting periods up to 2040 (every 5 years). The rate of older people aged 75+ currently account for most of all fall victims but this is expected to increase to 87.5% by 2040.

Table 7 – Falls at home prevalence rates

	2020	2025	2030	2035	2040
60-74	30	31	34	34	33
75+	158	182	194	208	230
Total	188	214	227	242	263

Source: Social care Wales

7.4 65+ with dementia

Table 8 provides a breakdown of the number of people diagnosed with dementia during 2018/19. The total figure represents 3.29% of the total 65+ population, which is approximately one third of the predicted prevalence rates (table **)

Table 8 - Dementia diagnosis in GP cluster area 2018-19

GP cluster	Numbers
South Merthyr Tydfil	109
North Merthyr Tydfil	272
South Taf Ely	254
South Rhondda	359
South Cynon	105
North Taf Ely	296
North Rhondda	147
North Cynon	211
Bridgend West Network	370
Bridgend North Network	324
Bridgend East Network	462
Cwm Taf Morgannwg	2909

Table 9 provides the percentage of people diagnosed against the 65+ population. The area fluctuates significantly with Bridgend recording the highest percentage when compared to the 65+ population.

Table 9 - GP diagnoses as a percentage of the 65+ population

Local authority	Total 65+ population	Dementia diagnosis	% of 65+ population
Rhondda Cynon Taf	46755	1372	2.93
Bridgend	30168	1156	3.83
Merthyr Tydfil	11394	381	3.34
Cwm Taf Morgannwg	88317	2909	3.29

Table 10 provides a breakdown of the predicted prevalence rates of older people (ages 65+) living with dementia over the next 20 years. The figures estimate an increase of 62% over the Cwm Taf region, which equates to 10,140 older people.

Table 10 – Dementia prevalence rates (65+)

Local authority	2020	2025	2030	2035	2040
RCT	3,319	3,724	4,207	4,765	5,193
Bridgend	2,139	2,457	2,841	3,274	3,639
Merthyr Tydfil	813	931	1,063	1,209	1,308
CTM	6,271	7,112	8,111	9,248	10,140

Source: Social care Wales

The COVID-19 pandemic and the response to it, has had an impact on the health and wellbeing of people in Wales. Those that have been acutely affected are the most vulnerable members of society, including those people living with dementia and their families.

Figures from the Office for National Statistics (2020) show 49% of COVID-19 deaths in care homes and 25.6% of all COVID-19 deaths were people with dementia.

Research undertaken during the pandemic has suggested that the general wellbeing and care of those living with dementia has also been significantly impacted. Key messages include:

- Additional challenges with infection control and understanding isolation
- Lack of social engagement and support leading to further deterioration
- Psychological wellbeing affected by isolation
- Struggle to communicate exacerbated by PPE
- Lack of routine, feeling forgotten, loneliness, confusion and losing skills were highlighted as issues for people with early onset dementia

These figures and information from research evidence that people with dementia have been disproportionately affected by the pandemic.

7.5 Young onset dementia

Young onset dementia (YOD) refers to people whose illness develops before the age of 65 years (not necessarily those whose dementia is diagnosed under the age of 65years).

There is consensus that the number of younger people developing dementia is rising as a proportion of the population whereas in those over the age of 65 years it is declining.

Estimated prevalence of YOD varies between studies according to the population sample included. People with learning disability who are at higher risk of developing dementia, people with some neurological

disorders such as Huntington's disease and those with dementia associated with alcohol misuse are often excluded from studies.

Estimating the population prevalence of younger people living with dementia is therefore difficult with a best estimate of between 42-68 per 100,000 population, giving an estimate of between 190 and 306 in younger people living with dementia in CTMUHB. Most are not currently known to memory assessment services.

The needs of younger people who develop dementia are demonstrably different from those developing dementia when older both in terms of diagnosis and post diagnostic support.

Audit of referrals to the old Cwm Taf UHB footprint memory assessment clinics for people aged under 65 years was carried out for the period between April 2018 and November 2020. Data for the Bridgend area of CTMUHB were not available and data for the old CTUHB footprint prior to 2018 was inaccessible.

224 referrals were made. Only 25 of the 113 people referred in 2018-19 (financial year) received a diagnosis of dementia. The proportion of people referred during this financial year and still awaiting an outcome varies between 38% and 13% depending on the clinic where they were seen but the total number amounts to 32. Of those given a diagnosis of young onset dementia there was wide variation in time take to make the diagnosis ranging from 27 days to 466 days. Only 3 of the 91 referrals made to 4 memory clinics in 2019/20 have received a diagnosis of young onset dementia with between 42% and 71% still awaiting an outcome. This suggests that a substantial number of people living with young onset dementia are not referred to memory clinics although they may have been referred to other services such as neurology or psychiatric services and of those referred many are waiting a long time before an outcome is reached and appropriate treatment/support is provided.

7.6 Disability related benefits

The information in table 8 looks at the prevalence of disability among people living in each local authority across the region. There are three measures of disability presented: those claiming Attendance Allowance, Personal Independence Payments and Disability Living Allowance.

Attendance Allowance is payable to people over 65 who are so severely disabled, physically or mentally, that they need a great deal of help with personal care or supervision. Until April 2013, Disability Living Allowance was payable to children and adults in or out of work who younger than 65 and who were disabled and requiring help with personal care or had walking difficulties. From April 2013 Personal Independence Payments (PIP) have been introduced to replace Disability Living Allowance for all new claimants. PIP helps with some of the extra costs caused by long-term disability, ill-health or terminal ill-health.

Table 11 – Disability benefit claimants

Local authorities	Attendance allowance		Personal independence payment		Disability allowance	
	No	%	No	%	No	%
Bridgend	4,415	14.8	10,065	11.1	4,693	3.2
RCT	6,630	14.2	18,297	12.2	8,192	3.4
Merthyr	1,345	11.8	5,260	14.1	4,419	4.0
CTM	12,390	14.1	33,622	12.1	17,304	3.5

7.7 Adult lifestyle behaviours

The Global Burden of Disease Study is a comprehensive research study of disease burden that assesses mortality and disability from major diseases, injuries, and risk factors. Welsh data from the 2016 study was used to estimate the burden associated with disability-adjusted life years (**DALYs**). These are a measure of overall disease burden, expressed as the number of years lost due to ill-health, disability or early death.

Almost half of all years lost are attributable to 3 conditions: cancers, cardiovascular disease and musculoskeletal disorders with mental and substance misuse disorders in 4th place.

A large proportion of these health conditions are caused by adjustable risk factors.

Highest number of DALYs lost by risk factor, Wales 2016 Source PHWO using Global Health Data Exchange (IHME)

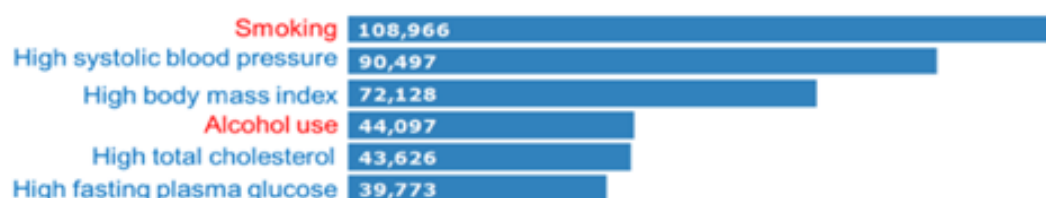


Table 12 highlights the high percentage of adults that report health related health behaviours. In all the behaviours apart from alcohol consumption, Cwm Taf Morgannwg records unhealthier figures than the Wales average.

That said, it should be noted that Merthyr and RCT have a higher level of alcohol related admissions than the Welsh average. (Source: PHWO 2019) This 'harm paradox', whereupon drinkers from poorer, deprived communities will experience higher risks of disease and injury despite total alcohol consumption not differing from affluent counterparts has been widely acknowledged if not fully understood.

Table 12 – % of adults reporting health related lifestyle behaviours

Local authority	Smoke	Eating 5 portions of fruit and veg	Meet physical activity guidelines	Drinking above guidelines for weekly alcohol consumption levels	Working age adults of Healthy Weight
Merthyr Tydfil	21.6	16.1	37.1	17.9	37.3
Rhondda Cynon Taf	19.7	21.6	43.1	17.4	34.3
CTM	19.8	23	41.3	17	35.7

Health related lifestyle behaviours are generally poor in the locality. The long-term health and social implications of engaging in harmful behaviours are wide ranging. Chronic disease is often preventable. Previous work in Cwm Taf for the Cwm Taf Wellbeing assessment in 2017 indicated the following: -



7.8 Obesity

The term obese describes a person who's very overweight, with a lot of body fat. It's a common problem in the UK that's estimated to affect around 1 in every 4 adults and around 1 in every 5 children aged 10 to 11.

Obesity exacerbates all complications of old age and has a great impact on people's lives and their ability to function and exist independently. Managing obesity in the elderly is important as a means of improving health, reducing risk and enhancing quality of life.

Table 13 show the rate of working age adults in each local authority across the region that are of a healthy weight. Whilst all areas across the region are below the Wales average of 39, Rhondda Cynon Taf is significantly lower than the other 2 local authorities.

Table 13: Working age adults of health weight

Local Authorities	Rate per 10,000
Rhondda Cynon Taf	34.3
Bridgend	37.3
Merthyr Tydfil	37.3
Cwm Taf Morgannwg	35.7

Source:

Table 14 and 15 compares body mass index by the least and most deprived areas in Wales and each local authority area within our region. Both tables indicate a correlation between the level of deprivation and healthy weight, with the most deprived areas recording a healthy weight of 31 compared to the least deprived at 44.

*Table 14 - Body mass index by area deprivation
(quintile 1 most deprived – quintile 5 least deprived)*

	BMI 30+ (obese)	BMI 25+ (overweight or obese)	BMI 25 - under 30 (overweight but not obese)	BMI 18.5 - < 25 (healthy weight)	BMI under 18.5 (underweight)
Quintile 1	29	65	36	31	4
Quintile 2	27	65	38	33	2
Quintile 3	21	62	41	41	1
Quintile 4	24	57	33	41	2
Quintile 5	16	55	39	44	1

Source: Stats Wales

Table 15 - Body mass index by local authority

	BMI 30+ (obese)	BMI 25+ (overweight or obese)	BMI 25 - under 30 (overweight but not obese)	BMI 18.5 - under 25 (healthy weight)	BMI under 18.5 (underweight)
Rhondda Cynon Taf	28	63	34	36	1
Bridgend	25	65	39	35	0
Merthyr Tydfil	23	62	39	36	1
Wales	24	60	36	38	2

Source: Stats Wales

Eating, physical activity and other weight-related lifestyle behaviours have been impacted by the COVID-19 crisis and people with obesity may be disproportionately affected. A survey undertaken between April–May of the 2020 (N = 2002) completed measured the physical activity, diet quality, overeating and how mental/physical health had been affected by lockdown.

A large number reported negative changes in eating and physical activity behaviour (e.g. 56% reported snacking more frequently) and experiencing barriers to weight management (e.g. problems with motivation and control around food) compared to before lockdown. These trends were particularly pronounced among participants with higher BMI. During lockdown, higher BMI was associated with lower levels of physical activity and diet quality, and a greater reported frequency of overeating. Reporting a decline in

mental health because of the COVID-19 crisis was not associated with higher BMI but was predictive of greater overeating and lower physical activity in lockdown. The COVID-19 crisis may have had a disproportionately large and negative influence on weight-related behaviours among adults with higher BMI.

8. Learning disabilities and autism (SSWB PG)

8.1 Adults with a disability

Table 16 provides an overview of the number of people aged 18+ that are registered as having any disability in Rhondda Cynon Taf and Bridgend. At the time of developing this assessment the equivalent data for Merthyr Tydfil was not available.

Table 16: adults with any disability

Local authorities	As of 31st March		
	2019	2020	2021
Rhondda Cynon Taf	5,153	5,311	5,469
Bridgend	1,511	NA	1,396
Merthyr Tydfil	NA	NA	NA
Cwm Taf Morgannwg	6,664	5311	6,865

Just over a fifth of the population aged 16 to 64 (21.8%) identified as disabled. This proportion has marginally increased over time. However, a higher proportion of women than men identified as disabled (24.3% compared with 19.3%). The proportion of people identifying as disabled increased by age group for both sexes.

9. Mental health (SSWB PG)

Good mental health is essential to physical health, relationships, education, training, work and achieving potential. Mental health is affected by biological, psychological, social, economic and environmental factors which interact in complex ways.

In a press release from the Royal College of Psychiatrists (2020), psychiatrists have reported a 43% increase in emergency appointments and a 45% reduction in routine appointments, they warn of a surge in mental health cases could be ahead.

Statistics from the Office for National Statistics (2020) show depressive symptoms doubled during lockdown with 1 in 5 adults experiencing some form of depression.

Reports from the Mental Health Foundation (2020) and the Centre for Mental Health (2020) highlight the disproportionate impact on the mental health of people from Black, Asian and Ethnic Minority (BAME) groups and those facing financial insecurity, lower income households. The Centre for Mental Health (2020) also highlight other groups disproportionately impacted included those with existing mental health problems, those with long-term health conditions, the elderly and those subject to trauma/violence in lockdown.

In a survey of those with pre-existing mental health conditions, from Rethink Mental Illness (2020) 79% reported their mental health had worsened due to the pandemic. Over 50% exercised less and ate less healthily, this could result in worsened physical health, which could have implications on those with severe mental illness whose life expectancy is already reduced. Those with mental health issues are more likely to gain weight due to medications and lifestyle, this may put them at higher risk of

severe symptoms of COVID, where obesity has been linked with poorer outcomes.

