

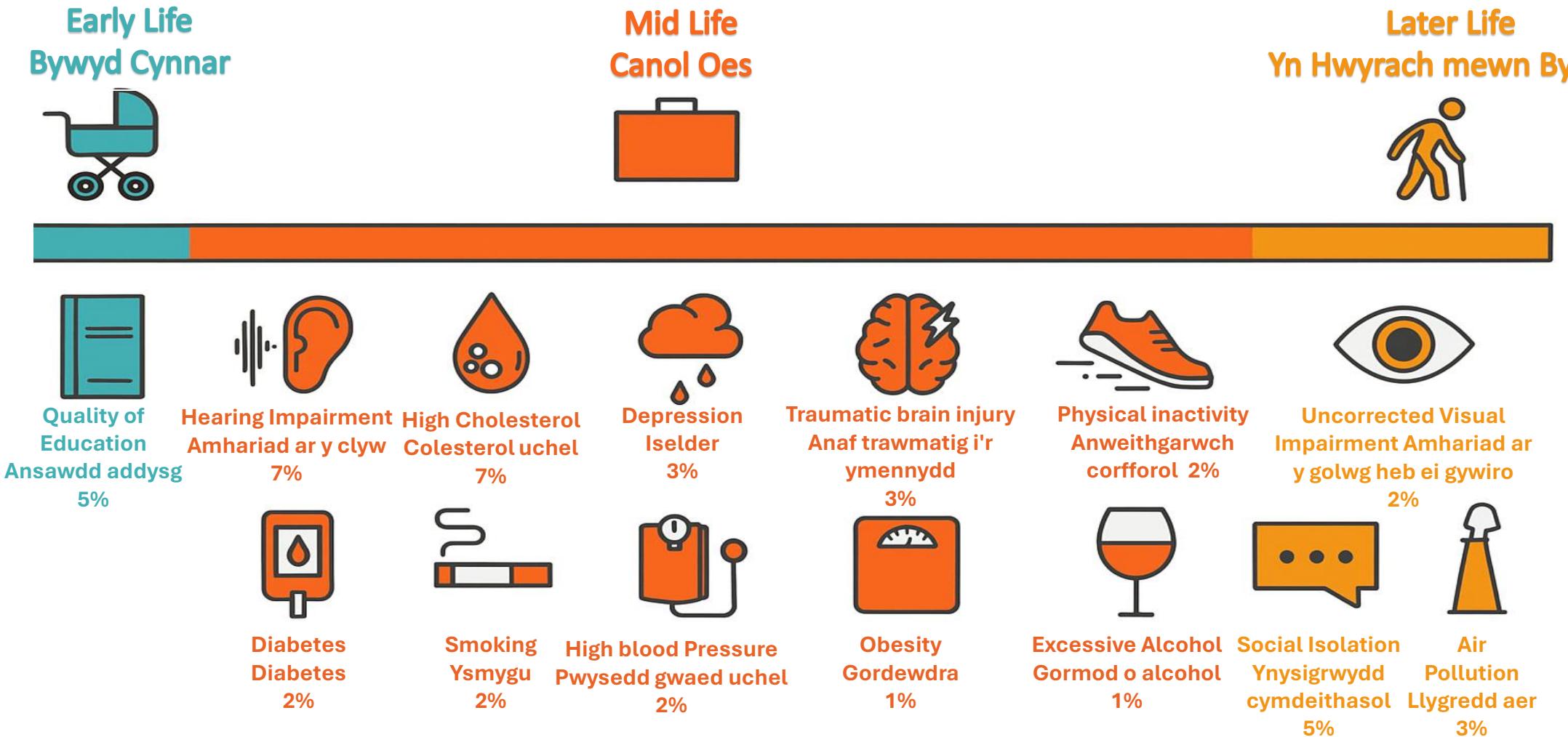


Targeting Prevention

Targedu Atal

Sticky issues in community health promotion and dementia
Materion anodd wrth hyrwyddo iechyd cymunedol a dementia

Factors Linked to Dementia Risk / Ffatorau sy'n gysylltiedig â datblygu Risg o Dementia



The percentage figure refers to the reduction in worldwide cases if this risk factor were eliminated. In the UK a 1% reduction = 10,000 people

Mae'r ffigur canrannol yn cyfeirio at y gostyngiad mewn achosion ledled y byd pe bai'r ffactor risg hwn yn cael ei ddileu. Yn y DU gostyngiad o 1% = 10,000 o bobl

Adapted from the Lancet standing commission on dementia prevention, intervention and care, 2024.

Addaswyd o gomisiwn sefydlog y Lancet ar atal, ymyrryd a gofal dementia, 2024.



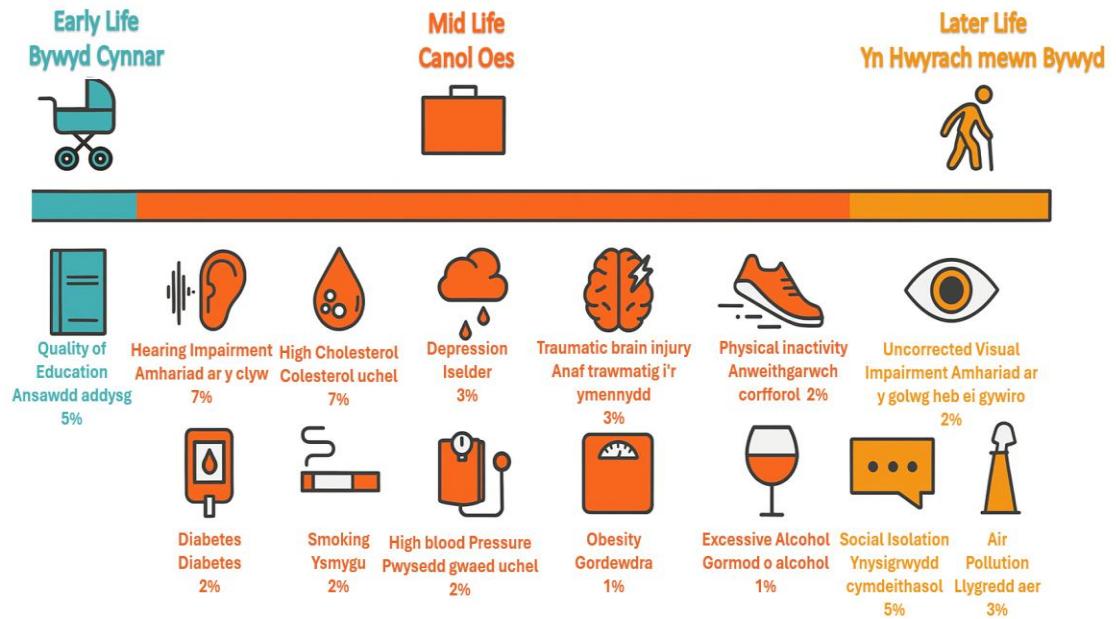
Preventing the seemingly inevitable across Welsh Communities

