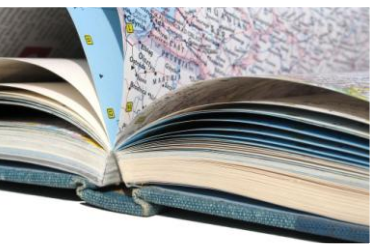




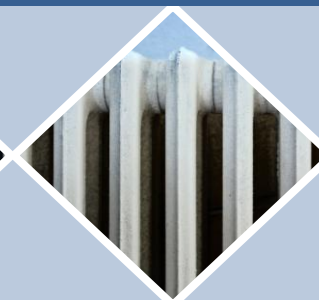
GIG
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Arsyllfa Iechyd
Cyhoeddus Cymru
Public Health
Wales Observatory

Wider Determinants of Health



*Betsi Cadwaladr University
Health Board*



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1 Introduction

1.1 Factors affecting health

Health is affected, positively and negatively, by many factors. At an individual level there are fixed biological factors, such as age, sex and genetic (or inherited) makeup, and potentially modifiable lifestyle factors, such as smoking, diet and exercise.

The society within which individuals live can influence their health, with involvement in social and community networks, including friendships, contact with relatives and supportive community interactions, playing an important role in maintaining health.

Then, at a higher level again, are the wider determinants of health, or the “causes of the causes”, the environmental, social and economic contexts of lives. Factors such as education, employment, income and housing all influence health both directly and indirectly¹.

Many of these wider determinants of health are both inter-related and beyond the direct control of individuals. For example, an individual with few qualifications is more likely to be unemployed or to have a low income, which in turn limits their housing choice. Similarly there is evidence of a link between unemployment and health whereby ill health may be caused by, or result from, unemployment².

All of these circumstances may act to influence what is often wrongly perceived as solely a personal lifestyle choice. For example, whilst smoking may appear to an individual’s lifestyle choice, it is possible that their decision to smoke is pushed by the effects of the context of their lives and is in effect a response to those stresses³.

It follows then that any attempt to tackle poor health must address the wider contextual factors, rather than simply looking to influence individuals and their specific behaviours in isolation. As such, “building health into all policies and all policies into health” is rightly the first of the seven action areas of “Fairer Health Outcomes For All”, the Welsh Government’s strategic action plan to reduce inequities in health⁴.

1.2 Purpose of this report

The purpose of this brief report is not to establish associations between the wider determinants of health and health outcomes themselves, this has been done elsewhere¹. Nor is the purpose of this report to prescribe actions to tackle the wider determinants of health.

Rather, this report simply describes a number of indicators of the wider determinants of health at a small area level for each of the health boards in Wales. It has been produced by the Public Health Wales Observatory specifically to illustrate the variation in such indicators at small area level within health boards and their constituent local authorities.

Although a purely descriptive report, it is hoped that it will be of interest and use to the local Director of Public Health, the local Public Health Team and their stakeholders.

1.3 Content of this report

All but one of the indicators are presented at middle super output area (MSOA). There are 413 MSOAs in Wales with an average population of approximately 7,000 people. Therefore MSOAs provide a reasonably sized population for analyses whilst retaining a local small area focus.

In part, the (un)availability of determinants of health data at small area level has dictated the selection of the indicators presented here. In some instances, such as community safety, there were multiple alternatives with no definitive single indicator. In such circumstances a pragmatic choice had to be made, with the reality being that similar indicators will show a similar pattern. In other instances, such as housing, there was no up to date information available pending the release of 2011 Census data.

The indicators are presented under the following chapter headings: income, housing, employment, education and community safety. For most of the indicators, the following are presented:

- an overview of the meaning of the indicator and a description of the patterns observed within each area;
- a map of all the MSOAs by fifths of equal range within the health board area;
- a chart for each local authority within the health board;
- a chart of all local authorities across Wales.

In addition, an [Indicator Guide](#) is available providing further information on each indicator.

The one education indicator that was not available at MSOA level was the percentage of school leavers not in education, employment or training (NEET). This indicator is presented at local authority level only.

Where possible, confidence intervals are shown around the indicators. Confidence intervals are indications of the random variation that would be expected around these indicators. Unfortunately, in many instances it was not possible to provide confidence intervals due to the nature of the data. Confidence intervals and MSOAs are described in more detail in Appendix A.

Appendix B comprises a series of local authority area maps showing the MSOA boundaries for each local authority within the health board area.

Further information on health inequalities and the relationship of health to deprivation can be found in the Observatory topic page 'Inequalities and inequities' available: <http://www.wales.nhs.uk/sitesplus/922/page/49811>.

1.4 Fair Society, Healthy Lives

The Marmot Review, Fair Society, Healthy Lives, published in 2010, suggested a number of indicators that would support the monitoring of work that aimed to tackle health inequalities, which arise largely from the wider determinants of health.

Joint work by the London Health Observatory and The Marmot Review Team led to the publication of 10 such indicators for England⁵, shown below with details of the equivalent indicators for Wales.

Marmot Indicators for Local Authorities in England	Equivalent indicators for Wales
1 Male life expectancy at birth	Produced and published for Wales by the Public Health Observatory for Wales in the report 'Measuring Inequalities 2011: Trends in mortality and life expectancy in Wales', available at http://www.wales.nhs.uk/sitesplus/922/page/58379
2 Inequality in male life expectancy	
3 Inequality in male disability free life expectancy	
4 Female life expectancy at birth	
5 Inequality in female life expectancy	
6 Inequality in female disability free life expectancy	
7 Children achieving a good level of development at age 5	There is no current equivalent measure in Wales. A measure of achievement at the end of compulsory secondary education is presented here instead.
8 Young people not in employment, education or training (NEET)	Different recording systems in England and Wales mean the NEET data presented here are slightly different to those in England. However they are very similar so remain of use.
9 People in households in receipt of means tested benefit (%)	In England this is used as part of IMD. Here a similar measure is shown; percentage of working age population in receipt of employment related benefits, which itself is used in the WIMD.
10 Inequality in receipt of means-tested benefits	Not possible here as WIMD is based on LSOA whereas MSOA is the geographical level of this report.

2 Income

2.1 Household poverty

Definition

An experimental modelled estimate of the proportion of households living in poverty, after housing costs has been deducted. This is a relative measure of poverty as it is defined here as having less than 60% of the UK median net equivalised household income.

About

Low income and poor health are strongly associated, with low income leading to poor health and poor health leading to low income. A low income is likely to reduce the household's ability to access or maintain key aspects such as healthy food and warm accommodation. Low income is also likely to reduce societal participation and limit access to enabling resources and choices. Those on low incomes are more likely to engage in health damaging behaviours, such as smoking and eating high calorie foods, as coping mechanisms or short term fixes⁶.

More detailed information on this indicator can be found in the [Indicator Guide](#).

Pattern

Whilst it must be remembered that these are model based estimates, across the health board there was a threefold difference in the proportion of households estimated to be living in poverty from 13.5% (Wrexham MSOA 002) to 41.5% (Wrexham MSOA 010).

Estimates at the local authority level were not available but the median MSOA percentages suggest Gwynedd has higher levels of poverty than the rest and Flintshire has lower levels.

The map suggests higher levels clustering in the south and west of Gwynedd, most of the Conwy and Denbighshire coast from Llandudno to Prestatyn, the easternmost edge of Flintshire and the areas to the north of Wrexham town. More isolated higher levels were estimated for the towns of Denbigh, Bangor, Caernarfon, Holyhead and the north and central area of Anglesey.

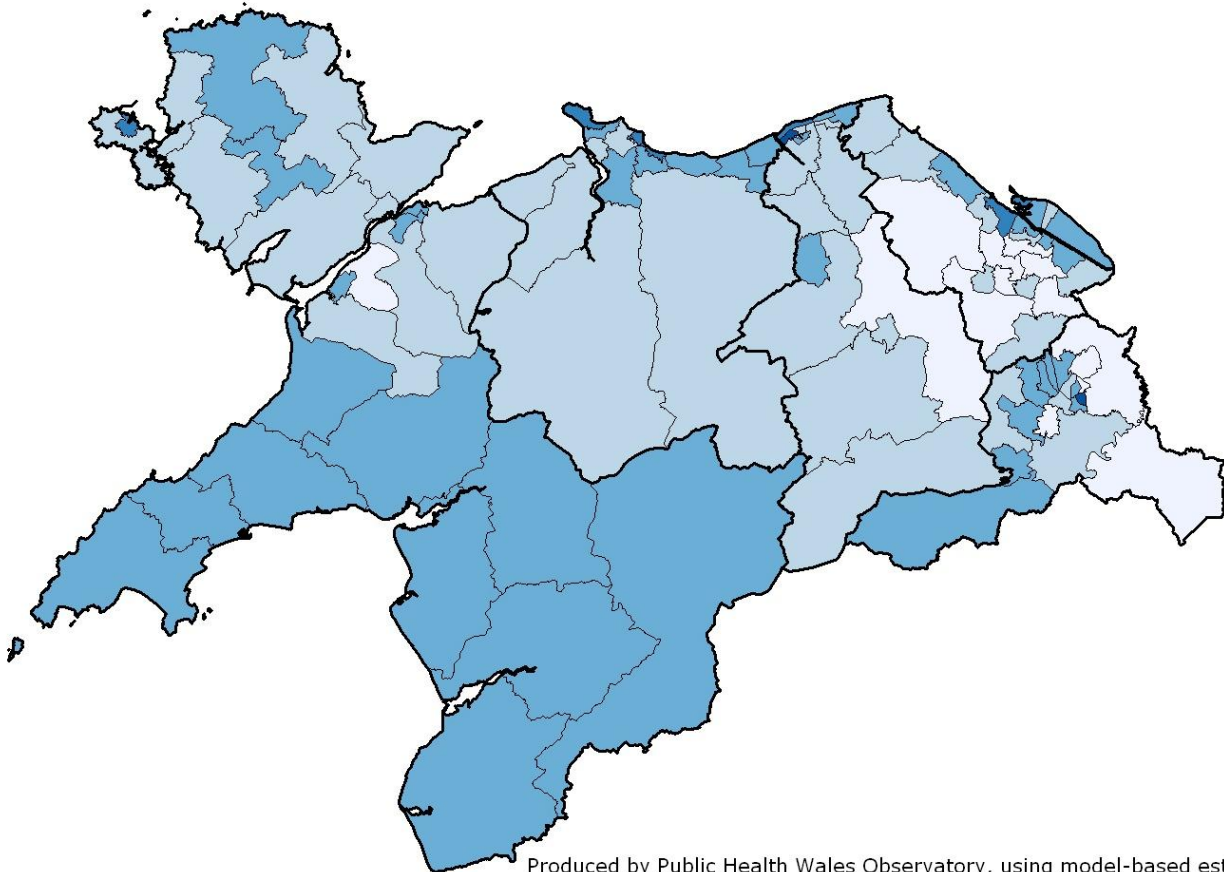
Percentage of households living in poverty, 2007/08

MSOA

- 35.9 to 41.5 (2)
- 30.3 to 35.9 (6)
- 24.7 to 30.3 (38)
- 19.1 to 24.7 (36)
- 13.5 to 19.1 (14)

□ MSOA boundary

□ Local authority boundary



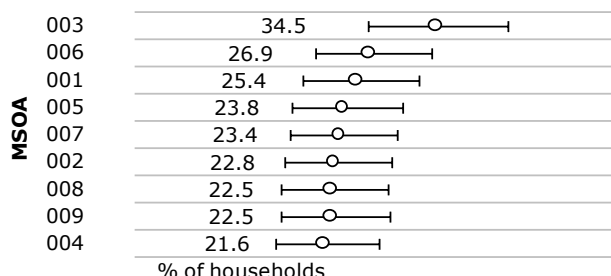
Produced by Public Health Wales Observatory, using model-based estimates (ONS)
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Percentage of households living in poverty in Betsi Cadwaladr University Health Board area, 2007/08

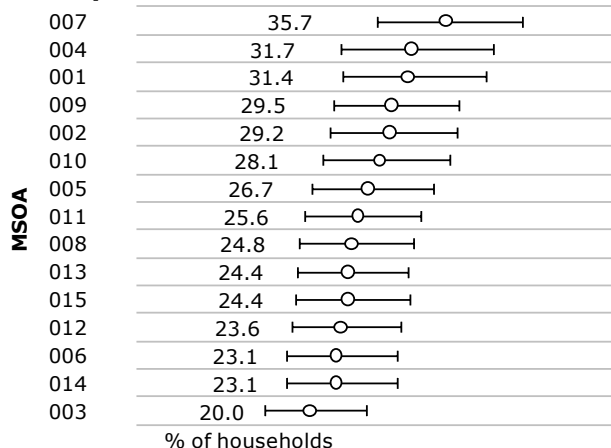
Produced by Public Health Wales Observatory, using model-based estimates (ONS)

