

### Contents

Welcome	P3
1. Babies and young children	P4
2. Young people	P6
3. Residents	P8
4. Older people	P10
Achieving our goals	P12
References	P14

Barnsley 2030 is the long-term ambition shared by the council and public, private and voluntary sector organisations. It is about enabling everyone to have a good life: a quality place to call home, good physical and mental wellbeing, a sense of self-worth, and secure employment opportunities.

There are four ambitions within Barnsley 2030:
Growing, Learning, Healthy, and Sustainable Barnsley.
Good health and wellbeing are integral across these areas and are influenced by many factors – from



the environment we live in, our social networks, access to facilities and our health options. Financial and social resources are fundamental but are not equally distributed across our communities and therefore there are unfair differences in health outcomes. Barnsley 2030 involves multiple strategies that collectively work together to address these issues, aiming to make Barnsley 'the Place of Possibilities' where all residents have long, fulfilling and healthy



lives. Within these strategies are themes around improvements to mental health, addressing low skill levels and increasing economic activity. Flagship programmes include Health on the High Street, Great Childhood Ambition, Pathways to Work and The Big Idea – Transforming Communities through Moving More.

The Health and Wellbeing Board focuses on the Healthy Barnsley ambition of Barnsley 2030, involving representatives from the council, NHS, voluntary and community sector, and other local organisations. It is centred around partnerships and joint working to improve health and wellbeing.

The vision of the Health and Wellbeing Board is 'All Barnsley residents are enabled to enjoy long, fulfilling and healthy lives in safe, strong and vibrant communities where every person is equipped with the skills and resources they need to thrive'.

The Health and Wellbeing Board has produced this strategy, aligned with the borough priorities, to address the wider determinants of health and reduce health inequalities. For 2025 to 2030 the Partnership has chosen to focus on four themes. Together, we chose themes that:

- all partner organisations can influence
- are achievable
- have significant impact

### The Health and Wellbeing Board priority themes for Barnsley:

- Babies and young children have a strong bond with a caring adult Supporting their progress in reaching developmental milestones
- Young people have creative approaches to mental health and wellbeing
   Supporting them to achieve their ambitions
- Residents have access to healthy homes and active travel opportunities
   Key building blocks of healthy and sustainable communities
- Older people move more
   Enabling them to stay physically and socially active for as long as possible



1

Babies and young children have a strong bond with a caring adult, supporting their progress in reaching developmental milestones.



The first 1001 days are a critical time for early childhood development, laying the foundations for lifelong health and wellbeing. Starting in pregnancy, many factors contribute to development during this time including individual characteristics, home, and the wider environment. Evidence shows that a supportive, caring adult is a particularly positive factor and a key influence at this stage¹. A strong bond provides that connection, enabling babies and young children to grow, learn and thrive. Nurturing care received during these early years has a lasting impact on physical health, emotional and economic wellbeing.



#### Why does it matter in Barnsley?

In Barnsley we have the Great Childhood Ambition that all children thrive, and to achieve this requires all children to have a strong bond with a caring adult. National research shows that around 10-25% of young children have inadequate relationships with their main carer, with even higher rates in children in deprived areas<sup>2</sup>.

10-25%



National research shows that around 10–25% of young children have inadequate relationships with their main carer, with even higher rates in children in deprived areas.

#### How do we go about addressing this?

Addressing this priority means actively creating a culture that values the role of parents and carers in giving a baby born in Barnsley the best start in life. Evidence-based programmes and initiatives that support sensitive and responsive care-giving help build and sustain these meaningful relationships. For the development of a strong adult-infant bond, it is also important to address the mental health and wellbeing of parents and carers. A range of services including midwives, health visitors, early help, Family Hubs and the voluntary sector provide both baby-focused and adult-focused support during this time. We know that wider family including grandparents often also provide care and emotional support.

This priority involves creating and supporting safe spaces for adults and their babies, such as community events at libraries, as well as breastfeeding-friendly environments. In Barnsley we have the Breastfeeding Welcome Scheme, one of several programmes which support UNICEF's Baby Friendly Initiative – an evidence-based approach to improving infant health through the promotion of loving relationships<sup>1</sup>.

The Family Hubs Start for Life programme also provides local and individualised one-to-one support. Local community groups such as 'Stay and Play' further play a vital role, providing families with significant support in a trusted environment near to where they live.

