

1. North Wales: A Regional Profile

North Wales is divided into the six Unitary Authority areas of Ynys Môn, Gwynedd, Conwy, Denbighshire, Flintshire and Wrexham.

1.1. Population.

North Wales has a total resident population of 670,800 (2004 mid-year estimate) which is largely concentrated in the more industrial and urban areas of the North East and along the North Wales coast. Less than a quarter (22.83%) of the total population of Wales resides in North Wales.

Table 1. Resident Population of North Wales by Unitary Authority Area

	All People	Males	Females
North Wales	670,800	325,200	345,600
Conwy	110,900	53,000	57,900
Denbighshire	94,000	45,500	49,400
Flintshire	150,100	73,600	76,500
Gwynedd	117,500	56,700	60,800
Wrexham	129,700	63,500	66,200
Ynys Môn	68,400	33,200	35,200

(2004 mid-year estimates)

The county of Flintshire has the largest resident population at 150,100 whilst Ynys Môn, has the smallest resident population at 68,400.

Over half of the population of North Wales is female (51.52%) and less than half male (48.48%). Women also outnumber men in each of the six Unitary Authority areas.

Population projections suggest that the resident population of North Wales will gradually increase by 3.6% over the next two decades, rising to 695,000 by the year 2023 (National Assembly for Wales, 2005). All local authority areas with the exception of Ynys Môn will experience population growth. Conwy, Wrexham and Denbighshire are predicted to experience the largest growth (North Wales Population and Housing Group, 2005).

Population density varies considerably across the region. Wrexham and Flintshire are the most densely populated areas with 341 people per km² and 257 people per km² respectively. Denbighshire (113 people / km²), Conwy (98 people / km²) and Ynys Môn (95 people / km²) are more sparsely distributed (ONS, 2005) whilst Gwynedd has the most sparsely distributed population in North Wales, with a population density of 46 people per km².

The population of North Wales is scattered between large concentrations of people in and around the region's key urban centres, coastal resorts and rural market towns and smaller concentrations in and around rural villages, hamlets and settlements.

1.2 Age Structure

During recent years, the North Wales population has become older, with 18.55% of the current resident population aged 65 and over. This is slightly higher than the Welsh average of 17.5%.

Compared to Wales as a whole, North Wales also has a lower proportion of people aged 16 and under, and people of working age (16 - 65 years old), at 19.20% and 62.25% respectively.

Table 2. Age Structure of North Wales by Local Authority Area

	0-4	5-15	16-24	25-44	45-65	65-74	75+
Conwy	5,400	13,300	11,400	26,000	29,100	12,900	12,900
Denbighshire	5,000	11,900	10,300	23,300	25,000	9,500	9,700
Flintshire	8,400	19,400	17,500	42,100	39,000	12,600	10,300
Gwynedd	6,500	14,500	15,200	28,200	30,400	11,700	10,900
Wrexham	7,300	16,200	16,500	35,600	33,300	10,800	10,000
Ynys Môn	3,600	8,500	7,700	16,400	19,200	7,000	6,200
N Wales	36,200	92,600	69,800	171,900	175,900	64,500	59,900

(2003 mid-year estimate)

Of all the six Unitary Authority areas, Conwy has the lowest proportion of people aged 16 and under (17%), the lowest proportion of people of working age (60%) and the highest proportion of people aged 65 and over (23%).

Flintshire, on the other hand, has the highest proportion of people aged 16 and under (18.62%), the highest proportion of people of working age (66%) and the lowest proportion of people aged 65 and over (15.34%).

Population projections suggest that North Wales will experience a significant decrease in the number of people aged between 0 - 44 over the next twenty years, whilst the number of people aged 45 and over will increase significantly. The number of people aged between 65 and 74 will increase by 35.5% to 87,400 and the number of people aged 75 will increase by 51.3% to 90,600, particularly in the Unitary Authority areas of Conwy, Denbighshire, Gwynedd and Ynys Môn (National Assembly for Wales, 2005).

1.3 Households

According to the 2001 Census, of the 1.2 million households in Wales, 279,312 are in North Wales. The average household size in North Wales is 2.33.

Flintshire has the highest average household size at 2.44 and Denbighshire has the lowest at 2.29.

Table 3. Household Composition in North Wales by Unitary Authority Area (2001)

	Conwy	Denbighshire	Flintshire	Gwynedd	Wrexham	Ynys Môn	N Wales
Total households	48,062	39,892	60,539	49,237	53,226	28,356	279,312
I Person H/holds	15,739	12,866	16,068	15,897	15,227	8,289	84,086
Married Couple H/holds	16,075	13,849	25,547	16,876	20,966	10,589	103,902
Co-habiting Couple H/holds	3,444	3,069	5,027	3,778	4,692	1,979	21,989
Lone parent H/holds	4,252	3,836	5,860	4,838	5,171	2,998	26,955
All other H/holds	8,552	6,272	8,037	7,848	7,170	4,501	42,380

(2001 Census, ONS)

Conwy has the highest proportion of one person households in North Wales at 32.7% (which is significantly higher than the North Wales average of 29.1%), and the highest proportion of all other households at 17.8% (again which is higher than North Wales average of 15.6%).

Flintshire has the lowest proportion of one person households at 26.5% and the highest proportion of married couple households at 42.2% (which is higher than the North Wales average of 37.2%).