MSOA EASR with 95% confidence interval

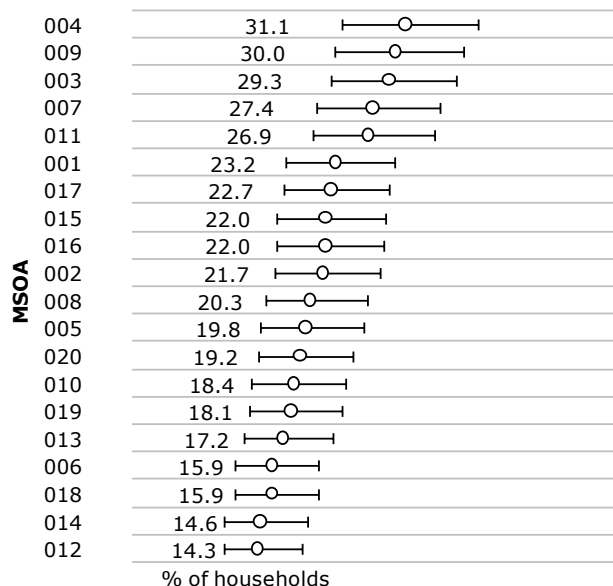
Isle of Anglesey



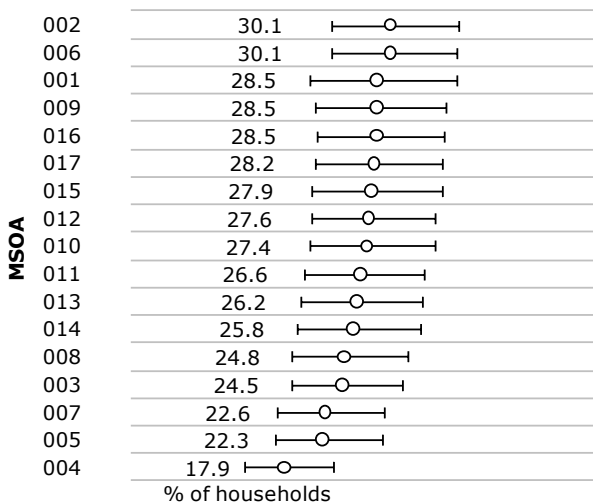
Conwy



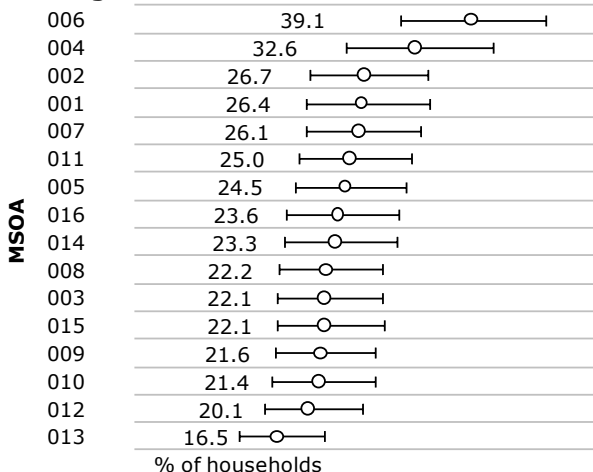
Flintshire



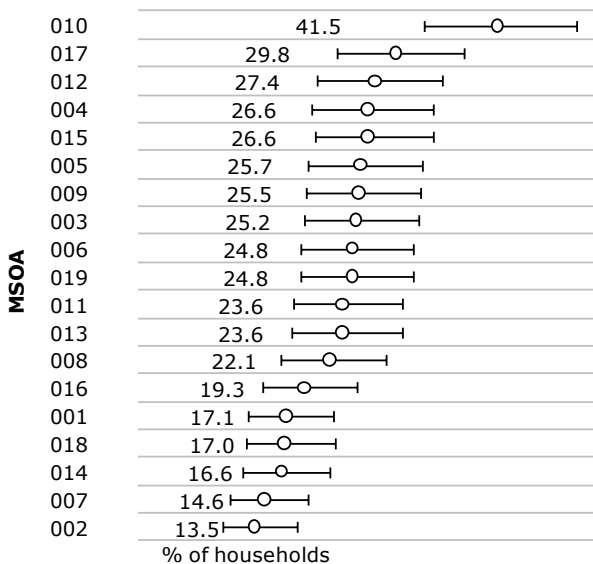
Gwynedd



Denbighshire



Wrexham



3 Housing

3.1 No central heating

Definition

The percentage of all people living in households which had no central heating in any room or rooms.

About

The inability to adequately heat a house can have major health consequences. The cold itself can exacerbate many respiratory and circulatory problems, especially in the elderly, and is likely to contribute to excess winter deaths. Inadequate heating causes dampness and condensation within a house. Dust mites and fungal spores proliferate in such conditions, which then exacerbate respiratory problems such as asthma, wheezing and other lung inflammations⁷.

This indicator is taken from the 2001 Census and is hence out of date. However, in the absence of any other national housing data, and pending the release of the 2011 Census data, it is the most up to date source of housing data. More detailed information on this indicator can be found in the [Indicator Guide](#).

Pattern

The percentage of people living in households with no central heating was markedly higher than the Welsh average in all local authorities within this health board other than in Flintshire. This was to such an extent that only one of the 76 MSOAs in the Isle of Anglesey, Gwynedd, Conwy, Denbighshire and Wrexham was below the Welsh average. Across Wales as whole the highest percentages were seen in the more rural local authorities of the north and west. This may at least in part be due to the more limited availability of mains gas in rural areas.

Within this health board, there was substantial variation at the MSOA level, ranging from just 1% (Flintshire MSOA 010) to 28% (Isle of Anglesey MSOA 003). The map shows a very clear difference between the west and east illustrated by the fact that the highest MSOA in Flintshire (009) had the same percentage (14%) as the lowest MSOA in Gwynedd (001).

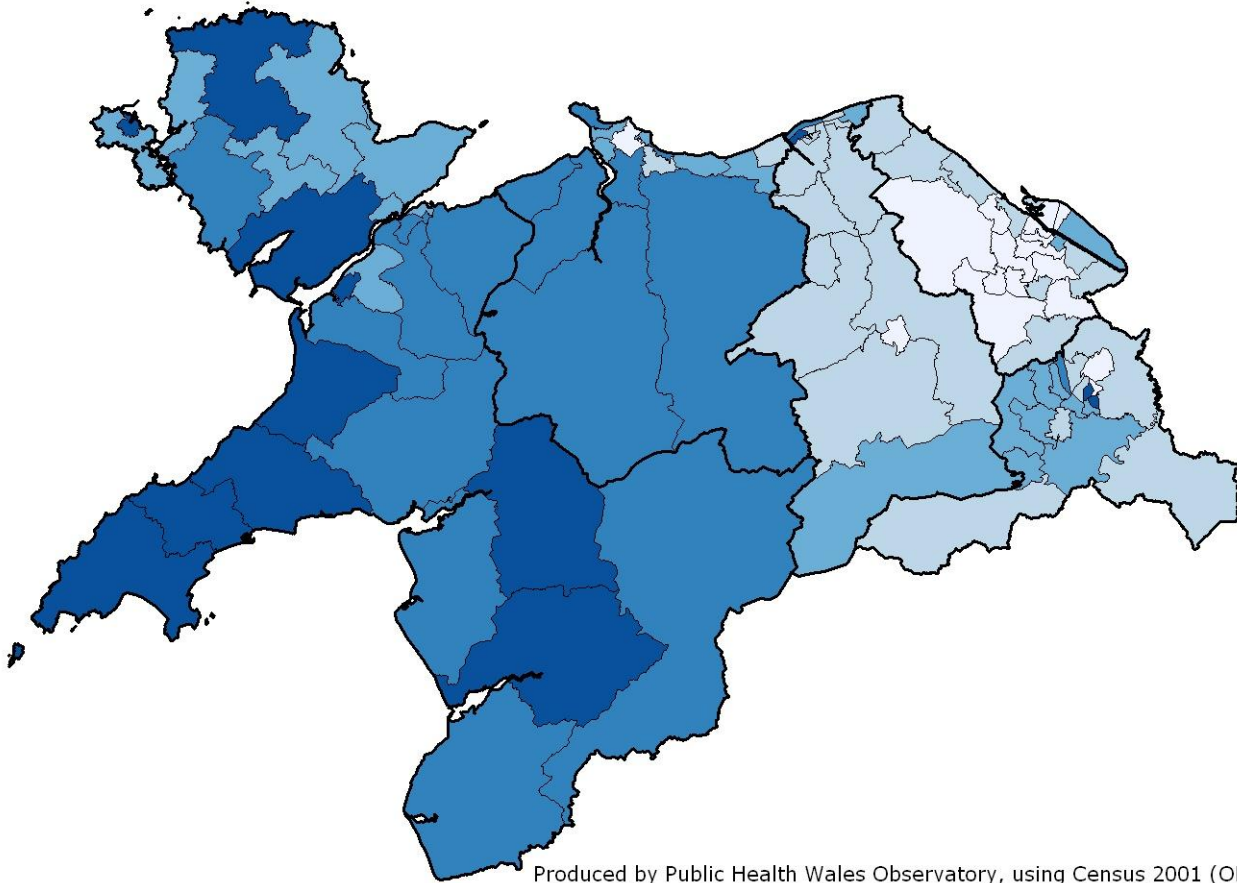
Percentage of all people living in households with no central heating, 2001

MSOA

- 21 to 28 (13)
- 16 to 21 (18)
- 11 to 16 (23)
- 6 to 11 (27)
- 1 to 6 (15)

□ MSOA boundary

□ Local authority boundary



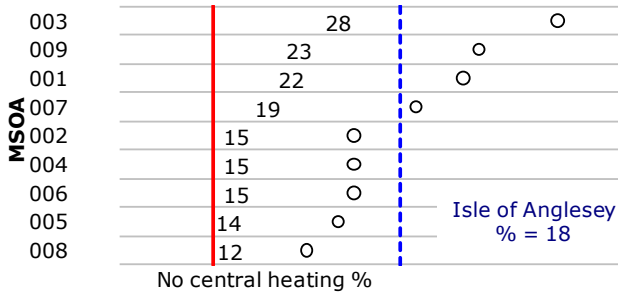
Produced by Public Health Wales Observatory, using Census 2001 (ONS)
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Percentage of all people living in houses which had no central heating in any room or rooms in Betsi Cadwaladr University Health Board area, 2001

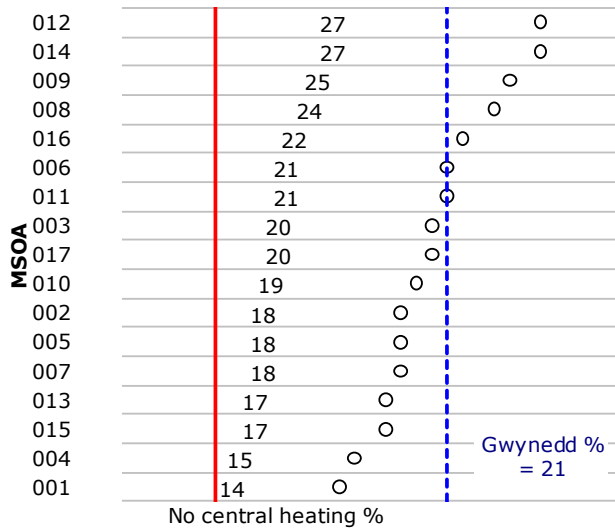
Produced by Public Health Wales Observatory, using Census 2001 (ONS)

○ MSOA - - - Local Authority — Wales (6%)

