



safe



strong



supported

# Accelerating Population Health Gain

Annual Report of the Executive Director of Public Health 2025/26

Swansea Bay University Health Board



Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



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Image: Mark Lewis



## Foreword

**Professor Dr. Gillian Richardson,  
Executive Director of Public Health 2025/26  
Swansea Bay University Health Board**



In Wales, there is a statutory duty for the Executive Director of Public Health within each Health Board to produce an independent annual report pointing to the health needs of the local population, their public health priorities, service gaps and health inequities. This helps to guide the Health Board and key partners on local action.

I am pleased to introduce my Annual Report for 2025/6. It has been a privilege to work with the communities of Neath Port Talbot and Swansea during the past year and with the organisations that represent them.

The challenges we face remain significant. Many people in Swansea and Neath Port Talbot experience preventable ill-health, live with inequalities that may begin early in life, and die prematurely from conditions that could have been avoided. There are concerning trends in the health and wellbeing of our children and young people. Inequities in health outcomes are widening, but this is neither inevitable nor acceptable.

We are mindful that the statistics presented in this report represent individuals and families whose opportunities for health and wellbeing are shaped by the circumstances of their lives. Identifying and addressing their needs is at the heart of our work.

While the population health picture is challenging, this report highlights the impact that focused public health action can achieve. During the past year we have strengthened our regional health protection system; improved access to immunisation for all, supported smoking cessation and weight management services; targeted work on early identification of cancer and cardiovascular disease. We have worked across the life course, especially on the needs of pre-school and school aged children.

As a Health Board – Swansea Bay is charged with enhancing prevention and improving the population's health in addition to serving them equitably when unwell. As part of this, the Health Board's Public Health Team helps keep our population **safe, strong and supported** through our work on health protection, healthcare public health and actions on the wider determinants of health delivered in partnership.

We help the Health Board to promote preventative healthcare and early intervention, identify inequities, and work with others to create the essential conditions underpinning health and wellbeing such as secure housing, employment and sustainable communities.



We are working according to our Population Health Strategic Plan: “A Better Future For All”, which also highlights the essential role the Health Board has in being a major local organisation that can use our resources to enhance opportunities for employment and investment in our local communities, as well as proactively supporting the wellbeing of our staff.

The report also marks three years since the regional Public Health Teams transferred to the Health Board from Public Health Wales, strengthening our ability to help set local priorities, lead prevention, respond to emerging threats, and address health needs and inequities for our populations. It seemed appropriate to describe the work of Health Board Public Health here in the Swansea Bay area at this time.

I would like to thank the dedicated Swansea Bay UHB Public Health Team for their vision, expertise, passion and system leadership. They inspire commitment not only to help guide improvement in health outcomes, but to ensure that improvement is fair and that no one is left behind. We have also worked closely with many Health Board colleagues over this past year including with Primary care to develop population health approaches.

Evidence-based, impactful work on population health gain will require ongoing investment and continued commitment to accelerate and ‘turn the curve’ on our health outcomes. It is our intention, that with shared purpose and ambition, we can build foundations now, to create a future where all people in Swansea and Neath Port Talbot will have an equal opportunity to live longer, healthier lives, achieving their full potential.

“Western doctors are like poor plumbers. They treat a splashing tub by cleaning up the water. These plumbers are extremely apt at drying up the water, constantly inventing new, expensive, and refined methods of drying up water. Somebody should teach them how to close the tap.”

– Denis Parsons Burkitt





# Introduction

Welcome to the Annual Report of the Executive Director of Public Health for Swansea Bay University Health Board 2025/26.

In October 2022, the Local Public Health Team for Swansea Bay transitioned from employment in Public Health Wales to become part of the Corporate Directorate of Swansea Bay University Health Board (SBUHB), led by their Executive Director of Public Health. As we mark three years since this change, we have chosen as our theme for this year's Annual Report; the population health challenges facing the Swansea Bay UHB and the work of the team to address these.

This introductory chapter provides a summary of the state of health and wellbeing in the populations of Swansea and Neath Port Talbot, an overview of the Swansea Bay UHB Public Health Team, the scope and approach of our work, and some of the key principles that inform what we do.

## **The state of health and wellbeing in the populations of Swansea and Neath Port Talbot**

Despite our collective efforts, the health and wellbeing of our communities are not improving year on year and inequities in health and wellbeing have continued to widen. Too many people in Swansea and Neath Port Talbot die prematurely and live their lives in poorer health due to social, economic and other inequalities.

## **The likelihood of dying early<sup>1</sup> from a cause that is preventable in SBUHB is significantly higher than the likelihood across Wales as a whole.**

The population living in Swansea Bay UHB area also have high levels of mental health needs; General Practice Registers indicate the highest prevalence of long-term mental disorders in Wales and more people in Neath Port Talbot report a mental health condition than elsewhere in Wales. The numbers of children and young people experiencing mental health problems have risen, particularly in young women.

This year we are publishing a State of the Population report that will provide a detailed insight into health and wellbeing in Swansea Bay to inform the new SBUHB Clinical Services Strategic Plan and also highlight gaps in our understanding of need. In this report, we have summarised key population health indicators that inform our work. Relevant data on specific health outcomes is also included throughout the chapters. Public Health is interested particularly where the burden of ill-health is not suffered equally throughout our population and where the causes can be prevented. Often these factors go hand in hand.

<sup>1</sup> *Premature mortality* are deaths in adults that occur before someone reaches their 70<sup>th</sup> or 75<sup>th</sup> birthday. *Preventable mortality* refers to deaths that can be avoided through effective public health and primary prevention interventions.



# The state of health and wellbeing in the populations of Swansea and Neath Port Talbot

**Too many people in Swansea Bay are dying too early from preventable disease**



People in Neath Port Talbot are almost **TWICE AS LIKELY TO DIE** prematurely due to any cause compared to some regions in England

**MORE PEOPLE ARE LIVING WITH LONG TERM HEALTH CONDITIONS IN OUR COMMUNITIES, AND THIS NUMBER IS EXPECTED TO RISE SIGNIFICANTLY**



In 2022-23 20% of people in Wales experienced **2 or more longstanding illnesses**, but in Neath Port Talbot this was **26%**

Source 03

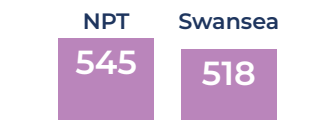
**By 2035** the number of people living with **4 or more long term health conditions** in Wales will **ALMOST DOUBLE**

Most will have **mental ill-health**



Source 04

Of all 172 Local Authorities in England and Wales, **NPT and Swansea are in the top 25% for premature mortality** due to any cause (ranked 28th and 42nd highest respectively).



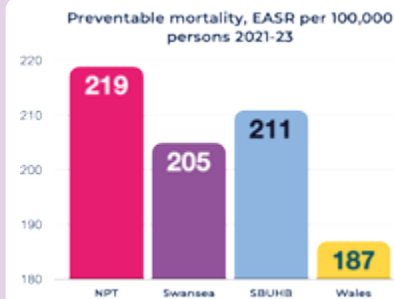
All cause premature mortality per 100,000 person-years at risk (Mar 2021-Dec 2023)



Source 01

## PREVENTABLE EARLY DEATHS

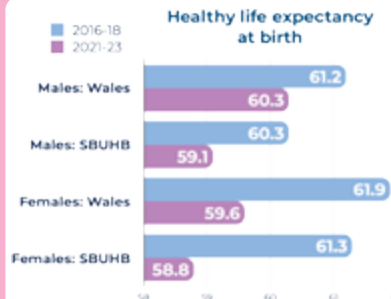
The **likelihood of dying early** from a cause that is preventable in SBUHB is **significantly higher** than the likelihood across Wales as a whole.



Source 02

## LIVING LIFE IN ILL-HEALTH

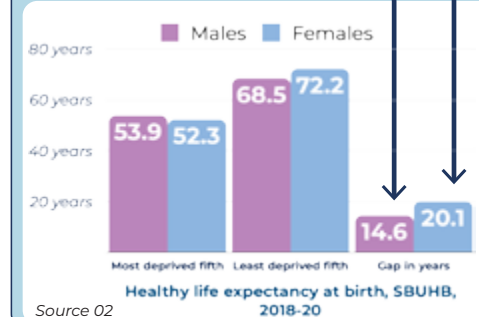
More people in Swansea Bay are **living more years of their life in ill-health**. Much of this ill-health is also preventable.



Source 02

## HEALTHY LIFE EXPECTANCY

Women living in the most deprived areas of Swansea Bay can expect to **spend 20 more years of their lives with poor health**, compared to those living in the least deprived areas. **For men the gap is 14.6 years.**



Source 02

**PREVENTION IS THE BEST VALUE FOR MONEY AND IMPROVES THE QUALITY OF PEOPLE'S LIVES**

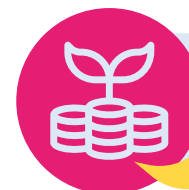
Source 01: [Geographical inequalities in premature mortality in England and Wales: March 2021 to December 2023](https://publichealthwales.shinyapps.io/PHOF_Dashboard_Eng/)

Source 02: [https://publichealthwales.shinyapps.io/PHOF\\_Dashboard\\_Eng/](https://statswales.gov.wales/Catalogue/National-Survey-for-Wales/Population-Health/Adult-general-health-and-illness/generalhealthillness-by-healthboard)

Source 03: [https://statswales.gov.wales/Catalogue/National-Survey-for-Wales/Population-Health/Adult-general-health-and-illness/generalhealthillness-by-healthboard](https://www.gov.wales/sites/default/files/publications/2023-09/nhs-in-10plus-years.pdf)

Source 04: [https://www.gov.wales/sites/default/files/publications/2023-09/nhs-in-10plus-years.pdf](https://pubmed.ncbi.nlm.nih.gov/28356325/)

Source 05: <https://pubmed.ncbi.nlm.nih.gov/28356325/>

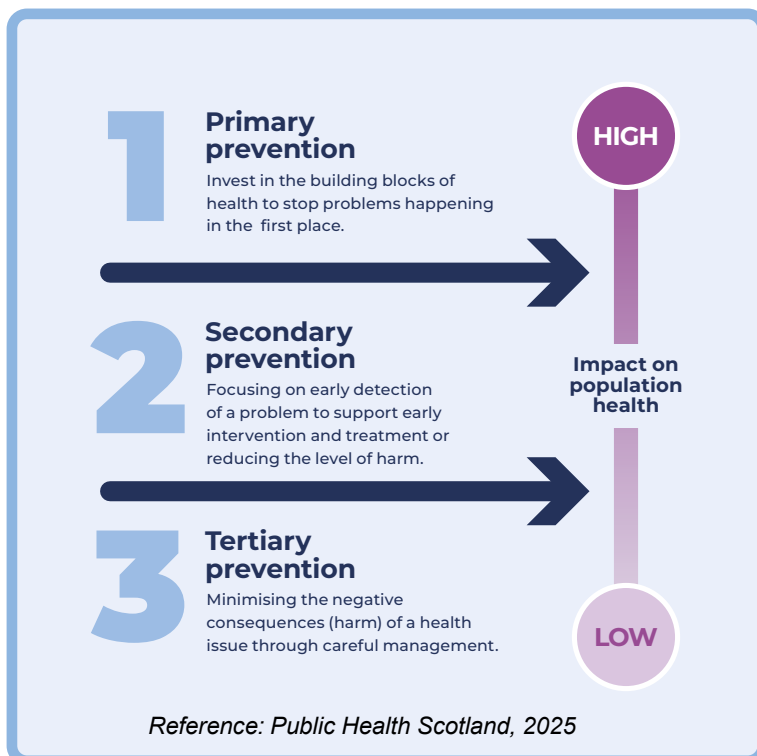


**£14** return on investment for every **£1** invested in preventative public health interventions

Source 05

## Prevention

Prevention in public health is about keeping people healthy and avoiding the risk of poor health, illness, injury, and early death. There are three levels of prevention required to improve population health:



**Primary prevention** is action that tries to stop problems happening. This can be either through actions at a population level that reduce risks and ensures that everyone has access to the essential conditions or building blocks for good health, or those that address the root cause of the problem.

**Secondary prevention** is action which focuses on early detection of a problem to:

- support early intervention and treatment.
- reduce the level of harm.

**Tertiary prevention** is action that attempts to minimise the harm of a problem through careful management.

**Only primary prevention tries to stop the problems from happening.**

*Reference: Public Health Scotland, 2025*



## Equity

**Health inequalities** are the differences in health outcomes or access to healthcare between individuals or groups. These differences can be due to individual, social, economic, or environmental factors (e.g. age, gender, income, education, geography, ethnicity) (McCartney et al. 2019).

When these differences are **avoidable, unfair and preventable**, they are called **health inequities** (McCartney et al. 2019). Examples include shorter life expectancies and less of a life spent in good health in socioeconomically disadvantaged areas; barriers faced by some groups in accessing preventative healthcare; children and families unable to choose to eat healthy food due to poverty leading to higher levels of dental decay and obesity, when high calorie per unit cost foods are consumed.

**Health equity is achieved when everyone can attain their full potential for health and wellbeing.** This means taking action to remove the barriers to good health where possible, and allocating resources or adapting services based on need, rather than doing the same for everyone (Braveman et al. 2017; Swansea Bay University Health Board, 2023; WHO, undated).





# Public Health in Swansea Bay University Health Board

Swansea Bay University Health Board (SBUHB) has a specialist public health team committed to working with others within and outside the organisation, to ensure individuals and communities in Swansea and Neath Port Talbot enjoy longer, happier and healthier lives. As a team we work alongside our Health Board colleagues and external partners to strive to understand and act on the root causes of health inequities.

The Swansea Bay UHB Public Health Team has a key role in enabling the Health Board to meet the following Statutory Functions<sup>1</sup>:

- Providing services or facilities for the **prevention of disease**.
- Preparing and reviewing Health Board plans for **improving the health of the people for whom it is responsible** and the provision of their healthcare.
- Making the services of public health practitioners available to local authorities to enable them to **discharge their statutory functions** relating to social services, education and **public health**.
- Putting in place arrangements for the purposes of **monitoring and improving the effectiveness and quality of healthcare, particularly for preventative services**.

To do this, we work across all areas of public health practice (see Figure 1) in a multidisciplinary team to ensure that we can meet and respond to the needs of the population. Our team is comprised of: consultants in public health / public health medicine; public health specialists and practitioners; epidemiologist; data analyst; nurses; allied health professionals; business and project support staff.

We are a small and specialist “core” public health team, who work with, support and mobilise many other colleagues both in the Health Board, across our partner organisations, and in the community that are essential to the delivery of improved population health. Our role also includes supporting and enabling a wide range of people to build skills and knowledge in population health and prevention.



<sup>1</sup> The Local Health Boards (Directed Functions) (Wales) Regulations 2009



## What we do

**Keep people **safe**/Health Protection:** we take action to ensure the prevention of infectious diseases, to protect against environmental hazards, and to support the public health element of emergency responses. We work with others to ensure access to clean air, food and water.

**Ensure that people have access to help to be **strong** and healthy/Health Services Improvement:** we take action to keep people strong via access to preventative interventions. We work to strengthen system wide investment in ill-health prevention and to ensure that health services are evidence based, cost effective, sustainable and do not widen health inequities.