Wrexham has the highest proportion of cohabiting couple households at 8.8% (which is higher than the North Wales average of 7.5%) and Ynys Mon has the highest proportion of lone parent households at 10.6% (which is slightly lower than the North Wales average of 10.7%).

1.4 The BME population of North Wales.

The total BME population of north Wales is 6,697 (1%). This represents an increase of 60% since 1991 when the BME population was 4,178. Gwynedd and Denbighshire have marginally the largest proportionate BME populations. In raw figures, Gwynedd and Wrexham have the greatest number of BMEs, probably reflecting student groups at University of Wales, Bangor and North East West Institute (NEWI) and workers in major Health Trusts.

Table 4. Population by Ethnic Groups in by Unitary Authority Area

	All People	Non-White	%	Mixed	Asian	Black	Chinese
Conwy	110,900	1,157	1.05	427	329	92	309
Denbighshire	94,000	1,073	1.15	431	300	108	234
Flintshire	150,100	1,194	0.8	526	271	97	300
Gwynedd	117,500	1,389	1.18	482	434	120	353
Wrexham	129,700	1,403	1.09	452	457	131	363
Ynys Môn	68,400	481	0.7	187	94	48	152
Totals	670,800	6,697	1.0	2505	1885	596	1711

Source: National Statistics website: www.statistics.gov.uk

The largest ethnic groups by census category are those identified as 'Mixed' (mixed-Asian, mixed-African and mixed-Caribbean). Taken together the Mixed categories form almost 40% of the total BME population of north Wales (2505 individuals). This is a significant group in the area and may be taken as a key indicator of settlement and intermarriage.

The next largest single category is Chinese (and Other Ethnic Chinese), who make up 25% of the total north Wales BME population (1711).

Taken together, all Asian groups (Indian, Pakistani and Bangladeshi and Other Asian) make up 28% of the BME population (1885) but this brings together a range of diverse national groups.

The smallest grouping is Black or Black British (596 people) who make up approximately 9% of the BME population.

By ethnicity, Chinese women form the largest single group, followed by Indian women. Amongst men, Chinese men form the largest single group, followed by Indian males.

There has been no significant en bloc in-migration of visible BME groups to north Wales and consequently there are few significant clusters of particular minority groups. Settlement patterns are based on employment opportunities, family connections and centres of learning. The NWREP study found that the majority of respondents had been living in north Wales for some time¹. 31% of their sample had lived in the area for more than 20 years and a further 26.5% of their sample had lived in the area for more than 10 years. The more recent arrivals (less than 3 years) formed 19% many of whom were students or NHS staff on short-term contracts.

1.5 Gender.

There is an even gender split in the total female (3416) and total male (3280) populations across north Wales. There are no significant variations by local authority. Men form 6% of the total male population of north Wales and similarly women form 6% of the total female population of the area.

Table 5. BMEs in North Wales by Gender and Local Authority

Authority	All males	BME males	All females	BME females
Conwy	52,161	565	57,435	592
Denbighshire	44,544	527	48,521	546
Flintshire	72,894	591	75,700	603
Gwynedd	56,029	673	60,814	716
Wrexham	62,722	687	65,754	716
Ynys Môn	32,348	237	34,480	243
North Wales	320,698	3,280	342,704	3,416

Source: National Statistics website: www.statistics.gov.uk

¹ NWREP (2004) The Housing and Related Experience of BME Communities in North Wales. www.nwrep.co.uk

The BME population of north Wales is relatively young and economically active.

At the 2001 census, there were 627 BME women aged over 50 in North Wales.

There were 2,138 women of working age and 1,423 economically active 16-74 year old women.

Statistically there is no evidence to suggest high numbers of older dependent individuals. All those over sixty make up 9.3% (625 people) of the total BME population of North Wales.

1.6 The migrant worker population of North Wales

The current wave of immigration from EU member states is unlike any other mass immigration wave experienced by the UK in several unique ways, not least of course in terms of absolute numbers of migrants and where they settle. For the first time in history, rural areas of the UK and Wales are witnessing unprecedented levels of immigration. This has both positive and negative implications.

A picture of the migrant worker population within North Wales is now slowly emerging from a number of small scale research projects that have been undertaken in the last 2 years². These indicate that since 2004, the vast majority of migrant workers in North Wales are from the A8³ countries and the majority are Polish.

The Wales Rural Observatory has estimated that almost 5000 migrant workers from the A8 registered on the WRS between May 2004 and March 2006⁴. Of these:

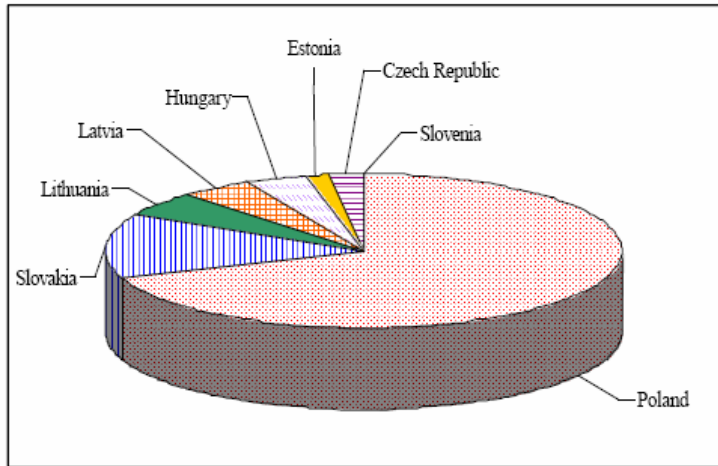
- *63% are men and 37% women.*
- *The majority (97%) have no dependents.*
- *Over two thirds are from Poland, 14% are Slovakian and 5% from Lithuania.*

² See for example, NWREN (2005) Workers from outside the UK in the Conwy Local Authority Area. Report of the Findings of the 'Reaching Higher Reaching Wider' BME Study, North Wales Social Inclusion Research Unit (SIRU) New. 2006., Hold et al (2006) Flintshire Migrant worker Project.