Atal yr hyn sy'n ymddangos yn anochel ar draws Cymunedau Cymru

- **Rising prevalence.** Cyffredinrwydd cynyddol.
- **Commercial determinants an unstoppable force?** Penderfynyddion masnachol yn rym na ellir ei atal?
 - **Which prevention methods are priority?** Pa ddulliau atal sy'n flaenoriaeth?
 - **Which are evidence based?** Pa rai sy'n seiliedig ar dystiolaeth?
 - **Are they acceptable?** Ydyn nhw'n dderbyniol?
 - **Are they deliverable?** Ydyn nhw'n dargedau i'w cyflawni?
- **Targeting Prevention:**
Targedu Atal:
 - **Which communities?** Pa gymunedau?
 - **Which ages?** Pa oedrannau?
 - **Which level of prevention?** Pa lefel o atal?



Factors Linked to Dementia Risk / Ffatorau sy'n gysylltiedig â datblygu Risg o Dementia



ALZHEIMER'S
FOR A
CURE
RESEARCH UK

Registered charity numbers - 1077089 & SC042474

Getting your attention on prevention Denu eich sylw at atal

Healthy Foundations aims to capture the complex dynamics between:

An individual's personal motivation to live healthily (the motivations dimension), and

How these vary within the context of their social and material circumstances (the environmental dimension)

Nod Sylfeini Iach yw dal y deinamig cymhleth rhwng:

Cymhelliant personol unigolyn i fyw'n iach (y dimensiwn cymhellion), a

Sut mae'r rhain yn amrywio yng nghyd-destun eu hamgylchiadau cymdeithasol a materol (y dimensiwn amgylcheddol)

The Healthy Foundations Life-stage Segmentation

Segmentation is a model developed by the Department of Health in England to understand how people's motivations, social circumstances, and life stages influence their health behaviours.

It was one of the biggest demonstrations of social marketing so far in the UK.

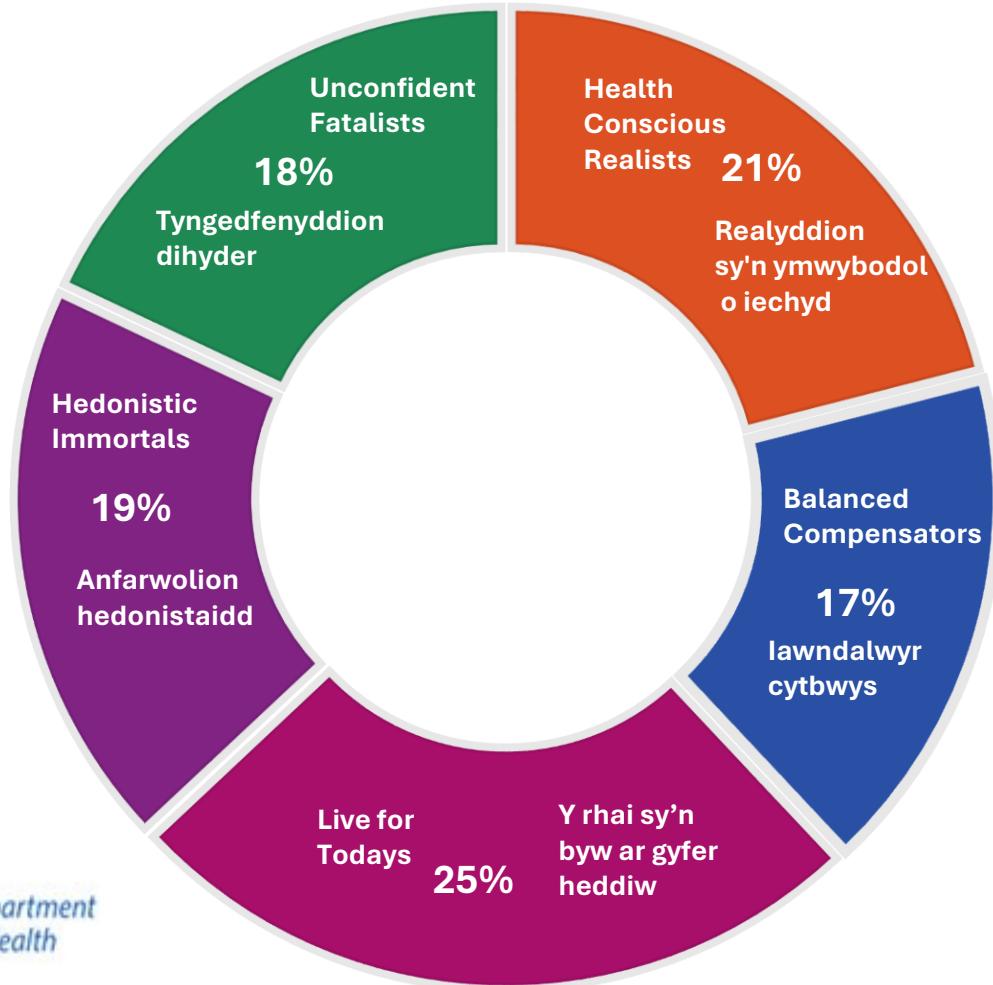
It categorizes the population into distinct segments based on these factors, allowing for more targeted and effective public health interventions.

Mae'r adroddiad ar **Segmentu Cyfnodau Bywyd Sylfeini Iach** (Health Foundations Life-stage Segmentation) yn fodel a ddatblygwyd gan yr Adran Iechyd Lloegr i ddeall sut mae cymhellion, amgylchiadau cymdeithasol a chyfnodau bywyd pobl yn dylanwadu ar eu hymddygiadau iechyd.