**Support people to stay well/Health Improvement:** we take action to support all people to have access to the building blocks of good health and to create supportive environments for health and wellbeing in schools, workplaces and communities.

### We take action on:

- Ensuring the prevention of infectious diseases
- Protecting people from environmental hazards
- Supporting the public health element of emergency responses.



### We take action on:

- Supporting all people to have access to the building blocks of good health and wellbeing such as a secure income, housing, education and skills, and fair work
- Working with others to create supportive environments for health and wellbeing in schools, workplaces and communities.

### We take action on:

- Keeping people strong through prevention and early intervention
- Strengthening investment in ill-health prevention
- Ensuring that health services are evidence based, cost effective, and sustainable
- Reducing inequities.

Figure 1



We are a team trained to design and deliver prevention-focused policies, programmes and interventions across all levels of prevention.

**Our focus is:**

- **Population health:** working collaboratively to improve the physical and mental health and wellbeing of all residents.
- **Prevention:** identifying opportunities to strengthen investment in ill-health prevention wherever possible, so everyone in Swansea and Neath Port Talbot can live longer, healthier and fulfilled lives.
- **Equity and inclusion:** reducing avoidable, preventable health inequities because too many people in Swansea and Neath Port Talbot die prematurely and live their lives in poorer health due to social, economic and other inequalities.
- **Sustainable Wellbeing:** this means taking a long-term preventative approach, addressing environmental sustainability, and the needs of future generations in all that we do. We align our work with the Seven Goals and five ways of working in the Wellbeing of Future Generations Act (Welsh Government, 2015).

**We aim to add years to life and life to years.**

Our work includes taking action across every stage of life to maximise opportunities to protect and improve health and wellbeing, and reduce inequities:

**The preconception and pregnancy period:** see Chapter 1 for our work on immunisation; see Chapter 2 on support for maternal health and wellbeing via smoking cessation and maintaining a healthy weight, and see Chapter 3 for our work on the First 1000 days of life.

**Infancy and early years (Birth to 5 years):** see Chapter 1 for our work on immunisation, and see Chapter 3 for our work on early years, child poverty, healthy pre-school education, creating healthy and sustainable communities, and preventing obesity.





- **Childhood and adolescence (6 to 15 years):** see Chapter 1 for our work on immunisation in childhood and adolescence including immunising against human papillomavirus (HPV) which can help prevent the majority of certain cancers, and enhancing access to sexual health services, and see Chapter 3 for details of our work with schools and the education sector on a whole school approach to health and wellbeing, with specific activities on emotional and mental wellbeing and life-style factors such as vaping.
- **Young adults aged 16 to 25 and working aged adults (up to 64 years):** see Chapter 1 for our work on controlling infectious diseases including Sexually Transmitted Infections (STIs); see Chapter 2 for our work to strengthen ill-health prevention via support to quit smoking; maintaining a healthy weight and the early detection of disease, including cancers, and see Chapter 3 for our work on creating healthy and sustainable communities and addressing the health and wellbeing impacts of the Tata Transition.
- **Older adults (64 +):** see Chapter 1 for our work on immunisation for older adults and infection prevention and control (IPC) in care homes; see Chapter 2 for our work to strengthen ill-health prevention and the early detection of disease, including cancers, and see Chapter 3 for our work on healthy and sustainable communities.

## How we work

The Swansea Bay UHB Public Health Team works in a range of ways to improve population health and reduce health inequities including:

**Leading:** We lead on designing, delivering, evaluating and commissioning preventative interventions. We lead the delivery of specific health improvement programmes like the Local Network of Health and Wellbeing Promoting Schools, and on Health Protection interventions like Immunisations and Vaccinations.

**Collaborating:** We support and provide specialist advice to Health Board services and many external partnerships and programmes to ensure that we maximise opportunities for improving population health and wellbeing. This could include providing epidemiological assessments, evidence or supporting the development or evaluation of funding proposals or strategies.

**Advocating:** Public health advocacy means speaking up and taking action to improve the health of communities. We work to influence decisions – like plans, policies, proposed laws, or funding – that affect people's health, so that everyone has a fair chance to live healthy lives and no-one is left behind.



## A Better Future for All: Swansea Bay's Population Health Strategic Plan (2023)

Swansea Bay University Health Board has a corporate responsibility for the health and wellbeing of its population as a whole – not only those we see as patients. Improving population health cannot be achieved by the Public Health Team or the Health Board alone; everyone in the Health Board and our partner organisations has a role in improving the health and wellbeing of people living in Swansea Bay.

[Click here to view this document.](#)



In 2022/23, the Swansea Bay UHB Public Health Team collaborated with partner organisations to develop Swansea Bay's Population Health Strategic Plan. The Strategic Plan was approved by the Health Board in March 2023 and sets out the evidence base and overall approach through which the Health Board and its partners will seek to improve the health and wellbeing of the local population whilst reducing the gap between our least and most deprived communities. It is based on the Marmot principles and five World Health Organisation (WHO) policy areas as a framework to organise our response to poor health and inequalities in our population (see Figure 2).

This Strategic Plan is integrated into SBUHB's Organisational Strategy, with the eight Marmot Objectives forming Strategic Objective 1: People of Swansea Bay live healthier, fairer and more prosperous lives. The actions within it are supported by the Welsh Government's legislative and policy environment, the Future Generations Office, and local partnership efforts. The focus is on prevention and tackling the 'causes of the causes' of ill-health. To do this requires whole system, multisectoral action and provides an enabling framework to act as a bridge between the evidence base and practical action.



In addition, the strategy identified four areas for action where the Health Board has the power to improve population health:

- **As a healthcare provider:** we can directly influence health outcomes by delivering safe, effective, equitable healthcare to thousands of patients each year. We aim to focus on prevention and early intervention in ill-health.
- **As an employer:** we play a critical role in the local economy, directly employing over 12,500 people. We are committed to creating a supportive, inclusive, and healthy working environment, and working with our employment services, schools, colleges and universities to ensure highly trained and skilled workforce for the future.
- **As a major local organisation and part of a regional economy:** our influence stretches beyond healthcare from service industries, supply chains, to research and development and energy infrastructure. The Health Board impacts economic stability, community wellbeing, and social progress through responsible stewardship of resources and active engagement in local development.
- Finally, **as a productive partner:** we collaborate closely with a wide range of organisations, public bodies, and communities to undertake joint initiatives, including research and innovation with our councils, universities, businesses, social enterprises and voluntary sector to improve health and wellbeing.



Figure 2

Each Chapter of this report provides highlights of the work of the Swansea Bay UHB Public Health Team alongside colleagues and partner agencies to implement the Population Health Strategic Plan over the last two years.

# Chapter 1: Keeping people safe

## Keeping the population of Swansea and Neath Port Talbot safe

### Introduction

This chapter focuses on how the Swansea Bay UHB Public Health Team leads Health Protection work with our partner agencies across the region to keep people **safe**. A health protection approach aims to actively prevent problems before they occur, such as:

- Controlling infectious diseases.
- Protecting people from chemical and environmental hazards.
- Ensuring food and water safety.

This also means responding quickly to clusters and outbreaks of communicable disease and preparing for emergencies such as epidemics, and rarer pandemics. The Health Protection staff work to achieve this through strong partnerships between the Health Board, Neath Port Talbot and Swansea Councils, community organisations, and Public Health Wales.





The Health Protection staff play a pivotal role in leading and coordinating specific health protection programmes including:

- Vaccination delivery.
- Infection control in care homes and schools.
- Responding to outbreaks, environmental incidents, and other emergencies.
- Tackling antimicrobial resistance.

Swansea Bay UHB's Health Protection Partnership aims to provide a resilient, equitable service capable of responding to current and emerging threats through structured joint-planning, workforce development, continuous engagement with communities and co-ordinated partnership response.

The work of the Swansea Bay UHB Health Protection and Immunisation staff help to keep our population safe and support delivery of the following Marmot Objectives in our Population Health Strategic Plan:

**Marmot Objective 1: Give every child the best start in life**

**Marmot Objective 6: Strengthen the role and impact of ill-health prevention**

**Marmot Objective 7; Tackle racism, discrimination and their outcomes**

**Marmot Objective 8: Pursue environmental sustainability and health equity together with partners**



## Health Protection

### Learning from the COVID-19 Pandemic

The COVID-19 pandemic exposed vulnerabilities in health protection systems globally, including the United Kingdom and Wales. It highlighted the need for stronger collaboration across sectors because a lack of co-ordination can create delays and inefficiencies. In contrast integrated working enables rapid, coordinated responses to emerging threats. Health Protection staff have used these lessons to shape the development of the Swansea Bay Health Protection Partnership.

### Swansea Bay Health Protection Partnership – Building Resilience Through Collaboration

Over the last two years we have led work to initiate and develop a Swansea Bay Health Protection Partnership. The partnership was deliberately designed to embed prevention at the core of health protection activities, shifting away from reactive and short-term measures, toward proactive solutions. The partnership is integrated into existing governance and service delivery structures to strengthen resilience of the system and provide continuity during periods of increased pressure. The model is designed to make the best use of the multi-agency resources and expertise we have in the region, including the Swansea Bay UHB Public Health Team, blood-borne virus unit, integrated sexual health service, our Infection, Prevention and Control

teams, His Majesty's Prison Swansea healthcare team, Respiratory Medicine (Tuberculosis), Local Authority Environmental Health teams and voluntary sector partners Neath Port Talbot Council for Voluntary Services (NPTCVS) and Swansea Council for Voluntary Services (SCVS). It also ensures that we deliver on our statutory obligations and reach underserved and vulnerable communities. The flexible model we are developing aims to ensure the system is resilient and can adapt to changing priorities and emerging risks.

### Strengthening Infection Prevention and Control (IPC) in Care Homes and Primary Care

Infection Prevention and Control (IPC) remains a critical focus across care homes and primary care settings to protect highly vulnerable populations. However, maintaining up to date education and consistency of IPC practices continues to present significant challenges. These issues are particularly evident in areas such as outbreak management, appropriate sampling, antimicrobial stewardship, the management of healthcare-associated infections (HCAIs) such as *Clostridioides difficile* (a bacteria found in the gut which can cause severe diarrhoea and life-threatening complications), and consistent implementation of handwashing and correct use of Personal Protective Equipment (PPE).



To address these gaps, the **Swansea Bay Health Protection Partnership** is advancing efforts built on the collaborative relationships forged during the COVID-19 pandemic with Local Authority services including Environmental Health, Social Services and Health Board IPC specialists, to support care homes to prevent and manage infectious diseases such as Influenza, Respiratory Syncytial Virus, COVID-19, Norovirus, Clostridioides difficile and other bacteraemia infections.

The approach combines focused IPC practice support visits, focused infection reviews, winter preparedness campaigns, collaborative education including the IPC Champions network and system-wide quality improvement to drive sustainable change.

### Indicators

Outbreaks reported in Swansea Bay UHB 2025

Outbreak type	Setting	Number
Gastrointestinal (e.g. norovirus)	Care Home	29
Respiratory (e.g. COVID-19, Influenza)	Care Home	49
Gastrointestinal (e.g. norovirus)	Education/Childcare/ Community	38
Respiratory (e.g. COVID-19, Influenza)	Education/Childcare/ Community	9

Source 6: Tarian

## Expanding Blood-Borne Virus (BBV) Testing and Outreach

Hepatitis B and C are infections of the liver, causing both acute and chronic disease which can lead to potentially life-threatening illness. They are the most common cause of liver cirrhosis, liver cancer and viral Hepatitis-related deaths globally. The viruses are transmitted through contact with infected blood and in the case of Hepatitis B also through other bodily fluids. Populations at high risk of infection include: people who travel to and / or from high prevalence countries, babies born to infected mothers, people who use drugs, prison populations, sex workers and men who have sex with men.

In 2024, Swansea Bay UHB had the highest Hepatitis C incidence rate per 100,000 population in Wales. Although Hepatitis B is a vaccine preventable disease, tragically we are still seeing new cases detected. Whilst overall incidence remains low, Swansea Bay UHB reports the 3rd highest rates by Health Board in Wales in 2024.



Swansea Bay UHB has pioneered Hepatitis B and C elimination initiatives in Wales and continues to drive progress to meet the World Health Organisation’s Hepatitis elimination strategy which aims to reduce new infections by 90% and deaths by 65% by 2030 through our Swansea Bay Elimination Action Plan 2025-28.

The plan targets prevention by increasing uptake of the Hepatitis B vaccination and by provision of Needle and Syringe Exchange Programmes. Case-finding is driven by increased testing among populations at highest risk, including probation units, His Majesty’s Prison (HMP) Swansea and community outreach initiatives.

Treatment is delivered via drop-in and outreach clinics to ensure accessibility. During April to September 2025, 801 tests were carried out by the Blood-borne virus unit – a 98% increase compared with the same period in 2024.

## Indicators

### Hepatitis B

Health Board	Individuals screened Hep B 2024	All new Hepatitis B infections 2024	Rate per 100,000 population 2024	Comparison with other Health Boards in Wales
Swansea Bay	12,470	43	9.5	3rd highest rate of new infections

Source 7a: Laboratory Information Management System (LIMS) 2024

### Hepatitis C

Health Board/ Region	Rate per 100,000 population tested for anti-HCV 2024	Rate per 100,000 population all HCV-RNA positive	Rate per 100,000 population anti-HCV reactive <sup>1</sup> 2024	Comparison with other Health Boards in Wales
Swansea Bay	3,879	16.4	153.5	Highest rate of new infections and the highest testing rates in Wales

Source 7b: Laboratory Information Management System (LIMS) 2024

<sup>1</sup> An anti-HCV reactive test is also known as a positive Hepatitis C antibody result. This means that blood contains antibodies to the Hepatitis C virus indicating that the immune system has encountered the virus at some point (previous infection) or because of an ongoing infection. A further blood test (HCV RNA) is required to determine a current, active infection



## Enhancing Access to Sexual Health Services

Sexually transmitted infections (STIs) such as Syphilis, Gonorrhoea, Human Immunodeficiency Virus (HIV), Hepatitis B, Chlamydia, Human Papillomavirus (HPV), Monkey Pox (Mpx) significantly impact health across physical and reproductive wellbeing, while also contributing to stigma and mental health challenges for patients.

In 2023 and 2024, SBUHB reported the highest number of diagnoses of Syphilis and the second highest number of Gonorrhoea and Chlamydia diagnoses per 100,000 population in Wales. (Sexual Health Wales Surveillance, Test and Post and Datastore, 2025).

The integrated sexual health service in SBUHB provides a comprehensive, patient-centred approach to sexual health covering disease prevention advice and initiatives, testing and treatment, contraception and vaccination. It has significantly expanded its outreach capacity to engage with vulnerable populations including people experiencing homelessness and sex workers who are often underserved or face barriers to traditional healthcare settings.