³ The A8 countries are Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia, Slovenia.

⁴ Wales Rural Observatory (2006) Scoping Study on Eastern and Central European workers in Rural Wales

Figure 4 Nationality of A8 migrant workers in rural Wales (source: WRS)



Quantifying the numbers of migrant workers is notoriously difficult and currently relies on Worker Registrations and/or data on National Insurance Registrations (NINOs). Both methods are problematic and cannot provide a demographic profile. Consequently, it has been suggested that these numbers may be underestimated by between five and ten times (Wales Rural Observatory, 2007).

Whilst early studies on migrant workers in North Wales (NWREN 2005) indicated that more than half were only intending to stay in the area temporarily, the most recent research (Hold et al, 2007) suggests that a growing number are now planning to settle permanently.

1.7 Deprivation

According to the Welsh Index of Multiple Deprivation (2000), there are wide variations in deprivation across North Wales.

Table 6. Deprivation Levels by Unitary Authority Area

	% of Electoral Divisions in the list of 20% highest deprivation scores in Wales	% of Electoral Divisions in the list of 40% highest deprivation scores in Wales	% of Electoral Divisions in the list of 60% highest deprivation scores in Wales	% of Electoral Divisions in the list of 80% highest deprivation scores in Wales
Conwy	0	25	43	88
Denbighshire	6	23	45	81
Flintshire	11	26	37	52
Gwynedd	14	43	81	94
Wrexham	14	29	57	76
Ynys Môn	28	53	78	93

(National Assembly for Wales, 2000)

Both Ynys Môn and Gwynedd have more than 40% of their electoral divisions among the 40% most deprived in the whole of Wales, thus suggesting that these Unitary Authority areas have higher than average levels of deprivation.

Conwy, Denbighshire and Flintshire, on the other hand, have less than 40% of their electoral divisions among the 40% most deprived in the whole of Wales, and therefore considerably lower than average levels of deprivation.

With the exception of Conwy, all remaining Unitary Authority areas have electoral divisions in the list of 100 most deprived electoral divisions in Wales (Ynys Môn and Gwynedd has six each, Wrexham has four, Denbighshire has two and Flintshire has one).

Denbighshire, Wrexham and Gwynedd have electoral divisions among the 20 most deprived in Wales, with Rhyl West (Denbighshire) being the most deprived area in Wales, followed by Plas Madoc (Wrexham) as the third most deprived, Peblig (Gwynedd) as the sixth most deprived and Marchog (Gwynedd) as the eighteenth most deprived. In Ynys Môn, the most deprived electoral division is Morawelon (40th most deprived in Wales) whilst the most deprived in Flintshire is Flint Castle (75th most deprived in Wales).

1.8 The BME population and Communities First areas of North Wales

There are a total of 26 designated Communities First areas, incorporating 13 wards that have been identified in the top 100 most deprived electoral divisions. All Communities First areas in North Wales are overseen by the Communities First and Social Inclusion Unit of the Welsh Assembly.

Numbers of BME individuals living in the Communities First areas are generally small, with the exception of Rhyl West, Rhyl South West and Higher Shotton. (Census 2001) Only 12% of the BME population of North Wales (799 people) live in Communities First areas.

Table 7. Percentage of BME people in Communities First areas in North Wales⁵

Local Authority	Communities First Area	BME % total population	
Conwy	Kinmel Bay	0.7%	
	Mostyn	1.4%	
	Tudno	0.7%	(Total 173)
Denbighshire	Rhyl South West	1.3%	
	Rhyl West	2.3%	(Total 181)
Flintshire	Bryn Gwalia Est	0.7%	
	Flint Castle	0.8%	
	Higher Shotton Est	1.9%	
	Holywell Neighbourhoods	1.4%	
	Rural North Flintshire Neighbourhoods	1%	(Total 190)
Gwynedd	Barmouth	1.1%	
	Bontnewydd & Rhiw	0.5%	
	Llyn Peninsula Rural Community	1.7%	
	Marchog	0.9%	
	Pebblig	0.9%	
	Pwllheli	1.2%	
	Talysarn	0.3%	(Total 132)
Ynys Môn	Amlwch Port	0.8%	
	Holyhead Town	0.9%	
	Maeshyfyrd	1%	
	Morawelon	0.5%	
	Porthyfelin	0.5%	
Wrexham	Tudur	0.2%	(Total 64)
	Gwenfro	1.2%	
	Plas Madoc	0.5%	
	Queensway	0.8%	
	Caia Park	1.6%	(Total 59)

Source: National Statistics website: www.statistics.gov.uk

It should be noted that these figures for BMEs do not include the category 'White Other' which would reflect the presence of recent EU migrant workers.

In many instances, minority groups in a Communities First area are associated with the restaurant trade or small family business.

