

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Atal iechyd gwael - gordewdra](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Prevention of ill health - obesity](#)

OB40 : Ymateb gan: | Response from:

Coleg Nyrsio Brenhinol Cymru / Royal College of Nursing (RCN) Wales



RCN Wales response to the Senedd Health Committee inquiry into the 'Prevention of ill-health: obesity'

Mehefin / June 2024



Nursing isn't only about caring for those who are unwell, it's also about keeping people healthy.



Whether it's good public transport links, automatic doors or just good signposting, everybody needs help to access healthcare.



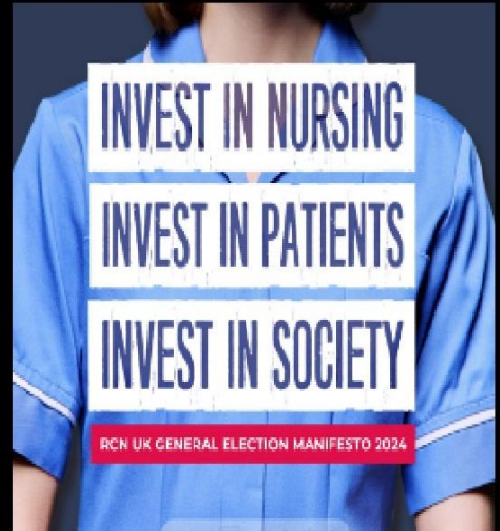
After all, who doesn't want to improve their health? But wanting to isn't the same thing as being able to.



The Welsh Government must support people to be physically active.



Wales needs more school nurses, health visitors, and public health nurses of all kinds. Access to healthcare services must be improved.



1. Summary of response

The Royal College of Nursing welcomes the opportunity to contribute towards the Health and Social Care Committee inquiry into the prevention of ill-health.

Rather than obesity, however, RCN Wales believes that the main focus of the conversation should be on making physical activity and healthy nutrition accessible to all.

The Royal College of Nursing would like to emphasise the vital role that nurses play in preventing ill-health at all stages of life, from cradle to grave.

Any successful strategy aimed at preventing ill-health should include within it a workforce strategy to ensure that sufficient numbers of nurses with the right skills are employed.

Summary of actions

The Royal College of Nursing believes that the actions on the themes listed here would increase levels of physical activity and improve diet, thus reducing obesity and improving health outcomes (full details of actions for Welsh Government are listed on Pages 19-21):

1) The nursing workforce

- Any government policy aimed at preventing ill-health will only be successful if there are enough registered nurses with the right skills to deliver it. Let's invest in district nursing, mental health nursing, learning disability nursing, consultant nursing as well as in the nursing profession more broadly.
- The Welsh Government and Health Education and Improvement Wales (HEIW) should develop a national, long-term post-registration commissioning strategy that commissions post-registration nursing education strategically as required by the needs of the population and works with higher education to ensure that this provision is developed sustainably in Wales.

2) Nutrition

- Most people understand the difference between a healthy and unhealthy meal; however, poor food standards as well as health and financial inequalities can prevent people from making the healthy nutrition choices that they would otherwise make. Let's ensure that nutritious food and drink is affordable and accessible to all.

3) Physical activity

- Physical activity is key to preventing ill-health. Let's get to grips with the barriers that may prevent someone from being physically active.

4) Community and infrastructure

- Poverty and other inequalities impact health. Tackling these inequalities would help in preventing ill-health.
- People need to be able to easily access their primary care services and hospitals. They also need to be able to access parks, shops, and sports and leisure facilities. Let's ensure that everyone has easy access to facilities and services that are vital to health and wellbeing.

2. Introduction

2.1. RCN Wales welcomes aspects of the terms of reference of the Committee's inquiry, such as its inclusion of the social determinants of health, its consideration of mental health as well as its acknowledgement of the importance of services.

2.2. The terms of reference as presented by the Committee imply that obesity is a problem that must be solved. RCN Wales regrets this approach and the focus in these terms of reference on the language of obesity. "Obese" is not a synonym for "unhealthy"; both words have different meanings. A simplistic focus on obesity rather than a more strategic approach that focusses on positive changes in individual and community action and behaviour, the Committee risks missing public policy approaches that could make a real difference in preventing ill-health.