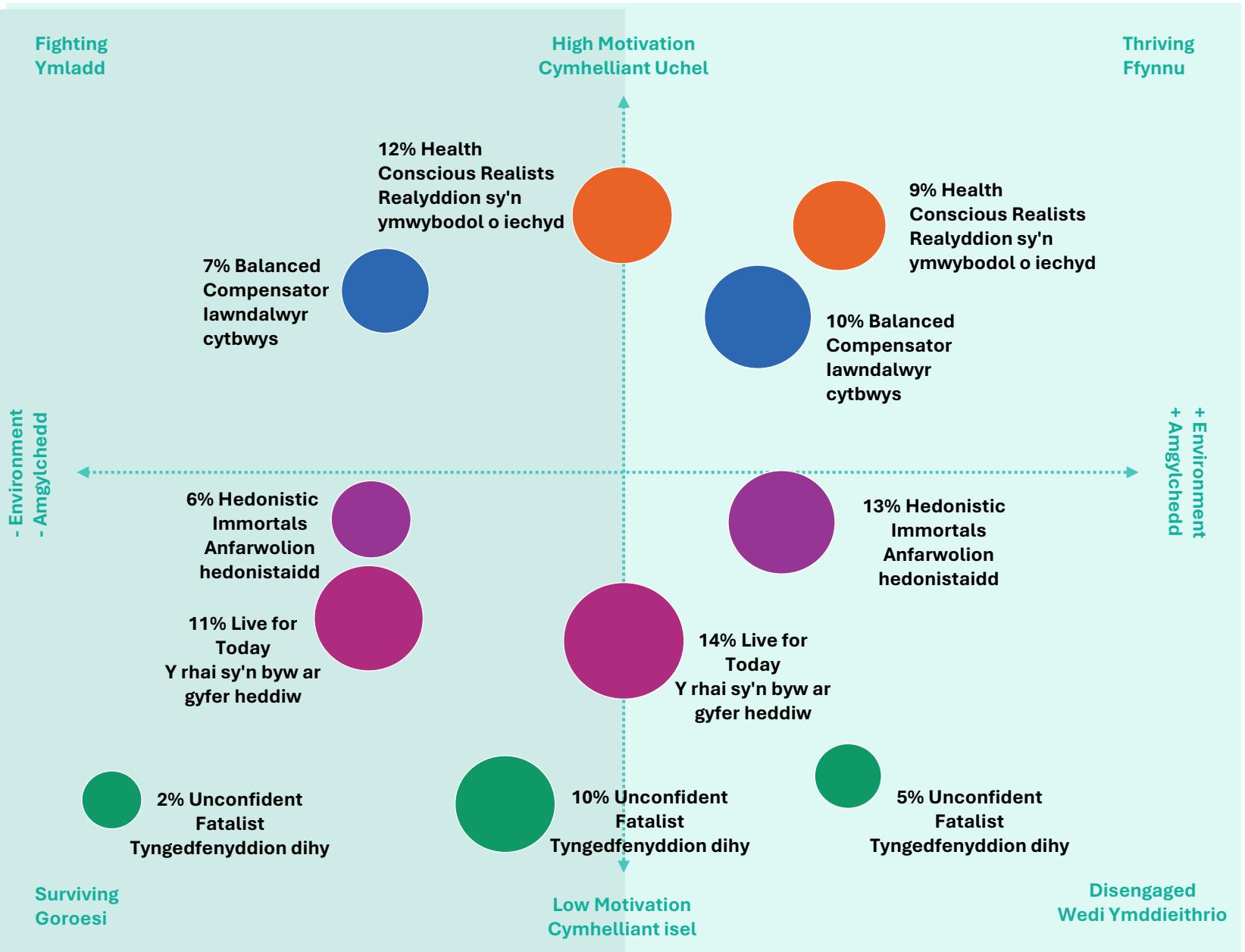
Roedd yn un o'r esboniadau mwyaf o farchnata cymdeithasol hyd yn hyn yn y DU.

Mae'n categoriiddio'r boblogaeth yn segmentau penodol yn seiliedig ar y ffactorau hyn, sy'n caniatáu ar gyfer ymyriadau iechyd y cyhoedd sydd wedi'u targedu'n fwy penodol ac effeithiol.

Breakdown of Motivational Segments
Dadansoddiad o segmentau ysgogol:



	Health conscious realists Realyddion sy'n ymwybodol o iechyd	Balanced Compensators lawnddalwyr cytbwys	Live for Today Y rhai sy'n byw ar gyfer heddiw	Hedonistic Immortals Anfarwolian hedonistaidd	Unconfident Fatalists Tyngedfenyddion dihyder
Value health Gwerthfawrogi lechyd	High Uchel	High Uchel	Med Can	Low Isel	Med Can
Control over health Rheolaeth dros iechyd	High Uchel	High Uchel	Med Can	Med Can	Low Isel
Healthy lifestyle is easy / enjoyable Mae ffordd iach o fyw yn hawdd / yn bleserus	High Uchel	High Uchel	Low Isel	Med Can	Low Isel
Health Fatalism Tynghediaeth iechyd	Low Isel	Med Can	High Uchel	Low Isel	High Uchel
Risk Taking Cymryd risgiau	Low Isel	High Uchel	Med Can	High Uchel	Med Can
Short Termism Tymor byr	Low Isel	Med Can	High Uchel	Low Isel	High Uchel
Self Esteem Hunan-barch	High Uchel	High Uchel	Med Can	High Uchel	Low Isel



Dividing the motivation segments by IMD (indices of multiple deprivation)

Rhannu'r segmentau cymhelliant yn ôl IMD (mynegeion amddfadedd lluosog)

Healthy Foundations Source Material

Deunydd Ffynhonnell Sylfeini lach



https://www.thensmc.com/sites/default/files/301846_HFLS%20Report%20No1_ACC.pdf

The Healthy Foundations Lifestages Segmentation

Segmentu cyfnodau bywyd sylfeini iach

Research report No. 1: Creating the segmentation using a quantitative survey of the general population of England

