Oxfordshire Health and Wellbeing

Joint Strategic Needs Assessment 2023







The Oxfordshire Joint Strategic Needs Assessment identifies the current and future health and wellbeing needs of our local population.

This pack summarises the main findings from a strategic review of evidence about the health and wellbeing of Oxfordshire's residents, based on research carried out between February and June 2023.

The annual JSNA report is provided to the Oxfordshire Health and Wellbeing Board and underpins the Health and Wellbeing strategy.

Other JSNA resources include:

Oxfordshire Local Area Inequalities dashboard Early years JSNA data dashboard Community Insight Profiles Health Needs Assessments JSNA Bitesize We would like to thank the very many contributors of data and commentary from organisations across Oxfordshire including:

Oxfordshire County Council, NHS Oxfordshire (BOB ICB) and NHS South, Central and West Commissioning Support Unit, Oxford Health NHS FT, Thames Valley Police, Citizen's Advice Oxfordshire, Age UK Oxfordshire, Healthwatch Oxfordshire, Cherwell District Council, Oxford City Council, South Oxfordshire District Council, Vale of White Horse District Council, West Oxfordshire District Council.

Thanks also to members of the JSNA Steering Group for their oversight and guidance:

Oxfordshire County Council, NHS Oxfordshire (BOB ICB), Cherwell District Council, Oxford City Council, South Oxfordshire District Council, Vale of White Horse District Council, West Oxfordshire District Council, Healthwatch Oxfordshire, Oxford University

This report is provided for the meeting of the Oxfordshire Health and Wellbeing Board 29th June 2023.

Note: amendments to slide 60 'Gender Identity' includes corrections to Census data on gender identity and the addition of further breakdown results on gender identity.

Slide 51 has been amended to record the number of people with a disability as 105,482. In the previous report this was listed as 165,482.

Last updated: 24 July 2024

web: https://insight.oxfordshire.gov.uk/cms/joint-strategic-needs-assessment email: jsna@oxfordshire.gov.uk



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

How this report is organised

Chapter 1: Executive summary includes a short overview of findings, the JSNA summary "snake" of key data by life-stage, and an inequalities data "tartan rug" for Oxfordshire showing health and wellbeing indicators at Middle Layer Super Output Area level

Chapter 2: Population with data on the population of Oxfordshire, the latest Office for National Statistics estimates, past trends and future projections/forecasts.

Chapter 3: Population groups and protected characteristics summarises data on residents in selected population groups in Oxfordshire including "protected characteristics" as defined under the Equality Act of 2010.

Chapter 4: Health conditions and causes of death includes information on health conditions and causes of deaths in Oxfordshire, including some information on coronavirus (COVID-19) for 2020.

Chapter 5: Behavioural determinants of health provides data on behavioural factors that affect health and wellbeing, such as healthy weight and physical activity, smoking and alcohol, and sexual and reproductive health.

Chapter 6: Building blocks of health covers conditions in which people are born, grow, live work and age, social, cultural, political, economic, commercial and environmental factors.

Chapter 7: Service use provides an overview of trends from data collected by providers of health, social care and related services in Oxfordshire including Local Authorities, Health service providers, Police and Voluntary sector organisations.

Chapter 8: Local research includes research carried out by organisations in Oxfordshire of relevance to the topics covered by the Joint Strategic Needs Assessment.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 1

Executive Summary



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

JSNA data by life-stage

JSNA data by small area

<u>Introduction</u>

- This chapter provides a short summary of the main findings from the 2023 Oxfordshire Joint Strategic Needs Assessment.
- It includes:
 - An introduction to Oxfordshire and health and wellbeing overall;
 - A one-page summary of the data showing the impact of COVID-19 on health and wellbeing in Oxfordshire;
 - One-page summaries for young people (Starting well), for working age adults (Living well) and for older people (Ageing well);
 - A JSNA visual summary "snake" showing data by life-stage;
 - Small area data with health and wellbeing indicators at Middle Layer Super Output Area level and highlighting which areas rank as worse or better than the England averages.
- The report is accompanied by interactive resources available at <u>Joint Strategic Needs</u>
 Assessment | Oxfordshire Insight



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

JSNA data by life-stage

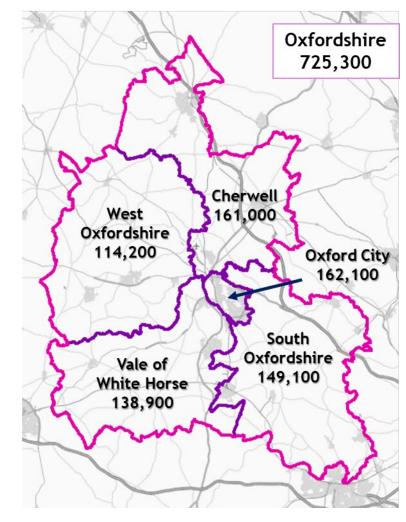
JSNA data by small area

Oxfordshire's population

- The first release of Census 2021 results shows that Oxfordshire was home to an estimated 725,300 people.
- Oxfordshire's population grew by 71,500 (10.9%) since the last Census in 2011 when it was 653,800. This increase in Oxfordshire was above the growth across England (6.6%).
- Between 2011 and 2021, Oxfordshire saw significant increases in the resident population of:
 - Young people aged 5 to 14 (+15%)
 - Working aged people in their 30s (+15%) and 50s (+27%)
 - Older people aged 65+ (+25%)
- There has been a fall in the number of children aged 0-4 (-8%). This decline in the number of young children was most significant in Oxford City.

First results from Census 2021 in England and Wales - Office for National Statistics (ons.gov.uk) Interactive tools and population downloads for Oxfordshire Population | Oxfordshire Insight

Oxfordshire county and districts resident population (ONS Census 2021)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

JSNA data by life-stage

JSNA data by small area

Health and wellbeing in Oxfordshire overall

- Oxfordshire is the most rural county in the South East region.
- Oxfordshire's population is relatively healthy.
 - Oxfordshire does better or similar to the national average on most Public Health indicators.
 - Life expectancy and healthy life expectancy in Oxfordshire are each significantly higher than national and regional averages for both males and females.
- Oxfordshire's population is ageing, a trend that is forecast to continue.
- House prices are continuing to increase, and the cost of renting remains well above average.
- The future increase in the population (especially the numbers of young people) is very dependent on levels of house building in future and will vary across the county.

- For 2019 to 2021, Cancer was the leading cause of death in Oxfordshire, followed by Heart Disease for males and Dementia & Alzheimer Diseases for females.
- The prevalence of Cancer and Depression in Oxfordshire in 2021-22 were each above the national average.
- The latest ONS measures of personal wellbeing (2021-22) for Oxfordshire show an increase in reported happiness and a decrease in anxiety. The average level of anxiety in Oxfordshire is below the England rate.
- Despite Oxfordshire's relative affluence there are wide inequalities in health and wellbeing. Males living in the more affluent areas of the county are expected to live around 11 years longer than those in poorer areas. For females the gap in life expectancy is around 12 years.

Explore OHID Local Authority Health profile



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

JSNA data by life-stage

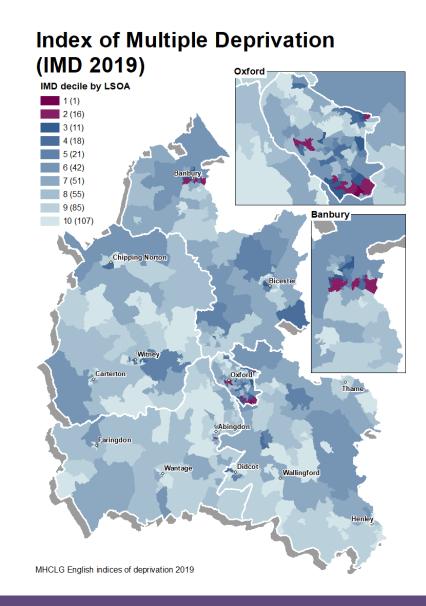
JSNA data by small area

Deprivation

- According to the Indices of Multiple Deprivation (IMD 2019), Oxfordshire was ranked the 10th <u>least</u> deprived of 151 upper-tier local authorities in England (up from 11th in 2015).
- Oxfordshire had 1 out of 407 Lower Super Output Areas (LSOAs) ranked within the 10% most deprived areas nationally, part of Northfield Brook ward, south east Oxford.
- A further 16 areas were ranked in the 20% most deprived areas nationally, 9 in Oxford City, 6 in Banbury and 1 in Abingdon.

Explore deprivation data using our interactive dashboard on Oxfordshire Insight

MHCLG English indices of deprivation 2019





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

JSNA data by life-stage

JSNA data by small area

Health and wellbeing in Oxfordshire - Starting well

- of development by the time they start school, however those eligible for Free School Meals (FSM) had a lower (worse) than average good level of development. This is also the case for children living in areas with higher income deprivation.
- Similar to the national trend, Oxfordshire has an increasing percentage of children with social, emotional, and mental health needs, with a higher prevalence in boys (4.8%).
- The average A level points score in Oxfordshire in 2022 was lower than the England average.
- The rate of young people classified as Not in Education, Employment or Training has increased from last year but remained lower than 2021.
- Although Oxfordshire is below the national average for pupils eligible for FSM, there are small areas within Oxfordshire where primary school pupils have a higher rate of eligibility.
- Within some small areas of Oxfordshire, half the primary school pupils received a FSM on Census Day. These areas are also in the 20% most deprived nationally.

- The number of mental health referrals for young people has increased, especially for those aged 10-19.
- The rate of hospital admissions due to alcoholspecific conditions in under 18s for females in Oxfordshire was significantly higher (worse than) the regional and national averages.
- There are clear inequalities for childhood obesity by deprivation, sex, and ethnic group.
- Combined 5-year data for 2016/17 to 2021/22 shows that children were more likely to be obese in the more deprived areas of Oxfordshire (a pattern observed nationally).
- In Oxfordshire primary schools, the prevalence of obesity was highest in boys than girls and in Black and Asian groups.

See also Child Health Profiles



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

JSNA data by life-stage

JSNA data by small area

Health and wellbeing in Oxfordshire - Living well

- Despite Oxfordshire's relative affluence there are wide inequalities in health and wellbeing. The cost of living, including house/rental prices, energy prices, cost of food etc. are continuing to increase, and in many cases are above the England average.
- There are 13,636 people providing over 50 hours of unpaid care in Oxfordshire, many of whom are not in good health.
- The health conditions that are above the national average include cancer and osteoporosis.
- Two of Oxfordshire's small areas, Banbury Ruscote and Banbury Neithrop had significantly higher rates of hospital admissions for coronary heart disease than England.
- Six of Oxfordshire's small areas had significantly higher rates of hospital admissions for heart attacks than England.
- The prevalence of depression in adults has further increased in Oxfordshire, however remained just below the England average.
- Cherwell had the highest (65.8%) percentage of adults classified as overweight or obese. This was above the England average of 63.5%.

See also <u>Health Needs Assessment for Promoting Healthy Weight</u>

- Oxfordshire has a greater proportion of those who are economically inactive due to being a student (33.0%) and retired (23.4%) than the England average.
- Of those that are economically inactive, 88.6% of people in Oxfordshire did not want a job, this is lower (worse) than the England average (82.1%).
- Oxfordshire was ranked the loneliest county compared with its statistical neighbours.
- In 2022, Thames Valley Police recorded a total of 7,818 victims of domestic abuse in Oxfordshire. This was 2% above the 3-year average for the years 2019 to 2021.
- The prevalence of smoking in working age adults in routine and manual occupations in Oxfordshire was 30.7%. This was well above the England rate of 24.5%.

See also Learning Disability Profiles



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

JSNA data by life-stage

JSNA data by small area

Health and wellbeing in Oxfordshire - Age well

- Oxfordshire's population is ageing, with a substantial recent and predicted growth in the number of older people and decline in younger people.
- There are clear inequalities in Life Expectancy across Oxfordshire. Males living in the more affluent areas of the county are expected to live around 11 years longer than those in poorer areas. For females, the gap in life expectancy is around 12 years.
- In 2021-22 the rate of hospital admissions due to falls in Oxfordshire was above the national average.
- Areas with higher rates of adult social care users living at home include the more deprived urban areas of Oxfordshire in Oxford, Banbury and part of Abingdon.

- Between 2020-21 and 2022-23, the number of referrals of Oxfordshire patients to Oxford Health for mental health services increased by 9% for people aged 80-84.
- The estimated dementia diagnosis rate (aged 65 and over) in Oxfordshire (60.7%) is significantly worse than the England (62%) average.
- Close to a quarter (23%) of people aged 85+ live in areas of Oxfordshire ranked in the most deprived areas nationally on access to services.
- Research has found that the abrupt cessation of volunteering of and for older people due to COVID-19 is likely to have negatively impacted health and wellbeing.
- Nationally, the proportion of people participating in formal and informal volunteering has dropped.

See also <u>Productive Healthy Ageing Profiles</u>

Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

Summary - Start well

Summary - Live well

Summary - Age well

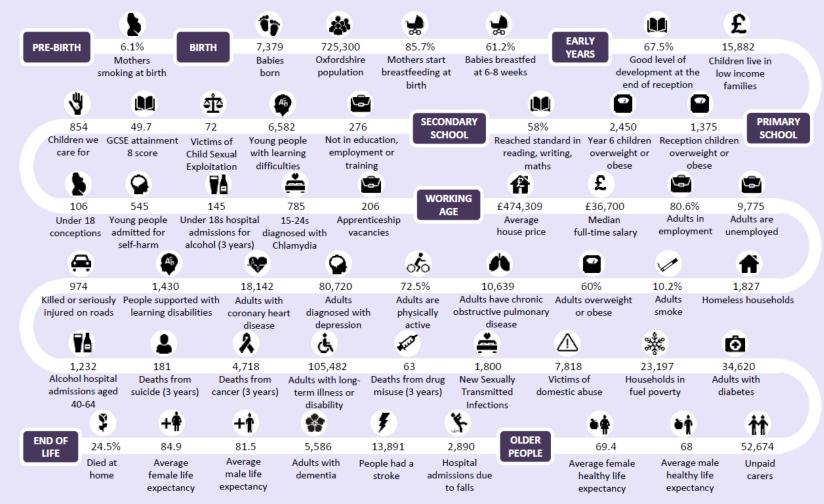
JSNA data by life-stage

JSNA data by small area

Oxfordshire JSNA, health and wellbeing facts and figures 2023







insight.oxfordshire.gov.uk/jsna

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Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

COVID-19

Summary - Start well

Summary - Live well

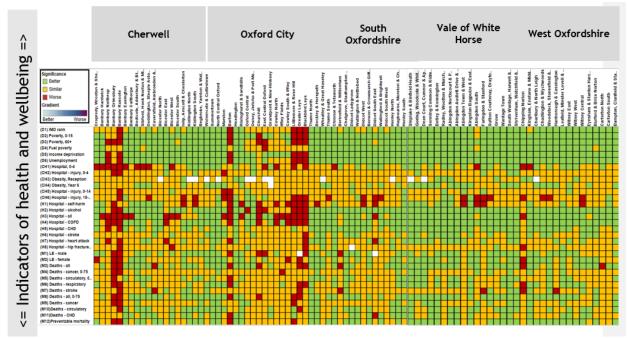
Summary - Age well

JSNA data by life-stage

JSNA data by small area

Health inequalities - small area overview

- The following table shows health indicators for small areas in Oxfordshire grouped by district. Overall, most indicators are ranked as significantly better or similar to the England average.
- Areas that are ranked as significantly worse tend to be concentrated in Oxford City and Banbury.
- Explore this data using our <u>inequalities dashboard</u>.



Data by Middle Layer Super Output Area (86 MSOAs in Oxfordshire) from Public Health England Fingertips <u>Local</u> Health



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

COVID-19

Summary - Start well

Summary - Live well

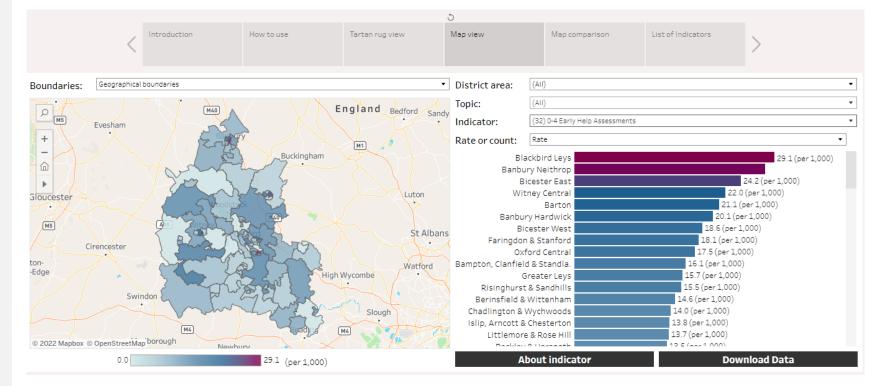
Summary - Age well

JSNA data by life-stage

JSNA data by small area

Early Years JSNA data dashboard

- The Early Years JSNA data dashboard shares a wide range of data at small area level for children aged 0-4 in Oxfordshire. The dashboard was developed as a collaborative project for the Oxfordshire Children's Trust.
- Data is from national published sources and from local organisations including Oxford Health NHS FT, Oxfordshire County Council and Thames Valley Police and can be visualised in maps, charts and as a summary "tartan rug".



Workbook: Children in Oxfordshire (tableau.com)



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Health and wellbeing overall

COVID-19

Summary - Start well

Summary - Live well

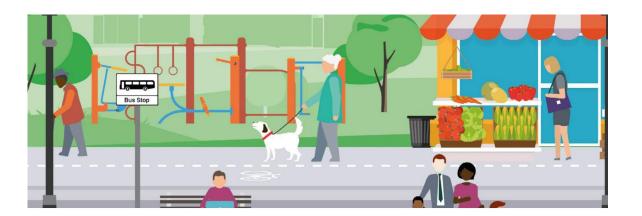
Summary - Age well

JSNA data by life-stage

JSNA data by small area

Healthy weight story map

- Oxfordshire County Council's plan involves the vision of 'thriving communities for everyone in Oxfordshire.' This includes helping people live safe, healthy lives and play an active part in their community and providing services that enhance the quality of life in our communities and protect the local environment.
- Almost two thirds of Oxfordshire adults are classified as overweight or obese and almost half of children in Oxfordshire are not meeting the daily physical activity guidelines. The map will allow you to investigate data related to healthy weight and physical activity to discover information related to different population groups and local areas.
- Click on the image below for the Healthy Weight Story Map.



Healthy Weight Story Map

Healthy weight story map



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 2

Population



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

This chapter..

- This chapter provides data on the population of Oxfordshire, the latest Office for National Statistics estimates, past trends, future projections/forecasts and life expectancy.
- Further JSNA resources are available via the JSNA page of Oxfordshire Insight
- O NOTE
 - This chapter includes data accessed in March and April 2023.
 - Please see the population pages on Oxfordshire Insight for the most recent population data for Oxfordshire.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

<u>Summary</u>

- Oxfordshire has a central England location and is the most rural county in the South East region.
- The majority (60%) of Oxfordshire's population are resident in Oxford City and the county's main towns. The remaining 40% live in smaller towns and villages.
- The sources used in this chapter include:
 - The mid-2020 ONS estimate of the resident population of Oxfordshire of 696,800 (also available at small area level).
 - The Census 2021 ONS estimate for Oxfordshire is 725,300.
 - As of June 2023, the count of NHS GP registered patients within Oxfordshire Integrated Care Board (ICB) was 807,886.
- In urban areas there is a higher proportion of those aged 0-4, while in rural Oxfordshire there is a higher rate of people aged 85+.
- All districts other than Oxford City have seen a significant increase in the older (aged 65+) population and relatively little change in the number of young people aged 0-15.

- Between mid-2019 and mid-2020 there was an increase in net inward migration to Oxfordshire.
- The Oxfordshire County Council housingled forecasts (Mar23) predict a total county population of 831,200 by 2031, a growth of 131,600 (15%). Over the same period the ONS projections show an increase of +4%.
 - Differences in these estimates are particularly apparent for the younger and working age groups. For older people aged 65 and over, the predicted growth is similar.
- The number of years spent in poor health in Oxfordshire has remained relatively unchanged at 15.5 years for females and 13.6 years for males.
- There are clear inequalities in Life Expectancy across Oxfordshire. Males living in the more affluent areas of the county are expected to live around 11 years longer than those in poorer areas. For females the gap in life expectancy is around 12 years.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

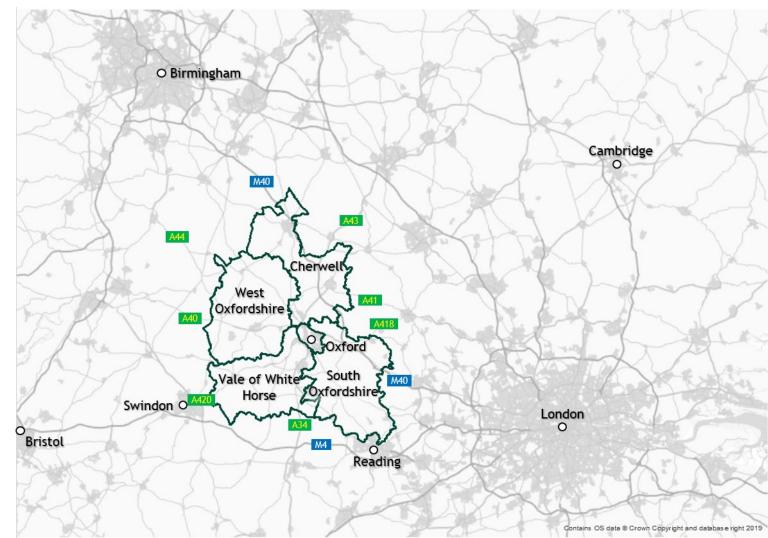
Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Oxfordshire's central location in southern England





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

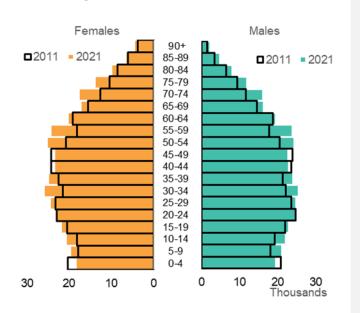
Finding out more

Note that the Census 2021 total population for Oxfordshire was significantly above the previous mid-2020 ONS estimate. It is expected that ONS will update historical population estimates (from 2012 to 2020) based on the 2011 and 2021 Census findings.

Results from the Census 2021 survey highlight Oxfordshire's growing population

- On Census Day, 21 March 2021, the size of the usual resident population in Oxfordshire was **725,300**.
- Oxfordshire's population grew by 71,500 (10.9%) since the last Census in 2011 when it was 653,800 residents. This increase in Oxfordshire was above the growth across England (6.6%).
- Between 2011 and 2021, Oxfordshire saw considerable increases in the resident population of:
 - Young people aged 5 to 14 (+15%)
 - Working aged people in their 30s (+15%) and 50s (+27%)
 - Older people aged 65+ (+25%)
- There has been a fall in the number of children aged 0-4 (-8%). This decline in the number of young children was most significant in Oxford City.

Oxfordshire population by 5-year age band and sex Census 2011 and 2021



First results from Census 2021 in England and Wales - Office for National Statistics (ons.gov.uk)
Interactive tools and population downloads for Oxfordshire Population | Oxfordshire Insight
Census 2021 extracts for Oxfordshire Census | Oxfordshire Insight



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Oxfordshire's Census 2021 population by district

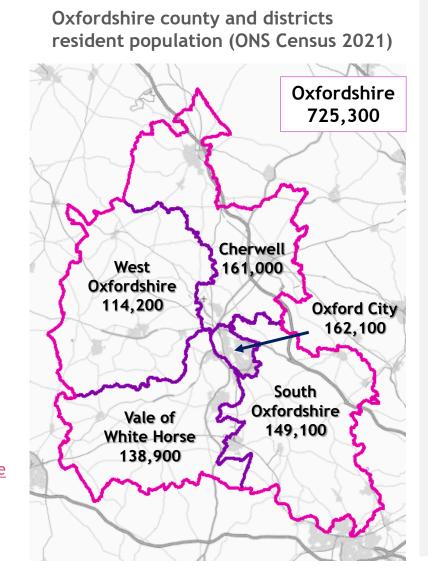
The first release of Census 2021 results show an increase in population in each district in Oxfordshire since 2011, with the greatest changes in Cherwell and Vale of White Horse.

	Census 2011	Census 2021	Change	% change
Cherwell	141,900	161,000	19,100	13.5
Oxford	151,900	162,100	10,200	6.7
South Oxfordshire	134,300	149,100	14,800	11.1
Vale of White Horse	121,000	138,900	17,900	14.8
West Oxfordshire	104,800	114,200	9,400	9.0

First results from Census 2021 in England and Wales - Office for National Statistics (ons.gov.uk)

Interactive tools and population downloads for Oxfordshire Population | Oxfordshire Insight

Census 2021 extracts for Oxfordshire Census | Oxfordshire Insight





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

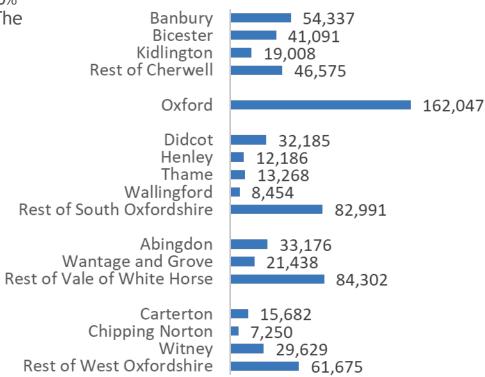
Life Expectancy

Finding out more

Oxfordshire's resident population by town

• As of 2021 Census, 22% of Oxfordshire's population are resident in Oxford City and 40% in the county's main towns. The remaining 38% live in smaller towns and villages.





Census 2021 extracts for Oxfordshire Census | Oxfordshire Insight
For the latest population estimates see the population page on Oxfordshire Insight



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

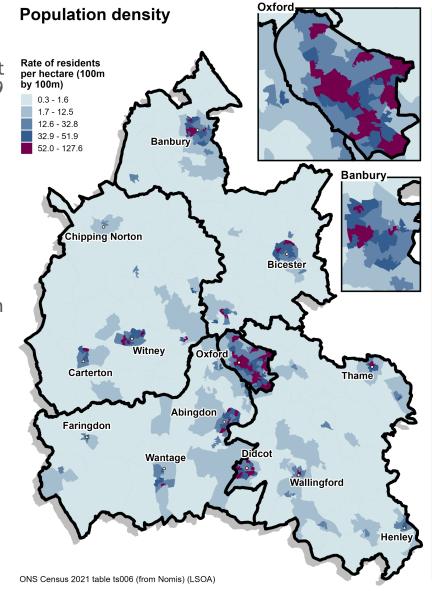
Life Expectancy

Finding out more

Population density

- Oxfordshire is a rural county in the South East at 2.8 people per hectare (compared with 4.9 across the region), by district the density in 2021 Census was:
 - Cherwell: 2.7 people per hectare
 - Oxford City: 35.5
 - South Oxfordshire: 2.2
 - Vale of White Horse: 2.4
 - West Oxfordshire: 1.6
- The higher density areas of Oxfordshire are in the urban centres of:
 - Banbury, Bicester and Kidlington
 - Oxford City
 - Didcot, Thame and Henley-on-Thames
 - Abingdon and Wantage & Grove
 - Carterton and Witney

2021 census from <u>nomis</u>
For the latest population estimates see the <u>population</u>
<u>page on Oxfordshire Insight</u>





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

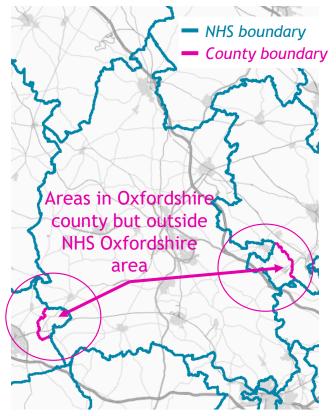
Life Expectancy

Finding out more

NHS Oxfordshire GP patient count vs Oxfordshire county population

- The official NHS Oxfordshire area is slightly smaller than the Oxfordshire county area. However the patient count remains above the estimated population and the gap has increased.
- As of June 2023, the count of NHS GP registered patients was 807,886 compared with an ONS estimate of Oxfordshire's county population of 725,300 a difference of 53,800.
- The greater number of patients recorded by the NHS, despite the smaller geographical area, is partly a result of ONS under-estimation and partly a result of the inclusion of:
 - GP registered patients who live outside the county (and use GPs within Oxfordshire) and
 - patients who have relocated and are no longer living in Oxfordshire (in some cases no longer in the UK).

NHS Oxfordshire and Oxfordshire county boundary



First results from Census 2021 in England and Wales - Office for National Statistics (ons.gov.uk)
NHS Digital Patients registered at a GP practice



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Population by age



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

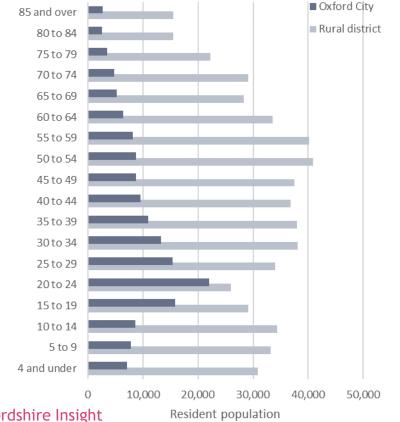
Life Expectancy

Finding out more

Difference in age profile Oxford City vs rural Oxfordshire districts

- Rural districts have a much higher proportion of older people than Oxford City
 - In 2021, older people aged 65+ made up 20% of the estimated population of Oxfordshire's four rural districts, compared with 12% of the population of Oxford City
- Oxford City had a much higher proportion of people in younger age groups (including students) and a higher number of people aged 20-24 than living in Oxfordshire's four rural districts

Population by age 2021 Census, Oxford City vs Rural districts (Cherwell, South Oxfordshire, Vale of White Horse, West Oxfordshire)



2021 Census from <u>nomis</u>

For Census 2021 populations please see Population | Oxfordshire Insight



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

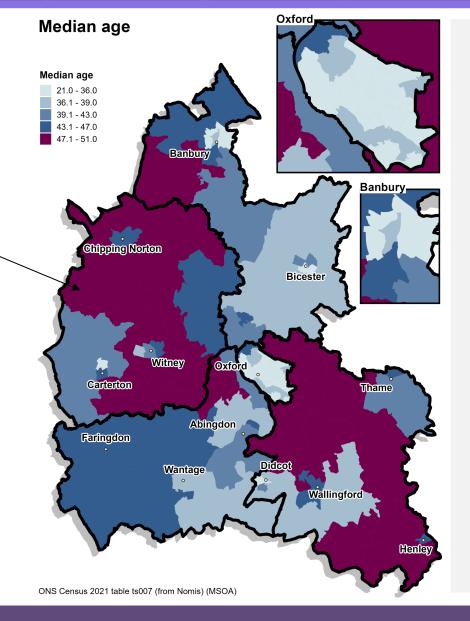
Median age across Oxfordshire

- The median* age of Oxfordshire increased slightly from 38 years as of 2011 census to 39 years at 2021 census.
- In 2021 census, the median age was lowest in Oxford City (31 years) and highest in West Oxfordshire (44 years)
- At a small area level, wide areas of rural Oxfordshire had a median age above 47 years

Median age (years) by district

	2011	2021
Cherwell	39	40
Oxford	29	31
South Oxfordshire	42	43
Vale of White Horse	41	41
West Oxfordshire	42	44
Oxfordshire	38	39
England	39	40

Census data <u>TS007 Age by single year</u> calculated from <u>nomis</u> *Median age is the mid-point, where half the population is aged under and half aged over the value





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

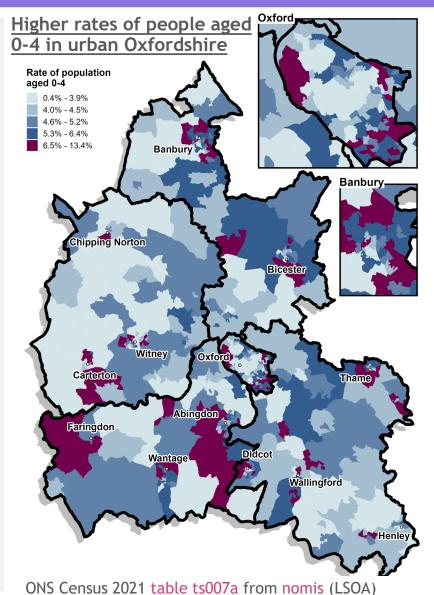
Migration

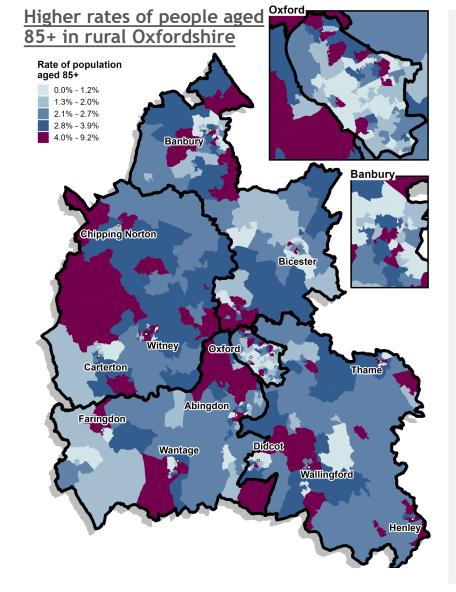
Ethnicity

Predicted growth in population

Life Expectancy

Finding out more







Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

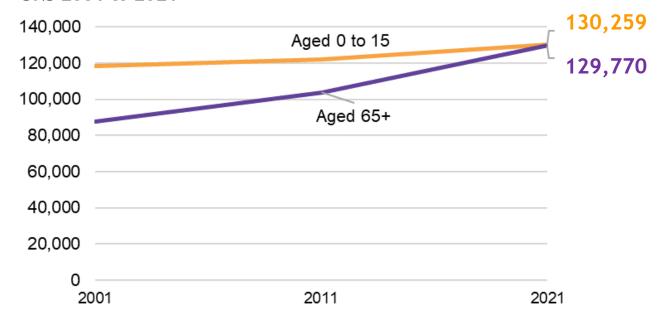
Life Expectancy

Finding out more

Oxfordshire's older population has increased faster than the number of young people

- Over the past 20 years (between 2001 and 2021), there was an increase in the population of Oxfordshire from 605,400 to 725,200, a growth of 119,800 (+20%)
- The younger age group, aged 0-15, increased by 10%
- The older age group, aged 65 and over, increased by 48%

Oxfordshire - change in count of older and younger residents, ONS 2001 to 2021



Census population from **nomis**

<u>next slide</u> for charts by district



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

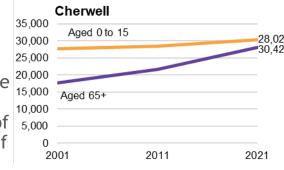
Life Expectancy

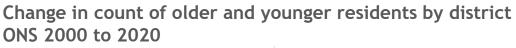
Finding out more

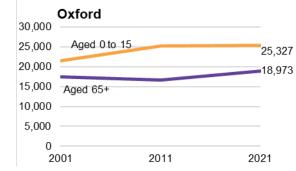
Change in younger and older populations - Oxfordshire's districts

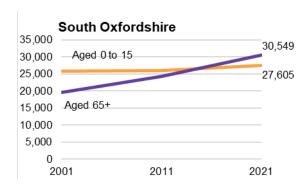
 All districts - other than Oxford City - have seen a substantial increase in the older 65+ population and relatively little change in the number of young people aged 0-15.