2.3. Nursing as a profession is not just about caring for those who are unwell, it is also about promoting good health. There are many distinct nursing roles that play a significant role in promoting good health (for example, school nursing, learning disability nursing, mental health nursing and substance misuse nursing). Not only does investing in these roles help to treat and prevent ill-health, but it also fosters good health.

2.4. There are many reasons why a person might be or become obese or why obesity rates are increasing. Physical inactivity is unlikely to be the result of 'laziness'¹ and research shows that both 'thinness' and 'obesity' are inherited traits.²

2.5. The other factors that may contribute to obesity include:

- A lack of physical activity. There are any many reasons why someone may be physically inactive, including:
 - an illness, disability or injury that either makes exercise difficult or impossible, either directly or indirectly;
 - side effects of medication, particularly the side effects of new anti-psychotic medication for people with a Serious Mental Illness (SMI);
 - a lack of time and/or energy, with many people working long hours and have caring responsibilities;
 - an unfavourable environment for exercise, for example: busy traffic, lack of recreational spaces and gardens, lack of space in a house, personal security (individuals may be afraid of street harassment).
- Poor nutrition. There are any many reasons why someone may be eating unhealthily, including:
 - fuel poverty: high gas and electricity bills may make it difficult to consistently cook nutritious meals;
 - poor food standards, i.e. the widespread availability of affordable food containing high levels of salt, sugar or saturated fats;
 - a lack of nearby shops selling fresh and nutritious food cheaply, or a lack of cheap, reliable and accessible transport to get to these shops;
 - a lack of employer, education or NHS -provided cafeterias often sell unhealthy foods;
 - a lack of time and/or energy to prepare quick, cheap and nutritious meals due to factors such as long work hours, work-related stress, family and/or caring responsibilities, and the widespread availability of quick, cheap, unhealthy meals;
 - many people with learning disabilities and many people in residential care do not have sufficient, or any, control over their own diet.

2.6. In the next sections, RCN Wales will explore some public policy solutions which may help in preventing ill-health, starting by discussing the need to support the nursing workforce.

¹ [tackling-obesity.pdf \(instituteforgovernment.org.uk\)](#)

² [Genetic architecture of human thinness compared to severe obesity | PLOS Genetics](#)

3. How nurses improve public health

3.1. Registered nurses of all kinds play a key role in improving public health and are there to help us at each stage of life, providing care and support from cradle to grave. Figure 1 provides a summary of Amirah's life and some examples of the various stages of Amirah's life where nurses have helped her. Although Amirah is a fictional character, her story helps to explain the professional role that the nursing profession plays in people's lives:

Figure 1: Amirah's life

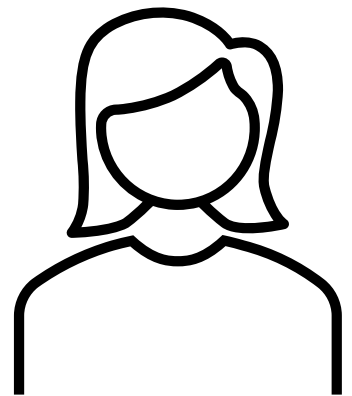
Amirah's life

0-6 years old:

Amirah is born and starts attending school

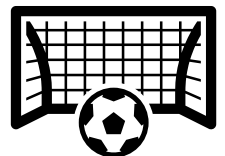
During these years, Amirah is helped by a:

- Neonatal Nurse
- Midwife
- Health Visitor
- School Nurse
- Children's Nurse



7-12 years old:

Amirah is assessed as having a learning disability.
Amirah starts playing football and breaks her arm
while saving a penalty.



During these years, Amirah and her family are helped by a:

- Learning Disability Nurse
- Emergency Nurse Practitioner
- Outpatient Nurse

13-18 years old:

Amirah struggles with her mental health and continues to receive support by a Learning Disability Nurse. Amirah starts smoking.

During these years, Amirah is helped by a:

- CAHMS Nurse
- Learning Disability Nurse
- Practice Nurse

19-30 years old:

Amirah enters adulthood and the world of work. Amirah attempts to quit smoking.

During these years, Amirah is helped by a:

- Learning Disability Nurse
- Sexual Health Nurse
- Mental Health Nurse
- Occupational Health Nurse
- Smoking Cessation Nurse
- Practice Nurse

31-45 years old:

Amirah is treated for a heart condition. Amirah finally manages to quit smoking. Amirah continues to receive support from a Mental Health Nurse.



