

Welsh Government

Full Responses to Consultation

## Proposed indicators for the Welsh Index of Multiple Deprivation 2019

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Mae'r ddogfen yma hefyd ar gael yn Gymraeg.

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## 1. Anonymous

### Overview

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

Priority should be placed on income. While the other factors are clearly of use; poverty by definition refers to the lack of access to sufficient currency to enable a standard quality of life.

### Income Domain

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

By only factoring in 2016-17 data you are ignoring the consequences of Universal Credit being rolled out. This is not helpful. One can measure the consequences of the disastrous roll out of Universal Credit by comparing current rates of poverty alongside historical data - if there is an increase of poverty rates in areas where it has been rolled out then there is a clear causal link. More political capital should be made from this.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

YES. All our data should be comparable with England. Wales is not recognised by the UN as a country - the United Kingdom is. Therefore all our data should be captured in the same way within the territory of the United Kingdom, to allow us to more effectively target areas of need.

By making our data collection different it would only appear that we are trying to hide negative results.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

Yes. See above re: Universal Credit. You need to include current data on those areas where Universal Credit has been rolled out. Otherwise you are hiding the effect of Universal Credit, and are not placing justifiable scrutiny on a policy measure responsible for increasing levels of poverty and suicides.

## **Employment Domain**

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

YES. As before - ALL our measures should be aligned with England, as we are part of the same internationally-recognised country, the United Kingdom. There are clear reasons to align ie. justifiable targeting of improvement measures. There is no reason to differ other than to hide negative data.

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

I think this makes sense. Poverty may not be a factor in birth weight (premature birth, late birth etc. may all play a part) but it certainly factors in to weight by 5 years old.

My only concern is that you may then miss out on collecting useful data on those in poverty under 5. Will these children be picked up by other measures, or omitted from the system? Will there be negative consequences ie. failure to identify could lead to tragedy in certain situations.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **1**

A measure of mental health - **2**

There is way too much focus on weight in our society. There are genetic reasons why this may be low / high, and a whole host of other reasons besides. Actual health is far more important.

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

How are these On-Entry Assessments recorded? By teacher assessment? I fear you will introduce a new assessment system to ensure standardisation, creating yet another test in a system already overburdened. The teachers, pupils and parents would all oppose such a measure.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

## On-Entry Assessments of Pupils in Reception Class Indicator - 2

### Proportion of people not entering higher education aged 18-19 - 1

As above. Wales suffer from higher unemployment than other areas of the UK. We need to address that pressing fact right now. Do not ignore those who are able to work now in favour of plotting endless graphs of projected attainment for those of school age. Utilise and maximise the resources we already have.

### Access to Services Domain

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

Yes. You ignore the fact that many areas of Wales, such as the situation I find myself in, are able to have 'access' to superfast broadband services - but a lack of capacity in the cabinet means that we are actually able to access them in reality. My area is ostensibly 'covered' by this service, yet no-one there can actually purchase a contract for 30mb because there is no capacity in the cabinet, and OpenReach are not updating it. Demand means that we are not even getting 10mb - I am now purchasing the fastest speed I can get at 1.5-5.5mb. This is ridiculous! And this is in a well-populated area; not a rural one.

You MUST take into account actual cabinet capacity as a measure of access to these services.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

Sadly these days 'key services' means access to the internet, as austerity cuts along with capitalist profit-maximising have stripped away actual services. Therefore, and with a heavy heart, it appears that access to broadband is now more important. That should read as a clear indictment of our times.

## 2. Anonymous

### Income Domain

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

Re: "Do you have any other comments on proposals for the Income domain?"

Yes; the figure to be used for the low income bracket has not been given. I propose that although this usual figure is incomes below £10,000 greater scrutiny should be made as to what the actual figure per person in the household actually is. This could be nearer £4000 or less for a single unemployed person!

The £10,000 figure is a statistic that masks the true reality of benefit poverty.

The banks and reasonable interest credit card providers are very adept at finding the actual income figures and refusing credit and services to people with incomes of less than

£10,000. How much more likely is it that a person on £4000 pa can only get credit at 'criminal' levels of interest.

Legal levels of interest should be imposed on lenders and regulated.

### **3. Anonymous**

#### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

Lack of superfast broadband is not an indicator of deprivation. Standard broadband is more than adequate for most peoples needs. If a household requires more they obviously have so much equipment they are not deprived.

How is on overweight child deprived; overeating and parental laziness.

#### **Health Domain**

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **1**

A measure of mental health - **2**

#### **Education Domain**

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator?  
Please comment:

Too much pressure on further education; apprenticeships should be encouraged.

#### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

Superfast not required; standard broadband is adequate.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

Not linked

## **Housing Domain**

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Often falsely declared to improve chances of housing.

## **Physical Environment**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

Not a consideration. Lack of green spaces an own goal as it's often local authorities allowing building on green spaces.

## **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

visible policing required

## **4. Anonymous**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadband
 Please comment:

I am not sure that replacing one measurement for another will give robust data. It doesn't account for "puppy fat" when children lose some weight as they get older . Also it does not account for children who are taller, and larger build if it measure purely weight. Although BMI didn't work in all cases at least it considered different sizes. perhaps a comparison of birth weight and reception class weight would be a better and more reliable indicator.

With regards to education , schools are already nervous about stats and reports of how the children perform , there is a risk that reports will be not a true and accurate view if schools



want to seem better. Although having a daughter in Primary Teaching and three daughters who have gone through school. I am aware that some schools focus on higher topics such as venn diagrams etc without ensuring children have achieved the basics in forming letters, writing, spelling and comprehension. This is causing ongoing problems for senior school when pupils cannot display the basic skills

I also do not feel access to broadband is a "deprivation" in basic life so although the information might be useful for other reports to include it in a document that states Deprivation as the main title seems a bit extreme. My 85 year old mother doesn't have broadband but she is not deprived, nor are many of my elderly patients. Running water, electricity and access to meals and care services are much more indicator of restricted life.

relying on self reporting for chronic conditions etc is not scientific or reliable as it is subjective and based on unreliable opinions and expectations. I have worked in the health service for 26+ years and find peoples physical and functional difficulties are no reflection of what they believe their situation is. Often people can feel they are really bad but its because they wont consider being flexible or alter their home environment to make life easier for them or their partner and this was the basis for my dissertation for my masters degree recently.

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

see initial box - need to consider those that are taller or have larger feet (larger bones) also the aspect of "puppy fat" which disappears at or by puberty

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

see reference in first box re the unreliability of self reporting

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **1**

A measure of mental health - **2**

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

schools are too focused on stats and their position - records may not be true and accurate see first box

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

don't believe access to Broadband is a deprivation . its not a necessity for everyone see comments in first box

## **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

not sure how you can reliable measure disrepair in private homes - people may not respond so you wont have a wide view of housing only limited to those who respond - a bit like voting where we quote that a politician gets 30% of the vote but if only 20% of the population actually vote then the support is limited to 30% of that small 20% which is a much smaller proportion of the overall picture. people may be too proud or just prefer to spend money on other things. could only report on those that have accessed grants or been referred to local agencies such as care and repair services or social services for assistant with adaptations and improvements.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

working in the welsh valleys , myself and colleagues still come across houses that do not have central heating . its not a deprivation for them even if they have a coal fire - only if they are not able to manage it eg chop wood or bend to light it

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

could look at those who are still living at home and cant get access to a mortgage

those that are on the rehousing register particularly those that cannot adapt their existing home and need to be rehoused to access simple facilities such as toilet and washroom . I know many patients who are discharged having to use a commode long term which seems more of a deprivation of basic living standards.

## **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

I think both are important especially as the documents for age friendly societies puts great emphasis on the importance of green spaces for well being of all ages. This has been agreed on a global level and all councils should be adhering to it in their planning

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

really sad to see public toilets being closed - it really is important for the young and the elderly to be able to have access to these when out and about. Although some shops and cafes have toilets they are usually for customers and require you to buy something to have access.

## **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

Really concerned that local police stations are shut or not constantly manned

## **5. Dave Beck, Bangor University**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
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  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

Given the recent governmental change of policy direction, in that apparently 'Austerity' has now ended, priority, for me, should be focused on seeing if there has been a noticeable impact for low income households.

A question should also be asked about the impact of Universal Credit

### **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Perhaps also the inclusion of how poverty is to actually be measured, as we have no official definition of 'poverty', or how it is to be measured.

the inclusion of the 'Social Metrics, new Measure of Poverty' maybe a way forward.

also, an inclusion of the rise of absolute poverty, instead of purely focusing on relative poverty.

Absolute poverty has been rising since 2010, and is evident in the rise of homelessness and food bank use.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

could this contain a disposable income domain.

for me, it is hard to see the benefits of having an income domain, which measures total income, and is taken from Before Housing Payments, as different locations will have different levels of average income and also differing levels of average cost of housing.

I would suggest that either this metric is changed to After Housing Costs, or a second layer to look at this, and resultant levels of Disposable income.

## **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

this could be used in reference to a Welsh language metric, perhaps used to identify if Welsh speakers are predominantly hired in professionalised roles, and if English only speakers are either excluded from professionalised employment due to Welsh language inabilities. This would obviously highlight the discrepancies between the North and South of Wales, and the predominance for industry to be located in the (Predominantly) English speaking south.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

yes

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

a layer to show how many people are employed on a zero hours contract, temporary contracts, average wage levels.

I think, what may be found, is that a predominance of income is stored in the South. Remember, this is a united Wales.

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

yes, as this may shows anecdotal evidence of the impact of food poverty.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

Malnourishment is a chronic indicator of poverty, and should be recorded as thus.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

numbers of people accessing mental health services

numbers of suicides per LSOA

- Question 13 - What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **1**

A measure of chronic conditions - **2**

A measure of mental health - **3**

More should be done by the WG to highlight these above areas, and bring this scandal to national attention. It starts with proper recording and dissemination of this information.

### **Education Domain**

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **2**

Proportion of people not entering higher education aged 18-19 - **1**

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

Number of Graduates entering Graduate level employment? This could be taken from NSS survey, or other surveys run through HE

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

Yes, this is vital! Universal Credit and other Governmental services are soon to be 'Digital by Default'. therefore free Wifi zones, not spots, 3G/4G areas should be covered. also speeds of Broadband in each area should be included.

### **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

this is important and should be included.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

please keep this

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

keep this, it is a key indicator

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

numbers of types of housing (owner occupiers, renters, social housing/private renting etc) also the numbers of properties with differing bedroom numbers, also perhaps how many people are affected by the Spare Room Subsidy

## Next Steps

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

there should be an inclusion of the areas which have suffered the most due to austerity policies.

Food bank numbers in locations (not just the Trussell Trust, but all those also provided by the Independent sector - I, Dr David Beck at Bangor University have been mapping these).

Which local authorities are still providing breakfast clubs (as originally proposed)

How about a layer which details the cost of school meals per local authority.

A layer that also addresses how many pupils are receiving free school meals per local authority?

A layer which identifies areas identifies as 'Food Deserts' see the work being done by Dr Hilary Shaw

## 6. Anonymous

### Overview

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
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  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadband
 Please comment:

i would have liked to have seen something specific to young people aged 11-25 and also widen the progression to include employment and training

### **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

i think having a robust indicator showing low household income is essential

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes

### **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

i would like to see employment remain a priority within the new WIMD

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

yes

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

it would be useful to have separate age ranges such as 16-18, 19-25 etc

### **Health Domain**

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

i welcome this indicator but would like to know age ranges

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **3**

A measure of mental health - **1**

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

splitting the data into age ranges would be useful

### **Education Domain**

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

i think this would be a welcome indicator

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

i think that the indicator misses young people aged 16-18 not progressing well and also misses people entering employment and training provisions

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **2**

Proportion of people not entering higher education aged 18-19 - **1**

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

this is a good addition

### **Housing Domain**

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

i think this would be a mistake

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

im not sure if it should come under this domain but what about homelessness

### **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

this is a good addition



## **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

no but it would be good to capture the views of young people on how safe they feel within their communities

## **7. Owen Hathway, Sport Wales**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
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  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

We support the inclusion of unhealthy weight in children and would suggest that the WIMD measurements in future also take note of the obesity strategy evidence and evidence around access to physical activity opportunities.

### **Income Domain**

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes that would be a useful addition.

### **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

We agree that having a reception class health measure is worthwhile exploring. However it is also worth reflecting potentially, not simply on weight, but on capability and physical literacy standards, should quality measures around this be developed in future.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **1**

A measure of chronic conditions - **3**

A measure of mental health - **2**

## 8. Amanda

### Overview

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

Completely welcome these new data sources.

Access to super fast broadband will probably correlate with UC takeup/or lack of - particularly in rural areas.

### Income Domain

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

I support the proposal

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Possibly, but would find it more useful to have this data at street level to identify specific pockets of income deprivation.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

I support the proposal

### Employment Domain

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

I support the proposal

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

I'm not sure what that would provide. Comparison by county, nationally and UK-wide is more useful

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

It was be useful to gather data on economy status at a county level i.e. low wage economy

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

I support the proposal. Much more useful than Birth Weight

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Very much welcomes - and should be included in Child WIMD also

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

I support the proposal

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **3**

A measure of mental health - **1**

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

Cancer incidence rates is not useful at a local level and no short term (3-5 year) initiatives can impact on this at a local level. Such an indicator needs to underpin all health initiatives.

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

Unnecessary over assessing.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

I support the proposal

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

Not sure how useful this has been (from Communities 1st experience)

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **2**

Proportion of people not entering higher education aged 18-19 - **1**

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

It would be useful to measure aspiration of 0-24 year olds

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

I support the proposal and this is a long time overdue

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

Travel times to key services should be separate.

Improved access to broadband services could support/negate the need for travel time indicators, except in emergencies

### **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

I support the proposal and hope this will cover all social housing and private landlords

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

I support the proposal

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

I think this indicator should remain, otherwise it'll be forgotten and we still need to improve the energy efficiency of many homes in Wales. This could tie in with the housing quality measure.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

I support the proposal

## **9. Alex Osmond, The Wallich**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

Would definitely support the mental health aspect coming in. I'm not a medical professional so can't provide much input as to what this looks like, but welcome the idea.

### **Health Domain**

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **2**

A measure of mental health - **1**

### **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

The housing indicator, as I understand it, has suffered because of poor data in the past. I do feel that homelessness and/or rough sleeping need to be much better represented in the WIMD. As I understand it, this is the case in the English version of the Index. WG does release the rough sleeper count numbers and, while I admit there are some issues with those stats, it'd make sense for these to at least show rough sleeping in different LSOAs.

I agree with the removal of the central heating aspect, as the mere presence of a central heating system does not say much about deprivation. However, while overcrowding and the presence of hazards are worthwhile, homelessness does need to be represented in the Index somehow.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

This looks excellent

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

I think this is a good change

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

I welcome this continuation

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

I think this is a good change, as described above

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

As discussed, at some point there needs to be an increased focus on homelessness

## **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

I understand that weighting in part derives from the quality of data, but I'd hope to see housing/homelessness indicators get more weighting in future, as they are good markers of deprivation in a community

## **10. Swansea Council**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions

- Education and skills in the early years
- Progression to Higher Education
- Access to natural green spaces
- Access to superfast broadband

Please comment:

It is difficult to prioritise any of the above data sources over others – all are to some extent important in their own terms as (potentially) reflecting some aspect of ‘deprivation’.

Therefore, in principle it would be better to focus on data sources which are achievable in the short time before WIMD 2019 is published – there seems little point in committing large resource in a limited window to specific measures at the expense of others which may be judged less important but where progress can be made for WIMD 2019.

However, our general feeling is that work on low household income should be prioritised – being considered fundamentally important in itself (also being a major aspect of one of our Council’s corporate priorities) and for its impact on other deprivation domains and some of the other sources listed above.

In terms of the above list, access to natural green spaces and superfast broadband can be considered less of a priority overall in comparison with the others – in part due to them being measures in domains with lower weighting, or only a (relatively) small part of a larger set of indicators in a lower-weighted domain.

## **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

At this time, when Universal Credit (UC) is such a big part of the landscape for income-related analysis, we agree that this is probably the best set of proposals that can be achieved for the Income domain. As UC roll-out began in Wales in April 2017, it makes sense that the preceding 12-month period is used, even if it is unfortunate that this will be quite dated by the time WIMD 2019 is published and during its lifetime.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

There would be little clear benefit in this for us, as we operate in a Welsh context for small area data analysis. We would prefer the data to be one year more recent, especially if income indicator updates will be unavailable for some time due to UC rollout.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

We agree in principle that this should be included, to provide a fuller picture of income deprivation than one solely based on income-related benefits. However, due to limited progress in developing the robustness of the data source (e.g. including income from self-employment), we feel that this should still have a smaller weight within the domain relative

to benefits data for WIMD 2019. However, as development work around small area income estimates progresses, and benefits data becomes more dated (i.e. fixed at 2016-17), this could become a more significant measure by WIMD 2023/24.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

We have some concerns that the domain is very benefits-driven, with insufficient measurement of in-work poverty.

It is also suggested that the domain would ideally reflect figures published by the Joseph Rowntree Foundation that identify the minimum amount an adult, child, or person living with a long term illness should receive – which should be a consideration during the development of income estimates (and so remove the focus on benefits). Previously benefit levels were set by the Government that no one should live below. However since 2010, benefit rates for the majority of people of working age and children have been frozen (with the link between RPI and uprating removed); so the levels are far lower and now do not meet basic needs.

There is also a topical, political dimension to UC and its roll-out which may have secondary implications for WIMD (and other UK indices) at some stage, although it is accepted that consideration of UC has to be on the basis of how things stand now.

## **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

This seems the best set of proposals that can realistically be achieved, especially in the context of where we are now with UC roll-out across Wales. The single measure does include both those UC claimants not in employment (which are possible to flag), and those on legacy employment-related benefits. Whilst measure(s) which consider wider issues around work quality (rather than just having/not having a job) would be useful to include, there are no clear sources available at a small area level.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

We can see no immediate, obvious benefit in this now; however we have no objection to this being made available as a secondary source outside the main WIMD outputs for those that find it useful.

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

It is unclear how the proposed new claimant count measure, due to be introduced by DWP in January 2019 (as an experimental statistic initially) will relate to the existing official ONS claimant count measure, and whether this will have an impact on this part of the indicator going forward.



## Health Domain

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

The proposal seems logical in principle; however in the consultation document, the progress of this research seems to be insufficiently developed at this stage.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

Agree with premise of the analysis, subject to QOF (Quality and Outcomes Framework) data quality and consistency of GP reporting being considered acceptable.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Agree with the principle, but data availability seems far from assured at what is quite a late stage.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

Agree. Premature mortality seems clearer to measure and to understand conceptually than avoidable mortality.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **1**

A measure of mental health - **2**

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

The analysis presented is reasonable; however, but there do seem to be a few unknowns at (what is now) quite a late stage.

Within our own internal consultation, colleagues have suggested that income is linked to all of these factors, in terms of how they are experienced.

Colleagues also feel that local indicators around substance misuse and rates of suicide could be explored.

## Education Domain

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

Our recent analysis of the baseline on-entry assessment data from Swansea schools shows that there is far too much variability between schools and pupil groups, and also many schools show results which would be unexpected given their context. For example, we have schools with high deprivation context with very high baseline measures and also schools with low deprivation context with very low baseline measures. There is also a very poor correlation between the baseline and later attainment measures. Due to this concern we've identified additional local resource to work with our schools to improve the quality of the assessments, and there has been some improvement; however we won't really see this in the data until at least the next data collection in June 2019. If sufficient data quality improvement can be demonstrated in the future then it could be considered; however we feel that at this stage neither this nor the previous baseline assessment data should be used in WIMD 2019.

The Foundation Phase outcomes data is now well-established and considered more reliable.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

No specific comments; however a supplementary question arises as to whether the indicator data will change (or stay the same) when there is sufficient years of data available for the preferred WG measure.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

The order of the three options as presented seems logical, i.e. preferred/ alternative 1/ alternative 2.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator -

Proportion of people not entering higher education aged 18-19 -

It is very difficult to set out a priority between what are very different issues, measures and life-stages. At this time in the planning for WIMD 2019, it may be appropriate to focus resources on what is more likely to be achievable in this timeframe.

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

We feel that local indicators around apprenticeships, lifelong learning and Higher Education outcomes should be explored.

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

Conceptually, it is sensible to include broadband as a measure of access to services in 2018/19, but the levels and thresholds need careful consideration. Good, or at least acceptable, broadband coverage is (generally) more universal now and for most people is not a serious impediment to accessing services. For example, should someone unable to access 30Mbps broadband be seen as more deprived than someone physically unable to access a GP surgery within an hour?

Clarity in definition is essential in reporting and analysing this domain; for example that this is about geographical accessibility (generally private/public transport travel times) rather than other aspects of accessibility, in particular financial affordability of services.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

For the above reason (in Question 20), any new broadband indicator shouldn't be given proportionally high weighting at the expense of access to physical services, which should still be more heavily weighted overall. Precise figures on the balance of weighting are difficult to recommend but could be based on precedents used in other UK (or international) Indices or relevant academic research. Instinctively, we feel that a broadband measure shouldn't account for more than 20% of the overall weighting of this domain at this stage.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

In general, the domain doesn't capture the rural aspects of deprivation particularly well. However, we feel that various aspects of deprivation affecting urban, densely-populated areas are also deficient in some respects – see response to question 35.

