



INVESTING IN PREVENTION





Welcome

Good health is a fundamental right, but in Wales, health outcomes vary unfairly across communities. Effective prevention initiatives such as early years education, vaccination programmes, smoking cessation and support for carers can deliver great value for money and are essential for prioritising public funding. They can address health inequalities, reverse the nation's health decline, and promote well-being.

This e-bulletin includes a range of projects and initiatives from across Wales that prioritise prevention.

4 Articles

The economic cost of obesity on Cwm Taf Morgannwg University Health Board and recommendations for a multi-sector life-course way forward

Dr Sofie Roberts, Research Officer, Jacob Davies, Research Project Support Officer

Professor Rhiannon Tudor

Edwards, Professor in Health Economics – Bangor University

Dr Rob Green, Consultant in Public Health and Ann Unitt, Principal Public Health Practitioner, Cwm Taf Morgannwg University Health Board
From Restrictions to Incentives: Retailer Targets for a Healthier Wales

Sara Elias, Policy Advisor, Nesta

Effective preventative health care in Wales depends on investment in breastfeeding care

Sharon Breward MBE QN, Infant Feeding Coordinator, Betsi Cadwaladr Health Board
Chair - Wales Infant Feeding Network (WIFN)

Playing, prevention and being well

Marianne Mannello, Assistant Director: Policy, Support and Advocacy, Play Wales

Empowering communities: Partnership approach to enhancing breastfeeding awareness and culture in low-prevalence socially deprived areas

Rachel Evans, Lead Midwife for Breastfeeding, Public Health Wales

Rosy Phillips, Fay Fear, Claire Turbutt, Sarah Jenkins, Cwm Taf Morgannwg University Health Board

Eleanor Johnson, Programme Manager, Breastfeeding Network

Carla Baldwin, Bethan Thorn, Florence Beach, Aneurin Bevan University Health Board

Bronwen Clatworthy, Service Manager/ Wales Outreach and Development Worker, Breastfeeding Network

Secondary Fragility Fracture Prevention: Welsh FLS Model

Dr Inder Singh, Consultant Geriatrician, Aneurin Bevan University Health Board and National Clinical Lead, Bone Health, Wales

Rhian Williams, NHS Executive

Gareth Hewitt, Head of Clinical Conditions and Pathways, NHS Executive

Dr Thomas Howson, Innovation Lead, Bevan Commission

Laura Jones, Quality & Nursing, NHS Executive

Sarah Owen, Project Manager, Bevan Commission

Building a Wales Without Violence: A Framework for Preventing Violence among Children and Young People

Bryony Parry, Communications and Engagement Lead, Wales Violence Prevention Unit, Public Health Wales

Taking a holistic approach to health promotion - keeping prevention at the heart of what we do

Stephanie Owen, Senior Health Improvement Practitioner – BCUHB Health Improvement Team

Raising awareness of dementia prevention in Cardiff and Vale

Rosie Keogh,
Health and Wellbeing Officer, Cardiff Council

Preventing Crisis Through Community Action: How Local Councils Are Supporting Health and Wellbeing in Wales

Emma Goode, Cost of Living Crisis Project Manager, One Voice Wales

Investing in Aspirations: An NHS Careers Insight Day for Young Carers

Victoria Williams,
Swansea Bay University Health Board (SBUHB) in partnership with Carers Trust Wales

Process Evaluation of Making Every Contact Count (MECC) Having Healthy Weight Conversations E-Learning modules: Insights into Engagement, Relevance, and Knowledge Development

Sophia Bird, Principal Public Health Practitioner, Health Improvement Division, Public Health Wales

Dr Jack Walklett, Senior Research and Evaluation Officer, Research and Evaluation, Knowledge Directorate, Public Health Wales

Charlotte Gray, Public Health Evaluation Lead, Research and Evaluation, Knowledge Directorate, Public Health Wales

Investing in prevention to drive health and well-being in Wales

The evidence on what works ...

Anna Stielke, Senior International Evidence and Policy Officer, Public Health Wales

Rebecca Masters, Consultant in Public Health, Public Health Wales

Ann Jones, Principal Sustainable Development and Health, Public Health Wales

Alternative Economies in Wales – shifting towards long-term and sustainable approach

Anna Stielke, Senior International Evidence and Policy Officer, Public Health Wales

Rebecca Masters, Consultant in Public Health, Public Health Wales

Ann Jones, Principal Sustainable Development and Health, Public Health Wales

34 Grapevine

Educating Tomorrow's Infection-Fighting Superheroes: Why Children Must Be Part of the Antimicrobial Resistance Solution

Meryl Davies,
Lead Antimicrobial Pharmacist – Primary & Community Care, Public Health Wales

38 Videos

40 News & Resources

42 Next Issue

Articles





Research

The economic cost of obesity on Cwm Taf Morgannwg University Health Board and recommendations for a multi-sector life-course way forward

Dr Sofie Roberts,

Research Officer, Jacob Davies, Research Project Support Officer

Professor Rhiannon Tudor Edwards,

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Wales has the highest obesity rate in the UK with 62% of adults living with overweight or obesity (1). 67% of adults and 27% of children aged 4-5 living in the Cwm Taf Morgannwg University Health Board (CTMUHB) area are living with overweight or obesity (2). Understanding spend is essential to building the case for prevention. There were no health board level estimates for the financial impact of obesity.

[Health Economists at Bangor University](#) have explored the financial cost of overweight and obesity to the health board and examined the financial

impact of potential strategies to alter overweight and obesity trajectories.

This high prevalence of overweight and obesity is an increasing challenge for CTMUHB. High rates of overweight and obesity correspond to high population incidence of associated illnesses such as type two diabetes, cardiovascular disease, and mental health problems. High rates of overweight and obesity also correspond to higher costs for the health board: we calculated that for CTMUHB the healthcare costs directly associated with overweight

and obesity are £13 million annually, rising to £70 million by 2050. Annual indirect costs could range from £98 million and £205 million.

Our work gathered and synthesised data and developed an illustrative case study using health board data to calculate and forecast the financial cost of obesity. Using maternity pathways to cost additionality of health care resource use in mothers living with overweight and obesity. We also took a systems view through community asset mapping and gathering social data to understand the barriers and enablers to

healthy weight in the locality.

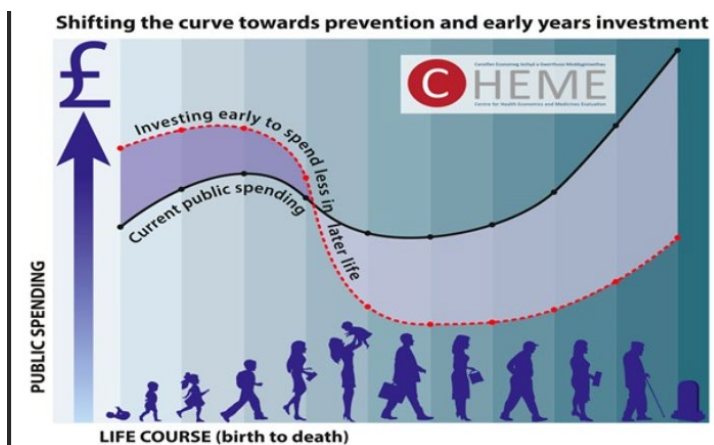
Alongside investment in weight management programmes, we recommended preventative approaches, including long-term system working to mobilise system-wide change for healthier environments and investment in positive preventative actions during child development as they yield the greatest return on investment to society (4).