During these years, Amirah is helped by a:

- Learning Disability Acute Liaison Nurse
- Adult Nurse
- Clinical Nurse Specialist
- Smoking Cessation Nurse
- Practice Nurse
- District Nurse
- Mental Health Nurse

46-60 years old:

Amirah receives treatment for a hernia. Amirah retires and continues to have co-morbidities.

During these years, Amirah is helped by an:

- Adult Nurse
- Practice Nurse
- Consultant Nurse
- Advanced Nurse Practitioner
- Learning Disability Acute Liaison Nurse

61-70 years old:

During the final years of her life, Amirah receives regular treatment at hospital, at home and, towards the end of her life, in a care home. Amirah receives palliative care before passing away. Amirah passes away peacefully and surrounded by loved ones aged 70.

During these years, Amirah is helped by a:

- GP Nurse
- Community Nurse
- Community Learning Disability Nurse
- Learning Disability Acute Liaison Nurse
- District Nurse
- Care Home Nurse
- Palliative Care Nurse

3.2. Amirah's life shows just how important registered nurses are in our lives. And this is only a snapshot; it will be very likely that registered nurses have also played a key role in the lives of members of her family.

3.3. As Figure 1 shows, specialist nurses of various types helped Amirah throughout her life. Specialist nurses also play a crucial role in our own lives in preventing ill-health. To become a specialist nurse, a registered nurse must undertake additional education and practice-based learning, leading to a recognised postgraduate qualification or degree.

3.4. The availability of nurses with these advanced qualifications is a key variable – frequently the key variable – in determining whether a health board can offer a given service to its population. Relative to the whole workforce, however, the number of nurses with a given specialised qualification can be surprisingly small. The retirement of just a few specialist nurses, for example, can result in the closure of an entire neonatal unit.

3.5. To ensure that there are sufficient numbers of specialist nurses (e.g. a Learning Disability nurse), it is important that sufficient numbers of places are commissioned for post-registration nursing degrees. As part of this, there needs to be a national, long-term strategy in place for commissioning post-registration nurse education.

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3.6. The Welsh Government, through HEIW, is responsible for commissioning the post-registration nursing education. Often, the cost of backfilling the post of a nurse released for post-registration study leads health boards to refuse to invest in nurse education. The lack of uptake leads the Welsh Government to commission fewer places on these courses, a cycle which leads eventually to the closure of university departments and even fewer opportunities to take advanced nursing courses in the future.

3.7. RCN Wales is concerned that the number of specialist nurses in Wales is unknown at the national level. This makes it impossible to know where more are needed. Geographical areas with the greatest need may not have a specialist nurse under the current unplanned approach.

3.8. A national, long-term strategy for commissioning post-registration nursing education (e.g., public health nursing and health visiting) is needed as a first step to an approach that is sustainable and conducive to patients having access to the care they need. NHS Wales and employers also need to release nurses to study and HEIW must commission post-registration nursing education and universities must re-establish specialist advanced nursing courses.

3.9. RCN Wales notes that HEIW's draft strategic nursing work force plan proposes to introduce a new public health nurse role³. However, the plan does not go into sufficient detail as to what this new role will entail, nor does it outline an education commissioning plan for it.

3.10. Moreover, in order to help nurses to deliver the best possible care for patients, and by extension to help prevent ill-health, it is important that there is sufficient time allocated towards Continuing Professional Development.

ACTION 1: RCN Wales calls on the Welsh Government and HEIW to develop a national long-term post-registration commissioning strategy that commissions post-registration nursing education for the prevention of ill health strategically, as required by the needs of the population and works with higher education to ensure this provision is developed sustainably in Wales. This should include relevant Specialist Practitioner Qualifications.

ACTION 2: RCN Wales calls on the Welsh Government to ensure that it implements in full, and in a timely and successful manner, its commitments regarding CPD made as part of the non-pay elements of its pay deal with the Royal College of Nursing.

ACTION 3: RCN Wales calls on the Welsh Government to increase investment in all fields of nursing, including in consultant nursing and specialist nursing.

³ heiw.nhs.wales/files/09052024-snwp-actions-v1-20-pdf/, pp. 13-14.