In terms of services measured, we feel that access to banks could also be investigated, subject to availability of a suitable data source; however it is appreciated that the situation with banks (and some other services) changes frequently, and unless the indicator data attached to this domain can be updated more frequently (than in recent years) its usefulness may be limited.

## **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

An element of modelling is inevitable given the scale of housing in Wales and the amount of hard data available. It should however be treated with the normal degree of caution that modelling in any housing stock survey would receive. Some movement away from total reliance on (2011) Census data in this domain is also encouraging.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

As explained in the consultation document, HHSRS and WHQS are the recognised methods of assessing housing conditions across private and public sectors in Wales. Given that HHSRS applies across all sectors, it would be appropriate to use it as a basis for capturing poor housing quality, but how elements of WHQS would be used to measure this across the whole housing stock clearly is something that would have to be developed with caution so that it was not seen to duplicate or contradict areas already dealt with under HHSRS. However, it is accepted that this is a preferable starting point rather than developing something new which is not already being used by housing regulators. Detail of local authority activity with regards to both HHSRS and WHQS is already reported annually to Welsh Government and so data would be readily available.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

It should be recognised that there is emphasis placed on EPCs under statute as an indicator of poor quality housing, particularly with regards to private rented accommodation. The comments about the age of the data could also be applied to HHSRS and WHQS data.

Our view is therefore that EPC data should be included, as it is a good insight into the energy performance of property and when used against income could be used to gauge fuel poverty. The data may be a maximum of 10 years old but it is an indication of thermal performance and construction type. EPCs may not cover the whole of the housing stock at the moment but that will change as the years go on. Also, it's been shown that the worst areas of Fuel Poverty are in the Private Rented Sector, and this is where the highest concentration of EPCs will likely be so will provide a useful tool when targeting resources.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Genuine overcrowding is accepted as an indicator of housing deprivation.

There is also a rationale for keeping some Census based indicator in the housing domain, and a bedroom- rather than room- based measure seems logical, in view of what ONS are proposing to collect in the 2021 Census.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

It is accepted that central heating is seen as the desirable norm for many, but the various systems available (or not available in certain geographical areas) often means that they are not always efficient and are therefore linked to fuel poverty as much as the basic price of fuel. It would be impossible to distinguish between adequacy of systems and choice of occupiers if this were used as a measure of its own, but the use of HHSRS data on excess cold would appropriately link back to both availability of heating and thermal efficiency of a dwelling and would also therefore capture part of the role of the EPC in Question 25 above.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

Our view is that it would be beneficial for the Welsh Government to look at developing and reporting on a measure for the future that records the number of households who have been disconnected from their energy supply. This would have the potential to become a very clear measure of deprivation and fuel poverty if it could be collected from energy suppliers across Wales.

We would also suggest that measures around homelessness, families in B&B and security of tenure should also be considered for inclusion in this domain. Such measures would more accurately reflect significant aspects of deprivation experienced in urban areas in Wales.

In addition, it would be helpful if the housing (indicator) data published could be broken down by tenure where appropriate – social housing, private rented and owner occupier.

### **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

A move towards simplification and greater transparency in the data is to be welcomed in principle. Up to now, outputs and explanations relating to this domain have been very technical and unclear to the non-specialist user. Air quality considerations are of considerable importance in their own right, and through their direct links to other aspects or domains of deprivation, e.g. health.

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

We have no objection to this in principle, if the data is considered sufficiently robust, as part of an overall package of measures within this domain. However, the chapter doesn't specify whether the indicators will revert to the previous measures (proximity to waste disposal and industrial sites) if the green space indicator is not ultimately considered suitable.

- Question 31 – Do you have any views on the proposed weighting within this domain? Please comment:

As the consultation paper states, there is no underlying factor therefore no factor analysis seems appropriate for this domain. However, within the domain we feel that air quality should have a higher weighting overall (more than one-third), especially as the accessible green space indicator is relatively new and the data may be less robust than the other sources at this stage.

### **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

The proposals seem well thought-out and based on established measures. Additional indicators that we would suggest could be investigated for WIMD 2019 include road traffic accidents and self-reported crime.

## Weighting

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

Some adjustment of current (WIMD 2014) weighting may be appropriate, but this should be confirmed towards the end of the research phase when the agreed indicators are more settled and their relative strengths and weaknesses better understood.

In view of how the robustness and timeliness of the employment-related measures will be compromised over the lifetime of WIMD 2019, perhaps the 23.5% weighting attached to the employment domain is high, especially if more robust measures are being introduced in other domains, e.g. health, housing, education.

A suggested breakdown of domain weighting is shown below:

Income 22.5%  
Employment 17.5%  
Health 15.0%  
Education 15.0%  
Access to services 10.0 %  
Community Safety 5.0 %  
Physical Environment 5.0 %  
Housing 10.0%

In this way, income and employment still remain the most significant aspects of multiple deprivation, but together less than half of the total (i.e. 40%). The housing (especially), health and education domains should also have a higher relative weighting towards the overall index than they do currently.

## Next Steps

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

The urban areas of Wales face more pressures relating to aspects of deprivation which aren't adequately captured by the current WIMD. Higher population density (people per hectare/sq. km) creates direct and indirect costs both for service providers and residents, which do not apply to sparsely populated areas. Some illustrations of specific impacts are highlighted below:

- Urban areas will experience higher traffic congestion, often through substantial levels of net in-commuting, with associated impacts for residents in terms of well-being, including travel time (to/from work, services, home), physical/mental health and air quality.
- Cities are home to large, highly diverse populations, including new migrant communities, which can provide challenges for social and intercultural cohesion. Diverse and/or transient populations can also increase pressure on local public services (e.g. waste, planning, other regulatory services) and the communities themselves.
- Urban homelessness is partly driven by the number of people who migrate to the area as the lack of land relative to demand causes prices to rise reducing the affordability of housing. Some anti-social behaviour associated with it can also have impacts for the wider community.

- More densely populated areas are subject to higher crime rates, with offenders targeting city and district centres to carry out drug dealing, robbery, vehicle crime and anti-social behaviour.
- ONS life expectancy and healthy life expectancy statistics indicate that people in densely populated areas can expect to spend a higher proportion of their life in general poor health or disability. The health domain of WIMD is currently more focused on specific health conditions.

The following additional observations were made during our internal consultation:

- Conceptually, WIMD seems to be based on what can be collected or measured rather than what might be more valuable.
- The consultation document often indicates that new indicators are still being explored despite finalisation of WIMD 2019 only being months away.
- The Index does not adequately differentiate between rural and urban areas.
- It doesn't sufficiently reflect the impact of Universal Credit – although it is accepted that the timing is difficult in respect of the current availability and clarity around UC data.
- WIMD appears to be based on a deficit rather than strengths based measurement model, which may not sit comfortably with the Well-being of Future Generations (WFG) agenda in Wales.
- Notwithstanding the previous point, the next round of Assessments of Local Well-being are due in 2022, so aspects of WIMD 2019 (and subsequent indicator data) will have a role in this. However, in a well-being context, development of the Thriving Places Index and measures is also important and its future relationship to WIMD should be considered.
- Early thought should be given to geographic units used for dissemination of indicator data. Whilst the Communities First (CF) programme has ended nationally, in Swansea we still have 'Delivery Areas' which are based on the former CF footprint. Further consultation on geographies going forward would be useful, perhaps via domain groups and the statistics user community in Wales (e.g. WSLC). The 'Community Areas' that each PSB has identified via the WFG Act and local well-being assessments seem an obvious new geography, as all (should be) based on groups of LSOAs.
- For future updates of WIMD, 4-5 year intervals seems appropriate, which would take us to 2023/24. However the next update should take note of other factors, e.g. release of local Census data (2023), progress in the development of relevant administrative data sets (e.g. income estimates), the roll-out of Universal Credit (re Income/Employment domains). However, some timescales are unclear at the moment so it may be too early to know. In the meantime, it may be helpful for domain groups to convene annually or as virtual groups) between 2019 and 2023 to consider developments in each of the subject areas.

## **11. Anonymous**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?

- Low household income
- Unhealthy weight in children
- GP-registered chronic and mental health conditions
- Education and skills in the early years
- Progression to Higher Education
- Access to natural green spaces
- Access to superfast broadband

Please comment:

These indicators will provide a good source of information for WIMD and will be crucial for forums such as Public Service Boards to assess progress in providing improved services. The maintenance of the existing criminal justice, police and community safety measures is welcomed to provide a continued picture across Wales.

## **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

The inclusion of this indicator would be welcomed

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

The ability to allow comparisons with relevant areas in England would be welcomed

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

The inclusion of data in relation to Adverse Childhood Experiences would be welcomed to assess whether there is a correlation with the health domain.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

The introduction of a new indicator on mental health would be welcomed in order to assess the prevalence and to bring it in line with other areas.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **3**

A measure of mental health - **1**



## **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

The proposals for the Community Safety domain are welcomed. We would argue that cyber crime should be included to understand the link to deprivation in terms of vulnerability and we would encourage an indicator to be included in the future.

## **12. David Morgan, Pembrokeshire County Council**

### **Income Domain**

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes.

When looking for LAs to benchmark against it would be helpful to have a larger pool than just 22 Welsh LAs.

### **Employment Domain**

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Yes.

When looking for LAs to benchmark against it would be helpful to have a larger pool than just 22 Welsh LAs.

### **Health Domain**

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **1**

A measure of mental health - **3**

### **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

Given the significance of housing to quality of life, any improvement to to housing domain is welcome.

### **13. Andrew Collins, Neath Port Talbot Council**

#### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

We like the idea of exploring new data sources, but would like to see if possible exploration or the ability to filter data specific to young people aged 11-25.

#### **Income Domain**

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes

#### **Employment Domain**

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Yes

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

We would liked to have seen data around young people aged 16-25 that are not in education, employment and training (NEET) and also something with regards to low income employment.

#### **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

We like this addition

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

We like this indicator

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

This is a welcomed addition and we would be very interested to see if the data could be used for young people aged 11-25 as this is an area of concern for the youth service, and young people have highlighted it as one of the issues they are concerned most about.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **3**

A measure of mental health - **1**

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

Are there any further indicators related to health such as risky behaviours, healthy relationship data (VAWDASV), teenage pregnancies/conceptions etc., as these would be a welcome inclusion.

## **Education Domain**

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

A welcomed indicator

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

We would have liked to have seen an indicator which included not entering employment, training and work based learning and additional age ranges such as 16-18.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **2**

Proportion of people not entering higher education aged 18-19 - **1**

People not entering HE, Pupils in reception class.

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

We think an indicator of young people leaving school at year 11 and becoming NEET would be a good indicator.

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

This is welcomed

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

We would have liked to see a mention of access to parks, play facilities, youth clubs, etc.

## **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

We like this indicator because it is a more positive than the waste indicator.

## **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

We welcome the inclusion of cyber crime as this is an emerging issue for young people and scammers are targeting people.

## **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

The report mentions the inability to calculate UC, due to the fact that not all areas are in full service, but if this is the case, how are you going to identify those people in Work Poverty?

Mental health is covered in the report but could this be explored within the early years or within KS1/2? An early indicator on this would be really useful?

## **14. Powys County Council**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadband

Please comment:

Broadband access is the most important of these, as it is the method of delivery of so many other services.

### **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Understand why this is being done, so no problem

### **Health Domain**

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **2**

A measure of mental health - **1**

mental health seems like the one that will cover new areas the best

### **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

I still don't fully see how the on entry assessment is measuring Education and not something else like general poverty. all the factors which impact this score will take place before the children enter school.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

I think i am generally wary of this measure, as it is making assumptions about the preference for HE education and other options being less good. I would prefer the preferred option and doing more work to make sure that this measure is capturing that people are going to appropriate destinations after 18, even if these aren't already HE

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **2**

Proportion of people not entering higher education aged 18-19 - **1**

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

I like it :)

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

My worry about the weighting would be about the timeliness of the Broadband data. I wouldn't want a weighting to be assigned that was either too high or too low if the data was very recent or old. Say the broadband data was upto date and given a high weighting, but then difficulties with getting more recent data in the future meant whilst the travel to services was kept recent the broadband wasn't, i would be worried about the implications if the broadband retained a high weighting and didn't reflect reality.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

the catchment work was interesting but needs much more testing before being rolled out.

## **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

Appreciate the work done on housing to improve the measure

## **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

I hope the data on what is accessible is robust and there is the chance to check the results before it is published.

## **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

would the decrease of the domains be done equally (all losing 1%) or done more pro-rata, so Health/Education losing a greater share than Community Safety and Physical Environment>

## **15. Rhys Pritchard, Isle of Anglesey County Council**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

We welcome the proposed amendments / additions to data sets on poor housing quality; key stage 4 school attainment; air quality and mortality.

Any new data source (referenced under point C in Section 2.1) is to be welcomed, where practicable and applicable to do so. We would prefer that GP registered chronic and mental health conditions, and access to superfast broadband are prioritised, if possible.

All those listed carry merit to be added to the WIMD, given the statement about the complexity and time-consuming nature of these data sets consideration should be given to if the data / information could be sourced elsewhere, for example the number of households with access to superfast broadband may be available to attain from the Welsh Government operated Superfast Cymru project, should the data be available for a geographical area suitable for the WIMD.

### **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Having a measure on income deprivation in the WIMD is important. Using the proposed data set would enable comparison with past data produced. A measure on income domain within the WIMD is welcomed from an Economic Development perspective.

Given the statement on the consultation document that utilising data from 2016-17 (prior to Universal Credit) will not impact much on the currency we assume that using this data for the Welsh Index of Multiple Deprivation 2019 will be adequate.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes, if applicable, comparison with similar small areas in England would be a useful resource. Allowing for like-for-like comparisons on income deprivation across Wales and England (and possibly wider-UK Countries over time), would enable areas to gauge their rank through a wider geographical area.

Cross-border comparisons could also be useful for the Welsh Government in some areas, especially where devolved powers exist, in order to be able to quantify over a period of time the impact of policies and laws implemented under devolved powers compared to other areas in the UK. This point is generic for the WIMD as a whole (where devolved powers applicable) not just the income deprivation measure.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

Should the available data satisfy the quality considerations, robustness and completeness then a second indicator on householders in low income would be welcomed.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

Given the significant of using 2016/17 for the WIMD 2019 would be anticipated impact of the roll-out of the Universal Credit on the income domain WIMD indicator we feel that the Statistics for Wales's approach appropriate and ensure consistency with previous data.

## **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Accept that due to changes to the Universal Credit system that publication of annual data on employment deprivation won't be possible given the previous data sets used for this indicator.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Agree that there is considerable user interest in consistent data on deprivation for small areas across England and Wales.

As stated, we would concur with the statement above that similar employment deprivation indicator data across Wales and England would be useful. Accept that different financial years, as a result of the Universal Credit roll-out, may have to be utilised in order to create similar data sets for cross-border comparison on employment deprivation.

When the data is available we would agree with the statement in the consultation document that Statistics for Wales should assess the impact of the different approach on the employment deprivation indicator for Welsh areas.

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

All employment domain aspects within the consultation document seems a sensible approach to the development and implementation of employment domain statistics for the 2019 WIMD.



## Health Domain

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

As stated in the consultation document, the measure of unhealthy weight is deemed appropriate. Given the significant amount of media coverage under this measure in the past few years we agree with the proposal in the consultation that a measure in the 2019 WIMD would be relevant and beneficial. Anticipate that this data set would likely be increasingly used to measure the improvements in national health in the long-term.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

Agree with the premise in the consultation document that data on a local level under the WIMD would be welcomed should the data be available to the team.

We would suggest prioritising measuring the prevalence of particular diagnosed chronic conditions which are known to be linked to deprivation, (such as diabetes, respiratory disorders, heart disease) where possible.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Again, increasingly high-profile and important subject. Welcome the proposal of a new Mental Health measure in the WIMD 2019, similar to the measure above on Chronic conditions the information published in the Welsh Index of Multiple Deprivation will be very useful to our colleagues in the National Health Service.

We agree that the Quality and Outcomes Framework (QOF) data is preferred to prescriptions data, as there is a lot of work going on in various Welsh Health Boards relating to social prescribing.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

We would welcome the use of a premature death rate indicator, in the place of the all-cause death rate.

The NPHS (2004) published a Deprivation and Health report which noted that premature death (under the age of 75) is substantially more common in deprived communities.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **3**

A measure of mental health - **1**

Developing a measure on Mental Health down to a local level will be a useful tool for health colleagues to improve and ensure the provision of mental health support is

available in the required areas, at the required levels, as well as targeting specific areas of needs. We would particularly prioritise the development of a Mental Health measure, given its presence in the deprivation indices of all other UK nations. In the long-term, tackling the unhealthy weight in children will positively impact society in a number of ways. Developing a WIMD measure for this would be beneficial for those developing policies to tackle unhealthy weight in children while also setting a baseline from which to improve upon.

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

We agree with the proposal to retain the long term limiting illness indicator.

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

Additional indicators welcomed, especially as the data is already being sourced elsewhere. However, need to ensure consistency across the Country's data as the source of data will be teacher assessments, which will inevitably vary from teacher to teacher.

There needs to be a better understanding and co-working between schools and early year's providers. Early years indicators and assessment in nursery settings should be robust, validated and followed on to Reception.

Good engagements with parents in the very early years should be a marker for pupil's successful outcome. Uptake on programmes such as school readiness could be used as an indicator.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

Agree with proposal which will highlight education trends from area to area.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

Agree with the preferred option.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

**On-Entry Assessments of Pupils in Reception Class Indicator - 1**

**Proportion of people not entering higher education aged 18-19 - 2**

Given the various career opportunities and individual circumstances (e.g. apprenticeships) which could affect the data in the 'Proportion of people not entering higher education aged 18-19' we believe the on-entry assessments measure would carry more weight as a credible WIMD measure.

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

With data already being freely available and other areas in the UK already implementing a measure under broadband service, the consultation document's proposal to adopt a similar measure for broadband services makes sense.

It will help to analysing the impacts of Welsh Government's Superfast Cymru Project along with ensure that data is available on the areas that require additional / supplementary broadband infrastructure in order to reach the desired level across Wales. Having a measure on broadband services will also aid the Welsh Government's planned successor programme for the reasons mentioned above.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

Agree that the measure above is important in the context of the Welsh Index of Multiple Deprivation indicators, and very useful in measuring deprivation.

The access to key services should be weighted higher than access to broadband services due to the fact that access to broadband could change very quickly once production of the WIMD statistics have been released, however the travel times to key services is unlikely to change as quickly. Also access to broadband services does not guarantee that individuals take up that option of access (due to financial situation or personal preferences etc).

As the consultation suggests, some services are, increasingly, available to be accessed without travelling due to advances in technology. This would be very difficult to factor into the WIMD data. However, the inclusion of access to broadband services does account for this.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

In addition to the broadband services a measure on the mobile data services would be beneficial and add value to the access to services domain WIMD 2019 measures.

We believe that the distance from Accident and Emergency hospitals would be a valuable addition to this domain, regardless of the existence of free hospital transport and ambulances, as waiting times for ambulances can vary significantly dependant on the distance from the hospital.

## **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

We welcome the proposal to include a modelled indicator of poor housing quality in the housing domain, and believe that the advantages of improving the range of information on housing at a local level outweighs the disadvantages.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

We agree with the proposal to focus on the HHSRS, as internal SP data suggests that deprivation is more prevalent in the Private Rented Sector.

We also welcome the further proposed measure of the physical and living condition of properties at a local level.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

We acknowledge the reasons not to include an indicator based on EPC data in the housing domain, due to low quality data. However, we believe that in the absence of fuel poverty data, EPC data can be very useful and should be considered in future WIMD updates.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

We fully agree with the proposal to drop the “lack of central heating indicator”.

If the inclusion of the “proportion of dwellings with category 1 hazards under the HHSRS” indicator is successful, a lack of central heating will be included as it is a category 1 hazard.

In addition, owner occupiers who live without central heating, have often chosen to live this way as they have AGA type stoves which heat up their whole properties, and therefore should not be considered as being deprived.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

As stated in Question 25, we would find it very valuable for EPC data to be included in the Housing domain in the future, if there is enough improvement in the data to do so.

## **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

The proposal to align the air quality subdomain measure with the National Well-being indicators is logical and a rationale amendment to the measure.

The consultation document states that with regards to the Air Quality Score, the intention is to simplify the measure by calculating three indicators based on the population weighted averages concentration values of Nitrogen Dioxide, PM10 and PM2.5. IACC would fully support the move towards calculating WIMD utilising data gathered from these three parameters in accordance with The Air Quality Standards (Wales) Regulations 2010 and in fulfilment of Part IV of the Environment Act 1995 Local Air Quality Management through the production of the annual progress reports.

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

Again the amendment to the measuring of above seems to align better with the National well-being indicators

Assume that there will significant work in preparing / adapting this data for use in the Welsh Index of Multiple Deprivation 2019 unless the ANGS data developed by Natural Resources Wales is easily adapted for the purpose of the WIMD.

- Question 31 – Do you have any views on the proposed weighting within this domain? Please comment:

No specific comments on the proposed weighting currently. Weighting the sub-domains equally and ensuring consistency with previous Welsh Index of Multiple Deprivation seems appropriate.