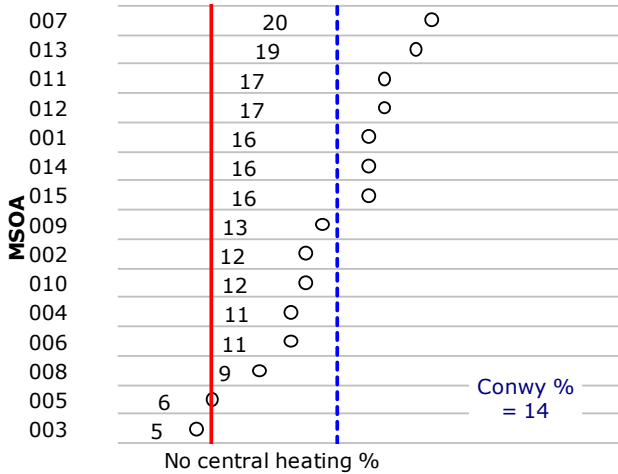
Isle of Anglesey



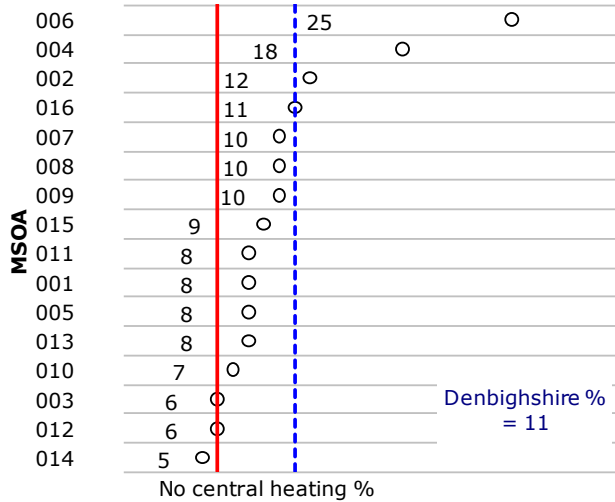
Gwynedd



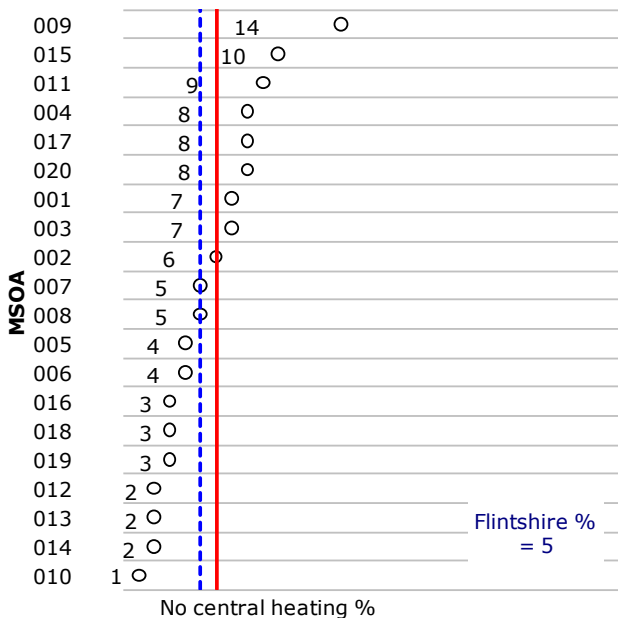
Conwy



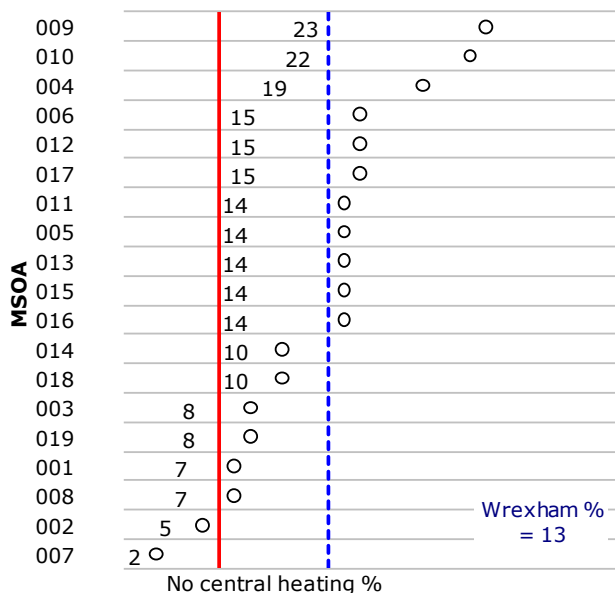
Denbighshire



Flintshire



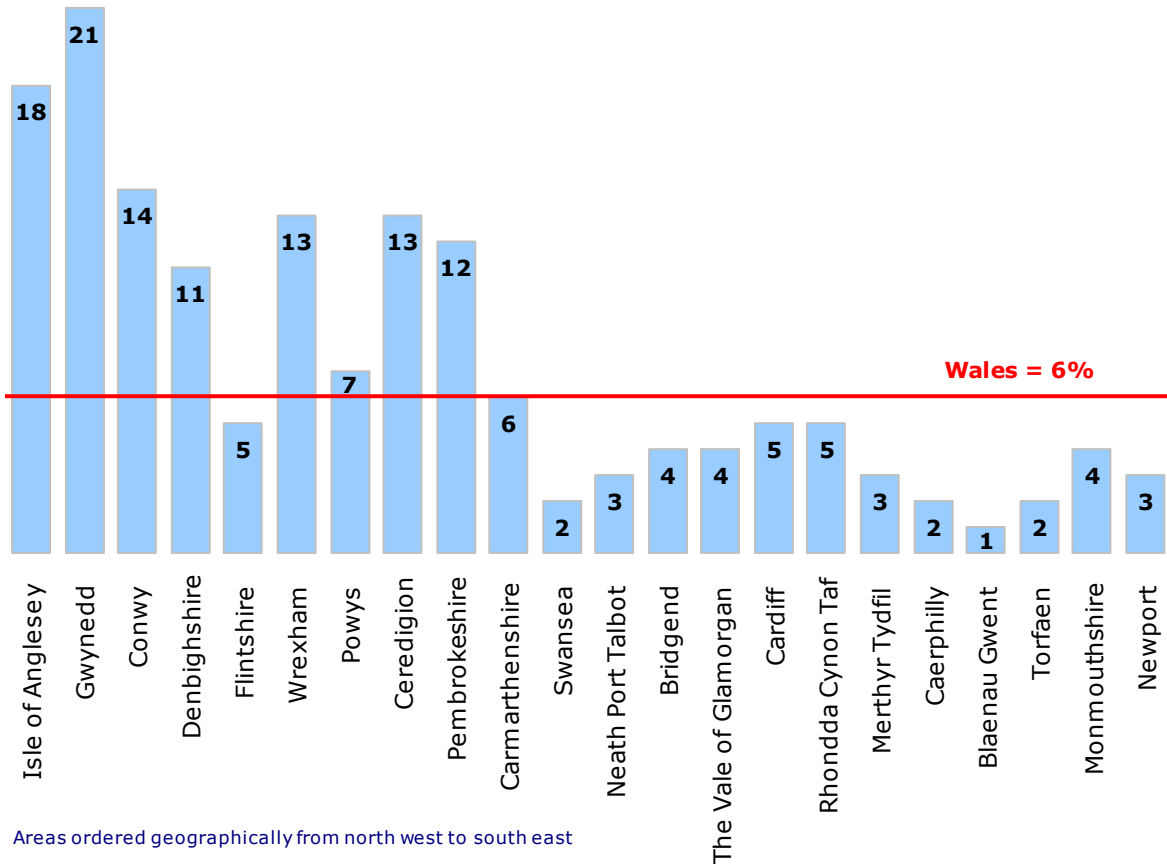
Wrexham



Local authorities

Percentage of all people living in households with no central heating by local authority, 2001

Produced by Public Health Wales Observatory, using Census 2001 (ONS)



4 Employment

4.1 Employment related benefits

Definition

The percentage of the working age population claiming one or more (un)employment related benefits.

About

The lack, or loss, of employment will limit, or reduce, income. Unemployment can result in poverty, with all of its attendant negative health effects. Unemployment may also adversely affect psychological wellbeing which in turn may reduce societal participation⁸. It is likely that poor health may contribute to the loss of employment and may also limit the chances of gaining employment². Living in communities where unemployment levels are high, and therefore the expectation of finding work is low, can cause anxiety and depression as well as leading some to turn to drugs, alcohol and crime¹¹. Children growing up in such communities are similarly affected.

This indicator is the de-duplicated total number of working age people claiming one or more employment benefits, including Job Seeker's Allowance, Employment and Support Allowance and Incapacity Benefit. People claiming more than one such benefit are only counted once. More detailed information on this indicator can be found in the [Indicator Guide](#).

Pattern

All of the local authority averages in this health board area were just below the Welsh average, ranging from 11.1% in Flintshire to 14.5% in Denbighshire.

There was considerable variation at the MSOA level from just 5.3% (Flintshire MSOA 018) to 34.6% (Denbighshire 004). Three of the four highest percentages occurred along the northern coast in the Colwyn Bay (Conwy MSOA 007) and Rhyl (Denbighshire MSOA 004 & 006) areas. The other particularly high percentage was in Wrexham (MSOA 010). All of the other counties had high particularly high percentages in at least one area, generally along the coast. These included Holyhead (Isle of Anglesey MSOA 003), Caernarfon (Gwynedd MSOA 006) and Flint (Flintshire MSOA004). Employment related benefits, unsurprisingly, show a similar pattern to that of poverty, being generally highest in the coastal areas and larger towns.

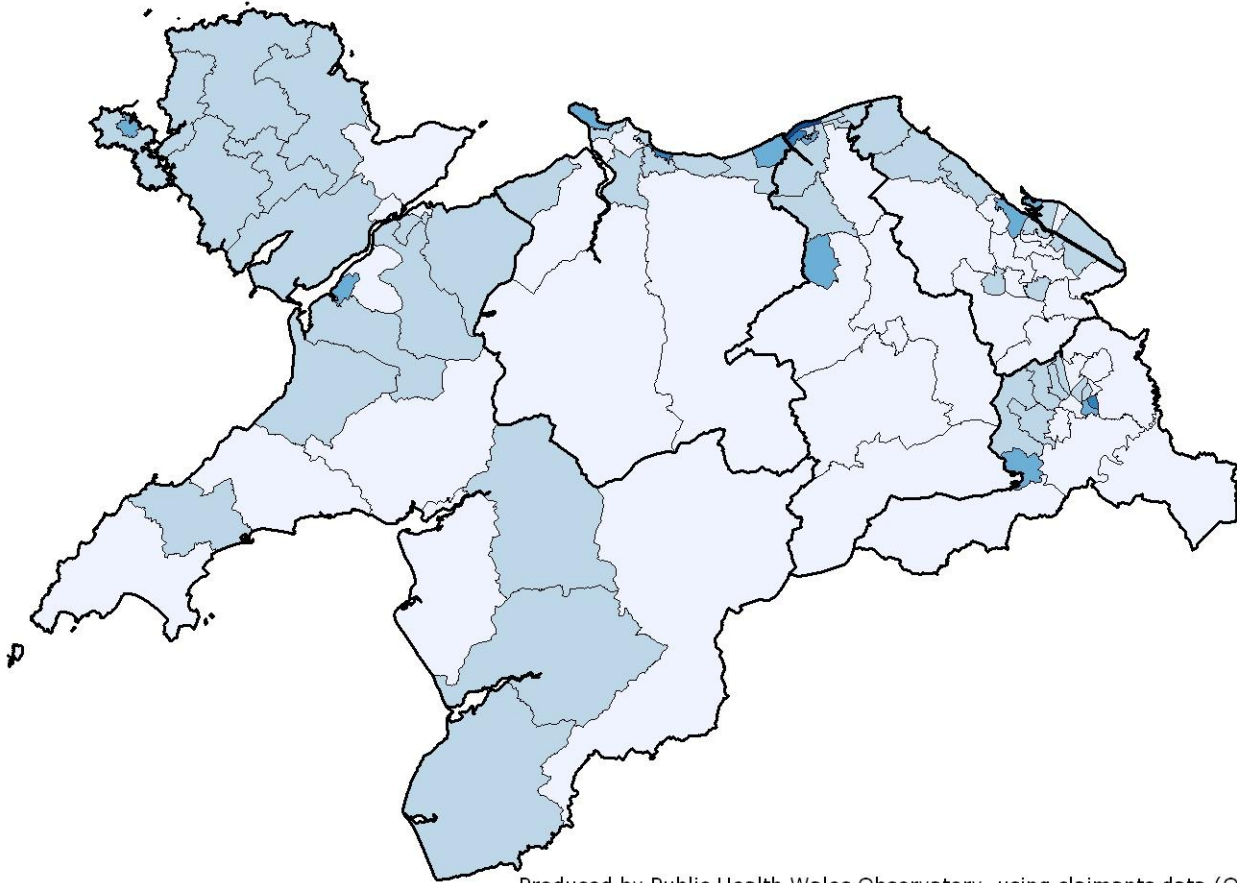
Percentage of working-age population claiming employment-related benefits, November 2009 - August 2010

MSOA

- 28.9 to 34.6 (1)
- 23.0 to 28.9 (3)
- 17.1 to 23.0 (9)
- 11.2 to 17.1 (43)
- 5.3 to 11.2 (40)

□ MSOA boundary

□ Local authority boundary



Produced by Public Health Wales Observatory, using claimants data (ONS) & (DWP)
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Percentage of the working-age population claiming one or more employment related benefits in Betsi Cadwaladr University Health Board area, November 2009 – August 2010

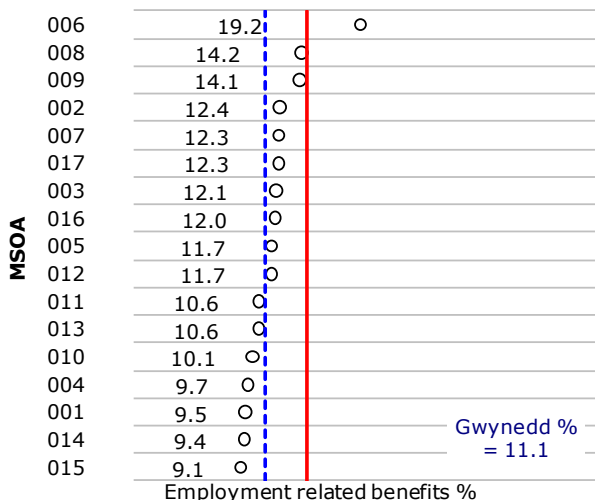
Produced by Public Health Wales Observatory, using claimants data (ONS) & (DWP)

○ MSOA - - - Local Authority — Wales (14.7%)