1.9 Educational Establishments.

There are two Higher Education institutions in North Wales, University of Wales, Bangor in Bangor and the North East Wales Institute of Higher Education in Wrexham. In 2002/3, the University of Wales, Bangor had a total student population of 8,879 and the North East Wales Institute had a total student population of 6,117 (HEFCW, 2003).

There are 6 colleges of Further Education in North Wales that during the academic year of 2002/3 had a combined population of almost 70,000. A further 8,000 students attended Coleg Meirion- Dwyfor and Coleg Harlech. Coleg Llandrillo in Conwy is by far the largest Further Education provider in North Wales with 22,000 students.

⁵ Communities First areas do not necessarily correspond to ward boundaries

Deeside College in Flintshire is the second largest provider in the region with a population of around 15,000 students and only marginally more than Yale College in Wrexham with 14,000 students (ELWa, 2004).

There are 496 schools in North Wales, 85% of which are primary schools.

Table 8. Number of Schools in North Wales by Unitary Authority Area (2003/04)

	Conwy	Denbighshire	Flintshire	Gwynedd	Wrexham	Ynys Môn	N Wales
Primary Schools	63	52	75	106	72	52	420
Secondary Schools	7	8	12	14	9	5	55
Special Schools	1	2	3	3	1	1	11
Pupil Referral Units	4	1	1	1	2	1	10

(National Assembly for Wales, 2005)

Gwynedd has the largest number of primary and secondary schools, with 106 and 14 respectively whilst Ynys Môn has the lowest number of primary and secondary schools, with 52 and 5 respectively.

1.10 Educational qualifications.

In terms of qualifications, the BME population of North Wales is overall more qualified than their white counterparts.

Of the BME population

- 1246 (28%) have no qualifications or the level is unknown
- 1605 (36%) have lower level qualifications
- 1600 (36%) have higher level qualifications

Of the White population

- 181,022 (40%) have no qualifications or the level is not known
- 209,250 (45%) have lower level qualifications
- 75,037 (16%) have higher level qualification

1.11 The Economy of North Wales.

Around 59.3% of the North Wales population is of working age. This is slightly lower than the Welsh average of 59.6%.

North Wales has a higher proportion of economically active people at 76.9% compared to the Welsh average of 74.2% and a higher proportion of people in employment at 74.7% compared to the Welsh average of 70.5%.

North Wales also has a lower proportion of unemployment at 3.27% compared to the Welsh average of 5.1%.

Table 9. Economic Activity in North Wales by Local Authority, 2003.

	Economically active	In Employment	Employees	Self Employed	Unemployed
Conwy	46,000	44,000	37,000	7,000	2,000
Denbighshire	42,000	41,000	35,000	6,000	2,000
Flintshire	75,000	73,000	64,000	8,000	2,000
Gwynedd	53,000	51,000	41,000	9,000	2,000
Wrexham	61,000	60,000	53,000	7,000	1,000
Ynys Môn	29,000	28,000	24,000	4,000	1,000
N Wales	306,000	297,000	254,000	41,000	10,000

(ONS 2005)

However, rates of economic activity amongst the population vary considerably across the region.

Flintshire has the highest proportion of economically active people (80.7%), people in employment (78.3%) and employees (69.3%) whilst Ynys Môn has the lowest proportion of economically active people (74.3%) and people in employment (70.8%). Ynys Môn also has the highest proportion of unemployment at 4.7% whilst Wrexham has the lowest proportion of unemployment at 2.3%.

Gwynedd has the highest proportion of self-employment at 12.7% and subsequently the lowest proportion of employees at 59.9%.

22.9% of the people of working age in North Wales are economically inactive (people who are neither in employment nor unemployed, such as people who look after a home or who have retired). Again, rates of economic inactivity vary considerably across the region. Ynys Môn has the highest proportion of economically inactive people at 25.7% (followed by Conwy with 25.1%) whilst Flintshire has the lowest proportion of economically inactive people at 19.3% (followed by Denbighshire at 21.9%).

The structure of the North Wales economy has changed considerably over the last 20 - 30 years following the decline of traditional industries and manufacturing. The region is heavily dependant upon the services industry with 74.7% of all employee jobs in North Wales in this sector, followed by manufacturing at 19.6% and tourism at 10.2%.

Table 10. Employment by sector, North Wales Local Authority areas.

	Conwy	Denbighshire	Flintshire	Gwynedd	Wrexham	Ynys Môn	N Wales
Manufacturing	2,001	4,456	20,454	4,670	12,498	3,434	47,513
Construction	1,440	2,057	3,127	1,535	1,852	819	10,830
Services	31,969	27,014	35,317	38,900	33,786	14,188	181,174
Distribution, Hotels and Restaurants	13,043	7,931	13,014	12,905	11,537	5,071	63,501
Transport and Communications	1,290	1,560	2,727	1,314	1,859	975	9,725
Finance, IT and other Business Activities	3,541	2,291	5,194	3,532	3,910	2,004	20,472
Public Admin, Health and Education	12,290	13,596	11,971	17,788	14,118	5,302	75,065
Other Services	1,805	1,636	2,411	3,361	2,362	837	12,442
Tourism Related	5,595	3,628	4,762	5,645	3,391	1,864	24,885

(Annual Business Enquiry Employee Analysis, 2003)

Manufacturing in North Wales is concentrated largely in the North East with 34.4% of all employee jobs in Flintshire and 25.5% of all employee jobs in Wrexham in manufacturing. In the North West, the services industry predominates, with 89.9% of all employee jobs in Gwynedd, 89.7% of all employee jobs in Conwy, 80.1% of all employee jobs in Denbighshire and 74.8% of all employee jobs in Anglesey all in the services sector.