### **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

Agree with the continuation of the community safety domain measures.

We would suggest that a Domestic Abuse indicator would be a useful addition to the Community Safety domain, if it is feasible for it to be included in future WIMD updates.

### **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

We agree that the weighting of the housing domain should be increased from 5%, given the proposed improvements to the domain and the known links between poor quality housing and health problems.

## **16. Alison Vaughan, Ceredigion County Council**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

I would be particularly interested in low household income, then chronic and mental health conditions. I have severe reservations about access to natural green spaces; having tried to explore this with NRW and other agencies I am not convinced that there is a reliable map.

### **Income Domain**

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

This sounds very promising and useful.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

Being able to assess self-employed income levels would be very useful.

### **Employment Domain**

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Yes

### **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

Since the indicator is calculated on the reception class in a particular school, it's not clear how this relates back to any particular LSOA. Are you proposing to use pupil addresses to allocate scores to areas using PLASC? I can't see this explained anywhere I assume you are matching children to the location of their homes.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

If the data are consistent, then this would be a useful indicator.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

I would welcome an indicator on mental health but prescription count doesn't seem to be a very reliable way of measuring it, particularly when social and green prescribing are becoming more prevalent.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

Welcomed.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **1**

A measure of mental health - **2**

### **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

To be welcomed.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

Your comments on EPC data strike a chord.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Not sure how reliable this is in student areas.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

Seems sensible.

### **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

I doubt that the mapped data on accessible green space is sufficiently robust to use in WIMD 2019.

### **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

LSOAs can be very large in rural areas and the aggregate figures can obscure small pockets of deprivation but this is an on-going problem.

## **17. Rhys Taylor, British Lung Foundation Wales**

### **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

We welcome the proposals to simplify the air quality subdomain as part of the new set of indicators for the Welsh Index of Multiple Deprivation. We particularly welcome the proposal to include separate indicators for Particulate Matter emissions.

Air quality measures have consistently focussed on Nitrogen Oxide and it is therefore welcome that the WIMD indicators will reflect the danger that Particulate Matter emissions pose to individual health.

PM2.5 is particularly harmful as the small particles can easily and quickly penetrate deep into the lungs and enter the bloodstream. Exposure to PM2.5 has been linked to a plethora of poor health outcomes from diseases including asthma, COPD, coronary heart disease, stroke, and lung cancer, with emerging evidence showing impacts on low birth weight, diabetes and neurodegenerative diseases such as Alzheimer's and Parkinson's.

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

We would also encourage the development of an indicator on poor health outcomes and deaths associated with the level of air pollution, reflecting reflect air pollution as a public health priority for Public Health Wales, Welsh Government and Local Government. This could include the number of people living with a respiratory condition, for example.

It is also important that the information is clearly accessible to the public and makes available public health information on mitigating or protecting yourself from harmful emissions, particularly those living with a long-term chronic health condition, and provides information on what action the local authority is taking to clean up the air people breathe.

Furthermore, we would like to take this opportunity to reiterate calls made by Healthy Air Cymru and other organisations for a new Clean Air Act for Wales that enshrines in law the World Health Organisation's limit for PM2.5 to guarantee that the highest health standards are incorporated into future legislation.

## **18. Thomas Brooks**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions



- Education and skills in the early years
- Progression to Higher Education
- Access to natural green spaces
- Access to superfast broadband

Please comment:

## Chronic Disease Registers

The variation between even MSOAs (plus LSOAs of course) identified in GP Practice chronic disease registers is stark. In some overseas countries this data is used both to improve the wellbeing of the individual and to make the public body response more cost effective. Full weight should be given to this indicator.

## Health Domain

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

## Chronic Disease Registers

The variation between even MSOAs (plus LSOAs of course) identified in GP Practice chronic disease registers is stark. In some overseas countries this data is used both to improve the wellbeing of the individual and to make the public body response more cost effective. Full weight should be given to this indicator.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

## Mortality Data

Mortality data is the ultimate ill health indicator. Internationally life expectancy at birth is the consistent confident health outcome measure of the impact of deprivation on a small area community (LSOA). The proposal to produce an age limited (75 and under) derived mortality indicator labelled as the “premature death rate” is to be deplored. As described the Welsh Government appears yet again to be seeking to insert as a “measure” an intangible statistic that cannot be compared with other countries or communities.

Too often when I am abroad I am asked why the Wales Statistical service produces so many statistics that are calculated on a different basis to the international norms. I have to say that I suspect Welsh Government politicians are too embarrassed about their performance to wish to publish the truth.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **1**

A measure of mental health - **2**

Unhealthy weight in children is often a subjective measure of deprivation and of subsequent health outcomes.

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

The availability of broadband services in a community and the quality of such services is no indicator of deprivation. Large numbers of lower income households cannot afford them. There are many fewer lower income households without cell phones. The key measure to be explored should surely be the 5G service for mobile data services, which will rapidly have universal urban and rural coverage and be accessible to cell phones and most other types of digital devices, except perhaps in Wales. Unfortunately Wales, particularly through its local authorities, is lagging behind most other parts of the UK with 5G planning and implementation.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

The argument presented of not including the current 4G mobile service is without merit. The 10% LSOAs without any 4G service are invariably rural areas where the absence of such service undoubtedly adds to their deprivation situation, but this will be disguised if this figure is omitted.

To dilute the extent of the deprivation statistics for some rural areas, the absence of any effective level of public transport is to be disguised by weighting (diluting) the public transport measure with car travel time and broadband availability statistics, both out of reach financially of the most deprived households.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

The purpose of this domain is to capture deprivation as a result of a household's inability to access a range of services considered necessary for day-to-day living.

Welsh statistics discriminate against rural areas and particularly low income residents of rural areas. Welsh bodies such as Health Boards assume that cars are available in rural areas, but neglect to recognise that many of lowest income residents have no access to them. Similarly many rural areas have a public bus service, but while some run at reasonable frequency for day-to-day living e.g every hour, our bus services run only 3 to 6 times a day.

Rural deprivation, particularly social deprivation, in lower income households is under recorded in the current and proposed deprivation measures.

### **A. Services where we will measure travel time for physical access**

Should include banks. Access to a post office is no substitute for access to a bank

## Next Steps

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

### Step 6: Combination of the Domains

In WIMD 2014, the weightings used resulted in 52% of the index being based upon income, employment and physical environment. These are the factors over which Government has the least influence. The other factors of health, education, access to services, community safety and housing amounted to only 48% of the index. It is indicated that for WIMD 2019, you do not propose to change this 52 to 48 bias.

Many other countries wishing to positively improve quality of life give much more prominence to factors that the Government can influence in its national statistics. A reduction to 40% in total for the 'least influence' factors and greater prominence to the factors that Government can influence by increasing it collectively to 60% would make the Welsh index more credible for international small area comparison.

## 19. Housing Service, Torfaen Council

### Overview

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

We welcome the exploration of new data sources, especially low household income, which will help to provide a broader range of indicators around deprivation.

### Income Domain

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Due to the difficulties associated with Universal Credit, we agree with the current proposals around the income domain for WIMD 2019, but would hope that in the future more current data on income could be used.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

We support the idea of using a second indicator to provide a broader understanding of income, but agree that this would need to be subject to quality considerations.

## Housing Domain

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

We would welcome modelled indicators in terms of providing a wider range of information, but it would depend on the model used, the reliability of the data and the ability to update and compare data across different years.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

We welcome a focus on the HHSRS in the housing domain as this is a suitable indicator for measuring the adequacy of housing and reference to the WHQS, which will enable greater comparison between social and private sector properties.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

There is a clear link between fuel poverty and deprivation, which also impacts on health and wellbeing. It is very difficult to measure fuel poverty and the energy efficiency of properties, with EPC one of the only ways in which address level data could be gained. However, we acknowledge that EPC data can be subjective and can potentially become outdated very quickly, making it less reliable. For this reason we agree it shouldn't be included at this stage, despite its obvious worth, but would welcome further exploration in the future around how fuel poverty can be effectively measured.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Overcrowding represents a significant housing need, so taking this into account as a measure of housing deprivation remains important.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

We agree with the rationale to remove this measure.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

It is encouraging to see that a range of other measures were discussed, even though these were eventually discounted. However, we would have concerns about the use of homelessness data as a WIMD measure. To break all data down to LSOA level is difficult, because despite being a useful indicator, which tracks the journey or homeless households, it is difficult to geographically map homelessness, with a person becoming

homeless in one location, often being temporarily rehoused in a different location, until settled accommodation can be sourced.

## **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

We welcome the increase of the housing weighting, since poor housing can significantly impact on other domains e.g. health, education, employment and access to services.

## **20. Anonymous**

### **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

A personal response to:

Consultation Document

Proposed indicators for the Welsh Index of Multiple Deprivation 2019

Date of issue: 22 October 2018

This is a personal response..

I am a 74 year old retiree who after a professional career now has the opportunity to be involved with an Anglican Church serving a parish covering the majority of the area administered by the Caia Park Community Council In Wrexham.

The current WIMD highlights this large Parish as one where high levels of relative deprivation are recorded. The church operates an outlet of the Wrexham Food bank, co-ordinates a Holiday Hunger scheme, conducts regular weekly worship services and extended pastoral care locally. It is home to a monthly community bingo session and a number of weekly community groups. Church Officers are involved in local schools and activities at play schemes and the Caia Park Partnership.

We use WIMD data in explaining the mission of the church and when applying for funding support. I must emphasise this is a response based on my personal observations and discussions with colleagues. It is not submitted from the Church in Wales.

One thought has been impressing itself on me these last few years, that in today's evolving society, deprivation caused by loneliness appears a possible significant issue. Today it seems factors leading to loneliness being a growing issue could include:

Instability and breakdown in relationships, the dispersal of family and community networks insecurity in work & it's world of bought in services, the world of the 'big' rather than the 'small and intimate' e.g. loss of Family Doctor, and the invasiveness of social media causing feelings of exclusion etc. etc.

I have only read portions of the Consultation Document, but I decided to use 'word find' in the document for these words: 'lonely, loneliness, unstable, instability, relationship. The

only word that registered was relationship, and those references were related to statistical issues, not human relationships. None of the other words were located in the document.

This led me to some informal conversations and these conversations led to me learning of the North Wales Population Assessment and National Survey for Wales: Headline results, April 2017 – March 2018. These documents indicate there is recognition of loneliness as associated with modern day deprivation, but that it is challenging to find ways of statistically measuring and surveying this aspect of deprivation.

Given that the WIMD is only reviewed every 5 years, I hope this aspect of life as it appears today can continue to be included in this study. Referring to the Population Assessment Document, my practical observation would be that the association of loneliness with the 3 areas highlighted viz: the elderly, those with poor mental health and veterans, all ring true.

From the National Survey of Wales work the finding that there is higher % loneliness recorded amongst the young is of interest. Whilst this is an age group I now have less contact with, it does not surprise me that their perception via social media etc. is that they are lonely given the world from which they may feel excluded, the world of celebrity, glamour, wealth and the realisation that a person is not part of the 'in' crowd.

I hope your research leads you to conclude you can capture the deprivation caused by loneliness, and that this feature of modern life can be captured in the index. The fact that the National Survey for Wales headline results found that people in material deprivation are much more likely to be lonely than those who aren't in material deprivation makes this even more important research in my view. I wish you well.

## **21. David Cook, Wales Council for Voluntary Action**

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

The consultation documents will be widely read, publicised, shared and quoted. The language used to provide context around some indicators should therefore be in keeping with the research findings of key partners, especially in instances where there is generally broad consensus and a wide evidence base.

An example is on page 54, where a source from 2003 is quoted as evidence that: 'Environmental deprivation is generally not correlated with social or economic deprivation in Wales' (ref: Walker et al 2003).

This seems to be at odds with the extensive evidence available that high quality environments deliver a broad range of well-being benefits including increased physical exercise; improved air quality and increased inward investment and that poorer quality environments tend to be associated with poorer public health and quality of life. The Green Infrastructure: A Catalyst for Well-Being of Future Generations report by Wildlife Trusts Wales notes that: 'The evidence strongly suggests that high quality green spaces can help reduce health and social inequalities. However, good quality greenspace can be unevenly distributed in urban areas, often benefiting people living in affluent parts of a town or city. It has been shown that the most deprived communities are significantly less likely to live in the greenest areas.' (Mitchell and Popham (2008)

We welcome the inclusion of additional indicators on air quality and access to green space and hope that these may help evidence the correlation between environmental deprivation and social and economic deprivation that the above sources suggest.

## **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

WCVA's report on Empowering Communities notes the importance of place in enhancing community resilience. It found that the pride communities have in the places they live is a key factor in people coming together and working to improve their environment. A positive narrative is key to community empowerment. While we understand that the WIMD is designed to identify hotspots of deprivation, it would be beneficial for communities were there to be some positives identified in reporting, so that when media pick up on these stories there's a chance to also put forward a more positive case for these communities. Reporting relentless negatives can then create further negative impact on a community's resilience.

We would like to see social capital is an indicator that could be developed for future iterations of the WIMD. The Empowering Communities report highlights the importance of social capital, noting that those areas where it is in abundance are also those where communities have good relationships with decision-makers – and working with decision-makers, instead of having decisions made for them, in another key component of an empowered community. We suggest that social capital could be recorded by the WIMD by noting the number of community-owned assets in an area and reporting the levels of volunteering; however, this should not then lead to the imposition of performance frameworks or targets to boost social capital. Doing so can lead to community organisations seeking only to try to deliver these targets rather than finding the path that is right for the people in their area.

We would welcome an update on how the WIMD is or will be utilised under the new legislative environment of the Future Generations Act and the Social Services and Wellbeing Act. We note that p16 of the consultation document states that the national indicators do not lend themselves to measurement at a small area level; however measuring how the five ways of working impact on each measurement over time would be extremely beneficial in tracking how public bodies are using the FG Act to create resilient communities, particularly in light of the emphasis on prevention highlighted in Welsh Government documents such as A Healthier Wales.

## **22. Douglas Haig, Residential Landlords Assoc.**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces

- Access to superfast broadband

Please comment:

The RLA is very interested in the proposals, which we believe will bring added benefit to WIMD 2019. We acknowledge that not all proposals can be carried forward given the demands on statisticians. However, given the clear synergy between housing conditions and multiple deprivation, which has an undeniable impact on other life chances such as education, employment and health, we are very supportive of greater emphasis being placed on developing modelled estimates of poor housing conditions.

We would also support the exploration of new data sources particularly on low income households, access to natural green spaces and access to superfast broadband. Given the increased demands on the private rented sector (PRS) for supporting the most vulnerable and benefit dependent, we would be very interested in improvements to benefit data following the roll out of Universal Credit across Wales. Our own research has illustrated the impact on rent arrears on PRS rents and the time taken to support those in rent arrears through alternative payment methods direct to landlords.

Likewise, the RLA are also interested in improvements to access to green spaces. We believe this data would illustrate an important community aspect of the quality of life for all people living in different tenures. There is also a strong correlation between access to green space and mental health quality. For that reason, we are also interested in GP registered chronic and mental health conditions.

Increasingly in the PRS, perhaps especially for student lets, the importance of super-fast broadband is an important factor in securing factor. While this indicator data would be interesting to us on a small area level, it might be argued that black spots in provision do contribute to some forms of deprivation and social isolation especially in an ever-increasing digital society.

Other proposed indicators such as unhealthy weight in children, education and skills in early years and access to higher education, although undoubtedly interesting, we do not feel they would carry as much weight in defining multiple deprivation and have accordingly assessed them as having less priority.

## **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

As outlined in our previous overview response, the RLA are very supportive of proposed improvements to use data at a point in time before the start of rollout of Universal Credit full service in Wales.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

As an organisation that represents PRS landlords across both Wales and England, we would find separate income related data which is comparable to England and Wales to be of use. To avoid duplication, we believe where it is possible to compare data with small



area geographies in England, we believe it should be encouraged to make Welsh data comparable.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

If data can be obtained at such a small level, we believe UC rent arrears could be a useful indicator of income deprivation.

## **Employment Domain**

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

We understand that proposals for the employment domain do not have a significant change in the currency of the data or its quality.

## **Health Domain**

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

The RLA are very supportive of measures to improve indicator data for both chronic diseases and mental health. The PRS is increasingly supporting the most vulnerable in society and understanding the extent of physical and mental health conditions at small areas is important to our policy work. Proposed improvements will, in our opinion, strengthen the data from previously looking at certain conditions such as cancer prevalence. We also appreciate that mental health is a key area of focus for the Welsh Government in their strategy Prosperity for all.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

The RLA are very supportive of measures to improve indicator data for both chronic diseases and mental health. The PRS is increasingly supporting the most vulnerable in society and understanding the extent of physical and mental health conditions at small areas is important to our policy work. Proposed improvements will, in our opinion, strengthen the data from previously looking at certain conditions such as cancer prevalence. We also appreciate that mental health is a key area of focus for the Welsh Government in their strategy Prosperity for all.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **2**

A measure of mental health - **1**

## Access to Services Domain

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

As previously outlined in our opening comments, given the digitalisation of the benefits system through Universal Credit and the increased online provision of essential local authority services, the RLA are very supportive of the inclusion of a proposed indicator on access to super-fast broadband. We also support the use of OfCom data as a useful measure.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

In terms of access to services identified, we are supportive of calculating the journey times of food shops, leisure centres, GP surgeries, petrol stations, pharmacies, post offices, primary schools, public libraries and secondary schools. We also agree that hospitals should not be included due to the infrequency of their use and the fact that to some degree they are already situated in areas of high deprivation. While there is some argument that cash points are already covered under post offices, this is not a twenty-four-hour provision and along with child care provision we would have supported their inclusion within the access to services domain.

## Housing Domain

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

The RLA is grateful for the proposed improvements to the housing domain.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

In terms of housing conditions, we welcome what appears to be a holistic approach to capture housing conditions across different tenures with the inclusion of the Welsh Housing Quality Standard for social housing and the Housing Health and Safety Rating System for the PRS. New standards for Fitness for Human Habitation as outlined in the Renting (Wales) Bill sets out 29 measures. We are supportive of calls to focus this data on hazards.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

We are disappointed over proposals not to include EPC data. While we understand the limitations in EPC data, which previously was never designed as an energy audit or as a driver for government policy, they have become an important theme in both Welsh and UK Government policy. With targets to drive Minimum Energy Efficiency Standards for homes in the PRS to at least a C by 2030, we believe that their inclusion would add benefit. Current policy on EPC, which focus on a cost benefit approach also addresses the issue of

fuel poverty. While some homes in conservation or period properties, can be exempt from MEES, these will be few and far between so for this reason we disagree with omission of this data set.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Given the age of overcrowding data, we do not believe it adds any real additionality to the housing domain.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

However, the RLA supports proposals to drop the lack of central heating indicator, which is derivative of Census data and as such adds no additionality to previous WIMD data. The number of off grid properties is now relatively low which will make the data sparse.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

The RLA would like to call for improvements to the methodology in the collection of homelessness data. In order to tackle the problem, evidence is essential for targeting resources and understanding the route of the problem. At first glance, the WIMD would appear a useful tool in understanding the problem of homelessness at small geography level. However, while we are calling for a greater evidence-based approach to homelessness data, we do not feel homelessness should be included in the index for purely statistical purposes. The main issue is the nomadic nature of homeless people who may be sofa surfing or rough sleeping in areas they are not originally from making the data disproportionate for town and city centre areas or any areas with high concentrations of homeless people.

### **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

We believe that the synergy between lack of access to waste disposal and industrial sites to multiple deprivation is relatively weak. Therefore, we support the proposal to drop this indicator and replace with access to green space.

Access to green space has a strong synergy with good quality mental health and supports cohesive communities. For these reason, we are very supportive of the measures inclusion within the physical environment domain.

### **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

Given that there are no specific developments to new or additional measures within the community safety domain, the RLA recognise improvements will be met from improved compliance with the National Crime Recording Standard (NCRS), leading to the recording of a greater proportion of crimes coming to the attention. We would support measures to

assess the fear of crime rather than just the overall experience of crime from the British Crime Survey although we appreciate this is influenced by a number of external factors.

## **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

The RLA agrees that the income and employment domain has the most impact in multiple deprivation. Accordingly, these domains should have the highest weighting at 23.5%. However, given the improvements to housing measures, we would recommend a greater weighting of the housing domain from 5% especially given the synergy of good quality housing and good overall well-being.

## **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

The RLA recognises that there are issues of poverty and deprivation in rural areas where the extent of multiple deprivation is masked within the index. We would be supportive of measures to draw out the impact of rural poverty within the index.

We also believe that transport is an important factor in tackling social isolation and poverty and would be supportive of a transport domain within the index. While this might be reliant on Census data, factors such as access to a car could be useful.

The RLA would once again like to thank you for the opportunity to take part in this consultation. We look forward to the publication of the data and in using it within our work.

## **23. Royal College of Nursing**

### **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

We welcome the proposed new indicator on reception class children who are of unhealthy weight. Obesity in children is a major cause for concern with more than a quarter of children are overweight or obese in their first year of primary school. Public Health Wales NHS Trust has noted that “reception age children are significantly more likely than the Welsh average to be obese, if they live in areas of higher deprivation.” While obesity in children may be more prevalent than underweight children, it is important to include the latter as part of the indicator, and that is why we welcome that the indicator cover underweight, overweight and obese children.