9.1 Warwick Edinburgh Scale

The Warwick-Edinburgh Mental Wellbeing Scales were developed to enable the measuring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. The scale is used as part of the National Survey for Wales and was last undertaken in 2019.

Table 17 provides the wellbeing scores for each local authority in the region and the national score. The total wellbeing score for Wales was 51.4 which is in the middle of the medium wellbeing band and a slight increase from 50.9 which was measured in 2017. Although two of the three local authorities are below the national average, they have all improved over the reporting period.

Table 17 - Warwick Edinburgh Mental Wellbeing Scales

	2016/17	2018/19
Rhondda Cynon Taf	50.1	50.3
Bridgend	51.3	51.6
Merthyr Tydfil	49.2	50.5
Wales	50.9	51.4

Wellbeing scores are categorised by low mental wellbeing (14-40), middle mental wellbeing (41-59) and high mental wellbeing (60-70), therefore the score for Wales

9.2 Loneliness

Table 18 provides a breakdown of the percentage of people who are feeling lonely across each local authority and as a region. Prior to the Covid pandemic the percentage of loneliness was improving for 2 of the 3 local authorities and was 2.1% better than the Wales average by 2018/19.

Table 18 - % of people who are lonely

Local authorities	2016/17	2017/18	2018/19
	Percentage of adults (16+)	Percentage of adults (16+)	Percentage of adults (16+)
RCT	19.2	16.6	13.2
Bridgend	10.2	12.8	12.1
Merthyr Tydfil	19.8	20.4	13.4

Source: National Survey for Wales

The 2020 population assessment found that older people reported a low level of community run activities was increasing their feeling of isolation and reduced their social networks. However, it highlighted that this is not an exclusive issue for older people and improved local activities and social groups can offer advantages to all vulnerable groups.

Research undertaken during the pandemic claimed that reduced physical activities, lack of social contact, and cancellation of appointments, can lead to increases in disability, risk of injury, reduced cognitive function and mental health issues.

The increase in social isolation can also impact physical and mental health, with reduced physical activity, limited access to resources, loneliness and even grief. The higher risks for older people are further exacerbated by inequalities including chronic illness, poverty, and race, making individuals with long-term conditions, low socio-economic status and BAME even more vulnerable.

9.3 MH related benefit claimants

Table 19 provides an overview of the number and percentage of claimants across Cwm Taf Morgannwg that claim the mental health element of the personal independence payment.

Table 19 – PIP claimants with mental health conditions

	Personal Independence Payment with mental health conditions	
Local Authorities	Number	%
Bridgend	3,299	3.6
RCT	6,051	4.0
Merthyr	1,633	4.4
CTM	10,983	3.9

Source: Department of Work and Pensions

Table 20 highlights the number and percentage of the adult population who are receiving Employment Support Allowance and Incapacity Benefit due to mental health issues. All three local authorities across the region have a higher percentage of claimants due to mental health than the Wales average (3.3%)

Table 20 – ESA and IB benefit claimants due to mental health

	ESA and IB due to mental health	
Local Authorities	Number	%
Bridgend	3,396	3.7
RCT	6,976	4.7
Merthyr	1,704	4.6
CTM	12,076	4.4

Source: Department of Work and Pensions

9.4 Rate of drug and alcohol misuse

Recreational drug use is far more common in society today than it was even ten years ago. The term drug misuse also encompasses improper use of prescription and over the counter medicines as well as illegal drugs. Drugs can have a negative effect on a persons ability to carry out day to day tasks.

- Around one-third (34.6%) of adults aged 16 to 59 had taken drugs at some point during their lifetime.
- Around 1 in 29 (3.5%) of adults aged 16 to 59 had taken a Class A drug in the last year.
- Around 1 in 5 (19.8%) adults aged 16 to 24 had taken a drug in the last year. This proportion was more than double that of the wider age group, and equates to around 1.2 million people.

Tables 21 and 22 provide numbers of people across Cwm Taf Morgannwg assessed for drug misuse and the rate drug misuse over the past 3 years. As a region both the numbers assessed and the overall rate has dropped slightly since 2017/18, with the rate being significantly lower than the Wales average of 224 per 100,000 population.

Table 21 – Individuals assessed for drug misuse

Local authorities	(FY 2017-18)	(FY 2018-19)	(FY 2019-20)
Rhondda Cynon Taf	650	610	521
Merthyr Tydfil	563	566	515
Cwm Taf	1213	1176	1036

Source: NHS Wales Informatics Service

Table 22 – Rate of drug misuse (per100,000 people)

Local authorities	(FY 2017-18)	(FY 2018-19)	(FY 2019-20)
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Rhondda Cynon Taf	179	167	142
Merthyr Tydfil	235	236	213
Cwm Taf	207	202	178

Source: NHS Wales Informatics Service

Tables 23 and 24 provide the numbers assessed for alcohol misuse and the rate per 100,00 population for the past 3 years. The numbers being assessed has dropped slightly over this period at a similar rate to the national average. The rate of alcohol misuse across the region is significantly higher in Merthyr Tydfil than the rest of the region, which is almost 25% higher than the national rate.

Table 23 – Individuals assessed for alcohol misuse

Local authorities	(FY 2017-18)	(FY 2018-19)	(FY 2019-20)
Rhondda Cynon Taf	641	692	634
Merthyr Tydfil	709	698	663
Cwm Taf	1350	1390	1297

Source: NHS Wales Informatics Service

Table 24 – Rate of alcohol misuse (per 100,000 people)

Local authorities	(FY 2017-18)	(FY 2018-19)	(FY 2019-20)
Rhondda Cynon Taf	177	190	173
Merthyr Tydfil	296	291	275
Cwm Taf	-	-	-
Wales	239	247	222

Source: NHS Wales Informatics Service

Table 25 provides a breakdown of all the primary substances for clients referred to Cwm Taf Morgannwg over the past 4 years. Although the total

figure has decreased over this period there has been a slight increase in some substances including cannabis and benzodiazepines.

Table 25 – Clients referred by primary substance

	2017-18		2018-19		2019-20		2020-21	
Primary Substance	#	%	#	%	#	%	#	%
Alcohol	1639	57.0	1682	56.9	1465	56.1	1399	56.6
Not reached assessment as yet (i)	890	-	926	-	894	-	951	-
Heroin	405	14.1	398	13.5	412	15.8	369	14.9
Cannabis	245	8.5	288	9.7	247	9.5	259	10.5
Cocaine	104	3.6	99	3.3	136	5.2	122	4.9
Other Opiates	124	4.3	143	4.8	94	3.6	90	3.6
Benzodiazepines	31	1.1	23	0.8	19	0.7	56	2.3
Amphetamines	122	4.2	114	3.9	89	3.4	53	2.1
Crack	22	0.8	33	1.1	43	1.6	35	1.4
Methadone	45	1.6	32	1.1	21	0.8	23	0.9
Novel Psychoactive Substances	12	0.4	11	0.4	20	0.8	23	0.9
Prescribed Drugs	89	3.1	91	3.1	18	0.7	16	0.6
Hallucinogens	3	0.1	8	0.3	6	0.2	12	0.5
Total Referrals	3770	-	3891	-	3512	-	3429	-

Source: Welsh National Database for Substance Misuse

Research from Alcohol Change UK (2020) found among current or former drinkers, 28% had been drinking larger quantities and 21% had been drinking more frequently. They also found of those drinking more, 40% said

this was due to stress or anxiety, and 1 in 6 felt concerned about their level of drinking. Research from Wardell et al (2020) suggests solitary drinking and drinking as a coping mechanism, both of which increased in lockdown, are associated with drinking problems. The research indicates that issues with alcoholism may be more of a concern due to the pandemic.

10. Sensory Impairment (SSWB PG)

A person with a 'health or physical disability including sensory impairment', may have difficulty carrying out everyday activities as their movement and senses may be limited. Sensory impairment is reduced or loss of sight, hearing or both. Those included are the blind, partially sighted, Deaf, and hard of hearing.

10.1 Hearing impairment

Action on Hearing Loss (2020) report 70% of those hard of hearing are over 70, so at increased risk of Coronavirus so it is vital that information is accessible, both with subtitles and British Sign Language (BSL), and for public health announcements these need to be in place from the start. The British Psychological Society (2020) claim those who rely on sign language struggle under normal conditions, but under lockdown it has been increasingly difficult, this is especially true for those who are Welsh as most interpreters are English speaking. Park (2020) found those with hearing loss struggled as healthcare services, such as COVID testing, being inaccessible.

According to Action on Hearing Loss (2020) the switch to telephone and online appointments can make things harder for those who are hard of hearing, as they often rely on visual cues and lip-reading, they recommend individual consultation to determine communication needs. They also find

face to face interactions difficult due to mask wearing, as it is a hidden disability many worried about a negative response to asking someone to remove their mask to communicate with them. The wearing of face masks can be problematic to those with over ear hearing aids, getting them tangled or damaged when caught in the mask ear loops. Park (2020) also found those who are deaf were negatively impacted by the use of masks. Many of the online technologies are not accessible to those who are hard of hearing, according to Annaswamy, Verduzco-Gutierrez and Frieden (2020).

People who are deaf face increased isolation due to impaired social interaction (Action on Hearing Loss, 2020), impacted by masks and social distancing. The hard of hearing were less likely to leave their home during lockdown just 54.8% in an average week, compared to 80% of disabled people with a mental health issue, further impacting feelings of isolation.

10.2 Visual impairment

Research from the Royal National Institute for the Blind (2020) found social distancing has been near impossible for those with visual impairments, with inaccessible signage and fear of reprisals if they fail to distance, some reported being confronted by others for not socially distancing. This is a concern especially as Henshaws (2020) stated ¼ were high risk and needed to shield and Senjam (2020) found the visually impaired were a group at higher risk of catching COVID.

Royal National Institute for the Blind (2020) research found 74% worried about getting food due to limited deliveries, and 21% rationed food. In a report from Difference North East (2020) they found many with disabilities weren't vulnerable enough to get support and struggled to get shopping, many visually impaired may have fallen into this category. Many reported losing confidence going out and 2/3 felt less independent. Senjam (2020)

also reported disruption to support services, and fear of going out had increased feeling isolated, which may impact mental wellbeing.

Royal National Institute for the Blind (2020) found 26% couldn't access information in an accessible format during the pandemic. Senjam (2020) also found those with visual impairments had difficulties accessing information. Survey results from Henshaws (2020), a Greater Manchester based charity, found 41% didn't receive public health information in a format accessible to them. The findings suggest consideration for visual impairments is needed when circulating information in a health pandemic, especially as the blind are at increased risk.

With many appointments moving online, this can be problematic for those with visual impairments, Annaswamy, Verduzco-Gutierrez and Frieden (2020) claim many of the technologies do not meet their accessibility needs.

MT

	Severely sight impaired	Sight impaired	Without Visual disability
As at 31 st March 2018	150	121	355
As at 31 st March 2019	161	133	392
As at 31 st March 2020	135	125	250
As at 31 st March 2021	142	120	251

11. Carers (SSWB PG)

The SSWB Act provides the legal framework for improving the well-being of people who need care and support. This includes carers who need support, who have the equivalent rights to those that they care for.

As defined in the Act, a carer is a person of any age who provides or intends to provide care for an adult or disabled child but who is unpaid except for carers related allowances.

Carers of all ages, whether young carers, young adult carers, parent carers of children with a disability, working age or older carers, those who look after family, partners or friends in need of help because they are ill, frail or have a disability. The care they provide can be physical, emotional or social.

Table 26: Total carers with support plans

Local authorities			
	2019	2020	2021
Rhondda Cynon Taf	71	114	98
Bridgend	NA	NA	14
Merthyr Tydfil	19	26	8
Cwm Taf Morgannwg	71	114	98

Table 27: Carers broken down by age and gender (CSP)

	Under 18	18 - 25	26 - 35	36 - 45	46 - 55	56 - 65	66 - 75	75+	No Age	Total
Male	2	16	30	55	77	103	91	99	45	518
Female	2	54	143	245	286	326	241	149	117	1563
Unknown/Declined to Disclose	0	0	0	0	2	0	0	2	0	4
Total	4	70	173	300	363	429	332	248	162	2085

Carers Week report (2020) included data from the Office for National Statistics and a YouGov survey and found that since the COVID-19 pandemic there has been an increase of up to 196,000 additional unpaid carers in Wales. 98,000 of these new unpaid carers are also working alongside their caring responsibilities. The Office for National Statistics (2020) showed during the pandemic, young carers and young adult carers mental health has worsened, they are more worried about the future, more stressed, less connected, and their caring hours have increased.

The survey report from Carers Week (2020) highlighted the key challenges for carers in Wales as; not being able to get time away, stress and responsibility, financial costs, other relationships, impact on mental and physical health, impact on paid work, and not having anyone to talk to. The report also showed a higher percentage of female than male carers and found that women were more likely to worry about their health and finances. This suggests that women may be disproportionately affected as a result of caring responsibilities exacerbated by the COVID crisis, this could further impact gender equality issues faced by carers. Carers UK (2020) Behind Closed Doors report found the majority of carers in Wales feel; concerned they will burnout, anxious services won't be restored and worried what will happen if they become ill.

