

Regeneration Case Study Llangeinor, Nant Garw

In 2002, Bridgend County Borough Council decided to undertake a Health Impact Assessment (HIA) on a proposed housing redevelopment in Llangeinor, a deprived former coalmining community in the Garw Valley north of Bridgend. The village had a Council-owned estate comprising of a mixture of traditional, post-war and semi-detached housing, and a more problematic 1970s infill development of higher density, non-traditional housing. The condition of its housing stock, together with its geographically-isolated location and limited employment opportunities locally had resulted in a range of problems. The estate was identified as a priority for action to regenerate the area and the community.

The main output of the HIA was seen as a report to inform and guide the Council on the potential health impacts of developments, and to identify opportunities that could be taken to protect and/or improve people's health.

What is Health Impact Assessment?

In its broadest terms, Health Impact Assessment is a means of ensuring that the health effects, or potential effects, of any policies, programmes and projects are considered in the process of decision-making.

Partners Involved

A contract to support the pilot project was awarded to the School of Social Sciences at Cardiff University. The project was steered by a partnership involving representatives of the Council, Welsh Assembly Government officials, the Local Health Group, a housing association, a local councillor, a local community development organisation and community representatives. The project was supported as part of the Welsh Assembly Government's programme to develop the use of HIAs in Wales.

Summary of Potential Health Impacts

The HIA was used to identify a variety of potential health impacts relating to the housing regeneration proposal, some of which are outlined below.

The Physical Environment

Changes needed to be made to housing conditions to tackle the number of physical and mental health problems linked to poor housing (particularly respiratory problems). Providing warm and dry houses to local residents could reduce the symptoms of these health problems, reduce the uptake of health services and prescriptions, and be a factor in ensuring that elderly people could stay in their own homes for as long as possible.

Design issues with some houses presented health risks, such as injury, particularly to older people and children, and threatened people's sense of safety and privacy. Designing new, safe housing could enable people to live for longer periods of time in their own homes, and design features could be incorporated to also meet a range of future health needs. The beautiful countryside surrounding Llangeinor was universally appreciated by residents, and new housing designs could aim to take full advantage of these uplifting views.

Housing regeneration would also need to focus on existing housing stock, so as not to ignore the safety needs of other people in the village, and particularly the elderly living in the older local authority houses. The layout of the 1970s council housing contributed to the deteriorated appearance of the village, and some sites were felt to threaten the health and safety of local residents. New housing developments could provide an opportunity to create a safe and attractive neighbourhood, but it was stressed that these benefits could be lost if local people were not involved in the planning process.

Noise, particularly from people gathering outside at night, was a persistent source of anxiety for some people in Llangeinor. New buildings could incorporate design features to protect occupants from external noise, and neighbourhood planning was noted as a potential means of diverting unacceptable social noise away from residents.

Moving residents into temporary accommodation during housing redevelopment could have a negative effect on psychological wellbeing, especially if they were placed outside of Llangeinor. Lack of appropriate communication with local people before and during housing redevelopment could also increase levels of stress.



Lifestyle and Family Circumstances

Eliminating empty properties in the main residential area could reduce the number of people endangering themselves in the process of breaking and entering the buildings. However, demolition with no positive plans for using the empty land could simply encourage unsafe activities that were already practised by some young people. If local people, particularly young people, were involved in the design phase of new developments, this could help to ensure a sense of public ownership. Creating areas for alternative recreation could encourage people to exchange a risky activity for a healthy one.

New developments could incorporate plans that encouraged walking and cycling, and explore ways of eliminating physical and social hazards. They could also incorporate plans to provide appropriate, accessible and safe play parks.

Attachment to both immediate and extended family was strong in Llangeinor, and demolition of properties risked breaking up these networks if some people were forced to move out of the area. New housing could be a factor in keeping people in Llangeinor (particularly younger people with marketable skills) and in sustaining existing extended family networks.

Creating energy-efficient homes could also enable people to obtain affordable warmth in their homes, whilst increasing household income to spend on other goods.



The Social Environment & Public Services

Housing allocation policies were a source of distress and division in Llangeinor. If building regeneration focused entirely on the rebuilding of problem houses, it could cause resentment and division in the community. Demolition of properties with no replacement buildings could also mean that key people involved in local social and economic regeneration would move out of the village. Temporary relocation of residents outside the village could jeopardise existing social networks and the momentum for change that had been developing within Llangeinor. Housing regeneration could build on existing community activity to develop and improve relationships between local people and the council.

Building options likely to lead to population loss would threaten the viability of the primary school, and therefore of nursery provision. Parent and toddler provision could be affected if key volunteers were relocated as a result of housing decisions. It was suggested that the local primary care centre could be included in plans to improve the appearance of Llangeinor.

There was a general perception that Llangeinor's deterioration in appearance was due, in part, to lack of attention by the local council. Ineffective communication links between local people and the housing department had created anxiety concerning the future of houses in Llangeinor. Housing regeneration provided an opportunity to develop a practical means of involving local people in planning their environment and rectifying this issue.

Impact on decision-making

One particular strength of this HIA was that it involved the local community. All steering group and community meetings were held locally. The local representatives were vocal at the steering group meetings and did not appear to be intimidated by the largely 'professional' representation there.

An immediate spin-off from the community meeting was that it inspired the development of a tenants' association, which held its first meeting shortly afterwards.

The involvement of local people in this assessment and the dialogue it created immediately started to address the issue of communications and partnership with the Council, and it provided a foundation from which relationships could further develop.

Learning points

Contracting with the University to assess the potential health impacts and to facilitate the HIA had clear advantages in terms of obtaining independent expertise, and providing a dedicated resource that could be allocated to this task. However, problems can arise in the interface between the research component and its dissemination into the decision-making arena, and a lack of familiarity with local authority mechanisms for decision-making and development made this difficult.

A copy of the full HIA report can be accessed at:

<http://www.wales.nhs.uk/sites3/docmetadata.cfm?orgid=522&id=44676>

and other relevant case studies can be found at: <http://www.wales.nhs.uk/sites3/page.cfm?orgid=522&pid=10108>