It is also important to note that height as well as weight needs to be measured to calculate a child's growth. Low weight and height in a child is an indicator of failure to thrive which would need further medical investigation. Causes of failure to thrive can be medical or as a result of deprivation and/or neglect. Consideration should therefore be given as to whether additional focus on height as well as weight could be included.

Consideration should also be given as to whether physical activity/inactivity of children is included as an indicator. Physical activity levels are as significant as weight measures in terms of general physical and mental well-being and therefore provide valuable insight into population health.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

The prevalence of chronic disease is an important indicator of deprivation both in its own right, and due to the fact that those living with chronic conditions are likely to incur greater living expenses, rely more on public services and be more limited in life opportunities. It is important therefore that the right source of data is found to measure the prevalence of chronic conditions accurately.

The accuracy and usefulness of data relies on consistent and accurate coding. A specified and mandated GP coding system across Wales would have a significant impact on the quality of data collected and being able to compare like with like. This should not be an impossible aspiration to achieve.

The prevalence of co-morbidity may be an additional or alternative approach since co-morbidity of chronic conditions increase the likelihood of limiting life expectancy and quality.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Including a new indicator on mental health is very much welcomed. Prescribing data could be used as a useful proxy for mental health disorders in Wales. However this prescribing data would need to include social prescribing or note this as a separate indicator.

Other meaningful indicators would be uptake of CBT/mindfulness or other talking therapies in primary care or referral to secondary mental health care services. This data should be available from GP systems

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

We agree with proposals to refine the mortality indicator and use the premature death rate as the indicator. As is noted in the document, this data is likely to be more relevant to health deprivation than the indicator previously used.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **1**

A measure of mental health - **2**

It may be worth considering why mental health measures are being considered separately from chronic conditions? It may be simpler to quantify the diagnosis of poor mental health through the GP system rather than through its varying forms of treatment.

## 24. Cyngor Gwynedd

### Trosolwg

- Cwestiwn 1 – A oes gennych unrhyw farn ar flaenoriaeth archwilio y ffynonellau data newydd isod ar gyfer MALIC 2019 (fel y disgrifir yn adran 2 o'r ymgynghoriad)?
  - Incwm isel aelwydydd
  - Pwysau afiach ymhlith plant
  - Cyflyrau iechyd meddwl a chronig wedi'u cofrestru â meddyg teulu
  - Addysg a sgiliau blynyddoedd cynnar
  - Symud ymlaen I Addysg Uwch
  - Mynediad at fannau gwyrdd naturiol
  - Mynediad at fand eang cyflym iawnRhowch eich sylwadau os gwelwch yn dda:

Teimlwn ei fod yn bwysig iawn fod pob ffynhonnell data newydd yn cael yr un flaenoriaeth er mwyn chwilio am ddata newydd gan fod pob un yn bwysig. Mae angen cydweithio efo pobl sydd eisioes yn defnyddio rhai o'r data rydych wedi crybwyll neu wedi ymchwilio i fewn i defnyddio'r data yn barod i weld beth yw'r manteision ac anfanteision o defnyddio'r data ac os ddylid eu cynnwys o gwbl.

### Maes Incwm

- Cwestiwn 2 – A oes gennych unrhyw sylwadau ynglŷn â'r prif gynigion ar gyfer dangosydd amddifadedd incwm yn unol â mynegeion blaenorol, ar sail data 2016-17, ar gyfer MALIC 2019? Rhowch eich sylwadau os gwelwch yn dda:

Teimlwn fod cyflogau isel yn broblem fawr mewn ardaloedd ymylol, ac nad yw hynny'n cael ei adlewyrchu'n deg yn y Parth Incwm ar hyn o bryd. Mae awgrym hefyd fod llai yn hawlio budd-daliadau mewn ardaloedd gwledig oherwydd ffactorau megis stigma a difyg cyngor lleol.

Mae setiau data megis 'Annual Survey of Hours and Earnings (ASHE)' y Swyddfa Ystadegau Gwladol (ONS) a data masnachol 'Paycheck' cwmni CACI yn tueddu i adlewyrchu hyn.

- Cwestiwn 3 – A fyddai'n ddefnyddiol i ddangosydd amddifadedd incwm tebyg fod ar gael ar wahân i ganiatáu am gymharu ag ardaloedd bach yn Lloegr (data 2015-16)? Rhowch eich sylwadau os gwelwch yn dda:

Nid ydym yn tueddu i gymharu gydag ardaloedd Lloegr ar hyn o bryd, ond efallai bod hyn i'w wneud oherwydd y data sydd ar gael yn hytrach na bod ni ddim eisiau gallu cymharu. Dwi'n siwr y bysem yn ffeindio'r data yn ddefnyddiol, ond nid ydym yn ystyried hyn yn flaenoriaeth o gymharu â pethau eraill sydd angen ei ystyried ar gyfer y MALIC nesaf.

- Cwestiwn 4 – A oes gennych unrhyw sylwadau ynglŷn ag ychwanegu ail ddangosydd ar gyfer aelwydydd ag incwm isel (ar sail canlyniadau ymchwil y Swyddfa Ystadegau Gwladol), yn amodol ar ystyriaethau ansawdd? Rhowch eich sylwadau os gwelwch yn dda::

Buasem yn croesawu'r cynnig yma. Mae'r ONS wedi sôn ers blynyddoedd bellach eu bod yn datblygu amcangyfrifon incwm ardal fach ond nid ydym yn gallu gweld fwy o ddatblygiad arno ar y wefan – dim ond un set o ddata a gyhoeddwyd ychydig o

flynyddoedd yn ôl. Y gobaith yw y byddem yn gallu defnyddio'r data yma yn hytrach na data CACI yn y pen draw.

## **Maes Cyflogaeth**

- Cwestiwn 6 – A oes gennych unrhyw sylwadau ynglŷn â'r prif gynnig ar gyfer dangosydd amddifadedd cyflogaeth yn unol â mynegeion blaenorol, ar sail data 2016-17, ar gyfer MALIC 2019? Rhowch eich sylwadau os gwelwch yn dda:

Credwn y dylir roi sylw agosach i 'dan-gyflogaeth' ('underemployment') e.e. pobl sy'n gweithio rhan amser ond eisiau gweithio llawn amser, pobl sydd ddim yn gwneud llawn defnydd o'u cymwysterau, ayb. Deallwn fod hyn yn anodd ar y lefel leol ar hyn o bryd, ac felly nad yw'n debygol o fod yn bosib ar gyfer MALIC 2019, ond mae'n sylw rydym wedi sôn amdano eisioes ac yn sylwad a wnaethom pan roeddech yn ymgynghori ar MALIC 2014. Ond, efallai ei fod yn fater i'w ystyried ar gyfer y MALIC canlynol. Byddai ehangu ar faint y 'Labour Force Survey' (ONS) yn un ffordd o gynhyrchu amcangyfrifon (ar sail y cwestiwn 'eisiau gweithio mwy / llai o oriau').

Byddai hefyd yn syniad rhoi ystyriaeth i effeithiau'r economi tymhorol ar lefelau cyflogaeth.

- Cwestiwn 7 – A fyddai'n ddefnyddiol i ddangosydd amddifadedd cyflogaeth tebyg fod ar gael ar wahân i ganiatáu am gymharu ag ardaloedd bach yn Lloegr (data 2015-16)? Rhowch eich sylwadau os gwelwch yn dda:

Nid ydym yn tueddu i gymharu gydag ardaloedd Lloegr ar hyn o bryd, ond efallai bod hyn i'w wneud oherwydd y data sydd ar gael yn hytrach na bod ni ddim eisiau gallu cymharu. Dwi'n siwr y bysem yn ffeindio'r data yn ddefnyddiol, ond nid ydym yn ystyried hyn yn flaenoriaeth o gymharu â pethau eraill sydd angen ei ystyried ar gyfer y MALIC nesaf.

## **Maes Iechyd**

- Cwestiwn 9 – A oes gennych unrhyw sylwadau ynglŷn â'r dangosydd newydd arfaethedig ar gyfer plant dosbarth derbyn â phwysau afiach? Rhowch eich sylwadau os gwelwch yn dda:

Rydym yn cytuno gyda'i gynnwys.

- Cwestiwn 10 – A oes gennych unrhyw sylwadau ynglŷn â dangosydd newydd arfaethedig ar gyfer cyflyrau cronig? Rhowch eich sylwadau os gwelwch yn dda:

Rydym yn cytuno gyda'r awgrym i geisio cynnwys y canlynol yn y MALIC 2019 neu i'r dyfodol os yn bosib ac yn addas:

- data presgripsiynau,
- gordewdra ymhlith plant,
- mynychder clefydau cronig wedi'u diagnosio.

- Cwestiwn 11 – A oes gennych unrhyw sylwadau ynglŷn â dangosydd newydd arfaethedig ar gyfer ieched meddwl? Rhowch eich sylwadau os gwelwch yn dda:

Credwn y bod angen cynnwys rhywbeth fel hyn, ond mae'n siwr fod yna pobl sy'n fwy cyfarwydd efo'r data i rhoi barn arno na ni.

- Cwestiwn 12 – A oes gennych unrhyw sylwadau ynglŷn â'r cynnig i ddiwygio'r dangosydd marwoldeb i fod yn un ar gyfer marwoldeb cyn pryd? Rhowch eich sylwadau os gwelwch yn dda:

Hyn yn gwneud synnwyr o ran dangos amddifadedd.

- Cwestiwn 13 – Pa drefn flaenoriaeth fydddech chi'n ei rhoi ar ddatblygu mesur o blant dosbarth derbyn â phwysau afiach, cyflyrau cronig neu iechyd meddwl ar gyfer MALIC 2019? Rhestrwch 1, 2 neu 3 (1 yn flaenoriaeth uchaf; 3 blaenoriaeth isaf)

Plant dosbarth derbyn â phwysau afiach - 3

Mesur o gyflyrau cronig - 1

Mesur o iechyd meddwl - 2

Meddwl bod ymchwilio i fewn i data cyflyrau iechyd a iechyd meddwl yn bwysig oherwydd mae'n data enfawr sydd ddim wedi cael llawer o fynediad iddo yn yr sector cyhoeddus ac buasem yn gallu gwneud llawer o ddefnydd ohonno – nid oes dim byd tebyg iddo neu data procsi ar gael.

- Cwestiwn 14 – A oes gennych unrhyw sylwadau eraill ynglŷn â'r cynigion ar gyfer y maes iechyd? Rhowch eich sylwadau os gwelwch yn dda:

Siomedig eich bod wedi penderfynu i beidio cynnwys elfen o 'unpaid care' – ond gan ellir hyn fod yn faes sy'n cael effaith mawr ar bywydau pobol heb o reidrwydd ymddangos o fewn ystadegau iechyd yn syth, ond ellir arwain at dirywiad dros amser. Ellir fod yn ofalwr ifanc cael effaith anffafriol ar eu addysg. Mae hyn yn ffordd 'reactive' iawn i ystyried effaith gofalu ar bobol (sy'n effeithio yr amser sydd ganddynt, a o ganlyniad ellir cyfyngu'r oriau ellir weitho ac yn cyfrannu at tlodi), yn enwedig fod hwn yn faes sy'n derbyn fwy fwy o sylw gan y Llywodraeth eu hunain. Cynnig fod hwy angen 'chydig fwy o rhesymeg dros ei wrthod yn y ddogfen ac efallai i edrych i mewn i'r rhesymau i'w gynnwys ychydig yn ddyfnach?

## Maes Addysg

- Cwestiwn 15 – A oes gennych unrhyw sylwadau ynglŷn â'r cynnig i gynnwys dangosyddion sy'n deillio Asesiadau o Ddisgyblion pan fyddant yn Dechrau yn y Dosbarth Derbyn a data deilliannau'r Cyfnod Sylfaen? Rhowch eich sylwadau os gwelwch yn dda:

Cytuno.

- Cwestiwn 17 – A oes gennych unrhyw sylwadau ynglŷn â'n dull arfaethedig o lunio dangosydd ar gyfer Cyfran y bobl 18-19 oed nad ydynt yn mynd i addysg uwch? Rhowch eich sylwadau os gwelwch yn dda:

Croesawu ymchwilio i fewn i data newydd. Meddwl bod data MALIC 2014 braidd yn hen erbyn rwan.

- Cwestiwn 18 – Pa flaenoriaeth fydddech chi'n ei rhoi i ddatblygu'r mesurau canlynol: Asesiadau o Ddisgyblion pan fyddant yn Dechrau yn y Dosbarth Derbyn, neu



ddangosydd cyfran y bobl nad ydynt yn mynd i addysg uwch yn 18-19 oed?  
Nodwch 1 neu 2 (1 am flaenoriaeth uwch; 2 am flaenoriaeth is)

Asesiadau o Ddisgyblion pan fyddant yn Dechrau yn y Dosbarth Derbyn - 2

Cyfran y bobl 18-19 oed nad ydynt yn mynd i addysg uwch - 1

Meddwl fod yna fwy o angen i ymchwilio i fewn i data sydd ar gael ar gyfer dangos pobl nad ydynt yn mynd ymlaen i addysg uwch.

### **Maes Mynediad at Wasanaethau**

- Cwestiwn 20 – A oes gennych unrhyw sylwadau ynglŷn â'r dangosydd newydd arfaethedig ar gyfer mynediad at wasanaethau band eang? Rhwch eich sylwadau os gwelwch yn dda:

Ddim yn siwr os oes angen mesur 30mbps – rydym yn teimlo fod 8mpbs yn ddigonol ar gyfer cael mynediad at wasanaethau. Teimlwn hefyd fod angen edrych ar 'take up' oherwydd nid pawb sy'n gallu fforddio'r rhyngrwyd. Weithiau mae pobl ond yn defnyddio eu ffonau symudol ar gyfer cael mynediad at gwasanaethau, felly bysai'n syniad hefyd edrych ar beth yw mynediad 3g / 4g mewn ardaloedd, ond sbio lle mae pob cwmni ffôn efo mynediad, nid ond rhai cwmnïau yn unig. Meddwl bod angen ail edrych ar y data yma.

- Cwestiwn 21 – A oes gennych unrhyw sylwadau ynglŷn â sut y dylid pwysoli'r dangosyddion ar gyfer amseroedd teithio (i wasanaethau allweddol), a mynediad at wasanaethau band eang ar y cyd ar gyfer sgôr gyffredinol y maes? Rhwch eich sylwadau os gwelwch yn dda:

Annodd dweud gan nad yw'r data fydd yn cael ei ddefnyddio wedi'i benderfynnu eto.

- Cwestiwn 22 – A oes gennych unrhyw sylwadau eraill ynglŷn â'r cynigion ar gyfer y maes Mynediad at Wasanaethau? Rhwch eich sylwadau os gwelwch yn dda:

Cyfle i ychwanegu gwasaneth arall sef lle mae'r cyfrifiadur ar gyfer defnydd cyhoeddus fel sydd ar gael yn yr APS – ddim yn siwr os yw hyn ar gael ar lefel LSOA.

Mae'n debyg y bydd trigolion ardaloedd gwledig sy'n ddibynnol ar gludiant cyhoeddus yn fwyfwy ynysig dros y blynyddoedd nesaf oherwydd toriadau i wasanaethau bws. Efallai y byddai'r gallu i wahaniaethu rhwng amser teithio gyda chludiant cyhoeddus a gyda chludiant preifat yn ddefnyddiol er mwyn gallu mesur newid wrth baratoi'r MALIC dilynol? Byddai cynnwys y math wybodaeth fel rhan o'r 'dadansoddiad dangosyddion' yn syniad da.

### **Maes Tai**

- Cwestiwn 23 – A oes gennych unrhyw sylwadau ynglŷn â'n cynigion i gynnwys model o ddangosydd ar gyfer ansawdd tai gwael yn y maes tai, os yw'n bosibl? Rhwch eich sylwadau os gwelwch yn dda:

Croesawu data newydd.

- Cwestiwn 25 – A oes gennych unrhyw sylwadau ynglŷn â'n cynnig i BEIDIO â chynnwys dangosydd wedi'i seilio ar ddata Tystysgrif Perfformiad Ynni yn y maes tai, ar sail ansawdd data isel? Rhwch eich sylwadau os gwelwch yn dda:

Dangosydd effeithlonrwydd ynni. Rydym yn deall fod cyfran o'r Tystysgrifau Perfformiad Ynni ('EPC') wedi dyddio, gyda rhai tai wedi cael mesurau arbed ynni ayb yn dilyn y gwerthiannau. Serch hynny, credwn y gall yr EPCs fod yn sail rheysmol ar gyfer dangosydd ychwanegol yn y maes tai, ac rydym felly'n cefnogi ei gynhwysiad o fewn y MALIC. Er bod rhai pobl yn dewis i fyw mewn tŷ gyda cyfradd perfformiad ynni gwael, mewn ardal fel Gwynedd, nid oes gan pobl llawer o ddewis gan fod y stoc tai mor hen.

- Cwestiwn 26 – A oes gennych unrhyw sylwadau ynglŷn â'n cynnig i barhau i ddefnyddio gorlenwi yn ddangosydd ar gyfer amddifadedd tai? Rhowch eich sylwadau os gwelwch yn dda:

Cytuno.

- Cwestiwn 27 – A oes gennych unrhyw sylwadau ynglŷn â'n cynnig i ddileu'r dangosydd "diffyg gwres canolog" fel mesur o amddifadedd tai? Rhowch eich sylwadau os gwelwch yn dda:

Diffyg Gwres Canolog. Credwn fod y math o system wresogi yn bron gymaint o broblem â diffyg gwres canolog. Mae 'Fuel Poverty Detailed Tables' yr Adran Ynni a Newid Hinsawdd (DECC) yn awgrymu fod y math o system wresogi yn wahaniaethwr pwysig wrth ystyried 'todi tanwydd'. Mae Tabl 23 yn awgrymu fod gan aelwydydd sy'n ddibynnol ar olew neu danwydd solid tebygolrwydd cymharol uchel o fod mewn toldi tanwydd. Mewn egwyddor, mae trigolion yr aelwydydd hynny'n gorfod gwario mwy ar gadw'n gynnes. (Mae hyn hefyd yn cydfynd â'r negeseuon o'r adroddiad 'Living in Wales 2008 – Fuel Poverty Statistics' sydd wedi ei baratoi i'r Uned Ddata gan BRE.) Awgrymwn yn gryf felly bod angen cynnwys dangosydd o'r math yn y MALIC (yn lle'r hen ddangosydd mwy syml o 'ddiffyg gwres canolog'). Byddai Tabl 'QS415EW' o Gyfrifiad 2011 yn ffynhonnell data manwl a dibynadwy.

- Cwestiwn 28 – A oes gennych unrhyw sylwadau eraill ynglŷn â'r cynigion ar gyfer y maes Tai? Rhowch eich sylwadau os gwelwch yn dda:

Angen cyfarch yr mater o fforddiadwyedd tai o gymharu a cyflogau yn yr ardal.

### **Maes yr Amgylchedd Ffisegol**

- Cwestiwn 29 – A oes gennych unrhyw sylwadau ynglŷn â'n cynigion i symleiddio'r is-faes ansawdd aer? Rhowch eich sylwadau os gwelwch yn dda:

Gwneud synnwyr.

- Cwestiwn 30 – A oes gennych unrhyw sylwadau ynglŷn â'n cynigion i gynnwys dangosydd sy'n mesur diffyg agosrwydd at fan gwyrdd hawdd ei gyrraedd yn hytrach na dangosydd sy'n mesur agosrwydd at safleoedd gwaredu gwastraff a safleoedd diwydiannol? Rhowch eich sylwadau os gwelwch yn dda::

Ddim yn siwr sut mae'r data yn mynd i fod yn gyfredol – anodd rhoi sylw nes ydym wedi cael mwy o wybodaeth am y data.

### **Pwysoli y Meysydd**

- Cwestiwn 34 – A oes gennych unrhyw sylwadau ynglŷn â'r dull arfaethedig o bwysoli meysydd ym MALIC 2019? Rhowch eich sylwadau os gwelwch yn dda:

Cytuno, dibynol ar y manylion a beth yw'r data a fydd yn cael ei gynnwys yn y MALIC terfynol.

### **Camau Nesaf**

- Cwestiwn 35 – A oes gennych unrhyw sylwadau eraill ynglŷn â'r cynigion ar gyfer MALIC 2019 (nad ydynt wedi'u trafod eisoes) neu ar gyfer diweddariadau MALIC yn y dyfodol? Rhowch eich sylwadau os gwelwch yn dda:

Oes. Mae 'amddifadedd gwledig' angen ei adlewyrchu'n well o fewn y MALIC. Er mwyn gwneud hynny (ac i grynhoi rhai o'r sylwadau blaenorol), awgrymwch y byddai'n werthfawr rhoi mwy o sylw i'r canlynol o fewn y MALIC:

- mwy o bwysau ar y parth mynediad i wasanaethau o fewn y Mynegai Cyflawn,
- incymau aelwyd / cyflogau isel yn cael gwell ystyriaeth o fewn y parth incwm (yn hytrach na chanolbwyntio ar gyfraddau hawlio budd-daliadau a chredydau treth unig),
- effeithiau tan-gyflogaeth a'r economi tymhorol yn cael ystyriaeth o fewn y parth cyflogaeth,
- y math o system wresogi ac effeithlonrwydd ynni yn cael eu hystyried o fewn y parth tai.