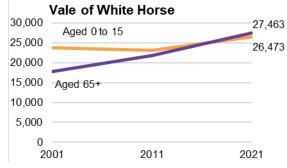
of White Horse and West
Oxfordshire, the number of
65+ exceeds the number of
0-15s.

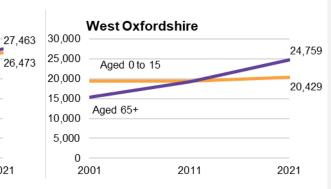












Census population from nomis

Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Oxford has seen the greatest increase in the working age population

- Between 2001 and 2021 the working age population aged 16 to 64 in Oxfordshire increased by 17% (from 399,300 to 465,200, +65,900). This was below the overall growth in population (all ages) of 20% (as a result of the significant growth in older people).
- The increase in the number of working age residents was greatest in Oxford (+24%) and lowest in South Oxfordshire (+10%).

Change in count and rate per population of residents aged 16 to 64 (ONS Census)

	2001 (count)	2001 (rate)	2021 (count)	2021 (rate)	2001 to 2021 (count)	% change
Cherwell	86,327	66%	102,532	64%	16,205	19%
Oxford	95,315	71%	117,733	73%	22,418	24%
South Oxfordshire	82,703	65%	90,918	61%	8,215	10%
Vale of White Horse	74,062	64%	84,935	61%	10,873	15%
West Oxfordshire	60,880	64%	69,081	60%	8,201	13%
Oxfordshire	399,287	66%	465,199	64%	65,912	17%

Census population from **nomis**



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Births, deaths and migration



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

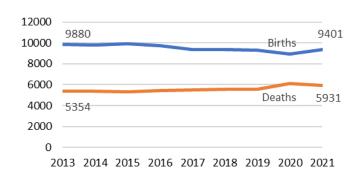
Births and deaths

Between mid-2019 and mid-2020 there were 7,119 births and 6,227 deaths in Oxfordshire. This is a "natural change" increase of 892 people.

• The mid-2019 to mid-2020 period covers the start of the COVID-19 pandemic which will have

contributed to the rise in the number of deaths.

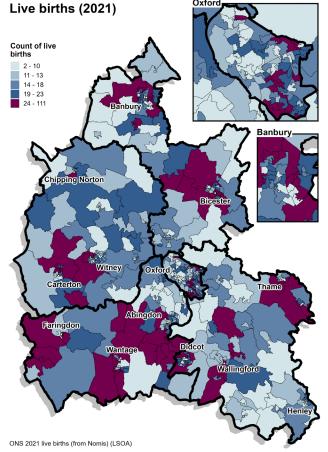
Oxfordshire total number of births and deaths 2003 to 2020



District births, deaths and natural change mid-2019 to mid-2020

	Births	Deaths	Natural change
Cherwell	1884	1396	488
Oxford	1374	987	387
South Oxfordshire	1518	1285	233
Vale of White Horse	1492	1197	295
West Oxfordshire	1112	1066	46
Oxfordshire	7380	5931	1449

Life events (Live births & Mortality) from nomis





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

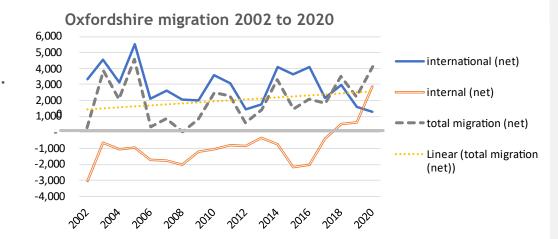
Life Expectancy

Finding out more

Increasing (net) migration into Oxfordshire

- Between mid-2019 and mid-2020 there was an estimated (net) inward migration of 4,135 people moving into Oxfordshire.
- Internal migration has continued to increase with 2,878 people additional people (net) moving to Oxfordshire from mid-2019 to mid-2020, well above the 632 in 2018-19.

Note that Census 2021 has confirmed issues with ONS estimates of migration, particularly for those in their twenties and thirties and in Oxford City. ONS are currently reviewing their methodology for migration modelling.



By district: Net internal and international migration mid-2019 to mid-2020

	Internal (net)	International (net)	Total net migration
Cherwell	1,348	-343	1,005
Oxford	-2,910	1,582	-1,328
South Oxfordshire	1,665	-48	1,617
Vale of White Horse	1,414	93	1,507
West Oxfordshire	1,351	-17	1,334
Oxfordshire	2,868	1,267	4,135

ONS mid-year population estimates components of change



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Ethnicity



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

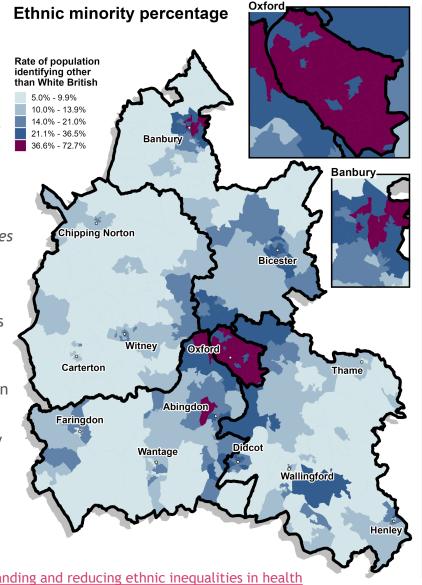
Finding out more

Ethnicity

According to Public Health England, ethnic identity influences health outcomes via multiple routes. For example, experiences of discrimination and exclusion, as well as the fear of such negative incidents, have been shown to have a significant impact on mental and physical health. Health-related practices, including healthcareseeking behaviours, also vary importantly between ethnic groups.

Some minority ethnic groups appear to have much better health status than the White British population and some much worse. Some ethnic minority groups have higher rates of diabetes.

- According to the ONS Census 2021 survey, 23% of the total resident population of Oxfordshire was from an ethnic minority background, compared with 26% across England.
- The majority of the ethnic minority population in Oxfordshire is based in urban areas of Oxford, Abingdon and Banbury.
- Oxford City has a very diverse range of ethnic minority groups.



ONS Census 2021 table ts021 from <u>nomis</u>, mapped by LSOA Public Health England Local action on health inequalities: u

Public Health England Local action on health inequalities: understanding and reducing ethnic inequalities in health



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Predicted growth in population



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

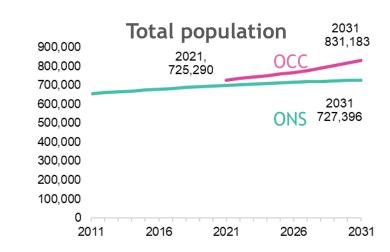
Population growth - housing-led vs ONS trend-based

There are two alternative scenarios for the future change in population: (1) Oxfordshire County Council's housing-led forecasts which incorporate district council plans for a higher rate of house building than in the recent past and (2) ONS projections based on past trends. Both OCC and ONS forecasts will be subject to analysis and review in the light of Census 2021 results.

• The March 2023 update of the Oxfordshire County Council housing-led forecasts predict a total population in Oxfordshire of 831,200 by 2031, a growth of 131,600 (+15%). Over the same period the ONS projections show an increase of +4%.

This set of forecasts contain county-wide adjustments relative to planned district housing trajectories as of December 2022.

It is important to note that the rate of housebuilding is an input to the model and the outputs reflect the expected population if that level of housebuilding takes place. The forecasts, therefore, are not indicative of housing need, and should not be used or interpreted as such.



Oxfordshire County Council population forecasts ONS 2018-based subnational population projections



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

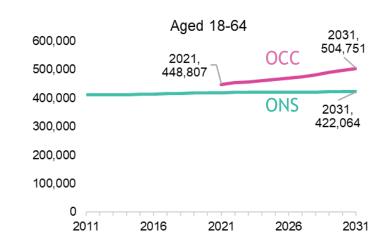
Predicted growth in population

Life Expectancy

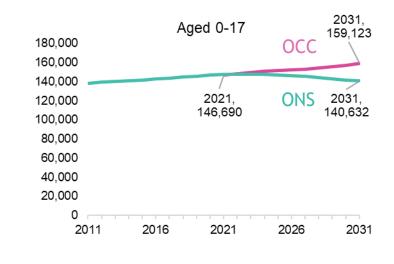
Finding out more

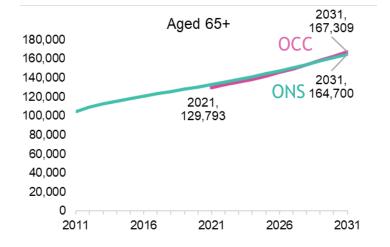
Trend by age

- Differences are particularly apparent for the younger and working age groups.
- For older people aged 65 and over, the predicted growth is similar.



Oxfordshire County Council population forecasts ONS 2018-based subnational population projections







Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

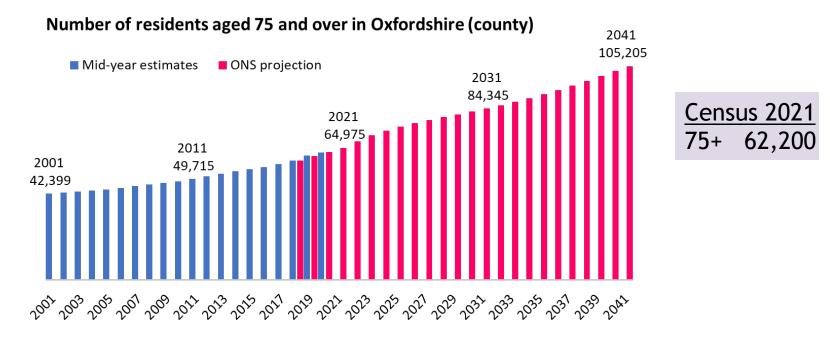
Predicted growth in population

Life Expectancy

Finding out more

Growth in the oldest population historical and projected trend

- ONS population estimates show that the number of people aged 75+ in Oxfordshire increased by 22,600 over the 20 years from 2001 to 2021.
- In the 20 year period between 2021 and 2041, this age group is expected to increase by 40,200 residents, almost double the number added in the previous 20 years (2001 to 2021).
- New Census 2021 data shows a slightly lower number of people aged 75+ 62,200 (compared with 65,000). New projections will not be available for some time.



ONS mid-year population estimates and projections from www.nomisweb.co.uk accessed 8th June 2022



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

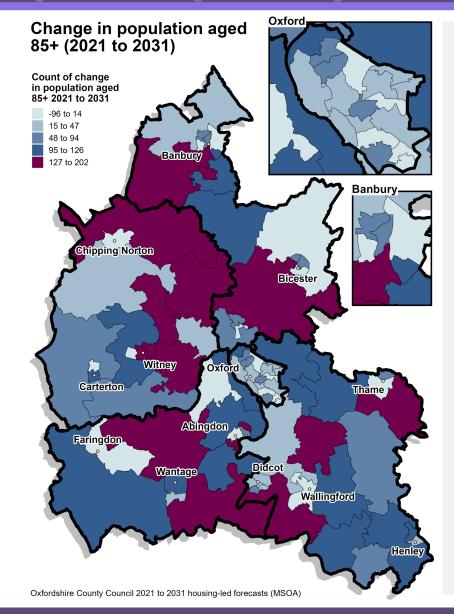
Life Expectancy

Finding out more

Growth in the oldest population by area

- The oldest age group, those aged 85 and over, is predicted to increase from 18,500 in 2021 to 24,400 by 2031, an increase of 5,900 people (+31%)
- The areas with the greatest growth in the number of people aged 85 and over are predicted to be:
 - Parts of Banbury, Bicester, Witney and surrounding areas
 - Parts of Abingdon
 - Parts of rural South Oxfordshire and rural Vale of White Horse
- These areas also have plans for further housing sites.
- There is a predicted decline in Chipping Norton and areas outside Bicester, Banbury, Thame and to the west of Oxford.

Oxfordshire County Council population forecasts (released March 23)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Life Expectancy



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

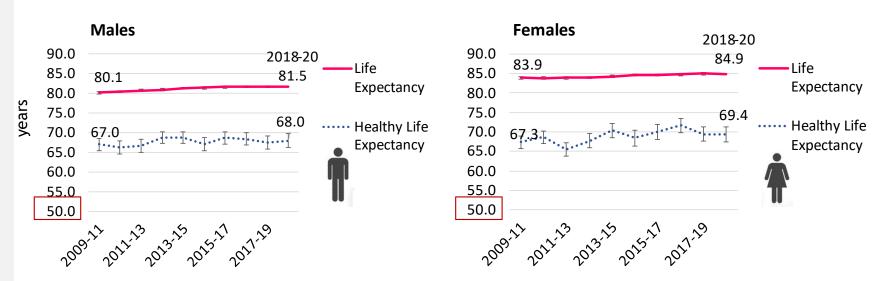
Life Expectancy

Finding out more

Years spent in poorer health has remained relatively unchanged

- Detween 2009-11 and 2018-20 (combined years) the number of years spent in poor health in Oxfordshire (difference between Life Expectancy and Healthy Life Expectancy), for females appears to have improved from 16.5 years to 15.5 years, for males the gap appears to have worsened from 13.1 to 13.6 years (although neither change is significant).
- It is not yet possible to evaluate the impact of the COVID-19 pandemic on this data.

Life Expectancy and Healthy Life Expectancy at birth in Oxfordshire 2009-11 to 2018-20



OHID fingertips. Note that vertical axes do not start at zero



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

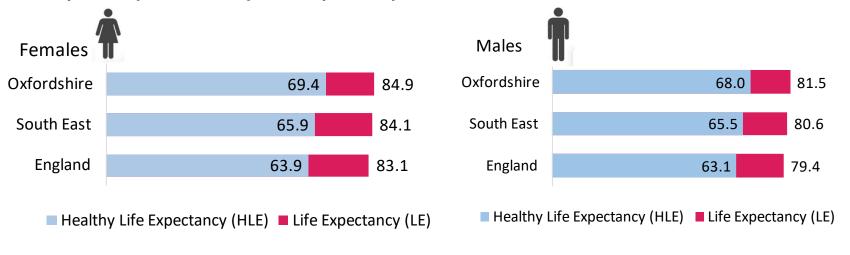
Life Expectancy

Finding out more

Healthy Life Expectancy better than average

- The 3 year combined data for 2018-20 shows that Oxfordshire has remained (statistically) better than each of the South East and England averages on both Life Expectancy and Healthy Life Expectancy at birth.
 - Females in Oxfordshire are expected to live for 15.5 years in poorer health, compared with 18.2 years in the South East and 19.3 years in England.
 - Males in Oxfordshire are expected to live for 13.6 years in poorer health, compared with 15.1 years in the South East and 16.3 years in England

Life Expectancy and Healthy Life Expectancy at birth 2018-2020



Health state life expectancy, all ages, UK - Office for National Statistics (ons.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

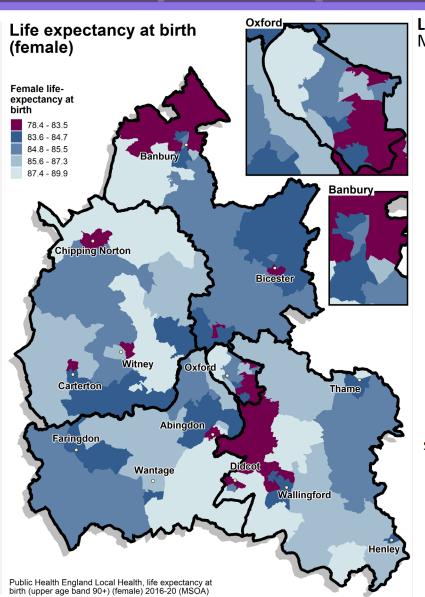
Migration

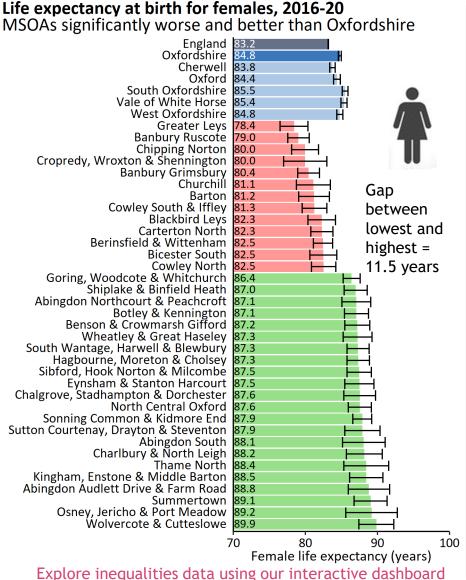
Ethnicity

Predicted growth in population

Life Expectancy

Finding out more







Population

Population groups and protected characteristics Health conditions and causes of death Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

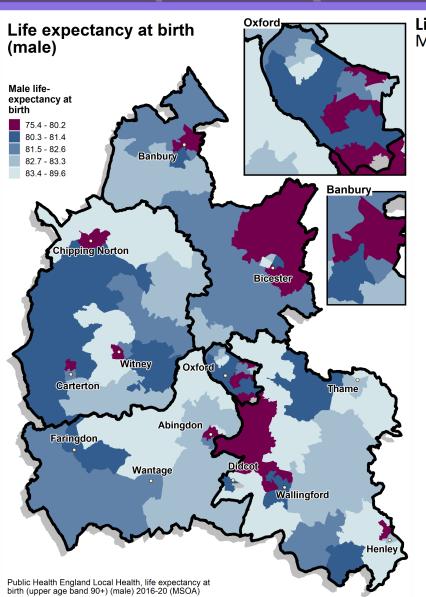
Migration

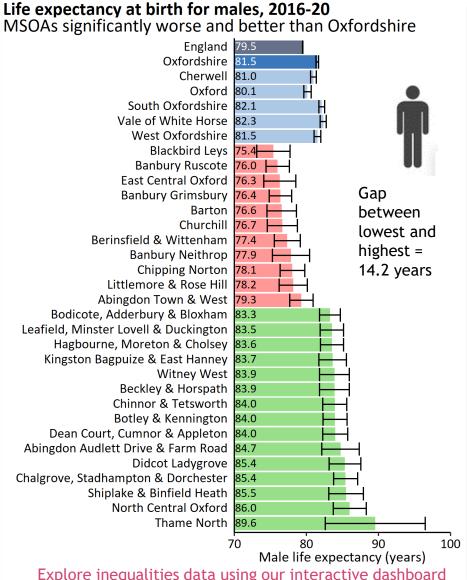
Ethnicity

Predicted growth in population

Life Expectancy

Finding out more







Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

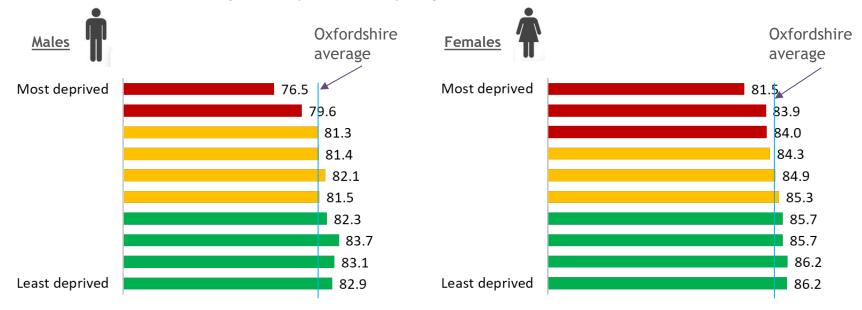
Life Expectancy

Finding out more

<u>Inequalities in Life Expectancy by areas of deprivation</u>

- There are clear inequalities in Life Expectancy across Oxfordshire, with people in the most deprived areas having significantly lower Life Expectancy compared with the least deprived.
- Data for the combined years 2018 to 2020 shows that for males there was a gap of 6.4 years between the most and least deprived areas. For females the gap was 4.7 years.

Oxfordshire Life Expectancy at birth by deprivation: males and females, 2018-20



Health Inequalities Dashboard based on IMD 2019 for Lower Layer Super Output Areas (accessed June 2023)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Oxfordshire's location

Oxfordshire's resident population

Rural County

GP registered patients

Population by age

Births and deaths

Migration

Ethnicity

Predicted growth in population

Life Expectancy

Finding out more

Finding out more

- Oxfordshire County Council population forecasts are published on the Oxfordshire Insight Population page (see "future population change")
- ONS population estimates and population projections for county and districts are available from www.nomisweb.co.uk
- ONS Census 2021 release calendar
- Census 2021 extracts for Oxfordshire are published on Oxfordshire Insight
- ONS Life Expectancy data is available from:
 - ONS National Life Tables
 - Public health profiles OHID (phe.org.uk)
 - Health Inequalities Dashboard (phe.gov.uk)
- ONS Migration flows
 - ONS interactive tool internal migration



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 3

Population groups and protected characteristics



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

This chapter..

- This chapter provides data on residents in selected population groups in Oxfordshire including "protected characteristics" as defined under the Equality Act of 2010.
- The format is a series of factsheets giving the latest data.
- There is also information for practitioners on carrying out an equity audit
- Where local data was unavailable, figures for Oxfordshire have been estimated from national surveys and local population data.
- Further JSNA resources are available via the JSNA page of Oxfordshire Insight
- Note that the terminology (i.e. disability, gender identity) used, is reflective of the terminology used in the studies, data sources, and research papers referred to throughout this chapter.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

<u>Summary - Oxfordshire in Numbers</u>

Population group	Count	Source
Total population	725,290	ONS Census 2021
Aged 0-15	132,549	ONS Census 2021
Aged 16-64	465,235	ONS Census 2021
Aged 65+	129,793	ONS Census 2021
Full time students (Oxford Uni, Oxford Brookes)	34,945	HESA 2021-22
Part time students (Oxford Uni, Oxford Brookes)	9,815	HESA 2020-21
People with a disability	105,482	ONS Census 2021
Claiming Personal Independent Payments	18,651	Nov 2022, DWP
Claiming Attendance Allowance (over state pension age)	11,961	Nov 2022, DWP
Adults with Learning Difficulties supported by Adult Social Care	1,430	ASCFR & SALT 2021-22
Pupils with Learning Difficulties in state primary, secondary and special schools	6,582	DfE January 2023
Pupils with Autism in state primary, secondary and special schools	2,600	DfE January 2023

Population group	Count	Source
Married households	132,060	ONS Census 2021
Households in registered same-sex civil partnership	983	ONS Census 2021
Live births	7,380	ONS 2021
Ethnic minority (non white British)	168,000	ONS Census 2021
Born outside UK	92,500	ONS Census 2021
Gypsy or Irish Traveller	652	ONS Census 2021
With a religion	422,576	ONS Census 2021
LGB+	21,428	ONS Census 2021
Carers registered with GP practices	21,735	OCCG 31-March- 22
Adult carers receiving health and social care support	32,20	NHS Digital 2021-22
Young carers receiving support	774	Oxfordshire County Council (March 2022)
Regular armed forces	9,350	MoD 1Apr22
Residents in receipt of an Armed Forces pension, War pension and Armed Forces compensation scheme	6,718	MoD 31Mar22



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Choose issues with

high impact, e.g. CVD*.

Take opportunities

where changes are

planned and under

review.

Equity

profile to

identify the

gap

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out morea

Carrying Out an Equity Audit

 Data from this JSNA chapter can be used as part of an equity audit

Ensure effective monitoring systems are in place and review progress. Identify groups or areas where more action is required.

Review progress and assess impact

Use data on Health Inequalities to support decisions at all levels.

Agree

partners and

issues

Make appropriate comparisons by age, area,

ethnicity, sex etc.

Move resources
and develop
services to
match need
identified.

Secure
changes in
investment
and service
delivery

Agree high impact local action to narrow the gap

Health Equity Audit Cycle

Use data to compare service provision with need, access, use and outcome

Evidence-based practice with high impact, targeted to the communities identified in the gap analysis

See also <u>Evidence</u>, <u>resources</u> and <u>guidance from Public Health England and partners to help support national</u>, <u>regional and local areas to reduce health inequalities</u>.* Cardio Vascular Disease.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

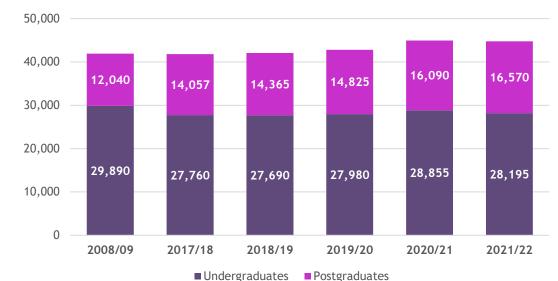
Students

- Oxford's two universities Oxford Brookes and the University of Oxford had 34,945 full time students and 9,815 part time students enrolled for the academic year 2021-22.
- Between 2008/09 and 2021/22 the undergraduate population declined by 1,695 (-5.6%) and the postgraduate population increased by 4,530 (+37%). Overall, the uptake of both undergraduate and post graduate enrolment has seen an increase, and from 2019/20 has increased by 3,015 (2.9%).
- The majority of University of Oxford students live within Oxford City although some part-time students might not be Oxford residents. Oxford Brookes has a campus in Headington, two campuses close to Oxford (in Wheatley and Harcourt Hill, Botley) and a campus in Swindon.

Student enrolments (full time and part time), Oxford Brookes and University of Oxford







HESA Where do HE students study?



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Disability



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

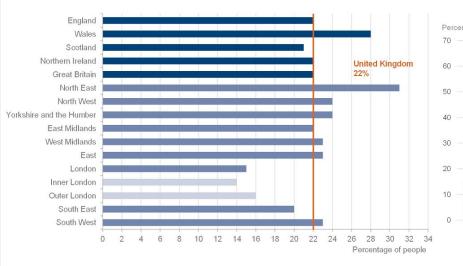
Finding out more

<u>Disability - National Survey Data</u>

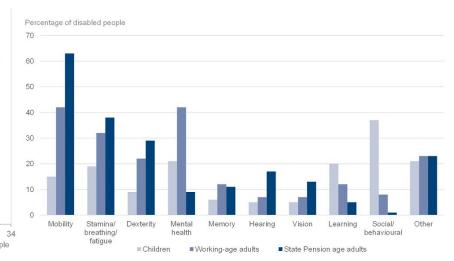
The Family Resources Survey provides national disability estimates.

- In 2021/22 it was estimated that around 20% of people in the South East region had a disability, just below the prevalence in England of 21%1.
- The top impairment types were social/behavioural for children and mobility for adults.
- These estimates could be applied to the Oxfordshire population.
- Click the images below to expand.

Disability prevalence by region and country, 2020 to 2021, United Kingdom



Impairment types reported by disabled people, by age group, 2020 to 2021, United Kingdom



[1]Family Resources Survey: financial year 2021 to 2022 - GOV.UK (www.gov.uk) (released 23 March 2023)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

People living in households with disabilities by age and sex

- Using the Census 2021 multivariate data (disability, age and sex), shows that in 2021 Oxfordshire had a total disabled population of 98,598.
- Using these variables it is possible to determine the prevalence of disability amongst Oxfordshire residents by age and sex.

Census table <u>RM073</u> from Nomis (custom table builder)

People living in households* in Oxfordshire with disabilities

Age band	Male disabled prevalence	Female disabled prevalence	Male disabled	Female disabled	Total disabled
0-4	2%	3%	334	554	888
5-9	7%	11%	1,370	2,086	3,456
10-14	10%	9%	2,194	1,833	4,027
15-19	12%	9%	2,790	1,953	4,743
20-24	12%	9%	3,045	2,015	5,060
25-29	12%	8%	2,966	1,931	4,897
30-34	12%	7%	2,968	1,812	4,780
35-39	12%	8%	2,915	1,956	4,871
40-44	15%	10%	3,337	2,387	5,724
45-49	17%	12%	3,887	2,886	6,773
50-54	17%	13%	4,192	3,266	7,458
55-59	3%	7%	815	1,650	2,465
60-64	20%	17%	3,904	3,363	7,267
65-69	21%	19%	3,485	3,228	6,713
70-74	25%	20%	3,989	3,488	7,477
75-79	34%	24%	3,989	3,273	7,262
80+	58%	28%	8,747	5,990	14,737
All ages	15%	12%	54,927	43,671	98,598

^{*}Usual residents in households.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

<u>Disability - Benefits Claimants</u>

Employment and Support Allowance (ESA) supports those with a disability or health condition that affects work. ESA has replaced Incapacity Benefit (IB) and Severe Disablement Allowance (SDA).

Personal Independence Payment (PIP) helps with extra costs for working age adults with long term ill-health or a disability. From 2013, PIP has replaced Disability Living Allowance (DLA) for working age adults, but DLA still applies for young people aged under 16.

Attendance Allowance helps with extra costs for care and supervision due to a disability for state pension age residents who do not receive DLA/PIP

• In November 2022 there was a total of 52,169 disability-related benefits claimed in Oxfordshire.

Disability-related benefits claimed in Oxfordshire to November 2022

	Nov-19	Nov-20	Nov-21	Nov-22
Incapacity Benefit and Severe Disablement Allowance	266	240	218	194
Employment and Support Allowance	10,685	10,464	9,460	9,990
Disability Living Allowance	11,709	11,538	11,615	11,823
Personal Independence Payment	13,408	14,774	16,104	18,651
Attendance Allowance	11,903	11,765	11,726	11,961
Total	47,971	48,781	49,653	52,169

Descriptions from Gov.uk and data from DWP Stat-Xplore using cases with entitlement for DLA, PIP and Attendance Allowance (which includes those in receipt of an allowance and those with entitlement where pay has been temporarily suspended, for example if they are in hospital)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

<u>Disability - Learning disabilities</u>

According to NHS Digital:

- People with a learning disability aged 0-74 were between 3.87 and 4.11 times more likely to die in the period 2016-19 than people in the general population in the same age and sex group.
- Epilepsy is 26 times more common in people with learning disabilities than those without.

According to the school census (as of January 2023) in Oxfordshire there was a total of 6,582 pupils with learning difficulties (including specific, moderate, severe, profound and multiple) in schools in Oxfordshire:

- 2,925 pupils with learning difficulties in state primary schools (5% of pupils)
- 3,109 pupils with learning difficulties in state secondary schools (7% of pupils)
- 550 pupils with learning difficulties in special schools (42% of pupils)

For data on health, health checks and screening of people with learning disabilities, see JSNA bitesize <u>Health</u> and Care of People with Learning Disabilities

NHS Digital, Health and Care of People with Learning Disabilities, Experimental Statistics: 2020 to 2021

NHS Digital, Quality and Outcomes Framework 2020-21

School Census: 2022/2023



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Disability - Autism

Autism is a lifelong, developmental disability that affects how a person communicates with and relates to other people, and how they experience the world around them. The common diagnostic term for autism is 'Autism Spectrum Disorder' (ASD). Autism as a spectrum condition means that autistic people share certain difficulties, but being autistic will affect them in different ways. Some autistic people also have learning disabilities, mental health issues or other conditions

- In 2022/2023, there were **2,600** pupils in Oxfordshire registered with their primary/main type of need as Autism Spectrum Disorder. This is 2.6% of all pupils.
 - Of these, 995 were in state-funded primary schools, 1,151 were in state-funded secondary schools and 454 were in special schools.
- This is a 9% increase in the number of registrations in previous years, with 2,600 in 2022/23 compared with 2,385 in 2021/22.
- The DfE have not released national percentages for 2023 therefore to understand how Oxfordshire compares nationally, we can use 2022 figures. The proportion of pupils with autism was above the England average in Oxfordshire's state-funded secondary schools (2.6% compared with 1.8% in Jan 2022).

Percentage of total pupils in Oxfordshire with primary type of need as Autism Spectrum Disorder

	Jan 2021	Jan 2022	Jan 2023	England Jan 2022*
Primary schools	1.4%	1.6%	1.8%	1.5%
Secondary schools	2.3%	2.6%	2.7%	1.8%
Special schools	31.6%	33.0%	34.5%	33.5%
Total	1.9%	2.0%	2.6%	2.0%

Oxfordshire County Council; *Most up to date data currently available from the DfE, Special educational needs in England: 2022



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Census 2021 was the first census to provide estimates of gender identity. This is a complex variable and ONS are carrying out research into various aspects of the quality of these data. Take care when interpreting data for 18- to 22-year-olds or, specifically, full-time students.

<u>Sexual orientation and gender identity quality information for</u> <u>Census 2021 - Office for National Statistics (ons.gov.uk)</u>

Gender identity

Gender identity is a personal internal perception of oneself and, as such, the gender category with which a person identifies may not match the sex they were registered at birth. In contrast, sex is biologically determined.