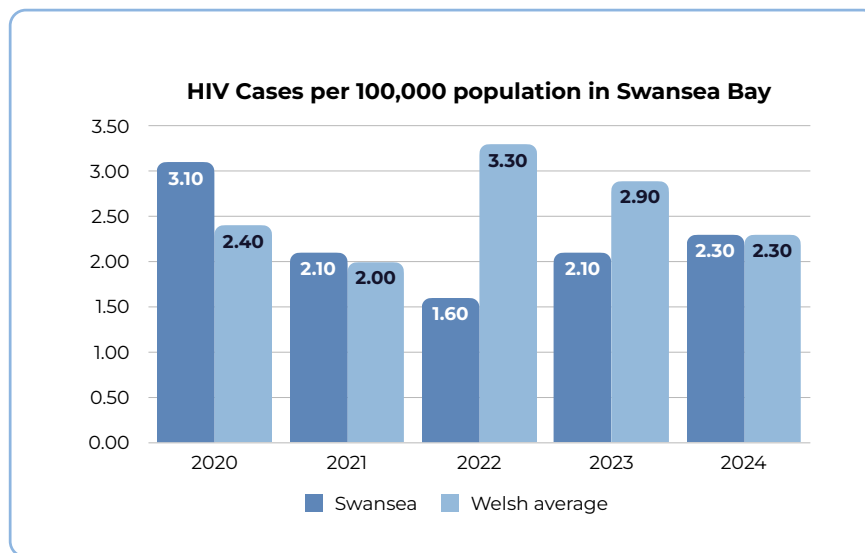
The service work closely with the Health Access team, Support, Wellbeing, Advocacy and Enablement (SWAN) project, The Wallich (a Homelessness Charity) and the local Councils for Voluntary Services (CVS) Diversity Outreach workers who have active links with black and minority ethnic communities.

Engagement with young people and youth-focused services has been enhanced through outreach activities and working in partnership with Swansea University and local colleges, Neath Port Talbot Youth Offending team, Inspire, and Tackle after Dark (mobile youth outreach programmes).

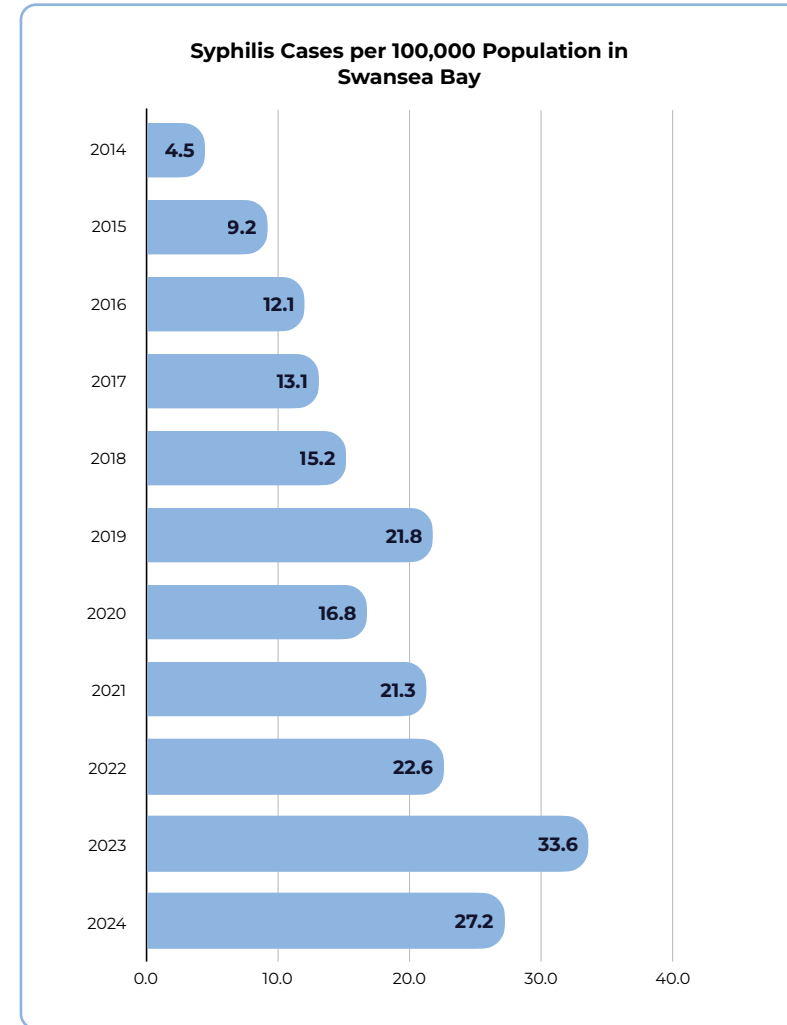
The Sexual Health service has improved the accessibility to sexual health screening by increasing access and promoting Test & Post kits across community settings in the region. These kits provide a convenient, confidential and discreet way for individuals to screen for STIs and blood-borne viruses at home, removing barriers such as stigma and transport issues. They support early detection and treatment, helping to interrupt transmission and strengthen health protection through improved case finding.

Since March 2025, the Sexual Health Team has increased community access points for these kits from **13 to 38 sites** by building strong relationships with pharmacies, youth services, colleges, and other venues. This expansion ensures wider reach to vulnerable groups and enhances surveillance, contributing to reduced infection rates and better public health outcomes.

HIV remains a key public health priority for SBUHB, aligned with the Welsh Government's HIV Action Plan and the ambition to eliminate new infections, improve the quality of life for people living with HIV and eliminate stigma by 2030. The Health Board works closely with Fast Track Swansea Bay to promote and improve testing uptake to encourage earlier detection and timely access to treatment for our population. The integrated sexual health service has introduced training sessions for health board staff focussing on HIV awareness and strategies to reduce stigma within both clinical and community settings and promote equitable access to testing, treatment and care.



Source 8a: Sexual Health in Wales Surveillance Scheme



Source 8b: Sexual Health in Wales Surveillance Scheme

## Community Engagement via Diversity Outreach

The Diversity Outreach Team focus on reducing health inequalities among ethnic minority and vulnerable communities. Key activities include promoting childhood vaccinations and other immunisation programmes to promote uptake and address religious concerns.

The team also delivers blood-borne virus awareness sessions to encourage testing to find new cases in populations that are at higher risk of infection, such as people who travel to or are from high incidence countries. The team also ensures that voices and opinions of minority groups are heard on a range of health matters by the Health Board, Local Authorities and local politicians to influence change in policies and service delivery in the region. The team support asylum seekers to

access services. Examples include: facilitating access to primary care and GPs, language services at

Neath College, food banks and working

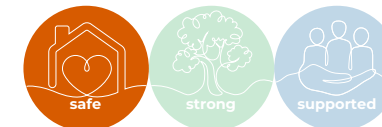
closely with the Health Access Team nurses. Language and cultural differences can impact the ability to communicate effectively with healthcare providers, leading to delays in receiving care. The Diversity Outreach workers help in breaking these barriers.



Collectively, these initiatives strengthen pathways to early diagnosis, promote access to vaccine provision and foster inclusive health messaging, contributing to better health literacy in some of our underserved communities.

## Tuberculosis (TB) Improvements

Tuberculosis (TB) remains a significant global health challenge and, while Wales has one of the lowest incidence rates in the UK and numbers diagnosed annually in Swansea Bay are low (15 cases in 2024), recent trends show a gradual increase in cases. TB is a complex disease, primarily an airborne infection that disproportionately affects vulnerable populations, including those experiencing poverty,



homelessness, harmful substance use, and migration-related challenges. The impact extends beyond physical health, contributing to social and economic hardship due to prolonged treatment and stigma. Without treatment, approximately two-thirds of active TB cases globally are fatal, but with improvements in treatment, outcomes are positive. If partially treated, TB can develop resistance to antibiotics which can result in serious difficulties eradicating and the risk of transmission of antibiotic-resistant strains.

Swansea Bay Health Protection Partnership has taken significant steps to strengthen TB services, improve testing, and enhance engagement with treatment plans while addressing stigma. The introduction of a dedicated TB clinic and a new referral and contact-tracing database has streamlined patient management, resulting in timely follow-ups and reduced loss to care.

Increased community visits and proactive appointment reminders have led to higher attendance rates and improved adherence, supported further by partnerships with pharmacy for Directly Observed Therapy and trials of Video Observed Therapy, to ensure adherence to prescribed TB medication and monitor for side effects. Expanded screening for blood-borne viruses and syphilis has enabled early detection of co-infections,

while targeted outreach to vulnerable groups, including Looked after Children<sup>1</sup>, has achieved high compliance and treatment uptake.

Awareness programmes delivered in community settings have contributed to greater public understanding and reduced stigma, fostering trust and engagement. Key indicators of impact through collaboration include improved clinic attendance, increased screening coverage, timely case interventions, and stronger patient relationships, collectively ensuring a more responsive and holistic TB service.

**Indicator**

	2020	2021	2022	2023	2024
TB notifications per 100,000 population in Swansea Bay	2.3	2.4	2.3	3.7	3.9 2nd highest in Wales

Source 9: National Tuberculosis Surveillance System, 2024

<sup>1</sup> Looked-after Children are those under the care of a local authority for more than 24 hours, either through voluntary arrangements or court orders.

## CASE STUDY: Health Protection Case Study Working Together to Keep Care Homes Safe

### Background

The COVID-19 pandemic highlighted the vulnerability of care home residents and the critical importance of robust Infection Prevention and Control (IPC) measures. Care homes faced significant challenges during the pandemic, including high mortality rates, staff shortages, and increased infection risks due to close living environments. Care home residents are among the most vulnerable groups due to advanced age, frailty, and underlying health conditions. Outbreaks of respiratory illnesses (e.g. influenza, COVID-19, RSV), diarrhoea and vomiting (e.g. norovirus) and infections such as *Clostridioides difficile* can lead to severe complications, hospital admissions, and increased pressure on health and social care systems.



### Objectives

Routine IPC audits across care homes in Swansea Bay during 2022-2024 by the Swansea Bay Health Protection Partnership, identified hand hygiene and PPE as the areas with the greatest non-compliance. Issues included:

- Inconsistent handwashing technique and frequency.
- Limited understanding of when and how PPE should be worn or removed.

In response, a focused **Care Home Hand Hygiene and PPE Improvement Project** were delivered during Spring/Summer 2025. The project aimed to strengthen staff knowledge and confidence in correct handwashing techniques and the safe donning and doffing of PPE. Its core objectives were to:

- Reduce infection transmission and prevent outbreaks.
- Improve compliance with IPC standards.
- Improve staff confidence and knowledge through practical training.
- Build resilience within care settings ahead of winter.

## Outcomes

- A total of 738 individual staff members received this training across 50 care settings in Swansea Bay.
- Improved day-to-day IPC practices.
- 100% of participants provided positive feedback on the training course.
- An assessment tool is under development to evaluate the impact on practice.
- Demonstration of strong collaborative approach working between Swansea Bay University Health Board, Neath Port Talbot Council, and Swansea Council in strengthening infection prevention and control.

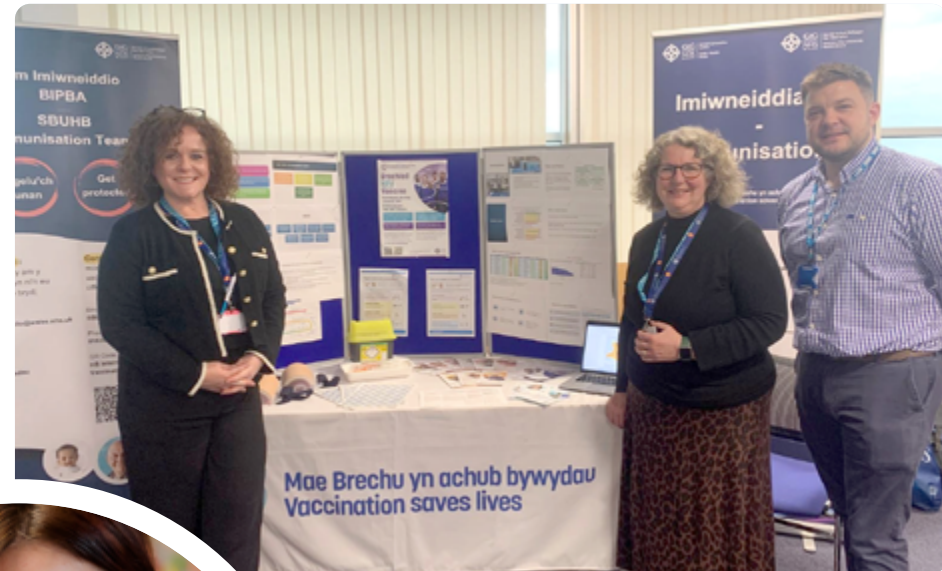


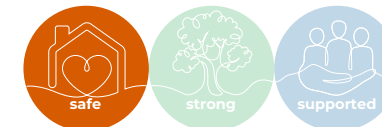
## Immunisation

**Working together to make vaccines accessible, trusted, and delivered where they're needed most**

Immunisation is a key part of Health Protection. Our dedicated immunisation staff take a lead role in preventing ill-health and infectious diseases across the population through the delivery of priority vaccination programmes to targeted groups.

Collaboration and partnership working with key stakeholders involved in vaccine delivery is vital to the delivery of the work. This includes working closely with General Practitioners, Primary Care Teams, Community Pharmacies, Local Authorities, Blood-Borne Virus team, Sexual Health Team, School Health Nursing, Occupational Health, His Majesty's Prison Swansea healthcare team and a range of voluntary and community organisations.





**We support the delivery of the following vaccination programmes:**

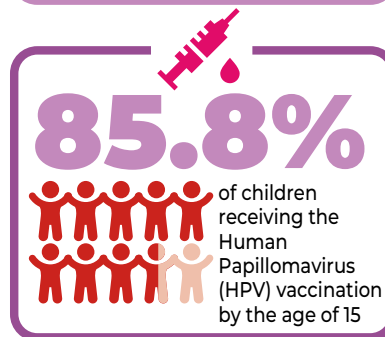
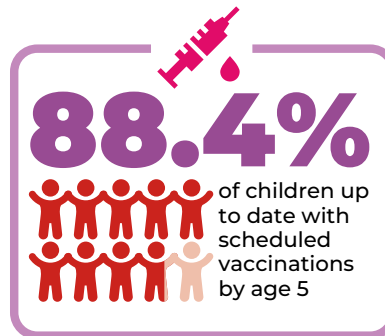
Schedule for the UK's routine immunisation programme (excluding catch-up campaigns) (UK Government, 2026).

Age	What the vaccine protects against	Vaccine
8 weeks old	Diphtheria, tetanus, whooping cough, polio, Hib, Hepatitis B	6-in-1 vaccine
	Meningococcal group B (meningitis and blood infection)	MenB
	Rotavirus (diarrhoea and vomiting)	Rotavirus
12 weeks old	Diphtheria, tetanus, whooping cough, polio, Hib, Hepatitis B	6-in-1 vaccine
	Meningococcal group B	MenB
	Rotavirus	Rotavirus
16 weeks old	Diphtheria, tetanus, whooping cough, polio, Hib, Hepatitis B	6-in-1 vaccine
	Pneumococcal disease (serious chest, blood and brain infections)	Pneumococcal (PCV)
1 year old	Pneumococcal disease	Pneumococcal (PCV)
	Measles, mumps, rubella and varicella	MMRV
	Meningococcal group B	MenB
	Hib and meningococcal group C	Hib/MenC
18 months old	Diphtheria, tetanus, whooping cough, polio, Hib, Hepatitis B	6-in-1 booster
	Measles, mumps, rubella and varicella	MMRV booster

Age	What the vaccine protects against	Vaccine
Every year from 6 months (eligible children)	Flu	Nasal flu vaccine
3 years 4 months	Diphtheria, tetanus, whooping cough, polio	Preschool booster
	Measles, mumps, rubella and varicella	MMRV booster
12–13 years	Cancers and genital warts caused by HPV	HPV vaccine
14 years	Tetanus, diphtheria, polio	Teenage booster
	Meningococcal groups A, C, W and Y	MenACWY
65 years	Pneumococcal disease	Pneumococcal (PPV23)
65 years and over (yearly)	Flu	Flu vaccine
65 years and over	Shingles	Shingles vaccine
75 years	Respiratory syncytial virus (RSV)	RSV vaccine

There are a number of selective immunisation programmes for children and adults at particular risk of serious complications from certain infections, including:

- Hepatitis A and Hepatitis B.
- Influenza.
- COVID-19.
- Haemophilus influenzae type b (Hib).
- Meningococcal infection (causing e.g. Meningitis, Sepsis).
- Pneumococcal infection (causing e.g. Lung disease).
- Shingles.