12. Domestic violence (SSWB PG)

Violence against women includes a wide range of areas including domestic abuse, sexual violence, stalking, female genital mutilation, trafficking, and so called “honour” based violence.

Increased reports of violence against women led to the Welsh Government passing the Violence Against Women, Domestic Abuse and Sexual Violence Act (Wales) – (VAWDASV)

The VAWDASV services across the region delivered the following during 2020/21:

Three refuges accommodated the following

- RCT 138
- Merthyr 38
- Bridgend 94

Floating Support services across the region, provided support to

- RCT 135
- Merthyr 148
- Bridgend 167

Tables 28 and 29 shows that since 2018/19 crime recorded as Domestic Abuse and Violence is reducing slightly in all areas relating to violence with/without injury.

Table 28: Incidents of domestic abuse and violence – with injury

Local authorities	2018/19	2019/20	2020/21
Rhondda Cynon Taf	849	908	757
Bridgend	473	480	392
Merthyr Tydfil	279	259	218
CTM	1601	1647	1367

Table 29: Incidents of domestic abuse and violence – without injury

Local authorities	2018/19	2019/20	2020/21
Rhondda Cynon Taf	900	859	831
Bridgend	454	486	398
Merthyr Tydfil	256	217	200
CTM	1610	1562	1429

As a region incident of rape and other sexual offences decreased over the same 3 year period. That said Bridgend recorded a small increase in rapes in the last year (+3).

The Office of National Statistics report (Nov 2020) produced data that showed during the pandemic:

- There was a 7% increase in police recorded offences flagged as domestic abuse-related between March and June 2020, compared with the same period in the previous year; however, there has been a gradual increase in these offences over recent years, therefore it cannot be determined whether this can be directly attributed to the coronavirus pandemic
- There was generally an increase in demand for domestic abuse victim support services, including a 65% increase in calls and contacts logged by the National Domestic Abuse Helpline between April and June 2020, compared with the first three months of the year
- Increases in demand for domestic abuse support were particularly noticeable following the easing of lockdown measures in mid-May, such as a 12% increase in the number of domestic abuse cases handled by Victim Support in the week lockdown restrictions were eased, compared to the previous week; this reflects the difficulties victims faced in safely seeking support during the lockdown

- The total number of cases discussed at multi-agency risk assessment conferences (MARACs) decreased in April to June 2020 compared with the previous quarter; this may reflect the difficulties high-risk victims faced when attempting to safely contact the police (the main source of referral to MARACs) during the lockdown period.

It added that increases in demand for domestic abuse victim services do not necessarily indicate an increase in the number of victims, but perhaps an increase in the severity of abuse being experienced, and a lack of available coping mechanisms such as the ability to leave the home to escape the abuse, or attend counselling.

13. Economic wellbeing

13.1 Workless households

The data provided in Table 30 is the percentage of households across the 3 local authority areas where no one in the home is working. The only authority that has seen an increase over the 3-year period is Rhondda Cynon Taf, that said only Bridgend has a percentage below the Wales average.

Table 30: % of workless households

Local Authorities	% of workless households	% of workless households	% of workless households
	2017	2018	2019
Rhondda Cynon Taf	20.8	20.6	24.9
Merthyr Tydfil	20.2	21.1	20.4

Bridgend	20.4	22.3	17.3
Wales	17.5	17.2	18.4

Source: NOMIS

The figures in table 30 are pre pandemic and don't take account of the impact it has had on the number of workless households. A report produced by the Office of National Statistics in December 2020 started to look at the impact Covid had on workless households across the UK and found:

- Of the estimated 21.0 million households (where at least one member is aged 16 to 64 years) in the UK, 58.8% had all household members aged 16 years and over in employment during October to December 2020; down 1.9 percentage points compared with the same period last year.
- There was an estimated 27.7% of households with a mix of at least one working and one workless adult, up 1.8 percentage points compared with the same period last year.
- There was an estimated 13.6% of households where no member of the household was in employment, up 0.1 percentage points compared with the same period last year.

These figures are supported by the furlough scheme which provided 5 million people with a percentage of their wages while they were unable to work due to the pandemic. With the scheme ending in September 2021 the number of workless households across the country could increase further.

13.2 Benefit claimants (out of work)

Out of work benefit claimants relate to those claiming unemployment related benefits which include Employment and Support Allowance, other incapacity benefits and universal credit. As Universal Credit Full Service is rolled out in particular areas, the number of people recorded as being on the Claimant Count is therefore likely to rise.

Table 31 provides the most recent numbers and percentages for those aged over 50 who claim either job seekers allowance or universal credit. There is very little difference between the percentages for each of the local authorities, which is consistently in line with the national percentage of (3.1 in Sept 21). The fluctuating pattern over the past few years is also repeated in each local authority and nationally and will have been impacted by the roll out of universal credit.

Table 31: Out of work claimants aged over 50

Local Authorities	2018/19		2019/20		2020/21		Sept 21	
	No	%	No	%	No	%	No	%
Rhondda Cynon Taf	915	2	985	2.1	1,885	4	1,480	3.1
Bridgend	580	1.9	570	1.9	1,175	3.9	915	3
Merthyr Tydfil	300	2.5	315	2.6	495	4	385	3.1
CTM	1795	2.0	1870	2.1	3555	4.0	2780	3.1

Source: Nomis

Table 32 highlights the percentage of people across region that claim incapacity benefits. There are variations between the percentage claiming across each of the local authorities with 1.8% more claiming in Merthyr Tydfil compared to Bridgend.

Although Bridgend has the lowest claim rate across Cwm Taf Morgannwg it remains significantly higher than the Wales average of 6.6%

Table 32: Incapacity benefit claimants

Local Authorities	Incapacity benefits claimants	
	Number	%
Rhondda Cynon Taf	13,524	9.0
Bridgend	6,876	7.6

Merthyr Tydfil	3,521	9.4
CTM	23,921	8.6

Source: Dept of work and pensions

As the older population increases and we live longer, healthier lives, we have the opportunity to think differently about working as we get older.

Recent years have seen more older people in employment than ever before, but many people over 50 are at risk of leaving the workforce early, and not necessarily because they want to.

Staying in work and taking control of when and how you retire can give you more money in later life as well as benefit your health and wellbeing.

Older people are one of the highest-risk groups for Covid, although the extent of risk may vary by country, region or population depending on factors such as the nature and scope of existing health care systems and the prevalence of chronic condition. Being at a higher level of risk has a direct impact on older people's employment. The global economic downturn, social isolation requirements and the health risk itself all play a part and increase the risk of health inequities for older people being worsened.

Research looking at the impact of Covid on an ageing workforce found that the pandemic has disproportionately affected older workers - with unemployment rates rising much higher for people aged 65 years and older compared to those aged 25-44. They reported that older workers are 'often hit hard by recessions, and often harder than younger workers', causing for many a loss of employment leading to an increase in both social security claims and poverty. Overall, older peoples' working lives may be shortened due to being unable to re-engage in the world of work.

13.3 Employment rate

Older age groups face the largest hit to their income when returning to work after unemployment, with hourly earnings for those over the age of 50 falling an average of 9.5 per cent compared to their previous earnings. This compared to a 4 per cent drop in earnings among 25 to 49-year-olds.

The Resolution Foundation warned that unemployment could be affecting many older workers' retirement plans.

Table 33 provides information about the employment rate for those aged over 50 for the past 3 years. Across the region the rate of those aged 50+ in employment has fallen by 2.8% in Rhondda Cynon Taf and 7.6% in Merthyr Tydfil over the past 3 years, only Bridgend recorded an increase with 3.6% more in employment compared to 3 years ago.

Table 33: % of working age people aged 50+ who are employed

Local Authority	50+			50-64			65+		
	2017 -18	2018 -19	2019 -20	2017 -18	2018 -19	2019 -20	2017 -18	2018 -19	2019 -20
Bridgend	36.2	34.1	39.8	64.2	60.7	70.4	6.1	6.2	5.3
Rhondda Cynon Taf	35.9	38.5	32.7	66.2	68.2	63.7	4.5	6.1	3.7
Merthyr Tydfil	38.1	33.2	30.5	66.1	62.7	60.6	6.8	5.3	5.1

Source: Office of National Statistics

The Covid pandemic has caused the biggest annual employment fall for the over-50s in four decades, according to recent research. A report from the Resolution Foundation found that, after almost consistent employment growth for older workers since the mid-1990s, the pandemic has resulted in a reduction in employment among workers aged 50-69 by 1.4%. This is almost double the drop seen among people aged 25-49, where the

employment rate fell just 0.7%. Only workers aged between 16-24 recorded a higher fall at 3.9%.

The report also found older workers took the longest to return to work after a period of unemployment. Six months after becoming unemployed, just 62 per cent of those aged over 50 had returned to work. This is compared to 74 per cent of 16-29-year-olds, and 72 per cent of 30-49-year-olds.

13.4 Economic inactivity

Economic inactivity means that people (aged 16-64) are not involved in the labour market – they are neither working nor actively seeking employment.

It also includes students, early retirees and the long-term sick.

Table 34 provides the rate of over 50s that are economically inactive as of the 31st March for the past 3 years. The rate over this period has increased in Rhondda Cynon (+2.9%) and Merthyr Tydfil (3.4%) but decreased in Bridgend (-3.3%). That said all 3 areas have rates significantly higher than the Wales average of 28.6%.

Table 34: Economic inactivity rate (50-64 year old)

Local authorities	Year ending 31 Mar 2019	Year ending 31 Mar 2020	Year ending 31 Mar 2021
Bridgend	36.8	26.6	33.5
Rhondda Cynon Taf	30.6	34.2	33.5
Merthyr Tydfil	34.8	37.4	38.2

Source: Office of National Statistics

Across the country almost 200,000 people aged 50 and over dropped out of the workforce and become economically inactive since the coronavirus outbreak began, according to analysis. Nationally, the level of economic inactivity rose by 1.4 per cent for the over 50s, higher than any other age group.

Analysing data from the Office for National Statistics, found that there were 14.1 million workers aged 50 and over out of work between March and May, compared to around 13.9 million in the previous quarter.

When compared to the other age categories, there is an indication that during the pandemic a significantly higher percentage of over 50s have become unemployed and are not looking to go back into work. Those economically inactive and aged 35-49 rose by 1%, 25-34 year olds dropped by 1% and 18-24 years olds dropped by 0.8%, over the same period.

13.5 Keeping up with bills

Table 35: % of pensioners able to keep up with bills

Whether keeping up with bills (pensioner)	2017-18	2019-18	2019-20
Keeping up with all bills and commitments without any difficulties	82	84	84
Keeping up with all bills and commitments but it is a struggle from time to time	13	12	13
Keeping up with all bills and commitments but it is a constant struggle	3	2	2
Have no bills	2	1	1

Source: National Survey for Wales

14. Skills and knowledge

14.1 Adults with no qualifications

The working age skills profile for adults has improved significantly over the past 20 years, with fewer people with no or low-level qualifications (entry – level 1) and more with high level qualifications (levels 5-8).

Although there have been significant improvements in qualification levels across the country, the lack of educational qualifications is a significant barrier to work and the percentage across the region is continuously above the Welsh average.

Those with no qualifications are more at risk of not being in paid work and of receiving low rates of pay. Furthermore, individuals with no or very low qualifications have seen their earnings increase less rapidly in comparison to other groups in the workforce.

Table 36 shows the improvements across the region but also highlights the variances between each local authority with Merthyr Tydfil having a higher percentage of adults with no qualifications and almost double the Wales average in 2020.

Table 36: % of adults with no qualifications

Local authorities	2018	2019	2020
Rhondda Cynon Taf	10.8	11.0	9.3
Merthyr Tydfil	14.1	16	14.9
Bridgend	10.5	9.1	7.9

Source: Nomis

Across Wales almost 1 in 12 working age adults have no qualifications compared with 1 in 6 in 2004.

Table 37 and 38 provide the percentage of working age adults across Cwm Taf Morgannwg local authorities with low level qualifications (level 1 and level 2). As with the percentage of people with no qualifications, each area across the region has recorded improvements with Bridgend over halving the percentage, which subsequently increases the percentage with medium and higher-level qualifications.

Table 37: % of adults with low level qualifications (Level 1)

Local authorities	2017	2018	2019	2020
Rhondda Cynon Taf	14.2	11.9	13.2	12.0
Merthyr Tydfil	14.5	16.2	13.6	12.7
Bridgend	14.7	12.8	11.7	6.4

Table 38: % of adults with low level qualifications (Level 2)

Local authorities	2017	2018	2019	2020
Rhondda Cynon Taf	19.0	20.4	19.5	18.1
Merthyr Tydfil	20.3	19.2	15.8	19.1
Bridgend	20.3	18.3	20.8	20.9

In addition to the higher-than-average percentage of adults with no or low-level qualifications, research by Poverty.org also highlighted:

- The proportion of people under the age of 40 without any formal educational qualifications is 8%, smaller than the proportion for those in their 40s, which in turn is much smaller than the proportion for those in their 50s.
- Up to the age of 40, there are no differences in the proportion without any formal educational qualifications between men and women. By

contrast, women in their 50s are much more likely to lack any qualifications than men: 20% compared with 14%.

- Around half of the working-age population lack basic numeracy skills. The proportion is similar in all the regions of England and in Wales.
- One in six of the working-age population lack basic literacy skills. The proportion is highest in Wales (25%).

This research also suggests that the immediate effects of the pandemic are particularly likely to increase three types of inequalities: income inequality, socio-economic inequalities in education and skills, and intergenerational inequalities.