Fel arall, hoffwn ni ail ddatgelu'r pwyntiau sylfaenol ynglŷn â gwendid cyffredinol y MALIC:

1. Pam fod dwysedd daearyddol yn fwy pwysig na graddfa amddifadedd mewn ardal Cyngor?
2. Y camddefnydd rheolaidd o'r mynegai i ddyrannu adnoddau. Mae angen bod yn glir ynglŷn â phwrpas y MALIC a pha bryd mae'n briodol i ddefnyddio'r MALIC.

Fel arall, rydym yn meddwl fod hi'n allweddol bwysig fod y data yma ar gael i lefelau LSOA (lle yn bosib). E.e. mae'r llywodraeth eisoes yn rhoi peth o'u data ar Stats Wales mewn ffurf OData sy'n hawdd iawn i bobol sy'n y maes dadansoddi data ei lwytho yn uniongyrchol, a sicrhau fod ni yn defnyddio'r datasets mwyaf diweddar pob tro. Fasa parhau gyda'r ymarfer da yma yn cael ei groesawu

## **25. Martin Fidler Jones, Tenovus Cancer Care**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

Tenovus Cancer Care would prioritise new data sources that relate to the health domain. These would, in no particular order, be unhealthy weight in children, GP-registered chronic and mental health conditions, access to natural green spaces and low household income.

### **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Tenovus Cancer Care agrees with this proposal, particularly in light of the period over which Universal Credit is rolled-out.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes – although we appreciate the specific reasons for WIMD not being directly comparable to its equivalent in England, having a limited set of comparable indicators would be very helpful. We can then make more precise responses and predictors of health related inequalities with comparable sites elsewhere.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

Relative poverty is a key indicator of a number of co-morbidities related to cancer. Therefore we would warmly welcome an additional indicator on households in low income.

### **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Maintaining consistency with previous indices improves comparability. Therefore Tenovus Cancer Care supports this proposal.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Yes – although we appreciate the specific reasons for WIMD not being directly comparable to its equivalent in England, having a limited set of comparable indicators is very helpful.

### **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

This would be positive inclusion that would not only allow direct measurement of wider health issues in said community but can also track broader trends related to issues such as advertising and availability of junk food, or access to green space.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

While the acute element of cancer is already covered a broader range of indicators related to cancer as a chronic condition would be helpful. For example, mental health is increasingly a cause of concern for those living with and beyond cancer so this would be helpful.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

As above.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **1**

A measure of mental health - **3**

In order of relevance to preventing cancer, Tenovus Cancer Care would prioritise (1) chronic conditions, (2) unhealthy weight in children, (3) mental health.

## **Education Domain**

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

Although the inclusion of HE-related indicators is positive it might be worthwhile considering broadening out this indicator to include Further Education and Apprenticeship-related indicators too.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **1**

Proportion of people not entering higher education aged 18-19 - **2**

Given the larger data set Tenovus Cancer Care would prefer On-Entry Assessments of Pupils in Reception Class.

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

Broadband services tend to require intrusive in-property physical infrastructure and to be relatively 'sticky' in nature with minimum contracts for access to services. As a result, while broadband may be available in an area it may not be taken up on the margins of deprivation as a result of the commitment, contractual and architectural needed to access broadband services. Indeed uptake of broadband services might be a better measure of deprivation, or lack thereof, since it more accurately reflects the financial ability to access services. It would also highlight secondary issues related to agency such as tenant vs owner-occupier status, with the former being more vulnerable to not being able to access broadband if structural changes are required to the property in the course of its installation.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

Tenovus Cancer Care are currently funding PhD research into producing an algorithm to map the impact of our mobile chemotherapy units by measuring them against demographics, static cancer sites and road networks etc. While this research is yet to be published, using a similar principle to map travel times to key services could be a viable solution.

However as stated above, we believe uptake of broadband services, rather than availability thereof, would be a more suitable indicator of relative deprivation.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

While we accept the statistical rationale for discounting the viability of including lack of access to mobile data 4G services there is an argument that lack of uptake of mobile data services may be a greater risk to deprivation than lack of access to broadband services. Because of the lower costs of entry and access (both physical and financial) to mobile services they could be considered more sensitive to changes in deprivation levels and therefore a better indicator overall.

## **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

Poor housing quality is a useful indicator for measuring preventable cancer co-morbidities. Therefore Tenovus Cancer Care supports the inclusion of this indicator.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

Tenovus Cancer Care would support the inclusion of the EPC if sufficient data were available to make it a viable indicator. However in the absence of a robust dataset, we endorse the decision not to include it.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Although this data, derived from the 2011 Census is now a little dated, we would support its continued inclusion on the basis of consistency, with a presumption that a refreshed data set would be available following the 2021 Census.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

Echoing our comments regarding access to broadband, we support the withdrawal of the indicator related to access to, or lack thereof, central heating. We support the argument made in the guidance that having central heating is no guarantee of an ability to use it. We suggest a similar rationale is applied to access to broadband services, as discussed above.

## **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

Poor air quality is known correlate to cancer, particularly lung cancer. The International Agency for Research on Cancer (IARC), a World Health Organisation body, has classified outdoor air pollution as a cancer-causing agent (carcinogen).

However the relationship is complex and, while taking air quality in isolation in the context of public health policy prescriptions related to cancer would be inappropriately crude, simplifying the air quality subdomain would not improve the ability for this indicator to be a serviceable yardstick of exposure to cancer-related co-morbidities. This in turn would reduce the data’s value by lacking the sufficient depth behind it to enable the data could be interrogated fully if required.

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

A sedentary lifestyle is a leading cause of obesity<sup>1</sup> and the link between being overweight, or obese, and risk of developing cancer is well established.<sup>2</sup> Therefore Tenovus Cancer Care would be supportive of proposals to measure accessible green space.

## **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

Given our charitable aims Tenovus Cancer Care would place a priority on health outcomes and the indices attached to them. However a number of other indices have co-morbidities with cancer and the challenges that it brings. For example poorer education and child nutrition, lower activity levels and greater income inequality all tend to more obesogenic environments that risk higher incidence of cancer while access to service. Lower service-access rates and greater income inequality tend to lower detection and diagnostic rates, and thus more advanced cancers that in turn significantly decrease an individual’s chances of surviving a cancer diagnosis. Given the complex relationship between all these factors, we are broadly content with the proposed weightings.

## Next Steps

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

The mapping tool for WIMD2014 has been invaluable however while it is possible to search via postcode on the home page, this functionality is lost once the mapping tool itself is entered. Enabling this functionality throughout the site would improve its accessibility.

While we accept the methodological basis for using Lower Super Output Areas as the foundation for the mapping tool, it would nevertheless be helpful to view the map by political ward. We would suggest County Borough Council ward as the basis for this.

## 26. Carmarthenshire County Council

### Overview

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

These are all helpful.

Mental health is increasing amongst a wide range of age groups. The indicator would be able to highlight specific areas that may be higher, enabling further work to take place to explore root causes. This would be beneficial to impact change.

### Income Domain

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

The proposed indicators will capture the relevant information.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

It is a good idea to have more data.



The addition will provide further information that will be beneficial when directing services to the areas most in need.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

It is important to see the changes from individuals to merged payments.

## **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

The proposed indicators will capture the relevant information.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Yes, it would be useful as a comparison tool.

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

This is important, and a good idea to include data from the Child Measurement Programme, and can understand the thought behind using only Obese figures rather than Overweight or Obese as research suggests that children who were classified as being overweight while in reception year were more likely to achieve a healthy weight by Year 4 than those who were classified as obese.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

More data is useful

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

There should be an indicator as this could encourage more services and less waiting times for individuals to access support. Although difficult to define and essential not to pigeon hole.

As mentioned in the document, the population receiving prescribed drugs for depression/ anxiety and psychosis would be useful although can understand the issues highlighted in doing this. As well as the number of hospital

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - 2

A measure of mental health - 1

The priority order should be; Mental Health, Chronic Conditions, Unhealthy weight

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

The indicator around weight should ideally be extended rather than just prioritisation on young children (although agree that this is a key stage in life), but unhealthy weight can continue throughout childhood, adolescence and adulthood. Interesting to know the link between poor health and Universal Credit amongst adults especially women. We would like to see something on substance misuse, perhaps hospital stays related to alcohol and drug misuse.

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

The On Entry Assessments of Reception age pupils is a difficult measure to use. There is no threshold for these pupils to meet, making it statistically irrelevant. There is “age appropriate attainment” but as the assessment is a baseline, there are no requirements for pupils to meet a specific outcome.

One suggestion may be to change the indicator by merging it with the Foundation Phase APS. It could then measure the number of pupils achieving age appropriate progress between On-Entry Assessments and End of Foundation Phase. This would be in line with new Education standards for measuring pupil progress.

Unfortunately, one issue is that the 2018 cohort for Foundation Phase was the first to be assessed On Entry and reach the end of phase. Therefore, this measure could not be introduced until after the completion of the 2020 teacher assessments.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

We can understand the rationale of using the core subjects/core aspects of the Capped 9 as an interim. However, using the results in this way is at odds with the spirit in which the Capped 9 was introduced.

Is there a way for a retrospective Capped 9 to be applied to historic data so that we can have a three year average? Also, as 2019 will see the third year of Capped 9 use, is the delay in WIMD for a year an option?

It would be useful to have a measures as this is a critical point in the further education/employment of pupils.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

We agree that NEET could be used in future WIMD as a stronger measure of educational deprivation. Although on initial observation we would support the preferred option to calculate the proportion of people not entering Higher Education at 18-19 we think that Further Education establishments and Careers Wales may be better placed to comment.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator -

Proportion of people not entering higher education aged 18-19 -

There is perhaps greater potential for a good Foundation Phase indicator to have a greater benefit. However, this should fall in line with our suggestions in question 15.

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

We agree that National Tests should not be used in the WIMD which also highlights our general concern that the indicators based on attainment have not yet taken pupil progress into account.

We would like to see data on NEET for aged 18-25 as we are seeing increasing numbers of this age group that are not involved in any meaningful occupation or training (particularly those young people with autism).

It would be useful to have information surrounding the basic skills of children in education.

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

This would be a useful indicator as the primary way of accessing a wide range of services requires effective broadband.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

There could be a split, or the broadband weighted slightly higher.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

As mentioned in question 20, broadband is essential for a wide range of services. However, individuals may still need additional digital support. Without the support individuals may continue to not access services on line.

Transport and access to Health Services is essential but also to other support services or to mobile support services.

Transport infrastructure is a significant issue in accessing services.

Please also see comments under the overarching question 35 below.

### **Housing Domain**

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

We need to get data on this – poor quality is NOT an excuse.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Overcrowding understanding is key.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

Yes – don’t.

Fuel poverty is an issue in the more deprived areas and that the indicator is useful to identify areas that may require additional support.

### **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

Both should be included.

An indicator measuring proximity to green space would be worthwhile. However, the proximity to waste disposal and industrial sites is required as they are two separate measures and emitting it may cause information to be lost.

### **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

Will there be any measures relating to crimes that were committed as a result of substance misuse?

There’s nothing obvious within the details of the proposed or other indicators discussed.

What about including something on Safeguarding?

### **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

Health and Education should be weighted higher, due to their impact on Income and employment.

### **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

Health and Education play a vital role in the employment status and income of individuals and could potentially have an increase in the weighting.

Rural areas.

There should be a formula to establish rurality. It should apply countrywide and the wider UK.

Post codes do not always work well in rural or other areas to establish levels of the access to services/work

E.g. A point system for

How far a household is from a C road - X points

How far a household is from a B road - Y points

How far a household is from an A road - Z points

How far a household is from a dual carriageway.

How far a household is from the nearest motorway junction.

Rurality ( distance from services ) could be defined by C+B+A etc. giving greater weight to C , B , then lesser for A

Using 'as the crow' flies from a postcode to services does not reflect the access issues since there would not be buses on a C road or long farm tracks that have to be travelled before getting to a road. Single track road journeys on winding roads are more costly perhaps. Maybe the journey is twice or three times that of the crow since the road wind around.

How far from the nearest train station with an hourly/ daily train service as it is no good looking at how far from a train station if there is only one train per day. The same applies to buses.

## **27. Denbighshire County Council**

### **Income Domain**

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

We do not require comparison with small areas in England. However, we would like to know the consequences of this comparison? Would it affect future funding allocation?

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

We feel you could more clearly set out what Universal Credit means for future WIMD collections and how it should be applied in WIMD. There could be a way to tackle indicators for uptake of Universal Credit in areas it applies and those areas that have not yet transitioned. We would welcome more information about this to reassure us that there will be a time series available for us to use. This will be particularly pertinent for the publication of yearly indicators.

## **Employment Domain**

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

The prevalence of short term, unpredictable work patterns is resulting in people being in employment but struggling on a low income, and some will be living in poverty. The proposal to include PAYE and self-assessment data is welcome (p22) but you acknowledge that a lack of data at a small area level on job quality and fair employment is unavailable (p26). Will the proposed changes capture the breadth of people (self-employed or otherwise) who have a low income but are not in receipt of benefits?

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

We support the continued inclusion of an indicator of low birth weight. We would however welcome further information about your thinking on a possible shift in future to an indicator of healthy birth weight.

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We agree that there needs to be an indicator of childhood obesity. Is there an argument for measuring obesity in older children? What is the basis for measurement at aged 4/5?

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children -

A measure of chronic conditions -

A measure of mental health -

We support additions on chronic conditions, mental health and premature mortality. On the latter, would it be age-standardised?

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

## **Education Domain**

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

We agree that we need a solution to measuring attainment at KS4. Crucially, it needs to be comparable with the other two indicators so that we can measure progress from KS2 onwards.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

We agree that measuring NEET young people is important and appreciate the challenges in getting an accurate picture.

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

Superfast broadband should not be a priority. Using infrastructure on its own as a proxy for deprivation of access is a misnomer. The issue is not simply about the availability of broadband but take up and other digital exclusion factors. What-is-more, the availability of superfast is increasing and we question the longer term validity and usefulness of measuring superfast as opposed to full fibre or 5G, for instance. Furthermore, it is likely that broadband speeds of 30Mbps will rapidly become inadequate for many businesses and households. You acknowledge that the availability of superfast broadband does not reflect actual use or affordability of access (p42). On this basis the case for including this indicator appears weak.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

In relation to access to services and broadband, we are not convinced these should be weighted together.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

If, following the consultation, broadband is included, we support your recommendation that it has a lower weighting than the travel time indicator.

We would also like to note that the existence of public transport on its own does not tell us whether it is adequate. For instance, in many rural areas public transport exists but it is unable to support night time working/socialisation.

While a relatively minor point in the overall context of WIMD indicators, proximity to food shops – as an indicator of access - could be misleading. We are aware some shops charge more where there is less competition, and, often where food is expensive, income tends to be lower.

### **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

We understand you have previously committed to prioritising housing and fully support this.

We are supportive of the proposal to include housing standards within the housing domain. Poor quality housing has a significant impact on people's health and can have negative implications for the other WIMD domains such as health, educational attainment and employment opportunities.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

We agree with the proposal to include category 1 hazards under the HHSRS calculation as well as a new measure of overall disrepair; both of which should cover the broad issues associated with poor quality housing. We welcome a more holistic measure of the state of the housing stock in a specific area but the formula will need to be carefully considered.

We fully support inclusion of HHSRS data to identify serious defects in buildings that affect occupants' health or safety; particularly so for Category 1 Hazards which have more serious implications. We would argue that it is important to capture wider housing defects which, in themselves do not form category 1 hazards, but can contribute towards very poor housing overall.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

We therefore urge that the proposal not to include EPC data in the housing domain be reconsidered.

The information obtained by Rent Smart Wales since 2014, and the ability to cross reference this with EPC data, may now provide the higher quality data has been previously unavailable.

- Question 27 – Do you have any comments on our proposal to drop the "lack of central heating" indicator as a measure of housing deprivation? Please comment:

We understand the data quality issues associated with EPCs and the query on the importance of lack of central heating. However, removing these aspects could affect future housing renewal schemes and energy projects. Denbighshire County Council has undertaken significant work over the last six years to improve central heating and energy efficiency in our worst LSOAs. We would value the ability to measure the effectiveness of our interventions, which should be reflected in improved performance in future WIMD. This will only be possible if EPC/central heating indicators are retained. (Questions 25 and 27)

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

We note a lack of small area data, but we would like to understand the potential for inclusion of availability of affordable housing and how that has a bearing on deprivation.



## **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

Clearly proximity alone is insufficient.

While it would be useful to have an indicator measuring the proximity of areas to quality green open space (it is a valid indicator and can be used as evidence to justify external funding to provide green infrastructure in deprived communities), the critical factor is the quality of the green space.

Quality of green space is likely to have a large influence on the benefit that residents gain from it. For example, green space that is littered, fly tipped, overgrown, unsafe vs a maintained formal park and gardens with facilities for families. Is quality included in the measure of accessibility?

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

Are beaches included in the definition of accessible green space?

## **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

## **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

Given the importance of good quality housing for people's health and well-being, we support your intention to increase the weighting of the housing domain if you succeed in including modelled data on poor quality housing.

## **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

Loneliness can have serious implications for people's health and well-being; in some cases resulting in additional demand for public services. The National Survey for Wales' headline results (2017/18) found that young people were more likely to be lonely than older people, and that people in material deprivation were much more likely to be lonely than those who weren't experiencing material deprivation. Have you given any consideration to including loneliness in future WIMD?

## **28. Ryan Stokes, Higher Education Funding Council for Wales**

### **Health Domain**

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

We would welcome an indicator of mental health in WIMD 2019. Well-being and health, including mental ill-health is a priority for Welsh Government and HEFCW. However, the consultation document provides limited detail on the two key data sources that may provide indicators of the prevalence of mental health conditions at a small area level. No information provided on whether the data includes children, young people and adults or all age ranges.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children -

A measure of chronic conditions -

A measure of mental health - **1**

We consider a mental health measure important due to the increased number of students presenting with mental health conditions in HE.

### **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

It would seem appropriate to include both these measures, as qualification data for these ages were not previously included in this domain, only for those aged 15. The first dataset mentioned is used to calculate National Indicator 6 and it would seem appropriate for WIMD to be in line with the National Indicators wherever possible.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

This seems like an appropriate replacement for the previous KS 4 achievement indicators.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

We would welcome an indicator on HE entry for all ages over aged 18.

The proposed dataset to be used has a larger geography than LSOA, which is at odds with one of the criteria that WIMD indicators should meet. Allocating the value of an indicator for a larger geography to every LSOA doesn't seem to have been applied within WIMD before, for example, there is no reference to this in guidance in Annex C Allocation of Data

to Lower layer Super Output Areas of the WIMD 2014 technical report  
<https://gov.wales/docs/statistics/2014/141218-wimd-2014-technical-en.pdf>

Continuing to use POLAR 3 data would enable use of the appropriate geography, but would mean using older data, which may also be against one of the criteria WIMD indicators should meet. However there were a number of indicators which use Census 2011 data in WIMD 2014 which continue to be included in WIMD 2019 e.g. in housing, health, education; so using older data is already being proposed. However, POLAR 3 data are older than Census 2011 data covering a period between 2005-06 and 2010-11, and therefore may be considered to be less relevant in 2019.

It would seem appropriate to investigate other potential data sources, but should these not be available in time for inclusion in WIMD 2019, continue to use POLAR 3.

Separately, apprenticeships are a Welsh Government priority and if apprenticeships are promoted there may be an increase in numbers not entering HE, but following an apprenticeship route. An indicator would need to take account of this.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

## On-Entry Assessments of Pupils in Reception Class Indicator - 2

### Proportion of people not entering higher education aged 18-19 - 1

Achievement data for reception class pupils have not previously been included in WIMD, so it could be argued that inclusion of this data source is broadening the age span of the achievement data that are included in WIMD. However, there are currently issues with the data used to look at proportion of people not entering higher education aged 18-19. Dependent on the approach taken to resolve this issue, it may be possible to use older data for proportion of people not entering higher education aged 18-19, and to invest resources in looking into achievement data for reception class pupils for use in WIMD 2019. Pursuing investigation of new sources of data for calculating proportion of people not entering higher education aged 18-19 could be postponed until after WIMD 2019 is released, for use in future iterations of WIMD.

However, if prioritisation of these two indicators means that only one is to be included then data for calculating proportion of people not entering higher education aged 18-19 should be included in order to provide coverage for as broad an age range as possible. Achievement data for other ages are included, and the absenteeism indicator includes the reception class age range.

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

We would support the investigation of developing datasets for calculating NEETs (section 5.4.3) including the linking of education data sources, and the Department of Education's Longitudinal Education Outcomes (LEO) dataset. However there are a number of issues with the LEO dataset dependent on how it is to be used. For example, it takes no account of regional differences in salaries, different routes into particular sectors and is not benchmarked. See <https://wonkhe.com/blogs/leo-and-its-limitations-for-learners/>

Adults with no qualification will be recorded at age of 25, but we are unclear how adults aged 19 to 25 will be taken into account.