Gender identity in those who don't identify within the gender binary can face many problems with their health and wellbeing. Data shows that Transgender people have a higher risk of self-harm and thoughts of suicide.¹

- According to the Census 2021², 3,477 (0.6%) of Oxfordshire residents aged 16+ identify with a gender which differs from their sex registered at birth, which is higher than the national average.
 - 1,420 (0.24%) did not identify as Cis-gendered³, but gave no write-in response.
 - 598 (0.10%) identified as a Trans man.
 - 548 (0.90%) identified as a Trans woman.
 - 616 (0.10%) identified as non-binary
 - 295 (0.05%) wrote in a different gender identity.
- Overall, 558,864 (93%) Oxfordshire answered the question, the remaining 36,171 (7%) didn't.
- In Oxfordshire, 555,387 (93%) have a gender identity that was the same as their sex registered at birth, lower than the England and Wales average of 93.5%.
- The Census does not reflect the number of people under 16 whose gender does not align with their sex assigned at birth. There may be certain needs in those under 16 that are not captured here.

[1] <u>LGBT Public Health Outcomes Framework Companion Document</u> [2] Census table <u>TS078</u> from Nomis [3] Did not identify as Cis-gendered 'Indicated that their gender identity was different from their sex registered at birth'



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Marriage and Civil Partnership

Same-sex civil partnerships were introduced in the UK in December 2005 and same-sex marriage became legal in March 2014.

- At the time of the Census 2021 survey there were 132,060 households where a couple lived in a marriage or civil partnership in Oxfordshire. Of those 983 (0.7%) were in a registered same-sex marriage or civil partnership.
- 47% of Oxfordshire residents are married or in a registered civil partnership. (This compares to 44% in England and Wales). Of those, 0.8% are in same-sex relationships.

ONS Census 2021 table TS010 from <u>nomis</u> and <u>ONS Marriages in England and Wales 2019</u> (released May 2022) Note: from 28/3/2019 to 16/9/2019 there was a data issue with the bride and groom age figures for the 2016 data. This affected the age of bride, age of groom and age difference figures for 2016 and has now been rectified.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Pregnancy and Maternity

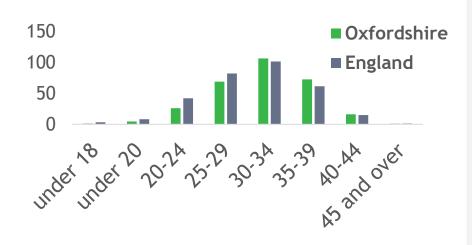
- There was a total of 7,379 live births in Oxfordshire from January to December 2021.
- This was up from 6,930 in 2020 (+6%), which is a larger increase than that seen in England (+2), from 585,195 to 595,948. The general fertility rate (GFR) was higher in England (54.3) than Oxfordshire (51.2).
- Oxford City saw the greatest drop in number of live births compared with other Oxfordshire districts. South Oxfordshire saw the greatest increase.
- In 2020 Oxfordshire's rate of births to older mothers aged 30-39 was above the England average.

ONS Births characteristics 2021 edition and Nomis theme "life events". * Released March 2022. Next release: 30 Oct 23 (provisional)

Live births 2020 and 2021 (Jan-Dec)

	2020	2021	2020 i	to 2021
Cherwell	1,734	1,884	150	9%
Oxford	1,408	1,374	-34	-2%
South Oxfordshire	1,366	1,518	152	11%
Vale of White Horse	1,389	1,492	103	7%
West Oxfordshire	1,034	1,112	78	8%
Oxfordshire	6,931	7,380	150	6%

Rate of births by age of mother 2021*





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

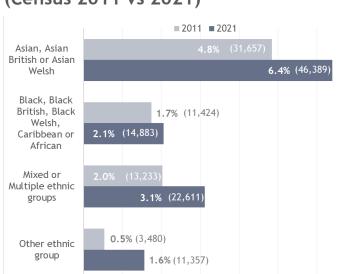
Ethnicity

In 2021, there were 168,000 (23%) people in Oxfordshire of an ethnic minority background (non white British). This has increased by 16% (107,000) from 2011. Over the last 10 years, Oxfordshire has seen an increase in the ethnic group Asian, Asian British or Asian Welsh.

• The percentage of the population in all high-level ethnic groups, excluding "White", has increased since 2011.

Population by ethnic group (Census 2011 vs 2021)

Population by ethnic group (Census 2011 vs 2021)



White Irish Other White 9.1% Mixed ethnic background 3.1% Indian Pakistani ■ 2011 ■ 2021 1.5% Bangladeshi 0.4% Other Asian 0.5% Black Caribbean 0.5% Black African 1.3%

0.2%

0.3%

Other Black

Other ethnic group

The "White" ethnic group has been excluded from this chart to make it easier to clearly see the differences for the four high-level ethnic groups that account for a smaller percentage of the overall population. ONS Census 2021 tables Census Table TS022 and TS021 from nomis.

For further information, please see: Ethnic group, England and Wales - Office for National Statistics (ons.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

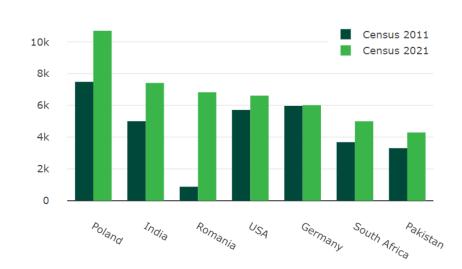
Country of birth

Census 2021 shows that about 1 in every 6 people in England and Wales were born outside of the UK (16.8%). The figure is slightly higher in Oxfordshire (18.7%).

Percentage of population born outside of the UK by district:

- Cherwell 18%
- Oxford 35%
- South Oxfordshire 13%
- Vale of White Horse 14%
- West Oxfordshire 11%
- Those born in Poland were the largest group in both 2011 and 2021.
- There was a large growth in those born in Romania, due to Romanian citizens getting EU migration rights to the UK in 2014. But there was a decline in those born in Ireland.

Non-UK countries of birth among Oxfordshire residents, Census 2011 and 2021



TS004 - Country of Birth from Nomis. Please see Oxfordshire Insight for more information



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Travellers



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Travellers

- At the time of the 2021 Census, there were 652 people living in Oxfordshire identifying as White: Gypsy or Irish Traveller.
- The Census 2021 saw inclusion of a new category 'White: Roma'. In Oxfordshire, we had 1,229 residents identifying as 'White: Roma'.
- The district with the highest rate was West Oxfordshire (16.3 per 10,000 residents)

Rate per 10,000 residents of White: Gypsy or Irish Traveller in Oxfordshire districts and England (Census 2011 and 2021)



ONS Census 2021 table *TS021* from <u>nomis</u>. <u>Inclusion of Roma in the Census 2021</u>

Ethnic Group 'White: Gypsy or Irish Traveller' and 'White: Roma' (Census 2021)

	White	e: Roma		ypsy or Irish Iveller
	Count	% of all usual residents	Count	% of all usual residents
Cherwell	354	0.2	178	0.1
Oxford	501	0.3	62	0.0
South Oxfordshire	138	0.1	106	0.1
Vale of White Horse	131	0.1	119	0.1
West Oxfordshire	105	0.1	187	0.2



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Religion or Belief

- The question on religion in the 2021 Census survey was voluntary.
- The proportion of residents in Oxfordshire stating a religion was 65%, just below the national average (68%).
- Of those stating a religion, a higher than average proportion were Christian (47% Oxfordshire compared with 46% nationally).
- The largest non-Christian group was Muslim with 23,500 (3%) residents in the county.

Religion or Belief (Census 2021)

	2011	2021	2011 %	2021 %	2011 - 2021 Change
No religion	182,344	290,116	28%	40%	12%
Christian	393,906	343,314	60%	47%	-13%
Buddhist	3,257	3,901	0%	1%	0%
Hindu	3,878	6,332	1%	1%	0%
Jewish	1,893	2,117	0%	0%	0%
Muslim	15,734	23,481	2%	3%	1%
Sikh	1,192	1,785	0%	0%	0%
Other religion	2,716	4,229	0%	1%	0%
Not answered	48,878	50,016	7%	7%	-1%

ONS Census 2011 tables TS030 & QS208EW from nomis

2021 Census question on religion

0	This question is voluntary
	No religion
1	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
	Buddhist
	Hindu
	Jewish
	Muslim
	Sikh
	Any other religion, write in



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Sexual Orientation



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

<u>Sexual Orientation - Census 2021</u>

The Census 2021 was the first time that the sexual orientation question was asked, on a voluntary basis for those aged 16 and above. People were asked "Which of the following best describes your sexual orientation?". The options were: Straight or heterosexual, Gay or lesbian, Bisexual, All other sexual orientation.

- 88.4% of the county identify as straight or heterosexual (526,306), this percentage was lower than the nation average (89.4%).
- 3.4% of the county did not identify as straight or heterosexual (21,428). The remaining 7.9% (47,299) of the county did not answer the question, the highest proportion nationally.

The Census 2021 tells us of Oxfordshire residents who did not describe themselves as straight or heterosexual:

• Bisexual: 10,009 (1.68%)

• Gay or lesbian: 8,828 (1.48%)

• Pansexual: 1,601 (0.27%)

• Asexual: 547 (0.09%)

• Queer: 287 (0.05%)

• All other sexual orientations: 156 (0.03%)

ONS Census 2011 table TS077 from nomis

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Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

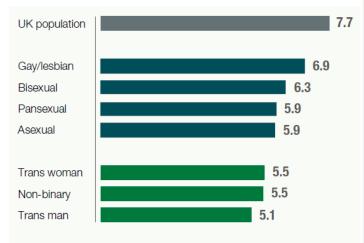
Armed forces

Finding out more

<u>Sexual Orientation - Experience</u>

- In February 2019, ONS published detailed data from a major online survey on LGBT experience of health, safety, education, and the workplace.
- Responses from over 100,000 LGBT people in the UK showed that:
 - LGBT respondents are less satisfied with their life than the general UK population (rating satisfaction 6.5 on average out of 10 compared with 7.7). Trans respondents had particularly low satisfaction scores (around 5.4 out of 10).
 - More than two thirds of LGBT respondents said they avoid holding hands with a same-sex partner for fear of a negative reaction from others.
 - At least two in five respondents had experienced an incident because they were LGBT, such as verbal harassment or physical violence, in the 12 months preceding the survey. However, more than nine in ten of the most serious incidents went unreported, often because respondents thought 'it happens all the time'.
 - 2% of respondents had undergone conversion or reparative therapy in an attempt to 'cure' them of being LGBT, and a further 5% had been offered it.
 - 24% of respondents had accessed mental health services in the 12 months preceding the survey.

Average life satisfaction (out of 10)



In July 2017, the Government launched a survey to gather more information about the experiences of LGBT people in the UK. The survey response was unprecedented - over 108,000 people participated, making it the largest national survey of LGBT people in the world to date. In 2019, ONS published a detailed research report on the headline findings and a summary report. These focus on the experiences of LGBT people in the areas of safety, health, education and the workplace.

For charts and data by question see data viewer



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Inequalities in Health Outcomes - Lesbian, Gay, Bisexual and Trans (LGBT) Communities

- A report by the Women and Equalities Committee found that often LGBT people are feel they are expected to fit into systems that assume they are straight and cisgender. The Committee has found that deep inequalities exist in health outcomes for these communities and that treating them "the same" as non-LGBT people will not address these poor outcomes.
- The report talks about the disparities in health and social care that is experienced by LGBT people.

"Unacceptable inequalities in health outcomes" for LGBT people "glare out wherever you look" October 2019.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Carers



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

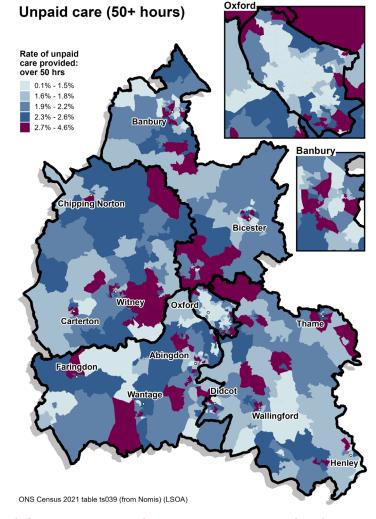
Carers

Armed forces

Finding out more

<u>Carers</u>

- According to the Census 2021 provision of unpaid care question¹:
 - 52,674 residents of Oxfordshire were providing unpaid care.
 - 29,895 (residents of Oxfordshire were providing up to 19 hours of unpaid care.
 - 9,143 residents were providing up to 20-49 hours of unpaid care, and 13,636 were providing 50+ hours of unpaid care.
- In England, the proportion of people who provided 50 or more hours of unpaid care a week was 2.8% in 2021.
- Areas of Oxfordshire that have a higher rate of unpaid care (50+ hours) than the England average include areas of:
 - Banbury Ruscote (4.6%)
 - Banbury Cross and Neithrop (4.6%)
 - The Leys (4.3%)
- Unpaid carers often have worse health outcomes than non-carers and the above areas are within the 10 most deprived wards in Oxfordshire.



[1] ONS Census 2021 table <u>TS039</u> from <u>nomis</u>; [2] <u>Adult Social Care Activity and Finance Report, England, 2021-22 - NDRS (digital.nhs.uk)</u>; [3] Oxfordshire Clinical Commissioning Group.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

<u>Carers</u>

Carers known to Social Care

- In 2021-22, there was a total of 4,275 (3,220) carers in Oxfordshire who were registered and receiving a service in the form of a carers assessment or direct payment from a pooled budget (health and social care). This was 0.4% of the adult population, below the national average (0.7%).
- Around 44% of registered carers receiving services, were aged 65 and over.

Carers known to GP practices

• As of 31 March 2022, there were 21,735 carers registered by 67 GP practices in Oxfordshire Clinical Commissioning Group. This was 11 below the previous year (21,746 as of 31 Mar 22).

Young Carers

- Census data suggests that there were around 983 young people aged under 16 providing unpaid care in Oxfordshire in 2021.
- Oxfordshire County Council's children's services is supporting 254 young carers (March 2022)

GP registered data on carers. ONS Census 2021 table RM113 from nomis; Oxfordshire County Council. [2] Adult Social Care Activity and Finance Report, England, 2021-22 - NDRS (digital.nhs.uk); [3] Oxfordshire Clinical Commissioning Group.

Young Carers in Oxfordshire (Census 2021)

	Number of aged 0-15 providing unpaid care	Percentage of aged 0-15 providing unpaid care compared to population		
Cherwell	221	1.05%		
Oxford	172	0.95%		
South Oxfordshire	189	0.96%		
Vale of White Horse	228	1.22%		
West Oxfordshire	173	1.18%		
Oxfordshire	983	1.07%		
England	78,810	1.06%		



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Carers - Experience

The latest survey of Adult Carers (2021-22) found that...

- The proportion of carers in Oxfordshire who reported feelings of stress and financial difficulties is slightly lower than the England average (below).
 - The proportion of carers in Oxfordshire who say that caring had caused them feelings of stress has decreased from 63.5% in 2018-19 to 63.1% in 2021-22 (-0.4%)*. Across England this increased from 60.6% to 67.1% (+6.5%).
 - The proportion of carers in Oxfordshire who say that caring had caused "some" or "a lot" of financial difficulties has decreased from 51.0% in 2018-19 to 43.1% in 2021-22 (-7.9%). Across England this decreased from 46.6% to 42.9% (-3.7%).

- Just under a fifth of carer respondents (19.8%) in Oxfordshire reported that they have had to see their own GP in the last 12 months because of their caring role, below the national average of 21.8%.
 - The rate has fallen since the last survey, particularly in the upper age groups.
 - There appears to have been a sustained increase for carers aged 18 to 49 (from a small sample).
 - This may be an indication of younger carers in poorer health than the previous survey and/or an indication this age group are now more likely to seek support from their GP.
- ONS research shows that "sandwich carers" those who care for both sick, disabled or older relatives and dependent children are more likely to report symptoms of mental ill-health, feel less satisfied with life, and struggle financially compared with the general population.

Personal Social Services Survey of Adult Carers in England, 2021-22 and ONS research on sandwich carers *This slight difference may be due to a sampling error.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Armed Forces

Current personnel

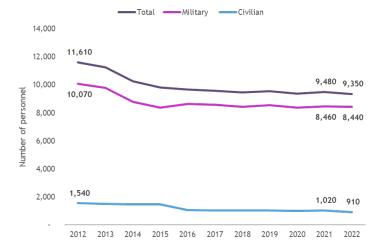
- As of 1 April 2022 there were 9,350 regular armed forces (military and civilian) personnel stationed in Oxfordshire (although not necessarily all resident in the county).
- This was a slight increase decrease with the previous year (9,480 as of 1 April 2021), though well below the number as of April 2012 (11,610).

Ex-personnel

- Census 2021 results show that, as of March 2021, there was a total of 23,541 residents of Oxfordshire who had previously served in the UK armed forces.
- This was 4.0% of the population, just above the England average of 3.8%.
- The district with the highest rate of Armed Forces veterans was West Oxfordshire with 5.5% of the population.
- As of 31 March 2022 there were 6,718 recipients of pensions/compensation under the Armed Forces Pension Scheme, War Pension Scheme and Armed Forces Compensation Scheme.

Ministry of Defence, <u>Location of UK regular service and</u> <u>civilian personnel annual statistics: 2021</u> and <u>Location of</u> armed forces pension and compensation recipients 2021

Armed Forces Personnel stationed in Oxfordshire, 2012 to 2022



Previously served in any UK armed forces 2022

Area	Total	% of population
Cherwell	5,466	4.2%
Oxford	2,474	1.8%
South Oxfordshire	5,223	4.3%
Vale of White Horse	5,175	4.6%
West Oxfordshire	5,205	5.5%
Oxfordshire	23,541	4.0%



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Carrying out an equity audit

Students

Disability

Gender identity

Marriage and civil partnership

Pregnancy and maternity

Ethnicity

Travellers

Religion or belief

Sexual orientation

Carers

Armed forces

Finding out more

Finding out more

- For further information on population and disability it may be useful to reference other sections of the JSNA, for example Chapter 1: Population and Chapter 4: Health conditions and causes of death
- Office for National Statistics provides national survey data (for example the Family Resources Survey) and population estimates
- Further data, including at ward level, on claimants of benefits is available from DWP Stat-Xplore
- Additional data on pupils is available from Department for Education DfE Schools, Pupils and their characteristics
- A wide range of data is available from nomis
- For Census 2021 extracts and publications for Oxfordshire see Oxfordshire Insight



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 4

Health conditions and causes of death



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

This chapter..

- This chapter provides information on health conditions and causes of death in Oxfordshire.
- It includes information on COVID-19 and a range of health conditions and mortality statistics.
- Further JSNA resources are available via the JSNA page of Oxfordshire Insight
- Note on data sources:
 - The majority of the data on health conditions relies on recorded cases which will reflect who is in contact with services and is diagnosed. This can particularly affect estimates of the prevalence of certain health conditions such as hypertension, dementia and depression.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

<u>Summary - Health conditions</u>

• The health conditions with the greatest number of GP-registered patients in Oxfordshire in 2021-22 were:

Hypertension (high blood pressure): 99,710 patients

Depression: 80,720 patients

Asthma: 45,841 patients

Obesity: 54,169 patients

- The prevalence of cancer and depression in Oxfordshire in 2021-22 were each above the national average.
- The prevalence of depression in adults has further increased in Oxfordshire.
- People with learning disabilities are more than twice as likely to have diabetes than the general population.
- In 2021-22 the rate of hospital admissions due to falls in Oxfordshire was above the national average. Oxford City has had a consistently high rate of admissions due to falls, the rate in Cherwell has seen a significant increase.
- The latest ONS measures of personal wellbeing (2021-22) for Oxfordshire show an increase in reported happiness and a decrease in anxiety. The average level of anxiety in Oxfordshire is below the England rate.
- The government's State of the Nation 2022 report shows that women are more likely to screen positive for an eating disorder and to self harm compared to men.
- An increasing proportion of Oxfordshire's state school pupils are recorded with a special educational need (SEN) of social, emotional and mental health.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

<u>Summary - Causes of death</u>

- In 2019 to 2021, *Cancer* was the leading cause of death in Oxfordshire, followed by *Heart Disease* for males and *Dementia & Alzheimer Diseases* for females.
- Areas of Oxfordshire with higher rates of death from cancer were two areas of Banbury, Iffley Fields in Oxford, Bicester East and the Littlemore/Rose Hill area of Oxford
- National data shows that premature mortality (under 75 years) is closely associated with deprivation.
- The highest rates of preventable mortality found in males by district (2018-20) were in Oxford City and West Oxfordshire. The highest rates for females were in Cherwell and Oxford City.
- Between 2017 and 2019 (combined 3 years), there was an estimated 1,698 tobacco-related deaths in Oxfordshire. The rate of deaths was below the England average.
- An increasing number and proportion of deaths in Oxfordshire happen at home.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Health conditions



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

<u>Health conditions - Oxfordshire</u> <u>and England</u>

- The health conditions with the greatest number of GPregistered patients in Oxfordshire were:
 - Hypertension (high blood pressure): 99,710 patients
 - Depression: 80,720 patients
 - Obesity: 54,169 patients
 - Asthma: 45,841 patients
- Two health conditions in Oxfordshire were above the England average:
 - Cancer
 - Osteoporosis

QOF 2021-22 - NHS Digital

Oxfordshire CCG	202	0-21				
Oxfordshire eed	202]		2021-22 	рр	England
	Count	Rate	Count	Rate		Rate
Cardiovascular group						
Atrial Fibrillation	16,025	2.06	16,671	2.1	-0.04	2.09
Coronary heart disease	17,946	2.3	18,142	2.28	0.02	3.01
Heart failure	5,995	0.77	6,459	0.81	-0.04	0.95
Hypertension	97,892	12.56	99,710	12.55	0.01	13.97
Periph. Atrial disease	3,639	0.47	3,654	0.46	0.01	0.58
Stroke and TIA	13,511	1.73	13,891	1.75	-0.02	1.81
Respiratory group						
Asthma	43,968	5.99	45,841	6.11	n/a	6.47
Chronic obstructive pulmonary disease	10,796	1.38	10,639	1.34	n/a	1.87
Lifestyle group	10,790	1.30	10,039	1.34	11/ a	1.07
Obesity	42,099	6.69	54,169	8.42	-1.73	9.72
High dependency and other long-tern			34,107	0.42	-1.73	7.72
Cancer	28,461	3.65	30,235	3.8	-0.15	3.34
Chronic kidney disease	18,966		19,374	3.01	0.13	
Diabetis mellitus	32,971			5.31	-0.15	
Pallitative care	2,293		2,186	0.28	0.01	0.46
Mental health and neurology group	, , , ,		,			
Dementia	5,423	0.7	5,586	0.7	0	0.72
Depression	79,244	12.59	80,720	12.54	0.05	12.65
Epilepsy	4,469	0.71	4,568	0.71	0	0.79
Learning disabilities	3,093	0.4	3,205	0.4	0	0.55
Mental health	6,561	0.84	6,779	0.85	-0.01	0.95
Muscoskeletal group						
Osteoporosis	4,153	1.5	4,532	1.6	-0.1	0.85
Rheumatoid arthritis	4,347	0.67	4,436	0.67	0	0.77
Non-diabetic hyperglycaemia						
Non-diabetic hyperglycaemia	21,243	3.38	25,004	3.89	-0.51	6.09



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

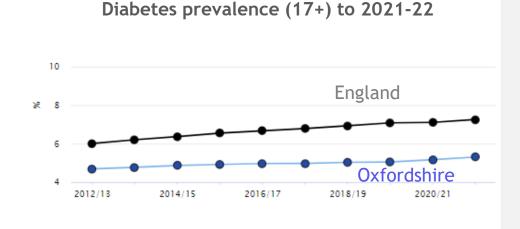
Road casualties

Finding out more

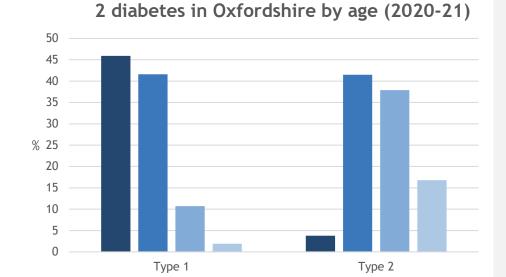
<u>Diabetes</u>

- In 2021-22 there were 34,620 GP registered patients aged 17 years or older who had been diagnosed with type 1 and type 2 diabetes in Oxfordshire.
- The prevalence of diabetes in the NHS Oxfordshire area was 5.3% in 2021-22, well below the England average of 7.3%.
- The most recent (2017) estimate of the prevalence of diagnosed <u>and</u> undiagnosed diabetes in the NHS Oxfordshire area was 7.2% (compared with 8.5% in England at that time).
- Estimates from 2020-21 show that Type 1 diabetes particularly affects younger people, while type 2 affects older people.

OHID <u>Diabetes profile</u> for Oxfordshire NHS



Distribution of people with type 1 and type



■under 40 ■ 40 to 64 ■ 65 to 79 ■ 80+



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

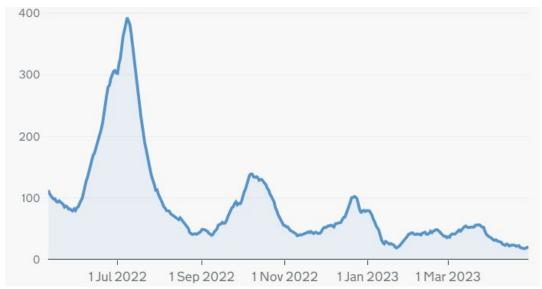
Road casualties

Finding out more

Cases of coronavirus in Oxfordshire (COVID-19)

- Between April 2020 and March 2023 there was a total of 224,939 cases of COVID-19 in Oxfordshire with 33,420 in 2020/21; 150,000 in 2021/22 and 41,519 in 2022-23.
- The majority of these cases were in the working age population.
- The UK Government downgraded the severity of COVID-19 and is currently seen and monitored as any other respiratory disease.

Rate of cases per 100,000 people in the rolling 7-day period ending on week ending 13 May 2022 and 5 May 2023



Source: UKHSA, Coronavirus dashboard

For more information about COVID-19, see <u>Finding out more</u> <u>coronavirus (COVID-19)</u>; data for 1 March 2020 to 1 April 2023



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

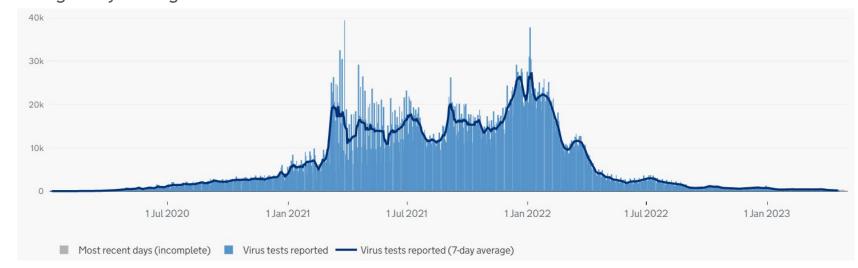
Road casualties

Finding out more

Testing of coronavirus (COVID-19)

- Between 4 January 2020 and April 2023, there was a total of 7,683,240 LFD's and PCR tests conducted in Oxfordshire.
- This is a count of test results and may include more than one test per person. Data is shown by the date the sample was taken from the person being tested.
- In September 2022 the UK Government downgraded the severity of COVID-19 and is currently seen and monitored as any other respiratory disease.

Number of confirmed positive, negative or void COVID-19 virus test results (PCR and LFD tests), and rolling 7-day average in Oxfordshire



Source: UKHSA, Coronavirus dashboard

For more information about COVID-19, see Finding out more -

coronavirus (COVID-19)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Long COVID- national

- UK ONS data shows that an estimated 2.9% of the population were experiencing self-reported long COVID-19 with symptoms continuing for more than four weeks after the first suspected coronavirus (COVID-19) infection.
- Of people with self-reported long COVID, the time they first had (or suspected they had) COVID-19 was:
 - Less than 12 weeks previously = 4%
 - At least 12 weeks previously = 92%
 - At least one year previously = 69%
- Fatigue continued to be the most common symptom reported by individuals experiencing long COVID (72% of those with self-reported long COVID), difficulty concentrating (51%), muscle ache (49%) followed by shortness of breath (48%).
- As a proportion of the UK population, the prevalence of self-reported long COVID was greatest in those:
 - Aged 35 to 69 years
 - Females
 - People living in more deprived areas
 - Working in social care
 - Aged 16 years or over who were not working and not looking for work
 - With another activity-limiting health condition or disability.

Prevalence of ongoing symptoms following coronavirus (COVID-19) infection in the UK - Office for National Statistics (ons.gov.uk) Published 30/03/23. The estimates presented in this analysis relate to self-reported long COVID, as experienced by study participants who responded to a representative survey, rather than clinically diagnosed ongoing symptomatic COVID-19 or post-COVID-19 syndrome in the full population. Long Covid-19 symptoms that were not



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Cancer incidence

• Cancer standardised incidence rates for combined years (2015 to 2019) for Oxfordshire show a significantly higher prevalence in breast cancers and in prostate cancers compared with England.

	Period		Oxon		Region	England		England	
Indicator		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
Incidence rate of alcohol-related cancer (Persons)	2017 - 19	-	705	36.27	37.01	38.00	48.11		29.15
Incidence rate of alcohol-related cancer (Male)	2017 - 19	9 –	320	35.07	36.79	39.36	57.89		28.05
Incidence rate of alcohol-related cancer (Female)	2017 - 19	-	385	37.64	37.53	37.09	42.33		28.73
Incidence of all cancers, standardised incidence ratio	2015 - 19	-	18,957	97.7	-	100.0	116.6		72.6
Incidence of breast cancer, standardised incidence ratio	2015 - 19	-	2,995	105.0	-	100.0	152.2		73.9
Incidence of colorectal cancer, standardised incidence ratio	2015 - 19	-	2,225	100.4	-	100.0	120.5		65.6
Incidence of lung cancer, standardised incidence ratio	2015 - 19	-	1,958	80.7	-	100.0	206.2		45.1
Incidence of prostate cancer, standardised incidence ratio	2015 - 19	-	3,205	116.9	-	100.0	145.4		63.7

Public health profiles - OHID (phe.org.uk) for Oxfordshire accessed 24 Apr 23



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

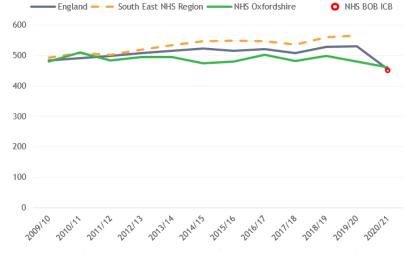
New cancer cases and diagnosis

- In 2020-21, there were 3,594 people in Oxfordshire diagnosed with new cases of cancer.
- This is equivalent to a rate of 461 per 100,000 population, higher than England (456) and the NHS BOB ICB (451) averages.
- NHS South East Region data was replaced with NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board.

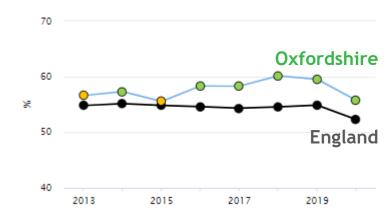
- The percentage of cancer occurrences diagnosed at stages 1 and 2 (shown as a proportion of all new cases of cancer diagnosed) have remained above (better than) the England rate.
- In 2020, 1,416 new cases of cancer were diagnosed at stage 1 or 2 in Oxfordshire.

OHID <u>Cancer Profile</u>, <u>Public Health Outcomes Framework</u> for Oxfordshire NHS accessed 5 Apr 23

Crude incidence rate of cancer (new cases per 100,000 population)



Cancer diagnosed at stages 1 and 2





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

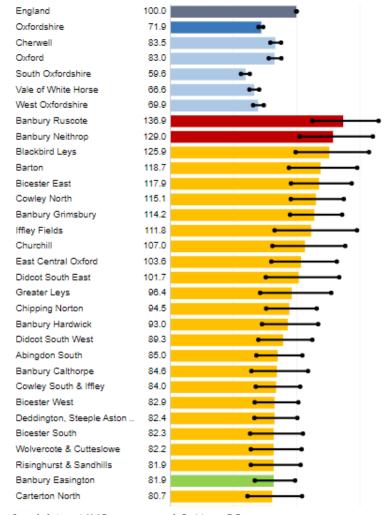
Finding out more

Cardiovascular disease- Coronary heart disease

There were 18,142 people (all ages) registered with

- Coronary Heart Disease (CHD) among Oxfordshire GP practices in 2021-22 (2.28% of all patients, compared to 3.01% nationally).
- The latest data for hospital admissions for CHD shows that in 2020-21 the hospital admission rate for CHD in Oxfordshire NHS was 284.9 per 100,000 people (1,865 admissions). This is significantly lower than the England rate (368).
- Two of Oxfordshire's 86 Middle Layer Super Output Areas (MSOAs), Banbury Ruscote and Banbury Neithrop had significantly higher rates of hospital admissions for CHD than England. The areas with the highest rates for CHD admissions were Banbury Ruscote and Banbury Neithrop

Bar chart showing admission rate for CHD



OHID <u>Heart Disease and Stroke Profile Reports</u>, <u>Local Health</u> for Oxfordshire NHS accessed 3 May 23 Oxfordshire insight- <u>Inequalities Dashboard</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

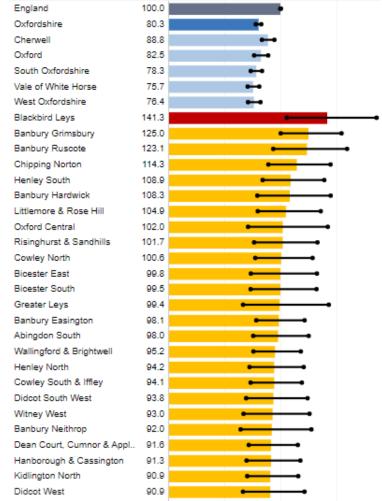
Cardiovascular disease- Stroke

Cardiovascular disease (CVD) refers to disease of the heart or blood vessels. CVD also includes stroke and high blood pressure.

- 13,891 patients at Oxfordshire GP practices in 2021-22 had recorded stroke or transient ischaemic attack (TIA). This was 1.75% of all Oxfordshire patients, just below the national average (1.8%).
- In 2020-21 the admission rate for stroke in NHS Oxfordshire NHS was 140.0 for every 100,000 people in the population (945 admissions). This is significantly lower than England (161.8). The admission rate for stroke in the NHS has decreased by 23.4% between 2004-05 and 2020-21.
- 1 of Oxfordshire's 86 Middle Layer Super Output Areas (MSOAs) had significantly higher rates of hospital admissions for strokes than England.
- The area with the highest rates for stroke admissions was Blackbird Leys.