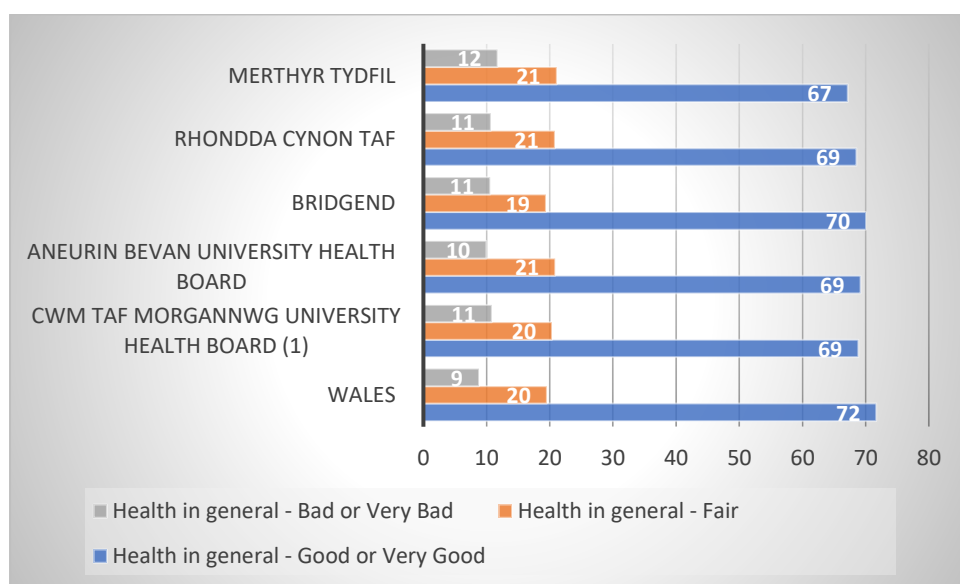
The huge disruption to schooling has affected all children, particularly those from poorer families, with long-term effects on their educational progression and labour market performance. Younger generations have experienced disrupted education and they face a tougher labour market than that seen prior to the pandemic.

15. General health

15.1 General Health

The National Survey for Wales (NSW) identifies the general health of the population which is broken down to health board and local authority. The charts below show the percentage in the different elements:

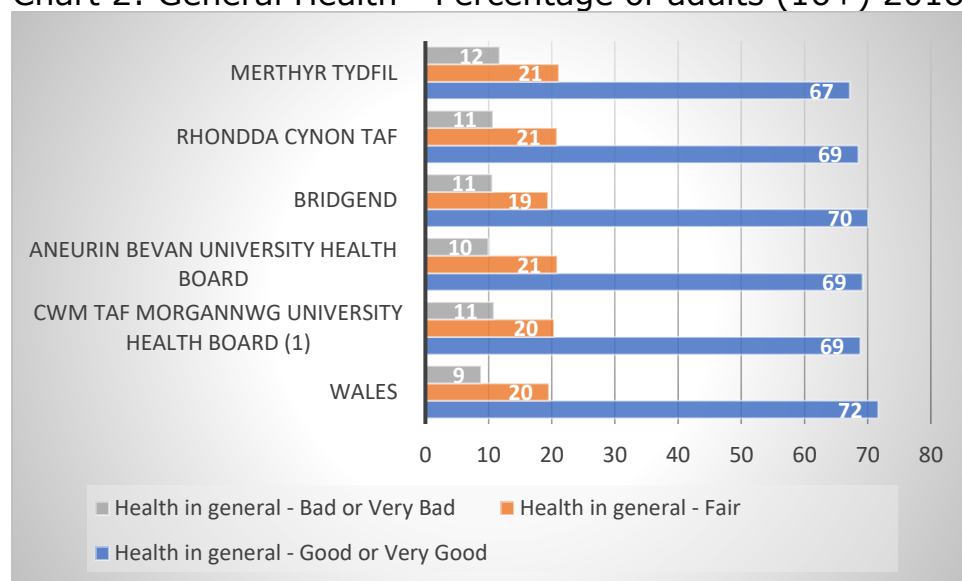
Chart 1: General Health – percentage adults (16+) Year 2018-19 & 2019-20



The data shows that there is a higher level of those reported in bad or very bad health across CTM compared to Wales. In comparison the levels are also higher than the Wales average for ABUHB. Overall the percentage difference is not significant compared to Wales in all categories.

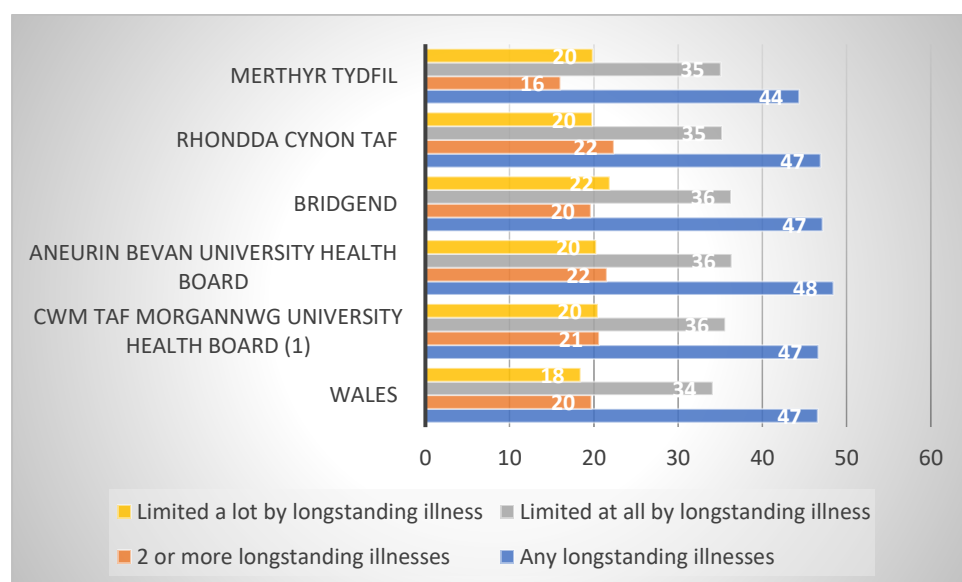
Illness is categorised in the below charts as general health, illness and type of illness:

Chart 2: General Health - Percentage of adults (16+) 2018-19 & 2019-20



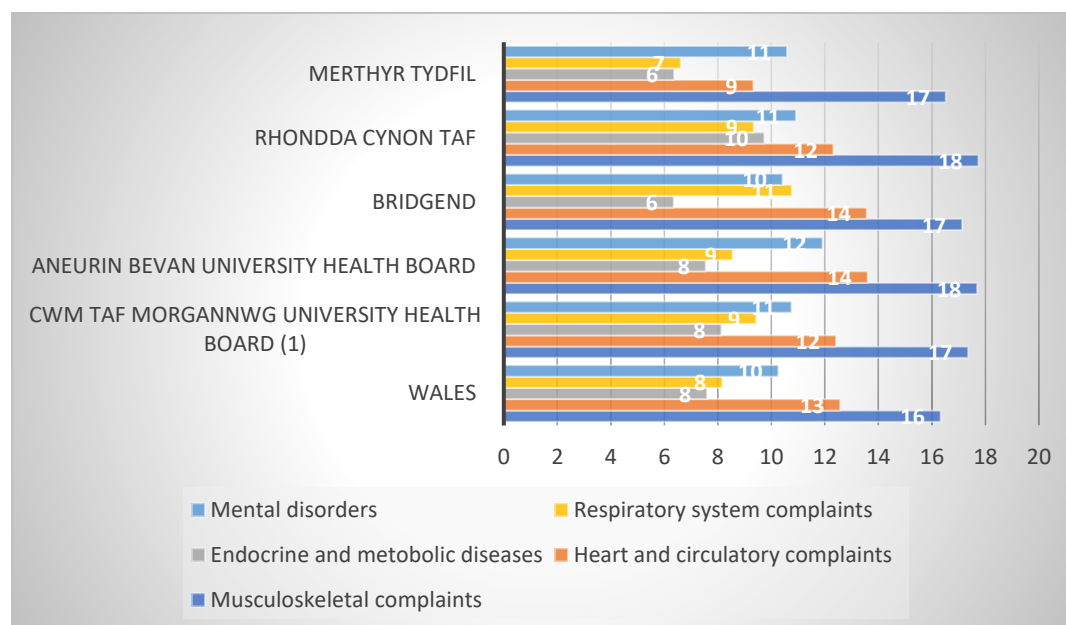
The percentage of people reporting good or very good health is close to the Wales average with Merthyr Tydfil having the lowest percentage. The percentage of those reporting bad or very bad health is also higher than the Wales average in Merthyr Tydfil.

Chart 3: Illness - Percentage of adults (16+) 2018-19 & 2019-20



Illness in the CTM area is close to the Wales average. Merthyr Tydfil show a slightly lower percentage with 2 or more longstanding illnesses compared to the other areas which are all higher.

Chart 4: Type of Illness - Percentage of adults (16+) 2018-19 & 2019-20



The types of illness that are recorded show that the highest rate relate to Musculoskeletal complaints which are higher than the Wales average across the CTM area. The comparison between CTMUHB AND ABUHB is similar with CTMUHB having the same or slightly lower percentage across all types of illness.

16. Housing

16.1 Houses without central heating

A household is described as 'without central heating' if it had no central heating in any of the rooms (whether used or not).

Table 39 is taken from the previous Census and provides the number and percentage of households across each of the local authority areas that do not have central heating. Though the percentages seem low it still equates to over 2,000 homes that do not have any central heating across Cwm Taf Morgannwg.

Table 39: Number and % of homes without central heating

Local authorities	No	%
Rhondda Cynon Taf	1,261	1.3
Bridgend	506	0.9
Merthyr Tydfil	261	1.1
CTM	2,028	1.1

Source: Census

Cold temperatures can be very dangerous to older people's health as they not only increase the likelihood and severity of flu, chest infections and other respiratory problems but they also raise blood pressure which puts people at greater risk of heart attacks and strokes.

Age UK's research found that whilst many older people are worried about staying warm at home, many are unaware of the severe health implications of being cold. Almost a quarter (22%) of older people don't realise that a number of serious health problems are made worse or brought on by the cold and this rose to 29 per cent amongst people aged 80 and over. Less than one in 10 people aged 65 and over in the UK are aware that strokes

can be brought on by the cold in winter, with only 14 per cent recognising that the cold can impact on heart attacks.

This year, more than any other, the high increase in energy costs are going to force many older people to live in cold homes. Many are concerned about staying warm in their own home this winter with millions citing worries about the increasing cost of energy bills.

16.2 Homelessness

The effects of homelessness can be said to extend far beyond the obvious problem of not having a safe, secure and stable home. In the UK the average homeless person can expect a life expectancy of 44 years old, they are 17 times more likely to have been a victim of violence and are 9 times more likely to commit suicide than a person in established and stable accommodation (Crisis UK).

Homeless people are more vulnerable to mental health issues, physical illness, substance misuse issues, physical and sexual assault and diseases.

The following tables offer figures for each homelessness intervention for persons of all ages under the Welsh Housing Act 2014.

Section 66

The rate per 10, 000 seeking Advice and Prevention services from the local authority has been fairly consistent over the four year period. All local authorities across the Cwm Taf Morgannwg region have seen an increase over the past 4 years, but over the past 2 years RCT has started to see a decline.

Table 40: Number and rate households threatened with Homelessness within in 56 days per 10,000 (section 66)

	2016/17		2017/18		2018/19		2019/20	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Bridgend	327	54	327	54	378	61	411	
Rhondda Cynon Taf	567	55	765	74	753	72	531	
Merthyr Tydfil	102	42	114	46	174	71	177	
Wales	9,231	69	9072	68	10,737	80	9,993	

Section 73

Table 41 offers figure over the last 4 years accessing section 73 assistance from LA's. The table indicates that the rate across all the areas has fluctuated slightly over the period, but the rate people are accessing this assistance, (obtaining accommodation as those seeking Advice and prevention advice under section 66) is generally higher than the Welsh average, with the exception of Rhondda Cynon Taf.

Table 41: Households assessed as homeless and owed duty to help secure

	Number/rate per 10,000 households (Section 73)							
	2016/17		2017/18		2018/19		2019/20	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Bridgend	567	94	549	90	666	108	630	
Rhondda Cynon Taf	504	49	573	55	516	50	717	
Merthyr Tydfil	210	86	240	97	300	121	414	
Wales	10,908	82	11,277	84	11,715	87	12,399	

Table 42: Rate of households for whom homelessness was successfully prevented for at least 6 months per 10,000 households

Local authorities	2017-18	2018-19	2019-20
Rhondda Cynon Taf	55.3	51.1	37.3
Merthyr Tydfil	24.3	40	35
Bridgend	36.9	43.4	46.6
Wales	44.9	54	49.3

During the pandemic the homelessness response has seen extraordinary action taken right across country, with the aim to get everyone into safe accommodation during this time.

Survey responses with voluntary sector organisations and in-depth interviews with local authorities has identified the following key findings:

- There has been a continued new flow of people experiencing homelessness since the start of the pandemic.
- The first few months of the pandemic, the increase was driven by those already experiencing homelessness - people who were sofa surfing and living in dangerous and transient accommodation – who became more visible as their living situations forced them to access help.
- The second wave saw a bigger increase from people who are experiencing homelessness for the first time, including those furloughed and newly unemployed.
- One of the biggest challenges facing local authorities is the ability to successfully move those housed in emergency COVID-19 accommodation into permanent and secure housing. The structural barriers that existed before the pandemic, including a lack of housing supply and a welfare system that does not address the underlying causes of homelessness have been exacerbated during the pandemic.
- There is growing concern over funding to support a homelessness response in both the immediate and longer-term future.