## **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

We agree in principle, but it is not clear how the weights are chosen. For instance are they selected empirically or using a set of principles or a robust statistical methodology. It appears that they originate from research conducted at Oxford University <https://gov.wales/docs/statistics/2011/110922wimdweightsen.pdf> but more information on how they are subsequently amended could be made available.

## **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

There are proposals to use survey data as a starting point for an indicator in the Housing domain, and to then model down to small area level.

From information provided at the consultation Webinar, we understand that data modelling is being considered in the housing domain as there are little suitable available data and WIMD users have expressed concern about the data in this domain. The proposed modelling will use census and/or commercial datasets applied to survey data to create estimates at small areas. Using modelled data is something that WG wish to keep to a minimum as data that are a direct measure of deprivation are more desirable, and this is in keeping with the indicator criteria.

However, the indicator criteria do suggest that using modelled data is something that can be considered. Therefore, is there potential to apply the modelling elsewhere? For instance, could this method be applied to other survey data in order to replace indicators based on Census 2011 data, which are becoming out of date, with more up to date data? An example from the education domain is the percentage of adults aged 25-64 with no qualifications, which is taken from Census 2011 data, but could be sourced from the Annual Population Survey if there was a suitable method of modelling the data down to small area level.

It would seem appropriate for WIMD to be in line with the National Indicators wherever possible.

## **29. Vicki Doyle, Caerphilly County Borough Council**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years

- Progression to Higher Education
- Access to natural green spaces
- Access to superfast broadband

Please comment:

We would hope it would be possible for all of the new data sources listed to be investigated, as they all have potential for making a contribution to improving the robustness of WIMD 2019. However, should this not prove possible we suggest that the issues to be prioritised are:

- a) Education and skills in the early years – this will help to ensure that the children in the county borough are given the opportunity for the best start in life
- b) Low household income – we have access to very little information in relation to this and often use proxy measures such as free school meals. With the advent of Universal Credit the need for this type of information is likely to become more prevalent
- c) GP-registered chronic and mental health conditions – this data would be an improvement on what is currently available from the Health Board as it would be available at a lower geographical level, and there is very limited data available from other sources

## **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

We support the proposals for the income deprivation indicator. Whilst the use of more recent data is preferable, the impact of the roll-out of Universal Credit is acknowledged and the approach identified is reasonable in the circumstances.

Therefore, we agree that Universal Credit data should not be included in the 2019 Index or future indices until the full roll-out has taken place across Wales, and the specific issues identified in the consultation document have been addressed.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

A similar income deprivation indicator made available separately to allow comparison with small areas of Wales would be of limited interest to us, as a Welsh local authority that shares no boundaries with English authorities.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

The inclusion of a second indicator on households with low incomes would add an additional perspective to the current data included in the Index, for those households with low incomes that are not claiming benefits or tax credits, given the strong relationship between low income and deprivation. Therefore we support the inclusion of this new

indicator, providing the components that are missing from the underlying sources of income can be included, and all data quality and other concerns have been addressed.

## **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

We support the proposals for the employment deprivation indicator. Whilst the use of more recent data is preferable, the impact of the roll-out of Universal Credit is acknowledged and the approach identified is reasonable in the circumstances.

Therefore, we agree that Universal Credit data should not be included in the 2019 Index or future indices until the full roll-out has taken place across Wales, and the specific issues identified in the consultation document have been addressed.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

A similar employment deprivation indicator made available separately to allow comparison with small areas of Wales would be of limited interest, as a Welsh local authority that shares no boundaries with any English local authorities.

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

We would support the inclusion of a new indicator on reception class children who are of unhealthy weight – being underweight or overweight at this age can be an important measure of deprivation, due to the lack of food or an unhealthy diet.

We would also support the proposal to replace the low birthweight indicator with a healthy birthweight indicator. Low birthweight can be due to a number of factors such as alcohol and smoking use, poor maternal diet etc.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

We support the inclusion of a new indicator on chronic conditions. We are already able to access data by GP Practice Cluster for Asthma, Hypertension, Coronary Heart Disease, Chronic Obstructive Pulmonary Disease, Diabetes, Epilepsy and Heart Failure. Having this data at an LSOA would be extremely useful, however if this data cannot be published at this level it should still be used within the Index if at all possible.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

We support the proposal for a new indicator on mental health. However, we agree that GP practice data is limited due to the propensity of different GPs to prescribe medication for some mental health conditions such as depression and anxiety. In addition, in some

cases prescribing medication is inappropriate and will only treat the symptoms not the causes.

Within our communities there are also a significant amount of individuals with low level mental health issues that would not visit their GP, or who may instead receive social prescribing.

We also recognise that there is a high level of mental health issues amongst our children and young people, but there is a lack of reliable data. It would be extremely useful if this could be considered as a new indicator for future indices.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

We support the proposed change from a mortality indicator to a premature mortality indicator. All the data we currently access from a health inequalities perspective relates to premature mortality under the age of 75, and we agree that this measure is more sensitive to poor health and health deprivation in our population.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **2**

A measure of chronic conditions - **2**

A measure of mental health - **1**

In relation to mental health there is currently a lack of robust data for both children and adults, so any attempt to improve this is welcomed.

In relation to chronic conditions and unhealthy weight in children, these our ticking time bombs within our population. Without reliable data on these issues we will be unable to target those most in need.

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

We would like more consideration to be given to exploring an indicator on life expectancy and healthy life expectancy. This data is available for 2014 at a county borough level, and we would like to suggest that the possibility of modelling this data at an LSOA level be explored.

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

We support the inclusion of an indicator based on teacher assessments conducted during the first six weeks of school for the Foundation Phase, together with the results of teacher assessments for pupils aged 7 in Year Group 2. This will enable the measurement of

educational deprivation for pupils within the Foundation Phase as a whole, at two key points.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

We understand the reasons why it is no longer appropriate to continue to use KS4 indicators that were included in WIMD 2014 (KS4 Capped Points Score and KS4 Level 2 inclusive). We also understand the reasons why Welsh Government is unable to produce three comparable years of 'capped 9 points' score data for WIMD 2019. Therefore we support the introduction of a standalone KS4 indicator and the use of the core components of the 'capped 9 points' score. However, we suggest that consideration is given to using the full 'capped 9 points' score data for future iterations of WIMD.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

We support the preferred option and request that Welsh Government investigate all other potential data sources. If other data sources cannot be identified our preference would be Alternative option 1, as this would at least provide relatively recent data. Due to the number of indicators within the domain this is unlikely to have a large impact on the overall domain scores.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

**On-Entry Assessments of Pupils in Reception Class Indicator - 1**

**Proportion of people not entering higher education aged 18-19 - 2**

It would be preferable to have an indicator for all pupils in Reception Class, rather than on the small number of people aged 18-19 not entering higher education. Additionally, having the ability to target interventions at those Reception Class children who may be educationally deprived will have a bigger impact on their educational progression.

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

In relation to weighting, we support the view that should factor analysis assign low weights to some indicators, consideration should be given to omitting them from the Index. We suggest that any proposed omissions are agreed by the Education Domain Group and the WIMD Advisory Group.

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

We recognise the significant benefits of access to digital services from an inclusion and deprivation perspective, and this is therefore considered to be an important indicator for inclusion in the Index. However, we are concerned that the consultation document states



“the proposed measure does not reflect actual use or affordability of access, which would be too complex to model”.

It is therefore simply a measure of the availability of digital infrastructure at a speed of 30Mbit per second, rather than the number of properties in an area that have subscribed to a superfast broadband product. On this basis, the value of the information in respect of deprivation is somewhat limited.

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

We support the idea that the proposed new indicator on access to broadband services has a lower weighting than the indicator on travel time to key services, due to the issue raised in response to Q20 of use of broadband services rather than access to. We agree that the decision on weighting should not be made until coverage is known on the areas affected by lack of access. The exact weighting should be agreed by the Access to Services Domain Group and the WIMD Advisory Group.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

We welcome the work being undertaken with the WISERD team on a possible new methodology for assessing service accessibility, and look forward to finding out whether this would be a viable alternative to the current approach.

## **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

We agree that the previous indicators on overcrowding and the lack of central heating are insufficient to measure housing deprivation. There are concerns about the level of data that is available through the Housing Health and Safety Rating System to inform modelling at a local level. The proposed methodology discussed in the consultation document is limited at this stage.

The consultation document also highlights that there is an overlap between the HHSRS and WHQS and therefore, depending on the date that the data is collected and modelled, there may be some Category 1 Hazard properties in the HHSRS that could have been rectified through WHQS.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

It is important that any indicators do not measure the number of properties at an LSOA level that have met the WHQS at a point in time, as each housing provider in Wales will approach WHQS differently. Within Caerphilly county borough, the phased approach to achieving the WHQS has seen internal and external property improvements addressed under separate contracts with different timescales. Whilst a significant proportion of the

WHQS works have been undertaken, properties will only meet the WHQS once all 42 elements have been achieved. Some of these elements (such as location within a safe and attractive environment) will be addressed later in the programme, even though the physical elements that mean a house is in a good state of repair have been achieved. A snapshot of where the work is at a certain point in time will be misleading, given that the WHQS target is 2020.

Given that the WHQS will address housing in the social sector, this should (in theory) mean that all social housing will be fit for purpose by 2020. Therefore, in future should indicators focus instead on private sector housing conditions across LSOAs, instead of the social sector.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

We agree that currently the quality of EPC data is not sufficiently robust. However, we recommend that this indicator is considered for inclusion in future indices.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Whilst the indicator on overcrowding is now significantly out of date as it is 2011 Census data, we agree that this indicator should be retained for WIMD 2019.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

We support the proposal to remove ‘lack of central heating’ as a measure of housing deprivation. This was included in WIMD 2014 due to the lack of alternative data sources. However, the additional data sources proposed in the consultation document will offer a significantly improved measure of housing deprivation and the condition of homes.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

Should it be possible to include the new Housing indicators proposed in the consultation in WIMD 2019, we would support the increased weighting of the Housing domain in the Overall Index. We suggest that any revised weighting between the domains is approved by the Housing Domain Group and the WIMD Advisory Group.

## **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

We support the proposal to simplify the Air Quality sub-domain. The three indicators highlighted in the consultation document as those identified as potentially having the biggest impact on the health of our population.

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

We support the proposal to include an indicator on proximity to accessible natural green space, as we recognise the benefits of access to open space on the well-being of our residents. The definition of accessible open space should reflect Technical Advice Note 16: Sport, Recreation and Open Space (2009). The benchmark standards are not only based on distance to a natural greenspace (300m) but also the total amount of open space per 1,000 population.

We have a number of specific concerns regarding what constitutes accessible green space:

- a) the minimum size of the green space
  - b) whether it is truly accessible (we would not class allotments as open space, for example, and river corridors can be inappropriate irrespective of ownership)
  - c) the use of 'as the crow flies' measurement
- Question 31 – Do you have any views on the proposed weighting within this domain? Please comment:

The proposed weighting of the three indicators suggested for this domain seem appropriate.

### **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

We suggest that the non-inclusion of domestic abuse incident data will have a detrimental impact on the community safety domain.

Welsh Government policy covers domestic abuse, FGM, forced marriage, honour based violence and sexual violence. None of the violent crime indicators are specifically tracking violence against women. This is an oversight and despite the data validity issues this is the wrong direction of travel for WIMD. Domestic abuse crimes should be a valid dataset, even if incidence recording is not consistent, and likewise the reporting of FGM. A larger proportion are not reported to police, as stated, but to remove domestic abuse incidents from of WIMD is a backwards step. We suggest that the focus should be on encouraging Police Forces in Wales to properly record and report these crimes. Additionally, without considering geographical disparities in the level of incidences of this crime type there can be no targeted encouragement to report, only whole population messages.

### **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

We recognise that should the additional data sources identified in the consultation document all come to fruition, there will be a need to revisit the weighting of the Overall Index. We support the suggestion to retain the highest relative weighting of the Income and Employment domains in relation to the other domains.

We support the suggestion that should the Housing domain be improved by the addition of the new indicators suggested, that the weighting of this domain be increased. However,

we suggest that the Health and Education domains are still given a high priority in the Index, and that the weighting of the Income and Employment domains may need to be reduced slightly to accommodate increased weightings in other domains.

## **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

We would hope that Welsh Government will commit to fully investigating all the new data sources discussed in the consultation document, and bring as many of these into the Index as is possible for the 2019 iteration. We would also hope that the Welsh Government continues to investigate those that cannot be used in the 2019 Index, with a view to inclusion in future iterations.

## **30. Rhodri Edwards, Fields in Trust Cymru**

### **Physical Environment Domain**

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

Fields in Trust Cymru is the only national organisation which operates throughout Wales to champion and support parks and green spaces by protecting them for people to enjoy in perpetuity. Fields in Trust believes that access to parks and green spaces are a necessity for healthy, happy communities positively impacting on a range of key wellbeing issues while also benefitting the environment.

Earlier this year Fields in Trust published new research which quantifies that parks and green spaces contribute £1.6 Billion per year to Wales's health and wellbeing and using parks and green spaces equates to better general health which translates into a £5.2million saving to the NHS Wales per year because of fewer GP visits. The research also determined the total economic value of parks and green spaces to an individual with the value increasing significantly for lower socio-economic groups (Fields in Trust: 'Revaluing Parks and Green Spaces: Measuring their economic and wellbeing value to individuals', 2018).

Fields in Trust Cymru therefore supports the inclusion of the above indicator measuring the lack of proximity to accessible green space.

It is noted that the indicator specifies 'natural' green space and it is understood it is aimed at the benefits of being able access to nature. While the benefits of accessing natural green space are not disputed, Fields in Trust believes similar health and well-being benefits could be enjoyed by accessing other green spaces although less natural. Some urban parks for example might not be considered totally 'natural' due to various man-made features but nevertheless still benefit the health and well-being of its users. Perhaps the indicator could be expanded to at least include semi-natural green spaces?

## **31.Emma Henwood, BHF Cymru**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

1. BHF Cymru welcomes the opportunity to respond to the Welsh Index of Multiple Deprivation (WIMD) 2019 consultation. There are a number of factors of interest to the people we represent, although we do not have comments on all of the indicators.

### **Health Domain**

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

We are pleased that there is a proposal to include chronic conditions as an indicator within WIMD. Heart and circulatory conditions affect 1 in 4 people in Wales, which is the same incidence of people affected by cancer. Therefore we would like to ensure that cardiovascular (CVD) conditions are monitored in the same way as cancer.

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

CVD conditions are often more prevalent among poorer communities. Access to green spaces, better links to active travel routes and high streets which aren't cluttered with fast food outlets are more likely to ensure better cardiovascular health for everyone living in that community. Recent reports show that poorer communities across the whole of the UK have a higher number of fast-food outlets than more affluent areas. Therefore, these sorts of indicators could give a fuller picture as to the deprivation of that community.

### **Access to Services Domain**

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

BHF Cymru does not have a position on the different services which are being proposed to monitor, however, as many patients with multiple and chronic conditions are required to travel to different health services for treatment, it would be useful to understand how expensive transportation is, as well as journey times. In certain parts of Wales, there are very few services within any one day which can get people to their appointments.

## Housing Domain

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

We would support the added indicators on hazards and disrepair and damp as these are clearly going to be preventable risks to chronic health conditions.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

In terms of dropping lack of central heating from the indicators, this might take away a crucial indicator as it is well known that homes which are off-grid are much more expensive to heat. Rural fuel poverty should be monitored and as many older people are likely to be living with multiple conditions, possibly in rural off-grid areas, the effect on their health could be quite stark. Therefore we would not agree that central heating indicator should be removed.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

BHF Cymru would support the increase in weighting of housing within the WIMD ranking, as health and housing are so intrinsically linked.

## Physical Environment Domain

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

The proposed “simplification” of the air quality score to calculate it on a population weighted average concentration value of Nitrogen Dioxide, PM10 and PM2.5 could be misleading. It is likely that all three pollutants may be present in an area, but not definite, and the pollutants have different effects on different health conditions and the likelihood of developing them.

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

For example, BHF funded research has proven that the ingestion of PM2.5 particles can mass around areas of CVD disease in the body, making a cardiovascular event more likely. Given this, it is imperative that it is known where very high concentrations of PM2.5 are throughout Wales, and that it is possible to distinguish between the different pollutants.

## 32. David Barnes, Monmouthshire County Council

### Overview

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income

- Unhealthy weight in children
- GP-registered chronic and mental health conditions
- Education and skills in the early years
- Progression to Higher Education
- Access to natural green spaces
- Access to superfast broadband

Please comment:

We feel exploring new data source on low household income should be prioritised given its importance – as well as having an important place outside of the WIMD work also.

We feel that having a robust Access to superfast broadband indicator would be important. Some of the services listed under the access to services domain can be accessed via the internet, and given the rural nature of our County in particular, access to developing technology through high speed broadband could influence well-being in a number of areas, for example on levels of isolation.

We feel developing data on mental health indicators will be helpful in furthering understanding. Given the minimal amount of green spaces indicators, we would also support any development of such indicators.

Although we recognise the importance of exploring data sources on unhealthy weight in children, as some data already exists, should this maybe drop down the list of priorities.

## **Income Domain**

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

If feasible, any further comparable data would be beneficial, as an additional tool to comparisons within Wales.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

If sufficiently robust, we would welcome inclusion of this indicator.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

Could there be consideration of links with living costs. Perhaps an indicator around housing affordability/income to house price ratio.

## **Employment Domain**

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

If feasible, any further comparable data would be beneficial, as an additional tool to comparisons within Wales.

## Health Domain

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

We recognise the importance of exploring data sources on unhealthy weight in children, with the focus on reception class children is there a need to also consider children of older age groups?

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

We feel developing data on mental health indicators will be helpful in furthering understanding.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

The explanation provided on the refined mortality indicator is helpful. We do however think there is merit in considering the existing all-cause death rate covering the whole demographic as well.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **3**

A measure of chronic conditions - **2**

A measure of mental health - **1**

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

Given the significant impact that mental health issues has across services and the well-being of people, this issue would merit more measures that would help improve the understanding around the issue and also to improve the importance/priorities associated with this issue

## Education Domain

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

Any inclusion should be consistent with the latest education performance framework.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

As question 15, any standalone indicator would need to be clear on its definition.



- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

Should there also be a focus on further education, with consideration given to trades and apprenticeships not just university entry.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **1**

Proportion of people not entering higher education aged 18-19 - **2**

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

Has there been any consideration on indicators of pupils in vulnerable groups, for example pupils eligible for Free School Meals.

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

We feel that having a robust Access to superfast broadband indicator would be important. Some of the services listed under the access to services domain can be accessed via the internet, and given the rural nature of our County in particular, access to developing technology through high speed broadband could influence well-being in a number of areas, for example on levels of isolation

- Question 21 – Do you have a view on how the indicators on travel times (to key services), and access to broadband services should be weighted together for the overall domain score? Please comment:

Access to broadband should be given an appropriate weighting reflecting the importance of digital services in being able to access services.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

Given the rural nature of our county, this is an important domain for understanding deprivation in our communities and influences well-being in a number of areas.

### **Housing Domain**

- Question 23 – Do you have any comments on our proposals to include a modelled indicator of poor housing quality in the housing domain, if possible? Please comment:

The robustness of this indicator to small areas would need to be considered and how representative this would be of the overall housing stock. Given the criteria listed in the

description for the focus on HHSRS, but also to consider key elements of WHQS not covered by the HHSRS framework, would this be a robust comparator to use given potential differences in housing type in different areas?

It is important that the indicators used are as clear as possible so as to ensure that both surveys convey consistent messages of housing quality.

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

As Q23.

- Question 25 – Do you have any comments on our proposal NOT to include an indicator based on Energy Performance Certificate data in the housing domain, based on low data quality? Please comment:

If the data isn't robust enough to use effectively then it shouldn't be used. Given the environmental aspect of the indicator and its links with responsibilities under the Well-being of Future Generations Act perhaps this should be an area considered for further development.

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

Would support the use of overcrowding data as an indicator for housing deprivation

- Question 27 – Do you have any comments on our proposal to drop the "lack of central heating" indicator as a measure of housing deprivation? Please comment:

Heating is an important part of well-being of householders and should be covered in more detail to include the type of heating system etc. Also, see comments on question 28 related to fuel poverty.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

Indicators on Fuel poverty are important given fuel poverty has a significant impact on the health, social and economic well-being of householders. This is an area that should be considered for future development for inclusion in WIMD.

## **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

We feel this would be important to include, and links to the national well-being indicators.

Recognition may need to be given that the indicator might not necessarily provide an indicator of deprivation based on proximity to some industrial processes that are not principal emitters of NO2 or particulates.

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

Given the positive influence on people's wellbeing green space is considered to bring, an indicator on accessibility to green space is important to include. Consideration needs to be given to consistency around data recording and updating.

The text at the top of the form (Q1) refers to access to natural green spaces, whereas the title of Q30 refers to 'accessible green space'. Clarification on the wording would be needed.

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

Have the well-being benefits of green infrastructure been given consideration in this domain?

We support the retention of flood risk and air quality.

### **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

Continued consideration of a domestic abuse indicator, as identified in the consultation document would be useful.