The project enabled the Health Board to understand the current and future cost of overweight and obesity as well

on the life-course health-choice opportunity architecture of the locality.

While we worked to analyse the financial cost and impact of overweight and obesity at a health board level, we used a life-course model and thought of overweight/obesity as a community-wide challenge requiring community-wide solutions.

Given the scale of cost to health boards, continued investment to prevent obesity and backing for delivery of Healthy Weight Healthy Wales at all levels



as the need for investment to improve capacity to gather and synthesise health board data. The full report provides headline statistics to drive change at health board level and support decision-making in investment in preventative strategies to alter the overweight/ obesity trajectory at the health board level. The project has also supported ongoing work to build a whole systems approach to prevention by providing data

is essential. Work to improve the healthy weight architecture in our communities is a fundamental part of this. We also highlighted some of the challenges to this type

of analysis in a health board setting. Investment data infrastructure is essential to making informed investment decisions.

Dr Sofie Roberts, Research Officer at the [Public Health and Prevention Economics Research Group](#) (PHERG), part of the [Centre for Health Economics and Medicines Evaluation \(CHEME\)](#), Bangor University.

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Read our latest blog: [Health systems and climate change: what we as health economists are learning and need to share with partner organisations to promote well-being and well-becoming.](#)

References:

Bone, J. (2024, April 23). *A third of adults in Wales live with obesity, according to new analysis.*

Public Health Wales. (2018). *The case for action on obesity in Wales.* <http://www.publichealthwalesobservatory.wales.nhs.uk/obesityinwales>

Edwards, R.T, and Lawrence, C (2014), *Health Economics of Well-being and Well-becoming across the Life-course.* Oxford Academic :<https://doi.org/10.1093/9780191919336.001.0001>
Edwards, R.T., Bryning, L. & Lloyd-Williams, H. (2016).

Transforming Young Lives across Wales: The Economic Argument for Investing in Early Years. Prifysgol Bangor University: <https://cheme.bangor.ac.uk/documents/transforming-young-lives/CHEME%20Transforming%20Young%20Lives%20Summary%20Eng%20WEB%200.2.pdf>



Policy

From Restrictions to Incentives: Retailer Targets for a Healthier Wales

Sara Elias,

Policy Advisor, Nesta

Nesta is committed to increasing healthy life expectancy while narrowing health inequalities across the UK. Our goal is to halve obesity prevalence by 2030, a challenge that requires bold, innovative approaches focused on prevention. Our goal is particularly vital in Wales, where [1 in 3 adults \(34%\) were living with obesity in 2022-2023](#), placing a significant burden on individuals, the NHS and the economy

Understanding the Food Environment Challenge

Our food environment (how food is promoted, priced, displayed, and made available) strongly influences our dietary choices. Currently, this environment often steers us toward less healthy options, even when we aspire to eat

well.

The Welsh Government's [Healthy Wales, Healthy Weight](#) strategy has made important strides in recognising the importance of food environments. Building on this foundation, we believe complementary systemic interventions can accelerate progress toward a healthier Wales.

Empowering Industry

Nesta proposes introducing [mandatory health targets for large grocery retailers](#), who collectively represent over 95% of the UK grocery market and wield considerable influence over our food system. Rather than relying exclusively on restrictions, this approach incentivises businesses to become partners in promoting health. By setting clear

outcomes while providing flexibility in implementation, retailers can drive innovation in ways that benefit public health and their business models.

This approach aligns with public sentiment: research from Public Health Wales demonstrates that there is [strong public support for governments](#) to use their powers to improve the healthiness of our food environment. This finding is echoed in more [recent research from IPPR](#) which found a public mandate for government action on systemic issues, and polling from [Ash that reported that 74% of respondents stating that when supporting businesses and improving public health are in conflict, government has to](#)

prioritise health,

How the Proposal Works

The proposed approach would establish targets based on improving the sales-weighted average Nutrient Profiling Model (NPM) score across retailers' entire food product portfolios. The NPM provides a well-established, holistic measure of food healthiness already used in UK legislation.

toward healthier options and rethinking promotion, placement, and marketing strategies

This approach aims to make healthier choices easier for consumers without requiring additional willpower or cost.

Potential Impact

Nesta's modelling indicates that implementing these targets at levels already

market.

Building on Wales' Momentum Wales has already demonstrated leadership through the [Healthy Wales, Healthy Weight](#) strategy and the Future Generations Act. As highlighted in the [2025 Future Generations Report](#), achieving a healthier Cymru requires collaborative action across sectors and addressing root causes.

By focusing on empowering industry as partners, we can accelerate progress toward our shared vision of a healthier future for current and future generations in Wales, embracing systemic change that builds on Wales' strong foundation of preventative health promotion strategies.

For more information on Nesta's work, contact Sara or Jono via cymru@nesta.org.uk or visit nesta.org.uk



As illustrated in the comparison above, simple product swaps can improve a shopping basket's NPM score and reduce calorie intake significantly (80 kcal daily reduction in this example) without changing the types of foods purchased or increasing costs.

Crucially, retailers would have flexibility in meeting these targets through various approaches such as, reformulation or innovation, adjusting purchasing

achieved by some leading retailers could reduce calorie purchases by approximately 80 kcal per person per day among those with excess weight. This could potentially reduce obesity prevalence by between 20-25% across the UK.

Economic assessments suggest this policy is unlikely to impose significant costs on businesses or consumers. The flexibility provided allows retailers to adapt existing practices cost-effectively within the competitive grocery



Practice

Effective preventative health care in Wales depends on investment in breastfeeding care

Sharon Breward MBE QN,

Infant Feeding Coordinator, Betsi
Cadwaladr Health Board
Chair - Wales Infant Feeding Network
(WIFN)

Described as ‘the sick man of Europe’, Wales struggles with preventative health care against the backdrop of historical links with poverty, deprivation and ill-health.

What if there was something ubiquitous to all babies, irrespective of their socio-economic demographic, that would improve their life-long health outcomes? Not only this, but something that would profoundly benefit a mother’s health as well?

Breastfeeding does this

‘There is no other single health intervention that has such

a high impact for mothers and babies as breastfeeding and which costs so little for governments’ (GR Gupta, UNICEF)

Welsh Government’s (WG) Child Poverty Strategy states that breastfeeding is “the most accessible and cost-effective activity available to public health”.

Yet Wales continues to oversee some of the lowest breastfeeding rates in the World. Breastfeeding has been described as ‘virtually extinct’ in many Welsh communities. The outcomes of this loss of breastfeeding is seen in

myriad preventable health conditions and poor outcomes in important indicators of public health

In 2021 in the midst of COVID, Betsi Cadwaladr Health Board (BCUHB) bravely commenced a pilot programme to establish a dedicated Infant Feeding Care Team (IFCT) in Wrexham Maternity Unit.

A lactation specialist qualified Midwife was appointed to lead a team of specially trained Infant Feeding Support Workers (IFSWs), the remit was to improve the quality of early breastfeeding care, to see if WG’s Maternity Key

Performance Indicator (KPI), breastfeeding at 10 days could be improved – a KPI that had proven stubbornly impervious to improvement

The pilot paradigm was based on local data showing high rates of early breastfeeding attrition and evidence that most mothers want to breastfeed, yet many stop breastfeeding before they planned – their experiences undermined by ever increasing complexities around birth that impact on early feeding, service pressures in maternity care, inadequate access to specialist lactation care and a society where formula feeding is the norm.