Within the services industry, local government (public administration, health and education) and distribution, hotels and restaurants are the largest employers. These Unitary Authority areas are also dependant on tourism-related jobs, especially Conwy with 15.7% of all employee jobs in the area within the tourism sector.

1.12 Health

The health of the North Wales population may be considered good with less than a quarter of the population (21%) with a limiting long-term illness or disability. This is slightly lower than the Welsh average of 23%.

10.64% of the resident population rated their general health as not good, compared to the Welsh average of 12.45%.

Table 11. Health of the North Wales Population by Unitary Authority Area

	Conwy	Denbighshire	Flintshire	Gwynedd	Wrexham	Ynys Môn	N Wales
Limiting long term illness	25,743	21,751	28,524	24,122	27,567	14,958	142,665
General health 'not good'	12,668	10,739	14,520	11,152	14,455	7,035	70,569

(2001 Census, ONS)

Conwy has the highest proportion of people with a limiting long-term illness or disability at 23.49% (followed by Denbighshire at 23.37%) and the highest proportion of people that rated their health as not good at 11.56% (followed by Denbighshire at 11.54%).

Flintshire has the lowest proportion of people with a limiting long-term illness or disability at 19.20% (followed by Gwynedd at 20.64%) and Gwynedd has the lowest proportion of people that rated their health as not good at 9.54% (followed by Flintshire at 9.77%).

1.13 Health and the migrant worker population of north Wales

Issues relating to the delivery of health services to migrant workers are similar to those faced by other BME groups. Communicating with patients with little knowledge of English causes problems.

Health professionals in Flintshire have reported difficulties in treating patients because they are not aware of their previous ailments, treatment records or immunisation history.

Hold et al (2006) noted that whilst three quarters of respondents in their Flintshire sample knew how to access healthcare, less than half were registered with a GP. In part this reflects the young and therefore relatively healthy profile of migrant workers. Two other trends were also noted: the use of hospital A&E provision as primary care and the procurement of medicines via friends and relatives from their country of origin.

None of the respondents was registered with a dentist in the UK. Again, this reflects the relatively healthy profile of our sample, together with the added difficulty faced by all people living in Wales in finding an NHS dentist and the high cost of private treatment. A number of respondents reported returning to their home country whenever dental treatment became necessary.

1.14 Health and Care Services.

North Wales has a total of 123 GP Practices, most of which are in Flintshire and Wrexham. Ynys Môn has the least amount of GP Practices.

Table 12. GP Practices in North Wales by Unitary Authority Area (2004)

	Conwy	Denbighshire	Flintshire	Gwynedd	Wrexham	Ynys Môn	N Wales
GP Practices	19	16	26	27	24	11	123

(National Assembly for Wales, 2005)

There are 42 hospitals in North Wales. Three of these. Ysbyty Gwynedd (Bangor), Ysbyty Glan Clwyd (Bodelwyddan) and Ysbyty Maelor (Wrexham) are major acute hospitals, and a further two Ysbyty Llandudno and Ysbyty Abergele are acute hospitals.

Table 13. Hospitals in North Wales by NHS Trusts (2004)

Hospitals	Conwy Denbighshire & NHS Trust	North West Wales NHS Trust	North East Wales NHS Trust	North Wales
Hospitals Major - acute	1	1	1	3
Hospitals Acute	1	1	0	2
Hospitals Community	7	7	5	19
Hospitals Community Geriatric	1	2	4	7
Hospitals Psychiatric (Mental illness)	4	5	1	10
Hospitals Psychiatric (Learning disability)	0	0	0	0
Hospitals Specialist Acute	1	0	0	1

(National Assembly for Wales, 2005)

North Wales has an average of 3,140 beds available on a daily basis, of which 1,891 are dedicated for acute services (the average daily beds is the average number of staffed beds available daily during the year including beds set up temporarily and beds borrowed from other specialties but excluding beds loaned to other specialties).

Table 14. Average Daily Beds in North Wales by NHS Trust (2003/04)

Hospitals	Conwy Denbighshire & NHS Trust	North West Wales NHS Trust	North East Wales NHS Trust	North Wales
Acute	663	666	562	1,891
Maternity	44	42	44	1130
Geriatric	158	200	272	630
Non-Psychiatric	865	907	879	2,651
Psychiatric	139	268	82	489
All beds	1,004	1,175	961	3,140

(National Assembly for Wales, 2005)

1. 15 Local Authority Health Profiles ⁶

Conwy

Conwy has a general profile of health that is better than the average for Wales. Conwy is a tourist destination that alters its character during the summer months. There is a higher percentage of people aged 65 and over than any other part of Wales.

Positives for health:

- Conwy has a significantly better rate of people who have 5 GCSEs or equivalent than the Wales average. In this community there is less alcohol consumption than for Wales which may impact on the rate of deaths from heart disease.

Challenges for the community:

- Unemployment is an issue for this community as it has one of the worst rates in Wales. In addition, this area has the highest rate of death from Suicide in Wales, although this translates into small numbers.

Denbighshire

Denbighshire has a general profile of health that is better than the average for Wales. However, some areas of Denbighshire, especially around Rhyl are amongst the most deprived places in Wales. There is also a growing elderly population that will create a demand on healthcare provision in coming years.