4. Healthy nutrition

4.1. Consuming the wrong types of food and drink is a major factor in causing ill-health.⁴ If we are to prevent ill-health wherever possible, it is imperative that the Welsh Government ensures that nutritious food and drink is affordable for all.

4.2. According to the World Health Organisation (WHO), “Breastfeeding is one of the most effective ways to ensure child health and survival”, with breastfed children being “less likely to be overweight or obese and less prone to diabetes later in life”; for these reasons, WHO recommends that infants under 6 months old are exclusively breast fed.⁵ Health Visitors provide crucial support to mothers who choose to breastfeed. However, as discussed in Section 3, more investment is needed to increase and support the health visiting workforce.

4.3. The number of health visitors is not keeping up with the substantial increase that the workforce has had in caseload in recent years. In fact, the five years between December 2018 and December 2023 saw the number of Health Visitors working at Full Time Equivalent decline by 34.2 in Wales.⁶ According to a BBC report from 2023, one mother living in the Hywel Dda University Health Board area said that her daughter had to wait two and a half years after she was born to see a Health Visitor.⁷

4.4. Our food ‘choices’ are not made in a vacuum; they are constrained by availability, affordability and accessibility.⁸ Organic food, for example, tends to be more expensive than non-organic food in Wales;⁹ there tends to be fewer organic options in local convenience stores; we may have to travel longer distances to access organic food (which poses a problem for those who do not drive, or for those who may be disabled or elderly).

4.5. Any public health strategy aimed at preventing ill-health needs to introduce specific measures to ensure that the environment in which children make food choices is one that enables them to make healthy choices. Currently, however, children are bombarded with advertisements that emphasise unhealthy food and drink,¹⁰ and the food industry produces food high in salt and saturated fats.

⁴ [Chapter 1: The nation's plate, our diet and food choices today | Food Standards Agency](#)

⁵ [Breastfeeding \(who.int\)](#)

⁶ [Nursing, midwifery and health visiting staff, by grade and area of work \(gov.wales\)](#)

⁷ [NHS: Mum wait two-and-a-half years for baby's health visitor - BBC News](#)

⁸ [Sociocultural Influences on Food Choices and Implications for Sustainable Healthy Diets \(sagepub.com\)](#)

⁹ [The organic food products that will cost you the most - and least - compared to regular items - Wales Online](#)

¹⁰ [3-Briefing-UK-Junk-Food_vF.pdf \(foodfoundation.org.uk\)](#)

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4.6. If public health strategies are to have an impact on childhood obesity, they must address child nutrition, the exploitation of children by food advertising, transport and neighbourhood planning policies so that children are able to walk or cycle to and from school and have safe play opportunities and the availability of fresh, healthy produce in our deprived neighbourhoods.

4.7. This requires public health strategies to become more integrated. For this to happen, there needs to be increased strategic collaboration and partnership working with key stakeholders, particularly local government and the third sector.

4.8. Time is another consideration which can impact our food choices: those working 12-hour+ shifts, for example, may find it difficult to find the time to cook healthy, nutritious food; their long work hours, as well as limiting the time that they might otherwise have to prepare healthy meals, often drains them of energy, rendering the little time that they do have less valuable.

4.9. With all this in mind, blaming individuals for making unhealthy food 'choices' misses the point. The real solution involves getting to grips with health inequalities and restricting the ability of food manufacturers to sell and advertise unhealthy food, especially for children.

4.10. Public health consultant nurses are able to provide strategic leadership in delivering services and health interventions that promote healthy nutrition, undertaking their own research to help achieve this. They can also use their expertise to influence Welsh Government policy on public health to help make healthy nutrition accessible to all.

ACTION 4: The Royal College of Nursing Wales calls on the Welsh Government to:

- Continue to offer free school meals to all primary school age children and to extend the policy to also include all children in secondary schools;
- Ensure that children also receive free lunch meals during school holidays;
- Ensure that these free meals, including any free meals that may be offered during school holidays, are nutritious.

ACTION 5: The Royal College of Nursing Wales calls on the Welsh Government to:

- Invest in the public health consultant nursing field and seek the advice of those working as consultant nurses in order to improve access to fresh food
- Introduce tougher regulation on high-salt/sugar food and drink
- Introduce a tax or levy on high-salt/sugar food and drink

- Restrict the advertising of products that exceed a certain amount of sugar/salt/saturated fats, or that are otherwise deemed to be very unhealthy
- Ban the advertising to children of products that exceed a certain amount of sugar/salt/saturated fats, or that are otherwise deemed to be very unhealthy
- Provide practical cooking skills, both in the school environment and for adults
- Provide more support for locally-sourced food sectors
- Implement measures to improve the availability and access to healthier food for people living in deprived areas on low incomes.
- Ensure that children have spaces to play and socialise outside.