Bar chart showing admission rate for Stroke

England 100.0



OHID <u>Heart Disease and Stroke Profile Reports</u>, <u>Local Health</u> for Oxfordshire NHS accessed 3 May 23 Oxfordshire insight-Inequalities Dashboard



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

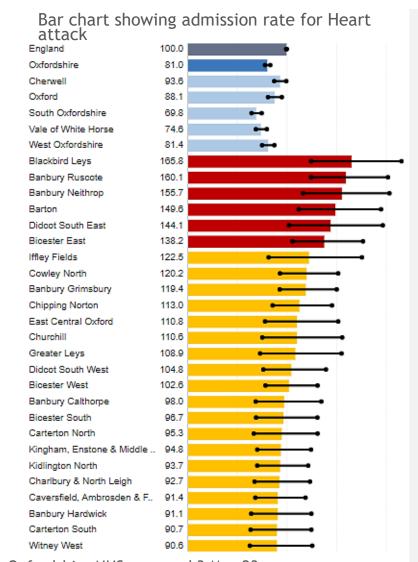
Road casualties

Finding out more

Cardiovascular disease- Heart attack

Heart failure & admissions for heart attacks

- 6,459 patients at Oxfordshire GP practices in 2021-22 had recorded heart failure. This is 0.81% of all Oxfordshire patients, below the national average (0.95%).
- Between 2016-17 and 2020-21 the admission ratio for Myocardial infarction (Heart attack) in Oxfordshire was 81 per 100 people in the population.
- Six of Oxfordshire's 86 Middle Layer Super Output Areas (MSOAs) had significantly higher rates of hospital admissions for heart attacks than England. The areas with the highest rates for heart attack admissions were Blackbird Leys, Banbury Ruscote, Banbury Neithrop, Barton, Didcot South East and Bicester East.



OHID <u>Heart Disease and Stroke Profile Reports</u>, <u>Local Health</u> for Oxfordshire NHS accessed 3 May 23 Oxfordshire insight- <u>Inequalities Dashboard</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Cardiovascular disease- Blood pressure

- The percentage of patients aged 45 or over who have a record of blood pressure in the preceding 5 years is 97.4% of all Oxfordshire patients, just below the national average (97.67%). 331,763 patients at Oxfordshire GP practices in 2021-22 had recorded high blood pressure.
- In 2020-21 the admission rate for high blood pressure in NHS Oxfordshire was 140.0 for every 100,000 people in the population (945 admissions). This is significantly lower than England (161.8). The admission rate for stroke in the NHS has decreased by 23.4% between 2004-05 and 2020-21.

OHID <u>Heart Disease and Stroke Profile Reports</u>, <u>Local Health</u> for Oxfordshire NHS accessed 3 May 23 Oxfordshire insight- <u>Inequalities Dashboard</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Musculoskeletal conditions

Good musculoskeletal health (MSK) is an important component of maintaining a person's functional abilities throughout the life course. MSK conditions affect the bones, joints, muscles and spine, and are a common cause of severe long-term pain and physical disability. There are three groups:

- Inflammatory conditions e.g. rheumatoid arthritis;
- Conditions of MSK pain e.g. osteoarthritis and back pain;
- Osteoporosis and fragility fractures, e.g. a fracture after a fall from standing height.
- Each year, 17.6% of people see a doctor in England about a MSK problem.
- In Oxfordshire (2022), there were an estimated 14.3% of people living with a long term MSK condition.

Percentage reporting a long-term MSK problem 2022 (districts in Oxfordshire)

Area 🗬	Value _		95% Lower Cl	95% Upper Cl
England	17.6		17.5	17.7
Oxfordshire	14.3	H	13.5	15.1
Vale of White Horse	17.0	<u> </u>	14.8	19.1
South Oxfordshire	16.4	<u> </u>	14.6	18.4
West Oxfordshire	15.0	—	12.9	17.0
Cherwell	13.9	<u> </u>	12.1	15.6
Oxford	10.7	-	9.3	12.3

OHID Applying all our health OHID Profile MSK Conditions

Confidence intervals (CIs) on the chart show the range within which the estimate could fall.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Musculoskeletal conditions and mental health

In the UK, musculoskeletal conditions are the leading cause of disability accounting for 30.5% of all years lived with disability; 26% of adults report having been diagnosed with at least one mental illness over their lifetime in the adult population who have a MSK condition. Data from the GP Patient Survey has been used to raise awareness of the association between musculoskeletal conditions and mental health conditions and to stimulate better pain management strategies.

- Data which estimates the likelihood of people with a musculoskeletal (MSK) condition also living with a mental health condition shows:
 - A higher likelihood of those with a MSK reporting a mental health condition in England and Oxfordshire
 - A likelihood in Oxfordshire that is similar to the national average (no significant difference, indicated by overlapping confidence intervals).

Odds ratio of reporting a mental health condition among people with and without an MSK condition 2022

	Area ▲▼	Value ▲▼		95% Lower Cl	95% Upper Cl
England		1	.4 H	1.4	1.4
Oxfordshire		1	.2	1.0	1.4
Cherwell		2	.1	⊣ 1.5	2.9
South Oxfordshire		1	.4	1.0	2.1
Vale of White Horse		1	.2	0.8	1.8
Oxford		(.8	0.5	1.2
West Oxfordshire		(.5	0.3	1.0

An odds ratio of 1 represents no difference between long-term mental health condition prevalence rates in the two groups. An odds ratio higher than 1 signifies the group with a long-term musculoskeletal condition are more likely to have a mental health condition than their counterparts.

OHID Profile MSK Conditions



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Sensory Impairment - Sight loss

One in every five people in the UK will start to live with sight loss in their lifetime. The main causes of sight loss are uncorrected refracted error, age-related macular degeneration, cataract, glaucoma and diabetic eye disease.

To register as severely sight impaired (blind) or slightly impaired (partially sighted) you must have lost a large part of your visual field or have very poor visual acuity.

In Oxfordshire, there are an estimated 24,000 people (3.4% of total population) in 2021/22 living with sight loss, including 1,820 people registered blind or partially sighted. It is estimated that there will be 30,000 people in Oxfordshire living with sight loss by 2032.

- There are 1,085 people registered as blind, 35 of which are children; a further 735 are registered as partially sighted, 25 of which are children.
- National data from RNIB's Understanding Society survey show that only one in four blind and partially sighted people of working age are in employment.
- Compared to the UK average, people with sight loss reported significantly reduced wellbeing.
- People with learning disabilities are 10 times more likely to experience sight loss than the general population.

RNIB Sight Loss Data Tool Version 5,

<u>Understanding Society: comparing the circumstances of people with sight loss to the UK population</u> For information, see RNIB's report Living with Sight Loss Through Lockdown



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Sensory Impairment - Hearing Impairment

Hearing Impairment is a major public health issue that now affects over 9 million people in England. Due to our ageing population and the increasing prevalence of age-related hearing loss, this is set to grow to 13 million by 2035.

• NHS England estimates that the prevalence of hearing loss in Oxfordshire will increase from 20% in 2015 to 26% in 2035.

Estimated prevalence (%) of hearing loss of 25dBHL* or more in the adult population (18+ years)

	2015	2020	2025	2030	2035
Oxfordshire	20	22	23	25	26
South East	22	23	25	26	27
England	21	22	23	24	25

- The estimated number in 2020 is over 120,000 35% of these are aged 51-70 and over 50% of these are over 71 years of age.
- The number of people with hearing loss is estimated to increase to 160,000 by 2035.

NHS England » Hearing Loss Data Tool

^{*}Hearing tests use pure tone audiometry where a person is presented with different frequencies (measured in decibels hearing level (dBHL) A threshold of 25dBHL indicates a hearing loss and threshold of 65dBHL indicates a severe hearing loss.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

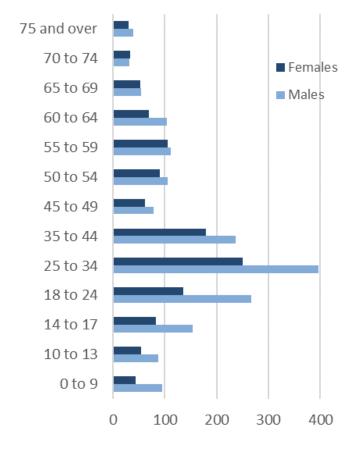
Road casualties

Finding out more

Learning Disabilities by gender and age

- Experimental statistics show that, as of 31 March 2022, there were 2,945 patients recorded on their GP's Learning Disabilities (LD) register in Oxfordshire.
- Patients with LD made up 0.39% of the total patient register in Oxfordshire (0.5% in England)
- By gender and age, the NHS Oxfordshire LD register included more males than females and more people aged 18 to 49:
 - 979 males (60%)
 - 626 females (40%)
 - 2,945 people aged 18 to 49 (54%)
 - 824 people aged 50+ (28%)

Number of patients recorded on their general practice's learning disabilities register, Oxfordshire GP practices as at 31 March 2022



<u>Health and Care of People with Learning Disabilities Experimental Statistics 2021 to 2022 - NHS Digital</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

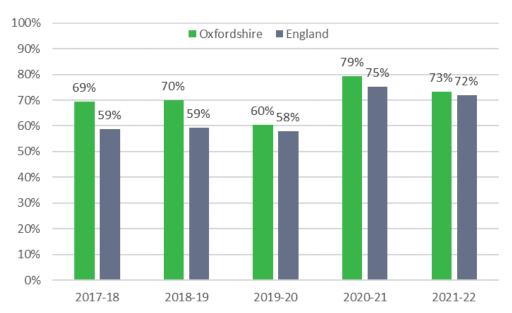
Road casualties

Finding out more

Health Checks for people with Learning disabilities

- In 2021-22 Oxfordshire GP practices provided a health check to 73% of registered patients with learning disabilities (aged 14 and over).
- This was below the England and Oxfordshire average in 2020-21.

Percentage of patients who had a learning disability health check (aged 14 or over) in the 12 months to 31 March each year



Health and Care of People with Learning Disabilities Experimental Statistics 2021 to 2022 - NHS Digital From interactive dashboard

Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Learning Disabilities and health conditions

- People with learning disabilities (LD) are likely to have much higher rates of certain health conditions than the general population.
- Rates of Epilepsy are almost 30 times as high for people with LD.
- People with LD are more than twice as likely to have diabetes than the general population and slightly less likely to have cancer.

Health and Care of People with Learning Disabilities Experimental Statistics 2021 to 2022 - NHS Digital

Interactive data visualisation

SPR = Standardised Prevalence Ratio XX times as likely as the population

To make a valid comparison, the number of cases in people with learning disabilities is shown as a percentage of the number expected if the general population age and sex specific rates had been applied to them.

A figure of more than 1 means the condition occurs more often than expected in people with learning disabilities, e.g. SPR = 2 means the condition is twice as common as expected in people with learning disabilities

NHS Oxfordshire patients 2021-22

Disease category	SPR*	Observed	Expected
Epilepsy	29.4	508	17
Autism	18.0	806	45
Mental Health	6.4	156	24
Dementia	6.3	46	7
ADHD	5.3	195	37
Hypothyroidism	3.3	256	78
Diabetes – non-Type 1	2.3	187	81
Diabetes – Type 1	2.3	29	13
Stroke	2.0	54	28
Heart Failure	1.8	24	13
Asthma	1.6	256	161
Blood pressure	1.6	2,435	1,491
Hypertension	1.2	290	238
Depression	1.1	435	381
Cancer	0.9	66	72



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

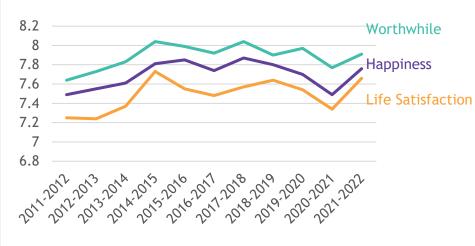
Road casualties

Finding out more

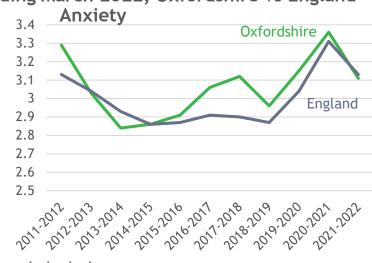
Personal wellbeing

- The latest ONS measures of personal wellbeing for Oxfordshire have each improved. Levels of reported anxiety in Oxfordshire have decreased in line with the England trend but are below the England average.
 - Between the years ending March 2021 and March 2022, the mean score for feeling "worthwhile", "happiness" and "life satisfaction" each increased by 0.1%, 2% and 1.7% respectively.

Trend in average wellbeing scores in Oxfordshire to year ending March 2022



Trend in average level of Anxiety to year ending March 2022, Oxfordshire vs England



ONS Personal wellbeing in the UK note that vertical scales do not start at zero

The personal wellbeing estimates are from the Annual Population Survey (APS), which provides a representative sample of those living in private residential households in the UK. People living in communal establishments (such as care homes) or other non-household situations are not represented in this survey and this may be important in interpreting the findings in relation to those people reporting lower personal wellbeing.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

<u>Children and Young People's wellbeing - national</u>

The Department for Education (DfE) "State of the Nation" report was first published in October 2018 and integrates available evidence on the state of children and young people's wellbeing, to provide an accessible narrative on current evidence to guide discourse and action.

The 2022 DfE State of the Nation report found that:

- While children and young people's happiness with their health has remained stable since responses to this question began to be collected in 2013-2015, the percentage of those reporting low happiness with their health appears to have increased between 2019 and 2020 and has continued to increase in subsequent years.
- Rates of probable mental disorder among 17- 19-year-olds have risen from one in six in 2020 and 2021 to one in four in 2022. In the 20- to 23-year olds, rates of probable mental disorder were similar in 2021 and children's behavioural and attentional difficulties had, on average, remained relatively stable since between July 2021 and March 2022, while children's emotional difficulties had increased during this time period.
- Girls and young women were more likely than boys and young men to screen positive for a possible eating disorder in all three age groups (7-10 year olds, 17-19 year olds and 20-23 year olds), and in every wave where each group was surveyed.
- Girls and young women were more likely to have tried to harm themselves in their lifetime than boys and young men.

Department for Education State of the Nation 2022 (published Feb23)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

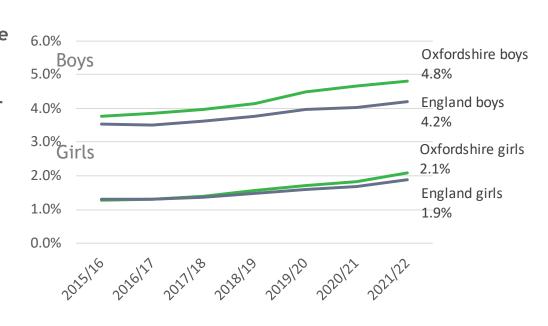
Social, emotional and mental health needs in school pupils with Special Educational Needs

The measure below shows the number of pupils with SEN support or an Education, Health and Care plan where the primary need is social, emotional and mental health, expressed as a percentage of all school pupils. It is likely that there are pupils with social, emotional and mental health needs that are not reflected in this dataset. The National Clinical Practice Guidelines published by the British Psychological Society state that children with learning or physical disabilities have a higher risk of developing a mental health problem compared to the national population.

Similar to the national trend, Oxfordshire has an increasing percentage of children with social, emotional and mental health needs, with a higher prevalence in boys.

Percentage of all state school children with social, emotional and mental health needs -Oxfordshire and England to 2021-22

Special educational needs in England, Academic Year 2021/22 - Explore education statistics - GOV.UK (explore-education-statistics.service.gov.uk)- Next update June23





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

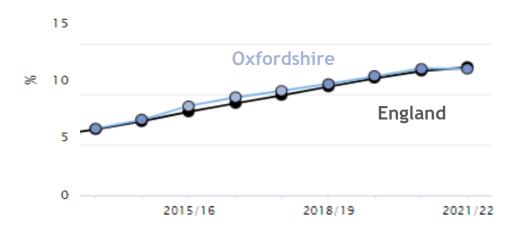
Finding out more

Mental Health - Depression

Depression affects different people in different ways but it can include some or all of the following symptoms: feelings of sadness and hopelessness; losing interest in things; feeling tearful; feeling constantly tired, sleeping badly, having no appetite. It can result in significantly reduced quality of life for the patient their family and carers.

- In 2021-22 there were 81,177 patients (aged 18 or over) with a diagnosis of depression registered by Oxfordshire's GP practices.
- The prevalence of recorded depression in Oxfordshire has stayed the same at 12.5%, slightly below the England average of 12.7%, however compared to 2017/18 there has been a 2% increase in patients with depression.

The percentage of patients aged 18 and over with depression, as recorded on practice disease registers, to 2021-22



Mental Health and Wellbeing JSNA - OHID (phe.org.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Self Harm

Self-harm is an expression of personal distress and there are varied reasons for a person to harm themselves irrespective of the purpose of the act. There is a significant and persistent risk of future suicide following an episode of self harm.

- In Oxfordshire rates of self-harm hospital admissions in children and young people (aged 15-24 years) were similar to England for 2021/22. The rate of admissions for those aged 10-14 were better than England 197.3 versus 307.1.
- In 2021-22 there were 545 admissions for 10-24 year olds, equivalent to a rate of 402 per 100,000 population. This is similar to England.

Emergency hospital admissions as a result of self-harm 10-24 year age bands, rate per 100,000

		Oxon			Region	egion England England				
Indicator	Period	Recent Trend	Count	Value	Value	Value	Worst	Range	Best	
Hospital admissions as a result of self-harm (Persons, 20-24 yrs)			-	362.4	466.3	340.9	1,213.9		68.2	
Hospital admissions as a result of self-harm (Persons, 15-19 yrs)			-	644.8	845.5	641.7	1,729.4	Image: Control of the	196.5	
Hospital admissions as a result of self-harm (Persons, 10-14 yrs)	2021/22	-	-	197.3	346.3	307.1	785.4		69.8	

PHE Mental Health & Wellbeing Profile, also see OxWell School Survey 2021



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

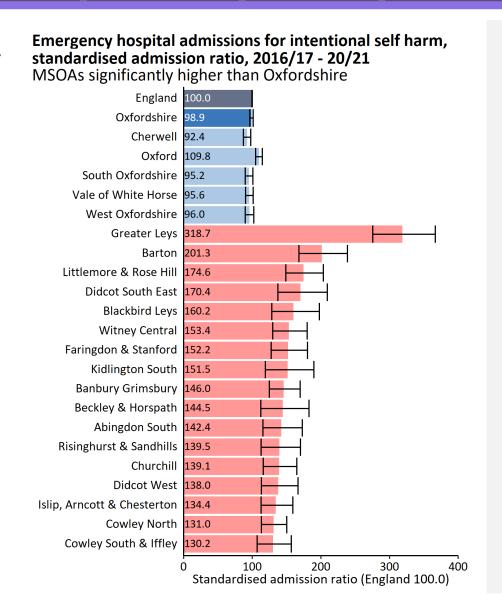
Finding out more

Inequalities - hospital stays for self-harm

- 23 of Oxfordshire's 86 Middle Layer Super Output Areas (MSOAs) had significantly higher rates of hospital stays for selfharm than England (combined 5 years of data 2015-16 to 2019-20)
- The areas with the highest rates for self-harm were Greater Leys, Barton, Littlemore & Rose Hill, and Blackbird Leys.

NB: There are concerns about the quality of this indicator.

From OHID <u>Local Health</u>
Explore inequalities data using our interactive dashboard





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Emergency hospital admissions due to falls

Falls are the largest cause of emergency hospital admissions for older people, and significantly impact on long term outcomes. Falls at home are a reason why people move from their own home to long-term nursing or residential care.

- In 2021-22 there were 2,890 hospital admissions due to falls in people aged 65 and over in Oxfordshire. The number of hospital admissions for falls in people aged 80 and over in 2021-2022 was 2,005.
- The rate of hospital admissions for falls in older people is similar to the national rate (2,103 per 100,00 population in Oxon compared to 2,100 in England).

Emergency hospital admissions due to falls in people (standardised rate per 100,000)

		Oxon			England			
Indicator	Period	Recent Trend	Count	Value	Value	Worst	Range	Best
Emergency hospital admissions due to falls in people aged 65 and over (Persons, 65+ yrs)		-	2,890	2,103	2,100	3,272		1,394
Emergency hospital admissions due to falls in people aged 65 to 79 (Persons, 65-79 yrs)	2021/22		885	931	993	1,674		687
Emergency hospital admissions due to falls in people aged 80 plus (Persons, 80+ yrs)	2021/22	-	2,005	5,501	5,311	8,251		3,354

<u>Productive Healthy Ageing Profile - Data - OHID (phe.org.uk)</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Emergency hospital admissions due to falls

- The rate of hospital admissions for falls in older people in Oxfordshire districts varied.
- Cherwell was statistically above (worse than) the England average.
- Oxford, Vale of White Horse and West Oxfordshire were similar to average and South Oxfordshire was better than average.

Emergency hospital admissions due to falls in people aged 65 and over (standardised rate per 100,000)

Area ▲ ▼	Count ▲▼	Value ▲▼		95% Lower Cl	95% Upper Cl
England	223,101	2,100		2,091	2,109
districts	-	-		-	-
Oxford	465	2,298	<u> </u>	2,093	2,518
Cherwell	660	2,295	H	2,123	2,477
Vale of White Horse	610	2,084	H	1,922	2,257
West Oxfordshire	540	2,012		1,845	2,189
South Oxfordshire	615	1,892	— —	1,744	2,048

<u>Productive Healthy Ageing Profile - Data - OHID (phe.org.uk)</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Causes of death



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

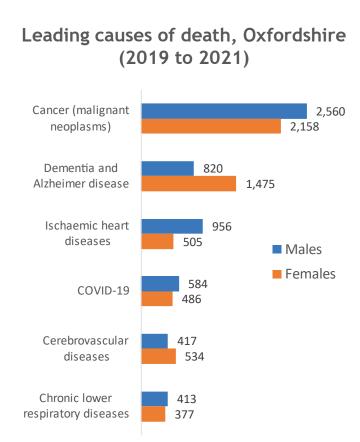
Suicide and deaths from drug misuse

Road casualties

Finding out more

Leading causes of death (all ages)

- For the combined years 2019 to 2021, Cancer was the leading cause of death in males and females in Oxfordshire, accounting for 24% of male deaths and 22% of female deaths.
- Cancer is also the leading cause of death in England.
- In females, the second main cause of death was Dementia and Alzheimer Diseases (15%). In males Heart Disease remained the second main cause of death (9%).
- COVID-19 deaths accounted for 5% of all male and female deaths for combined years 2019 to 2021.



ONS from NOMIS



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

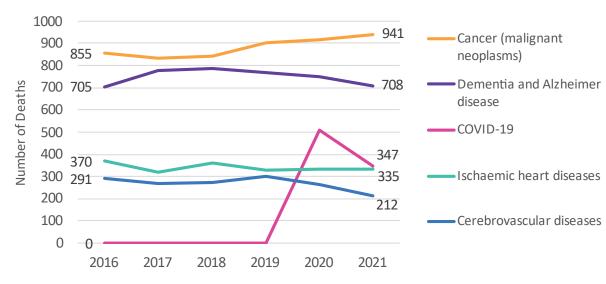
Road casualties

Finding out more

Leading causes of death in people aged 75 years and over

- Cancers remain the leading cause of death amongst the 75+ age group in Oxfordshire with 941 deaths in 2021 (22% of the total).
- In each year 2020 and 2021, the number of deaths due to Dementia and Alzheimer's disease declined, the proportion of deaths remained at 17%.
- COVID-19 deaths in people aged 75+ accounted for 11% of deaths in 2020 and 8% of deaths in 2021.

Leading causes of death in people aged 75 years and over, Oxfordshire 2016 to 2021



ONS from NOMIS



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Mortality indicators from Public Health Outcomes Framework

• Oxfordshire was ranked as significantly better than the England values on 10 of 13 key public health outcomes indicators related to mortality and similar to average on the remaining 3

health outc indicators.	omes indica	itors related	l to
● Better 95% ● Similar ● W	Vorse 95% ONG	ot applicable	Infa
Recent trends: — Could not be calculated	→ No significant change	↑ Increasing & getting worse	yr) Und card (Pe Und card Con Und Card Card Card Card Card Card Card Car

England Oxon Region England Indicator Count Value Value Value Worst Range fant mortality rate (Persons, <1 2019 - 21 nder 75 mortality rate from all 76.0 133.9 rdiovascular diseases 2021 320 52.1 63.1 ersons, <75 yrs) nder 75 mortality rate from rdiovascular diseases 2021 121 19.7 24.2 30.2 54.3 nsidered preventable ersons, <75 yrs) nder 75 mortality rate from 2021 112.9 121.5 189.8 ncer (Persons, <75 vrs) nder 75 mortality rate from ncer considered preventable 2021 39.6 43.5 50.1 100.7 ersons, <75 yrs) nder 75 mortality rate from liver 2021 17.5 21.2 13.4 sease (Persons, <75 yrs) nder 75 mortality rate from liver 15.8 18.9 47.7 sease considered preventable 2021 11.9 ersons, <75 yrs) nder 75 mortality rate from respiratory disease (Persons. 2021 17.2 21.4 26.5 <75 yrs) Under 75 mortality rate from respiratory disease considered 2021 10.7 13.3 15.6 40.1 preventable (Persons, <75 yrs) Mortality rate from a range of specified communicable 2021 7.4 9.4 21.6 diseases, including influenza (Persons, All ages) Suicide rate (Persons, 10+ yrs) 2019 - 21 10.0 10.6 Aug 2019 Excess winter deaths index 230 12.6% 17.4% 17.4% 50.2% - Jul (Persons, All ages) 2020 Aug 2019 Excess winter deaths index (age 180 21.7% 20.7% 20.8% 61.5% - Jul 85 plus) (Persons, 85+ yrs) 2020

Public Health Outcomes Framework



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

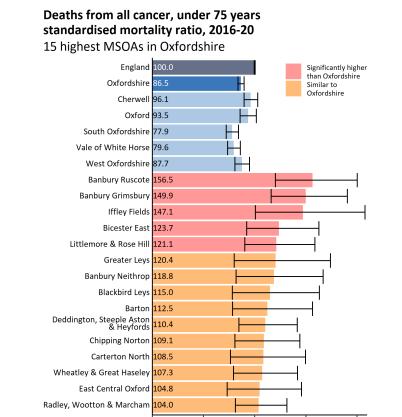
Suicide and deaths from drug misuse

Road casualties

Finding out more

Mortality and inequalities

Some areas of Oxfordshire experience significantly higher standard mortality ratios (SMR) than the average. The charts below show top 15 (out of 86) Middle Layer Super Output Areas (MSOAs) with the highest rates of deaths from cancer and deaths from circulatory diseases for people aged under 75.



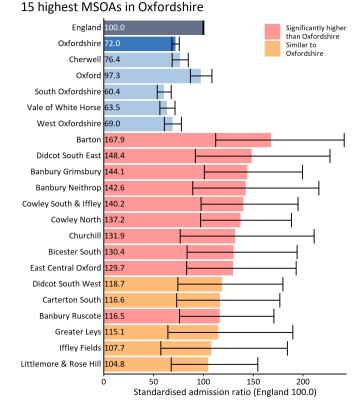
100

Standardised admission ratio (England 100.0)

150

OHID Local Health

Deaths from circulatory disease, under 75 years standardised mortality ratio, 2016-20



Explore inequalities data using our interactive dashboard



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

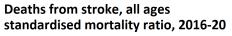
Suicide and deaths from drug misuse

Road casualties

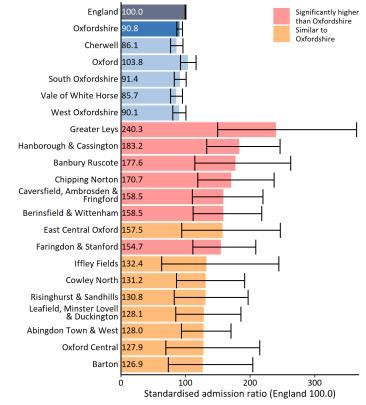
Finding out more

Mortality and inequalities

• The charts below show the top 15 (out of 86) Middle Layer Super Output Areas (MSOAs) with the highest rates of deaths from stroke (all ages).



15 highest MSOAs in Oxfordshire



OHID Local Health

Explore inequalities data using our interactive dashboard



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

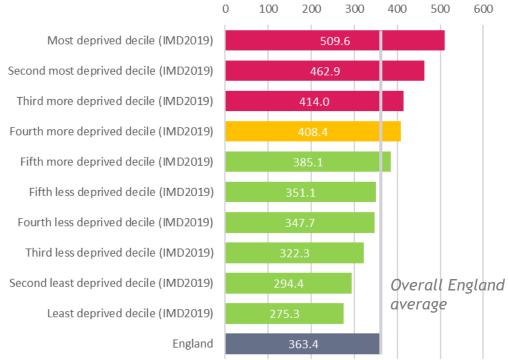
Road casualties

Finding out more

Premature mortality attributable to socioeconomic inequality - national

• The under 75 mortality rate for a District or Unitary Authority in England is closely associated with its level of deprivation, with more <u>deprived areas</u> experiencing higher premature mortality rates in general.





Not available for Oxfordshire.
Deprivation deciles are based on the Index of Multiple Deprivation 2019 district local authority score. Red statistically worse than England, yellow statistically similar to England and green statistically better than England. Mortality Profile - Data - OHID (phe.org.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

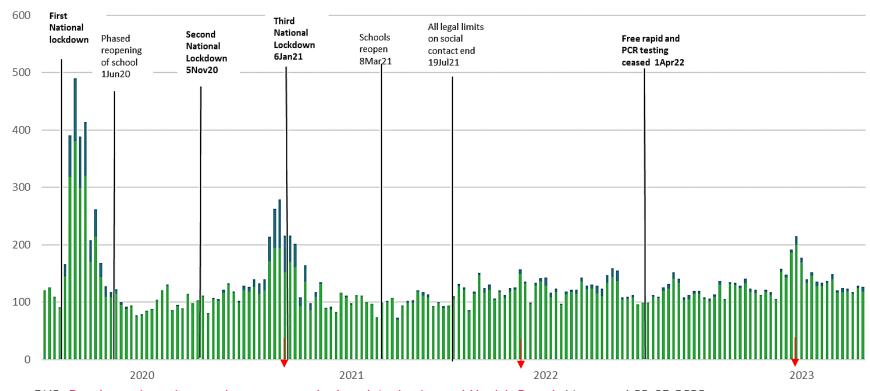
Road casualties

Finding out more

Deaths from coronavirus (COVID-19)

• Between April 2020 and March 2023 there was a total of 1,578 deaths with COVID-19 on the death certificate in Oxfordshire, 8% of the total number deaths.

Registered deaths by week of occurrence, Oxfordshire, April 2020 to March 2023



ONS, <u>Deaths registrations and occurrences by Local Authority and Health Board</u> *Accessed 03.05.2023 For more information about COVID-19, see <u>Finding out more - coronavirus (COVID-19)</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

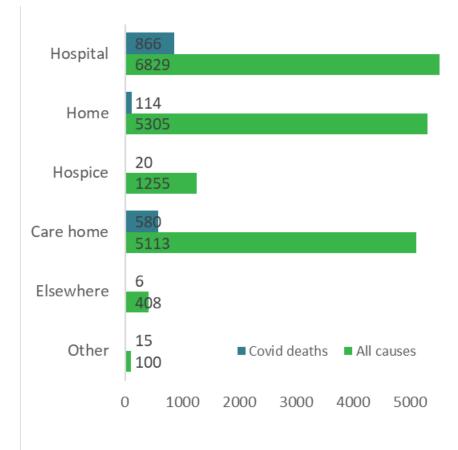
Road casualties

Finding out more

COVID-19 Deaths by setting

- Between April 2020 and March 2023, Oxfordshire's COVID-19 deaths accounted for 8% of overall deaths and:
 - 13% of deaths in hospital
 - 1% of deaths in care homes
 - 2% of deaths at home
 - 2% of deaths in a hospice

Count of registered deaths by setting, Oxfordshire, April 2020 to March 2023



ONS, <u>Deaths registrations and occurrences by Local Authority and Health Board</u> Accessed 03.05.2023 For more information about COVID-19, see <u>Finding out more - coronavirus (COVID-19)</u>



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

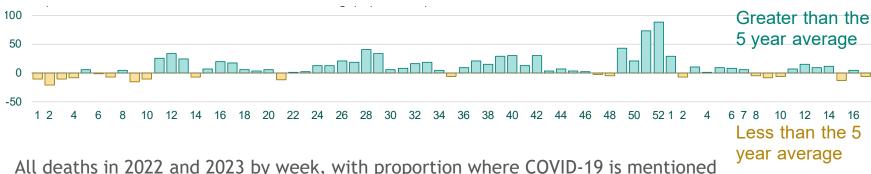
Road casualties

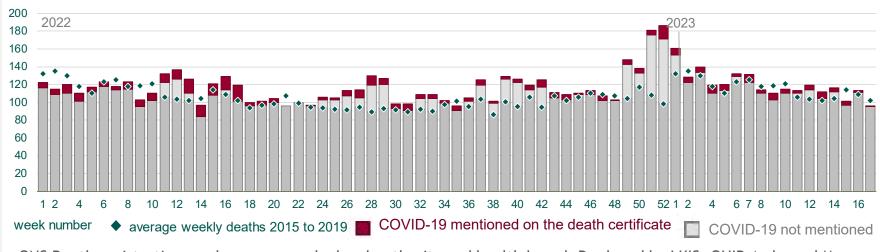
Finding out more

Excess deaths

Excess deaths are defined as the number of deaths above or below the five-year average.

Excess deaths (2022 and 2023 deaths minus 2015 to 2019 average) up to 28 April 2023





ONS Death registrations and occurrences by local authority and health board. Produced by LKIS, OHID (released May 2023)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Avoidable mortality - an introduction

The Office for National Statistics (ONS) defines avoidable mortality as...

Avoidable mortality:

refers to deaths that are preventable or treatable.