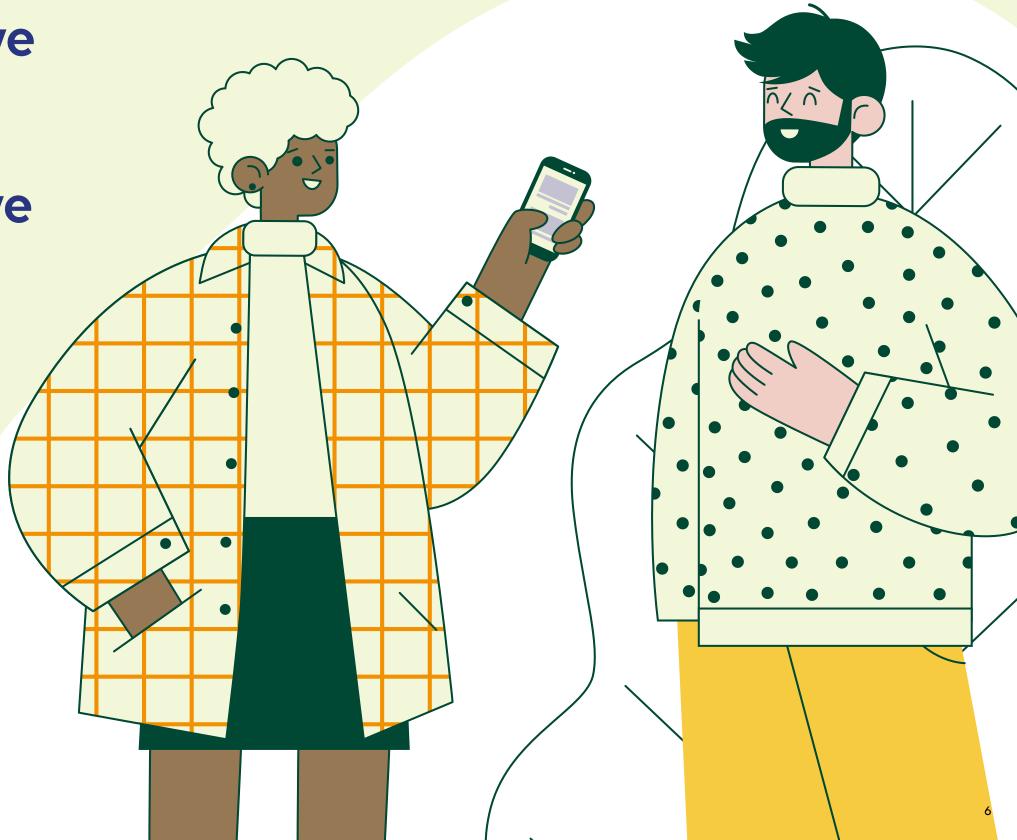


## How will we know success and monitor the outcomes?

Indicators will include breastfeeding prevalence, the two-year-old check and school readiness.



Young people have creative approaches to mental health and wellbeing, supporting them to achieve their ambitions.



Good mental health is a key component to our wellbeing and has far-reaching impacts. However, poor mental health is an increasing issue and the rate of mental health conditions amongst young people is now higher than ever. In the UK, 34% of young people reported symptoms that indicated either depression, anxiety or bipolar<sup>3</sup>. Barnsley's Pathways to Work programme identified poor mental health as one of the leading barriers to work participation, and national reports suggest 50% of mental health conditions are established by age 14<sup>1,4</sup>.

Creativity has been shown to be a particularly positive influence on our mental wellbeing<sup>5</sup>. South West Yorkshire Foundation NHS Trust's Creative Minds programmes have further demonstrated this positive impact. Creativity helps young people express their emotions, boosts their self-esteem and encourages innovative thinking<sup>6</sup>. It also supports the development of life-long skills such as resilience and adaptability, which are important within our lives and workplaces<sup>7</sup>.

Creative approaches encompass a whole range of different activities and perspectives – from thinking about things in new ways to participating in group activities, such as physical activity or drama. Creativity helps young people to be ambitious in their goals and contributes to the development of skills to achieve them.