5. Physical inactivity

5.1. The evidence overwhelmingly shows just how important physical activity is when it comes to being and remaining physically healthy.¹¹

5.2. Being physically active can also have positive effects on mental health.¹² Exercise can often involve being outside and closer to nature, which can further improve mental health.¹³

5.3. When we exercise with others, that can create and strengthen social and community bonds, which can further improve our mental health.¹⁴

5.4. Health visitors play an important role in advising parents on how they can ensure that their child is physically active.

5.5. As their child reaches school age, school nurses play an important role in advising teachers on ways in which they can integrate physical activity as part of the school day.

5.6. Girls are less likely than boys to participate in extracurricular sports three times a week or more, according to a survey of school pupils from years 3 to 11 in Wales.¹⁵ However,

¹¹ [Health benefits of physical activity: the evidence - PMC \(nih.gov\)](#)

¹² [How to look after your mental health using exercise | Mental Health Foundation](#); and: [Five Years On | Royal College of Nursing \(rcn.org.uk\)](#)

¹³ [MHAW21-Nature-research-report.pdf \(mentalhealth.org.uk\)](#)

¹⁴ [Social bonds are related to health behaviors and positive well-being globally | Science Advances](#)

¹⁵ [School Sport Survey - State of the Nation Report](#)

organisations such as the Urdd have been successful in empowering women and girls in sports.¹⁶

5.7. At a May 2024 Senedd Cross Party Group meeting on Nursing and Midwifery¹⁷ (sponsored by the Royal College of Nursing and chaired by Jenny Rathbone MS), Professor Carolyn Wallace (Professor of Community Health and Care Services at the University of South Wales) spoke about the crucial work that registered nurses do in making a success of social prescribing.

5.8. While RCN Wales would like to warn against any reductionist account of ill-health that would solely emphasise the role of exercise in preventing ill-health – such an account would be an incomplete and therefore ineffective approach to public health policy – RCN Wales certainly recognises physical exercise to be one important factor among many others (as shown in Figure 5) in preventing ill-health.

5.9. In recent years, social prescribing has become increasingly used by health professionals as a method of treatment, and the Welsh Government has committed to improving the availability of social prescribing treatments in Wales.

5.10. Crucial to delivering social prescribing treatments are community nurses. Community nursing teams work closely with social services to provide nursing expertise, promote independence living and assist the social care workforce.

5.11. For social prescribing to work, it is key that physical activity is made accessible for all and that there is sufficient investment in the workforce responsible for delivering social prescribing treatments.

Making physical activity accessible

5.12. Figures 2-5 show that there many factors that can either prevent or make it difficult for someone to be physically active; factors relating to accessibility, or lack thereof, will be discussed here.

¹⁶ [#FelMerch | Urdd Gobaith Cymru](#)

¹⁷ [Cross Party Group - Nursing & Midwifery - Cross Party Group \(senedd.wales\)](#)

5.13. Disability rights activists point to the need to make outdoor spaces more accessible. The Pontypridd-based writer, poet and disability rights activist, Bethany Handley, summarised the problem in a 2023 article for the Institute of Welsh Affairs' *Welsh Agenda*:

"The natural world does not choose to exclude many Disabled people. We exclude Disabled people by design. Yes, I can't wheel up mountains but there are outdoor spaces I can access and move freely within; yet, my body is designed out of them. We write maps but only for drivers, people who walk with ease, and cyclists.

"We do not fund offroad wheels or wheelchairs. We offer swan pedalos but rarely offer beach wheelchairs. Flat paths that would be perfect for wheelchair users are often gated and locked, only permitting access to walkers."