Treatable mortality:

refers to causes of death that can be mainly avoided through timely and effective healthcare interventions, including secondary prevention and treatment (that is, after the onset of disease, to reduce casefatality).

Preventable mortality:

refers to causes of death that can be mainly avoided through effective public health and primary prevention interventions (that is, before the onset of diseases or injuries, to reduce incidence). Examples could include deaths associated with risk factors such as obesity, inactivity, smoking and alcohol consumption.

Avoidable mortality in Great Britain - Office for National Statistics (ons.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Treatable mortality

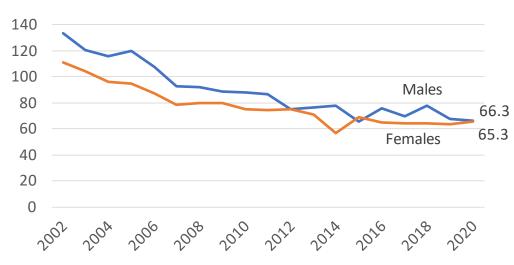
- Between 2013 and 2020 rates of treatable mortality for males and females in Oxfordshire have remained similar.
- In 2020, NHS Oxfordshire was ranked as having the third lowest (i.e. third best) rate of treatable mortality of the 106 Clinical Commissioning Group areas (area definitions at that time) in England for males and within the lowest quarter (84 out of 106) for females.

Treatable mortality refers to causes of death that can be mainly avoided through timely and effective healthcare interventions.

Avoidable mortality in Great Britain - Office for National Statistics (ons.gov.uk)

NOTES: 1. Age-standardised mortality rates are expressed per 100,000 people and standardised to the 2013 European Standard Population.
2. Figures exclude deaths of non-residents. 3. Figures are for deaths registered in each calendar year. 4. Figures are based on boundaries as of August 2021.

Age-standardised treatable mortality rates for patients registered to Oxfordshire GP practices, 2002 to 2020



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

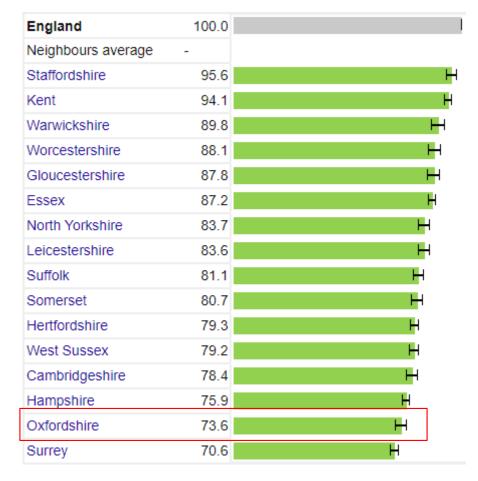
Finding out more

Preventable mortality

- In the five-year period, 2016 to 2020, Oxfordshire had a total of 3,230 deaths considered preventable in people aged under 75 years.
- Oxfordshire had the second lowest rate of deaths from causes considered preventable under 75 years (calendar years 2016 to 2020) in its group of statistical neighbours and was well below (better than) the national average.

Public health profiles - OHID (phe.org.uk)
Preventable mortality refers to causes of death that can be mainly avoided through effective public health and primary prevention interventions. Figures are for deaths registered in five-year calendar periods.* Statistical neighbour models provide one method for benchmarking progress. For each local authority (LA), these models designate a number of other LAs deemed to have similar characteristics. Next update August23

Deaths from causes considered preventable, under 75 years (2016 to 2020) indirectly standardised ratio per 100 Oxfordshire county vs statistical neighbours





Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

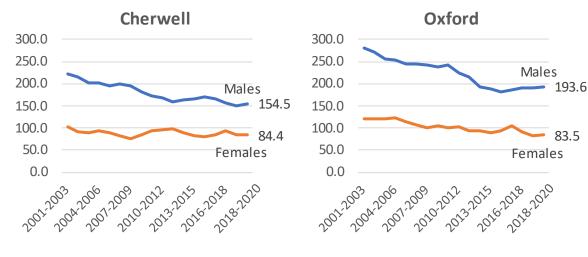
Road casualties

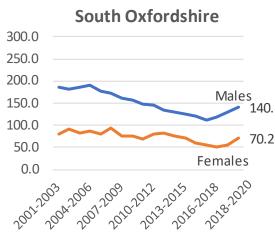
Finding out more

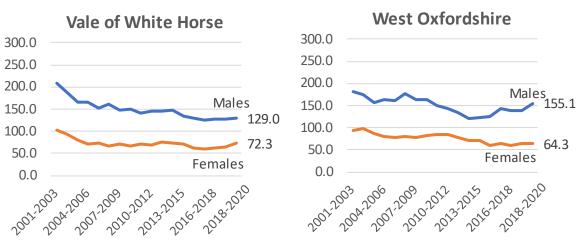
Preventable mortality

- The highest rate of preventable morality for males in the three vears 2018-2020 was in Oxford City.
- The highest rate for females was in Cherwell.

Age-standardised preventable mortality rates to 2018-20







Avoidable mortality in Great Britain - Office for National Statistics (ons.gov.uk); Preventable mortality refers to causes of death that can be mainly avoided through effective public health and primary prevention interventions. Figures are for deaths registered in three-year calendar periods.

64.3



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

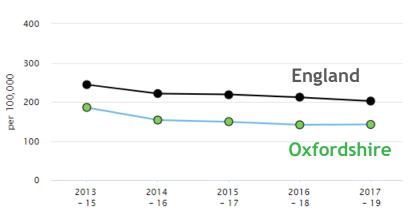
Road casualties

Finding out more

Preventable mortality - tobacco-related deaths

- For the three years (combined) 2017 to 2019, the number of tobaccorelated deaths in Oxfordshire was an estimated 1,698.
- The rate of smoking attributable mortality in Oxfordshire has remained similar since 2014-16.
- The rate per 100,000 in Oxfordshire in 2017-19 was 142.3 and was significantly below the England rate (202.2).

Deaths attributable to smoking, directly age standardised rate per 100,000 for persons aged 35 years+ to 2017-19



From Local Tobacco Control Profiles - Data - OHID (phe.org.uk) Mortality data from the ONS mortality file; ONS mid-year population estimates; Smoking prevalence data from Annual Population Survey; and relative risks from the Royal College of Physician's Report 'Hiding in Plain Sight'. The estimated number of smoking-attributable deaths is calculated by multiplying the observed number of deaths (smoking attributable deaths) by the SAFs (Smoking Attributable Fraction).



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

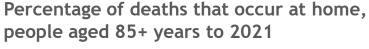
Road casualties

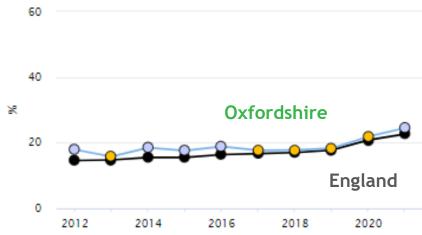
Finding out more

Deaths occurring at home

- An increasing proportion of deaths in Oxfordshire (and nationally) happen at home*.
- In people of all ages in Oxfordshire, the proportion of all deaths that occurred at home increased from 23.2% of the total in 2012 to 28.4% of the total in 2021.
- In older people (85+ years), the proportion of deaths at home has increased from 17.9% of the total in 2012 to 24.5% in 2021.

*'Home' is defined as a person's usual place of residence, excluding care homes or other establishments where people live communally, for example monasteries, hostels, prisons and children's homes. It is important to recognise that the 'at home' group does not include the many very old people who die in a care home and who may have been long-term residents of that care home.





Palliative and End of Life Care Profiles - Data - OHID (phe.org.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

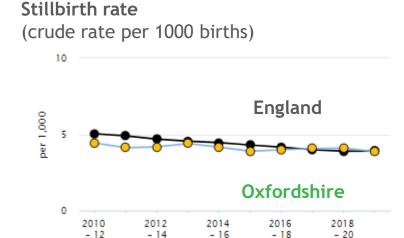
Suicide and deaths from drug misuse

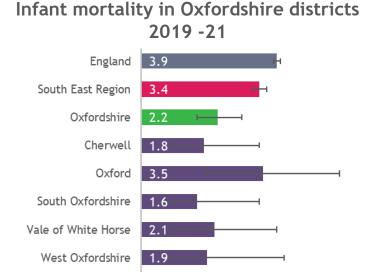
Road casualties

Finding out more

Stillbirth and neonatal mortality

- In the three year period between 2019 and 2021, there were 84 stillbirths in Oxfordshire. The rate has decreased from 4.1 to 3.9 per 1,000 births from 2018/20 to 2019/21, this is the same as the England rate (3.9).
- Neonatal mortality includes stillbirths and deaths under 28 days. Latest data for 2020 indicates that there were 31 incidences of neonatal mortality in Oxfordshire.
- Infant mortality rate measures infant deaths under 1 year of age (per 1000 live births). There were 47 infant deaths during 2019-21 in Oxfordshire.
- o In 2019-21, infant mortality rates were higher in most <u>deprived areas</u> than in least deprived areas in England (5.5 deaths per 1,000 in most deprived areas compared with 2.5 per 1,000 live births in least deprived).





<u>Public health profiles - OHID (phe.org.uk)</u>; <u>Public Health Outcomes Framework</u>; <u>Child and infant mortality in England and Wales: 2021</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

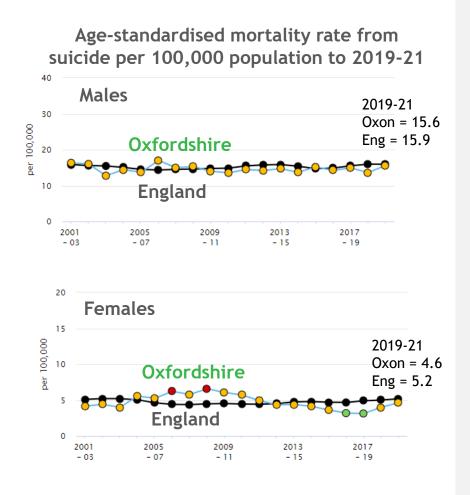
Road casualties

Finding out more

Deaths from suicide

- For the three years 2019 to 2021, there were 181 deaths from suicide in Oxfordshire, 138 (76%) males and 43 (24%) females.
- The total suicide rate in Oxfordshire (for all persons, males and females) in 2019-21 was similar to the England rate.
- o In 2018, local analysis identified the following most common contributing factors to deaths from suicide in Oxfordshire: relationship issues; bereavement; financial problems; alcohol; chronic physical health conditions.

<u>Public health profiles - OHID (phe.org.uk)</u> <u>Oxfordshire Suicide and Self-Harm Prevention Strategy</u>



Note differences in vertical scale



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

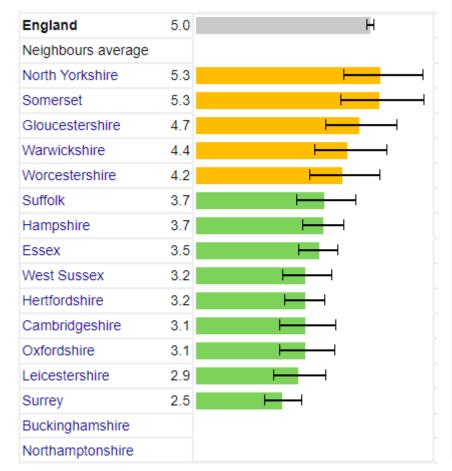
Road casualties

Finding out more

Deaths from drug misuse

- For the three years (combined) 2018 to 2020, Oxfordshire had a total of 63 deaths from drug misuse, 46 (73%) males and 17 (27%) females.
- Oxfordshire had one of the lowest rates of deaths from drug misuse in its group of statistical neighbours and was below the national average.

Deaths from drug misuse (persons)
2018 to 2020 directly standardised rate
per 100,000
Oxfordshire and nearest neighbours



Mortality Profile - Data - OHID (phe.org.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Oxfordshire Road Casualties

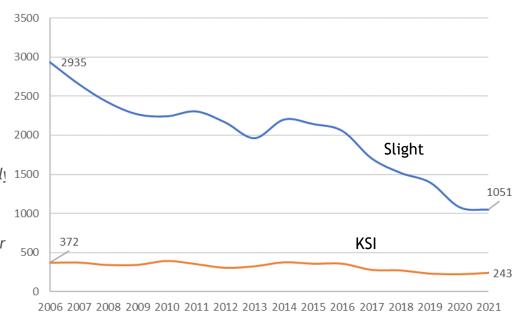
- In 2022, there was a total of 974 police-reported road casualties in Oxfordshire of which 229 were the more serious "killed or seriously injured" (KSI). This was a decline of 7% compared to 2021 (1,051 in total, including 243 KSI).
- The number of people killed or seriously injured (KSI) has fallen over time.

Total 'Slight' and 'Killed or Seriously Injured' casualties in Oxfordshire by year 2006 to 2021

'Serious' casualties include those requiring in-patient treatment and injuries such as bone fractures, severe internal injuries and severe cuts (i.e. requiring stitches) and injuries resulting in death more than 30 days following the initial accident.

'Slight' injuries include sprains, neck whiplash injury (not necessarily 1500 requiring medical treatment), bruises and slight shock requiring 1000 roadside attention.

The term "KSI" stands for "Killed or Seriously Injured", and is used to highlight the higher severity casualties. Oxfordshire County Council Road Casualty Report Also see Crashmap.co.uk



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Oxfordshire serious road casualties by district

- Fatal and serious injuries from road accidents for the districts in Oxfordshire in 2021 are shown in the table below.
- Cherwell and Oxford had the highest number of serious injuries 51 in each district. All districts had at least one fatality during 2021.
- South Oxfordshire had the highest number of overall fatalities (6).

Number of people killed or seriously injured in road accidents 2021

		Pedestrian	Pedal cycle	Motor cycle	Car	Other	Total
Cherwell	Fatal	0	0	0	4	0	4
	Serious	2	7	12	23	2	51
Oxford	Fatal	0	2	0	0	0	2
	Serious	16	18	14	3	0	51
South Oxfordshire	Fatal	1	2	1	2	0	6
	Serious	6	8	8	25	2	49
Vale of White Horse	Fatal	0	0	1	2	0	3
	Serious	4	8	15	13	1	41
West Oxfordshire	Fatal	0	0	0	3	0	3
	Serious	2	7	5	15	4	33

Oxfordshire County Council Road Casualty Report



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Finding out more

- OHID Oxfordshire Health Profile
- Oxfordshire JSNA Local Area Inequalities Dashboard
- Prevention concordat for better mental health (includes various Oxfordshire organisations listed as signatories).
- HS2 Mental health and wellbeing progress report
- Premature mortality in adults with severe mental illness
- NHS Digital Health Survey for England
- OHID Mortality Profile
- Mortality data available from the Office for National Statistics
- NHS Digital General Practice data hub
- Crashmap.co.uk contains information about reported crashes from 1999 onwards and is completely free to view details about collision locations, dates, times, and the number of casualties and vehicles associated.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Health conditions

COVID-19

Cancer

Cardiovascular disease

Musculoskeletal conditions

Sensory impairment

Learning Disabilities

Personal wellbeing & Mental health

Self-harm

Hospital admissions due to falls

Causes of death

Leading causes of death

Mortality and inequalities

Avoidable mortality

Deaths at home

Stillbirths and neonatal mortality

Suicide and deaths from drug misuse

Road casualties

Finding out more

Finding out more - coronavirus (COVID-19)

- Frequently updated data sources:
 - Gov.uk Coronavirus (COVID-19) in the UK
 - ONS (Weekly) Death registrations and occurrences by local authority and health board
 - ONS (Weekly) Number of deaths in care homes notified to the CQC
 - PHE Wider Impacts of COVID-19 on Health (WICH) monitoring tool
- Further analysis:
 - British Red Cross COVID-19 vulnerability index
 - PHE SARS-CoV-2 confirmed England deaths: report
 - ONS COVID-19 Health inequalities monitoring in England tool (CHIME)
 - ONS Wider impacts of COVID-19 on health monitoring tool



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 5

Behavioural determinants of health



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

This chapter...

- This chapter provides data on behavioural factors that affect health and wellbeing, such as healthy weight and physical activity, smoking and drinking alcohol, and sexual and reproductive health.
- For some topics it may be useful to refer to other JSNA chapters. For example, for healthy weight and physical activity, it may be useful to look at the Wider Determinants of Health chapter, which includes active travel, healthy place-shaping, and availability of healthy food.
- For other topics in this chapter it may be useful to look at the Service Use chapter which includes information on Public Health commissioned services including smoking cessation, and specialist sexual health services.
- Further JSNA resources are available via the JSNA page of Oxfordshire Insight.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Summary (1)

- Behavioural risk factors account for a large proportion of the local burden of disease.
- Just over 1 in 10 of Oxfordshire's adult population (10.2%) were estimated to be current smokers in 2021. The rate of smoking in working age people in manual occupations was significantly higher.
- National estimates show that 3% of school pupils aged 11 to 15 were current smokers, equivalent to around 1,200 pupils in Oxfordshire.
- England data (2021) for school pupils aged 11-15 shows that 5% of girls and 4% of boys were regular e-cigarette users. 61% of pupils say their usual source of e-cigarette is being given them by someone; 57% say they usually buy them from a shop.
- The proportion of men and women who drink alcohol (nationally) is highest amongst males aged 55 to 74. Adults in the highest income households are more likely to drink over 14 units per week than those in lower income households.
- Hospital admission episodes for alcohol-specific and alcohol-related conditions in Oxfordshire remain below national and regional rates.

- The rate of hospital admissions due to alcoholspecific conditions in under 18s for females in Oxfordshire was significantly higher (worse than) the regional and national averages. Rates for males under 18 were similar to average.
- Over half of Oxfordshire adults are classified as overweight or obese (60%).
- Over two thirds (69%) of adults on Oxfordshire GP practice Learning Disabilities registers were measured as overweight or obese, 9 percentage points above the total adult population.
- As of 2021/22 in Oxfordshire around one in five children in Reception (aged 4-5 years), and just over one in three children in Year 6 (aged 10-11 years) were overweight or obese.
- Obesity prevalence was higher in boys than in girls in Oxfordshire, and the difference between boys and girls increases between Reception and Year 6.
- Children living in more deprived areas in Oxfordshire (and nationally) were more likely to be obese.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Summary (2)

- A slightly higher percentage of Oxfordshire adults meet the recommended physical activity guideline (150 minutes per week) than national and regional figures. Almost 1 in 4 adults do not meet the guidelines.
- Under half (47%) of Oxfordshire's children and young people were meeting the guidelines for physical activity (as of 2021/22), similar to the national average. An estimated 49,300 children in Oxfordshire's schools were not doing enough physical activity.
- National data shows that boys were more likely than girls to be physically active and that activity rates were higher for the White and Mixed ethnic groups.
- The rate of new Sexually Transmitted Infection (STI) diagnoses (excluding chlamydia in under 25s) in Oxfordshire remains significantly lower than national and regional rates.

- There was an increase in the rate of teenage conceptions in Oxfordshire between 2020 and 2021. The rate remains lower than the national average.
- Rates of breastfeeding in Oxfordshire remain well above the national average.
- Just under 1 in 5 of children aged 5 in Oxfordshire had tooth decay, below (better than) the national average.
- Nationally, the proportion of people participating in informal volunteering dropped significantly, rates of formal volunteering also declined.
- Between 2018 and 2022, gambling overall has declined (national data) with a slight increase in the past 3 years. There has been a shift from in-person to online gambling.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

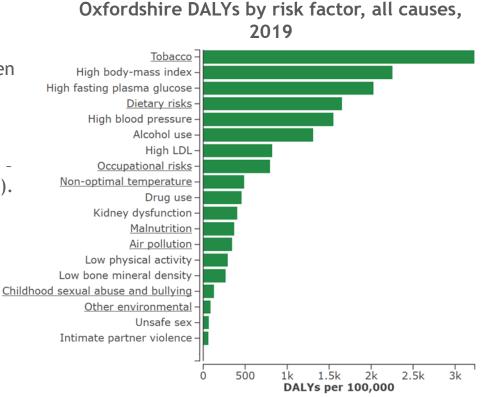
Volunteering

Gambling

Finding out more

Behavioural risk factors of disease

- In Oxfordshire, it was estimated that health-related behaviours accounted for a quarter (26%) of the total burden of disease in 2019.
- This is equivalent to 47,600 years of healthy life lost (measured using Disability Adjusted Life Years (DALYs) see note below for more information).
- The leading behavioural risk factors were:
 - Tobacco
 - Dietary risks and High BMI
 - Alcohol use
 - Drug use



One Disability Adjusted Life Year (DALY) can be thought of as one lost year of "healthy" life. DALYs are calculated as the sum of the Years of Life Lost (YLL) due to premature mortality in the population and the Years Lost due to Disability (YLD) for people living with the health condition or its consequences.

The sum of DALYs for a population is a measurement of the gap between current health status and the situation where the entire population lives to an advanced age, free of disease and disability.

Institute for Health Metrics and Evaluation (IHME), <u>GBD Compare</u>. (Accessed 19Apr23) World Health Organisation, <u>Metrics: Disability Adjusted Life Year (DALY)</u>



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Smoking, alcohol and drugs



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

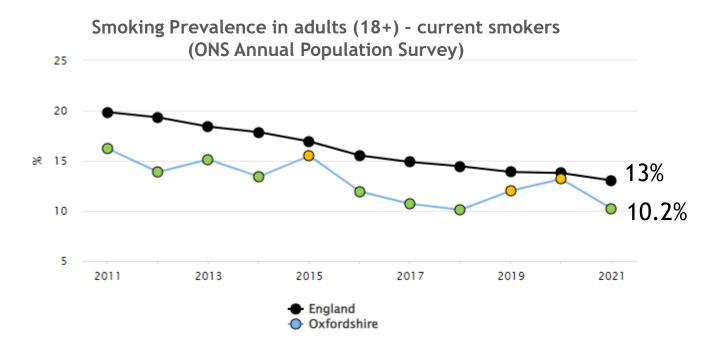
Volunteering

Gambling

Finding out more

Trend in smoking prevalence

• As of 2021, 10.2% of the adult population of Oxfordshire were estimated to be current smokers. This was significantly better than the England average (13%) and an apparent improvement since 2020 although the difference is not statistically significant.



<u>Local Tobacco Control Profiles - Data - OHID (phe.org.uk)</u>, note that this data is from the Annual Population Survey, alternative estimates are available from the GP patient survey



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Smoking prevalence by district

• Smoking prevalence in Oxfordshire districts were similar to the national average in 2021 with the exception of West Oxfordshire which was below (better than) the county and England averages.

Smoking Prevalence in adults 2021 (aged 18+)
Current smokers (ONS Annual Population Survey)

	value		95% Lower Cl	95% Upper Cl
England	13.0	Н	12.7	13.3
Oxfordshire Districts2			-	-
Vale of White Horse	12.8	 	7.4	18.1
Cherwell	12.5		6.7	18.4
Oxford	12.1		5.8	18.4
South Oxfordshire	9.2		4.4	14.0
West Oxfordshire	3.7		0.8	6.6

<u>Local Tobacco Control Profiles - Data - OHID (phe.org.uk)</u>, note that this data is from the Annual Population Survey, alternative estimates are available from the GP patient survey



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

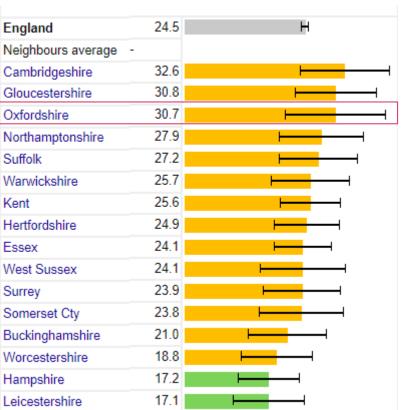
Finding out more

Smoking and occupation

- The Smoking Toolkit Study for England¹ (latest data Feb 2023) shows that people from manual occupations were significantly more likely to be smokers than those from professional/clerical occupations (17.7% vs 11.6%).
- According to the ONS Annual Population Survey (latest data for this indicator is 2020) the prevalence of smoking in working age adults in routine and manual occupations in Oxfordshire was 30.7%. This was well above the smoking prevalence for all adults in Oxfordshire in 2020 of 13%.

The prevalence is calculated by dividing the weighted number of self-reported smokers aged 18-64 years by total number of respondents (with a valid smoking status) aged 18-64 years in a subset of the routine and manual group, expressed as a percentage.

[1] Top Line Findings - Graphs - Smoking in England Local Tobacco Control Profiles - Data - OHID (phe.org.uk) ONS Annual Population Survey Smoking Prevalence in adults (18-64) in routine and manual occupations 2020, Oxfordshire vs nearest statistical neighbours





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Smoking prevalence by demographic groups - national

- Health Survey for England data from 2021 for those aged 16 years and over, shows that the likelihood of being a current smoker is higher for men (13%) than women (10%) and in younger age groups.
- Adults aged 25 to 34 were most likely to smoke (18%), with those aged 75 and over the least likely (4%).
- There is a significant difference in smoking prevalence by deprivation with the proportion of current smokers in the least deprived areas at 6%, compared with 19% in the most deprived areas.

Mental health and smoking - Oxfordshire

• GP Patient Survey data for 2021/22 shows that smoking prevalence in adults with a long term mental health condition in Oxfordshire was 19.8%, well above the rate of current smokers of 10.3% in Oxfordshire (GPPS).

Part 1: Smoking - NDRS (digital.nhs.uk)

Adult smoking habits in England - Office for National Statistics (ons.gov.uk)

<u>Public health profiles - OHID (phe.org.uk)</u> note that GP Patient Survey estimates of smokers differs from Annual Population Survey estimates.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

<u>Children smoking - national</u>

- In 2021, 3% of school pupils aged 11-15 in England were classified as current smokers. This value is lower than in 2018 (5%) and 2016 (6%). The proportion has generally declined over time since 1996, when 22% of pupils were current smokers.
- In Oxfordshire, this was equivalent to around 1,200 pupils aged 11-15 currently smoking (based on ONS 2020 population estimate).
- Current smoking prevalence was highest among white pupils (4%), and lowest among Asian (1%) pupils.
- The likelihood of being a current smoker increased with: age; drinking alcohol; drug use; ecigarette use; truancy; number of current smokers at home; having friends who smoke.
- Low wellbeing was more likely amongst pupils who had recently smoked, drunk alcohol and/or had taken drugs. Pupils who had recently* smoked, drunk alcohol and taken drugs were more likely to report low levels of life satisfaction (57%) compared with pupils who have only done one of these (35%), and those who have done none of these (18%).

Smoking, Drinking and Drug Use among Young People in England - NHS Digital (latest data is 2021, updated every 2 years) *recently refers to smoking in the last week, drinking alcohol in the last week, and taking drugs in the last month



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

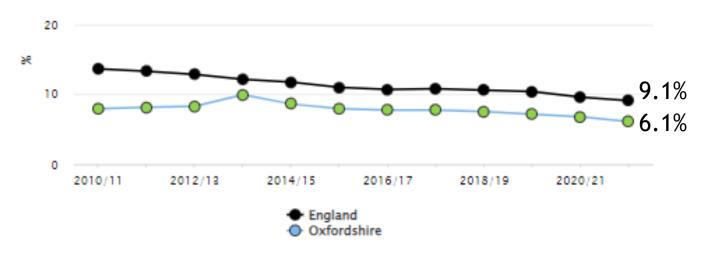
Finding out more

Smoking in pregnancy

Smoking in pregnancy has well known detrimental effects for the growth and development of the baby and health of the mother. These include complications during labour and an increased risk of miscarriage, premature birth, <u>stillbirth</u>, <u>low birth-weight</u> and sudden unexpected death in infancy.

• The latest data for 2021-22, shows that smoking prevalence at time of delivery in Oxfordshire was 6.1%. This remains significantly lower than England (9.1%).

Smoking prevalence at time of delivery to 2021-22



<u>Local Tobacco Control Profiles - Data - OHID (phe.org.uk)</u>; number of women smoking at time of delivery as a percentage of maternities where smoking status is know.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

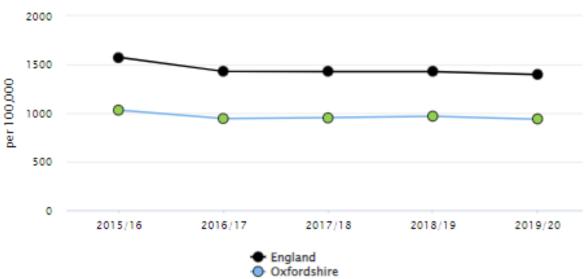
Finding out more

Smoking attributable hospital admissions

Smoking accounts for approximately 5.5% of the NHS budget. Admissions to hospital due to smoking related conditions not only represent a large demand on NHS resources, but can also be used as a proxy for variations in smoking related ill health in the general population across England.

- In 2019-20, there was an estimated total of **3,720 hospital admissions** attributable to smoking in Oxfordshire.
- The rate of smoking attributable hospital admissions was significantly lower in Oxfordshire than in the South East and England.

Smoking attributable hospital admissions Directly standardised rate per 100,000



<u>Local Tobacco Control Profiles</u> <u>- Data - OHID (phe.org.uk)</u>

The estimated number of smoking-attributable hospital admissions is calculated by multiplying number of hospital admissions by the SAFs (Smoking Attributable Fraction)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

E-cigarette use and vaping - national

Although not risk-free, e-cigarettes are less harmful than smoking. Using a nicotine-containing e-cigarette makes it much more likely someone will quit successfully than relying on willpower alone, but it's important to use regulated e-liquids and never risk vaping home-made or illicit e-liquids or adding substances. Public Health England's advice is that:

- For smokers: You should stop smoking completely. Getting expert support combined with using an ecigarette doubles your chances of quitting successfully.
- For people who vape nicotine: if you are still smoking, you should stop and switch completely to vaping, then come off nicotine when you are confident you won't relapse to smoking.
- If you have never smoked: Don't vape.
- According to the 2021 Health Survey for England, 5% of all adults (aged 16+) in 2021 were current e-cigarette users, 6% of men and 5% of women.
- In 2021, the proportion of adults who currently used e-cigarettes varied with age. It was highest among those aged between 25 and 34 (7%) and lowest among those aged 75 and over (2%).
- A low percentage of people who had never smoked are users of e-cigarettes (1%).
- England data (2021) for school pupils aged 11-15 shows that 5% of girls and 4% of boys were regular e-cigarette users. 61% of pupils say their usual source of e-cigarette is being given them by someone; 57% say they usually buy them from a shop.

Part 2: E-cigarette use - NDRS (digital.nhs.uk)

Adult smoking habits in the UK - Office for National Statistics (ons.gov.uk)

Vaping and lung disease in the US: PHE's advice

Smoking, Drinking and Drug Use among Young People in England, 2021 - NHS Digital



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

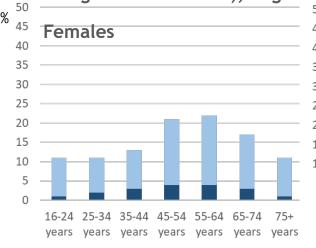
Finding out more

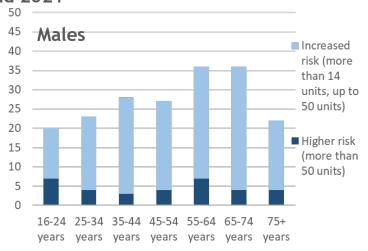
Alcohol consumption - national

Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually. The Chief Medical Officers' guideline for adults who drink regularly or frequently (i.e. most weeks) is that it is safest not to drink more than **14 units per week** on a regular basis.

- National survey data (2021) shows that 57% of men and 43% of women had drunk alcohol in the last week.
- A higher proportion of men (28%) than women (15%) drank at increasing or higher risk levels (over 14 units in the last week). The proportions of men and women who usually drank more than 14 units in a week varied across age groups, increasing up to the age of 55 to 64 (28% of all adults, 36% of men and 21% of women).

Prevalence of drinking over 14 units per week (increased or higher risk of harm), England 2021





NHS Digital Health Survey for England 2021 Part 3: Drinking alcohol -NDRS (digital.nhs.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

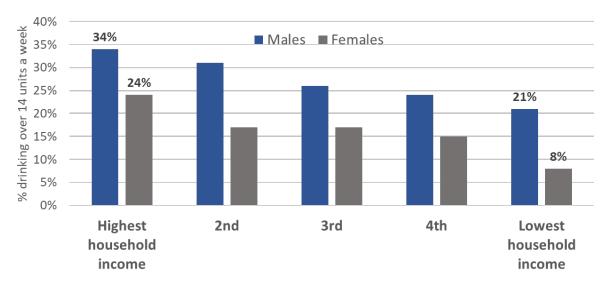
Gambling

Finding out more

Alcohol consumption by household income - national

- Health Survey for England (2021) data shows that the proportions of men and women who reported drinking over 14 units of alcohol weekly increased with household income.
- Among men, the highest proportion of those who drank 14 or more units was in highest income households: 34%, compared with 22% in the lowest income households.
- Similarly, among women, the highest proportion of those who drank alcohol at increased or higher levels was in the highest income households: 24%, compared with 9% in the lowest income households.

Prevalence of drinking over 14 units a week (at increased or higher risk of harm) by income and sex - England 2021



NHS Digital Health Survey for England 2021 Part 3: Drinking alcohol - NDRS (digital.nhs.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

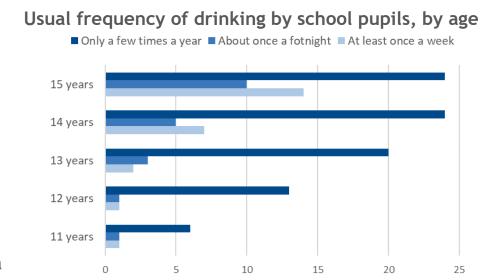
Volunteering

Gambling

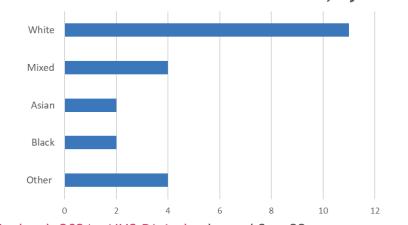
Finding out more

Alcohol drinking in young people - national

- According to the Smoking, Drinking and Drug Use among Young People 2021 survey, 6% of all pupils aged 11-15 years said they usually drank alcohol at least once per week.
- A further 11% of pupils said they usually drank between once a fortnight and once a month, meaning a total of 17% who said they usually drank alcohol at least once a month.
- The proportion usually drinking once a week increased with age, from 1% of 11 year olds to 14% of 15 year olds.
- White pupils were most likely to have had an alcoholic drink in the last week, with 11% having done so.
 - This compares with 4% of Mixed ethnicity pupils, 4% of Other ethnic background, 2% Black pupils and 2% of Asian pupils.