Source 10: Public Health Wales COVER Report 156 July to September 2025

Vaccines against other infections, including TB (BCG), HPV, Hepatitis B, Monkey Pox and gonorrhoea, are also recommended for individuals at higher risk of exposure to infection due to life-style factors, close contact or recent outbreaks in their community.

## The Vaccine Equity Strategic Plan

Planning the implementation of our COVID-19 vaccination response meant we had to think differently to ensure protection of the population we serve. Collaborative working with multiple agencies allowed us to open Mass and Local Vaccination Centres in addition to various pop-up clinics across the region. We vaccinated in hospital wards, departments, GP practices, Community Pharmacies, Care Homes, Prisons and individuals' homes. Collaborative and innovative working was paramount in our response which was evidenced by our partnership working with Neath Port Talbot Council to develop our vision of a mobile vaccination unit, the Immbulance.

We collaborated, planned and implemented specific arrangements for marginalised groups, including those experiencing homelessness. The Immbulance was also used to deliver vaccines directly into communities, including locations such as refuge centres and places of worship.

Vaccination equity implies that everyone has the same opportunity to be fully protected through vaccination, and that unfair disparities in vaccination uptake are eliminated. We recognise that people have different needs and assets and that people, therefore, need different opportunities, access, resources and support.



Everyone in Wales should have equitable access to vaccination. To achieve this, we are providing additional, tailored support for underserved groups who might otherwise be left behind. Tackling vaccination inequities is essential to improving uptake and to preventing, controlling, eliminating, and ultimately eradicating vaccine-preventable diseases.

Our first Swansea Bay UHB Vaccine Equity Strategic Plan supports the strategic goals of the Population Health Strategic Plan (2023) and our Quality Strategic Plan (2023). It aims to ensure equitable access to all vaccines for our population, ensuring protection against vaccine preventable diseases.

**Activities include:**

- Delivery of targeted outreach programmes to improve immunisation rates for vaccines with lower coverage.
- Collaboration with schools, colleges, universities and early years settings to promote and deliver vaccines. Targeted vaccine sessions are provided where needed to improve accessibility.
- Collaboration with Health Visiting services to promote vaccination uptake and address barriers.
- Engaging directly with communities to promote vaccine uptake and address barriers to service access. For example, we attend local community events and have developing strong links with faith communities.

- Increasing the accessibility of vaccine appointments, for example, by providing varying clinic hours, locations, and drop-in options.
- We have pioneered the use of a mobile vaccination vehicle (Immbulance) for outreach sessions. This Immbulance is also now utilised by Sexual Health staff to provide outreach.
- Supporting and advising General Practitioners in areas with the lowest immunisation rates and work closely with practice managers.
- Developing effective public health communication messaging to improve vaccination uptake in target population groups. We work with the SBUHB communications and the media to share vaccination messages on social media platforms and with wider stakeholders.
- Coordinating the annual SBUHB staff flu vaccine programme in collaboration with occupational health team, facilitated by our peer vaccination programme.
- Responding to preventable outbreaks with targeted vaccination.
- Collaboration with Local Authority partners in facilitating vaccine programmes for Looked after Children, and homeless population.
- Facilitation of immunisation training and providing clinical governance arrangements to ensure provision of high quality and safe standards in vaccination services.



## CASE STUDY: Home Immunisation Service

The Immunisation Team established the home immunisation (domiciliary immunisation) service in May 2023 to improve accessibility to routine childhood immunisations for individuals, who are unable to attend a GP practice for their scheduled vaccinations. These individuals require an enhanced service approach to ensure they receive their vaccinations in line with current UK guidance. This is to ensure they receive the best protection and to reduce the risk to their health of catching the disease the vaccine will protect against.

Since its inception in May 2023 over 300 referrals have been made to the domiciliary service. Referrals are made primarily from health visitors, but with referrals also received from General Practice Nurses, School Health Nurses, and Looked after Children (LAC) team. Referrals for under 5-year-olds are often related to accessibility.

Living in isolated areas with poor public transport links, or parents/carers not driving or having no access to a car is a common theme. Other reasons include poor maternal mental health and / or physical health, children with additional learning needs (ALN), and children with ill-health or physical disabilities. Referrals for children whose siblings have ALN also features commonly, as parents find accessing traditional 'baby clinics' difficult when having to care for the needs of the child with ALN. Both parents working full-time and unable to access clinic within normal working hours has also led to referrals but this is less common.

Conversely, referrals from those of secondary school age are frequently for those who are electively home educated and therefore unable to access school-based immunisation sessions. Other common referrals are for non or poor attenders at school, pupils who are excluded from school, school anxiety, needle phobia, and special educational needs, particularly Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD).



The domiciliary team are part of the wider Immunisation Team but have an expert role and experience with infants and children. Children and young people frequently need more than one visit before they receive the vaccine as they are often scared or have sensory disorders associated with their ASD. A recent example of collaborative working with the LAC team and Local Authority partners was with a child who lives in a residential care home for children with complex and severe ASD. The service model gave time to nurses to develop a rapport and trusting relationship with the child so that they eventually felt safe and comfortable to receive vaccines, which for some individuals will take more than one visit.

# Chapter 2: Keeping people strong

## Introduction

The Swansea Bay UHB Public Health Team works to maximise opportunities to keep people healthy and **strong** by supporting clinical services across the Health Board to focus on prevention, early identification, and early intervention to empower and support those at risk of developing serious ill-health. We advocate for and support service planning, design and delivery of healthcare through a population health lens, promoting a data-driven, evidence-based approach to delivering equitable, cost-effective and sustainable care which meets our population's needs.



Swansea Bay has a significantly higher rate of preventable mortality than the Welsh average. Premature mortality (from any cause) is also particularly high in Neath Port Talbot compared to other Local Authorities (LAs) across England and Wales.

People dying from conditions which could have been prevented or managed more effectively if identified earlier (preventable and treatable mortality) are fundamental priorities to address in clinical service planning because they suggest that there are areas where preventative and treatment systems are currently falling short, allowing us to target improvement in our services.

This requires working with: primary care, communities, community-based services, secondary care services, and with our other partners such as Local Authorities and the third sector, to understand the health needs of our population and to use this data to think about how services are designed, how people access them, and how we measure their impact; always with a focus on quality, equity, prevention, and sustainability.

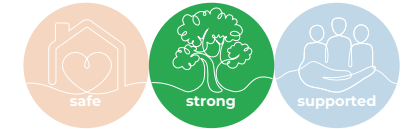
As a Public Health Team we are prioritising prevention, early detection and support for conditions that drive health inequities and cause avoidable deaths in the region including, cancer, heart disease, and diabetes. This chapter provides examples of our current work in this area, and where we see our ambitions for the coming years.

The work of the Swansea Bay UHB Public Health team in this chapter supports delivery of the following Marmot Objectives in our Population Health Strategic Plan:

**Marmot Objective 6: Strengthen the role and impact of ill-health prevention.**

**Marmot Objective 7: Tackle racism, discrimination and their outcomes.**

**Marmot Objective 8: Pursue environmental sustainability and health equity together with partners.**



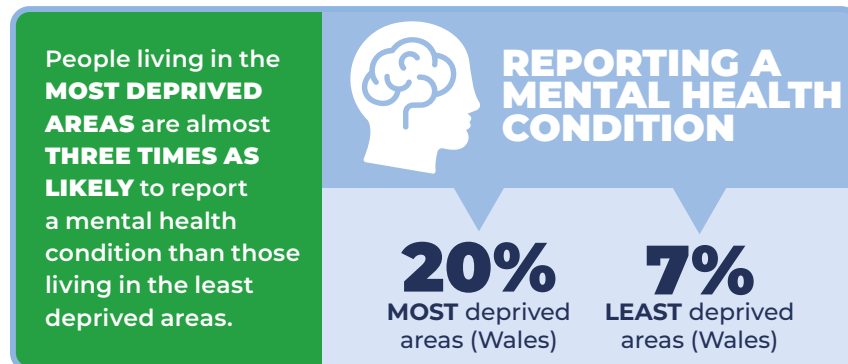
## Addressing inequity in health services

Across Swansea Bay, we see stark differences in life expectancy, healthy life expectancy, and access to care but we know that health inequities are not abstract statistics; they are lived realities for many of our communities impacting not only the wellbeing and resilience of children and families, but also income and employment.

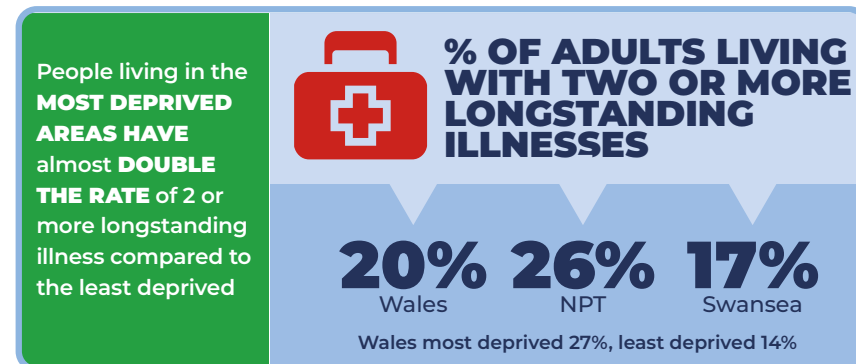
Over a quarter of our communities live in areas rated as the most deprived areas of Wales, and people in these areas are more likely to experience long-term health conditions, poorer mental health, and barriers to accessing services.

How our healthcare services are designed and delivered is key. When attention is not paid to making services equitable for all, it can lead to some communities and people missing out, and that can make differences in health worse. Therefore, we need to consider how we ensure that our services meet the needs of all people, and how we design services that are accessible and equitable for all.

The Core20PLUS5 framework was developed by NHS England to support the health system in reducing inequities. The framework identifies key population groups and conditions where health inequities are more prevalent and focuses on evidence-based approaches which have the most impact. We are currently exploring how to adapt the Core20PLUS5 approach to the Swansea Bay UHB context.



Source 11a: Stats Wales 2022-23



Source 11b: Stats Wales 2022-23

Core20PLUS5 is about focusing efforts where they are most needed:

- It identifies the people living in the most deprived 20% of areas (the “Core20”) who die earlier and have poorer health than those who live in the least deprived areas.
- It also identifies other groups who face additional barriers to good health and healthcare (the “PLUS” groups). This includes groups who experience exclusion from society such as “Inclusion health groups” (including people experiencing homelessness, people in contact with the criminal justice system, vulnerable migrants including asylum seekers and refugees, Gypsy Roma and Traveller communities, people engaged in commercial sex work, people with learning disabilities, those with physical and sensory disabilities, and people with long term and severe mental health problems).
- It focuses attention on five clinical service areas for accelerated improvement: maternity services, severe mental illness, chronic respiratory disease, early cancer diagnosis, and cardiovascular risk, with smoking as an overarching risk factor for all these clinical areas.

Whilst this framework’s principles resonate strongly with our ambitions in Swansea Bay UHB, we’re not simply replicating it, we’re shaping it to reflect our local needs. There is system level transformation work underway in the Health Board on maternity care and mental health services.



As the Swansea Bay UHB Public Health Team, we are focusing currently on:

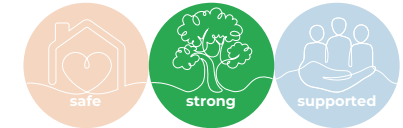
- Chronic respiratory disease (with a key focus on keeping people safe through vaccination and smoking cessation).
- Early cancer diagnosis and prevention through risk factor modification (e.g. smoking, diet, obesity, excess alcohol consumption) and equitable access to cancer screening programmes.
- Cardiovascular risk prevention through risk factor modification (e.g. smoking, physical inactivity, obesity, diet), identification of hypertension and optimised management.
- Smoking as a key risk factor across the life course from Maternity services onwards.
- Inclusion health groups.

Our ambition is to use this approach to guide targeted action, not just in clinical settings, but across the whole system, working with communities, primary care, community services, and our partners in local government and the voluntary sector. We're already seeing opportunities to align this work with existing priorities.

For example, our smoking cessation programmes are reaching those most at risk, and we're exploring with Public Health Wales who provide Cancer Screening in Wales on how to improve uptake of cancer screening across communities who may find it difficult to engage.

Adapting Core20PLUS5 is not just about improving services, it's about building a fairer, more proactive health system. One that recognises the social determinants of health, prioritises prevention, and puts equity at the centre of healthcare.





# REDUCING HEALTHCARE INEQUALITIES

The Core20PLUS5 approach is designed to support Integrated Care Systems to drive targeted action in healthcare inequalities improvement

**CORE20**  
The most deprived **20%** of the national population as identified by the Index of Multiple Deprivation



**PLUS**  
ICS-chosen population groups experiencing poorer-than-average health access, experience and/or outcomes, who may not be captured within the Core20 alone and would benefit from a tailored healthcare approach e.g. inclusion health groups



Target population

# CORE20 PLUS 5

Key clinical areas of health inequalities



**1 MATERNITY**  
ensuring continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups



**2 SEVERE MENTAL ILLNESS (SMI)**  
ensure annual Physical Health Checks for people with SMI to at least, nationally set targets



**3 CHRONIC RESPIRATORY DISEASE**  
a clear focus on Chronic Obstructive Pulmonary Disease (COPD), driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations

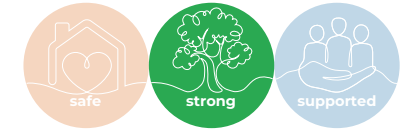


**4 EARLY CANCER DIAGNOSIS**  
**75%** of cases diagnosed at stage 1 or 2 by 2028



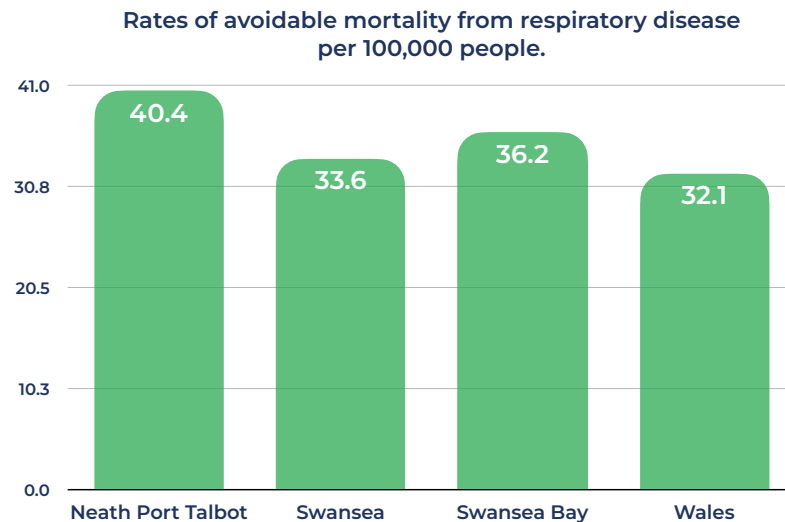
**5 HYPERTENSION CASE-FINDING**  
and optimal management and lipid optimal management





## Chronic respiratory disease

People living in Swansea Bay University Health Board have higher rates of avoidable mortality from respiratory disease compared to Wales overall. The risk is not distributed equally, with people in Neath Port Talbot facing significantly higher risk of death from respiratory disease which could have been avoided<sup>1</sup> (a rate of 40.4 per 100,000 population) compared to those in Swansea (33.6 per 100,000) who are more similar to the Wales average (Public Health Wales, 2025).