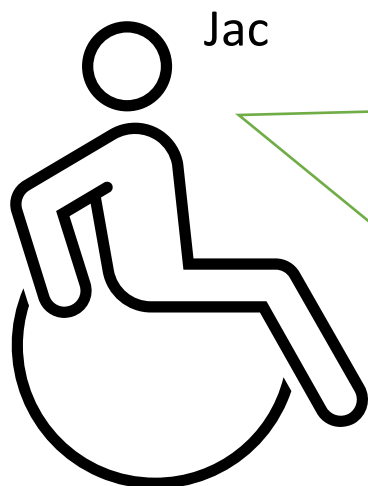
"We ask whether benches ruin views. We close off fields with kissing gates. We often mark accessible spaces at shops and in cities but rarely mark accessible parking spaces at beauty spots.

*"We fund new coast paths but don't consider how wheels would navigate the surface. We place deep storm drains across flat footpaths rather than beside them. We tell stories of how people walk quickly through a chosen space."*¹⁸

5.14. Factors that might affect someone with a learning disability might include lack of awareness of and a lack of availability of accessible information, a lack of support to access physical activity, cost, as well as the negative attitudes of others.

¹⁸ [Welsh Landscapes, Disability and the Myth of Personal Independence - Institute of Welsh Affairs \(iwa.wales\)](https://iwa.wales/)

Figure 2: Case study example: Jac¹⁹



I'd love to be able to spend more time in nature. There's a really nice park in my area. But it can be a real hassle to get to, 'cause of the amount of raised pavements that I'd need to pass, and it becomes impossible when my partner's not around. And I can't really rely on the buses in my area. Then there's an issue about the accessibility of park itself. My local park happens to be relatively wheelchair-friendly, but I know that this isn't the case for a lot of parks.

My son doesn't go out and about as much as he used to. He has long Covid, and because of this, he needs to be able to sit-down in-between periods of walking. There isn't a bench in his local park and there aren't enough benches in the town centre unfortunately.

5.15. Jac wants to be physically active despite his physical disability. However, as he has identified, there are external factors that make this very difficult.

5.16. To help Jac, and to make the outside world accessible for disabled and elderly people especially, the Welsh Government and local authorities should deliver the following:

ACTION 6: The Welsh Government should:

- Reduce the prevalence of inaccessible pavements, which can make it difficult for disabled people and older people to access outside spaces;²⁰
- Ensuring the availability and maintenance of well-lit streets, clear signposting, green spaces and public toilets, as called for by the Older People's Commissioner;²¹
- Ensure that there are enough benches in all areas outside, especially in places that are desirable to go for walks;

¹⁹ (A fictional character whose story outlines the need to tackle health inequalities).

²⁰ [The path to inclusive footways | Local Government Association](#)

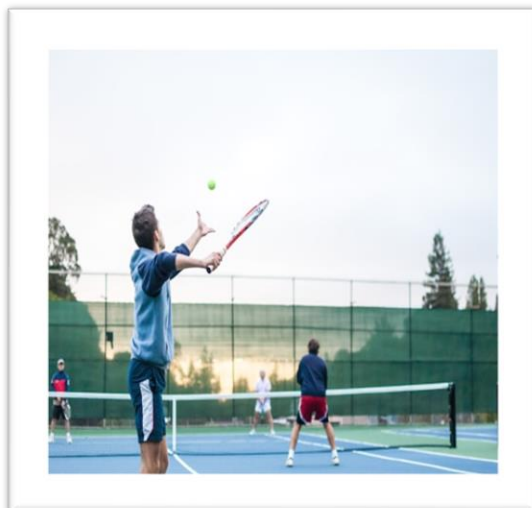
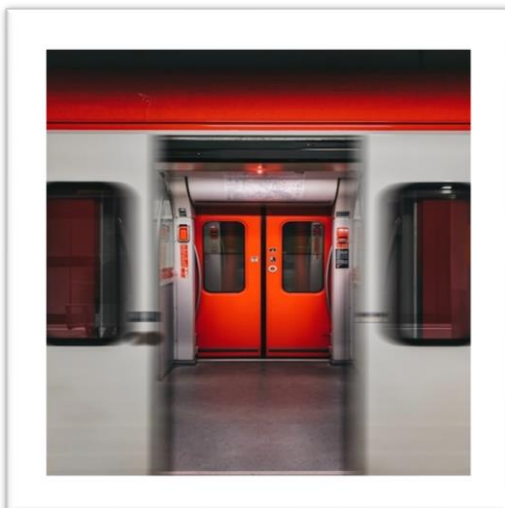
²¹ [What are Age-friendly communities? - Older People's Commissioner for Wales](#)

- Ensure that pavements, not just roads, are gritted during winter;
- Ensure that there are enough sheltered areas where people can stand or sit when it rains.