Smoking, Drinking and Drug Use among Young People in England, 2021 - NHS Digital released Sept22



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Alcohol-related hospital admissions FEMALES

• Alcohol-related hospital admissions for females in Oxfordshire in 2021/22 were significantly lower (better) than England with the exception of admission episodes for alcohol-related conditions (narrow definition) for females aged under 40, where Oxfordshire was similar to the national average.

Alcohol-related hospital admissions - Females

		Oxon		Region	England	England				
Indicator	Period	Recent Trend	Count	Value	Value	Value	Worst	Range	Best	
Admission episodes for alcohol-related cardiovascular disease (Broad) (Female, All ages	2021/22	-	690	186	202	223	325			
Admission episodes for alcohol-related conditions (Broad) (Female, All ages)	2021/22	-	2,366	654	815	906	2,098			501
Admission episodes for alcohol-related conditions (Narrow) (Female, All ages)	2021/22	-	823	228	279	341	636		0	147
Admission episodes for alcohol-related conditions (Narrow) - Under 40s (Female, <40 yrs)	2021/22		205	112.6	130.2	128.5	347.1			46.5
Admission episodes for alcohol-related conditions (Narrow) – 40 to 64 years (Female, 40 64 yrs)	2021/22	-	421	357	453	597	1,188		0	172
Admission episodes for alcohol-related conditions (Narrow) – 65+ years (Female, 65+ vrs)	2021/22	-	197	284	340	415	728		0	196
Admission episodes for alcohol-specific conditions (Female, All ages)	2021/22	-	1,015	283	384	390	1,360			148
Admission episodes for alcoholic liver disease (Broad) (Female, All ages)	2021/22	-	248	70.2	76.6	99.6	239.3		0	32.1
Admission episodes for mental and behavioural disorders due to use of alcohol (Broad) (Female, All ages)	2021/22	-	541	152	247	233	1,097		O	86

<u>Local Alcohol Profiles for England - OHID (phe.org.uk)</u>; chart downloaded 25Apr23 (no past trend data is available for these indicators as the ONS population denominator back series of population estimates from 2012 to 2020 is not yet published)

Broad definition: A measure of hospital admissions where either the primary diagnosis (main reason for admission) or one of the secondary (contributory) diagnoses is an alcohol-related condition. This represents a Broad measure of alcohol-related admissions but is sensitive to changes in coding practice over time.

Narrow definition: A measure of hospital admissions where the primary diagnosis (main reason for admission) is an alcohol-related condition. This represents a Narrower measure. Since every hospital admission must have a primary diagnosis it is less sensitive to coding practices but may also understate the part alcohol plays in the admission.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Alcohol-related hospital admissions MALES

• Alcohol-related hospital admissions for males in Oxfordshire in 2021/22 were significantly lower (better) than England with the exception of admission episodes for alcoholic liver disease, where Oxfordshire was similar to the national average.

Alcohol-related hospital admissions - Males

			Oxon		Region	England		England		
Indicator	Period	Recent Trend	Count	Value	Value	Value	Worst	Range	Bes	it
Admission episodes for alcohol-related cardiovascular disease (Broad) (Male, All ages)	2021/22	_	3,551	1,123	1,265	1,388	1,932			
Admission episodes for alcohol-related conditions (Broad) (Male, All ages)	2021/22	-	6,710	2,065	2,421	2,683	5,842			1,584
Admission episodes for alcohol-related conditions (Narrow) (Male, All ages)	2021/22	_	1,711	512	558	664	1,104			359
Admission episodes for alcohol-related conditions (Narrow) - Under 40s (Male, <40 yrs)	2021/22		273	150.8	189.9	202.9	530.6			107.9
Admission episodes for alcohol-related conditions (Narrow) – 40 to 64 years (Male, 40-64 yrs)	2021/22	_	811	708	754	954	1,670		0	383
Admission episodes for alcohol-related conditions (Narrow) – 65+ years (Male, 65+ yrs)	2021/22	_	627	1,047	1,109	1,275	2,313			856
Admission episodes for alcohol-specific conditions (Male, All ages)	2021/22	_	2,080	616	810	879	3,758			300
Admission episodes for alcoholic liver disease (Broad) (Male, All ages)	2021/22	-	702	210.8	169.2	213.1	532.5			66.5
Admission episodes for mental and behavioural disorders due to use of alcohol (Broad) (Male, All ages)	2021/22	_	1,147	341	570	587	3,210		0	202

<u>Local Alcohol Profiles for England - OHID (phe.org.uk)</u>; chart downloaded 25Apr23 (no past trend data is available for these indicators as the ONS population denominator back series of population estimates from 2012 to 2020 is not yet published)

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Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

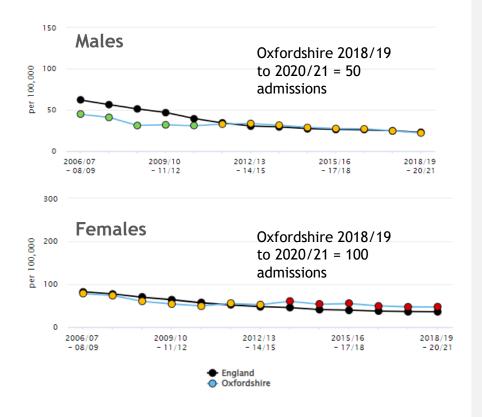
Gambling

Finding out more

Alcohol specific hospital admissions in under 18s

- There were 145 admissions of people aged under 18 in Oxfordshire due to alcohol-specific conditions in the three year period 2018-19 to 2020-21.
- This is equivalent to a rate of 33 admissions per 100,000 population, similar to England and South East averages.
- Under 18s admissions were higher in females than males. In the most recent data (2018/19 to 2020/21), the rate per 100,000 in Oxfordshire was 22.2 in males (similar to England and South East) and 46.9 in females (significantly worse than England and South East).

Under 18s admitted to hospital due to alcohol-specific conditions - under 18 year olds, crude rate per 100,000 population



Local Alcohol Profiles for England - OHID (phe.org.uk)

Number of persons under 18 admitted to hospital due to alcohol-specific conditions divided by the under 18 population of the area and multiplied by 100,000. Males+Females total differs to total Persons due to rounding



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

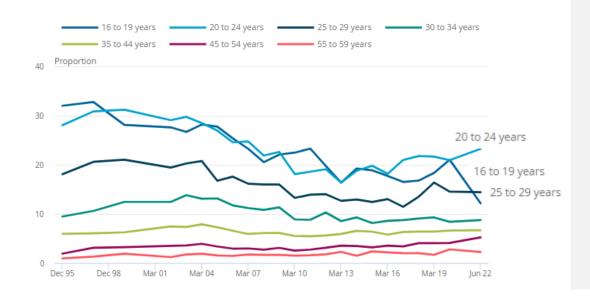
Finding out more

Illicit drug use - national

- National data for year ending June 2022 shows approximately 1 in 11 adults aged 16 to 59 years (9.2%) and approximately 1 in 5 adults aged 16 to 24 years (18.6) reported drug use in the year ending June 2022.
- For the year ending June 2022, the proportion of adults reporting any drug use in the last year was highest among those aged 20 to 24 years (23.3%).
- However, notably, the prevalence of last year use decreased among those aged 16 to 19 years compared with the year ending March 2020.
 - Any drug use decreased from 21.1% to 12.2%.
 - Any Class A drug use decreased from 5.8% to 2.0%.
 - Cannabis use decreased from 19.2% to 11.3%.

<u>Orug misuse in England and Wales - Office for National Statistics (ons.gov.uk)</u>

Proportion of adults who reported using a drug in the last year by age, England and Wales year ending December 1995 to year ending June 2022





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Drug use by household income - national

- The prevalence of drug use varied by household income
 - Those earning less than £10,400 per year were more likely to use a drug in the last year (15.2%) than those with higher incomes. These differences may not be independently related as they may be affected by factors such as age, as younger people are likely to have a lower income.
 - Broken down by drug type, those earning less than £10,400 per year were most likely to have used cannabis (13.2%). However, those in the highest income groups were most likely to have used a Class A drug, with 3.2% of households earning £52,000 or more per year having used a Class A drug in the last year, compared with 2.4% of households earning less than £10,400 per year.

Proportion of adults aged 16 to 59 years who reported using a drug in the last year by total household income England and Wales, year ending June 2022

Drug misuse in England and Wales - Office for National Statistics (ons.gov.uk)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Drug use in school pupils aged 11-15 years - national

- In 2021, 18% of pupils reported they had ever taken drugs, this was lower than the 2018 and 2016 value of 24%.
- The proportion of pupils who said that they had taken drugs in the last year also fell and was 12% in 2021 compared with 17% in 2018.
- A lower proportion of boys (11%) than girls (13%) had taken drugs in the last year. The difference was statistically significant.
- The likelihood of having taken drugs in the last year increased with age, from 3% of 11 year olds to 24% of 15 year olds.
- Asian pupils were less likely than other ethnic groups to have taken drugs in the last year: 8%, compared with 15% of mixed ethnicity pupils, 13% of Black pupils, and 12% of White pupils.

Smoking, Drinking and Drug Use among Young People in England, 2021 - NHS Digital released Sept22



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Diet, overweight and physical activity



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

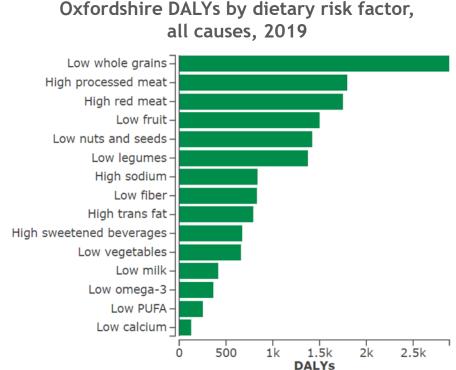
Volunteering

Gambling

Finding out more

Dietary risk factors

- There is a lack of reliable data on people's food choices in Oxfordshire; the following data show the effect of dietary risk factors on the total burden of disease (DALYs) in Oxfordshire.
- In 2019, dietary risk factors accounted for over 11,500 lost years of healthy life (DALYs) due to cardiovascular diseases, diabetes and kidney disease, and neoplasms.
- There is some uncertainty over the effects of specific foods, but current evidence suggests the leading dietary risk factors are:
 - Having a diet low in whole grains, fruit, nuts, seeds and legumes
 - Having a diet high in processed meat, red meat and sodium



One Disability Adjusted Life Year (DALY) can be thought of as one lost year of "healthy" life. DALYs are calculated as the sum of the Years of Life Lost (YLL) due to premature mortality in the population and the Years Lost due to Disability (YLD) for people living with the health condition or its consequences. The sum of DALYs for a population is a measurement of the gap between current health status and the situation where the entire population lives to an advanced age, free of disease and disability. Institute for Health Metrics and Evaluation (IHME), GBD Compare. (Accessed 12.01.21)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Diet: 5-a-day

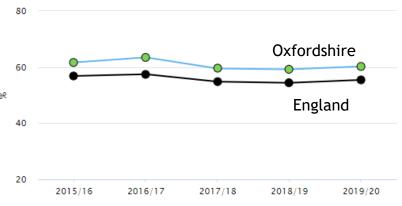
- According to the Sport England Active Lives survey, in 2019-20 Oxfordshire was above average on the proportion of the population meeting (self-reported) the recommended 5 or more portions of fruit or vegetables per day (60.2% compared with 55.4%).
- Cherwell district was significantly below average (50.9%).

From Active Lives Adult Survey, Sport England Public health profiles - OHID (phe.org.uk) (last updated May 2022)

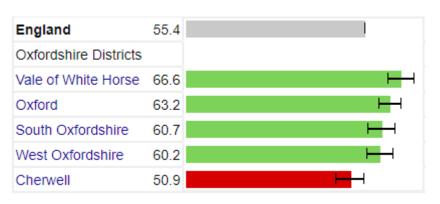
Respondents were asked:

- How many portions of fruit did you eat yesterday? Please include all fruit, including fresh, frozen, dried or tinned fruit, stewed fruit or fruit juices and smoothies. Fruit juice only counts as one portion no matter how much you drink.
- How many portions of vegetables did you eat yesterday? Please include fresh, frozen, raw or tinned vegetables, but do not include any potatoes you ate. Beans and pulses only count as one portion no matter how much of them you eat.

Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults)



Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults) 2019-20





Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

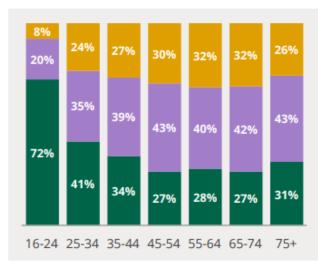
Finding out more

Adult overweight and obesity - national

In England, men are more likely to have a body mass index measurement above normal than women.



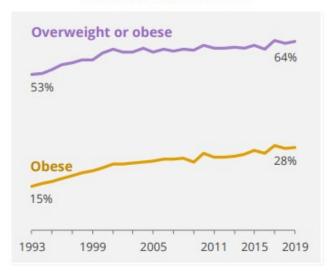
Around three quarters of those aged 45-74 are overweight or obese



From Health survey for England 2021

House of Commons Library Obesity Statistics (Jan23)

Obesity levels increased from 15% in 1993 to 28% in 2019.



See 2022-23 Director of Public Health annual report | Oxfordshire County Council



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

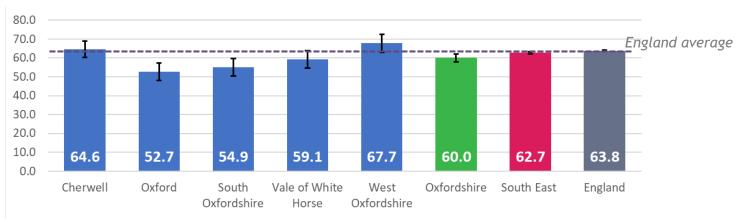
Finding out more

Adult overweight and obesity

Excess weight in adults is a complex problem with multiple causes and significant implications for health and wellbeing. It is recognised as a major determinant of premature mortality and avoidable ill health. Adults are defined as overweight (including obese) if their body mass index (BMI) is greater than or equal to 25kg/m². Obesity is defined as a BMI greater than or equal to 30.

- An estimated 60% of people aged 18 or over in Oxfordshire were classified as overweight or obese in 2021-22, lower than the average for England (63.8%) and the South East (62.7%).
- Oxford district had the lowest percentage of adults classified as overweight or obese (52.7%), while West Oxfordshire had the highest (67.7%). Oxford's low percentage of adults overweight/obese is likely to be linked to the younger age profile of the population in the city.

Percentage of adults (18+) classified as overweight or obese, 2021-21



Physical Activity - OHID (phe.org.uk)
Explore Healthy Weight Story Maps (arcgis.com)

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Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

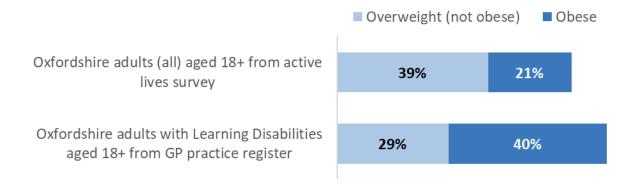
Gambling

Finding out more

Overweight and obesity of adults with Learning Disabilities

- Of adults (aged 18+) on Oxfordshire GP Learning Disabilities registers with a BMI test, 40% were measured as obese and a further 29% were overweight. 69% in total either overweight or obese.
- This was well above the 21% of adults in Oxfordshire who were classified as obese from the Active Lives Survey and the further 39% who were overweight. 60% in total either overweight or obese.

Rates of overweight and obesity in Oxfordshire (aged 18+) total vs adults with Learning Disabilities (2021-22)



NHS Digital Health and Care of People with Learning Disabilities 2021-22



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Hospital admissions related to obesity - Oxfordshire

- NHS Digital data shows:
 - Admissions directly attributable to obesity in Oxfordshire was 70 in 2019/20 (75 in the previous year). The rate per 100,000 was 10 compared with 20 for England.
 - Admissions where obesity was a factor in Oxfordshire was 5,060 in 2019/20 (4,790 in the previous year). The rate per 100,000 was 760 compared with 1,869 for England.
 - Obesity admissions for bariatric surgery in Oxfordshire was 40 in 2019/20 (40 in the previous year). The rate per 100,000 was 6 compared with 12 for England.

Microsoft Power BI



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

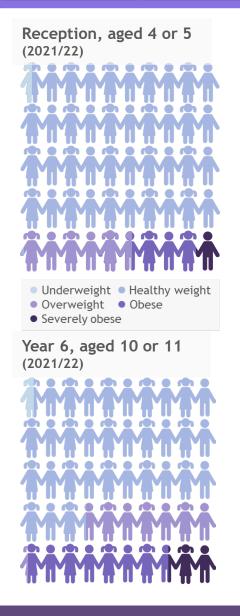
Finding out more

Excess weight in children

Obesity is associated with poor psychological and emotional health. Obese children are more likely to become obese adults with a higher risk of morbidity, disability and premature mortality in adulthood.

- The majority of measured children in Oxfordshire are a healthy weight (79% Reception children; 65% Year 6 children).
- In 2021/22, around 20% of Reception year children, aged 4 or 5, in Oxfordshire were overweight or obese. This included 6.3% of all children who were obese, and 2.2% who were severely obese.
- By the time children reach age 10 or 11 (year 6), the proportion who are overweight has increased.
- In Year 6, aged 10 or 11, 33.6% of children were overweight or obese. This included 15% of all children who were obese, and 4.5% of children who were severely obese.
- Prevalence of underweight is also higher by Year 6: 0.9% in Reception compared to 1.5% in Year 6.

Obesity Profile - Data - OHID (phe.org.uk)
Explore Healthy Weight Story Maps (arcgis.com)
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Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

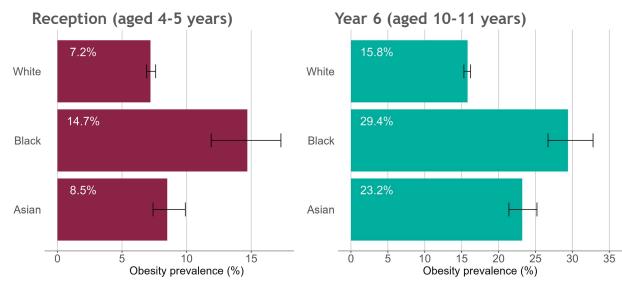
Gambling

Finding out more

Inequalities in childhood obesity in Oxfordshire - by sex and ethnic group

- Combined 5 year data for 2016/17 to 2021/22 shows that Obesity prevalence was (statistically) significantly higher in boys than in girls in Oxfordshire, and the difference increases between Reception and Year 6.
 - In Reception, 8% of boys were obese compared to 7.1% of girls.
 - By Year 6, 19% of boys were obese, compared to 14.9% of girls.
- For each of Reception and Year 6 the prevalence of obesity was highest for the Black ethnic group. In Year 6 each of the Black and Asian groups in Oxfordshire were statistically above the White group.

Obesity prevalence by ethnic group in Oxfordshire (5 years combined 2016/17 to 2021/22)



Obesity Profile - Data - OHID (phe.org.uk)
National Child
Measurement
Programme, combined
5 year data for
2016/17 to 2021/22



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

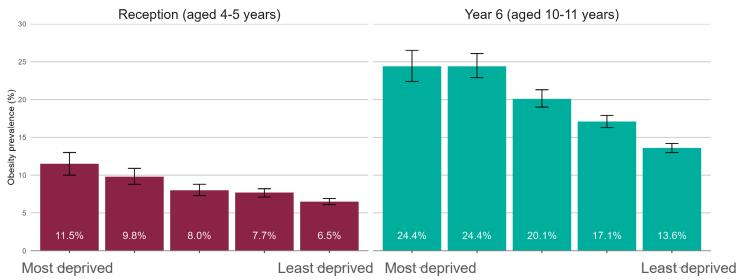
Gambling

Finding out more

<u>Inequalities in childhood obesity in Oxfordshire - by deprivation</u>

- Combined 5 year data for 2016/17 to 2021/22 shows that children were more likely to be obese in the more deprived areas of Oxfordshire (also applies nationally).
 - In Reception, 11.5% of children in the most deprived areas were obese, compared with 6.5% of children in the least deprived areas.
 - In Year 6, 24.4% of children in the most deprived areas were obese, compared with 13.6% of children in the least deprived areas.

Obesity prevalence by deprivation in Oxfordshire (5 years combined 2016/17 to 2021/22)



Obesity Profile - Data - OHID (phe.org.uk) National Child Measurement Programme; deprivation data is IMD 2019 for quintiles (20% bands)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

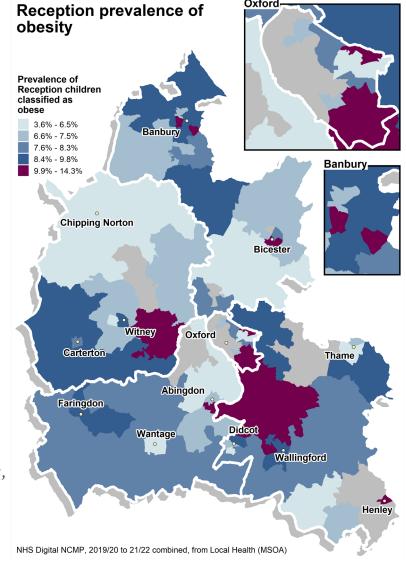
Finding out more

<u>Childhood obesity map - Reception</u>

- Combined 3 year data for 2019/20 to 2021/22 for Reception (aged 4 or 5) shows obesity prevalence ranged from 3.6% in Botley and Kennington to 14.3% in Chalgrove, Stadhampton & Dorchester.
- Areas (MSOAs) with the highest prevalence of obesity for Reception children were:
 - Chalgrove, Stadhampton & Dorchester, South Oxfordshire (14.3%)
 - Blackbird Leys, Oxford (12.5%)
 - Cowley North, Oxford (12.1%)
 - Henley South, South Oxfordshire (12%)
 - Eynsham and Stanton Harcourt, West Oxfordshire (12%)

The 2019/20 NCMP data collection stopped in March 2020 when schools were closed due to the coronavirus COVID-19 pandemic. Data from the 2020/21 NCMP collection year has not been included in the 3-year combined indicators. To ensure that large enough numbers are available for analysis, an additional year of NCMP data is included instead of 2020/21; data for 2019/20-21/22 uses 2018/19 data instead of 2020/21.

Childhood obesity and excess weight: small area level data Explore Healthy Weight Story Maps (arcgis.com)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

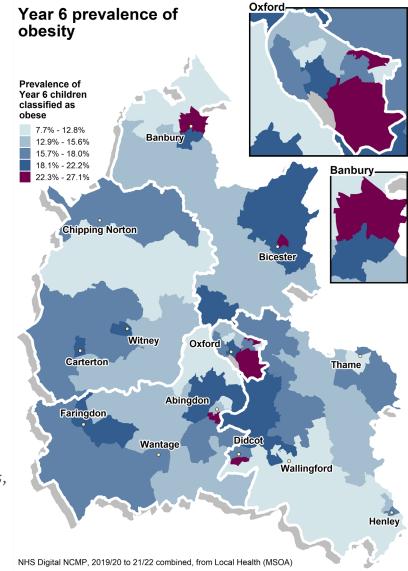
Finding out more

Childhood obesity map - Year 6

- for Year 6 (aged 10 or 11), shows obesity prevalence ranged from 7.7% in Shiplake & Binfield Heath (South Oxfordshire) to 27.1% in Banbury Neithrop (Cherwell).
- Areas (MSOAs) with the highest prevalence of obesity for Year 6 children were:
 - Banbury Neithrop, Cherwell (27.1%)
 - Churchill, Oxford (26.8%)
 - Banbury Ruscote, Cherwell (26.4%)
 - Blackbird Leys, Oxford (25%)
 - Barton, Oxford (24.6%)

The 2019/20 NCMP data collection stopped in March 2020 when schools were closed due to the coronavirus COVID-19 pandemic. Data from the 2020/21 NCMP collection year has not been included in the 3-year combined indicators. To ensure that large enough numbers are available for analysis, an additional year of NCMP data is included instead of 2020/21; data for 2019/20-21/22 uses 2018/19 data instead of 2020/21.

<u>Childhood obesity and excess weight: small area level data</u> <u>Explore Healthy Weight Story Maps (arcgis.com)</u>





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

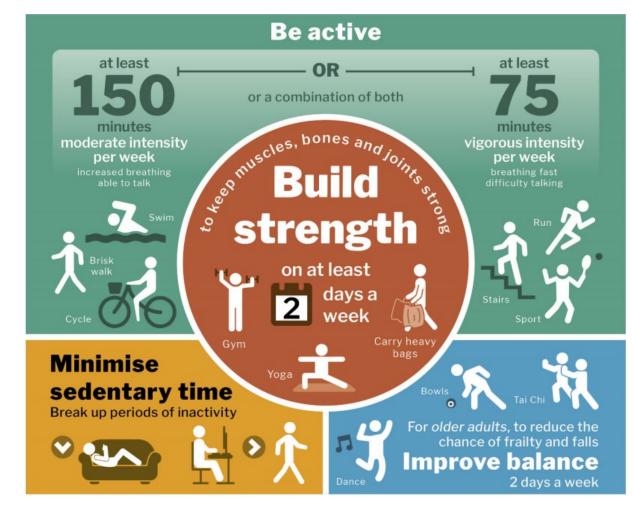
Oral health

Volunteering

Gambling

Finding out more

Chief Medical Officer (CMO) guidelines for adults' physical activity



- Physical activity guidance for adults are to achieve at least 150 minutes of moderate intensity activity per week.
- Guidelines can also be met by doing 75 minutes of vigorous activity per week, or a combination of moderate and vigorous.
- There are also specific guidelines for disabled adults, pregnant women, and women after childbirth though these all aim for 150 minutes moderate intensity activity every week.

Department of Health and Social Care, <u>UK Chief Medical Officers' Physical Activity Guidelines</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

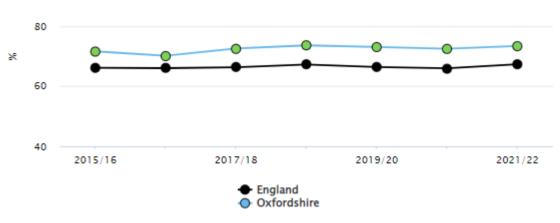
Gambling

Finding out more

Physical activity in adults - Oxfordshire trend

- As of Nov21-Nov22, 73.4% of adults aged 19+ years were meeting physical activity recommendations in Oxfordshire. This was above the England (67.3%) and South East (70.5%) averages.
- The proportion has remained similar since 2015-16.
- Despite being better than average overall, around a quarter of adults in Oxfordshire were not meet physical activity recommendations.

Percentage of adults (aged 19+) meeting physical activity recommendations to 2021/22



<u>Physical Activity - Data - OHID (phe.org.uk)</u> from Active Lives Survey, Sport England. The number of respondents aged 19 and over, with valid responses to questions on physical activity, doing at least 150 moderate intensity equivalent (MIE) minutes physical activity per week in bouts of 10 minutes or more in the previous 28 days expressed as a percentage of the total number of respondents aged 19 and over.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

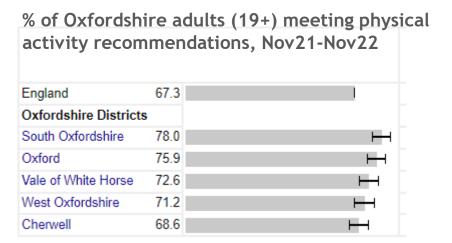
Volunteering

Gambling

Finding out more

Physical activity in adults - districts

- The proportion of adults meeting physical activity recommendations in South Oxfordshire, Oxford and Vale of White Horse was above (better than) the national average in Nov21-Nov22
- Rates in West Oxfordshire and Cherwell were similar to average.



<u>Physical Activity - Data - OHID (phe.org.uk)</u> from Active Lives Survey, Sport England. The number of respondents aged 19 and over, with valid responses to questions on physical activity, doing at least 150 moderate intensity equivalent (MIE) minutes physical activity per week in bouts of 10 minutes or more in the previous 28 days expressed as a percentage of the total number of respondents aged 19 and over.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

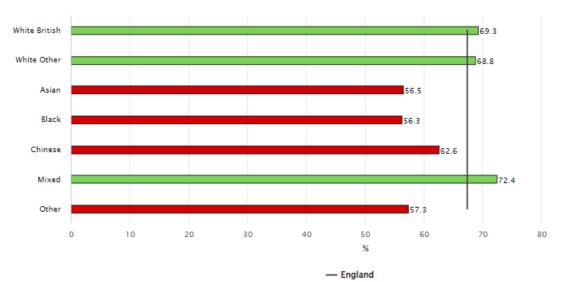
Gambling

Finding out more

Physical activity in adults by population group - national

- Nationally, the data show that participation in physical activity is lower in more deprived groups, unemployed or economically inactive groups, routine and manual workers, those who had never worked or were unemployed, and people with a disability. See <u>inequalities profiles</u>.
- A higher percentage of males were physically active than females in England (69.9% vs 64.9%).
- The percentage of physically active adults was lower in Asian, Black, and Chinese ethnic groups than the average.

% of adults (19+)
meeting physical
activity
recommendations,
Nov21-Nov22, England
by ethnic group



<u>Physical Activity - Data - OHID (phe.org.uk)</u> from Active Lives Survey, Sport England. The number of respondents aged 19 and over, with valid responses to questions on physical activity, doing at least 150 moderate intensity equivalent (MIE) minutes physical activity per week in bouts of 10 minutes or more in the previous 28 days expressed as a percentage of the total number of respondents aged 19 and over.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

CMO guidelines for children's physical activity

- Guidelines for children aged between 5 and 18 are to achieve 60 minutes physical activity per day. This can be an average of 60 minutes per day across the week.
- For children under 5 years the guidelines are for 180 minutes activity per day.
- Keeping active can help to build confidence and social skills; develop coordination; improve concentration and learning; strengthen muscles and bones; improve health and fitness; maintain healthy weight and improve sleep.

Be physically active All activities **Spread activity** should make you Aim for an throughout breathe faster average of at least the day & feel warmer minutes per day across week RUN/WALK **Activities to** develop movement skills, and muscle and bone strength **ACROSS WEEK Move more Get strong** INACTIVITY

Find ways to help all children and young people accumulate an average of at least 60 minutes physical activity per day across the week

Department of Health and Social Care, <u>UK Chief Medical Officers' Physical Activity Guidelines</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Physical activity in children

- In the academic year 2021-22, 46.6% of children and young people in Oxfordshire were achieving an average of 60 minutes of physical activity per day, similar to the national average of 47.2%.
- Applying this percentage to the population of school children aged 5-15 (ONS Census 2021) gives an estimated 49,300 children in Oxfordshire schools not doing enough physical activity.

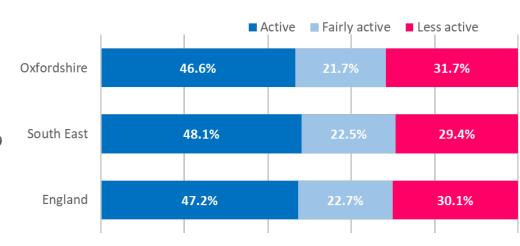
These estimates include the activities of walking, cycling, dance, fitness activities, sporting activities, riding a scooter, and active play and informal activities.

Active - Doing an average of 60 minutes or more a day across the week (420+ minutes pw).

Fairly active - Doing an average of 30-59 minutes a day across the week (210-419 minutes a week).

Less active - Doing less than an average of 30 minutes a day across the week (less than 210 minutes a week).

Sport and Physical Activity levels of Children and Young People in school years 1-11 (2021-22)



Sport England, Active Lives | Results (sportengland.org)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

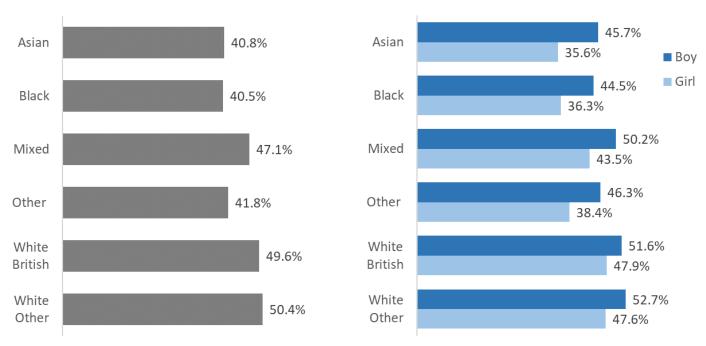
Gambling

Finding out more

<u>Inequalities in children's physical activity - national</u>

- National data shows that a higher proportion of boys (49.8%) than girls (44.9%) were physically active (60 minutes or more per day) in the academic year 2021-22.
- Physical activity was highest in White and Mixed ethnic groups.

Proportion of children physically active - England (60 minutes or more per day), school years 1-11, 2021-22



Active Lives | Results (sportengland.org)



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Sexual and reproductive health



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

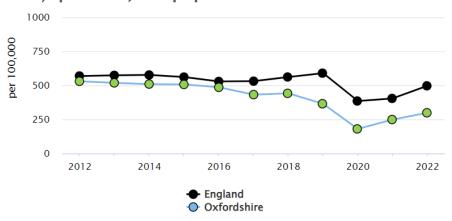
Sexually Transmitted Infections

STIs are a major public health concern, which may seriously impact the health and wellbeing of affected individuals, as well as being costly to healthcare services. If left undiagnosed and untreated, common STIs can cause a range of complications and long-term health problems, from adverse pregnancy outcomes to neonatal and infant infections, and cardiovascular and neurological damage.