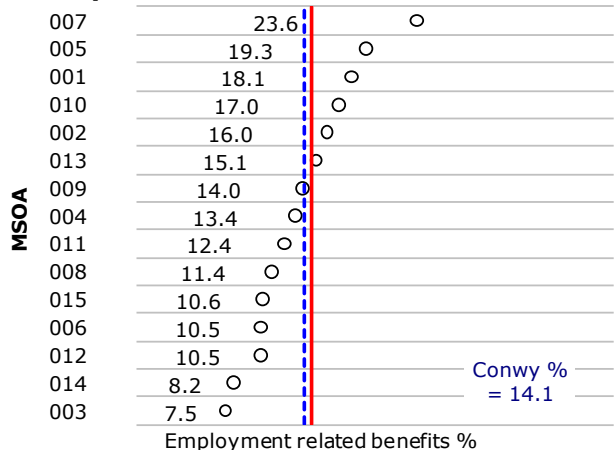
Isle of Anglesey



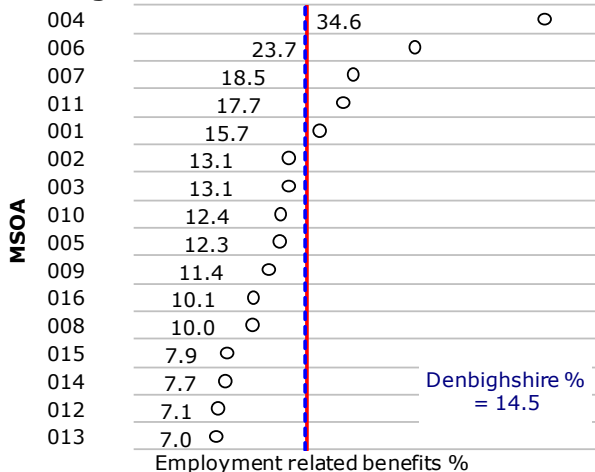
Gwynedd



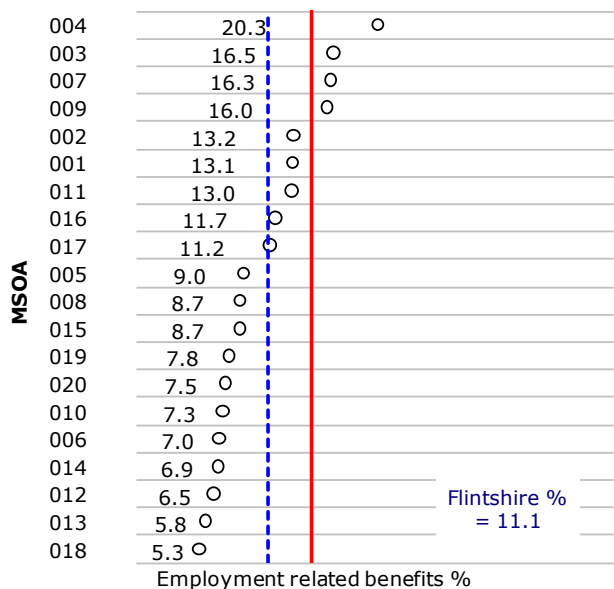
Conwy



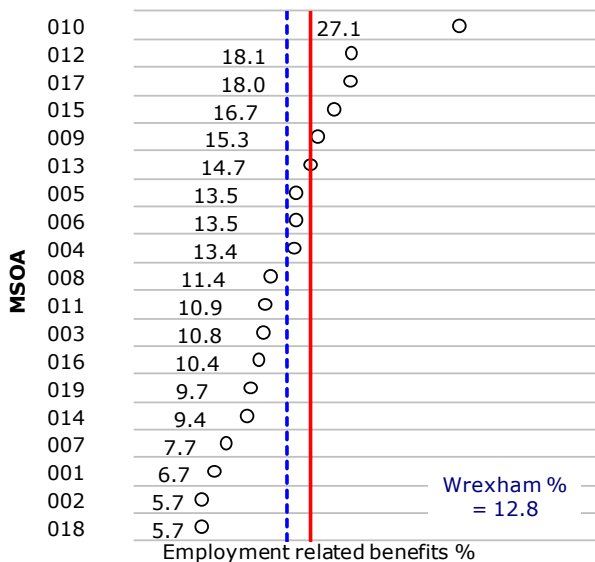
Denbighshire



Flintshire



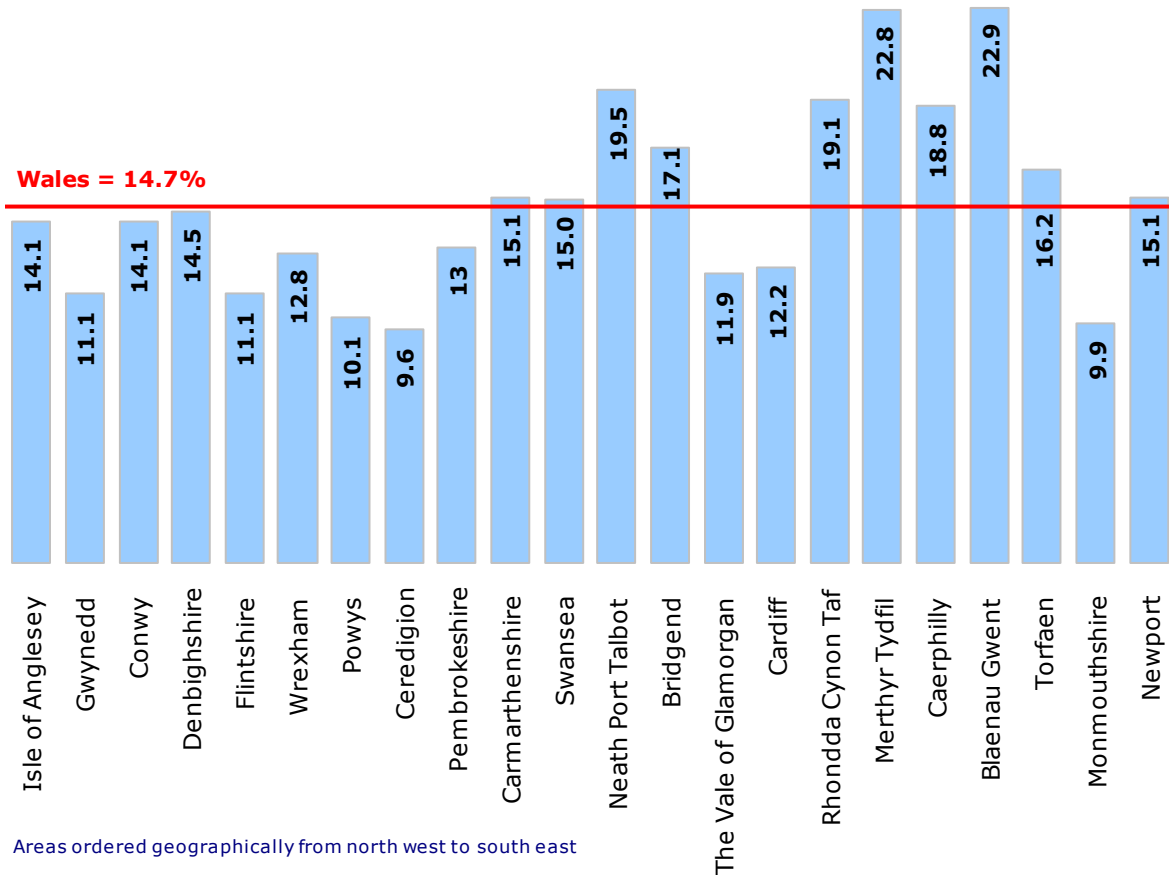
Wrexham



Local authorities

Percentage of working-age population claiming employment-related benefits, November 2009 - August 2010

Produced by Public Health Wales Observatory, using claimants data (ONS) & (DWP)



5 Education

5.1 Educational attainment aged 16

Definition

Key stage 4 educational attainment at the end of compulsory education.

About

Educational attainment is a critical indicator of future education and employment opportunities. These opportunities in turn are critical indicators of income which, as discussed earlier, has a major effect on health⁸.

Unlike all of the other indicators, here a higher value is better. The widely used school performance tables are, by design, based on the school's pupils irrespective of where they live. Hence school based performance indicators are not amenable to a small area of residence analysis. The indicator presented here is based on the area of residence of pupils irrespective of their school, though that of course means that it is possible for more than one school to draw pupils from any single MSOA. The wider average points scores presented here represent the absolute achievement of resident school pupils with regards to all approved qualifications taken up to the age of 16 including GCSEs, NVQs, City & Guilds and other vocational qualifications. To understand more about the complex composition of this score it is best to view the more detailed information on this indicator that can be found in the [Indicator Guide](#). Notwithstanding that, scores at the extreme ends of the scale represent substantial differences in educational achievement.

Pattern

All of the local authority averages in this Health Board area were very similar to the Welsh average (394), ranging from 375 in the Isle of Anglesey to 416 in Wrexham.

There was considerable variation at the MSOA level from just 270 (Denbighshire MSOA 006) to 593 (Denbighshire 013). The three highest (best) scores occurred in the Ruthin area of Denbighshire (Denbighshire MSOA 013, 014, 015). The lowest scores occurred in MSOAs near Holyhead, Rhyl, Denbigh, Holywell, Flint, Queensferry and to the east of Wrexham.

MSOAs with point scores lower than the Welsh average were concentrated in the Isle of Anglesey, a roughly triangular area of Gwynedd and Conwy enclosing Bangor, Porthmadog and Betws-y-Coed, Llandudno and Abergele on the Conwy coast, the whole northern part of Denbighshire down to Denbigh, the entire eastern edge of Flintshire and the central northern parts of Wrexham.

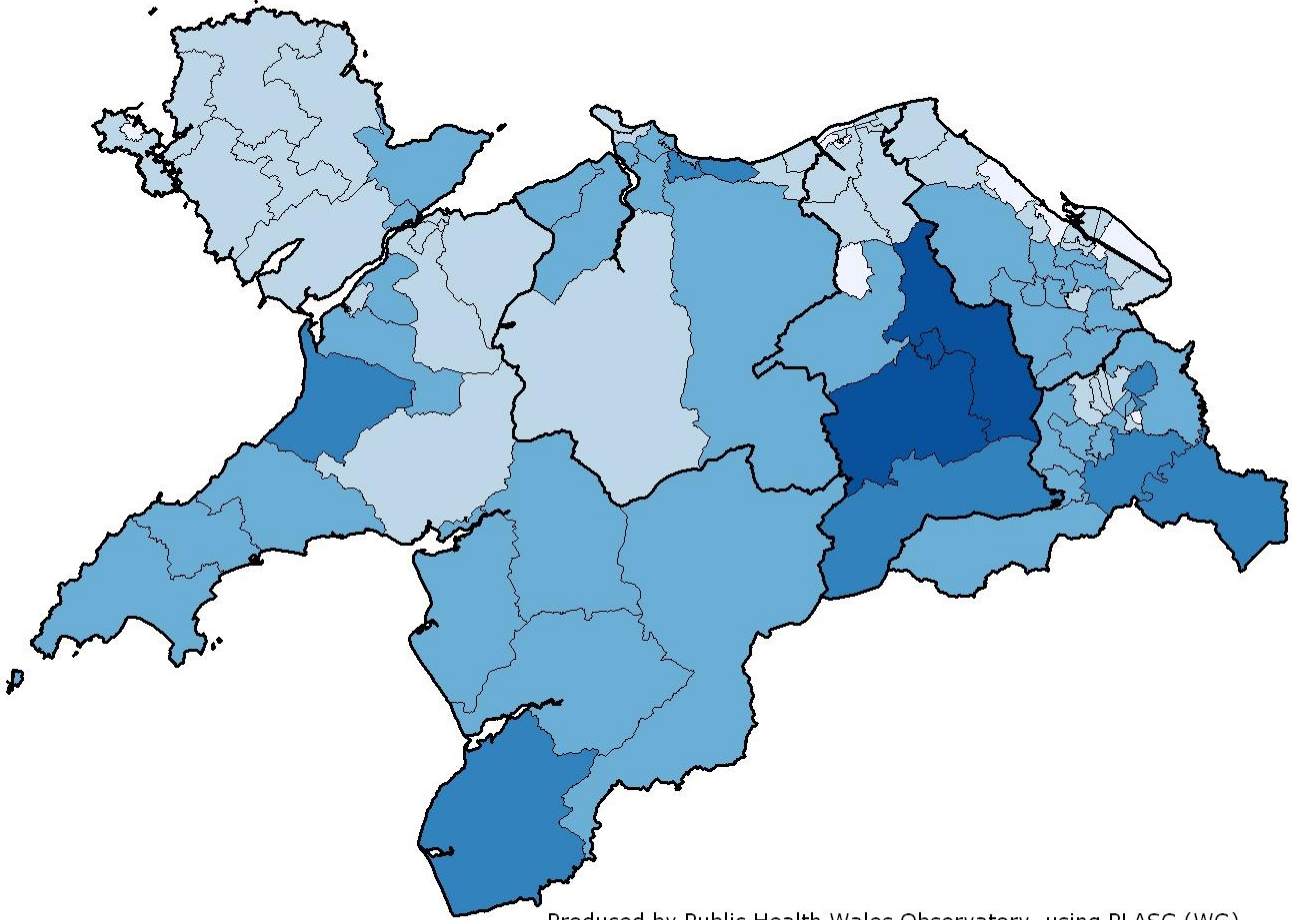
Key stage 4 educational attainment, 2008-2010

MSOA, mean score

- 530 to 593 (3)
- 465 to 530 (9)
- 400 to 465 (38)
- 335 to 400 (37)
- 270 to 335 (9)