Source 12: Public Health Wales, 2025

<sup>1</sup> Avoidable mortality refers to deaths that are preventable or treatable.

Smoking is the leading cause of Chronic Obstructive Pulmonary Disease (COPD) in Wales, and stopping smoking is not only the most effective way to prevent COPD but also to slow the progression of the disease. Therefore, our work around smoking cessation is one of our priority areas within the Swansea Bay UHB Public Health Team.

Another driver of avoidable illness, hospital admissions, and deaths in people with chronic respiratory disease is infection. Ensuring that our health services are set up in a way that empowers patients to stay strong through having access to vaccination to prevent respiratory infections is important. We are also working with primary care and other services across the Health Board to ensure patients, wherever they are seen, are supported to maximise their health and wellbeing via a 'Making Every Contact Count' conversation and referred to preventative interventions such as smoking cessation if they want to make changes.

### Activities include:

- Supporting and advising on the strategic development of smoking cessation services.
- Supporting the delivery of immunisations to our population, including those with chronic respiratory conditions.
- Exploring opportunities with primary care and other services to promote patient empowerment and access to preventive services, including exploring our role in promoting Making Every Contact Count.



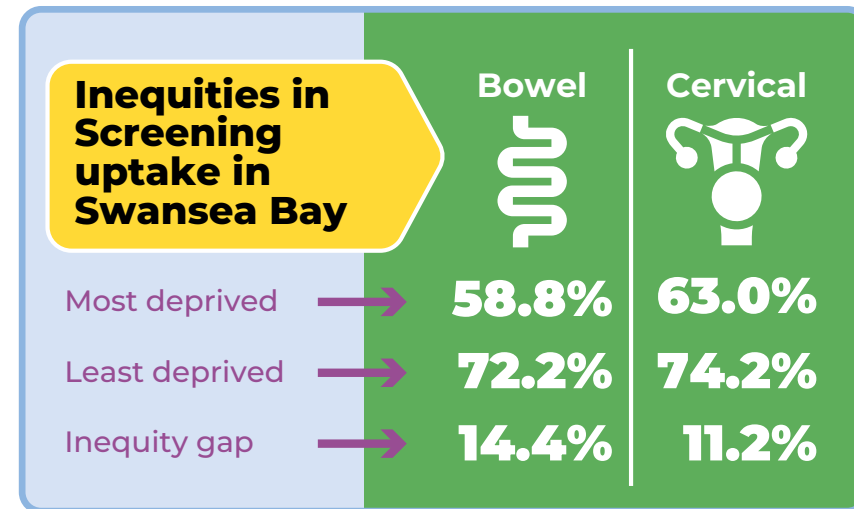
## Ambition on early cancer diagnosis

The Wales Cancer Intelligence and Surveillance Unit (WCISU) states that 24% of cancer patients in Wales were diagnosed at stage 4 and 18% at stage 3 in 2021. The likelihood of survival decreases as stage advances for all cancer types and screening plays a vital role in early detection (Audit Wales, 2025).

To achieve early diagnosis key measures include:

- Population-based screening programmes (to detect cancer before people become symptomatic).
- Red flag awareness for the public and professionals so that early symptoms are not missed.
- Having the services in place so that any symptoms are investigated quickly.

Population-based screening programmes follow strict criteria and evidence and are funded and agreed by national governments on the evidence base that they are cost-effective and demonstrate an overall benefit by finding, treating, and preventing the progression of diseases like certain cancers. Public Health Wales leads the delivery of population screening programmes across the whole of Wales, with the Health Board supporting some delivery and the follow up of patients identified as being at risk following screening.

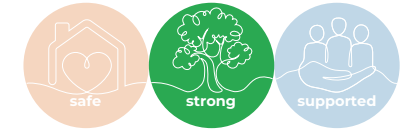


Source 13: Public Health Wales, 2020-21

National cancer screening programmes in Wales include:

- Breast Cancer.
- Bowel Cancer.
- Cervical Cancer.

A new screening programme for Lung Cancer is also in development by Public Health Wales, and due to be implemented in 2027.



Although everyone who is eligible for a cancer screening programme is invited (as long as they are registered with a GP), we know that not everyone will take up the offer of screening equally. In SBUHB, we have lower uptake in some of our screening programmes compared to national average, and there is unequal uptake of screening across different areas related to factors such as socioeconomic disadvantage

There are also inequalities in how people use healthcare once they develop symptoms. For example, some population groups are more likely to present with later stage symptoms, and where people can be offered a Faecal Immunochemical Test (FIT) test (looking for blood in stools) when they present with non-specific symptoms which could be bowel cancer, not everyone will then complete the test.

Examples of differences in healthcare uptake are evident in services such as screening, where uptake of screening programmes is lower amongst certain groups, including those living in more deprived areas. Public Health Wales acknowledges that although ethnicity data is not routinely recorded within the screening programme, insights from engagement work suggest that uptake is lower amongst ethnic minority communities. It also recognises that data on inequities for other groups is not available, but that engagement work and published literature would suggest inequities in accessing screening exist for those living with communication needs, the Trans community and those living with learning disabilities (Public Health Wales, 2022).

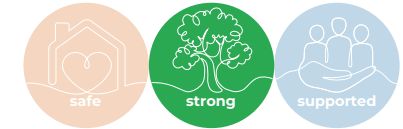
#### Activities include:

- Presentation of data on screening uptake across Swansea Bay and gaining Board level interest in screening.
- Current development of a screening action plan locally to make improvements in screening uptake and reduce inequalities.
- Working with primary care to highlight areas of low coverage and learn from good practice.
- Exploring how we can make best use of resources to follow up people who do not respond to screening invites.

### Reducing the risk of cardiovascular disease

The impact of people living with cardiovascular disease (CVD), and events such as heart attacks and strokes, is widely felt on society, healthcare services, individuals and families.

- Swansea and Neath Port Talbot have some of the highest rates of early deaths (before 75 years old) from cardiovascular disease in Wales and the UK. Between March 2021 – December 2023, the unadjusted rate of premature mortality from cardiovascular disease in Neath Port Talbot was 117 per 100,000 people, and in Swansea was 124 per 100,000 people



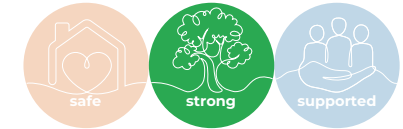
- Of 172 Local Authorities across England and Wales (which ranged from 50 per 100,000 in Richmond upon Thames to 146 per 100,000 in Blackpool), Swansea was ranked 9th highest and Neath Port Talbot was ranked 22nd highest. Looking at Wales specifically, of 22 Local Authorities, Swansea was ranked 3rd highest and Neath Port Talbot 5th highest (Office of National Statistics 2025).
- The incidence rate ratios for Swansea and Neath Port Talbot, compared to Richmond upon Thames, were 2.46 and 2.32 respectively. This means that people in Swansea and Neath Port Talbot were more than twice as likely to die prematurely due to CVD compared to some regions in England. When ethnicity and being born outside of the UK were taken into account, the incidence rate ratios were 2.38 and 2.23 respectively. When ethnicity, being born outside of the UK, and socioeconomic status were taken into account, the incidence rate ratios were 1.69 and 1.34 respectively. This suggests that a significant amount of the higher incidence in Swansea and Neath Port Talbot may be driven by socioeconomic status (Office of National Statistics 2025).

**Importantly, up to 4 of every 5 early deaths from cardiovascular disease could have been prevented through a combination of:**

1. Modifying life-style risk factors (such as smoking, diet, and physical activity).
2. Detecting early disease which may not have any symptoms (such as hypertension and cholesterol imbalance).
3. Treating to optimise levels and reduce risk as prevention before it progresses to significant cardiovascular events.

The leading cause of heart and circulatory disease, coronary heart disease, and stroke is high blood pressure (hypertension), where it was attributed to over half (52.1%) of deaths from health and circulatory disease in England in 2021 (British Heart Foundation, 2025).

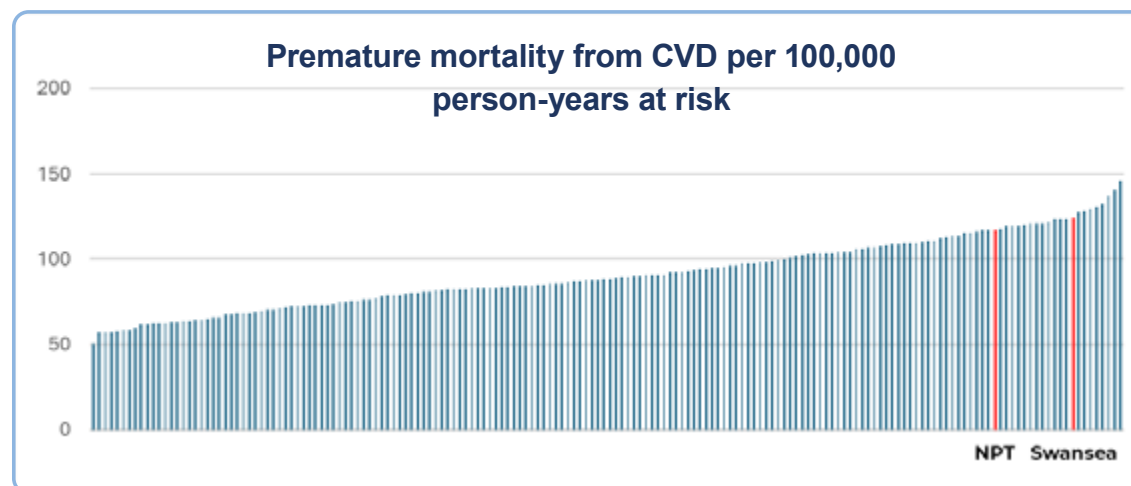
The Core20PLUS5 framework highlights the opportunities for prevention through better identification and management of high blood pressure, as well as the optimisation of cholesterol levels. These are top priorities as there are treatments which we know can work, and they are cost-effective (that there are enough benefits to support the cost of the treatment). This is alongside wider support to the population around healthy weight and smoking cessation.



However, there are challenges in managing cardiovascular risk in the community due to how people with risk factors, in particular hypertension, can be proactively identified where the majority will not have symptoms, and how people who are identified to have hypertension and other cardiovascular disease risk factors can then be treated and optimised to reduce future risk.

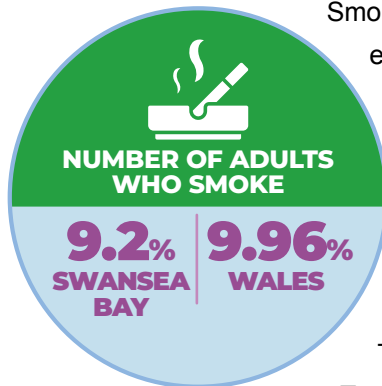
The Swansea Bay UHB Public Health Team are supporting the Health Board in their role towards reducing the burden of cardiovascular disease in our population through:

- Working with primary care.
- Working with Swansea University to explore early identification and treatment optimisation for hypertension and raised low density lipoprotein cholesterol.
- Providing strategic support to weight management services in the Health Board.
- Providing strategic support to tobacco control including smoking cessation services.



Source 14: Comparison of rates of premature mortality from Cardiovascular disease (CVD) by Local Authority in England and Wales (per 100,000 person-years at risk) – Source: Office of National Statistics 2025

## Services to help people to stop smoking



Source 15: Data for 2024-25 National Survey for Wales

Smoking cessation services are a highly cost-effective preventative intervention. The potential savings from investing in stop smoking services are significant. £1 invested in smoking cessation = £2.07 saved after 5 years, and £3.92 by year ten (Public Health England, 2015).

The Swansea Bay UHB Public Health Team advocates for sufficient, stable, and sustainable smoking cessation services which reach and support everyone who wants to quit

in Swansea Bay. We support and advise colleagues who deliver the local smoking cessation services (Help Me Quit) with service design and development. This has led to more of our population being able to access these services to improve their current health and reduce future risk of disease. But as a Health Board we need to go further to ensure that every patient we meet who is a smoker and wants to quit is provided with the opportunity to get professional help to quit.

People are three times more likely to quit if they received expert support and stop smoking aids compared to willpower alone (Public Health England, 2019)

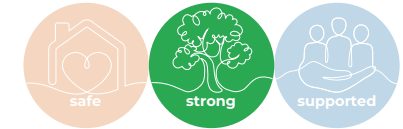
**x3** People are **THREE TIMES** more likely to quit if they received expert support and stop smoking aids compared to willpower alone  
(Public Health England, 2015)

The Swansea Bay UHB Public Health Team consistently advocates for stronger governance and oversight of smoking cessation services. A smoking cessation steering group is being established to increase the focus, impact and investment in smoking cessation services across the Health Board.

### Activities include:

Using Welsh Government Prevention and Early Years funding to work with our local Help me Quit service to design and launch targeted services including:

- ‘Help Me Quit in Hospital’ (which supports patients who are in hospital to obtain nicotine replacement therapies and offer ongoing support to quit smoking).
- ‘Help Me Quit for Baby’ smoking cessation services for pregnant women.



## CASE STUDY: Prevention and Early Years Funding for Level 3 Weight Management Digital Provision



Source 16: National Survey for Wales, 2022-3

Alongside wider partnership work on the Whole Systems Approach to Healthy Weight (see Chapter 3), for those who require additional support to manage their weight, the All-Wales Weight Management Pathway (Welsh Government 2021) sets out how Health Boards can approach empowering individuals through different levels of care, from self-led programmes through to specialist multi-disciplinary support and intervention.

To help keep our population strong, the Swansea Bay UHB Public Health Team have supported the specialist dietician team in the ongoing development of weight management services within the Swansea Bay Health Board area. This has included exploring how Prevention and Early Years Funding can support the needs of the people in Swansea and Neath Port Talbot, and procuring a digital provider to deliver specialist advice and support for people who need extra support to lose weight,

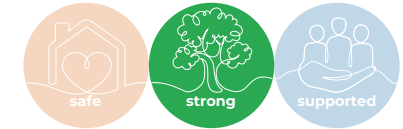
bridging a gap in the pathway. New patients have been enrolling into this since September 2025, with results expected next year.