17. Safety

17.1 Crime rate

Table 43 is an overview of the recorded crime rate per 1,000 population/households for headline offences across the Cwm Taf Morgannwg area.

The crime rate per 1,000 population across the Cwm Taf Morgannwg region is considerably lower than the Welsh average (72/1,000). The percentage change in recorded offences by headline offence between year ending March 2020 and March 2021 was -16 in Bridgend and -10 in Cwm Taf, per 1,000 population.

Table 43: Crime rate per 1,000 population

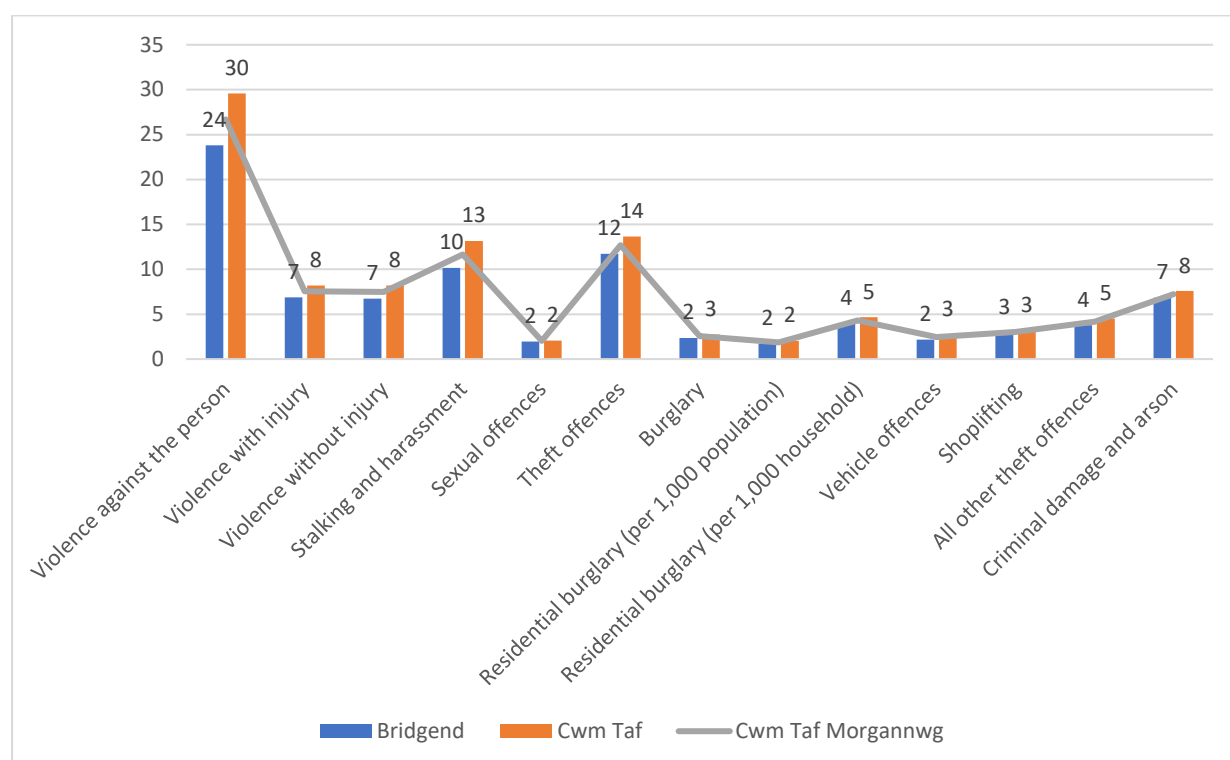
Community Safety Partnership name	Total recorded crime (excluding fraud)
Bridgend	58
Cwm Taf	69

Sources: Office of National Statistics

17.2 Types of crime

Chart 5 provides an overview of the type of victim-based crimes committed across Cwm Taf Morgannwg per 1,000 population/household. The three highest types of crime across each area are violence against a person, theft offences and stalking/harassment.

Chart 5: Crime rate per 1,000 population/household (victim-based crime)



Sources: Office of National Statistics

In addition to the victim-based crimes information provided above, table 44 provides the crime rate of other crimes against society.

Table 44: Crime rate per 1,000 population/household (other crimes against society)

Community Safety Partnership name	Drug offences	Public order offences	Miscellaneous crimes against society
Bridgend	3	8	2
Cwm Taf	4	10	1

18. Feeling safe

The national survey for Wales measures the percentage of people feeling safe at home, walking in the local area and travelling. Although the regional percentage is indicating a sharp decrease in the percentage of people feeling safe in the communities, the message across the different local authority area varies significantly. While people living in Rhondda Cynon Taf who feel safe has improved to just 1% below the Wales average, the percentage in Merthyr Tydfil and Bridgend has decreased abruptly.

Table 45: % of people feeling safe at home, walking in the local area, and when travelling

Local authorities	2016	2018
Rhondda Cynon Taf	68.6	69.6
Bridgend	73.0	64.7
Merthyr Tydfil	62.8	58.6

Source: Welsh Government

As highlighted in the strategy for older people in Wales, older people (aged 65+) generally report feeling less safe in their homes, local area, town/city centres and on public transport at any time than do younger adults, particularly after dark. Specific areas that were raised as concerns by older people included being concerned about scams, rogue traders and anti-social behaviour.

The pandemic introduced another layer of complexity with regards to people feeling safe in our communities, especially older people. The swift onset of the Covid affected many groups across Wales but it had specific implications for older people. Older people were advised by governments to limit social contact which caused many older people and their families to become increasingly anxious and fearful. As we emerge out of the pandemic a lot of the anxieties and fears are likely to remain.

19. Secure estate (SSWB)

HMP & YOI Parc plays a fundamental part in the Welsh and UK prison system. For the bulk of the adult population, the regime predominantly aims to prepare individuals for release and resettlement into the community through building, maintaining or improving family and community ties and providing access to local community services. Since its commissioning in 1997, HMP / YOI Parc has expanded to a population of circa 1700 men. From a health perspective, this represents a significant service need with very high mental health needs. Parc also has a 60 bed Youth Offender Institute (YOI) function which represents a different cohort of under 18's with specific support needs including CAHMS and Attention Deficit Hyperactivity Disorder (ADHD).

There has been a great deal of work done in Wales exploring the impact of ACEs on life chances and research indicates a strong correlation between ACEs and incarceration. Under 4% of those with no ACEs had been incarcerated, yet this rose to 38.5% of those with four or more ACEs. In terms of health, this same correlation exists across a range of health harming behaviours, in other words the more ACEs experienced as a child, the more likely an adult is to smoke, drink excessively, use illicit drugs and have a poor diet.

Covid presented additional challenges within prisons with risks rapid transmission of the virus in the densely populated confined space but also general poor health amongst residents leads to greater risk of serious illness and death from infection. Adult prisoners tend to be at greater risk from due to pre-existing poor health. In the last two decades, the proportion of older prisoners has increased significantly. For these reasons, there were, and still are, serious concerns about the spread of the virus in prisons.

A thematic review into the effect of the pandemic on prisoners was undertaken and highlighted a number of areas where prisoners were affected by the restrictions that were brought in. The review concluded that the cumulative effect of COVID-19 restrictions on prisoners' well-being and rehabilitation was likely to be significant and far-reaching.

20. Social connectedness

Social connectedness is the experience of feeling close and connected to others. It involves feeling loved, cared for, and valued, and forms the basis of interpersonal relationships.

Social connections are essential to nearly every aspect of health and well-being. Lack of connection has been linked to inflammation, accelerated aging and cardiovascular health risk, suicide, and all-cause mortality.

Feeling socially connected depends on the quality and number of meaningful relationships one has with family, friends etc. Going beyond the individual level, it also involves a feeling of connecting to a larger community, where connectedness on a community level has been found to have substantial benefits for both individuals and society.

Tables 38 – 41 are from the National Survey for Wales and provide some indicators that can help quantify the level of social connectedness across our local authorities and the whole region.

With the exception of being able to influence local decisions that affect them the majority of the indicators show a positive direction across Cwm Taf Morgannwg local authorities when it comes to social connectedness (this does vary between individual local authorities). That said for every indicator below each local authority across Cwm Taf Morgannwg is lower than the Wales average.

Table 46: % who feel able to influence decisions affecting their local area

Local authorities	2014	2016	2018
Rhondda Cynon Taf	19.2	14.8	17.7
Bridgend	18.4	24.7	17.3
Merthyr Tydfil	19.1	22.7	13.5
Wales	21.0	20.3	18.7

Table 47: % of people agreeing that they belong to the area; that people from different background get on well together; and that people treat each other with respect

Local authorities	2014	2016	2018
Rhondda Cynon Taf	55.6	41.9	47.6
Bridgend	54.4	50.5	47.0
Merthyr Tydfil	65.8	43.3	52.5
Wales	61.2	49.9	49.0

Table 48: % of people satisfied with local area as a place to live

Local authorities	2016	2018
Rhondda Cynon Taf	79.7	79.3
Bridgend	85.7	82.9
Merthyr Tydfil	80.7	84.4
Wales	85.4	85.3

Table 49: % of people satisfied with their ability to get to/access the facilities and services they need

Local authorities	2017	2018
Rhondda Cynon Taf	63.5	82.0
Bridgend	85.1	82.4
Merthyr Tydfil	84.6	78.9
Wales	77.1	79.7

21. One page profile – Children and young people

populating with up-to-date information

22. Key findings: Children and young people

The following sections provide an overview of the key demographics for children and young people living across Cwm Taf Morgannwg and provide further information for each of the priority groups and key themes. Each sub-section will include highlight data, feedback from engagement activities and key messages from relevant research, that will support the identification of need and inform our future priorities for health and social care.

23. Demographics

Cwm Taf Morgannwg is made up of three local authority areas: Merthyr Tydfil, Rhondda Cynon Taf and Bridgend. There are 449,836 people living in Cwm Taf Morgannwg, this is an increase of 8,535 since the last assessment in 2016.

Table 50 provides the number and percentage split of the population for each of the 3 local authority areas.

Table 50 – Whole population split across Cwm Taf Morgannwg:

Rhondda Cynon Taf	Bridgend	Merthyr Tydfil
241,873	147,539	60,424
53.8%	32.8%	13.4%

Sources: StatsWales

The total number of people living in Cwm Taf Morgannwg who are aged between 0-24 years is 128,808, this equates to 29.2% of the total population. Table 51 provides the number and percentage split across the region broken down by different age categories.

Table 51 – Age breakdown

Local authority	0-4		5-15		16-24		Total 0-24	
Rhondda Cynon Taf	5.5	13,049	13.4	31,838	10.9	25,879	29.7	70,766
Bridgend	5.3	7,636	12.9	18,549	10.0	14,309	28.2	40,494
Merthyr Tydfil	5.9	3,494	13.5	8,083	10.0	5,971	29.4	17,548
Cwm Taf Morgannwg	5.5	24,179	13.2	58,470	10.5	46,159	29.2	128,808

Source: StatsWales

Over the next 10 years the children and young people population is predicted to rise by only 846 (0.6%).

24. Health and physical disabilities (SSWB)

24.1 Obesity

Excess weight and obesity is becoming more common in Wales, and at the same time our collective ability to recognise what being a healthy weight looks like is reducing. This is a cause of significant public health concern, since carrying excess weight can have significant implications for an individual's physical and mental health.

Table 52 provides the percentage of children aged 4-5 years old that were either overweight or obese during the last child measurement programme.

Table 52 – % of children, aged 4 to 5 years who are overweight or obese

Local authorities	2014-15	2018/19
Rhondda Cynon Taf	27.7	26.5
Bridgend	27.8	31.6
Merthyr Tydfil	33.7	35.4
Cwm Taf Morgannwg	28.5	29.3

Source: StatsWales

Table 53 provides the percentages of children across Cwm Taf Morgannwg who were either of a healthy weight or underweight over the 3 year period.

Table 53 – % of children, aged 4 to 5 years who are healthy or under weight

Local authorities	2016/17	2017/18	2018/19
Rhondda Cynon Taf	72.0	70.7	73.5
Bridgend	71.5	74.4	68.4
Merthyr Tydfil	67.3	65.5	64.6
Cwm Taf Morgannwg	71.1	71.2	70.7
Wales	72.9	73.6	73.1

Source: Public Health Wales

Throughout Wales over 31,000 reception-age children were weighed and measured in 2018/19 as part of the programme, this is a slight fall from 93.7% to 93.4%.

Across Cwm Taf Morgannwg just over seven in every ten children (70.7%) have a healthy weight, this is below the national average of 73.1%. There was a small but statistically significant rise in obesity prevalence between 2014/15 and 2018/19 from 13.8% to 14.6%.

Children are significantly more likely than the Welsh average to be obese, if they live in areas of higher deprivation. The gap between obesity prevalence in the most and least deprived quintiles has increased from 5.9% in 2017/18 to 6.9% in 2018/19.

The local authority area with the highest prevalence of obesity is Merthyr Tydfil where 20.7% of children are obese. This is more than double that of the local authority areas with the lowest prevalence – the Vale of

Glamorgan and Monmouthshire at 8.6% and Ceredigion at 8.8%.