- In 2022, the rate of new STI diagnoses (excluding chlamydia in under 25s) in Oxfordshire was 298 diagnoses per 100,000 people aged 15-64 years significantly lower than the average for England (496 per 100,000), and the average for the South East (349 per 100,000).
- Oxfordshire's rate is equivalent to 2,164 new diagnoses in 2022. The number of diagnoses is related to the number of tests taken in the same year, 14,852 tests were taken by people in Oxfordshire.

Sexual and Reproductive
Health Profiles - Data - OHID
(phe.org.uk) and Health
Matters: Preventing STIs
See also: Oxfordshire Sexual
Health Needs Assessment 2018
and Spotlight on Sexually
transmitted infections in the
South East







Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

<u>Sexually Transmitted Infections - Chlamydia</u>

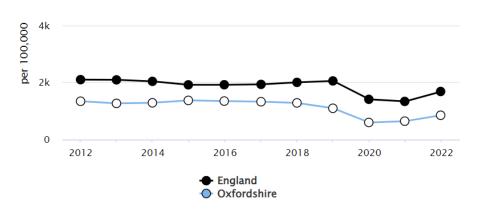
Chlamydia is the most commonly diagnosed bacterial sexually transmitted infection in England, with rates substantially higher in young adults than any other age group. It causes avoidable sexual and reproductive ill-health, including symptomatic acute infections and complications such as pelvic inflammatory disease (PID), ectopic pregnancy and tubalfactor infertility.

- o In 2022, the rate of Chlamydia diagnoses was 849 per 100,000 people in Oxfordshire, significantly lower than the South East (1,388) and England (1,680) rates.
- Oxford district had the highest rate of diagnoses compared to the other Oxfordshire districts

<u>Sexual and Reproductive Health Profiles -</u> Data - OHID (phe.org.uk)

All chlamydia diagnoses in 15 to 24 year olds attending sexual health services (SHSs) and community-based settings, who are residents in England, expressed as a rate per 100,000 population.

Chlamydia detection, crude rate per 100,000 aged 15 to 24 - Oxfordshire vs England trend



Chlamydia detection, crude rate per 100,000 aged 15 to 24, Oxfordshire districts 2022

Oxfordshire Districts	Count	- Rate
Cherwell	152	920
Oxford	379	1,048
South Oxfordshire	87	600
Vale of White Horse	80	578
West Oxfordshire	87	761



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Teenage conceptions

Research evidence, particularly from longitudinal studies, shows that teenage pregnancy is associated with poorer outcomes for both young parents and their children.

• According to ONS, there was a total of 106 conceptions to females aged under 18 years in Oxfordshire in 2021, a rate of 8.9%. This was an increase compared with 2020 but similar to 2019 and remaining below the regional and national averages.

Number and rate (per 1,000) of conceptions to females aged under 18 years (Jan-Dec)

		19	20	20	20	2021	
Area	Count	Rate	Count	Rate	Count	Rate	trend
Cherwell	25	9.9	26	9.9	24	8.8	\
Oxford	22	9.8	14	5.8	23	9.1	↑
South Oxon	23	9.7	5	2.1	22	8.6	↑
VoWH	19	9.1	15	6.6	20	8.8	↑
West Oxon	21	11.8	15	8.3	17	9.4	↑
Oxfordshire	110	10.0	75	6.5	106	8.9	↑
South East		12.7		10.6		10.7	↑
England		10.6		13.0		13.1	↑

This indicator measures all conceptions in females under 18 whether the pregnancy ends in birth or termination Sexual and Reproductive Health Profiles - Data - OHID (phe.org.uk); denominator is ONS pop estimate of women aged 15-17 living in the area. 2021 data from Conceptions in England and Wales - Office for National Statistics



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Breastfeeding and low birth weight

Breast milk provides the ideal nutrition for infants in the first stages of life. There is evidence that babies who are breast fed experience lower levels of infection and child obesity, as well as encouraging a strong bond between mother and baby. Breastfeeding initiation within 48 hours of delivery is recorded in hospital, and is recorded again at the Health Visitor check at 6-8 weeks after delivery.

- In 2020-21, 85.7% of babies born to Oxfordshire mothers had a first feed of breastmilk, significantly higher than the average in England (71.7%), and the highest percentage in the South East region (74.5% regional average).
- In 2019-20 (latest data as of April 23), prevalence of breastfeeding at 6-8 weeks in Oxfordshire was 61.2%, significantly higher than the prevalence in England overall (48%).

Low birth weight increases the risk of childhood mortality and has an influence on future adult health status. Risk factors for low birth weight include the health of the mother, particularly during the pregnancy including maternal smoking, substance misuse, nutritional status and maternal weight. Ethnicity, genetics, socioeconomic status, age and multiple pregnancy are also factors.

- In 2021, 2.2% of live births at full term (at least 37 weeks gestational age) in Oxfordshire had a recorded birth weight under 2500g statistically lower (better) than the regional average (2.4%) and the national average (2.8%).
- National data show that the proportion of births with low birth weight is highest in more deprived areas.

Child and Maternal Health - Data - OHID (phe.org.uk)



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Oral health



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

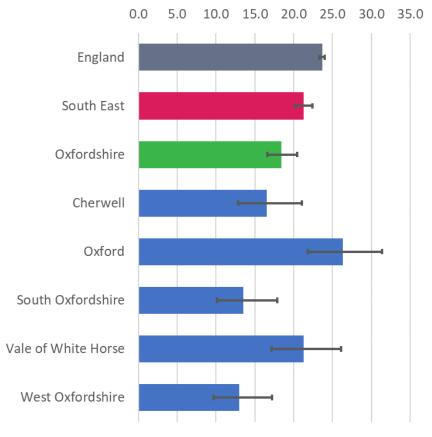
Finding out more

Oral health: children

Tooth decay is a predominantly preventable disease. Significant levels remain, resulting in pain, sleep loss, time off school and in some cases, treatment under general anaesthetic. High levels of consumption of sugar-containing food and drink is also a contributory factor to other issues of public health concern in children - for example, childhood obesity.

- Data collected during the 2021 to 2022 school year shows that 18.5% of 5 year olds in Oxfordshire had decay experience, significantly lower (better) than the national average of 23.7%.
- Cherwell, South Oxfordshire and West Oxfordshire were each significantly better than the national average.
- Oxford was significantly worse than the Oxfordshire average.
- Nationally, children living in the most deprived areas were almost 3 times as likely to have experience of dentin decay (35.1%) as those living in least deprived areas (13.5%).





National Dental Epidemiology Programme for England Oral health survey of 5 year old children 2022 - GOV.UK (www.gov.uk) Percentage d₃mft>0; South East average exclude Hampshire, East Sussex, Isle of Wight; Kent, Portsmouth; Southampton; Surrey; West Sussex.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Volunteering



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

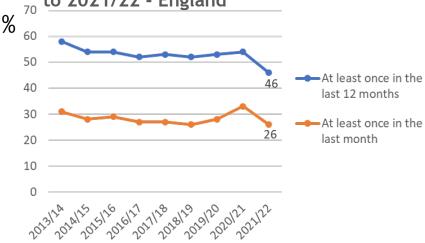
Gambling

Finding out more

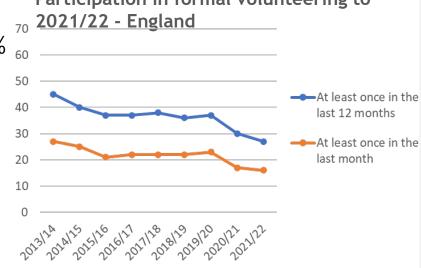
Volunteering - national trend

- The 2021/22 Community Life survey found that the most common barriers to volunteering were work commitments and other activities taking up spare time.
- Between 2020/21 and 2021/22, the proportion of people participating in informal volunteering dropped significantly, rates of formal volunteering also declined. These changes are likely to be a result of the COVID-19 pandemic and lockdowns.
 - In 2021/22, 26% of respondents had taken part in informal volunteering at least once a month. This proportion is lower than in 2020/21, when rates were the highest recorded by the CLS (33%), but in line with levels seen in 2019/20 (28%).
 - Formal volunteering (at least once a year) reduced from 30% to 27% (-3ppt).

Participation in informal volunteering to 2021/22 - England



Participation in formal volunteering to



Community Life Survey 2021/22: Volunteering and charitable giving - GOV.UK (www.gov.uk) DCMS published 28Feb23



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Gambling



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

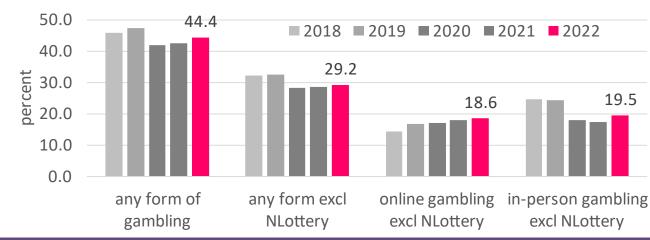
Finding out more

Gambling behaviour - national

Gambling is a leisure activity enjoyed by many, and the majority of those who gamble appear to do so without signs of problematic behaviour. There are however some individuals who experience significant harm as a result of their gambling. Great Britain has one of the most accessible gambling markets in the world; opportunities to gamble exist on most high streets and, with the spread of the internet, in virtually every home.

- The latest statistics on gambling behaviour by the Gambling Commission (Jan-Dec22) shows that 44.4% of respondents aged 16+ had participated in at least one form of gambling in the past four weeks with statistically significant increases for males (43.6% to 47%) and people aged 25-34 years (37.2% to 44.2%).
- Excluding those who participated in National Lottery only, online gambling has increased and in-person gambling has declined (2022 vs 2018).





Gambling behaviour in 2022: Findings from the quarterly telephone survey (gamblingcommission. gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Problem gambling - national

For problem gamblers, harm can include higher levels of physical and mental illness, debt problems, relationship breakdown and, in some cases, criminality. It can also be associated with substance misuse. Younger males, and people from certain social and ethnic groups, are potentially more vulnerable than others.

The Problem Gambling Severity Index (PGSI) consists of nine items ranging from 'chasing losses' to 'gambling causing health problems' to 'feeling guilty about gambling'. Each item is scored and summed to create a total ranging from 0 to 27. A PGSI score of 8 or more represents a problem gambler.

- In the year Jan to Dec 2022:
 - the overall problem gambling rate was statistically stable at 0.2%, compared with 2021.
 - There was a significant increase in the moderate risk rate (1.3% in 2022 vs 0.8% in 2021).
 - The low risk rate was statistically stable at 1.7%.
- The proportion of men identified as problem or at-risk gamblers was substantially higher than women, with 0.4% of men and 0.1% of women identified
- The proportion of problem or at-risk gamblers was highest for people aged 16-24 (1.4%)

Gambling Commission, <u>Gambling behaviour in 2022: Findings from the quarterly telephone survey (gamblingcommission.gov.uk)</u>
NHS Digital, Health Survey for England 2018: Supplementary analysis on gambling - NHS Digital



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Behavioural risk factors of disease

Smoking

E-cigarette use

Alcohol consumption

Alcohol-related hospital admissions

Drug use

Dietary risk factors

Overweight and obesity - adult

Overweight and obesity - child

Physical activity - adult

Physical activity - child

Sexual health

Teenage conceptions

Breastfeeding & low birth weight

Oral health

Volunteering

Gambling

Finding out more

Finding out more

- More information on many of these topics is available from:
 - Public health profiles OHID (phe.org.uk)
 - Health Survey for England NHS Digital
 - Office for National Statistics
- Other JSNA resources are available from Oxfordshire Insight
- The 2023 Director of Public Health Annual report has a focus on healthy weight, healthy communities and healthy lives
- Explore obesity and related data with our Health Weight Story maps



Population

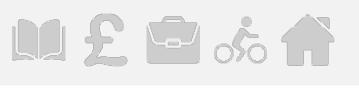
Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 6

Building blocks of health



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

<u>Introduction</u>

- This chapter provides data on social, economic and environmental factors that affect health and wellbeing, such as unemployment, poverty, housing, education and the environment.
- The quality of the built and natural environment, including housing quality, access to green spaces that enable nature connectivity, educational attainment and the ability to access secure employment and a living wage, and whether you live in a neighbourhood that enables social interaction and offers easy access by sustainable active travel to local facilities and services, are all important determinants of health and wellbeing.
- In areas of deprivation, these determinants of health are important drivers of health inequalities and can result in multi-generational poor health and wellbeing.
- Healthy place shaping is a mechanism that aims to reduce health inequalities by improving these wider determinants of health, working with communities in a place based and cross sectoral approach to promote health and wellbeing.
- Health impact assessments provide a systematic mechanism for considering these wider determinants of health when planning new developments using Oxfordshire's HIA toolkit
- Further JSNA resources are available via the JSNA page of Oxfordshire Insight.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

CONTENTS

Work, income and deprivation

- Earnings and employment
- Overseas registrations for a NI number
- Deprivation
- Child poverty
- Older people in poverty
- Fuel poverty
- Cost of food, healthy start vouchers, free school meals
- Fast food outlets

Education and qualifications

- GCSE attainment
- Pupils with special educational needs
- First language of primary school pupils
- Young people not in education, employment or training
- Apprenticeships
- Adults lacking qualifications

Housing and homelessness

- Housing affordability
- Housing quality and condition
- Homelessness
- Rough sleeping

Built and natural environment

- Built environment
- Access to green spaces
- 20 minute neighbourhoods
- Active travel
- Air quality
- Climate change

Social environment and loneliness

- Communities
- Community volunteering
- Loneliness



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

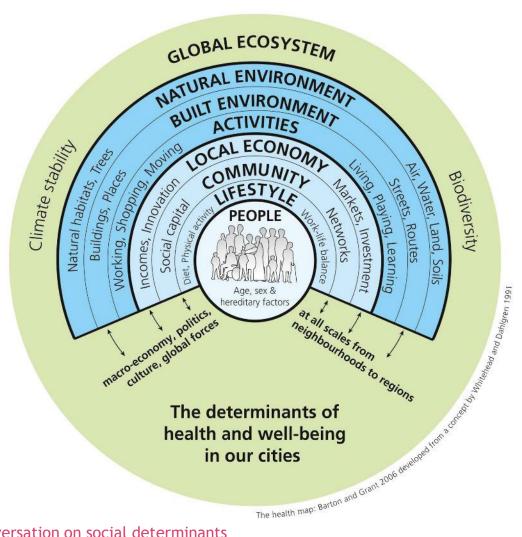
Summary

Finding out more

Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment
Social environment and loneliness

Wider Determinants of Health

- No single aspect of people's lives determines their health and wellbeing. Factors as varied as employment status, transport options, quality of housing and access to green space all affect people's health outcomes.
- The wider determinants of health are the conditions in which people are born, grow, live work and age. They include social, cultural, political, economic, commercial and environmental factors.
- The strongest influences on people's health are social determinants such as their level of education, income, quality of housing and employment.



The Health Foundation, Reframing the conversation on social determinants



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Finding out more

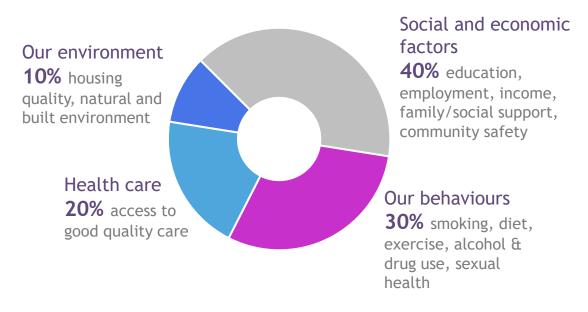
Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment

Social environment and loneliness

Factors affecting health outcomes

- The NHS Population Health Management programme (part of the NHS Long Term Plan) encompasses health, the wider determinants of health (social, economic, environmental) and the crucial role of communities and local people.
- Only 20% of a person's health outcomes are attributed to access to good quality health care.

Factors affecting health outcomes



From NHS England Population Health Management



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Public Health Outcomes Framework

- The Public Health Outcomes Framework examines indicators that help us understand trends in public health.
- This data tool currently presents data for available indicators at England and local authority levels, collated by the Office for Health Inequalities and Disparities.

B. Wider determinants of health

Indicator	Age	Sex	Period	Value	Value (Region)	Value (England)	Unit	Recent trend	Change from previous
B01b - Children in absolute low income families (under 16s)	<16 yrs	Persons	2021/22	8.48	10.8	15.3	%	-	-
B01b - Children in relative low income families (under 16s)	<16 yrs	Persons	2021/22	12.2	15.1	19.9	%	-	-
B02a - School readiness: percentage of children achieving a good level of development at the end of Reception	5 yrs	Persons	2021/22	67.5	67.5	65.2	%	-	-
B02a - School Readiness: percentage of children with free school meal status achieving a good level of development at the end of Reception	5 yrs	Persons	2021/22	43.1	47.4	49.1	%	-	-
B02b - School readiness: percentage of children achieving the expected level in the phonics screening check in Year 1	6 yrs	Persons	2021/22	74.5	74.9	75.5	%	→	+
B02b - School readiness: percentage of children with free school meal status achieving the expected level in the phonics screening check in Year 1	6 yrs	Persons	2021/22	51.9	56.9	62.0	%	→	+
B02c - School readiness: percentage of children achieving at least the expected level in communication and language skills at the end of Reception	5 yrs	Persons	2021/22	82.5	82.4	79.5	%	-	-
B02d - School readiness: percentage of children achieving at least the expected level of development in communication, language and literacy skills at the end of Reception	5 yrs	Persons	2021/22	69.6	69.6	67.1	%	_	-

From Public Health Outcomes Framework Oxfordshire



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Introduction to Healthy Place Shaping

Healthy place-shaping is a collaborative approach which aims to create sustainable, well designed, thriving communities where healthy behaviours are the norm and which provide a sense of belonging, identity and community.

This approach can apply to new developments and to the regeneration of existing communities and involves action across these three areas:

- The built environment: shaping the built environment, public realm, green spaces and infrastructure at a local level to encourage healthy living
- Community activation: helping local people to live healthier lives with the support of community groups, schools, and employers
- New models of care: delivering new approaches to care closer to home and minimising hospital-based care.



Healthy place shaping | Oxfordshire County Council



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation Housing and homelessness Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Healthy Place Shaping Indicators

- A Health Impact Assessment (HIA) is a tool used to identify the health impacts of a plan or scheme and to develop recommendations to maximise the positive impacts and minimise the negative impacts, through influencing the wider determinants of health, while maintaining a focus on addressing health inequalities.
- It is essential that specific data are used to understand how a development may impact on existing health inequalities.

• The core health indicators are listed in the table below. For more information click the image below.

Category	Indicator	Lowest geography
1. Built environment	 Air pollution (NO₂) Air pollution (particulates) (TO ADD) Housing (BHBH take up plus outcome data from year 2 TBC) Percentage of communities with Local Cycling and Walking Infrastructure plans Percentage of communities with 20 mph speed limit 	 Sites, grid Sites, grid Postcodes Locations
2. Community activation	 Sense of belonging (residents survey Q: satisfied with area as a place to live) Number of Cycling and Walking Activation initiatives that promote inclusion Any volunteering or community participation in the last 12 months (residents survey Q: In the last 12 months have you given any unpaid help to local community groups, clubs or organisations?) Percentage reporting "often or always" feeling lonely (ONS) 	 LTLA Locations LTLA LTLA
3. New models of care	 People supported by social prescribing People in contact with Make Every Contact Count programme Increase in number of social care users accessing community-based support for health and care needs 	1. LTLA 2. UTLA 3. LTLA
4. Wellbeing outcomes	 ONS wellbeing measures of anxiety, happiness, satisfaction and worthwhile Physical activity (children and adults) Active travel – adults walking and cycling for travel Healthy eating – 5 fruit / veg a day Overweight or obese: reception and year 6 children Overweight adults 	1. LTLA 2. LTLA 3. LTLA 4. LTLA 5. MSOA 6. LTLA

Healthy Place Shaping on Oxfordshire Insight



Population

Population groups and protected characteristics

Health conditions and causes of death Behavioural determinants of health

Building blocks of health

Service Use

Local research

Summary



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Summary - 1

Work, income and deprivation

- The employment rate in Oxfordshire has increased. This is statistically greater than the national average.
- The number of people claiming unemployment benefits has reduced significantly since the peak in May 2020 but remain around 90% above pre-pandemic levels.
- There are small areas in Oxfordshire that are economically inactive due to long term sickness or disability. These areas are above the national average.
- The number of people from overseas registering for a National Insurance number in Oxfordshire has increased, similar to the national average.
- Deprivation data shows higher rates of child poverty in parts of Banbury and Oxford City.
- After removing housing costs, 12% of children in Oxfordshire are estimated to be living in poverty within the city of Oxford this figure rises to 17%.

- Rates of fuel poverty increased between 2020 and 2021 (latest data). Oxford City remains significantly worse than the regional average on fuel poverty.
- National data shows that rising prices are having a disproportionate effect on lower income households.
- In some of Oxfordshire's small areas, half the primary school pupils received a FSM on School Census day.

Housing and homelessness

- House prices and the cost to rent in Oxfordshire have each continued to increase.
- Cheaper market housing has become less affordable for lower earners in Oxfordshire and the county remains much less affordable than the England average.
- The proportion of dwellings with low energy performance was highest in the private rented sectors.
- Annual homelessness data for Oxfordshire shows a change in the profile of households with the proportion of households with children (single or couple) increased and the proportion of single adult households decreased.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment
Social environment and loneliness
Finding out more

Summary - 2

Education and qualifications

- Oxfordshire continues to have a higher than average proportion of pupils with Special Educational Needs support, although the gap with England has narrowed.
- The number of children looked after (CLA) in key stage 2 with Special Educational Needs support of Autistic Spectrum Disorder was 9 percentage points above the percentage for England.
- The average GCSE attainment in Oxfordshire in 2022 was slightly higher than the England average but worse than the regional average. Cherwell was below average.
- The Oxfordshire average point score per entry for A level students was worse than the England and South East.
- The rate of young carers in Oxfordshire schools was greater than the regional and national rate.
- Oxfordshire has a lower (worse) percentage of children (eligible for Free School Meals) who had a good level of development than the South East and England rate.

- Built, natural and social environment
- The percentage of adults walking and cycling for travel (rather than leisure) has increased in all areas of Oxfordshire. This stills remains lower than before the coronavirus pandemic likely due to a change in the number of people working from home.
- A new national indicator estimates 5.5% of deaths in England in 2021 were associated with long-term exposure to particulate air pollution.
- People with an underlying health condition are more likely to feel lonely.
- Adults in Oxfordshire were significantly more likely to feel lonely than average, with the highest rates in Oxford City and Cherwell.
- The large-scale GP patient survey shows Oxfordshire as above-average on people feeling isolated from others.

Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Work, income and deprivation

- Earnings and employment
- Overseas registrations for a NI number
- Deprivation
- Child poverty
- Older people in poverty
- Fuel poverty
- Cost of food, healthy start vouchers, free school meals
- Fast food outlets



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Earnings of workers in Oxfordshire

- Oxfordshire's median gross annual pay of full time workers (people working in Oxfordshire) as of April 2021 was (statistically) similar to the South East.
- The median pay of Oxfordshire's resident full-time workers increased from £34,900 in 2021 to £36,700 in 2022 (-£1,792, 5%). Across the South East, earnings increased by £1,718 (5%).

Median gross annual pay of full time workers in the area 2002 to 2022



The Annual Survey of Hours and Earnings (ASHE) is based on a 1% sample of employee jobs taken from HM Revenue and Customs PAYE records. ASHE does not cover the self-employed nor does it cover employees not paid during the reference period.

Employee earnings in the UK - Office for National Statistics (ons.gov.uk) from nomis; Note: earnings data has not been adjusted for inflation. The median is the data value at which 50% of data values are above it and 50% of data values are below it. Note vertical axis does not start at zero; chart does not show confidence intervals



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

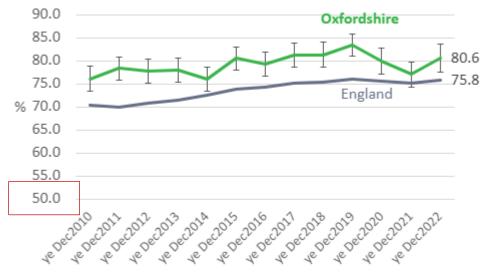
Social environment and loneliness

Finding out more

Oxfordshire's employment rate

- According to the ONS Annual Population Survey, there has been an apparent increase in the rate of employment in Oxfordshire from Jan-Dec21 to Jan-Dec22.
- The latest data as of December 2022, shows Oxfordshire's employment rate as statistically greater than the England average.

Employment rate in Oxfordshire and England, people aged 16-64



Annual Population Survey from <u>nomis</u>. Note that district level data is based on a small sample and, therefore, subject to wider confidence intervals. Vertical axis does not start at zero. Chart shows confidence intervals; overlapping error bars means the difference is not statistically significant.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

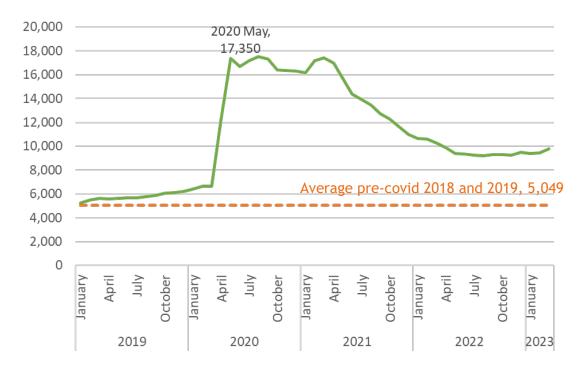
Social environment and loneliness

Finding out more

<u>Unemployment</u>

• Claimant count data for March 2023 shows the number of people claiming unemployment-related benefits in Oxfordshire was 9,775, down from 17,350 in May 2020.

Oxfordshire monthly count of unemployment claimants January 2018 to March 2023



DWP from nomis For further information see Economy page on Oxfordshire Insight



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

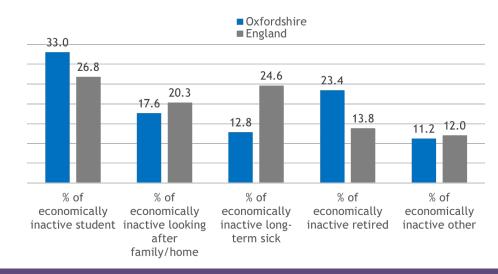
Social environment and loneliness

Finding out more

Economically active and inactive

- The Annual Population Survey 2022 shows 82.2% of people aged 16-64 are economically active in Oxfordshire. This is above the England average (78.7%).
- Those who are economically inactive are people not in employment who have not been seeking work within the last 4 weeks and/or are unable to start work within the next 2 weeks, of which there are 17.8% in Oxfordshire and 21.3% in England.
- Oxfordshire has a greater % of those who are economically inactive due to being a student (33.0%) and retired (23.4%) than the England average.
- Since 2019, we have seen a 10% increase in those that are economically inactive due to retirement.
- Of those that are economically inactive, 88.6% of people in Oxfordshire did not want a job, this is lower than (worse than) the England average (82.1%)

% of the economically inactive population aged 16-64 by reason



Annual Population Survey 2022



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications
Built and natural environment

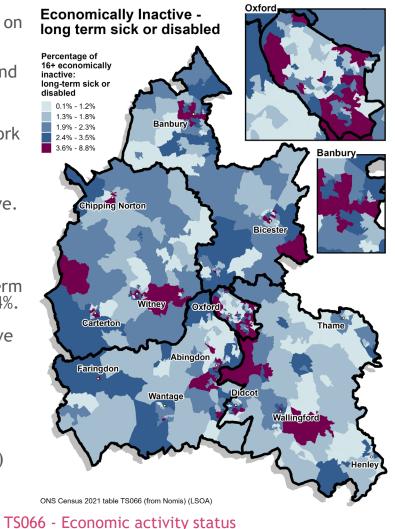
Social environment and loneliness

Finding out more

Census 2021 took place during the coronavirus (COVID-19) pandemic, a period of unparalleled and rapid change; the national lockdown, associated guidance and furlough measures will have affected the labour market topic. The economically active population includes people who were put on furlough at the time of Census 2021, who were considered to be temporarily away from work.

Economically Inactive: long term sick or disabled

- The Census 2021 asked residents to answer questions on their economic activity status. People aged 16 years and over were economically inactive if, in the week before Census 2021, they were not in employment, and they were:
 - not looking for work
 - looking for work, but were not able to start work in the next two weeks
- The Census 2021 shows 36% (215,938) of Oxfordshire residents aged 16 and over were economically inactive. This is below the South East (38%) and England (39%) average.
- Of those that were economically inactive in Oxfordshire, 2% (13,958) were inactive due to long term sickness or disability. This is below the England rate 4%.
- Some of the small areas that are economically inactive due to long term sickness or disability are:
 - Blackbird Leys (9%)
 - Northfield Brook (9%)
 - Banbury Grimsbury and Hightown (8%)
- These are above the South East (3%) and England (4%) average.





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Claimant count by district

- The district with the highest number of unemployment claimants in March 2023 in Oxfordshire was Oxford City (2,710), followed by Cherwell (2,220).
- Between March 2022 and March 2023, Oxford City and West Oxfordshire had the greatest percentage point decline in the unemployment (claimant) rate per population.

Change in unemployment claimants by district March 2022 to March 2023

	March-22 count	Rate per pop aged 16-64	March-23 count	Rate per pop aged 16-64	March-22 to March-23 ppt change
Cherwell	2,225	2.2%	2,220	2.2%	0
Oxford	3,055	2.6%	2,710	2.3%	-0.3
South Oxfordshire	1,730	1.9%	1,765	1.9%	0
Vale of White Horse	1,790	2.1%	1,795	2.1%	0
West Oxfordshire	1,475	2.1%	1,285	1.8%	-0.3
Oxfordshire	10,275	2.2%	9,775	2.1%	-0.1
England	1,477,455	4.2%	1,360,305	3.8%	-0.4

DWP from <u>nomis</u> and ONS mid-2021 population estimates (Claimants as a proportion of residents aged 16-64) For further information see <u>Economy page on Oxfordshire Insight</u>



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

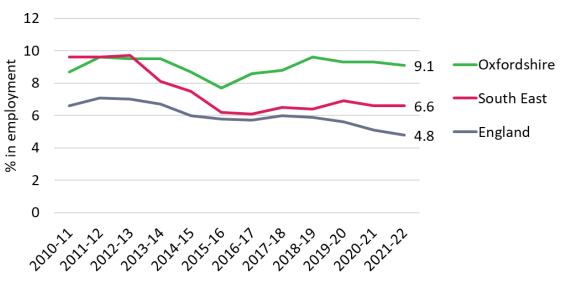
Social environment and loneliness

Finding out more

Employment of people with Learning Disabilities

- Just over 9% of Learning Disabled adults supported by long-term social care services in Oxfordshire were in employment in 2021/22 (9.1%), a similar rate as the previous year.
- This has remained above the regional (6.6%) and national (4.8%) averages.

Proportion of working age (18-64) social care service users who received long-term support during the year with a primary support reason of learning disability support, who are in paid employment (%)



NHS Digital Measures from the Adult Social Care Outcomes Framework, England - 2021/22 - NHS Digital



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

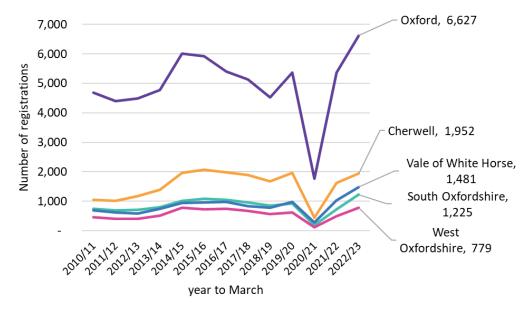
Overseas registrations for a National Insurance number

The number of people from overseas registering for a NI number is an indication of inward migration for work.

- In 2022-23 the number of new National Insurance number registrations from overseas nationals (NINo) in Oxfordshire increased by 9,268.
- Oxford City accounted for 55% of the Oxfordshire total in 2022-23 and Cherwell a further 16%.

NOTE: Free movement ended with Brexit on 31 December 2020 and COVID restrictions affected travel from March 2020.

Count of National Insurance Number registrations by overseas nationals



DWP National Insurance number allocations to adult overseas nationals entering the UK



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Poverty and deprivation



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

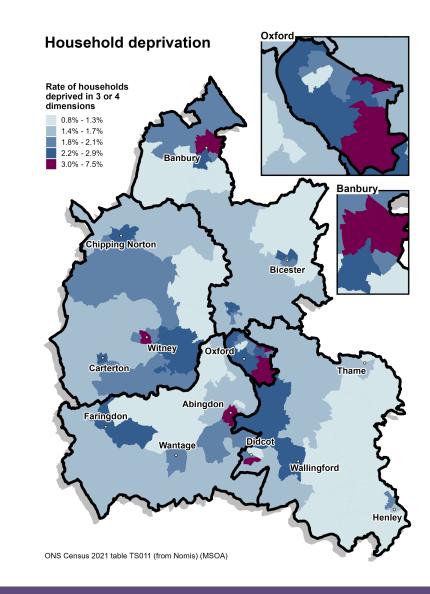
Finding out more

Dimensions of deprivation

The dimensions of deprivation used to classify households are indicators based on four selected household characteristics including:

- Education
- Employment
- Health
- Housing
- Households were considered to be deprived if they met one or more of the four dimensions of deprivation.
- In 2021, 3.7% (929,000) households in England and Wales were deprived in three dimensions, and 0.2% (57,000) were deprived in all four dimensions.
- Areas of Oxfordshire that were deprived in three or four dimensions were in parts of Blackbird Leys, Banbury Ruscote, Greater Leys, Littlemore and Rose Hill.

Census 2021 TS011 last updated 28 March 2023





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation
Housing and homelessness
Education and qualifications

Built and natural environment Social environment and loneliness

Finding out more

Child Poverty statistics

- In 2021-22 there was an estimated total of 15,882 children aged 0-15 lived in low-income families in Oxfordshire and an estimated 19,625 children and young people aged 0-19 (Relative measure Before Housing Costs).
- The rate of child poverty (aged 0-15) in 2021-22 in Oxfordshire was 12.2% of children and was highest in Oxford City (16.5%) and Cherwell (14.3%). 19% of children in England were in households in relative low income before housing costs.