Funded by Public Health Wales, the Wrexham pilot, was carefully monitored and evaluated. The outcomes were impressive particularly in terms of qualitative outcomes - feedback from women was overwhelmingly positive, often emotional and heart felt

‘Finally, there are staff who understand that breastfeeding is important to me, who really care about helping me breastfeed and have the knowledge and skill necessary to support me and my baby through our early difficulties’

In 2023, following escalation of significant concerns

regarding poor breastfeeding rates in BCUHB Central area, the IFCT model was integrated into the maternity team at Ysbyty Glan Clwyd. In May 2023 BCUHB Maternity Services were all re-accredited as ‘Baby Friendly’ with UNICEF UK. The impact of the IFCTs was key to success.

The accreditation process draws deeply on narrative feedback from mothers, staff interviews and close scrutiny of care practices. Feedback from the UNICEF assessors was clear – the IFCT model provides essential clinical leadership, ensures consistent bench-marked care standards and high-quality breastfeeding care.

And.... BCUHB’s stubbornly low 10-day Breastfeeding KPI has at last shown improvement! However, the outcomes would be even better if we were able to achieve the IFCT as a core service in all 3 BCUHB maternity Units – The current model remains only in 2 units and is funded by an annual grant which is not guaranteed, creating significant problems with job insecurity, staff retention and inconsistent care delivery

Children not breastfed suffer more infections, hospital admissions, require more antibiotics, they are more likely to become obese, develop diabetes and suffer

dental decay. Women who have breastfed have lower risk of breast cancer, ovarian cancer, obesity, diabetes & cardiovascular disease

Babies not breast-fed are more likely to develop allergies requiring expensive prescription milks. Annual NHS expenditure on these products currently exceeds £5.5 Million in Wales. For less than this we could fund operationally effective IFCTs in hospital & community services in all Welsh Boards to support breastfeeding

If preventative health care is to be effective in Wales, it has to start with clear, strategic and funded investment in breastfeeding care

For further information please contact: sharon.breward@wales.nhs.uk



Policy & Research

Playing, prevention and being well

Marianne Mannello,

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Playing and prevention are interconnected. Having plenty of opportunities to play provides children with benefits that can act as protective factors against everyday uncertainty and the negative impact of adversity.

It is well known and accepted that playing matters to children. *Playing and being well*, a Play Wales publication, emphasises that unstructured play opportunities give children a chance to support their immediate wellbeing whilst naturally building life skills which contribute to long-term development outcomes. Qualities such as problem-solving, teamwork and emotional regulation are being refined when children play. Research also shows that time, space and freedom to play

can greatly benefit children's mental health and resilience, relieving stress and reducing the harmful impact of trauma.

Playing and being well reflects on research that demonstrates that the pleasure of playing underpins many of its benefits, motivating children to play more. Playing more can reduce anxiety and protect against depression. Playing with strong emotions like fear, shock, disgust or anger gives a sense of vitality and exhilaration. Deliberately creating uncertainty can prepare neural networks to respond flexibly and creatively to new situations without over-reacting. Moving and engaging all the senses helps children to build physical health, strength, agility and sensory integration.

Playing both requires and helps to develop social skills, balance, attention, memory, spatial awareness and more. Through playing children develop attachments to caregivers, friends, animals, places and objects, giving a sense of belonging and security.

Supporting play

To support children's play needs these conditions need to be present:

Time, that's free from other demands, including therapy, treatment and rehabilitation

Freedom from stress

Space in a diverse and challenging outdoor environment with access

to supportive adults, when necessary

Opportunities to invest in their own space and time to

create and transform their world, using their imagination. In the publication, the authors introduce a 'relational capability' approach to wellbeing. Relational capability emphasises the dynamic and reciprocal relations between children and the various aspects of their lives. Drawing on research, *Playing and being well* places playing as a capability. This allows for a strengths-based approach to playing and being well. In essence, when conditions are right for children to play, they can create their own wellbeing.

Play and the Well-being of Future Generations (Wales) Act 2015

Having opportunities to play supports more children to be active, to socialise and to feel part of their communities, all of which have tremendous health and wellbeing outcomes. Children being able to play can contribute to the prevention of many contemporary concerns, such as obesity, mental health, loneliness, which in turn can

prevent a range of diseases that are seriously detrimental to the health of the population and impose enormous costs on public services. Making sure that children can and do play in their neighbourhoods will potentially prevent problems (such as childhood obesity, poor mental health and isolation) occurring or getting worse.

Advocating for play

As adults we need to help children by raising play on the agenda at every appropriate opportunity. We need to support the provision of sufficient time and space for children to play every day. Playing generates concrete and first-hand experiences that underpin much of a child's development. It is widely agreed that early experiences influence how children learn, cope with stress, form friendships and adult relationships, and how they view themselves and their world.

Whilst playing comes instinctively to children,

the support of parents, practitioners, policy makers and the wider community is necessary to ensure children have the freedom, space and time to themselves to act on their natural instincts. This requires:

Responsive practitioners and caregivers who understand the need for play

Supportive communities where playing is tolerated and celebrated

Policy programmes which provide play spaces and opportunities.

For more information about *Playing and being well*, please visit: www.play.wales/playingandbeingwell



Empowering communities: Partnership approach to enhancing breastfeeding awareness and culture in low-prevalence socially deprived areas

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Lead Midwife for Breastfeeding, Public Health Wales

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A recent report by Public Health Wales (PHW) identified breastfeeding as a key area for investment, offering significant returns through improved health of mother and baby across the life course. The All Wales Breastfeeding Action Plan (AWBAP) was launched in 2019 with an overarching strategic aim to address inequalities in breastfeeding between groups; Welsh data demonstrates that breastfeeding is least likely among younger mothers in socially deprived areas. Welsh Government funding

for two short term posts at PHW enabled us to coordinate a grant application and subsequent project focused on inequality.

The project brought together PHW, third sector partners The Breastfeeding Network (BfN) and CTMUHB and ABUHB health board teams to deliver a multi component intervention aiming to influence the feeding culture in two target communities. The project included:
Peer support
The Breastfeeding Network

trained two cohorts of Breastfeeding Helpers, with recruitment targeted to communities and Welsh speakers. Training was also delivered to one cohort of Breastfeeding Supporters, an additional level qualifying volunteers to work on the National Breastfeeding Helpline (NBH).

Rationale- evidence demonstrates that peer support is more effective when volunteers reflect their communities. The training is accredited by the Open

College network and can lead to employment and training opportunities.

Promotion of the National Breastfeeding Helpline
This trusted service, run in partnership between BfN and the Association of Breastfeeding Mothers (ABM), offers 24 hour, 365 day support, by phone or direct message.

Rationale- Prior to the project calls from Wales to the NBH, represented 3% of all calls received, demonstrating underuse. Breastfeeding attrition is high in the weeks post birth.

Increasing use supports mothers to continue breastfeeding and complements local services.

First Milk Matters
These short courses for non-health staff enable a basic understanding of breastfeeding and its importance as a public health priority. Four courses were delivered to a range of staff working with families.

Rationale- breastfeeding mothers come into contact

with many services outside health. With increased knowledge and understanding these services can better support mothers.