## Inclusion Health

The Core20PLUS5 framework highlights the importance of the 'plus' population, which includes Inclusion health groups. Inclusion health considers people who experience multiple, overlapping disadvantages, social exclusion and health inequalities, who are seldom heard in our mainstream systems. This can include vulnerable migrants, those experiencing homelessness, Gypsy and Traveller communities, those with experience of being trafficked, sex workers, and people in contact with the criminal justice system. Other groups include people with learning disabilities, those with physical and sensory disabilities, and people with long term and severe mental health problems.

The increased risk to health in these groups are substantial, for example:

- People experiencing homelessness are 6x more likely to have heart disease, 34x more likely to have tuberculosis, and 50x more likely to have Hepatitis C. (Public Health Wales 2025)
- People within Gypsy, Roma, and Travelling communities are 3x more likely to experience anxiety and 20x more likely to experience death of a child. (Public Health Wales 2025)



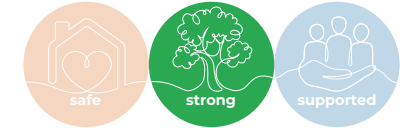
- The mortality rate of female sex workers is 12x higher than the general population, and sex workers are at high risk of blood-borne viruses. (Public Health Wales 2025)
- The rate of post-traumatic stress disorder is significantly higher in refugee and asylum seekers, with significantly increased risk of diabetes and 26% with chronic circulatory conditions.
- People with severe mental illness have increased risk of a range of diseases including respiratory disease (6.6x more likely than general population), liver disease (6.5x more likely), cardiovascular disease (4.1x more likely) and cancer (2.3x more likely). (NHS England 2025)
- People with learning disabilities face health inequalities including respiratory conditions, epilepsy, and constipation (NHS England), with 9 in 10 people with learning disabilities developing more than one health problem during their lifetime.
- Smoking is a common risk factor for many of these groups. For example, 54% of people on probation want to quit smoking, and 57% of Gypsy Traveller communities were estimated to smoke. (Public Health Wales 2025)

Despite these population groups having extremely poor physical and mental health, services often are not set up in a way that works well for them leading to barriers in accessing healthcare and preventive interventions, and worse health outcomes, including premature mortality.

These barriers include:

- Language and communication.
- Low health literacy (understanding), including lack of familiarity with local healthcare provision and entitlement.
- Lack of culturally appropriate services.
- Digital exclusion.
- Geographical inaccessibility.
- Lack of transport.
- Direct and indirect costs including travel, childcare, missed work.

(Public Health Wales, 2023)



The Welsh Government 'Anti-Racist Wales Action Plan' sets out goals and priority actions to achieve systemic change in healthcare and ensure that NHS Wales is anti-racist. The priority areas include breaking down barriers to access to healthcare for people from Black, Asian and Minority Ethnic backgrounds, as well as improving data collection and transparency (Welsh Government, 2024).

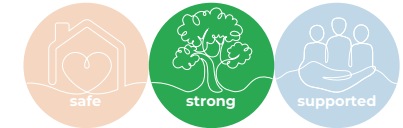
The 'building blocks' or the conditions for good health are often created outside of our health services. Initiatives supporting the wider determinants of health add value by helping people to improve social circumstances which supports overall health and wellbeing, such as 'Housing First' which takes 'a recovery-orientated approach to ending homelessness' by enabling people to achieve 'normal' independent housing with support built around their needs (Welsh Government 2018). But we also know that by advocating and creating more equal access to healthcare services, which meet the local needs of these groups, we can help to ensure that our services actively consider and adapt to the needs of all our most vulnerable population. Tailored approaches, such as annual health checks for people with learning disabilities, and outreach work for those experiencing homelessness, offer opportunities to support underserved populations, however these are not consistently provided as established services.

The Swansea Bay UHB Public Health Team collaborates and supports work on Inclusion Health whilst being vocal advocates to ensure that we best meet local needs and reduce inequity.

#### Activities include:

- Supporting the Swansea Bay University Health Board Inclusion Health Forum.
- Funding Diversity Outreach Workers who are based in the community in environments which are accessible and work to better understand the needs of a range of communities.
- Links to assertive outreach, such as through the Blood-Borne Virus and Sexual health services, to reach people in the community who do not attend traditional clinic settings with proactive screening and management of risk.
- Supporting the development of an integrated equity focused impact assessment approach for clinical services planning and strategic Health Board decisions to ensure that legal duties on equality, socioeconomic inequality and health impact assessment are given due regard.
- Working with Primary Care to explore opportunities with inclusion health and other higher risk groups.





## CASE STUDY: Tuberculosis ‘Find and Treat’ bus

In March 2025, the Swansea Bay UHB Public Health Team supported the Tuberculosis (TB) Find and Treat bus to reach over 100 people in SBUHB to be tested for TB and blood-borne viruses, many of whom are at risk or may not access health services early.

In addition to the focus on respiratory health and blood-borne viruses this event provided an opportunity for sexual health, immunisation services and voluntary services to provide advice and support.

The bus was located within the community. In the morning, the focus was to reach communities who have links to countries that have a high prevalence of TB and Hepatitis C, and in the afternoon to reach people experiencing homelessness, living in hostels, sex workers and,/,or those experiencing substance misuse. However, the health check was open to all adults.

Overall, there was good engagement from the community which exceeded demand, with around 14% of people tested receiving a positive result, meaning they could start treatment sooner than would have otherwise been possible.



# Chapter 3: Keeping people supported

## Introduction

This chapter focuses on how the Swansea Bay UHB Public Health Team works with our partner agencies to ensure that everyone in our region is **supported** to access the building blocks for good health and wellbeing across the life course, and in the places that they live, work, learn and play. This chapter highlights how the team works to strengthen the building blocks for health and wellbeing through prevention, equity-focused action and collaborative partnership working.

The work of the Swansea Bay UHB Public Health team in this chapter supports delivery of the following Marmot Objectives in our Population Health Strategic Plan:



**Marmot Objective 1: Giving every child the best start in life.**

**Marmot Objective 2: Enable all children, young people, and adults to maximize their capabilities and have control over their lives.**

**Marmot Objective 3: Create fair employment and good work for all.**

**Marmot Objective 4: Ensure a healthy standard of living for all.**

**Marmot Objective 5: Create and develop healthy and sustainable places and communities.**

**Marmot Objective 7: Tackle racism, discrimination and their outcomes.**

**Marmot Objective 8: Pursue environmental sustainability and health equity together.**



## Early years

### **Giving every child the best start in life: supporting and advocating for children and young people's health and wellbeing at a regional level.**

We know from evidence that programmes and policies aimed at supporting children and their families to live and develop well in the early years has the greatest impact on the health and wellbeing of the population across the lifespan. We follow Public Health Wales (2025) 'The Best Start in Life: An Early Years Framework for Action' which contains seven thematic building blocks.



These are key parts of the system that can have the biggest impact on babies, young children, and their families. This is an evidence-based strategy to reduce health inequities by impacting on children's everyday lives and future outcomes.

It links closely with our Population Health Strategic Plan. Areas for action include working to create:

- A family friendly, safe and sustainable environment.
- Safe and suitable homes.
- Safe and supportive communities and networks.
- High quality play, learning and care.
- Maximised family income and fair work.
- Services that are family-focused.
- High quality universal and enhanced health services.

The Swansea Bay UHB Public Health Team collaborates with others across several multi-agency programmes and partnerships to strengthen the regional approach to improving children and young people's health and wellbeing.



## Building a strong foundation: The First 1,000 Days

The period from before pregnancy to around age three, known as the first 1,000 days, is crucial for building family health literacy, warm and nurturing family and community relationships, infant growth, and early child development that are essential for lifelong health and wellbeing. To improve health and wellbeing at this vital time we support, advise and collaborate with colleagues across the health board including midwives, health visitors, school health nurses, and speech and language therapists.

Key Activities include:

- Promoting dental health by supporting primary school programmes like Designed to Smile, which encourages early and regular tooth brushing.
- Protecting against illness by ensuring communities have access to vital childhood vaccination and screening programmes.
- Monitoring healthy growth through using the Child Measurement Programme – School Health Nurses record the height and weight of reception-age children. We share this data with Local Authorities to highlight local obesity rates and coordinate action to reduce long-term health impacts, contributing to local and national planning.

- Supporting education and awareness raising for pregnant women by providing specialised training for midwives focused on key risk factors for the health of mothers and babies: maternal obesity, smoking, drinking alcohol, substance use, and domestic abuse.
- Advocating for improving the availability and access to preventative interventions for pregnant women, such as smoking cessation and weight management

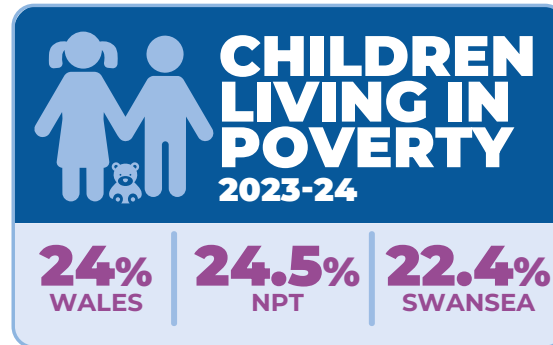
## Our shared commitment: The Best Start to Life

Multi-agency collaboration is essential to support improvements across the seven thematic building blocks of the Early Years Framework for Action. In Swansea Bay “The Best Start to Life” is a key objective for both the Swansea and Neath Port Talbot Public Services Boards and this collaboration is guided by common early years principles:

- Strong collaboration at regional and local levels.
- Evidence-based prevention, using high-quality data and insights.
- Tackling inequalities through focused service delivery.
- Achieving long-term outcomes for children, families, and carers.
- Focusing on the needs of the child, family, or carer.

## Local action on child poverty

Child poverty remains a significant challenge across Wales, with almost a third of children in Wales living in poverty. Families that are large or have young children are most at risk.



Source 17: Public Health Wales

We know that children living in poverty are more likely to face mental health issues by the age of 11 years, perform less well in school, and are more likely to be unemployed or live in poverty as adults, so early action and collaboration is key.

The Swansea Bay UHB Public Health Team work closely with Public Services Boards to highlight areas of deprivation and provide evidence for actions designed to alleviate and mitigate the effects of poverty. We utilise local data to identify effective strategies and pinpoint areas of inequity, allowing our health visiting, school health nursing, and midwifery teams to focus outreach efforts on families who struggle to access services. We advise and support on the Tackling Poverty Strategy because poverty is linked with poor health.

In Neath Port Talbot, our work extends to older children and young people (ages 8-25). By analysing school data, we identify where more support is needed for healthy living. Our focus for this age group includes:

- Supporting mental health by training key adults (staff, volunteers, and families) on how to best support children and young people's mental and emotional wellbeing.
- Encouraging physical activity by improving access to play opportunities.





## Children and young people’s health

We have seen changes in children and young people’s health since the COVID-19 pandemic and those growing up in in lower affluence families are particularly impacted.

- **Mental health and emotional wellbeing** show the most striking deterioration, across both primary and secondary age groups and particularly in girls and young women.
- **Physical activity** saw modest gains post-pandemic, but primary-level fitness continues to decline. There is a significant decrease in abilities related to swimming and cycling.
- **Diet and sleep** trends are concerning, with over half of children not eating at least one piece of fruit or vegetable daily and increased intake of sugary snacks.
- **Incidents of bullying and rising risk behaviours** suggest increasing social and environmental pressures. One in ten boys and almost two in five girls are classed as problematic social media users. There is a rise in young people, especially girls, who vape.

Domain	Trend
Mental Health	↑ Emotional problems, depression, anxiety (sharp increase)
Physical Activity	↑ Slight improvement, but levels remain insufficient
Fitness Skills (Primary)	↓ Reduced swimming/cycling abilities
Diet	↓ Unhealthy eating patterns
Sleep	↓ Less sleep, more fatigue
Bullying	↑ More bullying reported
Vaping/Gambling	↑ Rising prevalence among teens

Working with teachers and parents/carers to understand the risks and pressures young people face is a key part of the role of the Swansea Bay UHB Public Health Team.



## Welsh Network of Health and Wellbeing Promoting Schools (WNHWPS) and Healthy and Sustainable Pre-School Scheme

A health and wellbeing promoting school is one that makes sure its environment is safe, supportive, and healthy for everyone—students, staff,



Rhwydwaith Ysgolion Cymru  
sy'n Hybu Iechyd a Lles  
Welsh Network of Health and  
Well-being Promoting Schools

and the wider school community. To support schools to achieve this, a national Health Promoting Schools scheme was first developed in Wales in 1999. This successful and internationally recognised scheme has now evolved to become the **Welsh Network of Health and Wellbeing Promoting Schools (WNHWPS)** and the **Healthy and Sustainable Pre-School Scheme**. The scheme takes a “settings-based approach” to influencing policies, behaviour, environments, curriculum and mindsets – embedding health and mental wellbeing as a core element of the places where children and young people learn and play.

In Swansea Bay, our local Health and Wellbeing Promoting Schools Scheme is hosted and led by the Swansea Bay UHB Public Health Team and currently works with all 157 primary and secondary schools (including Welsh Medium) in Swansea and Neath Port Talbot. Our Health and Wellbeing Promoting Schools programme staff help schools identify the health and wellbeing needs of the whole school community



through self-evaluation and then provide specialist advice and support to help them develop an action plan to address any priority areas. Every school has access to a named Health Promoting Schools practitioner to support them.

The team works closely with the [School Health Research Network \(SHRN\)](#), in Cardiff University and the [HAPPEN team](#) at Swansea University to take a data and evidence led approach to designing school based preventative action plans. We support schools to engage with the bi-annual SHRN pupil health and wellbeing surveys and schools then receive their own detailed reports based on completed surveys. We encourage and support schools to use their SHRN reports to identify areas of need within their settings and actions to address these. We organise regular network meetings for Secondary Schools to provide an opportunity for schools to share their data, health and wellbeing trends and what they are doing to address concerns.



In 2011, the Welsh Government introduced the **Healthy and Sustainable Pre-School Scheme**, which aims to encourage healthy habits in early years childcare settings. Our Health and Wellbeing Promoting Schools Team delivers the scheme in partnership with Neath Port Talbot Council and the City and County of Swansea and there are over 100 settings engaged with the scheme across the region. Settings receive the same support as schools to identify and meet their health and wellbeing needs.

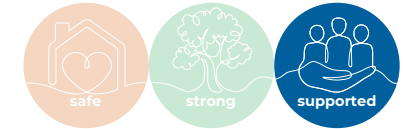
Partnership working is central to our approach, enabling schools and childcare settings to adopt sustainable, prevention focused strategies for health and wellbeing in every aspect of school life. Steering Groups for both schemes bring key partners together to share, collaborate, and learn. In addition, we work jointly on targeted projects to maximise impact.

In 2021, the Welsh Government introduced the **Whole School Approach to Emotional and Mental Wellbeing**. This framework helps schools ensure that emotional and mental wellbeing is prioritised as part of everyday school life and provides an opportunity to focus on the mental health of children and young people following on from the COVID-19 pandemic.

#### Activities in 2024-25 included:

- Providing support to schools in over **60 meetings with school staff** to carry out self-evaluation of emotional and mental wellbeing provision and the development of action plans to address gaps.
- Collaborating with Swansea and Neath Port Talbot Local Authorities, who have conducted over **80 meetings with Early Years and Childcare settings** to identify and improve health and wellbeing provision.
- Delivering **training for teachers** focused on staff wellbeing, with input from Education and partner services, promoting self-care and access to support.
- Providing **training for Early Years and Childcare staff** on physical activity, healthy snacks, staff wellbeing, and infection control, ensuring resources are integrated into daily practice.
- Collaborating with Education and School Health Nursing to develop **teaching packs and toolkits** supporting the Welsh Government's Relationships and Sexuality Education Code.