Positives for health:

- Denbighshire has a significantly better rate of people who have 5 GCSEs or equivalent than the Wales average. In addition there is less alcohol consumption than for Wales which may impact on the rate of deaths from heart disease.

Challenges for the community:

- Areas of concern for this community include deaths from suicide and Road Traffic Accidents.

Flintshire

Flintshire has a general profile of health that is better than the average for Wales with three indicators significantly better than the Wales average. Flintshire has a majority of its small areas in the least deprived quartile. There is, as with similar communities in North Wales, a growing elderly population that will impact on the future demand for health services.

Positives for health:

- Flintshire has a significantly better rate of people who have 5 GCSEs or equivalent than the Wales average. In addition, the rate of unemployment is significantly less than the average. Death rates from Cancers in people under the age of 75, are also significantly lower than Wales as a whole.

⁶ Taken from the website: www.wales.nhs.uk/sites3/page.cfm?orgId=568&pid=19194

Challenges for the community:

- The rate of deaths from Road Traffic Accidents in Flintshire is greater than the average for Wales.

Gwynedd

Gwynedd has a profile of health that is generally better than the rest of Wales. There are two indicators at the summary level that show challenges for the community. As a county, Gwynedd has issues with its rural nature which makes access to services difficult. There is, as with other places in Wales, a growing elderly population.

Positives for health:

- People in Gwynedd have the highest score for overall mental health well-being in Wales. In addition, qualifications, deaths from all causes and premature deaths from heart disease are significantly better than the average for Wales.

Challenges for the community:

- The smoking rate, as with the Isle of Ynys Môn, is one of the highest in Wales. There are also challenges relating to unemployment and deprivation in this community. The influence of rurality and access to services will increasingly be an issue.

Wrexham

Wrexham has a general profile of health largely similar to the average for Wales. The majority of small areas in Wrexham are less deprived than the average for Wales. However, there are some pockets of relative deprivation. There is a growing older population that will impact on the demand for health services in the future.

Positives for health:

- Education and Unemployment, key determinants of overall health, are significantly better than the average for Wales. Wrexham also has the lowest rate for Suicide in Wales.

Challenges for the community:

- Wrexham has an overall rate of obesity that is significantly higher than the rate for Wales. This may be contributing to the score for overall physical health, which is lower than the Wales score.
- The gap between the life expectancy rate of Wrexham and the best in Wales for men and women is wider than it was in 1991.

Ynys Môn

The Isle of Ynys Môn has a profile of health that is generally better than the rest of Wales. There are two indicators at the summary level that show challenges for the community. Ynys Môn has issues with its rural nature which makes access to services difficult. There is, as with other places in Wales, a growing elderly population.

Positives for health:

- People in the Isle of Ynys Môn show the lowest amount of premature deaths from heart disease in Wales. In addition rates of overall life expectancy, the mental health score, deaths from all causes and educational qualifications are better than the average for Wales.

Challenges for the community:

- The rates for smoking and unemployment are the highest in Wales. With a growing elderly population, many coming from outside of the local area, access to services will increasingly be an issue.

2. Regional Research Priorities

Information from a number of sources has been brought together and will ultimately inform a prioritised regional research strategy.

2.1 Existing research

Little research with the BME and minority communities of North Wales has been undertaken to date. There has been no specifically health and social care related research to our knowledge. The following represents a summary of those reports we know of.

Hold M., Korszon S., Kotchetkova E., Grzesiak, F. 'Flintshire Migrant Worker Project'. NWREN. Funded by Flintshire Community Safety Partnership. 2007.

This small scale study maps the new migrant worker community of Flintshire. From interviews with 73 migrant workers from a range of nationalities, it identifies information and advice support needs from the perspective of the migrant worker and makes recommendations accordingly.

'Reaching Higher Reaching Wider' BME Study, North Wales Social Inclusion Research Unit (SIRU) NEWI. 2006

The study aimed to create a database of information about BME communities which would serve to identify adult educational needs specific to individuals. It was anticipated that this database would be a useful information resource for identifying and targeting a wide range of BME community interventions, and would also serve as an evidence base to substantiate future funding applications. The study involved two questionnaire surveys exploring the experiences and educational/training needs of members of BME communities in the Wrexham and Flintshire areas of North Wales. The anticipated number of respondents was approximately 1000 individuals across Flintshire and Wrexham. In total, 80 completed questionnaires were returned. The majority of these were completed by students on ESOL courses. Nevertheless it provides a useful insight into the lives of migrant workers and BME groups living around Caia Park in Wrexham and their support needs.

Health and Care Consultation with the Chinese Women's Society. A Report by Black Environment Network (BEN) for Gwynedd County Council. 2006.

The Health and Care Consultation took place in January 2006. It was a unique joint initiative looking into health and care issues within the older Chinese community in Gwynedd. The Health and Care Consultation was a joint venture between Gwynedd Council, Cynnwys Project, Black Environment Network / GWLAD Project and the North Wales Chinese Women's Society. It notes that Chinese women in North Wales need:

A Chinese people's centre or meeting place, where health education, organisation of exercise and outdoor activities, and the co-ordination of ways of addressing health needs can be based.

M.O.T for Chinese over 50s (health checks that pay attention to all the things that happen to people as they get older, within particular attention to aspects that relate to Chinese people)

A professional interpreter service for accessing health services.