Adroddiad ymchwil Rhif 1: Creu'r segmentu gan ddefnyddio arolwg meintiol o boblogaeth gyffredinol Lloegr

https://thensmc.com/sites/default/files/HFLS%20Report%20No2_ACC.pdf

The Healthy Foundations Lifestages Segmentation

Segmentu cyfnodau bywyd sylfeini iach

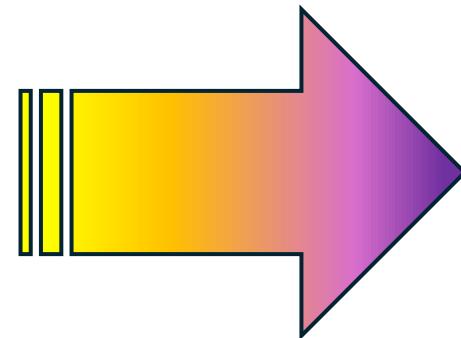
Research report No. 2: The qualitative analysis of the motivation segments

Adroddiad ymchwil Rhif 2: Y dadansoddiad ansoddol o'r segmentau cymhelliant

Some major shift in beliefs and perspective are needed

Mae angen newid mawr mewn credoau a safbwytiau

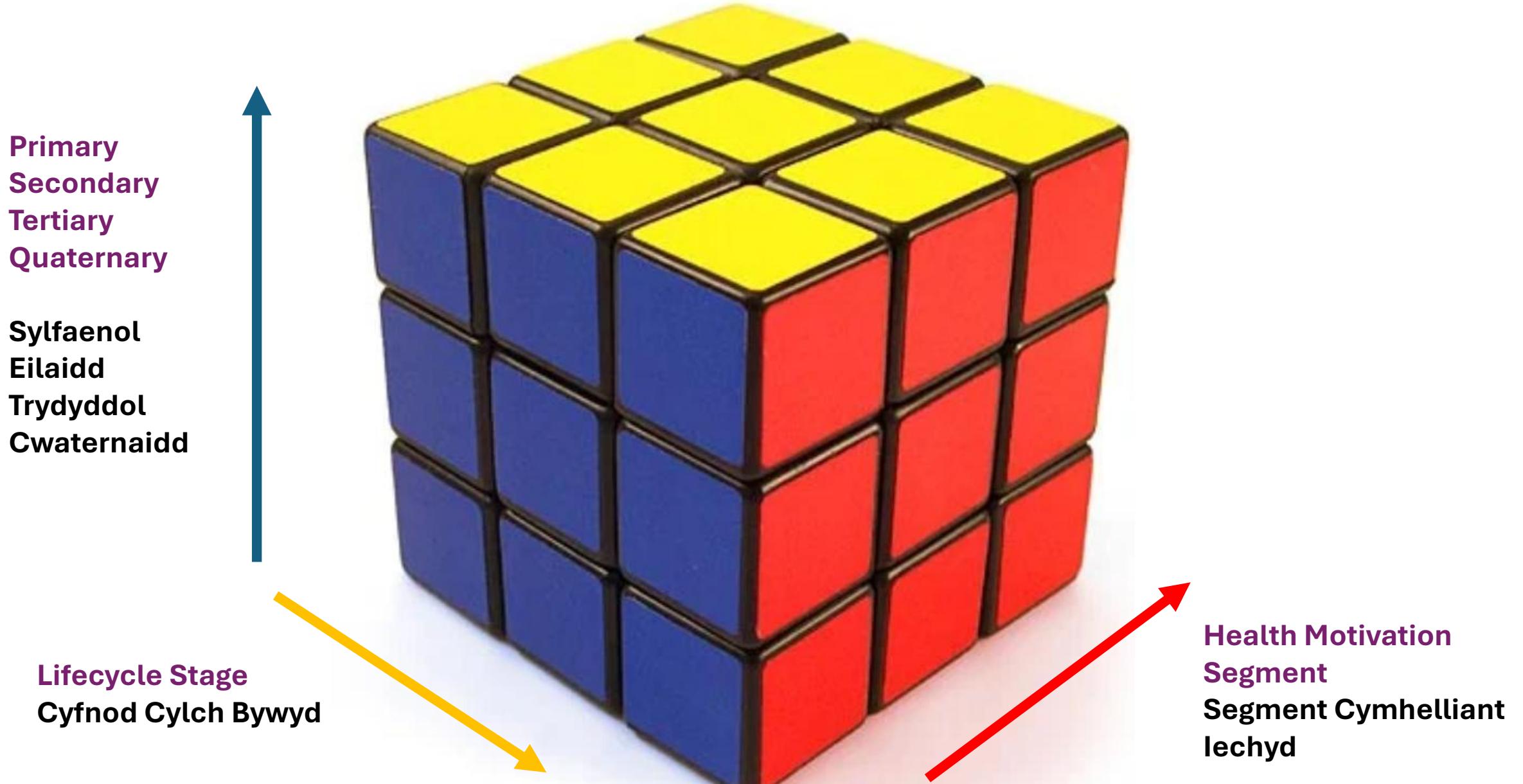
- Fatalistic
Tyngedfenyddol
- Health actions a struggle or punishment
Camau iechyd yn frwydr neu'n gosb
- Fear of dementia
Ofn dementia
- Living for today
Y rhai sy'n byw ar gyfer heddiw
- Not valuing health or self
Ddim yn gwerthfawrogi iechyd na'ch hun



- Empowered and Coherent
Grymus a Chysylltiedig
- Working towards wellbeing fun and rewarding
Mae gweithio tuag at lesiant yn hwyl ac yn werth chweil
- Dementia as part of life and living
Dementia fel rhan o fywyd a byw
- Investing in the future
Buddsoddi yn y dyfodol
- You're OK and You Can !! (share the social love)
Rydych chi'n lawn a Gallwch Chi!!
(rhannwch y cariad cymdeithasol)

In Summary: The dementia prevention challenge at community level is inevitably complex

I Gwynhod: Mae'r her atal dementia ar lefel gymunedol yn anochel yn gymhleth





Dementia Prevention: Let's make it sticky !
Atal Dementia: Pethau i'w Cofio!