#### Why does it matter in Barnsley?

In the 2024 local 'Make your Mark' survey (completed by over 9,000 11–18-year-olds from Barnsley) our young people told us that they need improved mental health support<sup>8</sup>. Moreover, local hospital admissions caused by unintentional or deliberate injuries are higher than the national average<sup>9</sup>.



Promoting creative approaches to support mental health means providing opportunities for creative outlets and addressing inequalities in access.

An example is creating and supporting environments where young people can connect and socialise, such as the new Barnsley Youth Zone. Additionally, Barnsley's Children's University encourages all children to develop skills and knowledge outside of the school curriculum and is a programme within Great Childhood Ambition. Another great local example is the Fusion initiative, Barnsley's educational and cultural partnership.

This priority means supporting young people to engage with activities that interest them. An example within this may be physical activity – a known protective and supportive factor for mental health. In Barnsley, 32% of children are physically inactive¹o. Poverty and insecurity are closely linked to poor mental health and make it harder for young people to access support or take advantage of opportunities. To improve mental health, we need to address these. In Barnsley, we have the upcoming introduction of the free bus travel scheme for under 18s which will help increase access and also aligns with our priority 3 (on the next page). Further examples include local schools who provide breakfast clubs and support with uniforms.



### How will we know success and monitor the outcomes?

Indicators will include results from the Let's Hear Your Voice Survey, school attendance and hospital admissions.

### 34%

In the UK, 34% of young people reported symptoms that indicated common mental disorders.

7





Healthy homes are warm, safe and secure places to live. They have a fundamental role in reducing the risk of illness (from decreased exposure to problems such as damp and overcrowding) but also supporting recovery after sickness and helping us stay well.

A healthy home provides stability, enhances quality of life, and strengthens communities. Poor quality housing is strongly linked with poor health. In Barnsley, areas with the poorest quality of housing have the lowest life expectancy, while areas with better housing quality have higher life expectancy<sup>11</sup>. Improving housing is a widely recognised key starting point for reducing health inequalities.

Active travel is people-powered movement, often through walking or cycling and without the use of motorised vehicles. It benefits mental and physical health, is greener for our environment, and makes journeys cheaper. Creating healthier environments with accessible transport options also helps new and existing communities grow sustainably and supports increased economic activity. In Barnsley the areas with the least connectivity are also the most economically inactive, and improving travel is an important element for our Pathways to Work programme.



17.7%

In Barnsley, 17.7% of households live in fuel poverty (compared with the national average of 13.1%).



#### Why does it matter in Barnsley?

We have a comprehensive local housing strategy with the overarching ambition that every resident in Barnsley has access to good quality, affordable housing. This Health and Wellbeing Board strategy complements and supports this. In Barnsley 17.7% of households live in fuel poverty (compared with the national average of 13.1%)<sup>12</sup>, and 31.5% of privately rented homes are considered non-decent<sup>11</sup>.

Additionally, there is less active travel and more car commuting compared with our neighbours. Only 11.4% of adults walk for travel three days a week (national average 15.1%)<sup>10</sup>, and 60% of Barnsley residents commute by car, compared with 38.4% across Yorkshire and the Humber<sup>12</sup>.

#### How do we go about addressing this?

We need a collaborative approach to creating healthier and sustainable living environments. Improving quality of housing means ensuring houses are well-insulated and warm, and that people have access to affordable heating. This is particularly important for groups of people who spend more time at home, such as those living with a long-term disability. This also includes looking out for those at risk of being homeless or who are homeless, and referring them to appropriate support.

This includes promoting easy access to homeless prevention services and an early intervention approach. Locally we also have the Barnsley Homeless Alliance that is made up of organisations and charities working together to provide food, clothing, housing and advice.

Improving active travel means creating suitable surroundings and improving community connectedness. This includes supporting the Active Travel Programmes, such as Barnsley Bike Works and Advocating Schools and Workplaces That Encourage Active Travel.



### How will we know success and monitor the outcomes?

Indicators will include the active travel numbers, number of children and families who are homeless, and healthy homes measures.

4

Older people move more, enabling them to stay physically and socially active for as long as possible.



Physical activity helps prevent the development of multiple chronic conditions, including musculoskeletal disorders (MSK), stroke and several cancers. Improving strength and balance also decreases the risk of falls and fractures. In older people, moving more has particularly positive impacts on mental health – often improving social connectedness and reducing loneliness. It also lowers the risk of depression and dementia by 30%<sup>14</sup>.