□ MSOA boundary

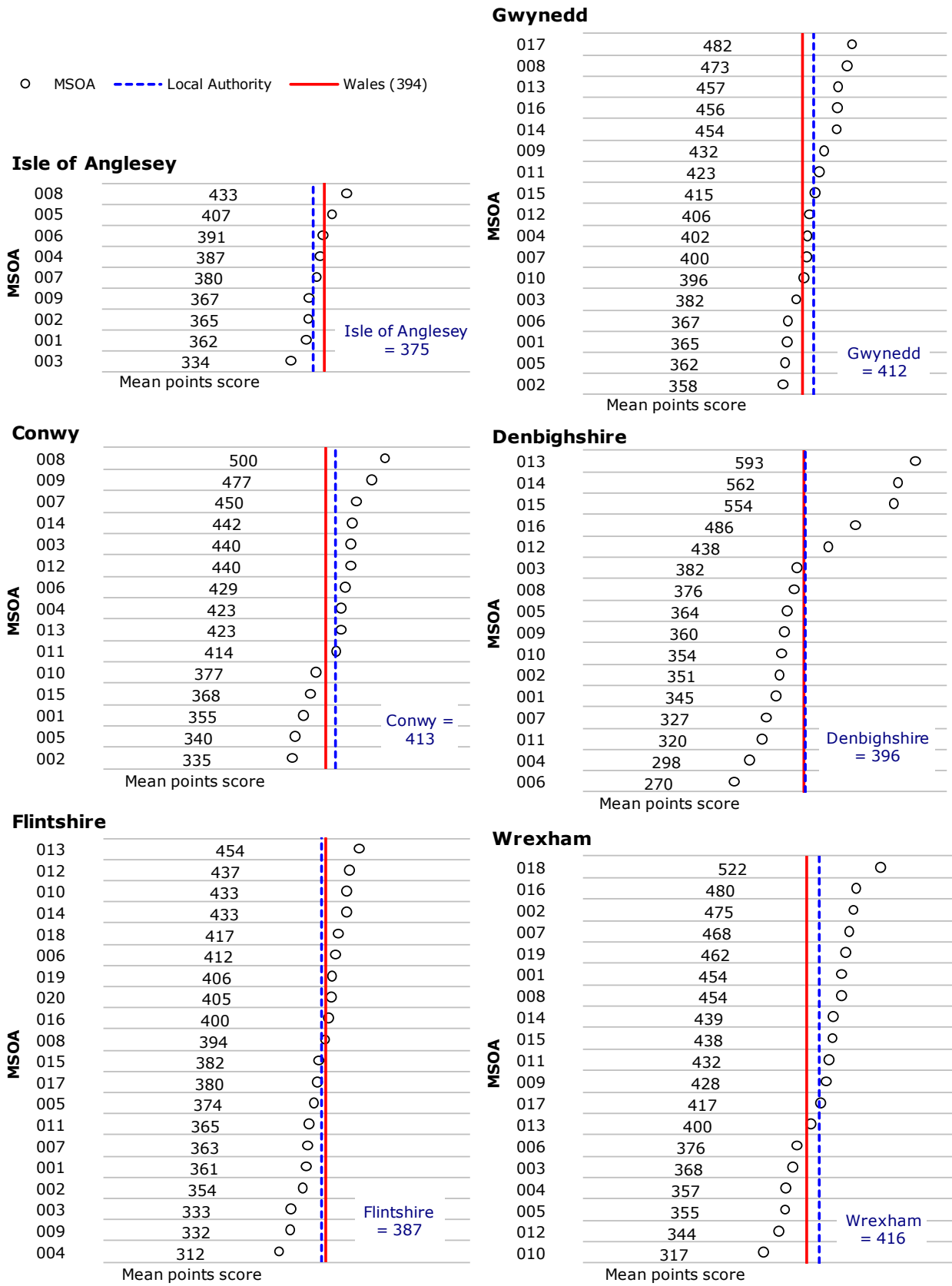
□ Local authority boundary



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Key stage 4 educational attainment mean scores in Betsi Cadwaladr University Health Board area, 2008-10

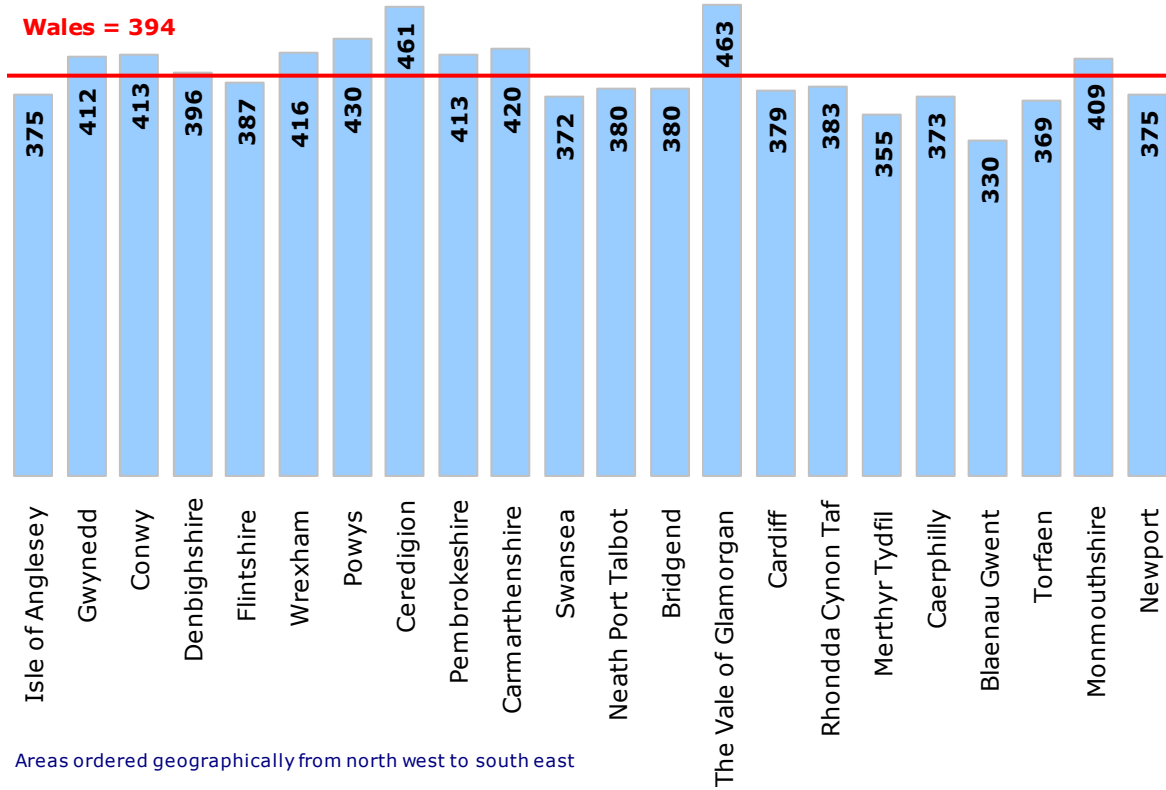
Produced by Public Health Wales Observatory, using PLASC (WG)



Local authorities

Key stage 4 educational attainment mean scores by local authority, 2008-10

Produced by Public Health Wales Observatory, using PLASC (WG)



5.2 Not in education employment or training

Definition

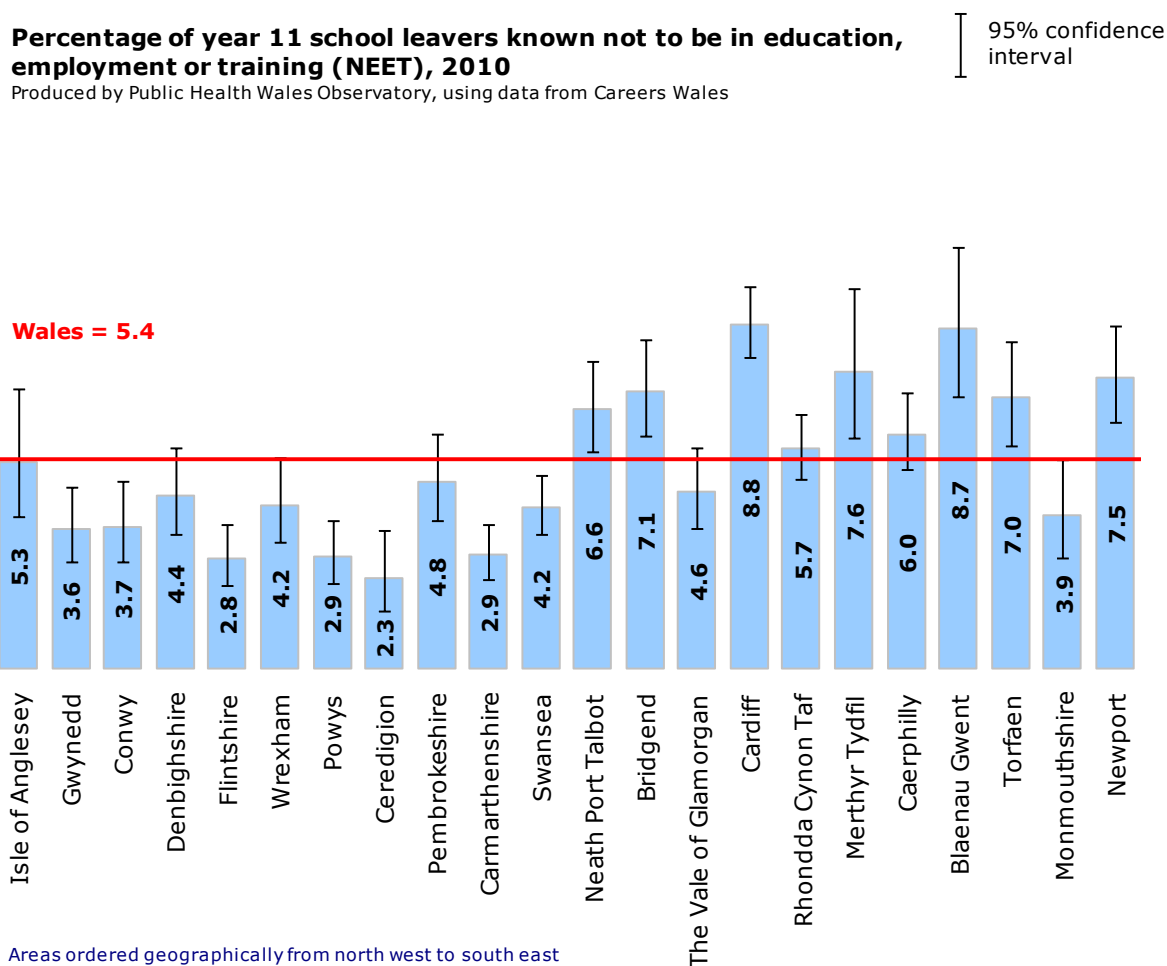
The percentage of year 11 school leavers who left school in the summer and who, by the end of October, were not known to be in full or part time education, employment or training (NEET).

About

The non-participation in education, employment or training after compulsory education is associated with subsequent unemployment, low income, mental illness and criminal activity⁹. More detailed information on this indicator can be found in the [Indicator Guide](#).

Pattern

The percentages of year 11 school leavers classified as NEET were lower than the Welsh average for all the local authorities in this health board, substantially so for Gwynedd, Conwy and Flintshire. In general the more rural local authorities had lower levels of NEETs than the more urban local authorities.



6 Community Safety

6.1 Criminal damage incidents

Definition

The rate of incidents of criminal damage per 1,000 day time population.

About

Criminal damage relates to unlawful damage or destruction of property. As well as the immediate effects of criminal damage to property, this, and all crime, can adversely affect mental wellbeing. The development of a fear of crime can lead to decreased social interactions. There are strong associations between all levels of criminal activity and also with drug and alcohol misuse¹⁰. More detailed information on this indicator can be found in the [Indicator Guide](#).

Pattern

The number of incidents of criminal damage per 1000 day time population was lower than the Welsh average in the Isle of Anglesey, Denbighshire and Flintshire, and very similar to the Welsh average in the other local authorities in this health board. In total, across the three local authorities that were lower than the Welsh average, eighty percent of the MSOAs were lower than the Welsh average.

Within this health board there was considerable variation at the MSOA level, ranging from 2.9 (Flintshire MSOA 013 to the south of Queensferry) to 38.1 (Wrexham MSOA 010 to the east of Wrexham town). The five highest levels after Wrexham MSOA 010 were recorded in Rhyl (Denbighshire MSOA 004), Colwyn Bay (Conwy MSOA 007), Bangor (Gwynedd MSOA 001), Caernarfon (Gwynedd MSOA 006) and Holyhead (Isle of Anglesey MSOA 003). As with many of the other indicators presented here, the worst levels tend to occur in the larger towns and along the coast.