Attention Please Sylw

YOU can control your FATE

The future is already here

Inaction is counter-productive

Surf the challenge

**Treat prevention like your Health and Wellbeing
Piggy Bank**

- Policy Shapers
- Educators
- Brief Interventionists
- Associated wellbeing programmes
- Individuals' families' communities
- Carers
- **EVERYONE**
- Llunwyr Polisi
- Addysgwyr
- Ymyraethwyr Cyfnodau Byr
- Rhagleni llesiant cysylltiedig
- Cymunedau teuluoedd unigolion
- Gofalwyr
- PAWB

Gallwch CHI reoli eich TYNGED

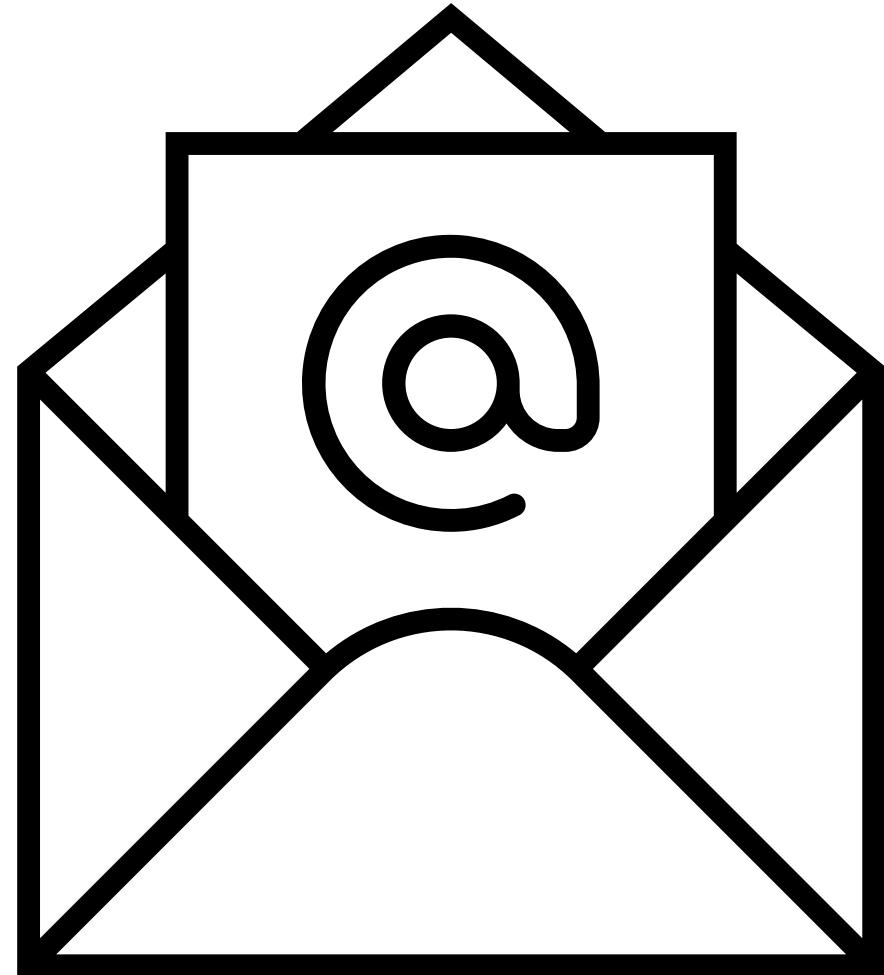
Mae'r dyfodol eisoes yma

Mae diffyg gweithredu yn wrthgynhyrchiol

Wynebu'r her

Trin atal fel eich Blwch Cynillion lechyd a Llesiant

For more information
please email:
Am ragor o wybodaeth
anfonwch e-bost at:



PHW.ImprovementCymruDementia@wales.nhs.uk

Supplementary Slides

Sleidiau Atodol

For added texture and detail

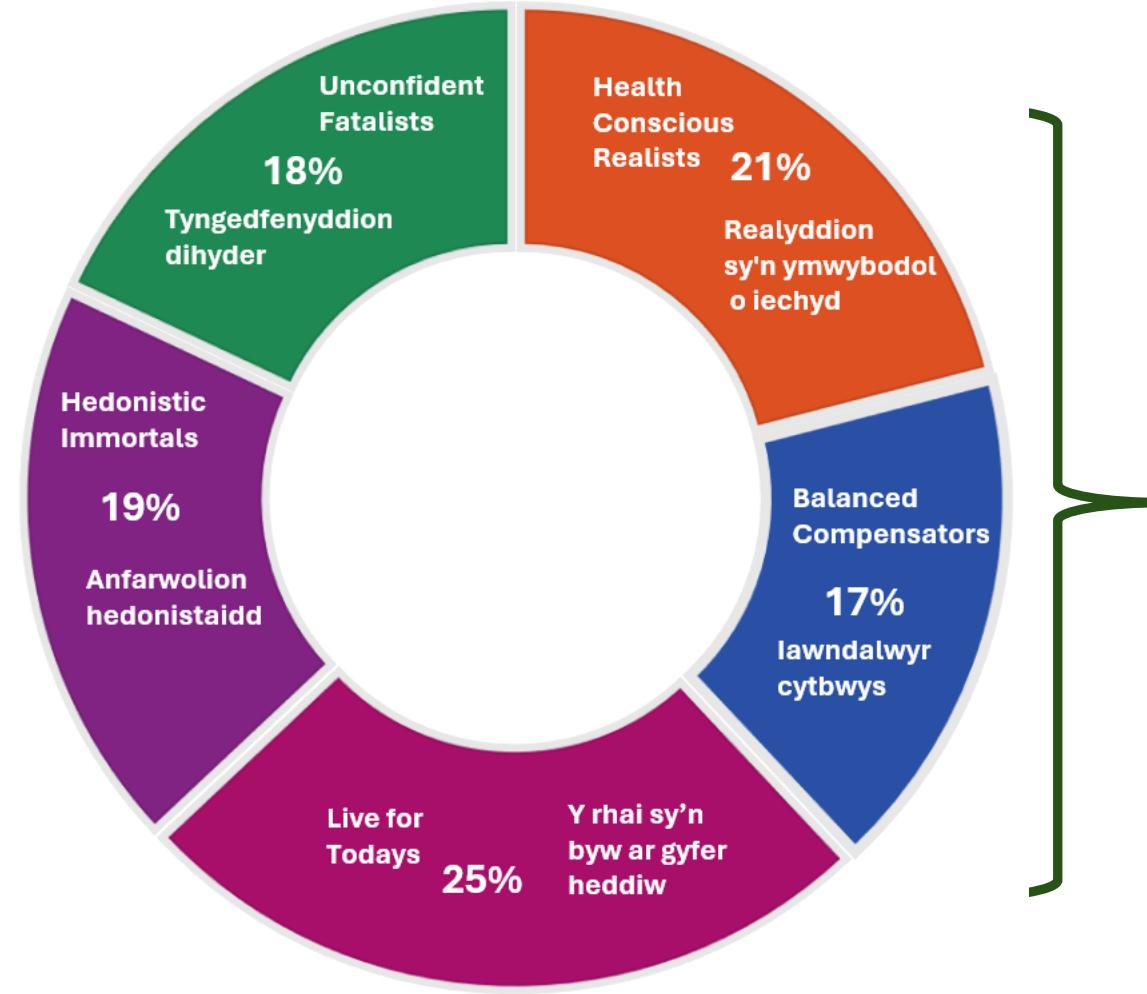
Am wead a manylion ychwanegol

There is now evidence that a legacy of the pandemic has been a further stretching of these segments

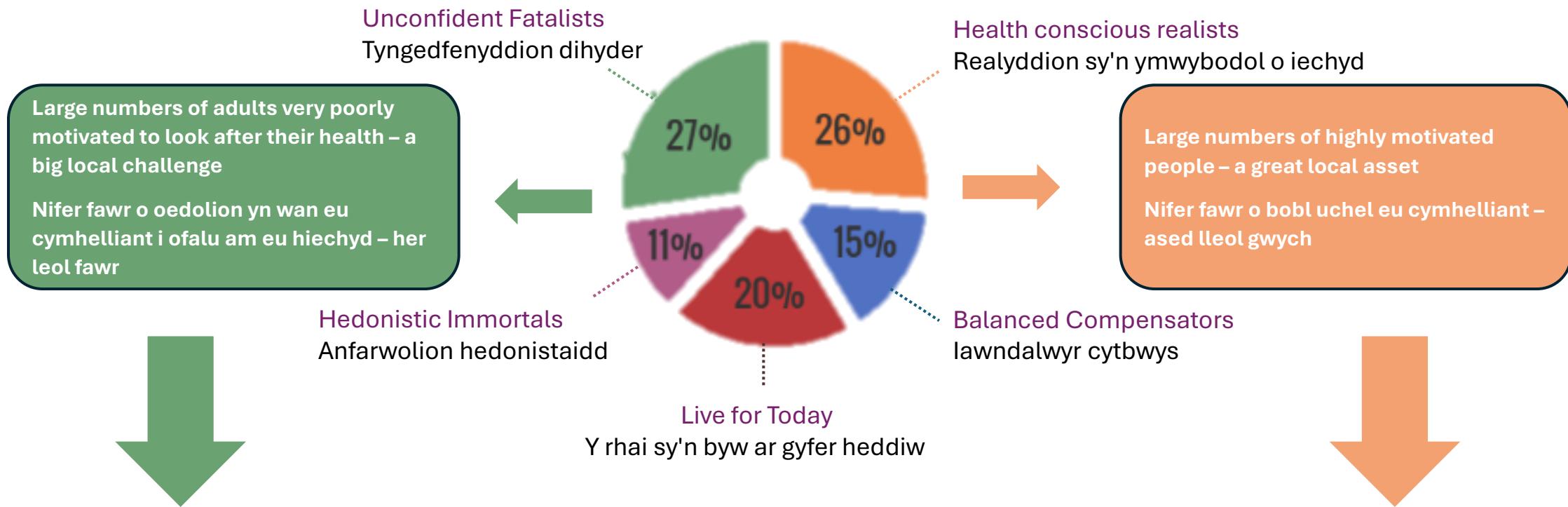
Mae tystiolaeth bellach bod gwaddol y pandemig wedi ymestyn y segmentau hyn ymhellach.

- Personal freedom
Rhyddid personol
- Big brother
Brawd mawr
- Common sense v science
Synnwyr cyffredin yn erbyn gwyddoniaeth
- Rebellion and sedition for seditions sake
Gwrthryfel ac annog terfysgaeth dim ond er mwyn terfysgaeth

Infodemic
Inffodemig



- Those with health agency able to recognize and rebuff incongruent new information – already doing this in relation to other issues (eg food)
Y rhai sydd â rheolaeth iechyd yn gallu adnabod a gwrthod gwybodaeth newydd anghydnaus – sydd eisoes yn gwneud hyn mewn perthynas â materion eraill (e.e. bwyd)



What is Healthy Foundations?

Healthy Foundations is a segmentation model originally developed for the Department of Health to provide insights for social marketing to improve the effectiveness of health policy, campaigns and interventions. It is built on the three themes of motivations, environment and life stage. It identifies five distinct segments which differentiate people based on health attitudes and beliefs.

So what?

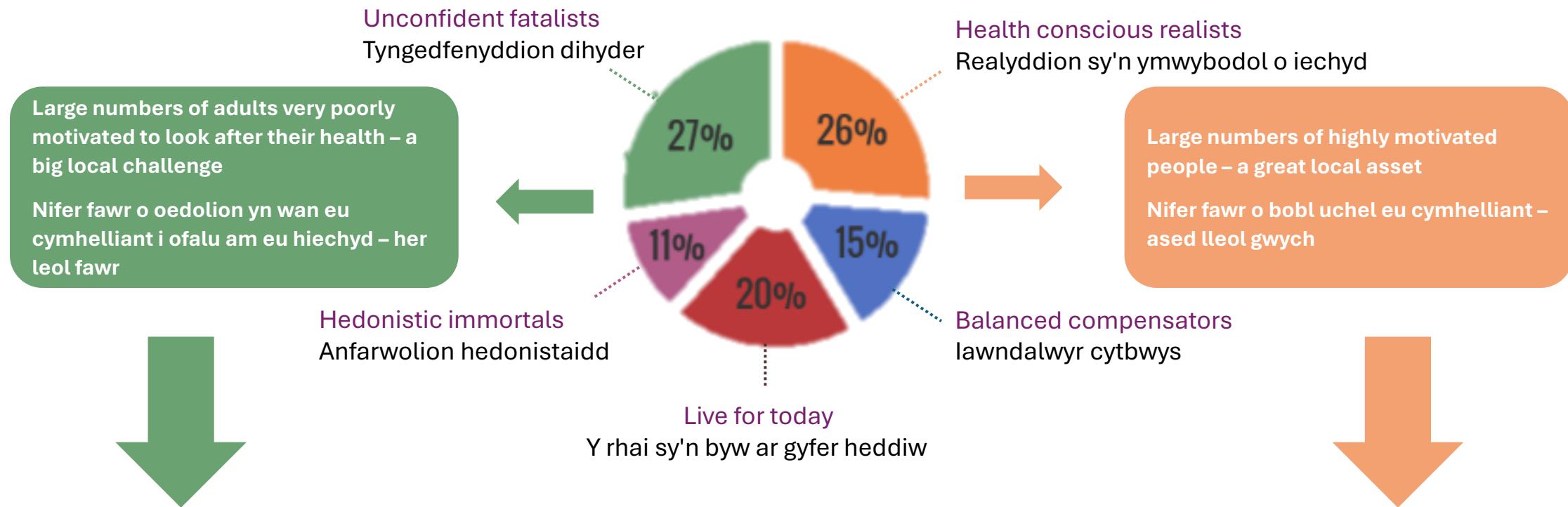
Different interventions and communication approaches are needed for each segment. This will be more effective than a 'one size fits all' approach. There are people who are highly motivated to look after their health living in all parts of Kirklees. In more deprived areas these individuals can act as 'health champions.'