Despite the well-cited benefits, physical inactivity is a widespread and costly issue. The UK Chief Medical Officer's 'Active aging' report estimates that inactivity is associated with 1 in 6 deaths and costs the NHS £7.4 billion annually<sup>15</sup>.



68%

Physical activity decreases the risk of falls and hip fractures by up to 68%.



#### Why does it matter in Barnsley?

In Barnsley 35.8% of adults are physically inactive, and this rises to 38.4% in the most deprived areas<sup>10</sup>. Additionally, 23.9% of Barnsley residents report a long-term MSK problem<sup>16</sup>. We know from Pathways to Work that MSK disorders are a key contributor to unemployment and reduced economic activity. Staying fitter for longer will help prevent MSK problems, promote healthy life expectancy and help reduce inequalities. It is especially important considering the population is ageing – over the next ten years older people will make up a larger proportion of our communities. It is also estimated that significant numbers of older people will continue to be in paid work for longer, highlighting the increasing importance of maintaining health and sustained ability to work.

Physical activity decreases the risk of falls and hip fractures by up to 68%<sup>14</sup> and, in over 65-year-olds, hip fractures have a high mortality rate (30% die within 12 months)<sup>17</sup>. In Barnsley the fall rate is starkly higher than the average in England (2,754 per 100,000, compared with 1,933 per 100,000)<sup>16</sup>.

#### How do we go about addressing this?

Encouraging moving more means supporting activity within formal physical exercise spaces, but also activity as part of social and community events. It is about recognising that moving more throughout all earlier stages of life is an important contributor to healthy ageing, and it aligns with Barnsley's 'Big Idea – Transforming Communities through Moving More' programme (a Sport England funded programme taking a whole-system approach to increase physical activity).

Focusing on this priority means integrating 'moving more' across settings within our communities. It means empowering older people and providing accessible opportunities specifically for them. Examples include those that are part of the 'Barnsley Older People Physical Activity Alliance' – a group of independent and voluntary sector providers that deliver activities to help improve the strength and balance of Barnsley residents, and includes activities in venues such as leisure centres, community centres and churches. Our forthcoming Health on the High Street development will provide a town centre venue for all services to come together to improve health and wellbeing. Barnsley Premier Leisure will have a new Health and Wellbeing hub there which will provide older people with friendly information and support to get active.



### How will we know success and monitor the outcomes?

Indicators will include percentage of physically active adults and emergency hospital admissions due to falls.

### How can we achieve our goals?



We work with people to design things together from the start



We focus our resources where people need them most



We start from where people live and take a neighbourhood-first approach to delivering services, acknowledging the Voluntary and Community Sector as essential and equal partners



We bring communities together where everyone is valued



We ensure that our decision-making is based on evidence and we share our knowledge



### What the Barnsley Health and Wellbeing Partnership will do

- As a partnership we have selected and agreed four specific areas to focus on
- Each partner will make these areas a priority and direct resources where appropriate
- Partners will collaborate and work together
- Partners will monitor and report on their actions and outcomes
- As a partnership we will evaluate and share progress



## What the partnership and communities will do together

 Share knowledge, learn from evidence and take co-ordinated action



### What families and communities can do together

 Engage with opportunities, be involved with available programmes, and support one another

# How will we know if our goals have been achieved?

We will use an Outcomes Framework to align each of our four chosen priorities with specific outcomes. This will enable us to visualise change over time, evaluate what progress is being made and help us focus on meaningful benefits to our Barnsley population. Improvements in the indicators used positively contribute towards reaching Barnsley's 2030 ambition.

Key overarching indicators will include life expectancy, healthy life expectancy and inequality measures such as school attendance by area.