The purpose of delivering interventions in parallel was to increase effectiveness of each element and to increase overall community knowledge of breastfeeding in low prevalence areas. A full evaluation will be produced by Swansea University. We are already aware of positive changes as a direct result of the project.

Two peer support volunteers gained employment as Maternity Care Assistants. Two other volunteers have been successful in gaining places on nursing/ midwifery courses.

First Milk Matters attendees have reported changes in practice following their course. Welsh language capacity on the NBH has increased. Calls to the NBH from target areas have increased. Local organisations have signed up to BfN's Breastfeeding Welcome scheme.

There are no short term solutions to entrenched low

breastfeeding rates. Changing the cultural norm around infant feeding will take time and multiple elements, and we have to work against powerful commercial interests. This grant offered the opportunity to try an innovative approach, offering other community benefits while contributing to culture change.



Comisiwn Bevan Commission



Commentary

Secondary Fragility Fracture Prevention: Welsh FLS Model

Dr Inder Singh,

Consultant Geriatrician, Aneurin Bevan University Health Board and National Clinical Lead, Bone Health, Wales

Gareth Hewitt,

Head of Clinical Conditions and Pathways, Quality & Nursing, NHS Executive

Laura Jones,

Rhian Williams,

NHS Executive

Dr Thomas Howson,

Innovation Lead, Bevan Commission

Sarah Owen,

Project Manager, Bevan Commission

Issue and quality initiative:

Fragility fractures are common worldwide, affecting 1 in 3 women and 1 in 5 men over 50. Around 3 million people in the UK live with osteoporosis, similar to the EU average. An estimated 21.9% of women and 6.7% of men aged 50+ in the UK have osteoporosis. Prevalence rises from 2% at age 50 to nearly 50% over 80. More than a 'silent condition', osteoporosis is often diagnosed after a fragility fracture. Subsequent fractures worsen health over time in what is known as the 'fracture cascade'—a cycle of accumulating fracture-related

morbidity that impacts long-term quality of life.

Background:

The impact of fragility fractures is significant and immeasurable. Therefore, preventing secondary fractures is a key goal, in line with the vision set out in the Written Statement "Building Capacity through Community Care – Further, Faster (1)."

Up to 45% of re-fractures can be prevented through Fracture Liaison Services (FLS), which provides coordinated high-quality osteoporosis care for patients over 50 years. On 23 February 2023, the

Cabinet Secretary for Health and Social Services issued a Written Statement aiming for 100% FLS coverage across all Welsh health boards by September 2024 (2). The Welsh FLS model is built on three quality-driver priorities: planning, improvement and management, and assurance. The minimum standards for FLS are to identify 80% of the expected fragility fractures, start treatment for 50%, and monitor 80% of those who have commenced on bone treatment at 16 weeks and 52 weeks (3).

In collaboration with the

Six Goals for Urgent and Emergency Care programme and the Welsh Value in Health Centre, a one million pound investment has been made to develop FLS in areas where no service previously existed, and to support expansion and improvement of existing services.

Impact:

Wales has made significant progress strengthening the FLS. In 2024, 13 specialist nurses/professionals and 11 administrative staff were recruited, increasing the nursing workforce from 6.6 in 2022 to 19.6.

A Written Statement by the Cabinet Secretary confirmed FLS establishment across all health boards by the September 2024 deadline (4). In 2024, Wales identified 5,233 fragility fractures—a 47% rise from 2023 (3,537). Of those identified, 62.5% received bone treatment, exceeding the 56.2% benchmark.

Building on this progress, there remains an opportunity to further develop FLS and bone health services to fully meet national and Welsh Government Quality Statement standards (5).

Key messages:

The Welsh FLS model supports Prudent Healthcare by using evidence-based care to prevent re-fractures in older, vulnerable people at high risk of poor outcomes.

FLS enables a shift from traditional outpatient referrals to a more sustainable, standardised system through automated digital fracture identification.

We are pleased to report that FLS is aligned with the External Ministerial Advisory Group on NHS Wales Performance and Productivity recommendations 1 and 2 in two Welsh Health Boards (6). Continued development of bone health services across health boards is essential to easing pressure on health and social care.

References

[Written Statement: Building Capacity Through Community Care Further Faster \(23 June 2023\) Gov. Wales](#)

Written Statement: Update on Fracture Liaison Services in Wales (24 February 2023) | GOV.WALES

<https://www.bgs.org.uk/quality-improvement/initiatives-to-improve-one-year-follow-up-as-per-fls-db-national>

Written Statement: Fracture Liaison Services Rolled Out Across Wales (30 September 2024) | GOV.WALES
Quality statement for osteoporosis and bone health [HTML] | GOV.WALES
NHS Wales performance and productivity: government response

More information: [FLS Adopt and Spread](#)
[Aneurin Bevan UHB News: Its-never-too-early-or-too-late-to-start-looking-after-your-bones](#)



Research

Building a Wales Without Violence: A Framework for Preventing Violence among Children and Young People

Bryony Parry,

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Wales Violence Prevention Unit, Public
Health Wales

Violence is preventable, and ending violence is possible. Through the development of the Wales Without Violence Framework, children, young people and professionals dared to imagine a society in which we all live free from violence. The Framework outlines the key elements needed to successfully develop primary prevention and early intervention strategies to end violence among children and young people through a public health, whole-system approach.

The Framework supports both UK and Welsh Government pledges to make early intervention and prevention a priority when it comes to violence. The UK Government has introduced measures

including the Serious Violence Duty (part of the Police, Sentencing and Courts Act 2022), and its Safer Street Mission to halve violence in a decade, and Welsh Government is committed to the Violence against Women, Domestic Abuse and Sexual Violence (VAWDASV) Strategy 2022-26 (part of the VAWDASV (Wales) Act 2015). This legislative appetite for prevention provides secure foundations on which to build a compassionate, equitable and measurable approach to ending violence in Wales, which is reflected in the Framework's vision of "*A Wales without violence [is one where] people are healthier, families are better supported and equipped to nurture a child's development and*

wellbeing, organisations are more inclusive, communities are safer and society fairer."

Co-produced by the Public Health Wales Violence Prevention Unit team and the Peer Action Collective Cymru, a groundbreaking network of young people, and through significant research and consultation with the public and professionals, the Framework is evidence-informed and centres the voices of children and young people. Through the nine violence prevention strategies that are at its core, the Framework calls everyone to action by demonstrating how violence prevention activity can take place across diverse and multiple settings to support an individual, a

community or the whole of society. The nine violence prevention principles that underpin the strategies guide how activity should be delivered, to ensure violence prevention in Wales is safe, inclusive, relevant and evidence-based.

Lara Snowdon, Violence Prevention Programme Lead for Public Health Wales and lead author of the Wales Without Violence Framework, said: “Violence among children and young people is a complex public health issue, and its effects are corrosive and widespread, often impacting different communities unequally and unfairly. “We explored the evidence and spoke to over 1,000 children, young people and professionals about their views and aspirations for a Wales Without Violence, and what we heard above all else was how a children and young people want to feel safe to be themselves. At a time where online and offline spaces can be conducive to harmful rhetoric and misinformation,

it is essential that we work together. The Framework sets out how we can create the conditions for prevention whilst ensuring people are properly supported if they experience violence.

“It is time for us all to act, to invest in prevention to ensure we can build a Wales that is safer, fairer and free from violence.”