Other issues raised include the difficulty of accessing funding for the needs of the Chinese community in general and the consideration of the possible need for a Chinese nursing home. Concerns about availability of health services (such as eye tests) and the costs of living (such as heating) that are particularly important to older people were also highlighted. There is also interest in accessing health education so that people can better understand issues related to aging so they can take better care of themselves

Turunen S, Holmes M, Ralvik E, Trimm L, Tanveer T. 'Workers from outside the UK in the Conwy Local Authority Area. (2005) NWREN. Funded by Conwy Community Safety Partnership.

A mapping exercise of the migrant worker population of the County of Conwy in North Wales. Its report provides useful baseline information about the information and advice needs of the migrant community in rural areas of North Wales.

'Hidden Needs of Vulnerable Black and Minority Ethnic Women in North Wales' A report commissioned by Tai Hafan, BAWSO and MEWN Cymru. (2004).

This report identifies some of the particular support needs of women from BME communities, in particular those vulnerable to domestic violence. It identifies a range of factors that pose barriers for BME women in accessing support. It calls for a high profile, multi-agency approach to ensure a robust and uncompromising agenda for support and change in the future. Of particular interest to BEST is the finding that there is a need to assist support staff with little or no previous contact with BME communities to respond appropriately.

Williams C, Hold M, Turunen S, Jefferies J. 'North Wales BME Communities Research – The BEST Report'. 2004. NWREN and University of Wales Bangor.

BEST (Black and Ethnic Minority Support Team) funded research and mapping of BME distribution in Communities First areas of North Wales. The research, probably the most significant piece of research with BME communities in North Wales to date, was particularly interested in support structures, access to services and barriers to engagement by BME communities. The research recommended a more co-ordinated

approach to research and the sharing of outputs. Furthermore, it identified the lack of ICT support for BME communities, the lack of a central data source and network organisation as well as a lack of sustainable consultation mechanisms.

Williams C, et al. 'Bridging the Gap' University of Wales Bangor and University of Wales Glamorgan. (2004). Funded by MEWN Cymru.

This research looked at access to advice provision across a range of policy domains for BME individuals/communities in the North Wales area. It also sought to establish what support was needed by organisations in order to provide a more effective service. The report established a need to distinguish between 'established' BME communities and 'newly settled' minorities such as migrant workers and asylum seekers.

Black and Ethnic Minority Housing Strategy. Conwy County Borough Council. (2004).

In line with the Welsh Assembly Government requirement that all social landlords in Wales produce their own BME housing strategy by April 2004, the six counties of north Wales combined resources to produce this Regional Strategy. It sets out a regional framework with twelve key aims and objectives and identifies specific housing action plans for each of the authorities.

'The Housing Experience and Related Experience of Black and Minority Ethnic Communities in North Wales' North Wales Registered Social Landlord Equality Partnership (NWREP). (April 2004).

NWREP is a partnership between the housing associations in North Wales and NWREN. A detailed door-to-door survey of BME households was undertaken across North Wales between February and March 2004. The research team achieved a 13% sample, calling on 246 households containing 1000 individuals or 14% of the BME population of North Wales. Key findings suggest the North Wales BME population is very diverse and geographically scattered, relatively younger than the majority population, largely owner occupiers but with average household sizes larger than the norm for the area. Contrary to popular myths, many BME individuals have been in the area for a long time and are well integrated. Lack of awareness of housing provision and racial harassment issues were identified in this study.

'The Scope for Strategic Development of Ethnic Environmental Participation in North Wales.' Black Environment Network (BEN). (2004).

The research aimed to establish the scope for strategic development of BME environmental participation in north Wales. It considered existing organisational engagement with minority groups and reviewed organisational plans and developments in this area. It identifies critical training and information needs amongst major organisations. It recommends that a network or forum should be established to enable organisations to share information and good practice, to pool resources and provide mutual support, and act as a link for ethnic community representatives.

'The Effectiveness of the Criminal Justice System's Consultation Mechanisms with BME Communities'. NWREN. (June 2004).

This study was funded by the North Wales Probation Service and reviewed the difficulties within the Criminal Justice system's consultation processes with BME communities in north Wales. A development worker based at NWREN undertook the survey. The study identifies needs and gaps in service provision which include:

- *Lack of knowledge amongst BME communities*
- *Lack of confidence and capacity*
- *Unrealistic expectations*
- *Availability and timing of consultation events*
- *Limited methodologies being deployed*
- *Lack of co-ordination and communication between Criminal Justice agencies.*

'Is Anyone Listening? Action Research to Extend Entitlement and Empower Young People'. West Rhyl Young People's Project. Denbighshire Informal Education Team. West and South West Rhyl Community Strategy Partnership. (2003).

This report documents action research undertaken with young people in the Communities First areas of Rhyl West and Rhyl South-West. It raises issues of equality of opportunity and participation for young people in Communities First areas. Recommendations in the report include:

- *Developing educational provision to challenge discrimination, bigotry and violence.*
- *Providing better support services such as free childcare facilities for young parents.*
- *Addressing institutionalised discrimination and allegations of racism by the police.*

2.2 Research Priorities for North Wales identified by WEDHS Stakeholder group meetings.

Two WEDHS stakeholder group meetings have been held since April 2005. The following list of research needs (in no order of priority) emerged from those meetings. The list was subsequently sent out to a wider group of interested parties (via NWREN membership database) for comment and refinement.