### References

- 1. UNICEF. UNICEF UK Baby Friendly Initiative:
  Theory of Change (2019). Available at: <a href="www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2019/04/Baby-Friendly-Initiative-Theory-of-Change.pdf">www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2019/04/Baby-Friendly-Initiative-Theory-of-Change.pdf</a>
- 2. Royal College of Psychiatrists College Report CR238. Infant and early childhood mental health: the case for action (2023). Available at: <a href="https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/College-report-CR238---Infant-and-early-childhood-mental-health.pdf">https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/College-report-CR238---Infant-and-early-childhood-mental-health.pdf</a>
- 3. McCurdy C, Murphy L. We've only just begun:
  Action to improve young people's mental health,
  education and employment. The Health Foundation
  and Resolution Foundation (2024). Available at:
  www.resolutionfoundation.org/app/uploads/2024/02/
  Weve-only-just-begun.pdf
- 4. Royal College of Paediatrics and Child Health.
  Prevalence of mental health conditions (2020).
  Available at: <a href="mailto:stateofchildhealth.rcpch.ac.uk/evidence/mental-health/prevalence">stateofchildhealth.rcpch.ac.uk/evidence/mental-health/prevalence</a>
  (Accessed December 2024)
- **5.** The National Centre for Creative Health and the All-Party Parliamentary Group on Arts, Health and Wellbeing. Creative Health Review How Policy Can Embrace Creative Health (2023). Available at: <a href="https://ncch.org.uk/creative-health-review">ncch.org.uk/creative-health-review</a>

- 6. Bone JK, Fancourt D. Arts, Culture and the Brain:
  A literature review and new epidemiological analyses.
  London: Arts Council England (2022). Available at:
  www.artscouncil.org.uk/arts-culture-brain
  (Accessed January 2025)
- 7. Zarobe L, Bungay H. The role of arts activities in developing resilience and mental wellbeing in children and young people, a rapid review of the literature. Perspect Public Health (2017). Nov;137(6):337–347.
- **8.** Youth Parliament. Make Your Mark Results Report (2024). Available at: <a href="nya.org.uk/wp-content/uploads/2024/10/MYM-Results-2024-v1.2-NYA.pdf">nya.org.uk/wp-content/uploads/2024/10/MYM-Results-2024-v1.2-NYA.pdf</a>
- **9.** Department of Health & Social Care. Fingertips Public health profiles: Child and Maternal Health. Available at: <a href="mailto:fingertips.phe.org.uk/profile/child-health-profiles/">fingertips.phe.org.uk/profile/child-health-profiles/</a> (Accessed December 2024)
- 10. Barnsley What's Your Move. Active in Barnsley (2022–2026). Available at: <a href="https://www.barnsley.gov.uk/media/dzkdiq5e/active-in-barnsley-2022-26.pdf">www.barnsley.gov.uk/media/dzkdiq5e/active-in-barnsley-2022-26.pdf</a>
- 11. The Health Foundation. Local authority dashboard: Barnsley Housing. Available at: <a href="www.health.org">www.health.org</a>. <a href="www.health.org">uk/evidence-hub/local-authority-dashboard/local-authority-dashboard</a> (Accessed December 2024)
- **12.** Department of Health & Social Care. Fingertips Public health profiles: Wider Determinants of Health. Available at: <a href="mailto:fingertips.phe.org.uk/wider-determinants">fingertips.phe.org.uk/wider-determinants</a> (Accessed December 2024)

- **13.** Barnsley Metropolitan Borough Council. Active Travel in Barnsley (2019–2033). Available at: www.barnsley.gov.uk/media/15414/active-travel-barnsley-strategy-2019.pdf
- 14. Office for Health Improvement & Disparities.

  Guidance Physical activity: applying All Our Health
  (updated 2022). Available at: <a href="www.gov.uk/government/publications/physical-activity-applying-all-our-health/physical-activity-applying-all-our-health/physical-activity-applying-all-our-health/accessed December 2024)</a>
- 15. Department of Health & Social Care. Chief Medical Officer's Annual Report 2023: Health in an Ageing Society. Available at: <a href="https://www.gov.uk/government/publications/chief-medical-officers-annual-report-2023-health-in-an-ageing-society">www.gov.uk/government/publications/chief-medical-officers-annual-report-2023-health-in-an-ageing-society</a> (Accessed December 2024)
- **16.** Department of Health & Social Care. Fingertips Public health profiles: Musculoskeletal health: local profiles. Available at: <a href="mailto:fingertips.phe.org.uk/profile/msk">fingertips.phe.org.uk/profile/msk</a> (Accessed December 2024)
- **17.** National Institute for Health and Care Excellence. Clinical guideline (CG124) Hip fracture: management (updated 2023). Available at: <a href="https://www.nice.org.uk/guidance/cg124/chapter/Context">www.nice.org.uk/guidance/cg124/chapter/Context</a>