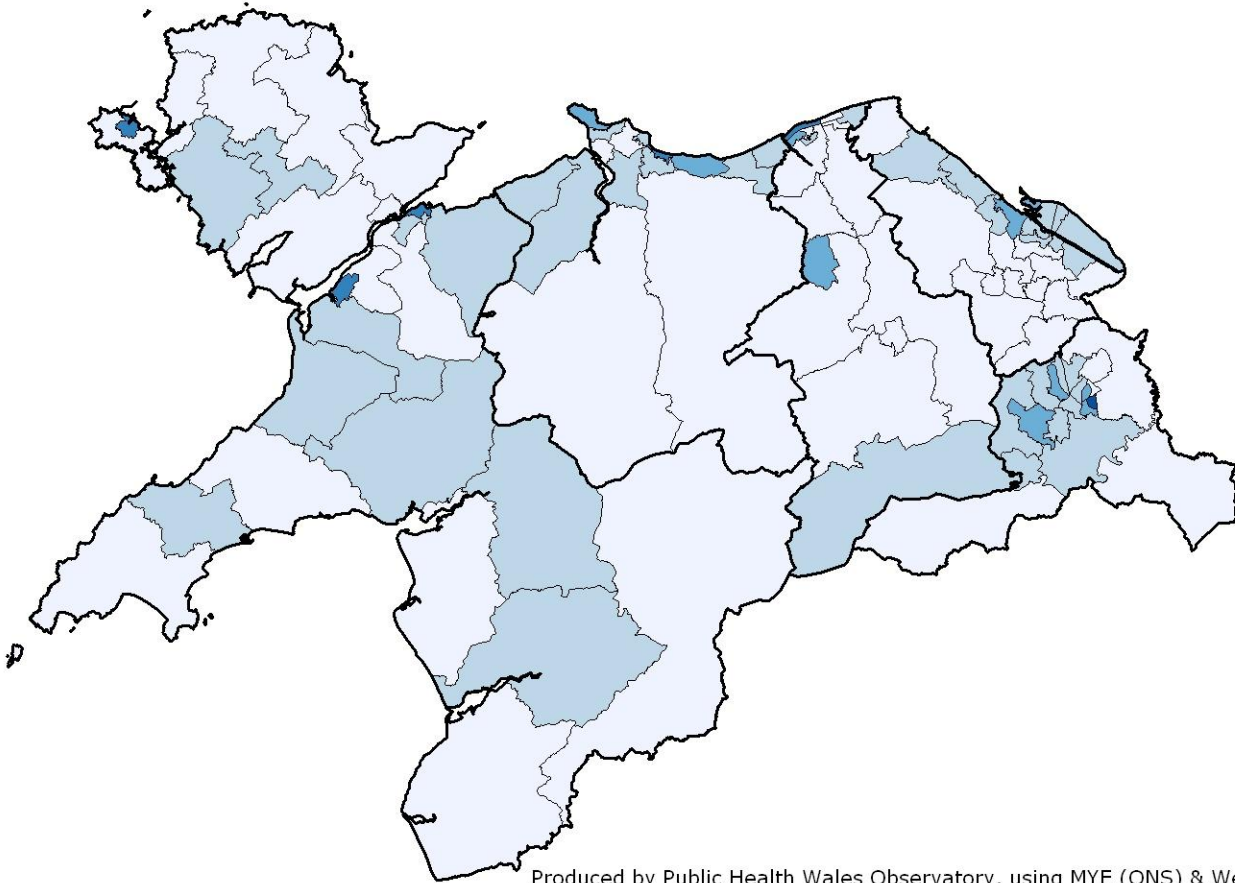
The rate of incidents of criminal damage per 1,000 day time population, April 2008 - March 2010

MSOA

- 30.9 to 38.1 (1)
- 23.9 to 30.9 (5)
- 16.9 to 23.9 (9)
- 9.9 to 16.9 (37)
- 2.9 to 9.9 (44)

□ MSOA boundary

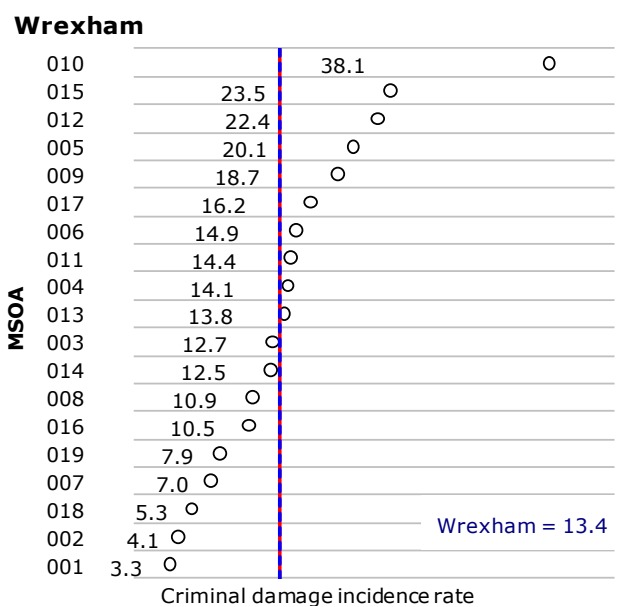
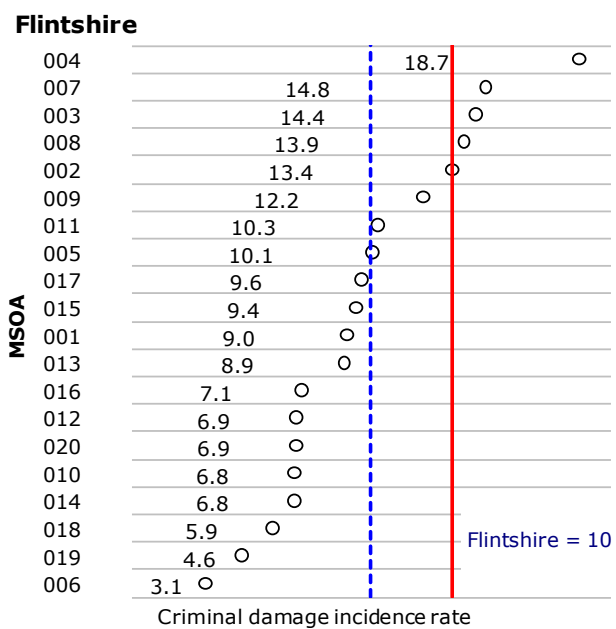
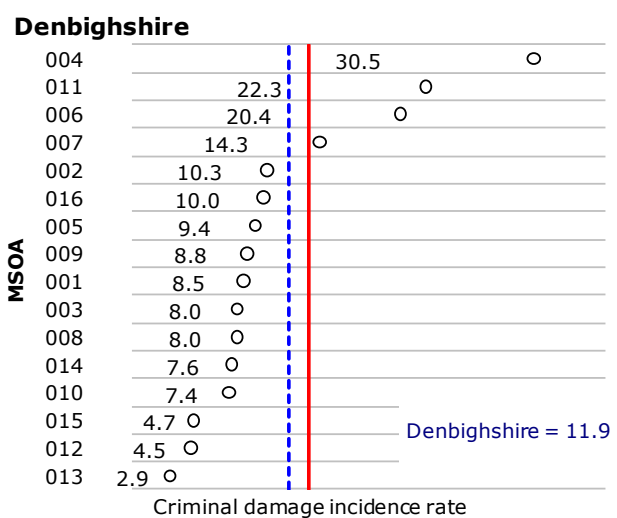
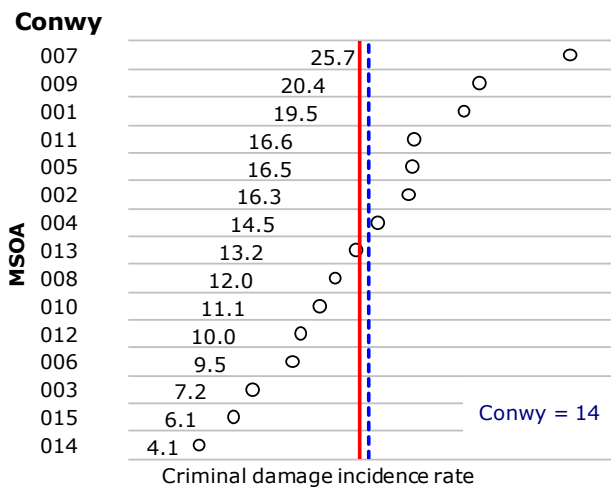
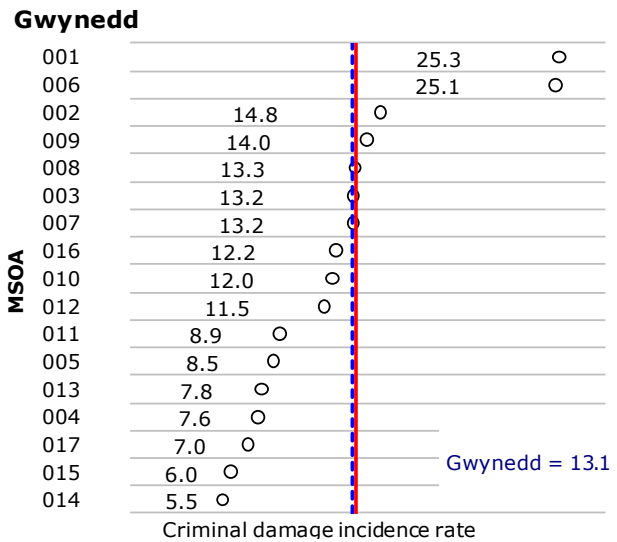
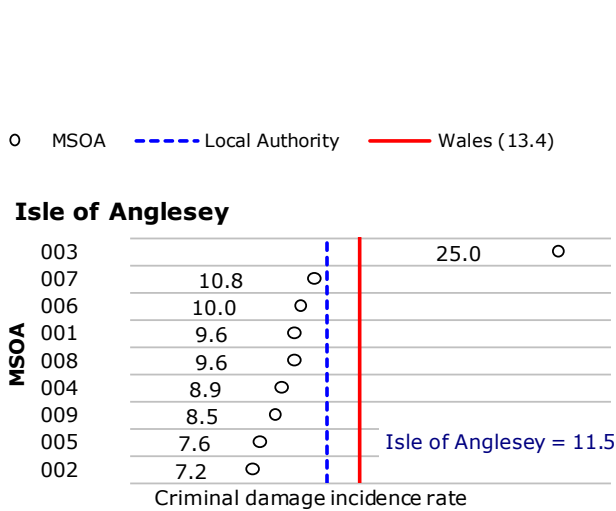
□ Local authority boundary



Produced by Public Health Wales Observatory, using MYE (ONS) & Welsh Police Forces
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The rate of incidents of criminal damage per 1,000 day time population in Betsi Cadwaladr University Health Board area, April 2008 – March 2010

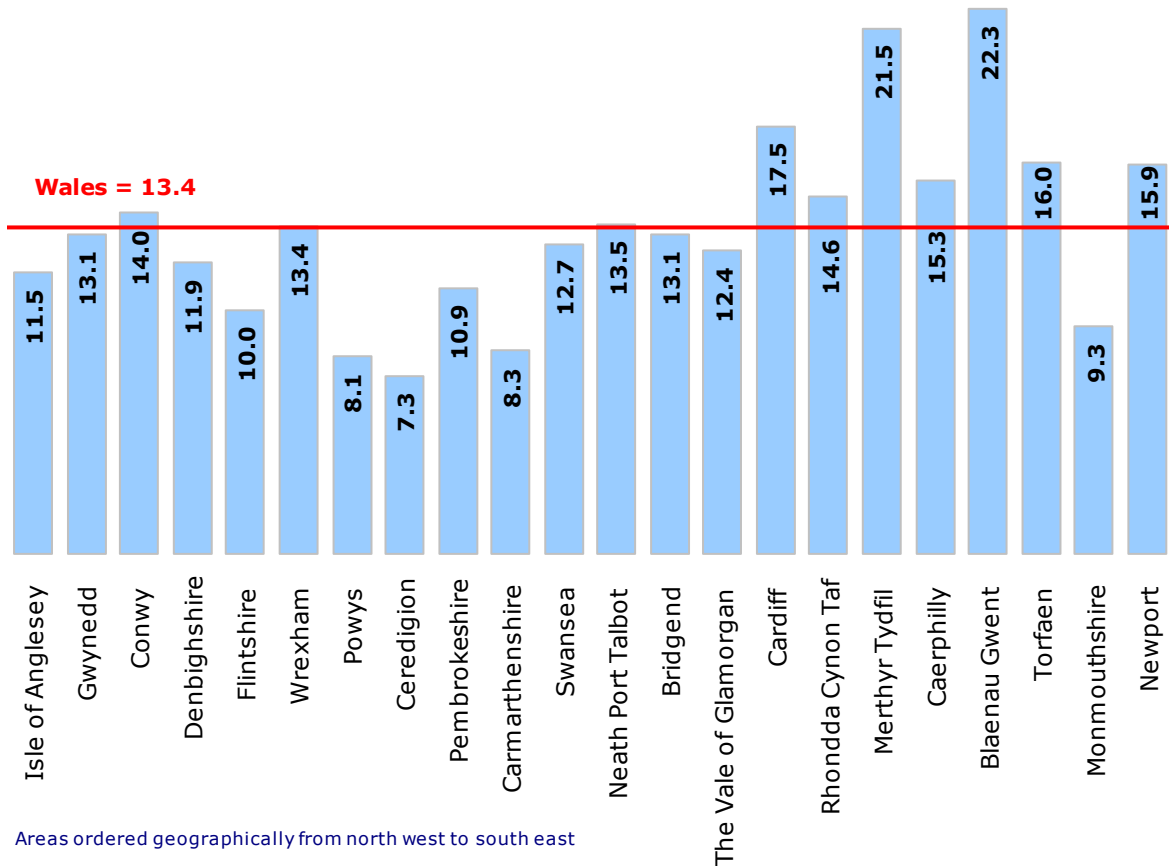
Produced by Public Health Wales Observatory, using data from Welsh Police Forces & MYE (ONS)



Local authorities

The rate of incidents of criminal damage per 1,000 day time population by local authority, April 2008 - March 2010

Produced by Public Health Wales Observatory, using data from Welsh Police Forces & ONS (MYE)



