

PRIORITY THEME 1

Reduce inequalities in health and address the differentials in life expectancy across the city

Cardiff has seen significant redevelopment and economic transformation over the last twenty years, and become a major capital city, providing a regional hub and metropolitan centre for many sporting and cultural activities, with a high quality of life for many local residents and communities. However, Cardiff is a city of two halves, referred to as a 'tale of two cities,' with a prosperous northern area and a 'southern arc' which experiences high levels of multiple deprivations (income, employment, health, education, housing and access). 18% of Cardiff residents live in the most income deprived communities in Wales, which is approximately 60,000 people (Wales Index of Multiple Deprivation 2008). Cardiff has a high level of child poverty with 26.1% of children, aged 0-15 living in the most deprived 10% of Wales' communities with prevalence in the southern areas of the city (Wales Index of Multiple Deprivation 2008). Cardiff has a diverse community with a wide range of minority ethnic residents, over 10% of the population (ONS 2007) and over 115 different languages are spoken. In addition the student population has increased to almost 40,000 within Cardiff.

The level of deprivation and the diversity of the population, results in an increase in the level of poor health, which varies across areas of the city. 22% of Cardiff residents reported they suffered from a Limiting Long Term Illness (2008-09 Welsh Health Survey). A key indicator of the inequity is the gap in life expectancy of 11.6 years across the Cardiff geography, i.e. between the poorest areas and the most affluent parts of the city (1999-2003 ONS).

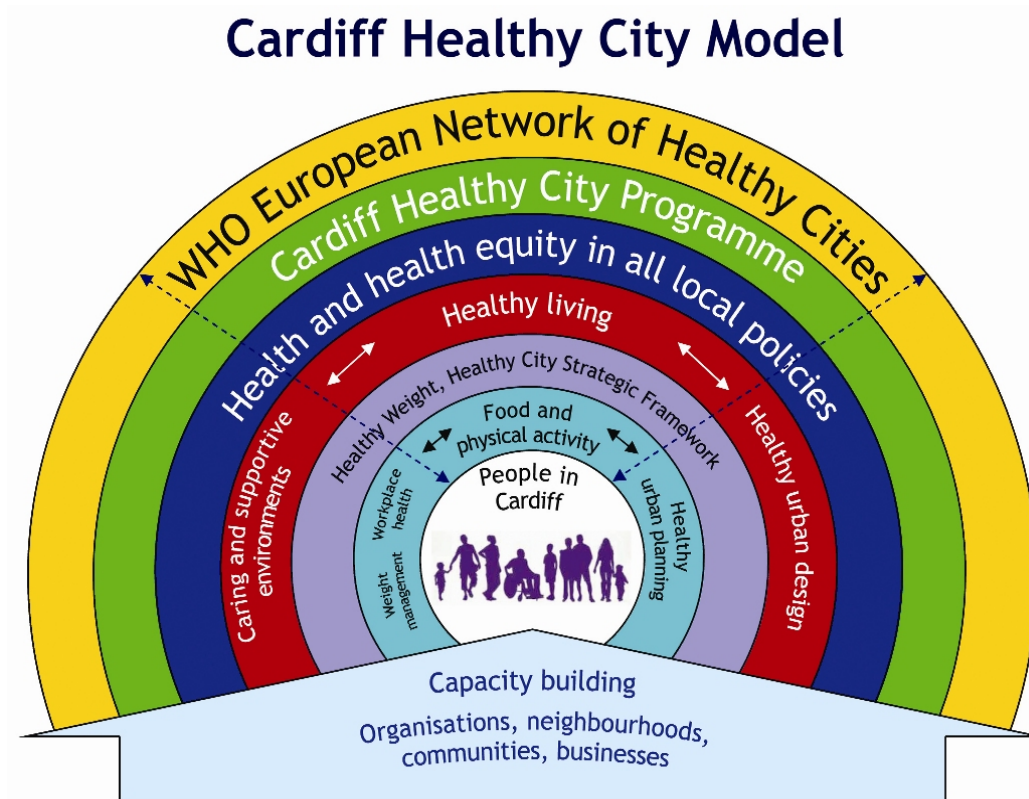
Through the IPS partners will work together to influence the wider determinants of health e.g. education, employment, and housing. Co-ordinated action will be targeted at those in greatest need and the Child Poverty Strategy will be implemented to improve the lives of children and young people. Community First partnerships work across the most deprived communities and their current work programmes are funded until 2012. Alongside this community development activity, the Neighbourhood Management approach has engaged partners in delivering increased community cohesion and improvements to neglected communities, in particular the environments.

The NHS, with partners, will increase their activity on prevention of ill-health; the maintenance of good health and well being; and improve access to services, with a focus on those living in deprivation and with the poorest health. Vulnerable groups such as Gypsies and Travellers, Asylum Seekers and Refugees, and homeless people will be supported through the work of the APGs and partners.

Healthy City

The overarching goal of the WHO European Healthy Cities Network is to embed health and health equity in all local policies. In addition there are three core themes which cities need to take forward as part of their commitment to the Healthy Cities programme: caring and supportive environments, healthy living and healthy urban design. The Cardiff Healthy City Programme lays out planned areas of action to take forward these principles and the Cardiff Healthy City model describes the areas of focus and the inter-relation of activities that will impact on health and well being of citizens.

To find out more: www.cardiffhealthycity.com
www.euro.who.int



The Health, Social Care and Well Being Operational Plan focuses on action to reduce inequalities in health and address the differentials in life expectancy across the city through the work on:

- Healthy City programme (this work spans across all themes and the report card is under theme 1)
- Homeless People
- Gypsies and Travellers
- Asylum Seekers

The plans that relate specifically to meeting the needs of children and young people are set out in the delivery plan for the Children and Young People's Partnership.