Beth yw Sylfeini lach?

Mae Sylfeini lach yn fodel segmentu a ddatblygwyd yn wreiddiol ar gyfer yr Adran lechyd i ddarparu mewnwelediadau ar gyfer marchnata cymdeithasol i wella effeithiolrwydd polisi, ymgyrchoedd ac ymyriadau iechyd. Mae wedi'i adeiladu ar y tair thema sef cymhellion, amgylchedd a chyfnod bywyd. Mae'n nodi pum segment gwahanol sy'n gwahaniaethu pobl yn seiliedig ar agweddau a chredoau iechyd.

Pam bod hyn y bwysig?

Mae angen ymyriadau a dulliau cyfathrebu gwahanol ar gyfer pob segment. Bydd hyn yn fwy effeithiol nag 'un dull i bawb'. Mae yna bobl sydd â chymhelliant mawr i ofalu am eu hiechyd yn byw ym mhob rhan o Kirklees. Mewn ardaloedd mwy difreintiedig gall yr unigolion hyn weithredu fel 'hyrwyddwyr iechyd'.



Unconfident fatalists (91,000 adults):

Oldest age profile, tend to live in most deprived areas, largest proportion of workless (under 65s), similar ethnicity profile to Kirklees overall

Behaviours, motivations & risk factors:

Negative perceptions of a healthy lifestyle, often fatalistic about their own health, multiple negative health behaviours (apart from alcohol), poor social connectedness

Tyngedfenyddion dihyder (91,000 o oedolion):

Profil oedran hynaf, yn tueddu i fyw yn yr ardaloedd mwyaf difreintiedig, cyfran fwyaf o bobl ddi-waith (dan 65 oed), profil ethnigrwydd tebyg i Kirklees yn gyffredinol.

Ymddygiadau, cymhellion a ffactorau risg:

Canfyddiadau negyddol o ffordd iach o fyw, yn aml yn dyngedfenyddol ynglŷn â'u hiechyd eu hunain, nifer o ymddygiadau iechyd negyddol (ar wahân i alcohol), cysylltedd cymdeithasol gwell

Health-conscious realists (88,000 adults):

Middle aged profile, tend to live in less deprived areas, smaller than average proportion of workless (under 65s)

Behaviours, motivations & risk factors:

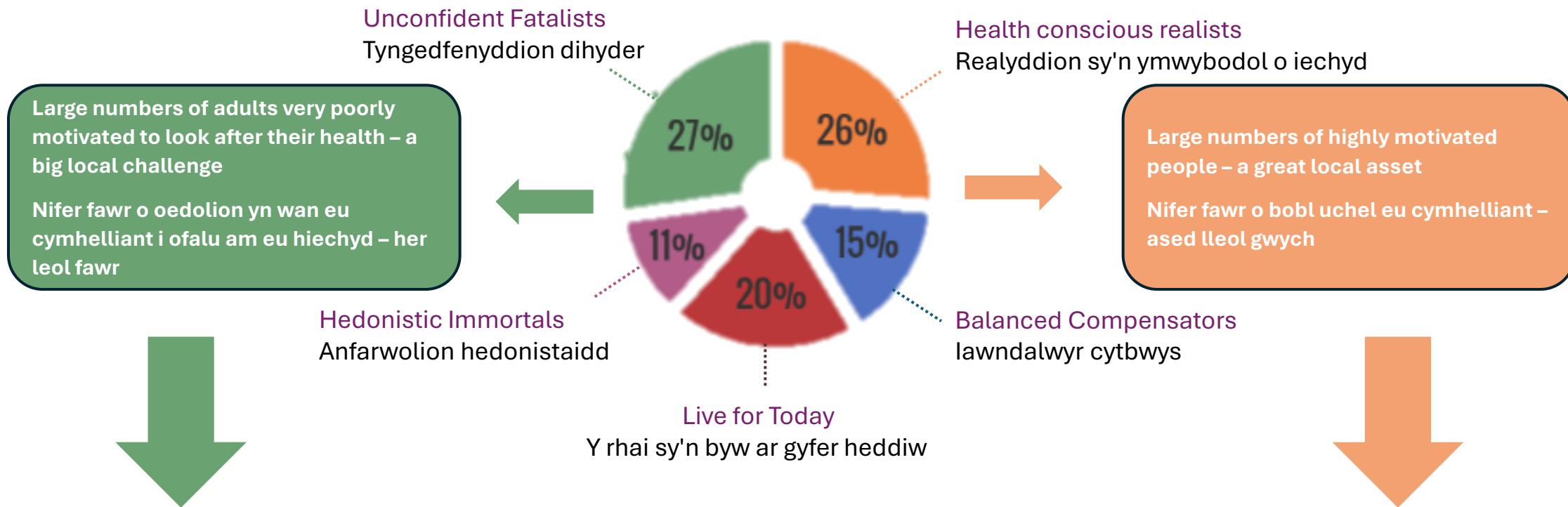
Highly motivated, in control of their lives and their health, positive health behaviours, better than average health & wellbeing, better than average social connectedness