5.17. With 23% of people in Wales not have access to a car, public transport services are the only way that many are able to access essential services and sports and recreation facilities.²² However, since 2010, bus vehicle numbers have decreased by 17.8%, and as a result of this, 12% of people in Wales are now without any public transport links within their local area.²³ Sport For Confidence, Community 360 and Community Voluntary Services Tendring (CVST) have worked together to offer a free transport service to help people in North Essex who have issues associated with travel to access their local leisure facilities. This minibus scheme has been successful in widening access to sports,²⁴ suggesting a link between transport availability and sports participation.

ACTION 7: Further actions that the Welsh Government and local authorities should take to make physical activity more accessible to all include ensuring the following:

- walkable and cyclable neighbourhoods where amenities are easily available within walking distance;
- the availability of affordable, reliable and accessible public transport, as called for by the Older People's Commissioner;²⁵
- the availability of accessible leisure and recreation facilities
- childcare support.



²² [People in Wales facing transport poverty reality, says Sustrans report - Sustrans.org.uk](https://www.sustrans.org.uk/people-in-wales-facing-transport-poverty-reality-says-sustrans-report)

²³ [transportpovertypaper-sustrans_eng.pdf](https://www.sustrans.org.uk/transportpovertypaper-sustrans-eng.pdf)

²⁴ [Free Transport Service To Help More People Access Leisure Facilities \(sportforconfidence.com\)](https://www.sportforconfidence.com/free-transport-service-to-help-more-people-access-leisure-facilities)

²⁵ [Free Transport Service To Help More People Access Leisure Facilities \(sportforconfidence.com\)](https://www.sportforconfidence.com/free-transport-service-to-help-more-people-access-leisure-facilities)

6. Social determinants of health

6.1. We see from Jac's case that that various different factors may impede on the ability of someone to live a healthy life, and that many of these factors are either social in nature or are factors which require a social response. This is further demonstrated in the case study examples of both Amirah and Tanwen.²⁶

Figure 3: Case study: Amirah

Amirah



I was quite athletic back in the day – I used to jog and play football for my local team. But unfortunately, I'm not able to have a work-life balance at my current job. I never know in advance which evenings I'll be available, and because of this, I'm not able to commit to attending Thursday evening football training.

Being glued to my work laptop, I constantly feel tired and stressed and so rarely have the time or energy to plan and cook anything nutritious for myself after work, so on most evenings, I find myself ordering take away on my phone or eating a ready meal. It's not that I don't know how to keep healthy – I do – it's that that I'm not in a place where I'm able to do that at the moment unfortunately.

Figure 4: Case study: Tanwen

Tanwen and daughter, Efa



This year's been quite stressful if I'm being honest. I've been trying to keep ends meet and was just about managing – struggling, but still managing. But then my landlord decided that she wanted to increase the rent by 50%, which is just not affordable for me. I tried reminding her of how little I earn at work and of the fact that I have to look after Efa bach, but that didn't work, so I had to find somewhere else to live for us both. The rent and bills in my new place is more expensive than what I was paying for previously, but thankfully not as expensive as what my former landlord wanted me to pay.

The whole thing's been stressful and not great for my mental health, but I have to be there for Efa. So, yeah, cooking healthy meals for myself and making sure that I exercise properly aren't really my priorities at the moment. My priority is to try my best to make ends meet and making sure that I give Efa can have the best possible start in life.

²⁶ (All are fictional characters whose stories help outline how the role played by social determinants of health).

6.2. We see that various different factors impede on the ability of Jac, Amirah and Tanwen to live a healthy life, many of which are either social in nature or which require a social response.

6.3. Some of the key factors impacting health, many of which feature in the experiences of Jac, Amirah and Tanwen, can be summarised in Figure 5:

Figure 5: Key factors impacting health:



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6.4. As can be seen here, as discussed in the examples of Amirah and Tanwen, and as shown by research,²⁷ inequalities relating to health and finance are a factor in causing or worsening ill-health.

6.5. 67% of Welsh housing associations report rise in food bank referrals between January and June 2023.²⁸

6.6. Mitigating against health inequalities entails widening access to careers with good pay and conditions and to safe and affordable housing; ensuring that social benefits are provided at a level that helps to prevent health inequalities from occurring; addressing health inequalities faced by global majority communities²⁹; as well as ensuring that measures are implemented to reduce poverty, including fuel poverty, and to mitigate against the rising cost of living.