29.3% of children across Cwm Taf Morgannwg are overweight or obese which is the highest region across Wales and 2.4% higher than the national average.

Wales as a country has a higher percentage 6.9% of children in Wales are overweight or obese, compared to 22.6% in England and 22.4% in Scotland in this age group

Research has described the growing problem of the obesity epidemic and rightly identifies that the COVID-19 pandemic has highlighted this issue and provided an opportunity for change. They also highlight the link between health inequalities and childhood obesity.

Previous research has linked weight gain and out of school time in the school holidays is already well demonstrated, and worse amongst those from deprived backgrounds.[3] This is likely to have been the case during COVID19 lockdowns, which have affected 75% of school children around the world.[4] Combined with added food insecurity, with over 20% of UK households worse off financially now than before the pandemic began, families are more likely to buy cheaper and more calorie dense foods.[5]

24.2 Teenage conception (under 18)

Teenage pregnancy is a possible cause and a consequence of child poverty, which therefore increases the likelihood of ongoing health inequalities.

Research has

shown that teenage pregnancy is associated with poorer outcomes for both young parents and their children. It also highlighted a number of significant factors that increase the risk of teenage pregnancy, these include growing up in poverty, low educational attainment, poor attendance at school, non-participation in post-16 learning and low aspirations.

Tables 54 and 55 provides a breakdown of the rate of conception across and the total number of conceptions for women aged under 18 across the Cwm Taf Morgannwg region.

Table 54: Rate of under 18 conceptions per 1,000 females aged 15 - 17

Local authorities	2015	2016	2017	2018
Rhondda Cynon Taf	32.8	29.0	25.7	24.4
Bridgend	27.2	24.0	22.1	17.8
Merthyr Tydfil	31.5	33.8	23.6	26.4
Wales	24.3	20.9	20.2	22.9

Source: Office of National Statistics

Table 55 – Conceptions to women aged under 18

Local authorities	2020 (first 6 months)	2019	2018	2017
Rhondda Cynon Taf	49 (98)	78	93	98
Bridgend	17 (34)	42	42	53
Merthyr Tydfil	8 (6)	19	24	22
Cwm Taf Morgannwg	74 (148)	139	159	173

Source: Office of National Statistics

The rate of conception per 1,000 females aged 15-17 has fallen steadily in both England and Wales since the late 1990s, more rapidly so in more recent years. Although the full year figures are not yet available, figures from the first part of 2020 suggest a slight increase across the region for the first time in a number of years.

Even before this increase the rate has consistently remained higher in Wales than it does in England and varies considerably by area within Wales ranging from less than 20/1000 females aged 15-17 in some local authority areas to nearly 40/1000 in other areas. Likewise the percentage of conceptions ending in a termination varies greatly by local authority from less than one third in some local authorities to over a half in others. The variation across health board, although not as extreme as that seen at a local authority level, remains clear to see for teenage conceptions.

25. Learning disabilities and autism (SSWB)

A learning disability affects the way children and young people learn new things throughout their lifetime. It affects the way they understand information and how they communicate. This means they can have difficulty:

- understanding new or complex information
- learning new skills
- coping independently

Around 1.5 million people in the UK have a learning disability. It's thought up to 350,000 people have a severe learning disability. This figure is increasing.

25.1 Known to Disabled Childrens Team

Table ** provides a breakdown of the number of children known across Cwm Taf Morgannwg and by each local authorities Disabled Childrens Team.

The figures indicate a near 10% reduction across the region over the past 3 years, with only Bridgend registering more children with a disability over the period.

Table 56: All children known to Disabled Children's Team

Local authorities	As of 31st March		
	2019	2020	2021
Rhondda Cynon Taf	528	503	457
Bridgend	164	177	184
Merthyr Tydfil	108	96	87
Cwm Taf Morgannwg	800	776	728

The lockdown had a considerable, negative impact on the daily life of children with disabilities and their families. With access to services, especially health services, proving difficult during the pandemic, children with a disability and their families have been disproportionately impacted.

An online survey undertaking with parents of children with a disability found:

- A negative impact of lockdown on their daily lives was reported for 81% of children with physical disabilities.
- Difficulties with schooling, physical activity, behaviour, morale and social interaction were reported for many children.
- Parental stress and behavioural disorders were more frequent in children with physical disabilities.
- Associated disorders, parental stress and rehabilitation disruption were determinants of the level of difficulty experienced.

The greater burden faced by children living with disabilities means that additional efforts will be required to ensure their needs are being met when transitioning to through the next pandemic phases.

26. Mental health

Mental health problems affect around one in six children. They include depression, anxiety and conduct disorder (a type of behavioural problem) and are often a direct response to what is happening in their lives.

Alarming, however, 75% of children and young people who experience a mental health problem aren't getting the help they need.

Children's emotional wellbeing is just as important as their physical health. Good mental health helps them develop the resilience to cope with whatever life throws at them and grow into well-rounded, healthy adults.

There is also widespread concerns about the effect of social isolation or social distancing on child wellbeing, including increased anxiety, depression, stress, and concern about exacerbation or relapse of pre-existing mental health issues.

26.1 Children and adolescent mental health service (CAMHS)

Tables 58-59 provide the total number of referrals to CAMHS from across the Cwm Taf Morgannwg region along with the percentage of those referrals that were accepted. The data shows that the majority of the referrals received and accepted were from the 12-17 age category and that the majority of those referrals were female (60% in 2020/21)

Table 58: Age breakdown of referrals to CAMHS

	All referrals				
	0-4	5-11	12-17	18+	Total
2019/20	44	990	2,330	3	3,373
2020/21	26	827	1,977	7	2,844

Source: Cwm Taf Morgannwg UHB

Table 59: Referrals accepted

	% of referrals accepted				
	0-4	5-11	12-17	18+	Total
2019/20	22.7	67.6	86.3	0.0	79.7
2020/21	19.2	57.9	82.4	14.3	74.4

Source: Cwm Taf Morgannwg UHB

Table 60 provides the gender breakdown for referrals received by CAMHS over the past 2 years. The data shows that there have been more females than males referred in each of the past 2 years but this percentage has increased further from 55% to 60% in 2020/21.

Table 60: Gender breakdown of referrals accepted to CAMHS

	Male	Female
2019/20	1,205	1,480
2020/21	846	1,264

Source: Cwm Taf Morgannwg UHB

Table 61 provides the breakdown of the reasons for referrals to CAMHS for the past 2 years.

Table 61: Reasons for referral to CAMHS – 2019-2021

Reason for referral	No's
Anxiety	683
Suicidal ideation	620
Low Mood	495
Overdose	284

Behaviour	270
Self Harm	179
Eating Disorder	85
YPDAS - Drugs	80
Depression	73
Angry Outbursts	62
Obsessive compulsive disorder	55
Tourette's Syndrome	55
Anorexia Nervosa	45
ADHD	41
YPDAS - Drug and Alcohol	40
Gender Identity	28
Autistic Spectrum Disorder	27
Psychosis Schizophrenia	21
Hearing Voices	15
Emotional Abuse	11
PTSD	10

Source: Cwm Taf Morgannwg UHB

Mentalhealth.org emphasises that certain risk factors can make some children and young people more likely to experience mental health problems than others. However, experiencing them doesn't mean a child will definitely, or even probably, go on to have mental health problems.

These factors include:

- having a long-term physical illness
- a parent who has had mental health problems, problems with alcohol or has been in trouble with the law
- the death of someone close to them
- parents who separate or divorce
- experiencing severe bullying or physical or sexual abuse
- poverty or homelessness

- experiencing discrimination
- caring for a relative, taking on adult responsibilities
- having long-lasting difficulties at school.

Research published by the British Medical Journal in March 2021 highlighted that although the mental health of the UK's children and young people may have been impacted by the Covid it was deteriorating before the pandemic. It also found that health, educational, and social outcomes for children with mental health conditions are worse than for previous cohorts

Studies carried out during the pandemic suggest that although some families are coping well, others are facing financial adversity, struggling to home school, and risk experiencing vicious cycles of increasing distress. Probable mental health conditions increased from 10.8% in 2017 to 16% in July 2020 across all age, sex, and ethnic groups according to England's Mental Health of Children and Young People Survey (MHCYP). The more socioeconomically deprived respondents had consistently worse mental health in both surveys— a warning given the current economic problems would expect to increase the numbers of families under financial strain.

26.2 School based counselling

All local authorities in Wales are required to provide school based counselling services for pupils in Year 6 of primary school and throughout secondary school. Referrals to this service can be made by schools as well as by parents or carers.

Table 62 provides an overview of the number of pupils attending counselling services across the three local authority areas for the past 4 years.

Due to the varying numbers of pupils attending schools across the three areas it is difficult to do too many comparisons of the data. But, the chart does show that there has been a continual increase in the number of children and young people receiving counselling in Rhondda Cynon Taf and Merthyr Tydfil up until the 2019/20 academic year.

Table 62: Number of children and young people attending counselling by Area and Year

Local authority	2017/18	2018/19	2019/20
Rhondda Cynon Taf	1293	1347	948
Bridgend	414	399	288
Merthyr Tydfil	327	372	420
CTM	2034	2118	1656

Source: Stats Wales

The information received from the counselling services also highlights the higher proportion of females accessing counselling services in schools.

The predominant issues relating to referrals are:

- Anger
- Anxiety
- Family
- Self-worth
- Stress

A survey undertaken by Young Minds into the impact of the pandemic on young people's mental health shows that many young people have found lockdowns hard to cope with especially the second one (Nov 2020 – Mar 21).

The pandemic has had a devastating impact on many of the young people with them reporting feeling deeply anxious, started self-harming again, having panic attacks, or are losing motivation and hope for the future.

The main reasons given by young people were loneliness and isolation, concerns about school, college or university work, a breakdown in routine and many expressing fears about the future.

The survey reported:

- 75% of respondents agreed that they have found the last lockdown harder to cope with than the previous ones, *including 44% who said it said it was much harder.*
- 67% believed that the pandemic will have a long-term negative effect on their mental health. *This includes young people who had been bereaved or undergone traumatic experiences, who were concerned about whether friendships would recover, or who were worried about the loss of education or their prospects of finding work.*
- 79% of respondents agreed that their mental health would start to improve when most restrictions were lifted.

27. Sensory impairment

27.1 Registered with a SI

Table 63: RCT only

	As of 31st March 2018				
	Under 5	5-17	18-64	65+	Total
Sight impaired (Inc severely)	3	25	357	742	1127
Sight impaired with other physical disability	3	25	346	700	1074
Deaf with sight impairment (Inc hard of hearing)	0	0	11	42	53
Deaf or hard of hearing (all)	0	6	287	746	1039

Table 64:

	As of 31st March 2021				
	Under 5	5-17	18-64	65+	Total
Sight impaired (Inc severely)	4	39	252	536	831
Sight impaired with other physical disability	3	39	243	492	777
Deaf with sight impairment (Inc hard of hearing)	1	0	9	44	54
Deaf or hard of hearing (all)	3	9	217	747	976

28. Carers

Number of known young carers

Table 65:

Local authorities	As of 31st March
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	2019	2020	2021
Rhondda Cynon Taf	123	158	180
Bridgend			
Merthyr Tydfil			
Cwm Taf Morgannwg	123	158	180

29. Domestic violence

Many children exposed to violence in the home are also victims of physical abuse. Children who witness domestic violence or are victims of abuse themselves are at serious risk for long-term physical and mental health problems. Children who witness violence between parents may also be at greater risk of being violent in their future relationships.

Table 66: Number of children receiving support from Social Services where domestic violence was an issue in the latest assessment

Local authorities	As of 31st March		
	2018	2019	2020
Rhondda Cynon Taf	341	225	360
Bridgend			
Merthyr Tydfil	NA	NA	NA
Cwm Taf Morgannwg	341	225	360

29.1 Children witnessing domestic violence

Children in homes where one parent is abused often feel fearful and anxious, they may always be on guard, wondering when the next violent event will happen. This can cause them to react in different ways, depending on their age:

- Children in preschool. Young children may start doing things they used to do when they were younger, such as bed-wetting, thumb-sucking, increased crying, and whining. They may also develop difficulty falling or staying asleep; show signs of terror, such as stuttering or hiding; and show signs of severe separation anxiety.
- School-aged children. Children in this age range may feel guilty about the abuse and blame themselves for it. Domestic violence and abuse hurts children's self-esteem. They may not participate in school activities or get good grades, have fewer friends than others, and get into trouble more often. They also may have a lot of headaches and stomach-aches.
- Teens. Teens who witness abuse may act out in negative ways, such as fighting with family members or skipping school. They may also engage in risky behaviours, such as having unprotected sex and using alcohol or drugs. They may have low self-esteem and have trouble making friends. They may start fights or bully others and are more likely to get in trouble with the law. This type of behaviour is more

common in teen boys who are abused in childhood than in teen girls. Girls are more likely than boys to be withdrawn and to experience depression.

In a report from National Youth Advocacy Service (2020) they have seen fewer child protection interventions due to children interacting with fewer agencies, which they believe can make children more vulnerable to violence. Community Care (2020) found that among social workers, children's services were more dissatisfied, they were more concerned about personal protective equipment availability, and reported an increased workload, with domestic abuse referrals putting a strain on the system.

30. Economic wellbeing

30.1 Children in long-term workless households

Analysis shows the stark difference between outcomes for children in workless families and those in lower income working families. Children growing up in workless families are almost twice as likely as children in working families to fail at all stages of their education (DWP, 2017).