1. Language needs. It was noted that Language Line is adequate for some purposes, but not for all. There is a need to look at how the public sector can work together to provide an improved service for translation and communication.
2. The impact of cultural expectations in meeting the social and health care needs of BMEs. The example was given of Social Services payments for home care not being made available to family members yet in some BME communities it may be that care can only be provided by family members.
3. The dynamics of in and out migration mean that communities are constantly changing. This impacts in a number of ways but particularly in the way that health and social care services are delivered in rural areas. More research needs to be done with new economic migrants from Eastern Europe whose needs are perceived to be completely different to other BME groups.
4. Consequently, there is a need to develop new systems of joined-up service delivery and partnership working. Some services such as schools for example are considered to be compartmentalised. There needs to be integration between different needs.
5. Providing support and information for organisations. 'Making research count'. How is research disseminated to organisations and how do they find out about it?
6. There is a need to develop alternative and effective consultation mechanisms with BME communities. A general point was made about consultation overload. It was reported that Denbighshire NHS and County Council are now undertaking consultation with BMEs together, which is a very interesting development.
7. Within public sector organisations there is a need for training in diversity and equality to meet new career path development. There is a need for base-line training in cultural competency. This also applies to BME individuals working within organisations who may be providing a poor service for the same reason.
8. Not enough is known about newly arrived the needs of migrant workers working in health and social care settings such as the NHS and residential care.

2.3 Current North Wales BME focussed research with WEDHS participation.

i. 'Building Inclusive Rural Communities'

DEVELOPING EFFECTIVE ENGAGEMENT MODELS WITH BLACK AND ETHNIC MINORITY GROUPS IN RURAL AREAS

Background

This research project has been designed in partnership with a voluntary agency based in North Wales. It arises from a number of scoping exercises done with key stakeholders in the area to identify research priorities as they voiced by minority groups in rural areas and those working with them. The level of engagement between mainstream agencies and BME individuals/households is reportedly poor. A major barrier to consultation is the geographical dispersal of BMEs in such areas and their lack of visibility. Little evidence exists about how BME individuals and households in rural areas engage in civil association and participate in consultation and decision making within public services.

Objectives of the Study

This action research project seeks to enhance the engagement between public bodies, such as health trusts, social services and the police and BME households. Through an understanding of practices in use by public bodies and through developing an understanding of the preparedness and capacity of BMEs to associate in dialogue over their health and wellbeing needs, this research aims to *build inclusiveness in rural communities*.

The research has four main objectives, namely:

- To investigate and evaluate techniques of engagement with minority ethnic households in rural areas who are 'hard to reach' or marginal.
- To develop an understanding of 'quality of life' factors that encourage the attraction and retention of minority ethnic groups in rural areas
- To assess their ability to influence policy, planning and service delivery
- To develop, pilot and evaluate appropriate models of consultation

Researchers: Charlotte Williams (Keele University), Malcolm Hold (NWREN), Tue Baker Hong (NWREN).

Funder: Carnegie UK Trust with the BIG Lottery Fund: The Rural Action Research Programme

ii. Assessing the Extent and Nature of 'Cultural Competency' Training within Social Work Training in Wales

This twelve month project will be undertaken in the second phase of the WEHDS funding period. It aims to explore the nature and extent of training on issues of race,

ethnicity and cultural diversity on the eight social work undergraduate programmes in Wales.

Specifically the project will:

- Review the Degree validation documentation of each of the programmes against the stated aims of the National Occupational Standards for social work training in terms of references to the delivery of training in race, ethnicity and diversity.
- Review the interpretation of these requirements within the curriculum documentation for each of the programmes
- Seek the views of key stakeholders (to include programme leaders, module providers, practice teachers and programme partnership managers) involved in the design and delivery of social work training programmes in Wales.
- Make recommendations/guidelines for the development of a framework for teaching and learning on issues of cultural diversity/anti-racism within social work education in order to enhance the competency of social work practitioners.

Researchers: Charlotte Williams (Keele University), Malcolm Hold (NWREN).

Funder: WEDHS and further funding yet to be identified.

3. Synergy with WEDHS Current Business Plan

To be discussed with Charlotte

4. Overview of BME patient, service-user and community group involvement and participation agenda.

WEDHS North Wales partner organisation is the North Wales Race Equality Network (NWREN). This membership organisation represents the interests of a wide number of BME and minority groups in North Wales. These include:

The Filipino Society
Chinese Women's Society
Chinese School
Bangladeshi Community Association
Islamic Cultural Centre
SHEKINA
BAWSO

A number of BME individuals from a wide range of ethnic backgrounds.

Whilst specific mechanisms are in an infant stage it is anticipated that all these groups and individuals will participate by proxy and their views will be fully represented.

4.1 Links with NHS Trusts, Voluntary Sector, Local Health Boards and Local Authorities

NWREN is supported by a range of statutory agencies including Local Authorities, NHS Trusts, the Fire and Ambulance Services and the North Wales Police and the widest range of Voluntary Organisations and groups across the area. These organisations each have BME and minority group consultation processes which feed into NWREN.

All six local authorities and all NHS Trusts in North Wales have participated in stakeholder group meetings, and all are represented at some level within WEDHS membership. It is anticipated that membership from this sector will grow as the benefits become more tangible.

Three local authorities have confirmed their participation in the rural research project which will explore a range of mechanisms for consulting with BME and hard to reach groups in rural areas.

4.2 Overview of proposed regional promotion and awareness raising events, workshops and meetings.

To be discussed with Charlotte

4.3 Taking things forwards

To be discussed with Charlotte