- Supporting schools in embedding **positive relationships and connectedness** into school life.
- Enhancing **Healthy and Sustainable Pre-School settings** through partnerships with Sports Development Teams, offering staff training, child sessions, and practical resources.
- Working closely with partners including Local Authorities, school catering teams, sports development, Designed to Smile dental health prevention programme, Child and Adolescent Mental Health Services, Western Bay Area Planning Board, immunisation staff, and third sector organisations to ensure a **joined-up approach** and represent schools and childcare needs at partnership boards.

### Vaping and E-Cigarettes – A Growing Concern for Our Young People

Vaping and the use of e-cigarettes is an emerging and growing health concern for young people, parents and schools. Almost 1 in 4 young people aged 11–16 in Swansea Bay report that they have tried an e-cigarette or vape, and 5% say that they use them every day.

We know that nicotine addiction starts in childhood and that growing up around smoking makes it far more likely that children and young people will take up smoking themselves. Research has shown that children and young people growing up in homes where their parents or care giver smoke are four times as likely to take up smoking themselves (ASH Wales 2025).

Vaping also puts young people at risk of nicotine addiction, a dependency that can negatively affect mental health and wellbeing and can be disruptive to life and education.



Source 18: Schools Health Research Network 2023

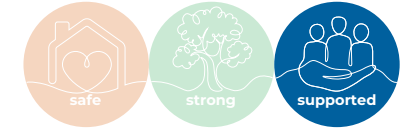
The impact of this dependency is being seen by schools who are also reporting increasing issues with vape use and problems with concentration, ability to learn, need to fulfil tobacco addiction and behaviours as a result. However, the longer-term health impacts are currently unknown (Public Health Wales, 2024). There is emerging evidence that suggests young people who vape have an increased risk of becoming addicted to other illegal and health harming substances in the future (Public Health Wales, 2025).

Our Health Promoting Schools staff have worked closely with schools, School Health Nursing, Trading Standards and other key partners to respond to the issue by:

- Providing training, support and guidance for schools.
- Raising awareness about the risks and dangers of vaping.
- Sharing trusted resources from Public Health Wales so schools can give pupils and parents accurate and evidence-based information.

We're committed to helping schools keep children and young people and their parents/carers safe and informed as evidence emerges.





## CASE STUDY: Putting Wellbeing at the Heart of School Life

### Background

Glyncollen Primary School wanted to make sure emotional wellbeing and mental health were a key part of everyday school life – not just an extra task. To do this, they used the **Whole School Approach to Emotional and Mental Wellbeing** self-evaluation tool. This tool helps schools look at how they support wellbeing and make plans to improve, using feedback from the whole school community.



Our Swansea Bay UHB Health Promoting Schools staff worked alongside the school to guide and advise them through the process.

### Why was this important?

Schools often find it hard to fit wellbeing into their daily routines. It's essential that wellbeing links with other priorities like safeguarding and school improvement. Listening to pupils, parents, staff, and governors helps schools make changes that really work for everyone.

### What did Glyncollen Primary do?

The school took several steps to make wellbeing central to their plans:

- **Listening to Everyone:** They asked pupils and staff for feedback through questionnaires.
- **Working Together:** The whole school community helped complete the self-evaluation.
- **Setting Priorities:** They used a simple red-amber-green system to see which areas needed the most attention.
- **Making Wellbeing Part of School Plans:** Wellbeing goals were added to the school's main improvement plan, so they weren't treated as an extra.
- **Linking with Safeguarding:** They made sure wellbeing plans matched safeguarding priorities.
- **Using Research:** They connected their work to a national project on empathy, using tools developed by experts.

### What changed?

- Wellbeing became a key part of the school's improvement plan.
- Staff felt more involved and engaged.
- Feedback from pupils and staff helped the school make targeted changes that really made a difference.

### What did we learn?

- When wellbeing is part of school priorities, it lasts.
- Working together builds ownership and responsibility.
- Using data gives schools a strong foundation for decisions.
- Linking wellbeing with other priorities makes it central to school life.



## Creating and developing healthy and sustainable places and communities

Creating healthy and sustainable places and communities is a core objective of our Population Health Strategic Plan. The environments where people live, work and spend their leisure time profoundly influence health outcomes. This includes housing quality, access to fair and secure work (paid and voluntary), safe and secure workplaces, opportunities for active travel, access to green and natural spaces, and community facilities that promote social cohesion. Poorly designed environments can exacerbate health inequities, whilst well-planned spaces can promote physical activity, mental wellbeing and social connection.

To achieve this objective, the Swansea Bay UHB Public Health Team work closely with local authority planning colleagues and wider partners to support, advise and advocate for health and wellbeing to be integrated into development and planning decisions.

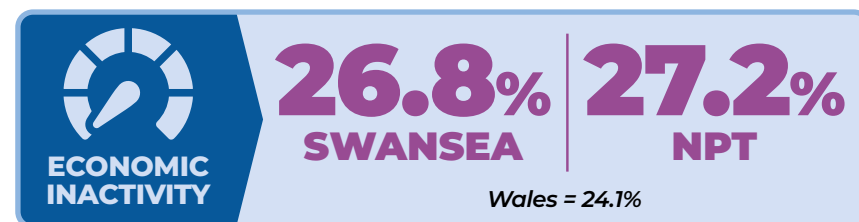


### Activities include:

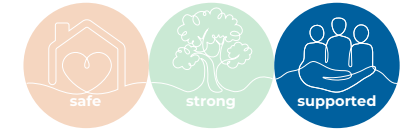
- Delivering Health Impact Assessment workshops to support and inform Swansea and Neath Port Talbot Council's Local Development Plans in partnership with the Wales Health Impact Assessment (HIA) Support Unit in Public Health Wales.
- Strengthening collaboration between land use planners in Swansea and Neath Port Talbot Local Authorities, the Swansea Bay University Health Board Public Health Team, and Health Board colleagues, and established a Local Development Plan Health Technical Working Group.
- Responding to major planning applications to ensure opportunities to promote and protect health and wellbeing are maximised in areas of new housing.
- Advising and supporting Neath Port Talbot and Swansea Public Services Boards on the health and wellbeing components of climate adaptation risk assessments, to ensure that the health and wellbeing of the population in Swansea Bay is protected from the impacts of climate change such as heat, flooding, extreme weather and drought.
- Providing a briefing to the Health Board on the current and future impacts of climate change on the health and wellbeing outcomes in the population of Swansea Bay.

### Tata Steel Transition

The Tata Steel Transition is a mass unemployment event (MUE). Such events are evidenced to have a negative impact on the health of workers, their families and communities. The impacts extend beyond job loss, and include increased risks of poor physical and mental health, including higher rates of heart disease, alcohol-related harm and drug misuse. Families and communities can experience financial hardship, strained relationships and reduced social cohesion. These events also risk impacting community morale and hopes for the future. These effects can worsen existing inequalities and threaten wellbeing across individuals, families, and communities (Public Health Wales, 2017).



Source 19: NOMIS 2024-2025

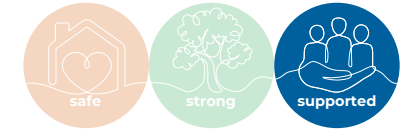


The Swansea Bay UHB Public Health Team is working closely with partners including NPT Local Authority, Colleges of Further Education, the Department of Work and Pensions and others to reduce the possible harms and maximise possible benefits of this decision, and the future options for economic and social regeneration to population health and wellbeing in the region.



#### Activities have included:

- Advocacy, support and advice on health and wellbeing as a Chair of the Community Relations & Wellbeing workstream of the Tata Transition Board. Going forward we will continue to work with the reconfigured programme infrastructure.
- Raising awareness of potential health risks linked to the Tata Transition and successfully securing funding to commission an independent Health Impact Assessment (HIA) on the Tata Steel Transition, sponsored by the Community Relations & Wellbeing workstream of the Tata Transition Board and funded by UK Government. This will ensure that the short, medium and long-term impacts of the transition on the whole community are identified and can inform plans and investments.
- Worked with Public Health Wales to design and plan a regional survey with 301 residents to understand their experience of health, social, and financial impacts of the Tata Steel transition. It was carried out early in 2025 among people aged 16 and over living in Neath Port Talbot who had a range of employment types, including being employed, unemployed, retired, or a student.



Key findings of the Time to Talk Survey (Public Health Wales, 2025) were as follows:

- **Views on possible negative impacts:** When asked what type of impact they thought the changes at Tata Steel will have in their local area, more than half of respondents felt five out of the nine issues asked about would be negatively impacted. These were; employment opportunities (89%), mental health (83%), community spirit (73%), housing market (58%), and children and young people (58%).
- **Views on possible positive impacts:** The only factor more than half of respondents thought would be positively impacted was air quality (76%), while the only factor most people thought would not be impacted was tourism (55%).
- **Social support and wellbeing:** Nearly everyone surveyed agreed (63% strongly agreed; 28% agreed) that they can get the support they need from family and friends. The majority (83%) felt that their social relationships (e.g. family and friends) had a positive impact on their health and wellbeing. 74% of people said their lives feel worthwhile, 72% felt happy, and 67% expressed satisfaction with life overall. All are key protective factors in community wellbeing and resilience.

These insights are shaping the scope of the HIA and informing targeted interventions, including proposals for mental health support and workforce retraining initiatives.

## Developing a Regional Health Economy to benefit our population

The Swansea Bay UHB Public Health Team are working jointly with Hywel Dda UHB through the Regional Health Economy Subgroup as part of the South-West Wales Regional Joint Committee.



Through a collaborative, population health approach rooted in the Marmot Principles and Social Model for Health and Wellbeing, the group is focusing on sharing and scaling up innovation and proven practices, fostering regional learning, and driving sustainable systems change to maximise impact, investment, and health equity across the region.

A Regional Health Economy Steering Group has been established and workstreams have been established, structured around four themes: people, place, procurement and partnerships. There is already significant activity underway within the Health Board and with our partners to support this work, and we are keen to collaborate further to showcase and scale up good practice across our communities.



## **CASE STUDY: Widening Access to NHS Careers – Inclusive Engagement for a Healthier, Fairer Future**

Swansea Bay University Health Board (SBUHB) continues to strengthen its commitment to widening access to employment, training and progression opportunities as part of its contribution to the regional health and care workforce.

A key focus has been on removing barriers to entry, particularly for individuals from socio-economically disadvantaged backgrounds, those who are under-represented in the NHS workforce and people living within local communities experiencing the greatest health inequalities.

Activity has been delivered in close partnership with local schools, colleges, training providers, local authorities, employability services and third-sector organisations, ensuring pathways are accessible, supported and responsive to local need.

Key activities in 2025/26 include:

- Co-producing with schools and community partners more than 20 careers events across schools and colleges in Neath Port Talbot and Swansea. These included work with students of all abilities but with focused work with key groups such as young carers, pupils with Profound and Multiple Learning Disabilities and complex Autistic Spectrum needs.

- 132 work experience placements were arranged across a wide variety of clinical and non-clinical settings. An additional 59 rotational placements were also provided to Health and Social Care students from Neath Port Talbot College and Gower College Swansea.
- 37 trainees were accepted onto the Health Board's Vocational Training programme, specifically targeted at unemployed individuals from diverse or disadvantaged backgrounds. Of those candidates, 15 went on to secure employment following completion, 9 within SBUHB and 6 with other local employers.
- Apprenticeship pathways have been developed and work with a number of departments including digital, estates and healthcare support, to offer apprenticeship vacancies, focused on individuals without traditional academic routes. Support is also offered to existing staff with apprenticeship qualifications, with 269 staff members currently on the learning programmes.

**These initiatives demonstrate how Swansea Bay University Health Board is already:**

- Championing health equity through careers engagement.
- Reaching young people who face multiple barriers to opportunity.
- Providing early, meaningful exposure to NHS career pathways.
- Delivering on our role as a local anchor organisation with a focus on social value and inclusion.
- Enabling individuals and staff to gain increased awareness, confidence, skills and structured experience, while supporting workforce sustainability and retention.



## CASE STUDY: Sharing International Learning on Sustainability

### Background

The importance of sustainable development and the need to balance economic, cultural, social and environmental wellbeing is a key public health issue. These priorities align with the Population Health Strategic Plan and the Well-being of Future Generations Act (WFGA), which emphasises the need for Wales to be globally responsible in this pursuit. The Swansea Bay UHB Public Health Team play a pivotal role in supporting Wales' commitment to being globally responsible under the WFGA, which includes fostering collaborations and sharing best practice.



### What did we do?

The Swansea Bay UHB Public Health Team played a central role in securing funding from Welsh Governments Agile Cymru grant, which supports cross-border and international economic cooperation around shared interests. This funding has enabled learning exchanges to take place and has strengthened relationships with the British Embassy in Madrid around advances in sustainable healthcare and One Health approaches.

Examples of best practice that have been shared include Swansea Bay's solar farm and the award-winning Cae Felin Community Supported Agriculture (CSA) site near Morriston Hospital, which exemplify innovation in health and sustainability. A range of activities take place on the site, such as providing schoolchildren with hands-on food-growing education, supporting patient care beyond hospital walls, improving staff wellbeing, boosting biodiversity, and contributing to net zero goals.

The NHS Sustainability Conference was another opportunity to help showcase work internationally around sustainable healthcare approaches. These collaborations have been shared at the South West Wales Regional Joint Committee meeting between Swansea Bay and Hywel Dda UHB to inform the development of a regional health economy programme of work.

**What is the impact of this work**

This initiative raises our profile internationally and strengthens partnerships by showcasing leadership in sustainable healthcare and the Well-being of Future Generations Act. Wales is being positioned as a leader in sustainable healthcare and One Health approaches, showcasing the Well-being of Future Generations Act as a global model for embedding sustainability in health systems.

At the same time, the Swansea Bay UHB Public Health Team works in partnership with others across the Health Board and with wider partners to promote regional innovation projects that can drive regional health economy development and stimulate growth in Wales.

**Next Steps**

International collaboration and knowledge exchange will now be embedded into the Regional Health Economy programme of work as part of the South West Wales Regional Joint Committee in collaboration with Hywel Dda University Health Board. This will involve close working with a range of partners, including Public Services Boards, the Future Generations Commissioner’s Office and Public Health Wales as we deliver this programme of work.



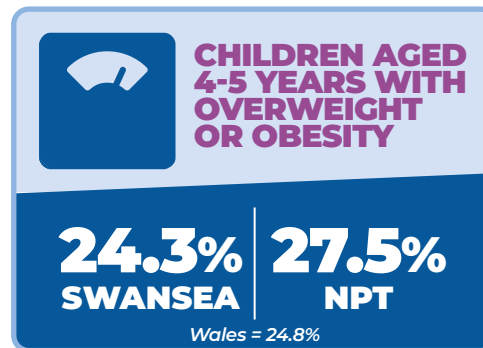


## A Whole Systems Approach to Healthy Weight

Addressing the issue of unhealthy weight is an urgent priority for us. Across Swansea Bay University Health Board, over 60% of adults and a quarter of children (aged 4-5 years) are living with overweight or obesity. Excess weight and diet-related ill-health shorten lives and lead to more years of life lived in poor health and with disability. Those living in the poorest circumstances are affected the most. In Wales, obesity is estimated to cost the Welsh economy £1.1 billion in reduced productivity (Frontier Economics, 2025).