Parents' ability to work is often frustrated by complex issues that prevent them from fulfilling their potential and leave children without the stability a working household can provide. Research by DWP has shown that workless families are considerably more likely to experience problems with their relationships, have poor mental health, and be in problem debt.

Tables 67 provide some statistics about the percentage of children living in workless households across the Cwm Taf Morgannwg region. The data shows the percentage has increased over the 3 years between 2017-2019 and in each local authority it is considerably higher than the Wales average (13.5% in 2019).

In addition to this the data for long-term worklessness indicates that at least half of those households have been out of work for at least 12 months.

Table 67: % of children living in workless households

Local authorities	2017	2018	2019
Rhondda Cynon Taf	14.8	10.0	19.2
Bridgend	19.1	17.3	13.2
Merthyr Tydfil	19.8	19.7	18.2

Source: Office of National statistics

Table 68 provides the total percentage of children living in long-term workless households across Wales.

Table 68- % of children living in long-term workless households

	2017	2018	2019
Wales	9.2	9.1	9.9

The Covid pandemic has had a significant impact on unemployment and subsequently the percentage of children living in workless households. The

number of people claiming unemployment-related benefits, which includes some people working but on low incomes, increased by 120.8% between March and August 2020. There is also some evidence that people on low incomes saw a higher-than-average drop in income at the onset of the pandemic.

With work related Covid policies ending during the second part of 2021 (Furlough and the £20 uplift), it is likely that more people will see significant reductions in their household income.

30.2 Free school Meals (eligibility)

Free school meals are awarded where the parent or pupil meets the eligibility criteria and a request has been made by, or on behalf of the parent or pupil for free school meals. Eligibility is depended on parents receiving one from a list of income support payments.

Tables 69 provide the percentage of pupils across the three local authorities that are eligible for free school meals, it is also broken down by those with and without a special educational need.

Table 69: % of pupils eligible for free school meals (with and without a SEN

Local authorities	2018/19		2019/20		2020/21	
	Without	With	Without	With	Without	With
Rhondda Cynon Taf	21.9	28.1	22.6	23.8	24.8	19
Bridgend	19	21	20.3	22	22.2	12.1
Merthyr Tydfil	20.1	26	20.4	22.1	22.3	18.1

With the exception of 2020/21, children and young people with a SEN are more likely to be eligible for free school meals when compared to those without.

During the pandemic more than one in five children across Wales became eligible for free school meals with numbers soaring to the highest level for at least two decades.

According to Data Cymry a further 19,000 children became eligible between January 2020 and January 2021 rising to a total 105,000.

In some more deprived areas, during peak times, the percentage raised to nearly one in every three children.

To ensure those eligible continued to receive their meals, the Welsh Government placed an expectation that all schools across Wales would continue to provide lunch for eligible pupils whilst they are unable to attend school because of the pandemic. This provision included the Easter holidays and the spring half-term break, and the summer holiday period.

30.3 Not education, employment or training (NEET)

The annual survey of school leavers undertaken by Careers Wales on behalf of the Welsh Government provides a useful snapshot of pupil destinations at the end of years 11, 12 and 13.

Tables 70 to 72 provides a percentage of young people who were identified as being NEET at the end of years 11, 12 and 13 for each local authority.

Table 70: % of pupils eligible for free school meals (with and without a SEN

Rhondda Cynon Taf		Year 11		Year 12		Year 13	
Date	Measure	No	%	No	%	No	%
2018	YP known to be NEET	45	1.9	15	1.2	31	2.9
2019	YP known to be NEET	67	2.5	18	1.6	38	3.8
2020	YP known to be NEET	37	1.4	7	0.5	34	3.5
Change		-8	-0.5	-8	-0.7	3	0.6

Table 71: Merthyr Tydfil

Merthyr Tydfil		Year 11		Year 12		Year 13	
Date	Measure	No	%	No	%	No	%
2018	YP known to be NEET	6	1.1	0	0	3	10.7
2019	YP known to be NEET	11	2.1	0	0	5	20.8
2020	YP known to be NEET	14	2.7	0	0	1	6.7
Change		8	1.6	0	0.0	-2	-4.0

Table 72: Bridgend

Bridgend		Year 11		Year 12		Year 13	
Date	Measure	No	%	No	%	No	%

2018	YP known to be NEET	13	0.9	5	0.5	23	3.2
2019	YP known to be NEET	10	0.7	3	0.4	15	1.9
2020	YP known to be NEET	35	2.4	4	0.5	23	3.4
Change		22	1.5	-1	0.0	0	0.2

In the year following the Covid outbreak, there was a fall in the number of young people who were NEET. The percentage of young people across Wales who were NEET fell from 11.7% (2019) to 9.2% (Q1 2021) and for 16-18 year olds and from 16.1% to 15.3% for 16-24 year olds.

Over the same period there has been an increase in the proportion of young people who are NEET, and who are also unemployed. Further analysis of the data indicates that the reduction in NEET has been produced by a significant increase in the percentage of young people remaining in full time education.

Disabled young people not in education, employment or training (NEET)

Table 73 compares the NEET rate of young people with and without a disability provides for 16-18 year olds and 19-24 year olds.

As the chart clearly indicates disabled young people are significantly more likely to be NEET than young people that are not disabled. During 2019/20 18.1% of Young people with a disability were NEET compared to 7.3% without a disability.

This difference was even more pronounced for 19 to 24 year olds compared to 16 to 18 year olds. The proportion of disabled people who are NEET rises from 18.1% at age 16 to 18 to 41.2% at age 19 to 24. Looking back at this

data for the 4 years prior to 2021, the figures show a worryingly trend of a continuous increase year on year.

Table 73 - Young people not in education, employment or training (NEET) in Wales, by disability status

Group	2017 - 2019	2018 - 2020	2019 - 2021
16 to 18 years old - disabled	15.4	17.8	18.1
16 to 18 years old - not disabled	6.3	7.0	7.3
19 to 24 years old - disabled	39.8	40.2	41.2
19 to 24 years old - not disabled	10.5	9.7	9.8

30.4 Skills and knowledge

KS4 results

Table 74: % of pupils achieving L1 and L2 at Key stage 4, broken down by free school meal eligibility

	Percentage who achieved Level 1		Percentage who achieved Level 2	
	Eligible for FSM	Not eligible for FSM	Eligible for FSM	Not eligible for FSM
Local authorities				
Rhondda Cynon Taf	87.7	97.4	36.6	72.4
Bridgend	90.2	98.4	98.4	76.6
Merthyr Tydfil	94	98.6	34.5	68.7

School attendance

Primary school

Table 75: % of half day sessions missed (Primary schools)

Local authorities	2017/18				2018/19		
	Authorised absences	Unauthorised absences	All absences		Authorised absences	Unauthorised absences	All absences
Rhondda Cynon Taf	4.1	1.7	5.8		3.9	1.8	5.7
Bridgend	4.1	1.1	5.2		4.1	1.1	5.2
Merthyr Tydfil	4.2	1.8	6		4.1	2	6.1

Mainstreamed secondary schools

Table 76: % of half day sessions missed (Secondary schools)

	Authorised absences	Unauthorised absences	All absences		Authorised absences	Unauthorised absences	All absences
Rhondda Cynon Taf	4.7	2.3	7		4.4	2.7	7.1
Bridgend	5.2	0.9	6.1		4.8	1	5.9
Merthyr Tydfil	4.5	3	7.5		4.4	2.7	7.2

Special schools

Table 77: % of half day sessions missed (Special schools)

2017/18	2018/19
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	Authoris ed absences	Unauthoris ed absences	All absenc es		Authoris ed absences	Unauthoris ed absences	All absenc es
Rhondda Cynon Taf	9.2	2.7	12		10.4	3.8	14.3
Bridge nd	12.9	10.3	23.2		11.7	12.7	24.4
Merthyr Tydfil	10.6	3.7	14.3		8.9	2.2	11.1

31. Housing - Youth homelessness

Young people between the ages of 16 and 24 years old who find themselves homeless are amongst the most vulnerable groups in our society. Homelessness for young people is a trauma which can have long lasting and significant detrimental effects on a young person's wellbeing

and potential in live a fulfilling and productive role in society for themselves and others. Young people between the ages of 16 and 24 account for approximately 10.9% of the total population of Rhondda Cynon Taf.

In the UK the average homeless person can expect a life expectancy of 44 years, they are 17 times more likely to have been a victim of violence and are nine times more likely to commit suicide than a person in established and stable accommodation (Crisis UK). Homeless people are also more vulnerable to mental health issues, physical illness, substance misuse issues, physical and sexual assault and diseases.

31.1 Youth Homelessness Data Analysis

Table 78 offers a breakdown of the number of young people who have accessed homelessness services in RCT over the last three years. The number of young people accessing assistance has fallen over the three-year period by 17.5% with the numbers indicating that young females were more susceptible to becoming homeless or seeking advice and guidance with housing issues than males in the same age group.

Table 78: No of households for which assistance has been sort under the Housing Act (Wales), 16-24 age range

Rhondda Cynon Taf	2016/17	2017/18	2018/19
(All Ages)	1494	1869	1524
(16 – 24)	411	456	339
(16 – 24) Males	207	192	147
(16 – 24) Females	204	264	183

Table 79 provides the number of young people whose application ended under section 66 (outcomes). These figures indicate those who have ended their homelessness applications through seeking advice and prevention services via the duty. Though youth homelessness accounts for a relatively small proportion, the numbers have increased over the period by 17.5%.

Table 79: No of outcomes - Eligible, threatened with homelessness, prevention assistance provided (Section 66)

Rhondda Cynon Taf	2016/17	2017/18	2018/19
(All Ages)	567	765	753
(16 - 24)	120	135	141
(16 - 24) Males	42	36	42
(16 - 24) Females	78	99	99

The most common reason for young people being threatened with homelessness was 'Parents no longer willing to accommodate' accounting for 30.6% of all applications. The second most common reason was other persons no longer willing to accommodate, accounting for a further 15.4% of the total. The next 2 highest reasons are:

- Loss of rented or tied accommodation. (14.2%)
- Violence or harassment which is due to another reason (12.1%)

Key points: Further analysis of the Section 66 data highlighted:

- Those over 21 were significantly more likely to access this duty, with the highest figure reported for a single age being for 22 year (21.3%).
- Single males make up the majority of applications for a single category (32%) of applications with single females second highest (30.4%).

- Those with dependent children were almost all single females although there were two single male applicants over the period. Overall couples, single females and single males with dependent children accounted for 28.3% of all applicants.

Section 73

People who have ended their duty from the local authority under their homelessness application under section 73 of the Housing Act Wales (2014) whereby the local authority has sought to assist them in securing accommodation.

Table 80 shows the number of people accessing local authority duties under section 73 has decreased for those aged between 16 and 24.

Unlike the trend observed for section 66 advice and prevention applications where females formed the majority of cases, for section 73, the duty to help secure accommodation, reports that males are significantly higher.

Table 80: No of outcomes - eligible, homeless, subject to duty to help and secure accommodation (section 73)

Rhondda Cynon Taf	2016/17	2017/18	2018/19
(All Ages)	504	573	516
(16 - 24)	159	180	132
(16 - 24) Males	90	99	78
(16 - 24) Females	69	81	48

Single person household, male applicants form the vast majority of people accessing section 73 assistance, accounting for 56.1% off all applications. Single females are the second largest group at 30.7%.

As in the case of section 66 assistance cases the most common reason for homelessness stated by section 73 applicants is 'Parents no longer willing

to accommodate'. This accounts for 42.3% of all applicants whilst 'Other relatives and friends' being no longer willing accommodate the applicant is the second most common reason at 20.4%.

Section 75

The final duty to secure accommodation for those who are eligible and in priority need come under section 75.

Table 81 provides the number of people, aged 16-24 who required supported under section 75 over a 3-year period. Over the three-year period the number of young people presenting as homeless and needing to access the local authorities final duty to secure accommodation increased sharply in 2018/19. Gender did not appear to have any clear influence, however the number of males reduced significantly during 2017/18.

Table 81: No of outcomes - Eligible, unintentionally homeless and in priority need (Section 75)

Rhondda Cynon Taf	2016/17	2017/18	2018/19
(All Ages)	78	75	117
(16 - 24)	24	21	39
(16 - 24) Males	12	3	18
(16 - 24) Females	12	18	18

The most common reasons provided for youth homelessness across all three sections of the Wales Housing Act (2014) are the same. For section 75 duties, the most common reason stated is that of parents no longer being willing to accommodate accounting for 33.8% of the applicants. The second most common reason cited was that of 'other relatives or friends no longer willing to accommodate'. This accounted for 23.9% of applicants seeking to secure accommodation from the local authority.

Personal conflicts account for 22.5% of the reasons stated for homelessness. Of these Nonviolent relationship breakdowns were 2.8%,

violent relationship breakdowns 1.4% and violence and harassment due to another reason 4.2%.

The impact of Coronavirus, and measures taken in response, have already had huge impacts on young people. For young people going through homelessness, the lockdown has meant it is harder than ever to find a stable place to stay.

One of the biggest ongoing challenges facing local authorities is the ability to successfully move those housed in emergency accommodation into permanent and secure housing. The structural barriers that existed before the pandemic, including a lack of housing supply and a welfare system that does not address the underlying causes of homelessness, have been exacerbated during the pandemic.