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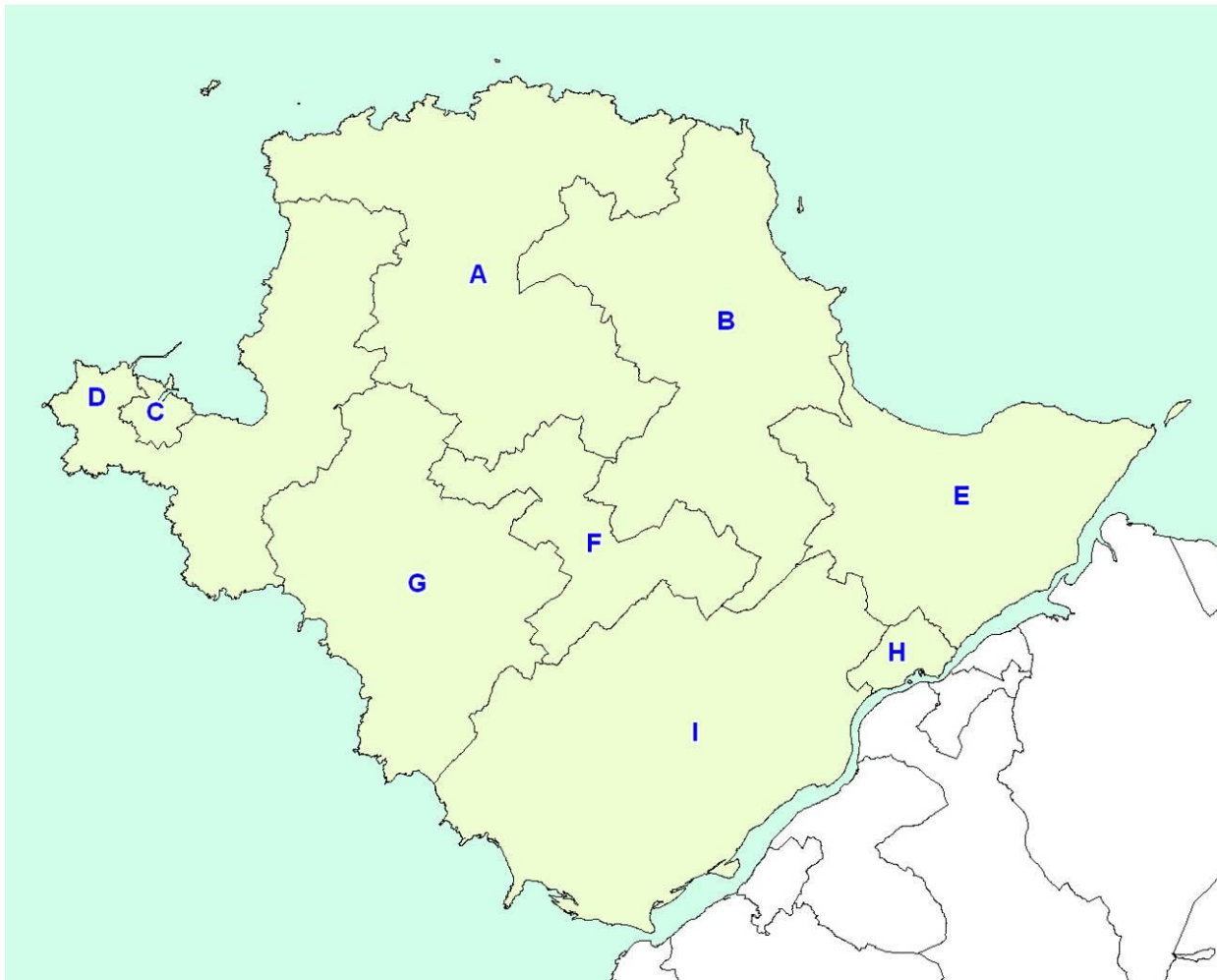
8 Appendix A: Glossary

<p>Middle Super Output Areas</p>	<p>Middle super output areas (MSOAs) were released by the Office for National Statistics (ONS) in 2004. In contrast with administrative boundaries such as electoral divisions (wards), super output areas were created for the purpose of showing statistical data.</p> <p>MSOAs have a mean population of 7,500 and a minimum of 5,000. There are 413 MSOAs in Wales and 96 MSOAs in the Betsi Cadwaladr University Health Board area. These are shown on the maps in Appendix B.</p> <p>The ONS have stated that super output area geographies will be fixed for at least 10 years. The advantage of using these statistical geographies is stability and homogeneity. However, the main drawback is that they do not conform to known administrative boundaries such as electoral divisions (wards); this makes them less amenable to the public and local government.</p>
<p>Confidence intervals</p>	<p>Confidence intervals are indications of the random variation that would be expected around a rate. Confidence intervals must be considered when assessing or interpreting a rate. The 95% confidence interval represents a range which has a 95% probability of including the underlying population rate.</p> <p>The range of the confidence interval is dependent on the size of the population from which the events came. Rates based on small populations are likely to have wider confidence intervals and rates based on large populations are likely to have narrower confidence intervals.</p>

9 Appendix B: Maps showing Middle Super Output Areas in the Betsi Cadwaladr University Health Board area

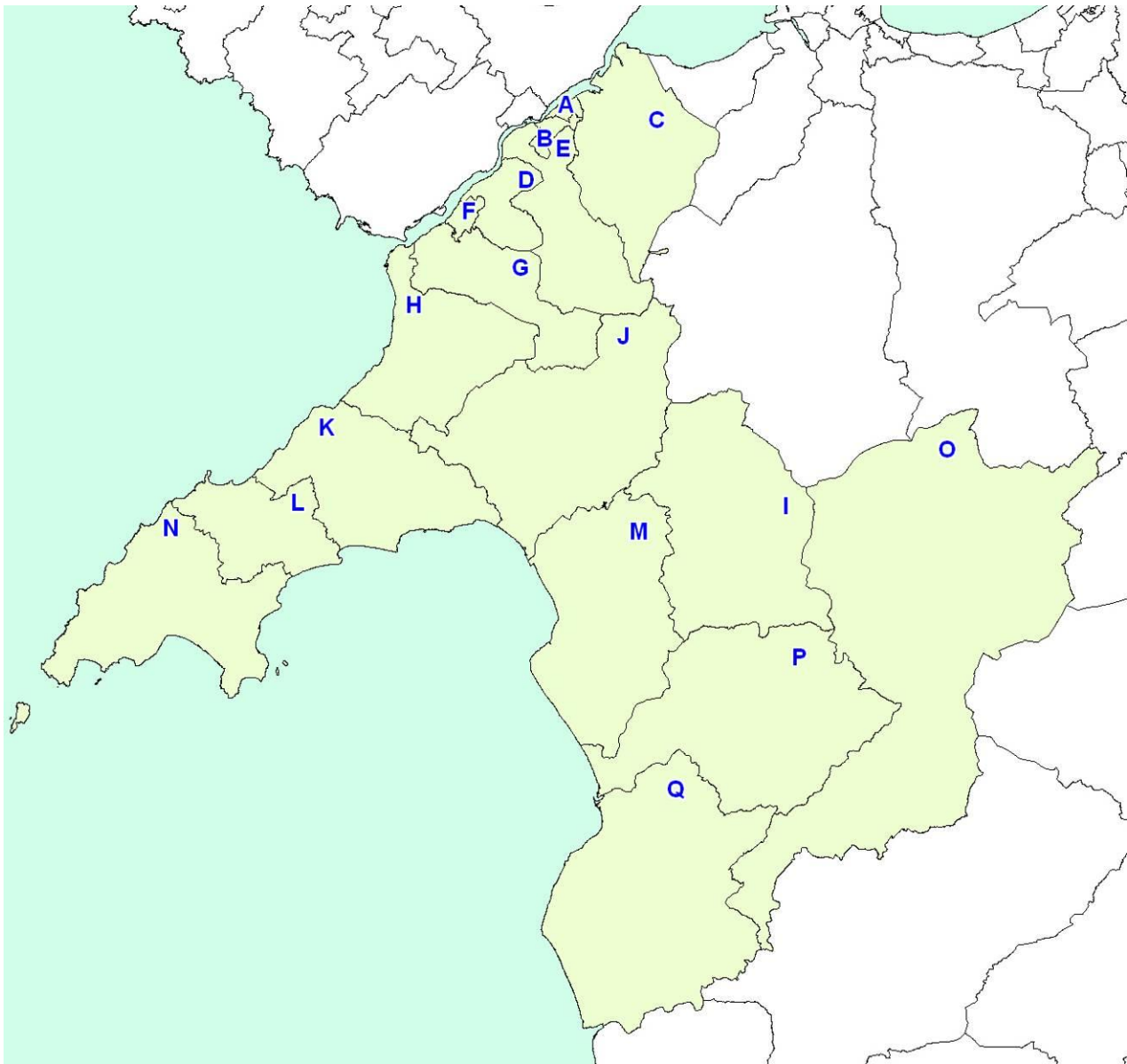
The Public Health Wales Observatory has also produced a web-based interactive map showing MSOA boundaries, with the added facility of background Ordnance Survey mapping. Follow this link: <http://www2.nphs.wales.nhs.uk/InstantAtlas/GeographyTool/atlas.html>

Isle of Anglesey



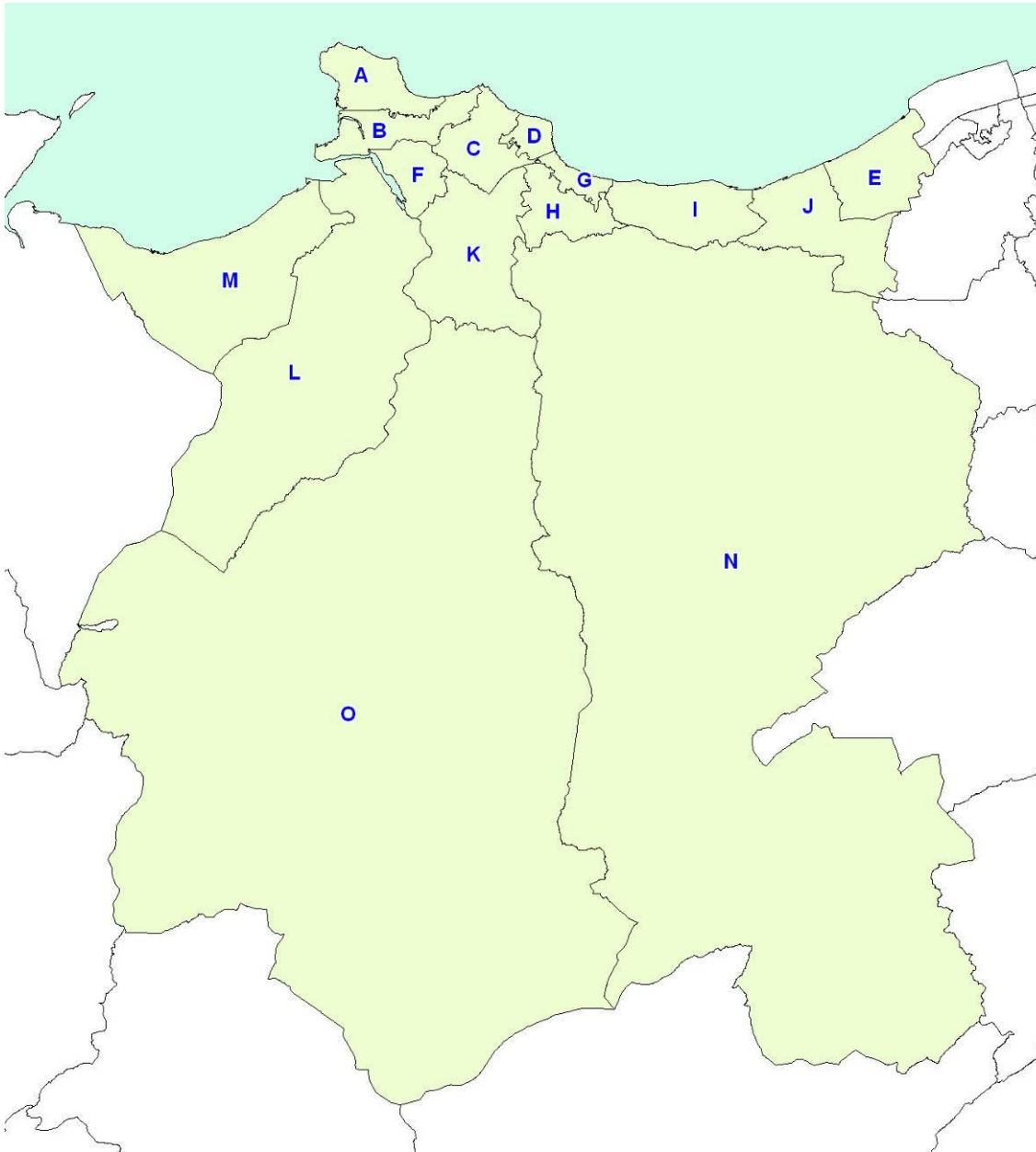
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- D Isle of Anglesey 004
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- F Isle of Anglesey 006
- G Isle of Anglesey 007
- H Isle of Anglesey 008
- I Isle of Anglesey 009