To find out more and download the Framework, visit www.waleswithoutviolence.com

A large, stylized rainbow graphic composed of multiple curved bands of color (red, orange, yellow, green, blue, purple) that arches over the top of the page, framing the HIT logo.

HIT

Health Improvement Team

Practice

Taking a holistic approach to health promotion - keeping prevention at the heart of what we do

Stephanie Owen,

Senior Health Improvement Practitioner –
BCUHB Health Improvement Team

The Betsi Cadwaladr University Health Board Health Improvement Team are a team of skilled Health Improvement Practitioners who promote wellbeing by offering residents of Wrexham and Flint the opportunity to make healthier and sustainable lifestyle choices. The work we do has prevention at the heart, empowering communities to engage with and embrace the value of health and wellbeing.

Our multi-skilled team of practitioners provide evidence based and sustainable health promotion / health improvement initiatives to improve health outcomes for all and reduce health inequalities.

We work in partnership with the community and other agencies to reach as many community members in Wrexham and Flint as possible. We provide healthy lifestyle resources and advice to the community, school and colleges, health professionals and third sector organisations.

The team deliver a range of programmes and sessions designed to cover areas of health improvement including wellbeing, nutrition, physical activity and emotional wellbeing. Some of the programmes that we deliver include a 12-week Health Boost programme that brings together nutrition, physical activity and psychology. Alongside this the participants

also receive a reduced-price gym/swim session with a local health centre (Freedom Leisure – Wrexham) where the course is being delivered. Other courses that we deliver on a regular basis include Kickstart, come and cook, batch cooking, food and mood, stress less, adult resilience, stretch and Tai Chi, Fitrition, pregnancy yoga and yoga with baby.

Our work also includes attending workplaces to deliver health promotion sessions and programmes and attending bitesize workplace health events. We regularly deliver online health improvement sessions to BCUHB staff including topics on stress, sleep and rest and

food and mood.

Alongside the programmes that we deliver we also attend schools and colleges to deliver sessions to pupils, teachers and support staff and also parents and carers. Having the opportunity to educate children and young people about the value of health and wellbeing and help them to gain knowledge and skills to allow them to make healthy informed choices is fundamental to the work we do with local schools and colleges.

We regularly attend education settings to deliver sessions on health which can range from education on energy drinks, rest and relaxation sessions, healthy eating and practical physical activity sessions including dodgeball and Tai Chi. In some schools we work closely with wellbeing support staff and offer sessions to parents and carers including after school education sessions, supporting organised events such as parents breakfast mornings and attending established parents groups ensuring that the topics delivered are driven by the group themselves.

If you would like to find out more about the BCUHB Health Improvement Team please contact the team on 03000 859 625 or bcu.healthimprovementteam@wales.nhs.uk



Practice

Raising awareness of dementia prevention in Cardiff and Vale

Rosie Keogh,

Health and Wellbeing Officer, Cardiff Council



Dementia is currently one of the leading causes of death in Wales, and the number of older adults living with dementia is projected to rise by 70% by 2040 (1). Research by Alzheimer's Disease International (ADI) indicates that most people believe dementia to be a normal part of ageing, with 95% of participants thinking they could develop the disease during their life (2). However, the 2024 report of the *Lancet* standing Commission estimates that 45% of dementia cases could be preventable by addressing 14 modifiable risk factors (3).

A partnership project between Cardiff Council, Vale of Glamorgan Council, Cardiff

and Vale Regional Partnership Board and Cardiff and Vale University Health Board aims to raise awareness that, contrary to many beliefs, developing dementia is not an inevitable part of ageing.

[A booklet](#) has been produced, highlighting the key modifiable risk factors identified in the Lancet report, and communicating four key messages:

Getting older does not mean that you will get dementia. You will not necessarily get dementia because a family member has. You can take action to lower your risk of developing dementia.

It is never too early or too late to take action

Information about each risk factor is provided, with corresponding localised signposting also listed, to support people to make positive lifestyle changes.

17,000 booklets have been printed, and many locations across the region have been (and continue to be) supplied with hard copies, including GP surgeries, Hubs and libraries, leisure centres, community centres and religious venues. Stocking the handbooks has also been embedded into the Cardiff and Vale dementia-friendly communities pledge scheme, with organisations able to choose this as one of their dementia positive actions. This has helped

to widen the reach of the messaging, as the resource has been made available to customers of cafes, book shops, hairdressers and more.

The handbook is also available digitally on the Cardiff & Vale University Health Board website, alongside the [easy read version](#).

Currently in Welsh and English, the booklet will soon be available in Arabic, Bengali, Urdu and Somali. Work is also in progress to create short, 30-second animations in all six languages to signpost to the booklet.

The team are encouraging everyone, no matter their age, to download a copy of the booklet to learn more.

To request a supply of booklets (if based in Cardiff/Vale), contact dementiafriendly@cardiff.gov.uk

Website: [Dementia Prevention - Cardiff and Vale University Health Board](#)

References:

[Planning ahead: dementia services in Wales](#)
[World's largest dementia study reveals two thirds of people still incorrectly think dementia is a normal part of ageing, rather than a medical condition | Alzheimer's Disease International \(ADI\)](#)
[Dementia prevention,](#)

[intervention, and care: 2024 report of the Lancet standing Commission - The Lancet](#)



Un Llais Cymru One Voice Wales

Practice

Preventing Crisis Through Community Action: How Local Councils Are Supporting Health and Wellbeing in Wales

Emma Goode,

Cost of Living Crisis Project Manager, One Voice Wales

The cost-of-living crisis has deepened existing health inequalities across Wales. People are struggling to stay warm, eat well, and stay connected, basic needs that are fundamental to good health. Community and town councils, as the most local tier of government, are responding in ways that are often low-cost but high impact. At One Voice Wales, we support councils through information, guidance, webinars and peer learning. What we've seen, especially since Covid-19, is a powerful shift toward local, practical action that prevents crisis and supports wellbeing. These efforts may not always be labelled public health, but they're delivering real public health outcomes.

One Voice Wales supports over 730 community and town councils across Wales. In the face of the cost-of-living crisis, we've seen councils act with speed and compassion, putting local knowledge to use to support residents before problems escalate.

Many warm hubs have evolved into year-round wellbeing spaces, offering hot meals, advice clinics, digital skills sessions and social connection. Others have created or partnered with food projects, such as community pantries, free meal initiatives and community kitchens, that reduce stigma and support dignity around food access.

Several councils are providing home maintenance and gardening support to older or disabled residents, helping people stay safe and independent, while also building trusted relationships that lead to wider referrals. Some have introduced micro-grant schemes to help cover urgent costs like travel to hospital appointments or children's essentials, small interventions with big impacts.

These actions reflect a clear understanding of prevention at a community level. While councils may not see themselves as public health providers, their work actively addresses the social determinants of health, tackling isolation, supporting

food security and improving access to services. It's local, relationship based and built on trust - and it's helping to protect health and wellbeing when it matters most.

Across Wales, we're seeing local councils make a real difference. In Cwmbran, a decorating and gardening service is helping older residents maintain safe homes and identify further support needs. In Blaenavon, a council-supported befriending cinema club has delivered 35 film sessions to 1,700 residents—reducing social isolation and improving wellbeing. Caia Park Community Council's benefits advice service has secured £1.5 million for clients,

including £1.4 million in ongoing financial benefits and £150,000 in backdated lump sums.