A client survey undertaken by DEPAUL, found that the Covid-19 pandemic is taking a heavy toll on young people facing homelessness. The survey found that this group of young people were being disproportionately impacted by the pandemic, with 58% having suffered increased anxiety because of their financial situation during the pandemic, and almost three-quarters (74%) had been isolated from family and friends. Around six out of 10 (59%) said their mental health had suffered because of Covid-19.

Almost a third (32%) said they had faced difficulties in finding enough food during lockdown. Of these, more than four-fifths (83%) said that the pandemic had had a negative impact on their mental health while 89% were unemployed and, therefore, dependent on state benefits for their upkeep.

32. Safety

32.1 Children looked after (CLA)

The number of children looked after across CTM increased by 8.23% between March 2018 and March 2020, compared to a 12% increase across Wales. Although the overall percentage for CTM is lower than the Wales average the increase varies significantly per local authority (RCT +5.9%, Bridgend +2.6%, Merthyr Tydfil +32.3%).

Table 82 provides a breakdown by gender on the 31st March for each of the past 3 years. The gender split over the 3-year period indicates that for each year there were more boys looked after compared to girls, with the boys making up 56% of all looked after children as of 31st March 2020. This is a similar pattern as the previous 10 years+.

Table 82 - Number of children looked after as of 31st March, by gender

	2018		2019		2020	
	Boys	Girls	Boys	Girls	Boys	Girls
Rhondda Cynon Taf	375	300	375	295	415	300
Bridgend	210	175	210	175	215	180
Merthyr Tydfil	85	70	100	95	105	100
Cwm Taf Morgannwg	670	545	685	565	735	580

Table 83 provides the total looked after population by age groups as of 31st March 2020. Those aged 10 to 15 make up the largest proportion of children looked after across the region (37%). However, the highest rate of children looked after by age is the over 16s. All age groups apart from the under 1's have seen a rise over the five years, but the biggest increase has been in rate of 5-9 year olds (14.3%).

Table 83 - Number of children looked after as of 31st March 2020, by age

Under 1	1-4 years old	5-9 years old	10-15 years old	16-17 years old
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Rhondda Cynon Taf	30	135	185	265	105
Bridgend	25	80	90	150	55
Merthyr Tydfil	5+	50	50	65	35
Cwm Taf Morgannwg	60+	265	325	480	195

The increase of children looked after as per 10,000 population has increased across all Local Authorities between 31st March 2020 when compared to the same date in 2018. Though the overall rate for each local authority remains above the Welsh rate, 2 of the 3 local authorities has seen the rate increase at a slower rate.

Table 84 provides the rate per 10,000 population across all Local Authorities as of 31st March for the past 3 years.

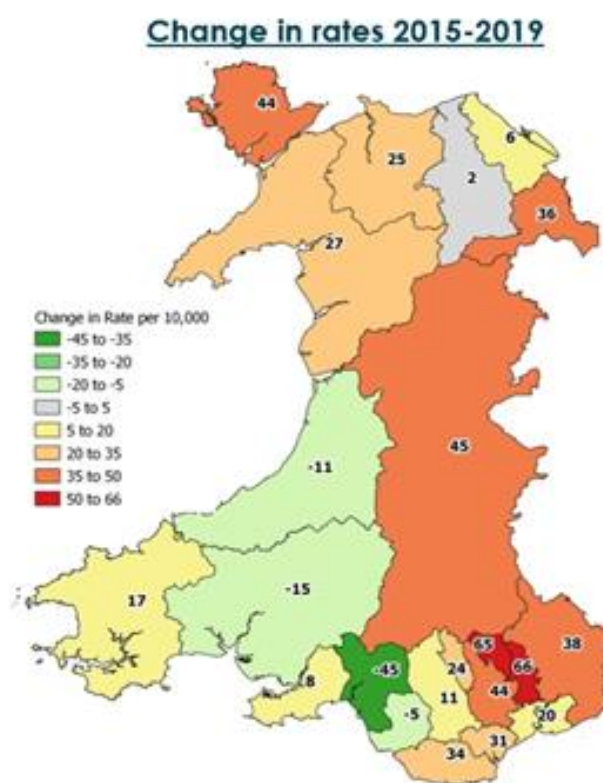
Table 84: Children looked after on 31 March per 10,000 population (aged under 18)

Local authorities	2018	2019	2020
Bridgend	131.4	129.7	134.2
Rhondda Cynon Taf	135.4	134.8	143.1
Merthyr Tydfil	122.5	154.5	160.2
Wales	102	109	114

Between 2014 and 2019, four local authorities saw their numbers steadily decrease with two in particular, Carmarthenshire and Neath Port Talbot, recording large reductions.

By contrast, nine local authorities have seen upward trends in their numbers of children looked after in recent years. Together they account

for almost 83% of net increase in numbers over the five years. The graph below provides an overview of the rates across Wales.



Research and analysis undertaken by the Wales Centre for Public Policy identified three potential factors (both singularly and in combination) for the variations in local authority rates, Namely:

1. safeguarding practice;
2. levels of deprivation; and
3. parental factors.

Safeguarding practice accounted for 13% of the variation, almost half (47%) of the variation can be explained by the extent of deprivation within that authority. The 'trigger trio' of parental factors – substance misuse, parental mental ill health and domestic abuse – together account for around 35% of the variation in rates.

32.2 Children receiving Care and Support

Following the commencement of the Social Services and Well-being (Wales) Act in April 2016, the children in need census has been discontinued and replaced by the children receiving care and support census. The children receiving care and support census is based on the definition of eligible children who have care and support, i.e. children (under the age of 18) who have a care and support plan.

The data presented in table 85 indicates that across the region the number of children receiving care and support has remained relatively consistent, though there has been some slight fluctuating within individual local authorities.

Table 85: Number of children receiving care and support

Local authorities	2018	2019	2020
Bridgend	690	735	745
Rhondda Cynon Taf	1420	1330	1375
Merthyr Tydfil	455	485	430
CTM	2,565	2,550	2,550

Source: Stats Wales

Table 86 identifies the categories of care for children receiving care and support for each of the local authorities.

Table 86: Number of Children receiving care and support by local authority and category of need

Category of need	Year	Bridgend	Rhondda Cynon Taf	Merthyr Tydfil	Wales
Abuse and neglect	2018	480	1050	350	8075
	2019	550	880	325	8245
	2020	565	775	220	8250
Family in Acute Stress	2018	25	150	30	1345
	2019	25	255	30	1385
	2020	25	395	20	1620
	2018	120	135	60	2045

Family Disfunction	2019	105	140	65	1980
	2020	85	160	40	1895

Source: Stats Wales

The category of need is mainly relating to Abuse or Neglect, Family in Acute Stress or Family Disfunction which is shown in the below table.

Data relating to parental factors for children receiving care and support show that the main reasons relate to substance misuse, mental health and domestic abuse. The following charts show the different elements in each local authority area:

Tables 87 to 91 provides the number of children receiving care and support by the parental factors, year and local authority.

Table 87: Domestic abuse

	2018	2019	2020
Rhondda Cynon Taf	18	13	20
Bridgend	42	44	40
Merthyr Tydfil	30	43	38
Cwm Taf Morgannwg	90	100	98

Table 88: Parental physical ill health

	2018	2019	2020
Rhondda Cynon Taf	9	4	7
Bridgend	18	13	17
Merthyr Tydfil	9	7	6
Cwm Taf Morgannwg	36	24	30

Table 89: Parental mental ill health

	2018	2019	2020
Rhondda Cynon Taf	18	14	22
Bridgend	47	52	51
Merthyr Tydfil	36	34	31
Cwm Taf Morgannwg	101	100	104

Table 90: Parental learning disabilities

	2018	2019	2020
Rhondda Cynon Taf	3	2	2
Bridgend	8	7	5
Merthyr Tydfil	7	4	3
Cwm Taf Morgannwg	18	13	10

Table 91: Parental learning disabilities

	2018	2019	2020
Rhondda Cynon Taf	17	10	16
Bridgend	38	38	34
Merthyr Tydfil	30	33	37
Cwm Taf Morgannwg	85	81	87

Source: Stats Wales

33. Youth offending

A young offender is a person who has been convicted of, or cautioned about, a criminal offence. A young offender can be male or female. Criminal justice systems will often deal with young offenders in a different way to adult offenders.

Research has found a number of factors that are likely to increase the chance of a young person becoming involved in offending with some risk factors having a more of an influence of younger people committing crimes. The factors identified include:

Table 92: Factors that increase the chance of offending

Peer group pressure	Parental criminality	Family conflict
Peer involved in problem behaviour	Low family income	Mental illness
High proportion of time unsupervised with peers	Social isolation	Troubled home life
Poor parental discipline or supervision	alienation	Unemployment
Drug and alcohol misuse	Truancy	
Disruptive behaviour, such as aggression, hyperactive, bullying	School disorganisation	School exclusion
Poor housing, homelessness	Community disorganisation	Lack of social commitment
Early involvement in problem behaviour	Opportunity for crime	Availability of drugs
High percentage of children in the community		

The Youth Lifestyles Survey in the UK isolated the following risk factors for boys in the 12 to 17 year old age group:

- Boys who were disaffected from school/persistent truants had a higher risk of serious or persistent offending
- The use of drugs in the last year was a strong predictor of a serious or persistent offender, being nearly five times higher than for non-offenders
- Young people who were less supervised by their parents and who had friends or acquaintances that had been in trouble were more at risk.
- Boys who did not hang around in public places were less likely to offend than those who did.

Table 93: % of present risk factors exhibited by serious or persistent offenders

Factor	%
Disaffected from school	36%
Drug user (using drugs in the last year)	52%
Hanging around in a public place	80%
Delinquent friends or acquaintances	64%
Poor parental supervision	47%
Persistent truant – at least once a month	16%

34.1 Anti-social behaviour

Awaiting data from police

Cwm Taf Youth Prevention Service works with families and young people and provides advice and support around young people involved in Anti Social Behaviour which has a two stage process. There are limited number of young people who escalate to stage 2 of the process which indicates that the parents have been able to respond effectively to the information they receive from the service. Other disposals are provided through this service and of the 188 young people closed to the YOS in 2020/21

- 148 did not have any further ASB records (79%).
- 149 did not have any further offending incidents (79%)
- 0 went to custody

These are positive outcomes for the young people.

34. Social connectedness

34.1 Accessing youth provision

Tables 94 and 95 provides a breakdown of children and young people who accessed play activities over the past 3 years.

Table 94

Combined Play Data - RCT						
Age Category	2018/19		2019/20		2020/21	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
5-9 Yrs	357	343	562	516	95	75
10-11 Yrs	58	76	105	93	17	16
11-15 Yrs	111	78	170	148	35	18
16+ Yrs	0	0	0	0	0	0
<i>Total</i>	526	497	837	757	147	109
Overall	1023		1594		256	

Table 95:

Youth Engagement and Participation Service - RCT						
Age Category	2018/19		2019/20		2020/21	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
11-13	2603	2731	2692	2826	341	382
14-16	1910	1824	2095	1949	373	338
17-19	625	610	644	546	119	151
20-25	86	65	92	82	26	35
<i>Total</i>	5224	5230	5523	5403	859	906
Overall	10454		10926		1765	

- <https://www.womenshealth.gov>

<https://data.unicef.org/topic/child-disability/covid-19/>

- Welsh Government (2019) Equality and Diversity Statistics 2015 to 2017.
- StatsWales
- Office of national statistics
- NOMIS
- What happens to prisoners in a pandemic? A thematic review by HM Inspectorate of Prisons
- Hoffman, Webster and Bynum (2020)

Data gaps

- Adults with disabilities
- Adults with ASD
- Adults registered with SI by Las
- Adult carers

Young carers have poor mental health among carers, with an even greater increase among female carers. Carers Wales (2020) stated they have seen a rise in people accessing support from the charity with concerns around; their mental health, PPE, testing, food, medicine, feeling invisible or abandoned, and ongoing loss of independence.

In a report from Carers Trust Wales (2020) a number of issues for young carers and young adult carers have been raised. They asked for more support with wellbeing, help to stay connected, breaks, help to balance caring with education and work, and support to stay fit and healthy.

Young people between the ages of 16 and 24 years old who find themselves homeless are amongst the most vulnerable groups in our society, whilst still in these crucially developmental and formative years, homelessness for young people is a trauma which can have long lasting and significant detrimental effects on a young person's wellbeing and potential in life to lead a fulfilling and productive role in society for themselves and others. Young people between the ages of 16 and 24 account for approximately 10.9% of the total population of Rhondda Cynon Taf (ONS mid 2018 population estimates).

The sections below provide further detail regarding the different methods used for capturing the information contained throughout this report:

Desktop analysis

A desktop analysis of the following was undertaken:

- Welsh Government Guidance
- Professor Mansel Aylward report
- Current project SLA/Service specifications
- Trend data collected from projects
- Commissioned project financial returns
- Previous Welsh Government returns
- Single Integrated Plan – RCT
- Current performance data for local projects

The needs analysis will also look at the following practices performed by stakeholders who are commissioned by or support the Supporting People Programme in Rhondda Cynon Taf to gain an understanding of the following:

- Overview of the programmes and projects commissioned/delivered via the SP, to include their strategic relevance to the Local Authority;
- Commissioning practices performed;
- Forms and documentation used to collect and report information in respect to outputs, inputs and the outcomes achieved;
- Grant requirements, and
- Any other documentation considered relevant by the appropriate head of service/lead officer

Discussions with stakeholders

Interviews with key stakeholders to gather the following additional information:

- Clarity of accurate use of data or any issues arising from the desktop analysis;
- Identify alternative sources of information where data was not available;