ACTION 8:

RCN Wales believes that the Welsh Government should take necessary measures, as outlined in 6.6., to help prevent and tackle health inequalities; and where relevant powers lie with the UK Government, that it should seek to influence the UK Government to achieve these aims.

7. Actions for Welsh Government

ACTION 1: RCN Wales calls on the Welsh Government and HEIW to develop a national long-term post-registration commissioning strategy that commissions post-registration nursing education for the prevention of ill health strategically, as required by the needs of the population and works with higher education to ensure this provision is developed sustainably in Wales. This should include relevant Specialist Practitioner Qualifications.

ACTION 2: RCN Wales calls on the Welsh Government to ensure that it implements in full, and in a timely and successful manner, its commitments regarding CPD made as part of the non-pay elements of its pay deal with the Royal College of Nursing.

²⁷ [tackling-obesity.pdf \(instituteforgovernment.org.uk\)](#)

²⁸ [67% of Welsh housing associations report... | Community Housing Cymru \(chcymru.org.uk\)](#)

²⁹ [Leaving No-One Behind | Royal College of Nursing \(rcn.org.uk\)](#), p. 27 especially

ACTION 3: RCN Wales calls on the Welsh Government to increase investment in all fields of nursing, including in consultant nursing and specialist nursing.

ACTION 4: The Royal College of Nursing Wales calls on the Welsh Government to:

- Continue to offer free school meals to all primary school age children and to extend the policy to also include all children in secondary schools;
- Ensure that children also receive free lunch meals during school holidays;
- Ensure that these free meals, including any free meals that may be offered during school holidays, are nutritious.

ACTION 5: The Royal College of Nursing Wales calls on the Welsh Government to:

- Invest in the public health consultant nursing field and seek the advice of those working as consultant nurses in order to improve access to fresh food
- Introduce tougher regulation on high-salt/sugar food and drink
- Introduce a tax or levy on high-salt/sugar food and drink
- Restrict the advertising of products that exceed a certain amount of sugar/salt/saturated fats, or that are otherwise deemed to be very unhealthy
- Ban the advertising to children of products that exceed a certain amount of sugar/salt/saturated fats, or that are otherwise deemed to be very unhealthy
- Provide practical cooking skills, both in the school environment and for adults
- Provide more support for locally-sourced food sectors
- Implement measures to improve the availability and access to healthier food for people living in deprived areas on low incomes.
- Ensure that children have spaces to play and socialise outside.

ACTION 6: The Welsh Government should:

- Reduce the prevalence of inaccessible pavements, which can make it difficult for disabled people and older people to access outside spaces;
- Ensure the availability and maintenance of well-lit streets, clear signposting, green spaces and public toilets, as called for by the Older People's Commissioner;
- Ensure that there are enough benches in all areas outside, especially in places that are desirable to go for walks;
- Ensure that pavements, not just roads, are gritted during winter;
- Ensure that there are enough sheltered areas where people can stand or sit when it rains.

ACTION 7: Further actions that the Welsh Government and local authorities should take to make physical activity more accessible to all include ensuring the following:

- walkable and cyclable neighbourhoods where amenities are easily available within walking distance;
- the availability of affordable, reliable and accessible public transport, as called for by the Older People's Commissioner;
- the availability of accessible leisure and recreation facilities
- childcare support.

ACTION 8:

RCN Wales believes that the Welsh Government should take necessary measures, as outlined in 6.6., to help prevent and tackle health inequalities; and where relevant powers lie with the UK Government, that it should seek to influence the UK Government to achieve these aims.

8. About the Royal College of Nursing Wales

The RCN is the world's largest professional union of nurses, representing over half a million members, including nurses, midwives, health visitors and nursing students, with around 30,500 members in Wales. The majority of RCN members work in the NHS with around a quarter working in the independent sector. The RCN works locally, nationally and internationally to promote standards of care and the interests of patients and nurses, and of nursing as a profession.

The RCN is a UK-wide organisation, with its own National Boards for Wales, Scotland and Northern Ireland. The RCN is a major contributor to nursing practice, standards of care, and public policy as it affects health and nursing. The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.