These initiatives may be small in scale, but they're large in impact, providing practical support that helps people stay well.

Prevention doesn't always look like a health campaign. Sometimes it's a warm room, a shared meal, or someone who takes the time to listen. Community and town councils are already delivering this kind of local, everyday prevention quietly, creatively, and with deep local knowledge. If we want to reduce health inequalities and improve population

wellbeing, we must recognise this work and invest in it. Public health professionals should engage with their local councils, explore partnerships, and build on what's already working. The solutions are often already there, embedded in the heart of our communities.

Contact and further information:

www.onevoicewales.wales

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Investing in Aspirations: An NHS Careers Insight Day for Young Carers

Victoria Williams,

Swansea Bay University Health Board
(SBUHB) in partnership with Carers Trust
Wales

Young carers in Wales face significant barriers to health, education and employment. They are three times more likely than their peers to become NEET (Not in Education, Employment or Training), with long-term consequences for their health and well-being. On 27th May 2025, Swansea Bay University Health Board will host an NHS Careers Insight Day in partnership with *Carers Trust Wales*. The aim is to raise aspirations, showcase inclusive NHS career pathways and support young adult carers from Swansea, Carmarthenshire and Bridgend. This prevention-focused event is an opportunity to break cycles of disadvantage by offering

information, connection and inspiration. Young carers are children and young people who provide care to family members due to illness, disability, mental health needs or substance misuse. These responsibilities often come at the expense of their own mental health, education and access to positive life opportunities. The *Carers Trust* identified that 1 in 3 young adult carers struggle with mental health and over 60% feel their future prospects are limited due to their caring role (1). Lack of work experience is one of the biggest barriers faced by young people in the UK workforce today (2). For young carers, this is often compounded by anxiety,

missed schooling and lack of confidence. The NHS Careers Insight Day was designed as an early intervention, introducing participants to a variety of healthcare roles and the values that underpin NHS Wales. Young carers will participate in interactive sessions, meet staff from diverse roles and gain an understanding of accessible routes into employment and training. Utilising the expertise of the Practice Education Facilitator (PEF) team, the day will take place in a supportive, inclusive environment, with trusted adults present throughout. It is trauma-informed, accessible and built on a strong safeguarding foundation - recognising the importance of safety, encouragement and

belonging.

This year's NHS Careers Insight Day is the first of its kind in our region, so it is difficult to predict the long-term outcomes. However, the preparatory work has already made a tangible impact on the staff involved, by raising awareness of the additional barriers young carers often face. It is hoped that it will ultimately foster a sense of self-belief in the young carers and curiosity about NHS careers. By investing in early, relational and aspiration-building opportunities, we're creating the conditions for long-term equity - shifting the narrative from "caring as a barrier" to "lived experience as an asset."

Young carers need more than recognition - **they need opportunity**. Exposure to inclusive, supportive career pathways can prevent the deepening of social and health inequalities. Prevention is not always clinical: it can look like connection, role-modelling and belonging. We urge health boards, local authorities and third-sector organisations to embed aspiration-building into their prevention strategies.

Collaboration with carers'

services like *Carers Trust Wales* offers a practical, impactful way to reach those often left behind. Our call to action is: **invest in young carers not merely as a gesture of goodwill, but as a critical and cost-effective public health strategy.**

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Trust Wales
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🌐 www.carers.org

References

- (1) Carers Trust. (2023). Young Carers Survey Report
- (2) Youth Employment UK. (2022). Youth Voice Census Report



Practice

Process Evaluation of Making Every Contact Count (MECC) Having Healthy Weight Conversations E-Learning modules: Insights into Engagement, Relevance, and Knowledge Development

Sophia Bird,

Principal Public Health Practitioner, Health Improvement Division, Public Health Wales

Dr Jack Walklett,

Senior Research and Evaluation Officer, Research and Evaluation, Knowledge Directorate, Public Health Wales

Charlotte Gray,

Public Health Evaluation Lead, Research and Evaluation, Knowledge Directorate, Public Health Wales

Evidence indicates that professionals are increasingly reluctant to raise the issue of weight during routine consultations, due to a variety of reasons including lack of skills, training, and confidence (1).

People living with overweight and obesity increasingly feel stigmatised and discriminated against as a result of their weight. But this fails to recognise the impact of the obesogenic environment on us all.

A key step in implementing the Healthy Weight Pathway (2) was creating e-learning courses as part of the national **Making Every Contact Count (MECC)** initiative. MECC encourages frontline workers to use everyday interactions to promote healthy behaviour change and guide people to local services and information. These courses target staff in primary care, hospitals, community care, and other public-facing roles.

Public Health, Dietetics,

and Psychology teams co-developed two bilingual MECC Healthy Weight Conversation (HHWC) e-learning courses, launched in March 2024. Level 1 (very brief advice) and Level 2 (brief advice) help non-specialist staff build confidence and skills to start healthy weight conversations and signpost to further support. These modules were designed to be completed after the Generic Level 1 MECC module and are available via 3 different platforms *NHS Wales Electronic Staff Record*

(ESR), Learning@Wales, and TrainEasy – reaching a wide range of staff.

From June to December 2024, Public Health Wales (PHW) Research and Evaluation team carried out a process evaluation to gather feedback on engagement, relevance, satisfaction, and knowledge gained. Over 400 people registered, with a 62% completion rate—typical for open-access online courses.

Data from ESR and TrainEasy showed low uptake across patient-facing roles despite regular dissemination through NHS/ Primary Care networks (data not available on Learning@Wales). ESR uptake found to be low across the 13 Health Boards / Trusts. TrainEasy showed high uptake from SE Wales LAs.

However, those that completed the courses on Learning@Wales (L1 = 108 completers; L2= 54 completers) gave encouraging feedback.

Comments were positive, particularly around increased knowledge:

“This module was very interesting and I can confidently say that I have learnt a lot from carrying this out”

“I feel like I have gained knowledge from this course and will now be able to put it into practice”

“The MECC module was informative and well-structured, providing clear guidance on how to use everyday interactions to promote healthier choices.”

“I thoroughly enjoyed this module I found it very informative”

“... modules like this will improve the effectiveness of our communication as well as our relationship with the patients.”

To find out more, click here:

<https://mecc.publichealthnetwork.cymru/cy/>
<https://mecc.publichealthnetwork.cymru/en/>

To get support for your own weight management journey, check out <https://healthyweight.wales/> for a unique, bi-lingual offer that is tailored to your needs.

References

Public Health Wales, October 2021. [PowerPoint Presentation \(nhs.wales\)](https://nhs.uk/publications/2021-06/all-wales-weight-management-pathway-2021.pdf).
 Welsh Government, 2021. All Wales Weight Management Pathway 2021. Available at: <https://gov.wales/sites/default/files/publications/2021-06/all-wales-weight-management-pathway-2021.pdf>

	L1	L2
Length of time about right. (Learners took between 16 and 45m to complete)	95%	83% 15% felt it was too long
Thought that online, module is appropriate to develop MECC conversation skills	77%	85%
Course pitched at the right level for learner	89%	94%
Relevant to learner and their role	89%	93%
Found it engaging	92%	94%
Found it interactive	89%	85%



Policy

Investing in prevention to drive health and well-being in Wales

The evidence on what works ...