### **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

Given the links to well-being of the domains, should consideration been given to the requirements under the well-being of Future Generations Act of improving the social, economic, environmental and cultural well-being of Wales when weighting the domains.

The Access to services domain is an important domain for understanding deprivation in our communities and influences well-being in a number of areas.

Any increase in weighting of the housing domain would need to be considered against the robustness of data modelled and its representation of housing deprivation in an area. Particularly if the weighting of other domains may be decreased.

### **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

Has an indicator on substance/alcohol misuse been considered as an indicator of deprivation?

### 33. Ellen Jones, Sustrans

#### Overview

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

Please see comments in Question 9.

#### Health Domain

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

Sustrans Cymru welcomes the new proposed indicator on reception class children who are of an unhealthy weight. This year the Active Healthy Kids Wales Report showed that Wales has the most inactive children in Europe. Statistics that show that in more deprived areas of Wales's children are more likely to be overweight. Public Health Wales' Child Measurement Programme showed that last year 17.5% of four and five-year-olds in Merthyr Tydfil were deemed obese, the highest level in the country whilst in contrast in the Vale of Glamorgan was only (7.8%).

There is good evidence to show that parenting and children's wider environment are important influences at this early development stage and have a long-lasting impact on a child's health and wellbeing and through to adulthood. If we truly want to fulfil the goals of the Well-being of Future Generations (Wales) Act 2015 we must embed this behaviour change during the early stages of a child's life, so that we can build healthier and more resilient future population.

Furthermore, Sustrans Cymru think that the Active Healthy Kids data should be included in the new indicator on reception children who are of an unhealthy weight.

<http://senedd.assembly.wales/documents/s76266/Active%20Healthy%20Kids%20Wales%202018%20Report.pdf>

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **1**

A measure of chronic conditions - **3**

A measure of mental health - **2**

## **Access to Services Domain**

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

Active travel refers to walking, cycling or using some other form of physical activity for all or part of a journey instead of using motorised transport. The term covers all types of journeys, including journeys to work or places of study, to shops, to services and for leisure.

Active travel can play a large role in ironing out health and wellbeing inequalities in Wales' areas of Multiple Deprivation. It can provide a cheaper mode of transport, have a positive effect on people's mental health and wellbeing, as well as allow people to incorporate exercise into their already hectic daily routine.

Active travel also provides a mode of transport which can alleviate congestion and reduces air pollution.

"In the current Index the access to services domain measured travel times to 8 services using public transport and 9 services using private transport. Public transport included travel by: public bus, public train, foot and national coach. Private transport was considered to be transport by private car. The inclusion of private transport in the indicators was new for WIMD 2014."

Sustrans Cymru think that a measure of access by bike should be included in the public transport data alongside bus, train, foot and national coach.

Sustrans Cymru would also regard access to public transport as an access to services indicator. Public transport continues to play a vital social and economic role, providing vitally important transport for the one third of households who do not have access to a car in Wales.<sup>1</sup> A lack of access to public transport could deprive certain communities from work, education and training opportunities.

Furthermore those without access to public transport are more likely to rely on a private vehicle to get them to essential services. Dependency on the private vehicle plays a role in exasperating many of the indicators within this document. Principally air pollution, obesity and poor mental health and wellbeing.

## **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

We welcome the proposals to simplify the air quality subdomain as part of the new set of indicators for the Welsh Index of Multiple Deprivation. We particularly welcome the proposal to include separate indicators for Particulate Matter emissions.

Air quality measures have consistently focussed on Nitrogen Oxide and it is therefore welcome that the WIMD indicators will reflect the danger that Particulate Matter emissions pose to individual health.

PM2.5 is particularly harmful as the small particles can easily and quickly penetrate deep into the lungs and enter the bloodstream. Exposure to PM2.5 has been linked to a plethora of poor health outcomes from diseases including asthma, COPD, coronary heart disease,

stroke, and lung cancer, with emerging evidence showing impacts on low birth weight, diabetes and neurodegenerative diseases such as Alzheimer's and Parkinson's.

We would also encourage the development of an indicator on poor health outcomes and deaths associated with the level of air pollution, reflecting air pollution as a public health priority for Public Health Wales, Welsh Government and Local Government. This could include the number of people living with a respiratory condition, for example.

It is also important that the information is clearly accessible to the public and makes available public health information on mitigating or protecting yourself from harmful emissions, particularly those living with a long-term chronic health condition, and provides information on what action the local authority is taking to clean up the air people breathe.

Furthermore, we would like to take this opportunity to reiterate calls made by Healthy Air Cymru and other organisations for a new Clean Air Act for Wales that enshrines in law the World Health Organisation's limit for PM2.5 to guarantee that the highest health standards are incorporated into future legislation.

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:
- Sustrans Cymru welcome the proposal to include an indicator measuring the lack of proximity to accessible green space.

## **34. Public Health Wales**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadbandPlease comment:

- Low household income
- Unhealthy weight in children
- GP-registered chronic and mental health conditions

### **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Given the limitations posed by the staggered introduction of Universal Credit, the proposed indicator based on a 2016/17 reference period is a sensible approach.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes. The ability to compare small areas across UK nations would be valuable both for the overall index and within individual domains

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

The proposed indicator would seem fitting with the focus of the income domain.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

Outside of the overall WIMD, the income domain is likely the most commonly used individual indicator data within our organisation and so is of particular importance. Future opportunities for regularly updated indicator data for this domain would be welcomed.

## **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

This approach seems sensible given the limitations posed by the staggered implementation of Universal Credit.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Yes. The ability to compare small areas across UK nations would be valuable both for the overall index and within individual domains.

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

The inclusion of reception class unhealthy weight data would improve the health domain, given the links to unhealthy weight in adulthood. We agree that a measure of obesity rather than unhealthy weight (overweight plus obese) would be preferable given that the former has been shown to be predictive of obesity at year four.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

The inclusion of a broader range of health conditions would improve the health domain, if robust data become available.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Should robust data become available, the inclusion of a suitable indicator on mental health would be an improvement to the health domain and would have the added desirable effect of bringing WIMD closer in-line with the other UK nations' indices.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

It is agreed that all-cause premature mortality is a more suitable indicator for capturing health deprivation compared to all-cause mortality for all ages.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children -

A measure of chronic conditions -

A measure of mental health -

The inclusion of a measure of childhood obesity is achievable now given the CMP. Chronic disease and mental health indicators may be more aspirational and would certainly involve a greater amount of investigation as well as negotiation with data custodians.

## **Next Steps**

- Question 35 – Do you have any other comments on proposals for WIMD 2019 (not already covered) or future updates of WIMD? Please comment:

Public Health Wales welcomes the updating of WIMD in 2019. WIMD continues to be an essential component in population health analyses. WIMD is frequently used in its own right to identify areas of deprivation and in conjunction with other data sources.

The measurement and provision of data by individual domain is valuable for public health work. While the health domain provides a direct measurement of aspects of health, the remaining domains within WIMD present some of the wider determinants of health which need to be addressed to progress improvements in population health.

Meaningful comparison with other UK nations remains of particular interest and Public Health Wales welcomes future opportunities for cross-working to develop a pan-UK indicator.

## **35. Sean O'Neill & Cheryl Martin, Children in Wales/Plant yng Nghymru**

### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education



- Access to natural green spaces
  - Access to superfast broadband
- Please comment:

1. We accept the level of additional work which would be required should WG prioritise all 7 areas for new data sources for indicators, and agree that decisions should be based on their likely use to inform research, policy and practice. Whilst not wishing to 'rank' the areas, we would suggest that 'low household income', 'unhealthy weight in children', 'education and skills in the early years', 'access to natural green spaces' and 'access to superfast broadband' should be key priorities, although this isn't to suggest that the others should be discounted.

## **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Children in Wales agrees with the proposal to use the latest possible update of the 2014 indicator for WIMD 2019 using DWP datasets, to take account of new claimants for Universal Credit and those on existing legacy benefits. However, we are a little concerned that the data may be skewed due to the inclusion of housing benefit within Universal Credit, which has not previously been included in the 2014 indicator. Results from our annual survey showed that Universal Credit has had a huge negative impact on families in Wales and will continue to do so over the next 5 years.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Yes

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

In light of the rollout of Universal Credit up until 2023, that it may not be possible to publish annual updates on income data, we agree that with the development of a second income indicator.

## **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

The same comments apply as for the Income Domain above.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

We believe it will be beneficial to better align the WIMD and the EIMD to give a broader picture of deprivation across England and Wales, particularly the parts of Wales in the

Marches region that border England, and where there may be comparable areas between countries..

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

We are concerned that the indicator proposed will not capture in-work poverty, which will only be reflected in the data relating to Universal Credit. The Children in Wales annual survey identified that low wages and zero hours contracts are a key element of in-work poverty; the following are extracts from our survey report:

“Zero hour contracts and Universal Credit do not work well together. Low wages and welfare benefit changes have led to an increase in debt.”

“Universal Credit is having a huge impact. Anything which triggers a change in means tested benefit causes a problem. Money is stopped for the five weeks, rent payment is affected.”

Under-employment is another key issue which has emerged through our work and that of others, whereby some members of the working age population lack sufficient employment and are actively seeking additional work to meet need.

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

We welcome the addition of a new measure on reception class children who are of unhealthy weight. We believe that this should include children who are measured as both underweight and overweight or obese, whilst accepting that there are current, but perhaps in the future not unsurmountable challenges, capturing data on the number of children in the underweight category.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

We agree that an indicator measuring prevalence of particular diagnosed chronic conditions would be a valuable contribution, and for this to be disaggregated by age.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

We agree that it is important to include a measure of mental health in this domain and that using Quality and Outcomes Framework data is preferable to using data on prescribing, for the reasons outlined in the consultation document.

Responses from our annual survey demonstrate that poor mental health is closely associated with living in poverty:

“Although (poverty is) primarily associated with income, the issues affect the health and well-being of children and families.”

“Mental health is one of the biggest issues we see. We work closely with primary mental health and third sector services locally, but there are massive gaps and people are not able to access services as quickly as needed.”

Tackling mental health is a key priority for children and young people and we would wish to see the information disaggregated by age.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children -

A measure of chronic conditions -

A measure of mental health -

We believe that all 3 areas are key priorities and are often inter-related. So for example, there may be a link between mental health and being underweight, or a link between other levels of unhealthy weight and chronic conditions which can worsen with age. Developing a measure for mental health should be prioritised, yet the proposal will be limited in terms of a recognised diagnosis by a GP. Unhealthy weight in children must remain a key indicator as this allows services, such as schools, local authorities and third sector family support services, to target their interventions appropriately, and provides additional evidence to tackle unhealthy eating and facilitate access to a healthy diet. The relationship between child poverty and unhealthy weight has been researched and examined over many years, and supports the WG priority around Early Years as outlined in Prosperity for All.

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

In relation to tracking educational progress and attainment for children, we agree with the proposed new indicators for Reception On-Entry Assessment would be an excellent addition alongside a Foundation Phase Average Point Score being added to the Key Stage 2 Average Point Score. It would be inappropriate to include independent schools, as this could skew the data, particularly where there is more than one independent school within a particular LSOA.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

In the light of changes to the way educational achievement is measured in Wales, it is agreed that the measure for KS4 requires an alternative indicator. The proposal to use grades achieved by Year 11 pupils in GCSE English/Welsh, Maths and Science seems to be an appropriate new indicator.

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

We are not entirely convinced that non-continuation to Higher Education is a strong measure of education deprivation for young people. It may signal a lack of opportunities but also many young people, through undertaking vocational training in school, positively choose to move to FE or into training, apprenticeships or employment. Further, the cost of HE is a prohibitive factor for many young people despite the financial support provided by the Welsh government. Whether accessing HE is a 'necessity' which will impact on future economic activity and salary is up for debate.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **1**

Proportion of people not entering higher education aged 18-19 - **2**

Our priority categorically would be 'On-Entry Assessment of Pupils in Reception Class', given the concerns we have with the HE indicator and the increasing evidence showing the widening gap between some children in low income families and their peers on school entry.

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

It is important that WIMD 2019 includes a measure of access to broadband services, particularly in relation to accessing Universal Credit, which is required to be done on line. One respondent to our poverty survey reported the following in relation to internet access:

"I have had clients going to the local library to start a claim for Universal Credit, but the library is too busy and they have to go away. It is apparently getting difficult to book appointments to use a computer. This is because not only do people need to claim Universal Credit, but it has to be managed online as well. People either can't use or can't afford to have internet access at home."

We agree that a new indicator on access to broadband services is both essential and desirable, for all of the reasons set out in the consultation document.

## **Housing Domain**

- Question 26 – Do you have any comments on our proposal to continue using overcrowding as an indicator of housing deprivation? Please comment:

We welcome the continued use of the overcrowding indicator as an indicator of housing deprivation, as our work and that of others continues to show there is a correlation between this and poverty.

- Question 27 – Do you have any comments on our proposal to drop the "lack of central heating" indicator as a measure of housing deprivation? Please comment:

Whilst we accept the reasons for discontinuing with the central heating indicator, we are somewhat concerned that there will be no indicator around energy efficiency, given the link

between this and deprivation, and the focus on energy efficiency for determining eligibility for the Welsh Government NEST scheme. Whilst we are not putting forward or suggesting an alternative indicator to address this, it does appear to us to be a gap amongst the housing domain.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

In our annual Child and Family Poverty Survey a number of respondents commented on housing barriers. Below is a selection which covers the links between poor housing and poor health, and affordability.

“Families are often living in unsuitable (overcrowded or in poor condition) accommodation which can have a severe impact on the mental health and well-being of the whole family.”

“Housing conditions are often worse with private landlords, which brings another layer of stress for the principal carer - the impact of a carer with long-term stress adversely affects relationships, bonding and attachment and increases emotional neglect by default in children, due to decreased capacity and coping skills. The children have more frequent minor illnesses and additional respiratory conditions, due to housing conditions and food and fuel poverty.”

On this evidence it is agreed that an indicator based on disrepair should be included, due to its impact on the health physical and mental health of families

### **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

We welcome the new proposals aligned to the National Well Being Indicators in respect of air quality, given its negative impact on health, quality of life and additional barriers for children accessing the living environment.

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

We support in principle the inclusion of an indicator on accessibility to natural green space. However, the definition of Green Space is far too broad and we would wish to see a set of indicators which capture people's proximity to a range of green spaces. Why? The breadth of the indicator would put 'allotments' and 'parks' together, despite the fact that both will be used for entirely different purposes and some age groups of the population will access one above the other. The former is not an open green space for the public to access in the same way that a park is. Whilst a 'hedge' is important for environmental reasons, it is not a space to allow a child to play freely, take part in sport activities or to socialise with friends. The results will be distorted, as they may show that a LSOA has a positive level of green spaces yet this could be because of a high level of allotments and trees or hedges in a particular area yet with no open public recreational or play spaces for children and their family to access and enjoy. The use of this indicator will be reduced

Our suggestion is that this new indicator is broken down to differentiate between green open spaces which people can freely access (i.e. parks, recreational sports grounds,

woodland etc.) and non-open spaces, which could include static green areas (Trees, shrubs, hedges) and restricted areas (allotments, food growing spaces etc.). It could of course be broken down even further, but our priority is to be able to capture Open Green Spaces in LSOA

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

Please see our response to question 30 – if we were to ask children for their priorities, evidence shows that access to green open spaces would be one of their big priorities.

### **36. Save the Children – Achub y Plant**

#### **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

Low Birth Weight:

Save the Children endorses the inclusion of an indicator relating to low birth weight. Low birth weight is related to deprivation and the consequences of low birth weight can continue to perpetuate this, including missing important developmental milestones. It is also a way of measuring deprivation at the very earliest point of childhood so adds an additional element of information to the Index. Consequently, we believe a measure relating to low birth weight should be included.

Obesity:

Save the Children endorses the inclusion of an indicator relating to children of an unhealthy weight and understands the Welsh Government's preference for using an indicator relating to obesity rather than a more wide-ranging indicator. We welcome that the Welsh Government is exploring including the value of an indicator which includes measurement of weight during the early years, given the importance of this period of time for improving children's future opportunities.

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

Save the Children endorses the potential future development of an indicator based on data collected through the School Health Research Network and then being linked to the Pupil Level Annual School Census. Whilst we acknowledge that it is not possible to include such an indicator in the 2019 Index, we would be interested in seeing how this could be included in subsequent Indices.

#### **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

Save the Children fully endorses the idea that an indicator which is a proxy for school readiness be included in the Index. School readiness is both an indicator of a child's

development in the initial phase of their life and a predictor of future outcomes. In both cases, school readiness is also affected by their living in poverty. As a consequence, using an indicator which can be used to reflect this will be a valuable element of the index.

We acknowledge that On-Entry Assessments in Reception Class is an indicator used elsewhere by the Welsh Government, particularly in relation to the National Indicators. As a consequence, we accept that it is likely to be the best currently available indicator for this Index. However, we would like to see a quick review of the effectiveness of it as an indicator ahead of the next Index, with a specific discussion about whether a more objective indicator can reasonably be developed. This discussion should take place in tandem with a discussion about the use of the Foundation Phase Average Point Score Indicator.

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

Foundation Phase Average Point Score:

Given the importance of the Foundation Phase for children's future attainment and success, Save the Children endorses the inclusion of an indicator which assesses this. We also acknowledge that this indicator is likely to be based on the way in which the Foundation Phase is delivered and monitored by the Welsh Government, LEAs and schools. As a result, we acknowledge that any indicator will have to be based on pre-existing indicators, and that currently it would appear that the Foundation Phase Average Point Score is the best available indicator.

However, the use of average point scores on a learning assessment as indicators of deprivation needs some significant caveats. A low average could be due to other issues such as additional needs, disability, summer birthday etc. The Welsh Government should ensure that the inclusion of this indicator does not conflate issues relating to deprivation with other issues which relate to child development. We would like reassurance that this indicator would be able to account for other reasons which could indicate a lower average.

As with the previous indicator, we would like to see a quick review of the effectiveness of Foundation Phase Average Point Score as an indicator ahead of the next Index, with a specific discussion about whether a more objective indicator can reasonably be developed. This discussion should take place in tandem with one about the use of the On-Entry Assessments in Reception Class.

Weighting:

Save the Children believe that additional weighting should be given to the indicators outlined above. The early years are a crucial stage in a child's life and can determine their future levels of deprivation. Currently, the impact of educational disadvantage is consistent at all ages; according to research in our Little Pieces. Big Picture. report, nearly half of children who were in the lowest performing group at the beginning of primary school were also in the lowest performing group at ages 7, 11 and 14 on different measures of cognitive development. Children who were in the top performing group at the start of primary school were also more likely to stay ahead. As the likelihood of a child being in the lowest performing group at the beginning of primary school is directly linked to poverty, approximately a third of children from low-income households (30-35% on the three assessments) were in the lowest performing group, compared with a fifth of those from

better-off families (20-21%), then the effects of a child living in poverty at this age are evident through the further stages of education, and beyond.

Therefore, as well as being a particularly pernicious form of disadvantage, these indicators also predict future performance against the remaining indicators relating to education performance. Consequently, they should be given a significant weighting in the index.

### **Access to Services Domain**

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

Access to childcare:

The Government should re-consider its decision not to include any indicator for access to childcare. Access to childcare is directly correlated with poverty.

Recent research from Save the Children demonstrated that early years childhood development is related to poverty. Specifically, around a third of children from low-income households (30-35% on the three assessments) were in the lowest performing group, compared with a fifth of those from better-off families (20-21%). Likewise, between 11% and 17% of children from low-income households were in the top quartile, compared with 27% of those from households with higher incomes.

Findings from a major longitudinal study in England also demonstrated that lack of access to childcare itself is important in driving the attainment gap. It showed that:

- A child who attends a high-quality setting for one to two years starts school 1.6 months ahead of their peers who attended a low-quality setting and 4.8 months ahead of a child who attended no provision.
- A child who attends a high-quality setting for two to three years starts school 3.2 months ahead of their peers who attended a low-quality session and 7.8 months ahead of a child who attended no provision.
- Other studies have shown that attending childcare between the ages of two and three is linked to better cognitive and socio-emotional development outcomes, with additional benefits for disadvantaged children.

As a consequence, if access to childcare is skewed towards less deprived areas, it will continue to exacerbate both the attainment gap and the future life chances of many children in more deprived areas. Lack of access to childcare is a significant indicator for measuring deprivation.

Save the Children accepts that the mixed pattern of child provision in Wales, split between maintained and non-maintained settings and between formal and informal care, makes measuring this more complicated. However, we believe that there are other indicators that should be considered as proxies for access. Specifically, the Welsh Government should consider using:

- The number of childcare places available per 100 children in a local authority (or subdivision of a local authority in the case of larger, rural authorities.)



- The proportion of children enrolled in or the take-up rate for the three statutory funded childcare schemes – Flying Start, the Childcare Offer, and the Foundation Phase – in an LSOA.
- Information derived from a local authority's Childcare Sufficiency Assessment.

While none of these indicators will be perfect, we believe that they offer a suitable proxy for access to childcare which will allow a meaningful contribution to the measurement of deprivation.

Access to primary schools and General Practitioners:

We endorse the retention of “travel time for physical access” indicator for both primary schools and General Practitioners. Access to both of these facilities are essential for children in the early years and therefore the relative levels of access by communities will help measure deprivation.