Gwynedd



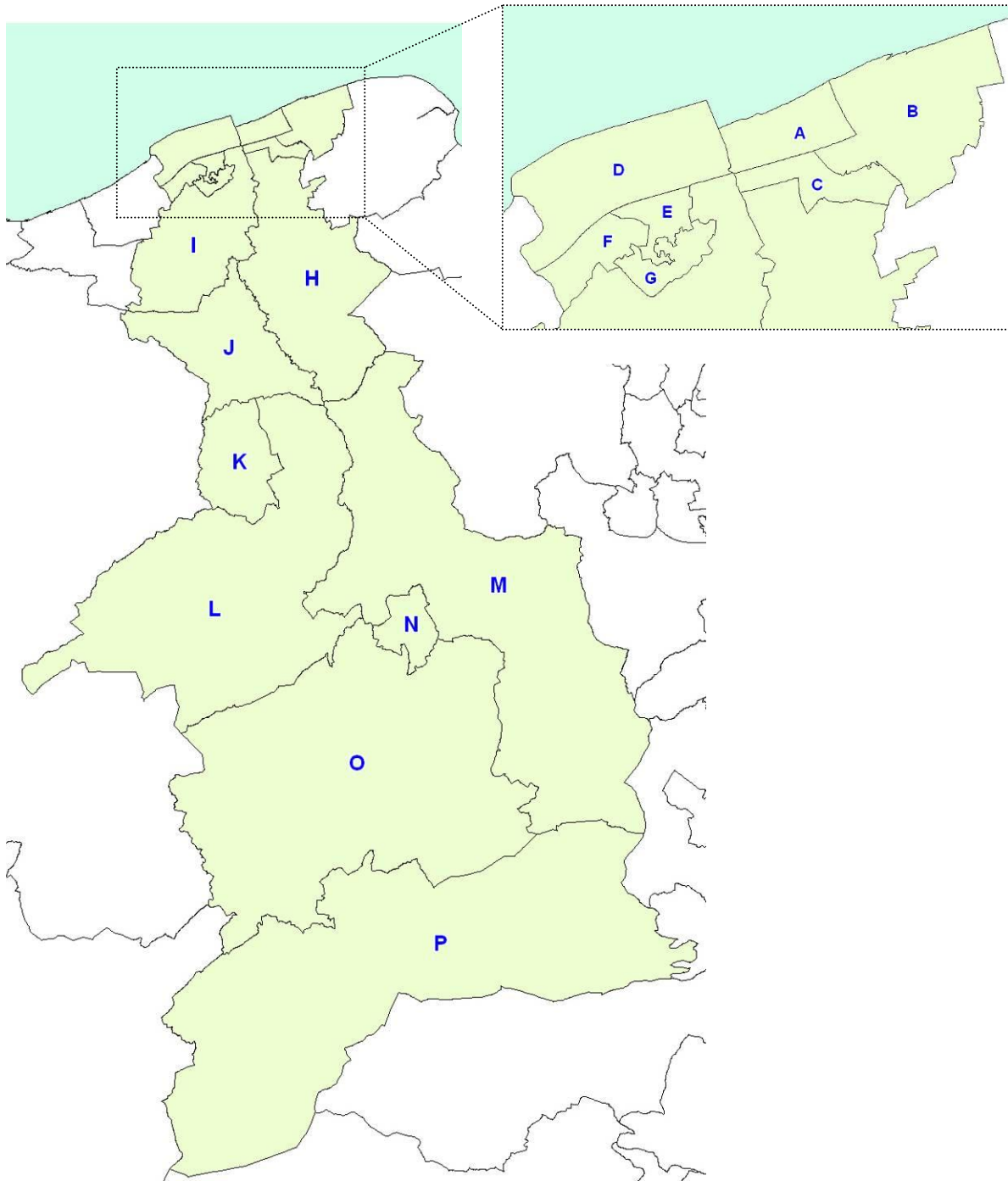
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| C | Gwynedd 003 | L | Gwynedd 012 |
| D | Gwynedd 004 | M | Gwynedd 013 |
| E | Gwynedd 005 | N | Gwynedd 014 |
| F | Gwynedd 006 | O | Gwynedd 015 |
| G | Gwynedd 007 | P | Gwynedd 016 |
| H | Gwynedd 008 | Q | Gwynedd 017 |
| I | Gwynedd 009 | | |

Conwy



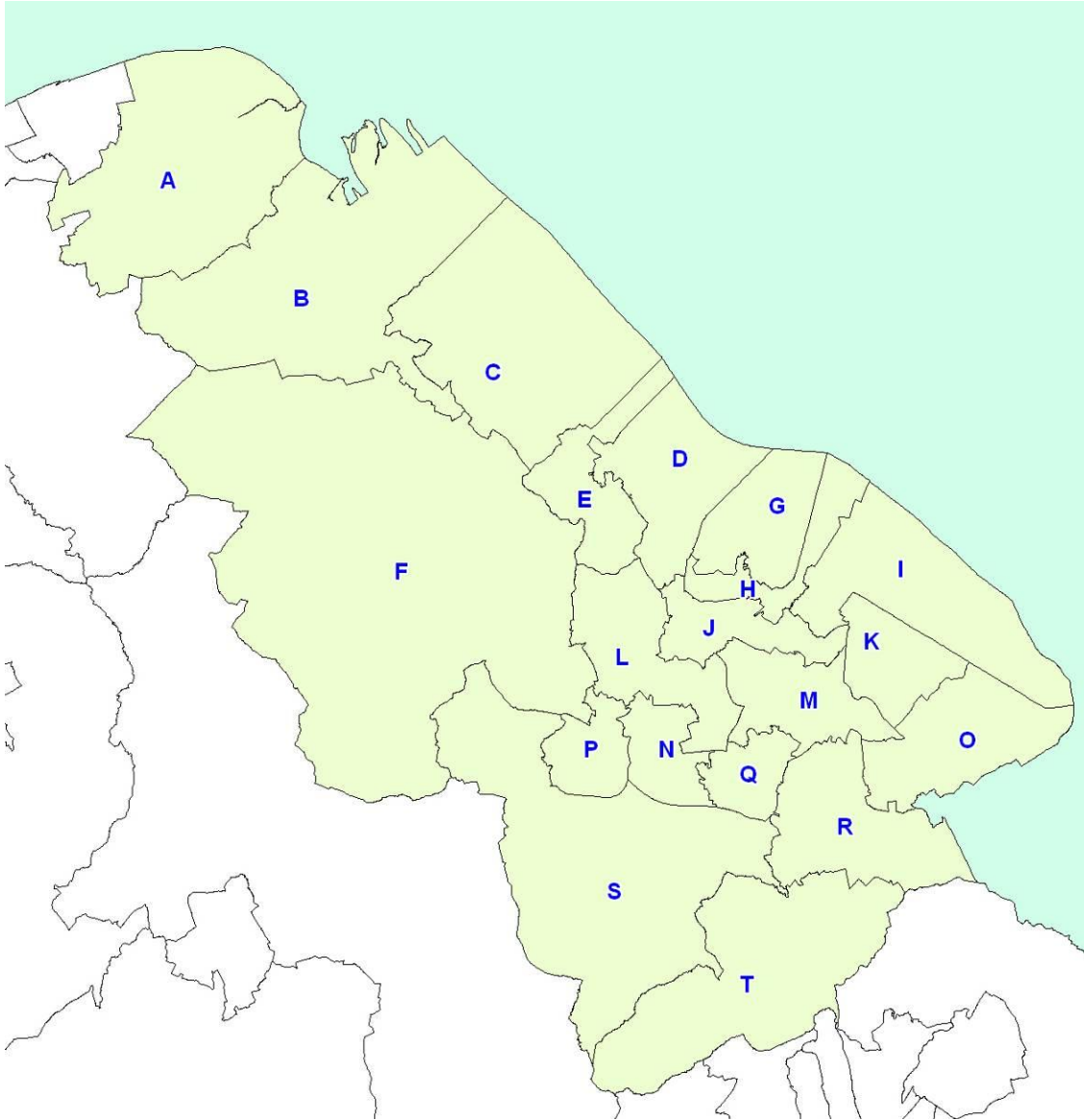
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| D | Conwy 004 | K | Conwy 011 |
| E | Conwy 005 | L | Conwy 012 |
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| G | Conwy 007 | N | Conwy 014 |
| | | O | Conwy 015 |

Denbighshire



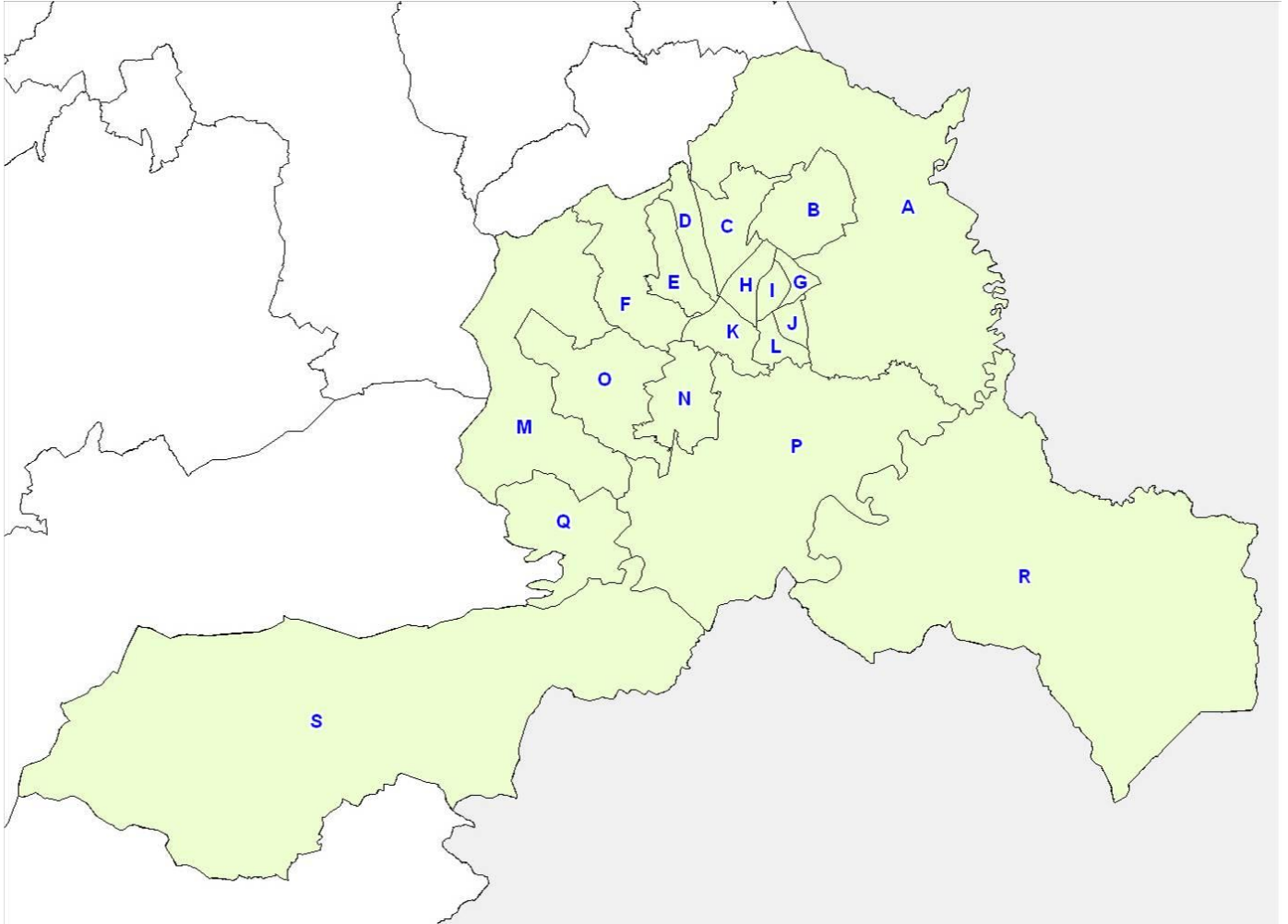
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| D | Denbighshire 004 | L | Denbighshire 012 |
| E | Denbighshire 005 | M | Denbighshire 013 |
| F | Denbighshire 006 | N | Denbighshire 014 |
| G | Denbighshire 007 | O | Denbighshire 015 |
| H | Denbighshire 008 | P | Denbighshire 016 |

Flintshire



- | | | | |
|---|----------------|---|----------------|
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| B | Flintshire 002 | L | Flintshire 012 |
| C | Flintshire 003 | M | Flintshire 013 |
| D | Flintshire 004 | N | Flintshire 014 |
| E | Flintshire 005 | O | Flintshire 015 |
| F | Flintshire 006 | P | Flintshire 016 |
| G | Flintshire 007 | Q | Flintshire 017 |
| H | Flintshire 008 | R | Flintshire 018 |
| I | Flintshire 009 | S | Flintshire 019 |
| J | Flintshire 010 | T | Flintshire 020 |

Wrexham



- | | | | |
|---|-------------|---|-------------|
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| C | Wrexham 003 | M | Wrexham 013 |
| D | Wrexham 004 | N | Wrexham 014 |
| E | Wrexham 005 | O | Wrexham 015 |
| F | Wrexham 006 | P | Wrexham 016 |
| G | Wrexham 007 | Q | Wrexham 017 |
| H | Wrexham 008 | R | Wrexham 018 |
| I | Wrexham 009 | S | Wrexham 019 |
| J | Wrexham 010 | | |