Anna Stielke,

Senior International Evidence and Policy Officer, Public Health Wales

Rebecca Masters,

Consultant in Public Health, Public Health Wales

Ann Jones,

Principal Sustainable Development and Health, Public Health Wales

Societies have been grappling with the consequences of scarce resources over the past years, leading to health and social care systems that are struggling to address the demands of societies. Poor health outcomes are associated with a decrease in quality of life, life satisfaction and trust in decision-makers amongst others. Wales has pronounced and persistent health, educational and economic inequalities. The health gap is widening among the population leaving those behind that are most

vulnerable due to their socio-demographic status and the social determinants they are connected to. The social determinants are foundational building blocks that determine people's health and well-being. Public health programmes and interventions can address these and create a healthier and fairer population, if financial investments and resources are shifted and re-distributed to those that maximise its value. If resources are invested sustainably and fairly, they can address health inequalities,

reverse the nation's health decline, and promote the well-being of all.

In order to understand which public health interventions and services generate value-for-money and showcase short and long-term impacts for those most struggling in our society, Public Health Wales and its WHO Collaborating Centre on Investment for Health and Well-being undertook a rapid systematic scoping review. This review collated the newest evidence, data and

contextual information on the services and intervention that maximise value for money for our population in Wales.

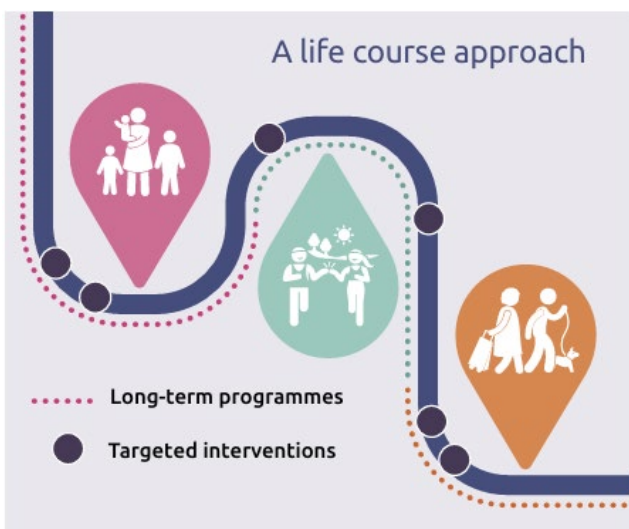
The report took a life course approach, highlighting interventions across the life courses: early years, healthy adults, and healthy ageing. It highlights that prevention is crucial for everyone to live longer and healthier and should be at the heart of investment decisions to address health outcomes, targeting those communities that are or are most at risk of deprivation.

mental health;
Early years education programmes especially for low-income families and;
Programmes supporting women to quit smoking during pregnancy.
The following programmes **healthy adult's** programmes have shown the greatest impacts:
Multi-component approaches to reducing self-harm and suicide;
Physical activity programmes to mitigate against obesity and associated diseases such as diabetes;
Data sharing between

health outcomes cannot be addressed in isolation and require collaborate action and investment in strategies and policies that enable the most vulnerable in our societies to thrive and live healthily.

Link to the report and associated documents can be found here:

<https://phwwhocc.co.uk/resources/investing-in-a-healthier-wales-prioritising-prevention/>



The report highlights effective interventions and programmes in the three stages of the life course. Interventions with a positive return on investment and the greatest impact targeting the **early years and children**, are for examples those that focus on: Integrated services for maternal and parental

organisations reducing the costs associated with violence.
Examples of collated evidence identified for **healthy ageing** are:
Programmes to address loneliness and isolation;
Programmes and interventions to promote independent living of older people;
Prediabetes management programmes.

The report offers guidance for investment decisions and priority setting for policy and decision-makers, public health and finance colleagues. It provides substantial evidence for a life course and preventative approach to reduce health risks associated with inequalities, and it advocates for a shift towards prevention across sectors as



Policy

Alternative Economies in Wales – shifting towards long-term and sustainable approach

Anna Stielke,

Senior International Evidence and Policy Officer, Public Health Wales

Rebecca Masters,

Consultant in Public Health, Public Health Wales

Ann Jones,

Principal Sustainable Development and Health, Public Health Wales

New ways of economic thinking have emerged that put people and the planet first. This counteracts prevailing economies that are built on capitalistic thinking and growth that have proven to be unsustainable and unfair. Wales is paving the way to advance an economy that is focused on health and well-being as outcome measures.

Different types of economies have emerged and therefore the Public Health Economics and Value Team at Public Health Wales has undertaken

work to understand the synergies and links, interdependencies and co-benefits between Well-being and Foundational Economies* in Wales, with the focus on health and the role of the health sector. Evidence from semi-structured interviews was triangulated with findings from a rapid scoping review to map and link the initiatives and activities related to the Well-being and Foundational Economies in Wales. The publication's focus was primarily on Wales, however, relevant strategies

and findings from the UK and beyond were outlined too.

Findings suggest that Wales is benefiting from an enabling strategic context with legislation such as the Well-being of Future Generations (Wales) Act that incorporates prevention and long-term thinking into public body decision making processes and the Welsh Government's 'Heathier Wales' Strategy that outlines a whole systems approach to the health and social care sector. Drivers that enable long-term focused and

these alternative economies in Wales are for example accountability mechanisms such as the national well-being indicators. However, stakeholders also mentioned barriers such as continued silo-working within and between organisations. They also mentioned that seeking new funding sources might be part of the solutions of funding cuts and restraints.

The Public Health Economics and Value Team at Public Health Wales have developed a suite of resources that support alternative economies through social value led approaches, these can be found here:

Social Value and Wellbeing Economy resources: <https://phwwhocc.co.uk/ih/our-work/sustainable-investment-for-health-well-being/>

WHO Well-being Economy deep dive: <https://phwwhocc.co.uk/resources/country-deep-dive-on-the-well-being-economy-wales/>

Value-v=based public health approach: <https://phwwhocc.co.uk/resources/sustainable-investment-in-population-health-and-well-being-towards-a-value-based-public-health/>

The social value scoping reviews:

Social Value and the life course: <https://phwwhocc.co.uk/resources/the-social->

[value-of-investing-in-public-health-across-the-life-course-a-systematic-scoping-review/](https://phwwhocc.co.uk/resources/the-social-return-on-investment-of-physical-activity-and-nutrition-interventions-a-scoping-review/)
PA and nutrition: <https://phwwhocc.co.uk/resources/the-social-return-on-investment-of-physical-activity-and-nutrition-interventions-a-scoping-review/>

Mental health: <https://phwwhocc.co.uk/resources/social-return-on-investment-sroi-of-mental-health-related-interventions-a-scoping-review/>

***To note:** Well-being and Foundational Economies were defined as follows for the purpose of the publication: A Well-Being Economy is defined by the World Health Organization as: “Economies that prioritize human, social, planetary and economic well-being, which constitute the well-being capitals. These include important assets such as trust, social cohesion, participation, environmental sustainability and quality employment, which are crucial for developing healthy, fairer and prosperous societies where people can thrive.” The Welsh Government’s ‘A Healthier Wales Foundation Economy programme’ describes the Foundational Economy as “The part of our economy that creates and distributes goods and services that we rely on for everyday life.”