In response to this challenge, Welsh Government launched the Healthy Weight: Healthy Wales Strategy (Welsh Government, 2019) which aims to increase the proportion of the population who are a healthy weight and reduce inequalities. A key theme within this strategy is leadership and enabling change through a Whole Systems Approach.

In Swansea Bay, the Whole Systems Approach is led through our regional team based in the Swansea Bay UHB Public Health Team,

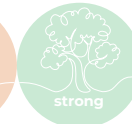


Source 20: Child Measurement Programme, 2022-23

who cover the Swansea Bay and Hywel Dda University Health Board areas. They work with Swansea and Neath Port Talbot Public Services Boards and partners on creating supportive environments for healthy weight. Using a systems approach, they are increasing the collective understanding of the regional healthy weight system and directing collaborative efforts towards making changes in the system that will have the greatest impact.

### Activities include:

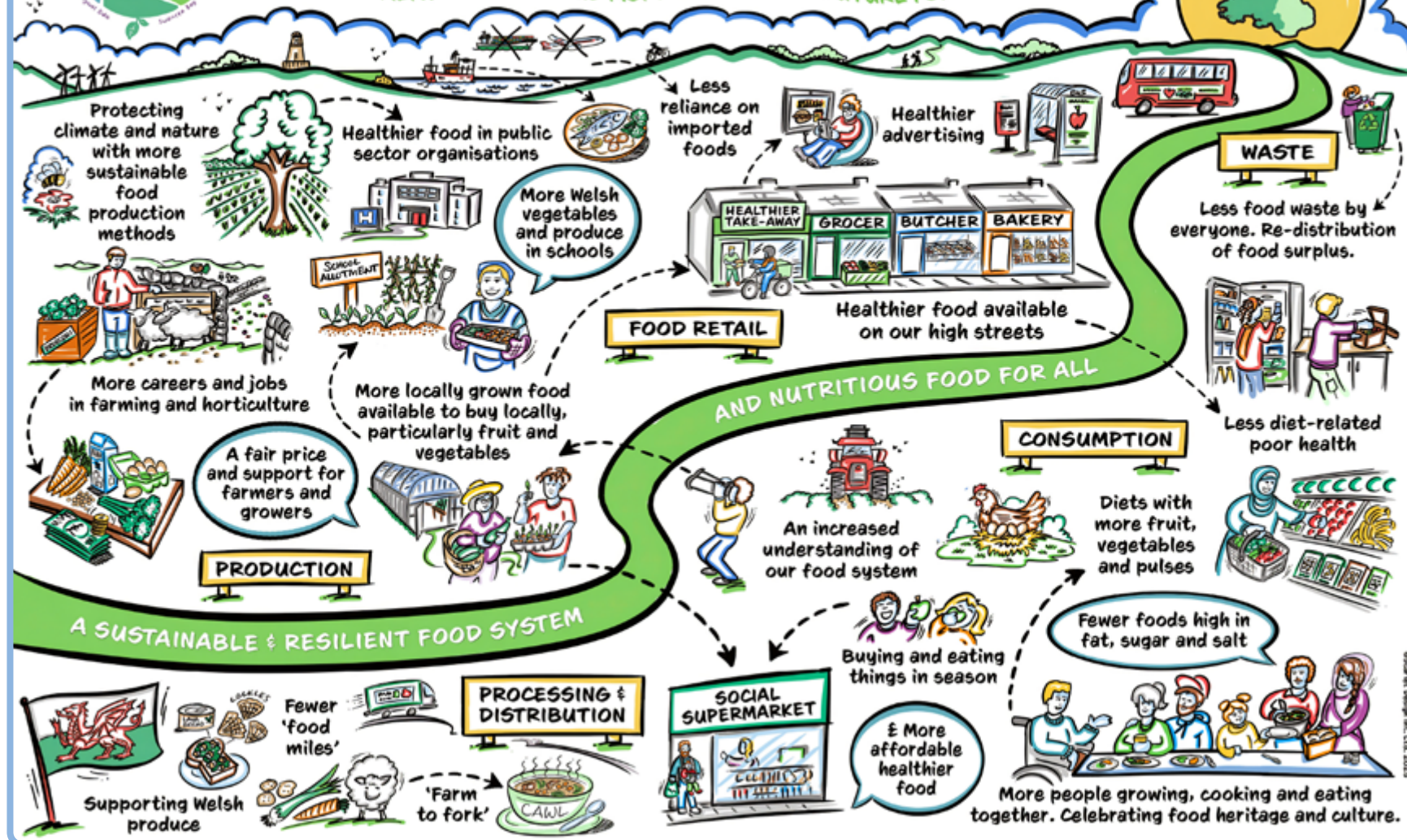
- Working with the five Public Services Boards through a series of engagement activities across the region has resulted in a collective agreement to focus on access to food (availability and affordability) as a collaborative priority for system-wide action.
- Developing a regional learning network – to help build the capacity and capability of our partners in applying system tools and approaches in their work around ‘healthy weight’.
- Delivering a regional workshop with Swansea and Neath Port Talbot Public Services Boards—who have agreed to take forward public food procurement as an area of focus.
- Co-producing with partners “Our 2050 Vision for the Regional Food Environment “ which will guide regional work moving forward (See next page).



# OUR FUTURE REGIONAL FOOD ENVIRONMENT

A Whole Systems Approach - building partnerships and collaboration towards our 2050 vision

A HEALTHIER, FAIRER AND MORE SECURE FOOD FUTURE FOR EVERYONE





In addition to the Healthy Weight Healthy Wales Strategy, food policy in Wales is influenced by a range of interconnected policy frameworks and strategies, including the Wales Community Food Strategy (Welsh Government, 2025), the Wellbeing of Future Generations Act (Welsh Government, 2015) and the Future Generation Commissioner's Office Cymru Can Strategy (Future Generations Commissioner for Wales, 2023) where food is identified as an area of focus.

### **CASE STUDY: Roots of change: Working together to improve the food environment across the region**

The team has been actively engaging with food system stakeholders in each Health Board area. Recently, the team ran a workshop which brought members of Swansea and Neath Port Talbot Public Services Boards together with wider partners from the local and national food system. This included community growers; wholesalers; catering and procurement colleagues; public and third sector partners; Cardiff University and colleagues from within the Office of the Future Generations Commissioner. The aim of the workshop was to agree a shared priority focus for improving the availability and affordability of healthy and sustainable food across the region.

Helping to ensure nutritious healthy options are easy to access, are appealing and affordable across our communities requires engagement across the entire food system from “farm to fork”. This involves convening a wide range of partners involved in shaping this system including

farmers, processors, distributors, retailers, policymakers, planners and consumers. Together, their decisions and actions contribute to achieving our regional vision to have a **sustainable and resilient food system with nutritious food for all.**

The workshop built on previous engagement and cross-sector partnership working and was an important step towards developing a commitment across our PSBs to improve access to food and enhance population health and wellbeing across the health board area. Through open discussion and use of system tools, attendees narrowed down the focus to the planning system, food procurement and advertising and came to an agreement that food procurement should be a key, joint area of focus for the Public Services Boards moving forward.





## Summary and Recommendations

This Annual Report has highlighted the significant and growing population health challenges facing Swansea and Neath Port Talbot. Despite progress across many areas, opportunities to accelerate improvements in health and wellbeing in our communities remain, and too many residents experience preventable illness and premature mortality.

The report has described how the SBUHB Public Health Team has worked with partners across the NHS, local authorities, voluntary sector, academia and communities to take strategic and operational action across three domains of public health practice to keep our people **safe, strong, and supported**. This work aligns with the SBUHB Organisational Strategy, our Population Health Strategic Plan with its 'Marmot Objectives'. These express a vision for people in Swansea and Neath Port Talbot to have an equal opportunity to live longer, healthier lives, achieving their full potential.

To accelerate population health gain, we will need as a Health Board to:

1. Continue to support specialist local population health analysis to better understand population needs and, therefore, identify the effective interventions that will address these.
2. Progress evidence-based prevention and case finding for Core20PLUS5 disease area risk factors such as hypertension. Seek opportunities for early intervention to decrease premature preventable mortality in adults, decrease health inequities, avoid acute demand and treatment costs.
3. Sustainably invest in vital evidence-based preventative services like smoking cessation and weight management services which face uncertainty linked to; short-term grant funding cycles, resulting in recruitment difficulties, and high population need that exceeds capacity.
4. Increase Cancer screening uptake and reduce inequities in rates throughout our Health Board, working with Public Health Wales
5. Increase immunisation uptake rates across the life course by continuing to engage with parents, individuals, settings such as Schools and Care Homes and under-served inclusion health groups, such as those who have accessibility needs, or who are homeless or distrusting of authorities, because of other life factors.



6. Further assess the needs of Babies, Children and Young People growing up in Swansea and Neath Port Talbot to ensure they achieve a healthy start in life and grow into health literate individuals as young adults. Ensure that there is a system-wide, coordinated, long-term approach to planning and investment in this area.
7. Further assess the Mental Health needs of our population to inform prevention strategies and service transformation.
8. Focus on interventions that will add life to years as well as years to life, from infancy to the end of life.
9. Continue to develop Population Health focused Primary Care working with our Primary Care Clusters to systematise innovative and lead cluster prevention activities in our region, to enable scaling from hyper-local to population level strategic actions with measurable impact.
10. Ensure that equitable access to preventative services is integrated across Health Board treatment pathways, and that Public Health outcomes are measured throughout our health services.
11. Working as partners on Public Services Boards and the Regional Partnership Board, ensure that the upcoming Wellbeing and Population Needs Assessments take a systemic approach to prevention and health equity by agreeing common priorities for health and wellbeing improvement across every level of prevention, with attention paid to population groups who experience the worst health and wellbeing outcomes.
12. With Public Services Boards, and through the Regional Joint Committee with Hywel Dda Health Board, build on the progress achieved on the Whole Systems Approach to healthy weight by developing a collaborative approach to efforts to improve public food procurement.

### Looking Forward

The report highlights the need for sustained investment in prevention, stronger system-wide collaboration and a continued focus on reducing inequities in health outcomes. Strategic investment in prevention has the potential to yield measurable returns: reduced hospital admissions, improved workforce productivity, and creating healthier communities for the long term. We also need to prepare prevention strategies for new and emerging issues that will impact health in our region arising for instance from climate change, novel treatment options, and the evolving population health needs in our younger and older generations.



**The Public Health Team will continue to lead efforts to:**

- Protect the population from infectious diseases.
- Strengthen illness prevention across the life course.
- Improve early detection of major health conditions.
- Ensure equitable access to services, particularly for underserved groups.
- Create healthier, sustainable and resilient communities.
- Embed population health principles across all Health Board decisions and strategies.
- Develop indicators to measure and monitor impacts of prevention strategies on population health.





## Further information and support on the topics in this report

### Chapter 1: Safe

#### Sexual Health

##### [Sexual Health Wales](#)

This is the NHS Wales's Test and Post service, providing quick and easy access to self-testing sampling kits for sexually-transmitted infections.

##### [Sexual Health Services – Swansea Bay University Health Board](#)

Swansea Bay Sexual Health Service. Offering a comprehensive, confidential service. Access is via online self-referral or call: 0300 5550279

#### Surveillance

##### [Surveillance of Vaccines, Vaccine Preventable Diseases and Respiratory Infections-](#)

### Chapter 2: Strong

##### [Public Health Wales](#)

Public Health Wales work to protect and improve health and wellbeing and reduce health inequalities for the people of Wales.

#### Weight Management

##### [Healthy Weight Healthy You](#)

Healthy Weight Healthy You contains individualised advice to help people with their weight management journey

##### [Foodwise in Pregnancy Resources](#)

Nutrition Skills for life resources including app and videos

Self-referral into Weight management services in SBUHB ([English](#) & [Cymraeg](#))

#### Smoking cessation

##### [Help me Quit](#)

Help Me Quit is the National NHS stop smoking brand for Wales, providing free, evidence-based support to help individuals quit smoking for good.

- Help Me Quit vaping advice [How to quit vaping - Help Me Quit](#)
- Swansea Bay Help Me Quit [Help Me Quit - support to stop smoking - Swansea Bay University Health Board](#)
- Help Me Quit for Baby/Maternity [New team helping mums quit smoking - Swansea Bay University Health Board](#)

#### Inclusion health

##### [Diverse Communities Outreach Programme](#)

The programme supports diverse communities to tackle the wider range of access to healthcare issues and improving how services can be provided more effectively for these communities

##### [Housing First Swansea](#)

Housing First Swansea provides housing support for people 18 and over experiencing homelessness or rough sleeping.

#### Screening

##### [Public Health Wales screening](#)

Public Health Wales delivers the following population based national screening programmes across Wales



## Chapter 3 Supported

### [NHS 111 Wales - Health A-Z : Mental Health and Wellbeing](#)

For urgent mental health support call NHS 111 and press OPTION 2. The service is available for people of all ages, 24 hours a day, 7 days a week in all areas of Wales to ensure those in need of support can access it quickly when they need it most.

### [TidyMinds](#)

TidyMinds is available for children and young people in Swansea or Neath Port Talbot to help them understand the way they're feeling and find the right advice and support for mental health and wellbeing. Information, resources, and support is also available for parents or carers and professionals.

### [Sorted Supported](#)

Sorted Supported is available for adults living in Swansea or Neath Port Talbot to help them understand the way they are feeling and find the right advice and support for mental health and wellbeing. Information, resources, and support is also available for professionals.

### [Welsh Network of Healthy School Schemes - Public Health Wales](#)

National scheme supporting schools & pre-schools to actively promote, protect and embed the physical, mental and social health and wellbeing of its community through positive action.

### [SHRN dashboard and website](#)

The School Health Research Network (SHRN) is a policy-practice-research partnership between Welsh Government, Public Health Wales, and Cardiff University established in 2013. SHRN aims to improve young people's health and wellbeing in Wales by working with schools in both primary and secondary education to generate and use good quality evidence for health improvement.

### [Swansea Family Information Service](#)

The Family Information Service is a free impartial information and advice service for ALL parents / carers of children and young people aged between 0-20 and the professionals who work with them.

### [NPT Family Information Service](#)

The Family Information service offer a range of free information for families living in Neath Port Talbot, like schools and holiday activities, specialised help with childcare and help with finance.

### [Vaping - Public Health Wales](#)

Public Health Wales has produced helpful guidance on vaping to help parents, carers, teachers and others working with secondary-aged children in Wales.

### [Tata Steel Transition Information Hub - NPT Council](#)

Help and support for people and businesses across Wales affected by changes at Tata Steel UK.

### [NHS Eat Well](#)

The Eatwell Guide shows how much of what we eat overall should come from each food group to achieve a healthy, balanced diet.



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**Further Reading:**

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**Coming soon:** State of the Population report – a detailed analysis of our population’s health to inform the Clinical Services Strategic Plan.

Please visit our [Population Health](#) web page to access.



# Acknowledgements

## Editor in Chief

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Please visit our [Population Health](#) web page to access.

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