Realyddion sy'n ymwybodol o iechyd (88,000 o oedolion):

Profil canol oed, yn tueddu i fyw mewn ardaloedd llai difreintiedig, cyfran lai na'r cyfartaledd o bobl ddi-waith (dan 65 oed)

Ymddygiadau, cymhellion a ffactorau risg:

Cymhelliant uchel, mewn rheolaeth o'u bywydau a'u hiechyd, ymddygiadau iechyd cadarnhaol, iechyd a llesiant gwell na'r cyfartaledd, cysylltedd cymdeithasol gwell na'r cyfartaledd



Hedonistic immortals (37,000 adults):

Youngest age profile, tend to live in less deprived areas, smallest proportion of workless (under 65s), smallest proportion of BME groups

Behaviours, motivations & risk factors:

Motivated by enjoyment and risk, lack of concern for health & wellbeing, higher-than-average alcohol consumption and incidence of drug taking, better than average social connectedness

Anfarwolion hedonistaidd (37,000 o oedolion):

Profil oedran ieuengaf, yn tueddu i fyw mewn ardaloedd llai difreintiedig, cyfran leiaf o bobl ddi-waith (dan 65 oed), cyfran leiaf o grwpiau Pobl Dduon a Lleiafrifoedd Eithnig (BME).

Ymddygiadau, cymhellion a ffactorau risg:

Wedi'u hysgogi gan fwynhad a risg, diffyg pryder am iechyd a llesiant, defnyddio alcohol a chymyd cyffuriau uwch na'r cyfartaledd, cysylltedd cymdeithasol gwell na'r cyfartaledd

Balanced compensators (51,000 adults):

Very similar to overall Kirklees age profile, tend to live in less deprived areas, smaller than average proportion of workless (under 65s), similar ethnicity profile to Kirklees

Behaviours, motivations & risk factors:

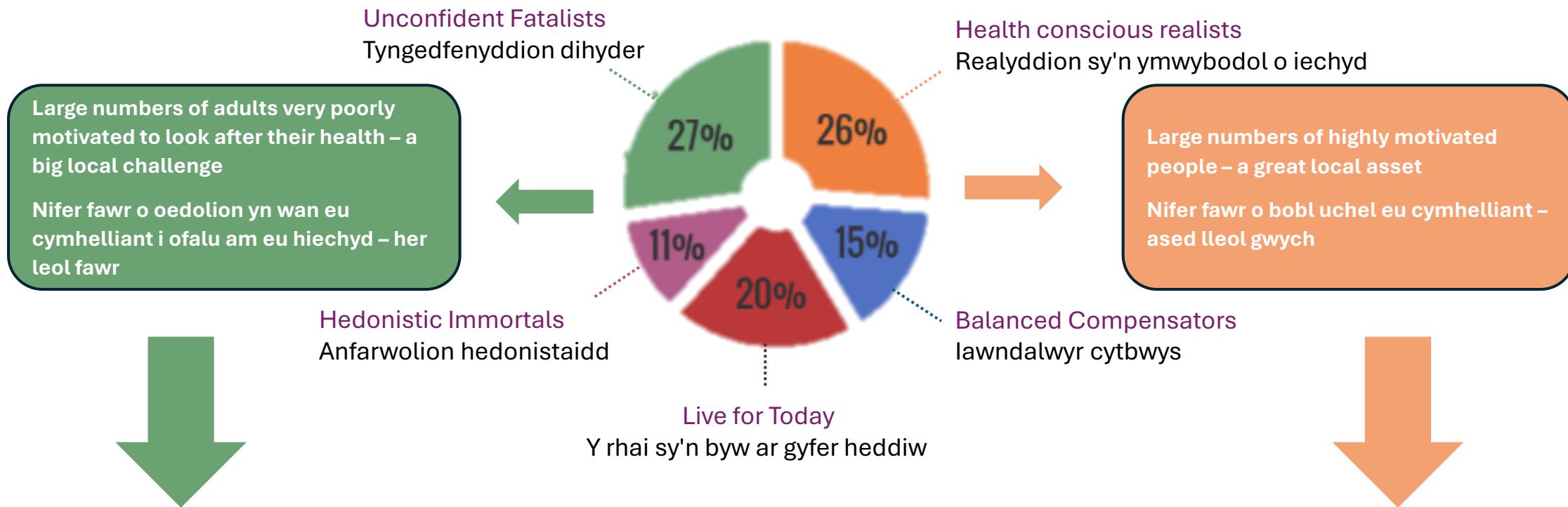
More motivated to look after health, generally positive health behaviours, better than average health & wellbeing, better than average social connectedness

Iawndalwyr cytbwys (51,000 o oedolion):

Yn debyg iawn i broffil oedran cyffredinol Kirklees, yn tueddu i fyw mewn ardaloedd llai difreintiedig, cyfran lai na'r cyfartaledd o bobl ddi-waith (dan 65 oed), profil ethnigrwydd tebyg i Kirklees.

Ymddygiadau, cymhellion a ffactorau risg:

Mwy o gymhelliant i ofalu am iechyd, ymddygiadau iechyd cadarnhaol yn gyffredinol, iechyd a llesiant gwell na'r cyfartaledd, cysylltedd cymdeithasol gwell na'r cyfartaledd



Live for todays (68,000 adults):

Younger than average age profile, tend to live in more deprived areas, average workless profile, large proportion of Asian BME groups

Behaviours, motivations & risk factors:

Multiple negative health behaviours, fatalistic & hold short-term view of life, little concern for their future wellbeing, more likely to smoke or drink heavily, average social connectedness

Y rhai sy'n byw ar gyfer heddiw (68,000 o oedolion):

Proffil oedran iau na'r cyfartaledd, yn tueddu i fyw mewn ardaloedd mwy difreintiedig, proffil di-waith cyfartalog, cyfran fawr o grwpiau BME Asiaidd

Ymddygiadau, cymhellion a ffactorau risg:

Nifer o ymddygiadau iechyd negyddol, tyngedfenyddol ac yn dal golwg tymor byr ar fywyd, ychydig o bryder am eu llesiant yn y dyfodol, yn fwy tebygol o ysmgu neu yfed yn drwm, cysylltedd cymdeithasol cyfartalog