Grapevine





Educating Tomorrow's Infection-Fighting Superheroes: Why Children Must Be Part of the Antimicrobial Resistance Solution

Meryl Davies,

Lead Antimicrobial Pharmacist – Primary & Community Care, Public Health Wales

Antimicrobial resistance (AMR) is one of the most critical global health threats of our time. As an antimicrobial pharmacist, I've seen first-hand how rapidly microorganisms can adapt, rendering our most reliable treatments ineffective. When bacteria, viruses, fungi, or parasites develop resistance to antimicrobial medicines, once-treatable infections can become life-threatening. Tackling this challenge demands urgent, cross-sector collaboration—and that includes investing in education.

It's never too early to start.

Why Early Education Matters

We often think of antimicrobial resistance as an issue for healthcare professionals or scientists. But the truth is, everyone has a role to play—and that includes our youngest citizens. Educating children about infection prevention and the responsible use of antibiotics helps build lifelong habits that can protect both individual and public health.

When we make these complex topics engaging and age-appropriate, we empower young people to become informed and responsible health advocates in their schools, families, and communities.

The 'Be a Superhero: Beat the Bugs' Competition

That's why Public Health Wales is proud to launch the 'Be a Superhero: Beat the Bugs' Competition 2025, an exciting and creative way for primary and secondary school pupils across Wales to learn about antimicrobial resistance and take action. The competition is timed to coincide with World AMR Awareness Week (18–24 November 2025), amplifying global efforts to combat AMR.

The initiative invites pupils to explore the UK Health Security Agency's e-Bug resources and turn their learning into creative projects.

Two Ways to Get Involved:

1. Poster Competition (Individual Entries)

Open to pupils in four age categories:

Reception–Year 3, Years 4–6, Years 7–9, and Years 10–13

Prizes: Book tokens (£20–£50) for the top three entries in each category

Formats: A4 paper or digital artwork

Submissions must be provided in both Welsh and English

2. Video Competition (School Entries)

One video per school (max 1 minute in length)

Categories: Primary and Secondary

School prizes: £100–£450

Submissions in both Welsh and English

Entries will be judged on originality, creativity, clarity of message, and effectiveness in raising awareness of AMR.

The deadline for submissions is 18 July 2025, with winners announced by 1 November 2025. Read the [Competition Rules](#)

The Impact

This initiative turns an abstract microbiological concept into something real and actionable. It gives children the tools to understand AMR and the confidence to share that knowledge. Whether through posters or videos, they become ‘infection prevention superheroes’—champions of hygiene, responsible antibiotic use, and healthy behaviours.

Winning entries will be showcased on Public Health Wales and NHS platforms during World AMR Awareness Week, extending the reach and visibility of these vital messages.

A Call to Action for

Parents and Teachers

We need your help to make this campaign a success.

Encourage your schools to participate. Talk to teachers, headteachers, and PTAs.

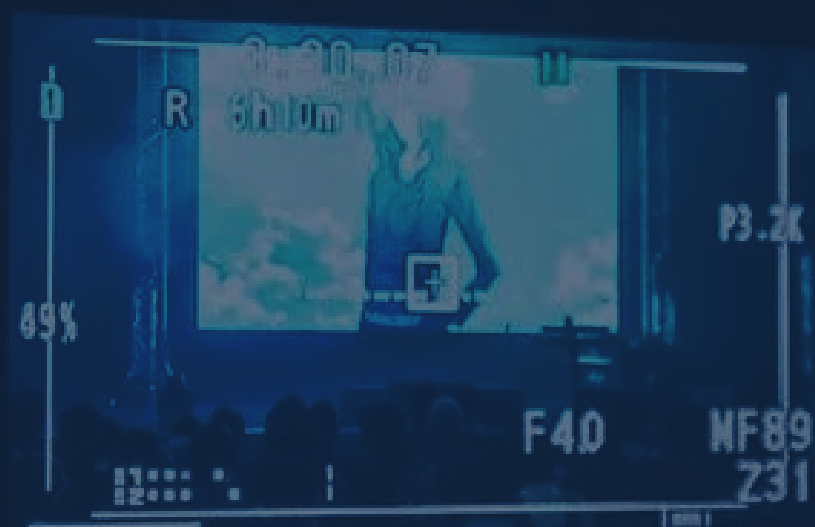
Use the free [e-Bug](#) resources in classrooms and at home.

Most importantly, spark conversations with children about why preventing infections and using medicines wisely matters—for them, and for all of us.

Let’s equip a generation that understands the importance of protecting the power of antibiotics. Together, we can beat the bugs.

For more information and support, contact the Antimicrobial Stewardship Team at HARP@wales.nhs.uk

Videos



BARS

EVF DTL

ZEBRA

LCD

WFM

COUNTER—RESET/TC SE

FUNCTION SHTR/F



Building Strong Foundations | Cardiff Highlights

The conference aligned with the PHNC objectives of sharing knowledge, facilitating the developments of solutions and approaches and connecting members and building a community.

[Watch](#)



Building Strong Foundations | Llandudno Highlights

The conference aligned with the PHNC objectives of sharing knowledge, facilitating the developments of solutions and approaches and connecting members and building a community.

[Watch](#)



WHIASU@20

The landscape of Health Impact Assessment (HIA) has changed massively over the last 20 years, and the Wales Health Impact Assessment Support Unit (WHIASU) have been right at the heart of it since its founding in 2004.

[Watch](#)

Explore our video library
on our website

[View all
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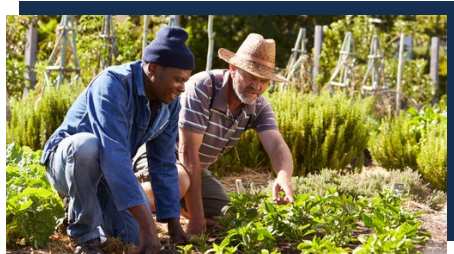
News & Resources





[New vision for mental health in Wales paves the way for same-day support](#)

06-05-2025



[New strategy aims to build a healthier and more resilient food system across Wales](#)

29-04-2025



[Public Health Wales announce new behavioural science resources to optimise health communications](#)

29-04-2025

All News

[Prevention-Based Health and Care A framework to embed prevention in the health and care system in Wales](#)

Public Health Wales

[World report on social determinants of health equity, 2025](#)

World Health Organization

All Resources

Next Issue

HEALTH PROMOTING SCHOOLS



Given the popularity of our Health Promoting Schools e-bulletin and the overlap with the Easter holidays, we've decided to dedicate our June edition to this topic with a focus on the Welsh Network of Health and Well-being Promoting Schools. If you missed the opportunity to submit an article for our previous edition, we'd be pleased to consider your contribution for this one—however, please refrain from re-submitting articles that have already been sent.

A health promoting school is one that constantly strengthens its capacity as a healthy setting for living, learning and working (WHO). The 'Healthy School' is one which takes responsibility for maintaining and promoting the health of all who 'learn, work, play and live' within it not only by formally teaching pupils about how to lead healthy lives but by enabling pupils and staff to take control over aspects of the school environment which influence their health.

It actively promotes, protects and embeds the physical, mental and social health and well-being of its community through positive action. This can be achieved by policy, strategic planning and staff development about its curriculum, ethos, physical environment and community relations.

For our upcoming e-bulletin we are inviting contributions from projects and initiatives focused on enhancing the health and wellbeing of children and young people within the school environment across Wales. These can be national, regional or local initiatives, policies or programmes. Our article submission form will provide you with further information on word count, layout of your article and guidance for images.

Please send articles to publichealth.network@wales.nhs.uk by 19th June 2025.

Contribute