### **37. Community Housing Cymru - Cartrefi Cymunedol Cymru**

#### **Income Domain**

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

We welcome the inclusion of people on Universal Credit and their dependent children as an indicator as we are aware of the hardships that Universal Credit has brought to many families and communities.

#### **Access to Services Domain**

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

Related to the income indicator, we would like to suggest that although there is no comparable data across Wales on access to food banks, that this is developed as an indicator in any further indicators as numbers are growing and access to food banks is becoming an indicator of deprivation in many areas.

Our members believe that the paper provides some encouraging enhancements to current measures, but doesn't address a key anomaly for rural communities, whereby car ownership is not a luxury but essential to accessing services. High car ownership and the link to access services will mask the extreme poverty in some rural areas such as Mid-Wales for those reliant on a public transport network which in many areas is nonexistent. Fuel Poverty itself is addressed but narrowly in relation to household fuel costs. If car ownership is included in calculations for access to services, it should also be included as a cost in relation to household income and / or fuel poverty.

#### **Housing Domain**

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

We support the idea of focusing on hazards as defined in the Housing Health and Safety Rating System (HHSRS) and on disrepair as an indicator for housing deprivation.

We believe that using overcrowding as an indicator of housing deprivation poses some challenges in that although it can reflect the lack of affordable housing this can also be an indicator of income deprivation caused by welfare reforms, and unemployment. In this case the weighting against other indicators would have to be considered as overcrowding can be a result of the other factors.

We agree with dropping off having central heating in the home as this indeed does not reflect that the occupants can afford using the facility.

However we think there should be a way to capture fuel poverty and appreciate that there is no data to capture this as one domain but believe that this should be developed as a domain in the future.

### **38. Jamie Matthews, Citizens Advice**

#### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
    - Low household income
    - Unhealthy weight in children
    - GP-registered chronic and mental health conditions
    - Education and skills in the early years
    - Progression to Higher Education
    - Access to natural green spaces
    - Access to superfast broadband
- Please comment:

Citizens Advice Cymru welcomes the opportunity to respond to the consultation on the Proposed indicators for the Welsh Index of Multiple Deprivation 2019.

#### **Income Domain**

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

We welcome the recognition that the introduction and rollout of Universal Credit has an impact on the measurement of income. We echo the need for the development of annual indicator data on income deprivation. DWP figures show that 24% of all people in Wales were living in relative income poverty between 2014-15 and 2016-17. Citizens Advice remain concerned about in-work poverty in Wales and indicators to help understand this, such as the monitoring of income-related benefit claims is helpful for us to understand the picture in Wales to inform evidence based policy making and target support more effectively. Inclusion of PAYE and self-assessment data to capture those on low incomes who are not claiming benefits or tax credits is valuable for us to further understand in-work poverty. We fully endorse any inclusion of a second indicator on households in low income.

Wales does have varying needs to other nations, for example according to the OECD, the aging population is more pronounced than other UK nations and the percentage of chronic conditions is higher, however we welcome the need for consistent data on deprivation for small areas across England and Wales – the comparison is useful for policy-making and monitoring how non-devolved UK Government policies are affecting people. Citizens Advice are regularly faced with clients who have employment issues.

During 2017 to 2018 Citizens Advice in Wales helped 9,132 people with 17,126 employment related issues. Issues ranged from pay & entitlements, dismissal, dispute resolution, terms & conditions of employment and redundancy. We believe that it is crucial for the Welsh Government to pursue or create data to monitor job quality and fair work. The Fair Work Commission has recently consulted and asked for data suggestions, we believe that the Welsh Government statistics team should work with the commission to create a way of monitoring this.

## **Employment Domain**

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

We welcome the recognition that the introduction and rollout of Universal Credit has an impact on the measurement of income. We echo the need for the development of annual indicator data on income deprivation.

DWP figures show that 24% of all people in Wales were living in relative income poverty between 2014-15 and 2016-17. Citizens Advice remain concerned about in-work poverty in Wales and indicators to help understand this, such as the monitoring of income-related benefit claims is helpful for us to understand the picture in Wales to inform evidence based policy making and target support more effectively. Inclusion of PAYE and self-assessment data to capture those on low incomes who are not claiming benefits or tax credits is valuable for us to further understand in-work poverty. We fully endorse any inclusion of a second indicator on households in low income.

Wales does have varying needs to other nations, for example according to the OECD, the aging population is more pronounced than other UK nations and the percentage of chronic conditions is higher, however we welcome the need for consistent data on deprivation for small areas across England and Wales – the comparison is useful for policy-making and monitoring how non-devolved UK Government policies are affecting people. Citizens Advice are regularly faced with clients who have employment issues.

During 2017 to 2018 Citizens Advice in Wales helped 9,132 people with 17,126 employment related issues. Issues ranged from pay & entitlements, dismissal, dispute resolution, terms & conditions of employment and redundancy. We believe that it is crucial for the Welsh Government to pursue or create data to monitor job quality and fair work. The Fair Work Commission has recently consulted and asked for data suggestions, we believe that the Welsh Government statistics team should work with the commission to create a way of monitoring this.

## **Health Domain**

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

Nearly half of all clients we've helped had a long term health condition or disability, the most common of these is mental health with 24% voluntarily declaring a mental health problem. At Citizens Advice Cymru we see a growing number of clients who have mental health problems.

Citizens Advice strongly supports the inclusion of a specific mental health indicator in WIMD 2019. It is important for us to have a clear and accurate picture of the prevalence of mental health conditions. As a high proportion of Citizens Advice clients identify as having a mental health problem, to help us support these people, the Welsh Government, the NHS and Welsh policy-makers need to be well-informed at the trends in mental health. We agree that the approach in England, Scotland and Northern Ireland, using prescriptions data, has limitations, especially because there are other treatments for mental health.

QOF data seems to be a sensible way forward as this includes information from GP registers about diagnosed mental health conditions. We are disappointed that the WIMD group has decided not to pursue a measure for unpaid carers. It is vital to understand this to determine the needs of the 370,000 carers in Wales. Carers UK have said that without the unpaid care provided every year by family and friends, our health and care services would collapse. We should be able to specifically understand the physical and mental strain of caring, for Welsh Government and local councils across Wales to fulfil their legal duties. As set out in the Social Services and Well-being Act and local well-being plans, councils must identify carers and provide appropriate information and advice to support to enable them to look after their own health and well-being.

### **Access to Services Domain**

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

We value these indicators, however we believe that access to employment centres or to work should be revisited and explored further. Affordability and availability of public transport or access to private transport is key for people to access work, especially in rural or more isolated areas. At a recent forum of

Citizens Advice advisers we were informed that some people are struggling to access their nearest jobcentre to attend appointments and receive work coaching sessions. If jobcentres are hard to access and people can't attend their appointments they can be sanctioned and this can impact their welfare benefits.

We do welcome the ongoing work with ONS to explore developing a tool to look at travel times.

The new measure of access to broadband services is welcome, in particular because many Citizens Advice clients who receive welfare benefits require access to the internet for claims and to seek employment.

### **Housing Domain**

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

Shelter identified in 2000, 'not only can bad housing be an underlying cause of poor health, education and personal development but it can also result in people being

excluded from general service provision or more specialist support services' we fully welcome WIMD 2019 using elements of Shelter Cymru's Living Home Standard. We also welcome the proposal to include a modelled indicator for poor housing quality. The Welsh Housing Conditions Survey shows that Wales has the oldest housing stock in the UK and the private rented sector generally has the oldest housing stock and a higher proportion of poor quality housing. Housing is a big issue for Citizens Advice clients, we helped 8,994 people with 13,807 problems in 2017/18. It is disappointing, however that it is difficult to measure Affordability and Stability at small area levels as these are key concerns for Citizens Advice and others. Issues with the Private Rented Sector dominated the housing cases that Citizens Advice help with, and in addition to the proposed areas for WIMD 2019, we believe that the issue of housing tenants security should be explored. With the increasingly strong prevalence of private sector renting, tenants need security with their lease, it would be useful for WIMD to explore a way of measuring this. We also welcome the ongoing consideration for a homelessness indicator. We recognise the difficulties in recording this data but it is worthwhile pursuing this to support the Welsh Government's Prosperity for All strategy.

### **39. Hywel Dda University Health Board**

#### **Overview**

- Question 1 – Do you have any views on prioritisation for exploring the new data sources below for WIMD 2019 (as described in the consultation Section 2)?
  - Low household income
  - Unhealthy weight in children
  - GP-registered chronic and mental health conditions
  - Education and skills in the early years
  - Progression to Higher Education
  - Access to natural green spaces
  - Access to superfast broadband
 Please comment:

From a public health perspective (in line with responses from across Public Health Wales colleagues and divisions), the three priority new data sources would be:

- \* Low household income
- \* Unhealthy weight in children
- \* GP registered chronic and mental health conditions

From a rural health perspective (given the geographical nature of Hywel Dda University Health Board) there should be further consideration given to:

- \* Access to super-fast broadband
- \* Access to natural green spaces
- \* Progression to higher education

#### **Income Domain**

- Question 2 – Do you have any comments on the key proposal for an income deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

Given the impact that the staggered roll out of Universal Credit is and will have upon the affected population within Hywel Dda University Health Board, the proposed indicator based on the 2016/17 reference period seems both a sensible and appropriate response.

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Of course. However, having the ability to compare similar geographical areas across all of the UK, not just England, would be more valuable especially if we are trying to make accurate comparisons and to replicate any programmes of work or initiatives that positively impact upon the index/ domains.

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

This addition seems appropriate if data is collected accurately and consistently over time.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

The income domain is a key indicator from a public health perspective. Ongoing, updated and accurate data for this domain would be very useful for use and interpretation alongside the WIMD.

### **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

This would appear to be an appropriate response given both the rural nature of Hywel Dda and the issues around the roll out of Universal Credit.

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Yes, as per the response to Question 3.

### **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

The inclusion of reception class unhealthy weight data would improve the health domain especially as it is such a key predictor to unhealthy weight in adulthood. A measure of obesity rather than 'unhealthy weight' would, from a public health perspective, be very useful for planning of programmes of work and interventions as obesity in reception class is an indicator/ predictor of obesity at year 4.

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

The inclusion of a broader range of health conditions would improve the health domain, if robust data becomes available. This indicator will be essential for key local projects such as the Llanelli Wellness Village which has adopted 'Living with Chronic Conditions' as one of its key life stages.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Measuring the population impact of mental health accurately has always been a difficult task so if consistent and robust data becomes available then this would be a useful tool within the health domain. If we look across other UK nations, they have mental health more formally aligned with their WIMD and we in Wales could potentially learn something from their approaches.

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

Comments from colleagues across Public Health Wales consider that all-cause premature mortality is an improved indicator for health deprivation.

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children - **1**

A measure of chronic conditions - **2**

A measure of mental health - **3**

The childhood obesity measure is actually achievable right now via the Child measurement Programme. The other two will require some work and negotiation around actually accessing the data.

#### **40. Andy Wilson, Torfaen County Borough Council**

##### **Overview**

##### **Income Domain**

- Question 3 – Would you find it useful to have a similar income deprivation indicator made available separately to allow comparison with small areas in England (2015-2016 data)? Please comment:

Nice to have for comparing with similar local authorities in England but not essential

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

This would be very useful – support the development of this

## **Employment Domain**

- Question 7 – Would you find it useful to have a similar employment deprivation indicator made available separately to allow comparison with small areas in England (2015-16 data)? Please comment:

Nice to have for comparing with similar local authorities in England but not essential

## **Health Domain**

- Question 9 – Do you have any comments on the proposed new indicator on reception class children who are of unhealthy weight? Please comment:

Support this new indicator

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

Support this new indicator

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Support this new indicator

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

Support this refined indicator

- Question 13 – What priority order would you place on developing a measure of obese children, chronic conditions, or mental health for WIMD 2019? Please rank 1, 2, or 3 (1 being high priority; 3 being low priority)

A measure of unhealthy weight in children -

A measure of chronic conditions -

A measure of mental health -

Unhealthy weight and mental health high priority, chronic conditions medium priority.

## **Education Domain**

- Question 15 – Do you have any comments on the proposal to include indicators sourced from the On-Entry Assessments of Pupils in Reception Class data and the Foundation Phase outcomes data? Please comment:

Seems reasonable/useful.

- Question 16 – Do you have any comments on the proposed Key Stage 4 attainment indicator? Please comment:

Seems reasonable. No particular views on the definition but we would like to review it before it goes into operation.



- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

Agree the preferred option.

- Question 18 – What priority would you place on developing the following measures: Foundation Phase baseline assessment indicator or proportion of people not entering higher education aged 18-19 indicator? Please rank 1 or 2 (1 being high priority; 2 being low priority)

On-Entry Assessments of Pupils in Reception Class Indicator - **1**

Proportion of people not entering higher education aged 18-19 - **2**

High priority for the first one. Medium/Low on the second – I am not convinced it is as meaningful a measure of deprivation as the others.

### **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

Support this new indicator

### **Housing Domain**

Separate response sent by our Housing Service - No Response

### **Physical Environment Domain**

- Question 29 – Do you have any comments on our proposals to simplify the air quality sub-domain? Please comment:

Seems sensible

- Question 30 – Do you have any comments on our proposals to include an indicator measuring the lack of proximity to accessible green space instead of the proximity to waste disposal and industrial sites indicator? Please comment:

Support this proposal

- Question 31 – Do you have any views on the proposed weighting within this domain? Please comment:

Agree with existing equal weighting

### **Weighting**

- Question 34 – Do you have any comments on the proposed approach to weighting domains in WIMD 2019? Please comment:

No – potential adjustment to Housing domain weight (and impact to on other weights) if it is improved seems sensible

## **41. Wrexham County Borough Council**

### **Overview**

#### **Income Domain**

- Question 4 – Do you have any comments on the addition of a second indicator on households in low income (based on Office for National Statistics research outputs), subject to quality considerations? Please comment:

We would also support the inclusion of PAYE and Self-Assessment data and the change to collecting income details on a household basis, rather than that of an individual.

- Question 5 – Do you have any other comments on proposals for the Income domain? Please comment:

We welcome the proposed inclusion of an indicator that takes account of the ongoing changes to the welfare benefit system.

#### **Employment Domain**

- Question 6 – Do you have any comments on the key proposal for an employment deprivation indicator in line with previous indices, based on 2016-17 data, for WIMD 2019? Please comment:

As with the proposals for changes to the Income domain, we would also welcome the inclusion of Universal Credit as part of the employment measure.

- Question 8 – Do you have any other comments on proposals for the Employment domain? Please comment:

Job quality and fair work – It would be useful to include this, if it is measurable.

#### **Health Domain**

- Question 10 – Do you have any comments on a proposed new indicator on chronic conditions? Please comment:

Chronic conditions – We would welcome the proposals to aggregate information, in order to provide a single prevalence of chronic conditions.

- Question 11 – Do you have any comments on a proposed new indicator on mental health? Please comment:

Mental Health – Whilst overall, we would welcome the inclusion of a mental health indicator as part of the measure of deprivation; staff who work in the field of Adult Social Care have made the following specific comments:

- Small level areas will have different outcomes depending on the GP practice. This could have a significant effect due to a lack of alternatives to medication i.e. limited resources to signpost people in some areas, may result in medication being prescribed – issues combined could reflect the approach for mental health issues.
- Is the way people seek medical intervention a result of the area they live in and how can this be captured.

- If we are collecting information on prescriptions we will only have numbers of those receiving prescription drugs not how many have had a diagnosis
- How will we capture how many people have a mental health diagnosis?
- How will we capture, whether people living in a deprived area, are likely to access GP services?
- An Increase in prescribing medication reduces the severity of symptoms of poor mental health but it is not an approach that considers overall well-being. Is this something that can be evidenced?
- Will this information identify the needs of those who are currently in prison?
- The rights of carers is a fundamental part of the Social Services and Well-being Act and their needs require capturing. Will Welsh Government consider including this?

- Question 12 – Do you have any comments on the proposed refined mortality indicator on premature mortality? Please comment:

Mortality Data – We would welcome the inclusion of avoidable mortality in the measure of deprivation.

- Question 14 – Do you have any other comments on proposals for the Health domain? Please comment:

We would welcome the proposed changes set out at section 5.3.1, in relation to the indicators for children, specific diagnosed conditions and the status of the broader population's health. Low Birth Weight – Will this indicator relate to the weight of children born full term?

Cancer Incidence – If seeking to include data regarding the stage of cancer diagnosis, it is would also be useful to acknowledge the fact that early diagnosis is a sign of a more educated, supportive community that has access to better screening facilities.

## **Education Domain**

- Question 17 – Do you have any comments on our proposed approach to produce the Proportion of people aged 18-19 not entering higher education indicator? Please comment:

Young people not in education, employment or training – If Welsh Government propose referring to this as an indication of educational deprivation, it is worthwhile taking account of the fact, that not being in higher education is not an indication that someone is taking part in no productive activity.

- Question 19 – Do you have any other comments on proposals for the Education domain? Please comment:

5.4 – Education – Repeat Absenteeism Rate – We would agree with the suggested use of pupils missing 15% or more of school sessions as a proxy for recording persistent absenteeism.

## **Access to Services Domain**

- Question 20 – Do you have any comments on the proposed new indicator on access to broadband services? Please comment:

With reference to the proposed introduction of a measure regarding access to broadband services, it would be useful to clarify whether this will refer to access to infrastructure or having the financial capacity to make use of a service.

Being able to show that broadband is available in large parts of Wales, takes no account of the numbers who due to financial pressures, are still unable to make use of the service. Broadband Services – As a measure, Welsh Government should use those areas that do not have access to Broadband in any format, rather than simply focussing on Broadband speed.

If no account is to be taken of affordability this indicator should not be included.

- Question 22 – Do you have any other comments on proposals for the Access to Services domain? Please comment:

5.5 – Access to Services – Leisure Centre – The inclusion of this in its current form, as an indicator of deprivation, is arbitrary. It is often the cost of accessing services that is prohibitive, rather than simply location.

Public Libraries – There will need to be care exercised if including this measure. In recent years, public libraries have often been the subject of budget cuts and have suffered closure.

Cash points – We agree with the proposal to exclude this as a measure within the index.

Child Care – Our comments regarding this indicator are the same as those for leisure.

Employment centres – Any inclusion of this measure in the index, could only be based on significant settlements. It would automatically discount any opportunities available in rural areas.

Food banks – It was not seen as practical, to try to include this measure. Mobile Data - Although this may prove to be a more complex measure to record, it is important to remember that for households on reduced incomes, mobile phones are used far more frequently than a laptop. So, having poor access to this service will have a far greater impact on poorer households.

Travel time by public transport – This would be a useful measure to include in a revised index. As it has the potential to be a further indicator of those areas that have poor access to services and employment opportunities.

Floating catchment areas – We would agree that some account should be taken of the work that is being undertaken in this area. This could ultimately prove to be a more sophisticated and inclusive way of measuring access to services, than, for example time taken by public transport.

## **Housing Domain**

- Question 24 – In developing the modelled indicator, do you have any comments on our proposed focus on hazards (as defined in the Housing Health and Safety Rating System, HHSRS) and on disrepair to capture poor housing quality? Please comment:

5.6 – Housing – Assessing adequacy of housing – Whilst the WHQS is useful as a toll to measure the standard of homes in the public sector, it is important to take account of the fact that for many local authorities, the condition of properties in the Privately Rented Sector is more of an issue. So, there ought to be a more robust method for measuring this.

- Question 27 – Do you have any comments on our proposal to drop the “lack of central heating” indicator as a measure of housing deprivation? Please comment:

Lack of Central Heating – Whilst only 2% of properties in Wales do not have central heating, it can be the case that a household does not have sufficient finances to use or, or that it is an inefficient system which as a result could be helping to trap households in fuel poverty. This should still be recorded in some way.

At a basic level, the ability to keep warm and well during the colder months is more important than having a speedy broadband connection.

- Question 28 – Do you have any other comments on proposals for the Housing domain? Please comment:

Off main gas – Whilst we appreciate that this would be a difficult measure to accurately record, some thought should be given as to how this could be recorded and ranked. The increased financial burden on families who are reliant on oil, LPG and coal to heat their homes and to cook can be considerable.

Not only can it contribute to fuel poverty but it can also have a negative effect on quality of life, especially in the case of reliance on coal.

As with, the lack of central heating, there is a case for seeing this as more of a pressing issue than access to high speed broadband, which is more important to business.

### **Physical Environment Domain**

- Question 32 – Do you have any other comments on proposals for the Physical Environment domain? Please comment:

5.7 – Physical Environment - Whilst access to natural green space is important to overall well-being. It can often be the case that those areas with no broadband access, poor access to services, a lack of employment choices and expensive heating systems are often isolated rural communities.

Likewise, some rural communities can be surrounded by land, which is in private ownership and is therefore not accessible. We would advocate care being taken for the weighting of this measure, if it is to be included.

### **Community Safety Domain**

- Question 33 – Do you have any comments on proposals for the Community Safety domain? Please comment:

5.8 – Community Safety – Domestic Abuse – There should be consideration given to recording incidents of domestic abuse and hate crimes, if only due to the negative impact that they can have on a person’s sense of well-being.