Children in relative low income families before housing costs (2021-22)

Age band	Cherwell	Oxford	South Oxfordshire	Vale of White Horse	West Oxfordshire
0-4	1,155	952	706	705	577
5-10	1,635	1,584	952	959	832
11-15	1,563	1,634	901	913	856
16-19	971	1,052	576	612	540
TOTAL	5,280	5,218	3,135	3,188	2,803
Rate of child poverty (aged 0-15)	14.3%	16.5%	9.3%	9.7%	11.0%

Relative low-income is defined as a family whose equivalised income is below 60 per cent of contemporary median income. Gross income measure is Before Housing Costs (BHC) and includes contributions from earnings, state support and pensions.

Children in low income families: local area statistics 2014 to 2022 - GOV.UK (www.gov.uk) Note that Child poverty rates are only calculated for children aged 0-15 "due to difficulty identifying 16 to 19 year olds defined as child dependents in the population estimates" [DWP]



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

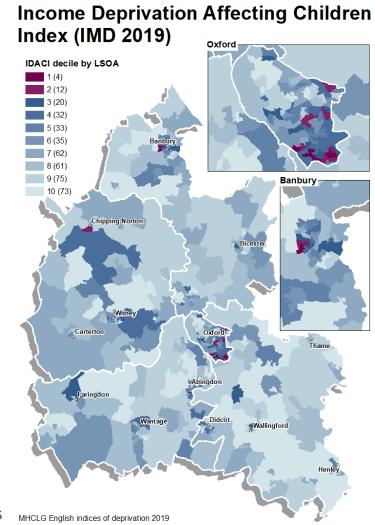
IMD: Income Deprivation Affecting Children

- According to the 2019 Income Deprivation Affecting Children Index (IDACI) there was a total of 11,990 children in poverty in Oxfordshire.
- 4 areas of Oxfordshire were in the most deprived 10% nationally, down from 7 areas ranked as most deprived in 2015.
- The most deprived areas on the IDACI 2019, were in parts of Banbury Ruscote, Blackbird Leys, Littlemore and Rose Hill & Iffley wards.

The Income Deprivation Affecting Children Index (IDACI) is the proportion of all children aged 0 to 15 living in income deprived families, that either receive Income Support or income-based benefits or families in receipt of Working Tax Credit or Child Tax Credit with an equivalised income (excluding housing benefit) below 60 per cent of the national median before housing costs. Child asylum seekers are not included in the IDACI. Data is as of 2015/16.

LSOAs are Lower Super Output Areas, a statistical geography with an average population in Oxfordshire of 1,600 residents

Ministry of Housing, Communities & Local Government indices of deprivation - <u>income deprivation affecting children index</u>





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation
Housing and homelessness
Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Older people in poverty

- As of August 2022, there was a total of 8,235 claimants of pension credit in Oxfordshire, this was a rate of 63 per 1000 people aged 65+, below the rate for the South East (94) and well below England (120).
- The highest rate per population was in Oxford City (101 people per 1,000 population).

Pension credit claimants August 2022

			Both savings		total per 1,000	
			and		population	
	Guarantee only	Savings only	guarantee	TOTAL	aged 65+	
Cherwell	968	309	620	1,899	68	
Oxford	1,223	228	463	1,917	101	
South Oxfordshire	799	273	539	1,614	53	
Vale of White Horse	727	257	451	1,433	51	
West Oxfordshire	668	237	464	1,371	55	
Oxfordshire	4,390	1,304	2,536	8,235	<i>63</i>	

DWP from statXplore

See also New JSNA bitesize on Pension Credit | Oxfordshire Insight



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

IMD: Income Deprivation Affecting Older People

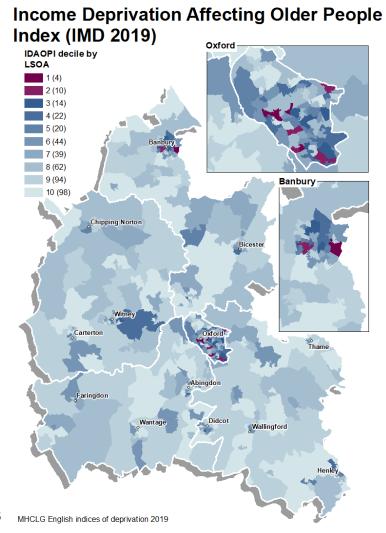
- According to the 2019 Income
 Deprivation Affecting Older People Index
 (IDAOPI) there was a total of 11,725
 older people in poverty in Oxfordshire.
- 4 areas of Oxfordshire were in the most deprived 10% nationally, up from 1 area ranked as most deprived in 2015.
- The most deprived areas on the IDAOPI 2019, were in parts of Banbury Grimsbury & Hightown ward and in Carfax, Rose Hill & Iffley and St. Clement's wards.

The Income Deprivation Affecting Older People Index (IDAOPI) is the proportion of all those aged 60 or over who experience income deprivation: adults aged 60 or over receiving Income Support or income-based benefits or families not in receipt of these benefits but in receipt of Working Tax Credit or Child Tax Credit with an equivalised income (excluding housing benefit) below 60 per cent of the national median before housing costs.

Data is as of 2015/16.

LSOAs are Lower Super Output Areas, a statistical geography with an average population in Oxfordshire of 1,600 residents

Ministry of Housing, Communities & Local Government indices deprivation - income deprivation affecting older people index





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

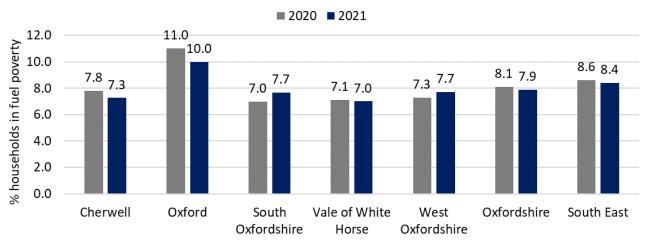
Finding out more

Fuel poverty

A household is considered to be fuel poor if: (a) they have a fuel poverty energy efficiency rating (FPEER) of band D or below; <u>and</u> (b) if they were to spend their modelled energy costs, they would be left with a residual income below the official poverty line.

- Between 2020 and 2021, the number of households in Oxfordshire classified as "fuel poor" increased from 22,861 to 23,197 (+336, +1.4%).
- Oxford City remains significantly worse than the regional average on fuel poverty. Other Oxfordshire districts are each significantly better than average.

Percentage of households in fuel poverty (2020 and 2021)



Dept for Business, Energy and Industrial Strategy Fuel poverty sub-regional statistics - GOV.UK (www.gov.uk) This workbook was updated on 27th April 2023



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

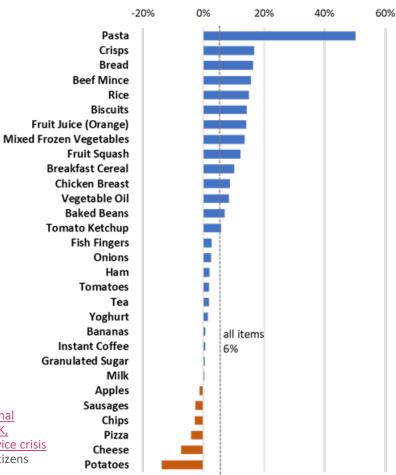
Finding out more

Cost of food - national

- ONS data¹ shows that rising prices are having a disproportionate effect on lower income households.
- ONS experimental analysis of 30 lowest price food products in seven supermarkets² showed increases in the year to April 2022 for 24 out of 30 items with low price pasta increasing by 50% in the year.
- In March 2022, Citizens Advice (national) data³ showed a continued monthly increase in people needing crisis support (help with Food Banks or Other Charitable Support) with a 44% increase compared with March 2021.
- In 2021-22, Citizen's Advice North Oxfordshire and South Northants issued 651 food vouchers used in food banks in Cherwell. Each voucher supported, on average, 2.6 people (1.5 adults and 1.2 children)⁴.

[1] Inflation and the cost of living for UK households, overview - Office for National Statistics (ons.gov.uk) [2] Tracking the price of the lowest-cost grocery items, UK, experimental analysis - Office for National Statistics (ons.gov.uk) [3] Citizens Advice crisis support record broken again in March - Citizens Advice [4] Data provided by Citizens Advice North Oxon and South Northants

Lowest price of selected 30 everyday groceries, item-level price changes, April 2022 compared with April 2021





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Healthy Start Vouchers

Healthy Start is a government public health scheme that provides a nutritional safety net for pregnant women, new mums and young children in very low-income families. Healthy Start Vouchers are provided to women who are 10 weeks pregnant or have a child under four years and who are claiming income-related benefits. A voucher is worth £3.10 and can be spent on milk, fruit or vegetables.

As of April 2023 there were 2,490 recipients of Health Start vouchers in Oxfordshire out of 4,049 eligible, a take up of 61%. This was below the England average of 65%.

Take up of Healthy Start Vouchers, April 2023

Local Authority	Total Entitled Beneficiaries	Total Eligible Beneficiaries	Uptake (%)
Cherwell	594	996	60%
Oxford	566	929	61%
South Oxfordshire	419	693	60%
Vale of White Horse	548	833	66%
West Oxfordshire	363	598	61%
Oxfordshire	2,490	4,049	61%

Healthy Start uptake data (accessed April23)

Total Entitled Beneficiaries: The total number of active beneficiaries across the paper voucher and pre-paid digital card schemes (for the reporting month)

Total Eligible Beneficiaries: The total number of beneficiaries eligible to receive the healthy start benefit (for the month prior to the entitled reporting month) (source: HMRC/DWP scan data)

Uptake (%) Total entitled beneficiaries/total eligible beneficiaries



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Free School Meals

Children in state-funded schools in England are entitled to receive free school meals if a parent or carer were in receipt of any of the following benefits:

- Income Support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- the guaranteed element of State Pension Credit
- Child Tax Credit (provided they were not also entitled to Working Tax Credit and had an annual gross income of no more than £16,190, as assessed by Her Majesty's Revenue and Customs)
- Working Tax Credit run-on paid for 4 weeks after you stop qualifying for Working Tax Credit
- Universal Credit if you apply on or after 1 April 2018 your household income must be less than £7,400 a year (after tax and not including any benefits)
- As of 9 May 23, a total of 14,984 pupils at schools in Oxfordshire were known to be eligible for Free School Meals (FSM).

"Known to be eligible" is for all state funded schools and for all pupils of any age
Note that, since 1 April 2018, transitional protections have been in place which will continue to be in place during
the roll out of Universal Credit. This has meant that pupils eligible for free school meals on or after 1 April 2018
retain their free school meals eligibility even if their circumstances change. This has been the main driver in the
increase in the proportion of pupils eligible for free school meals as pupils continue to become eligible but fewer
people stop being eligible.

Department for Education year end 31 March 2023 Oxfordshire County Council



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

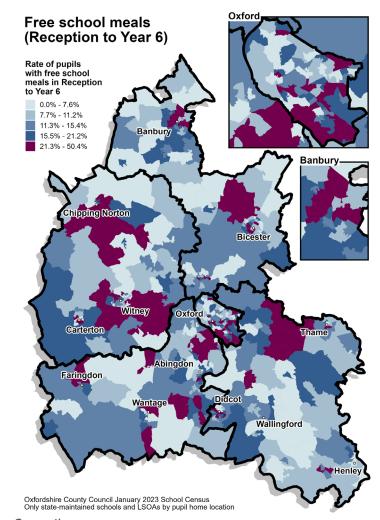
Built and natural environment

Social environment and loneliness

Finding out more

Free School Meals

- In Oxfordshire, 15.2% of pupils are eligible for free school meals, up from 14.0% in 2022. This is below the South East (18.8%) and England (23.8%) rates.
- There are areas in Oxfordshire with a higher rate of primary school pupils receiving a free school meal.
- These include Rose Hill and Iffley, Banbury Ruscote and Littlemore, where half the primary school pupils received a FSM on School Census day.



Totals include state-funded nursery, primary, secondary, alternative provision (AP) schools and special schools, and non-maintained special schools. Does not include independent schools.

Department for Education year end 31 March 2023 Oxfordshire County Council



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

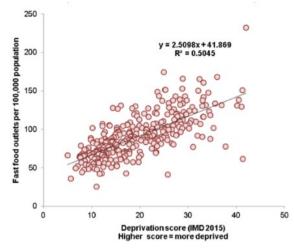
Social environment and loneliness

Finding out more

Fast food outlets

- In December 2020 there were 479 fast food outlets across Oxfordshire - the highest number of these were in Cherwell and Oxford
- Nationally, local authorities that are ranked as more deprived also have a greater density of fast food outlets

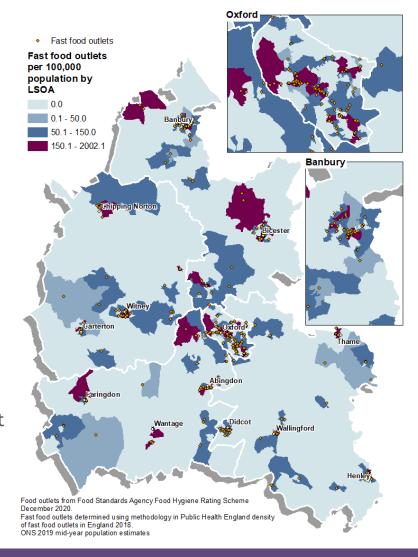
Relationship between fast food outlets and deprivation by local authority (excludes City of London data)



 National planning guidance states: "Planning policies and decisions should aim to ... support healthy lifestyles... - for example through the provision of ... access to healthier food"

Public Health England, density of fast food outlets; 2019 review of the use of the planning system to regulate hot food takeaway outlets

Fast food outlets





Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Housing and homelessness

- Housing affordability
- Housing quality and condition
- Homelessness
- Rough sleeping



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Housing affordability

- The impacts of housing affordability on health can be viewed in two ways 1:
 - Direct causing issues with mental and physical wellbeing (e.g. stress and anxiety).
 - Indirect causing a reduction in disposable income that might otherwise be used to promote a healthy lifestyle (e.g. food quality and exercise).
- Research on housing affordability and health:
 - A 2010 study in the U.S., of 10,004 residents of Philadelphia compared health outcomes of resident self reported to be living in unaffordable or affordable housing². They found:
 - People living in unaffordable housing had increased chances of poor self-rated health; hypertension; arthritis; cost-related healthcare nonadherence and cost-related prescription nonadherence.
 - Renting rather than owning a home heightened the association between unaffordable housing and self-rated health.
 - A 2017 research partnership between Shelter and ComRes³, of 20 GPs and 3,500 English Adults, found:
 - Where housing was seen as the sole cause of mental health conditions, the most commonly cited conditions were anxiety and depression.
 - 1 in 5 English adults (21%) said a housing issue had negatively impacted upon their mental health in the last 5 years.
 - Housing affordability was the most frequently referenced issue by those who saw housing pressures having had a negative impact upon their mental health.
- [1] Better housing is crucial for our health and the COVID-19 recovery The Health Foundation
- [2] Housing affordability and health among homeowners and renters PubMed (nih.gov)
- [3] Research: The impact of housing problems on mental health Shelter England



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

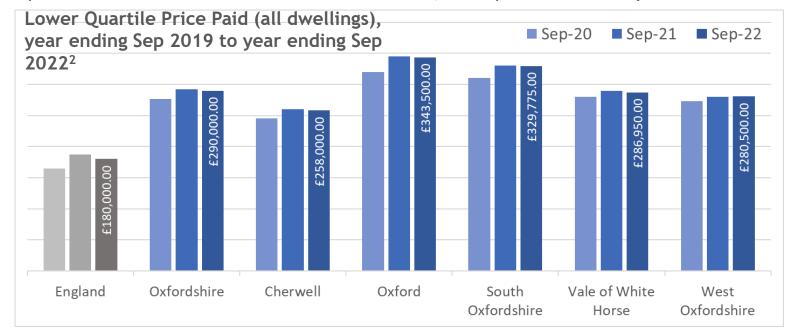
Built and natural environment

Social environment and loneliness

Finding out more

House prices in Oxfordshire

- At the end of September 2022, the average house price for Oxfordshire was £474,3091.
- The lower quartile house price in Oxfordshire was £290,000, this was 61% higher than England (£180,000). From September 2021 to September 2022, Oxfordshire saw a 0.7% decrease in lower quartile house prices.
- Across Oxfordshire's five local authorities between September 2021 and September 2022, house prices declined in four districts. In West Oxfordshire, house prices increased by £502.50.



[1] Mean house prices for administrative geographies (existing dwellings): HPSSA dataset 14 - Office for National Statistics (ons.gov.uk) [2] Lower quartile house prices for administrative geographies: HPSSA dataset 15 - Office for National Statistics (ons.gov.uk)



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

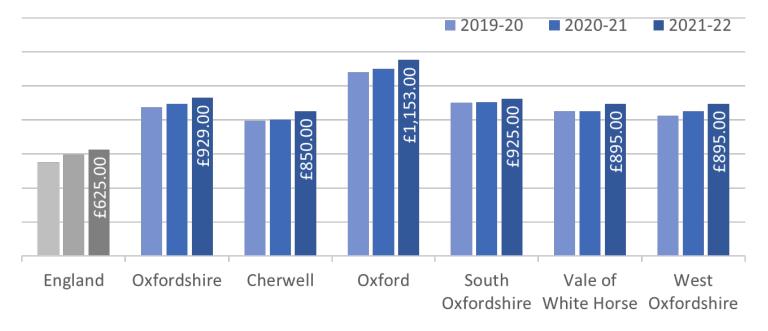
Social environment and loneliness

Finding out more

Cost of renting

- Between October 2021 and September 2022, the average lower quartile private rent for a 2 bedroom property in Oxfordshire was £929 p/m, this was 49% higher than England (£625).
- In the four year period from October 2019 to September 2022, the average lower quartile private rent across Oxfordshire's districts have all increased. The highest percentage increase was in Vale of White Horse from £825 to £895 (8%).

Lower Quartile Private Rents (2 bedroom), financial years 2019-20 to 2021-221



[1] Private rental market summary statistics in England - Office for National Statistics (ons.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

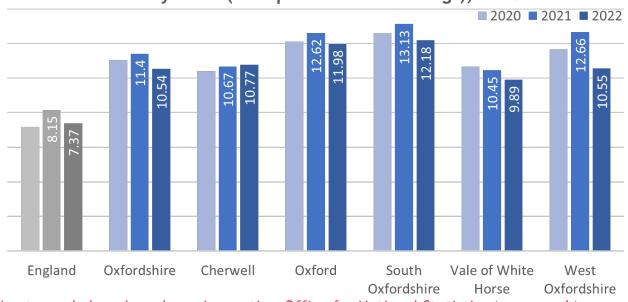
Social environment and loneliness

Finding out more

Housing affordability - workplace-based earnings

- The ratio of the cheapest market housing and lowest earnings (lower quartile) in 2022 shows that housing was much less affordable in Oxfordshire (10.54) than England (7.37).
- Between 2019 and 2022 the lower quartile affordability ratio decreased in all districts other than Oxford City which meant that cheaper housing became more affordable for low income workers in four out of five districts.
- The largest increase in affordability was in West Oxfordshire. Affordability improved by 12% over the four year period.

Lower Quartile Affordability Ratio (workplace-based earnings), 2019-2022¹



[1] House price to workplace-based earnings ratio - Office for National Statistics (ons.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Housing quality and condition

- This relates to the physical characteristics of homes, such as damp¹.
 - Studies have linked damp to a number of health problems, including respiratory issues, physical pain, and headaches, particularly affecting children.
- Research on housing quality and health:
 - A study from 2018, investigated tenant healthcare utilisation associated with upgrading 8,558 council houses to a national quality standard². They found:
 - Residents aged 60 years and over living in homes when improvements were made were associated with up to 39% fewer admissions compared with those living in homes that were not upgraded².
 - Reduced admissions were associated with electrical systems, windows and doors, wall insulation, and garden paths².
 - A major New Zealand study from 2020, using linked datasets for over 200,000 homes, found that a national home insulation intervention was associated with reduced hospital admissions³. They found:
 - Excess winter mortality and morbidity are often greater in countries with relatively mild climates than in countries with colder climates³.
 - This paradox has been linked to poorer thermal efficiency of housing in temperate countries leading to colder indoor temperatures and creating an environment more susceptible to damp and mould³.
- [1] Better housing is crucial for our health and the COVID-19 recovery The Health Foundation
- [2] Emergency hospital admissions associated with a non-randomised housing intervention meeting national housing quality standards: a longitudinal data linkage study | Journal of Epidemiology & Community Health (bmj.com)
- [3] <u>Association between home insulation and hospital admission rates: retrospective cohort study using linked data from a national intervention programme | The BMJ</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

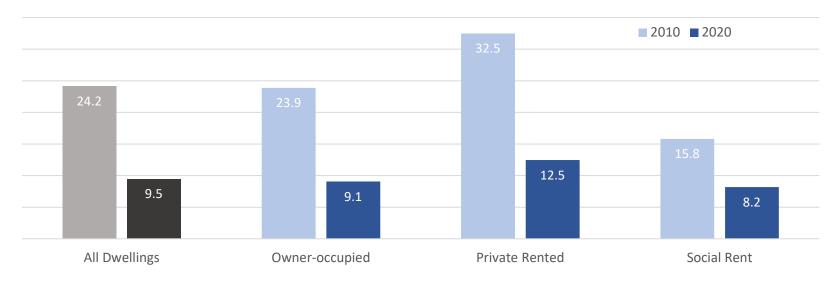
Social environment and loneliness

Finding out more

House quality and condition - non-decent homes in the South East

- Between 2010 and 2020, the number of non-decent homes in the South East Region reduced from 834,000 to 363,000.
- The percentage of non-decent homes remains highest in private rented sector at 12.5%.
- Social Rent tenures remain the lowest percentage of non-decent homes at 8.2%.
- In Oxfordshire, these percentages would equate to around: 18,000 non-decent owner occupied dwellings; 7,400 non-decent private rented dwellings; 3,600 non-decent social rent dwellings.

Non-Decent Homes (%), by Tenure (2010 - 2020), South East Region¹



[1] English Housing Survey, 2020 to 2021: housing quality and condition - GOV.UK (www.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

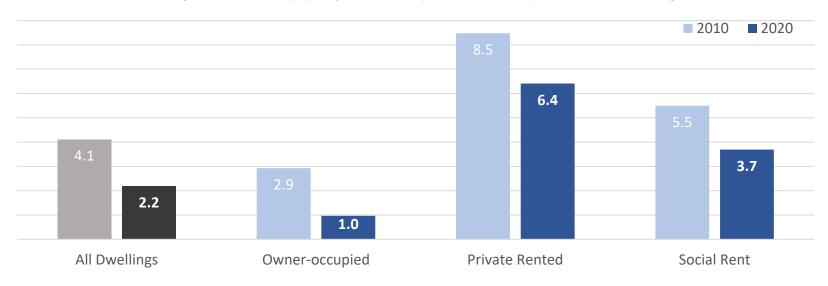
Housing and homelessness

Education and qualifications
Built and natural environment
Social environment and loneliness
Finding out more

House quality and condition - homes with damp problems in the South East

- According to the English Housing Survey, damp problems in the South East decreased across all tenure types. Owner-occupied dwellings had the greatest decrease in damp problems.
- Damp problems remains highest in private rented dwellings at 6.4%.
- In Oxfordshire, these percentages would equate to damp problems in around: 2,000 owner-occupied dwellings; 3,800 private rented dwellings and 1,600 social rent dwellings.

Damp Problems (%), by Tenure (2010 - 2020), South East Region¹



[1] English Housing Survey, 2020 to 2021: housing quality and condition - GOV.UK (www.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

House quality and condition - EPC (Energy Performance Certificate)

- An Energy Performance Certificate (EPC) indicates the energy efficiency of a building. It is based on data about a building's energy features (for example, the building materials used and the heating systems and insulation).
- The EPC records how energy efficient a property is as a building, using an A to G rating scale where A is the most efficient and G is the least efficient.
- There is a strong relationship between energy efficiency and housing quality, and most homes with poor energy efficiency do not meet the Decent Homes Standard¹.

[1] English Housing Survey, 2020 to 2021: housing quality and condition - GOV.UK (www.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

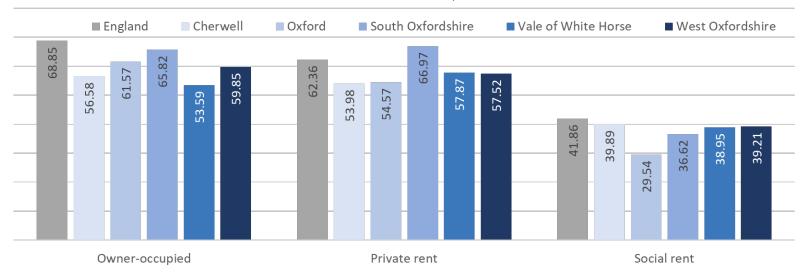
Social environment and loneliness

Finding out more

House Quality and Condition - EPC (Energy Performance Certificate)

- At the end of March 2022, the social rented sector was the best performing in terms of % energy efficient dwellings in Oxfordshire and nationally.
- Of the districts in Oxfordshire, South Oxfordshire district had the highest proportion of owner-occupied and private rented dwellings rated with a low energy performance.

Percentage of Dwellings with least efficient EPC Band D-G (%), by Tenure (Year Ending March 2022)^{1,2}



[1] Energy efficiency of Housing, England and Wales, country and region - Office for National Statistics (ons.gov.uk)

[2] Energy efficiency of Housing, England and Wales, local authority districts - Office for National Statistics (ons.gov.uk)

Note 1: This data does not reflect all dwellings because not every dwelling has an EPC (they are only required when a dwelling is constructed, sold or let). Note 2: EPCs are valid for 10 years. This dataset contains EPCs that are no longer valid.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Homelessness and health - national

- People without a home are in poorer health and live shorter lives than average. National data shows:
 - 80% of homeless people reported that some form of mental health issue and 45% had a diagnosed mental health condition¹.
 - Two thirds of people cite drug or alcohol use as a reason for first becoming homeless².
 - 85% of people who are homeless smoke³.
 - Almost two in five deaths of homeless people were related to drug poisoning4.
 - People who are homeless die on average 30 years younger. In 2019, the average age at death for identified homeless deaths was 46 years for males and 43 years for females, compared with 76 years for men and 81 years for women (England and Wales)⁴.
- In addition, research by Crisis has found that:
 - Homeless people are 17 times more likely to be victims of violence⁵. Almost 1 in 4 female rough sleepers had been sexually assaulted⁶.

- [1] <u>Homeless Link. (2014)</u>
- [2] Crisis: Drugs and alcohol
- [3] Groundswell Report 2016
- [4] ONS Deaths of homeless people 2019
- [5] Crisis 2016
- [6] <u>Crisis 2013</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

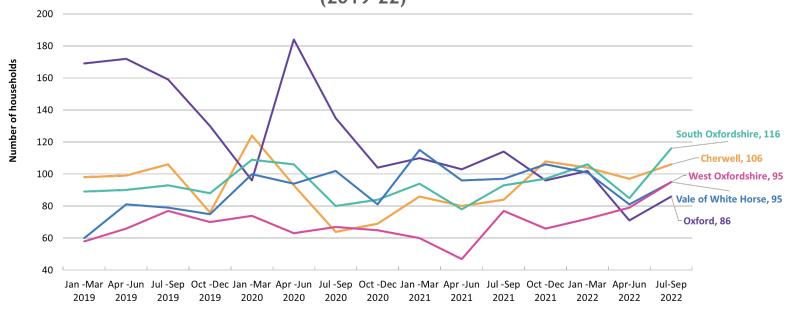
Social environment and loneliness

Finding out more

<u>Homelessness</u>

- For the financial year 2021-22, there was a total of 1,827 households assessed as owed a homelessness duty (prevention or relief) in Oxfordshire, below the previous year (1,856 in 2020-21).
- In the first two quarters of 2022-23 financial year, there was a total of 911 households assessed.
- Between April and June in 2020, during the first lockdown, there was a peak in assessed households in Oxford City (184).

Total count of households assessed as owed a homeless prevention or relief duty by quarter (2019-22)¹



[1] Homelessness statistics - GOV.UK (www.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

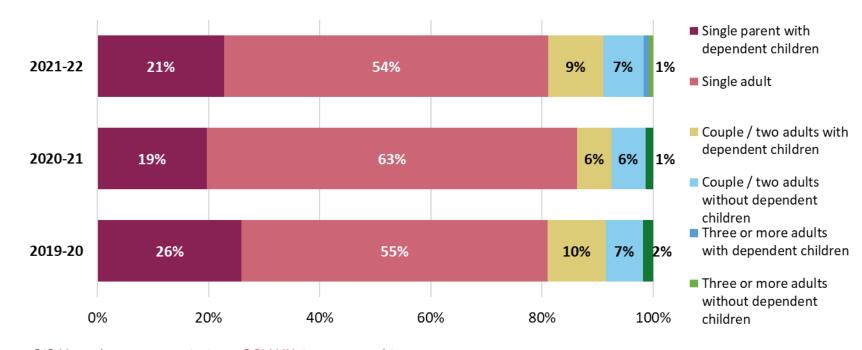
Social environment and loneliness

Finding out more

<u>Homelessness</u>

- In the past three financial years, the group with the highest number of applications assessed as owed a prevention or relief duty in Oxfordshire was Single adults.
- Between 2020-21 and 2021-22, the proportion of households with children (single or couple) increased and the proportion of single adult households decreased.

Number of households owed a prevention or relief duty by household composition¹



[1] Homelessness statistics - GOV.UK (www.gov.uk)



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Rough sleeping

- The homeless population is difficult to see and measure but represents a broad group with diverse needs. The best guess of the number of rough sleepers at any one time comes from estimates based on street counts.
- A health needs assessment of the adult street homeless population in Oxfordshire in 2019 estimated that, on any one night, 100-150 people sleep rough somewhere in the county and between 350-400 homeless adults sleep in some form of supported accommodation each night.
- It is estimated that 600-700 people sleep rough somewhere in Oxfordshire in the course of a year, and around 600-650 homeless adults are accommodated in some form of supported accommodation in the course of a year.
- By combining annual estimates of rough sleepers (~600-700) with those in supported accommodation (~600-650), and then discounting the overlap between these groups (~200-300), it is estimated that around 1,000 homeless adults sleep rough or in supported accommodation in the course of a year. Around 500 homeless adults either sleep rough (~100-150) or in supported accommodation (~350-400) on any given night.
- Around 80% of homeless adults are male, but the proportion of women has increased in recent years. Most homeless adults are aged between 30 and 50, but the proportion of young people has increased in recent years.

Oxfordshire County Council, <u>A health needs assessment of the adult street homeless population in Oxfordshire</u>

Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Education and qualifications

- Early Years Foundation
- GCSE attainment
- A level attainment
- Pupils with special educational needs
- First language of primary school pupils
- Young carers
- Young people not in education, employment or training
- Apprenticeships
- Adults lacking qualifications



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Education and health

The Public Health England Mental Health JSNA toolkit sets out the role of education in wellbeing, including that:

- Education is an important determinant of later health and wellbeing. It improves peoples'
 life chances, increases their ability to access health services and enables people to live
 healthier lives.
- Education increases peoples' ability to get a job and avoid living in poverty.
- Participation in adult learning can help encourage wellbeing and protect against agerelated cognitive decline in older adults.
- Education can also improve levels of health literacy. People with low health literacy experience a range of poorer health outcomes and are more likely to engage in behaviours that risk their health.

2. Mental health: environmental factors - GOV.UK (www.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation Housing and homelessness

Education and qualifications

Built and natural environment Social environment and loneliness

Finding out more

Pupils in Oxfordshire schools

- There was a total of **118,857** pupils attending 359 schools in Oxfordshire (January 2023), up from 116,781 pupils at 360 schools in January 2020 (+2,076, +2%).
- Of these, 84.6% were attending state-funded schools (nursery, primary, secondary, special).
- As of January 2023, 15.3% of pupils in Oxfordshire attended independent schools. This was over double the national average (6.5%).

Count and percentage of pupils at types of schools in Oxfordshire, 2020 and 2023

	2020	2023	2020 to	2023	Oxon %	Eng %
State-funded nursery	475	450	-25	3%	0%	0%
State-funded primary	54,641	55,418	777	1%	47%	51%
State-funded secondary	41,127	43,368	2,241	7%	36%	40%
State-funded special school	1,274	1,315	41	14%	1%	2%
Non-maintained special school	91	95	4	19%	0%	0%
State-funded AP school	39	8	-31	-74%	0%	0%
Independent school	16,915	18,203	1,288	4%	15%	6%
TOTAL	114,562	118,857	4,295	4%	100%	100%

Department for Education, Schools, pupils and their characteristics: January 2023 updated June 2023



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Child development

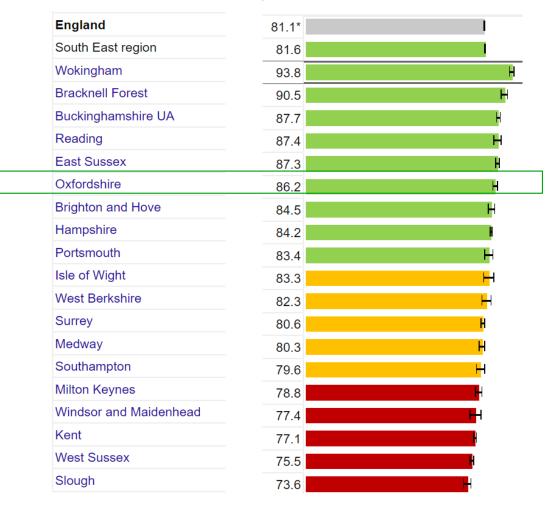
From 2015 all children in England became eligible for a Healthy Child Programme development review, delivered as part of the universal health visitor service, around their second birthday.

• As of 2021-22, Oxfordshire was statistically above (better than) the national average on the proportion of children achieving a good level of development at 2-2 ½ years (86.2% compared with 81.1%).

Child and Maternal Health - Data - OHID (phe.org.uk) Percentage of children who received a 2-2½ year review who were at or above the expected level in the in all five Ages and Stages Questionnaire-3 (ASQ-3) domains. OHID using interim reporting of health visiting metrics

Note that there are concerns about the quality of this data (accessed 02 May23)

Percentage of children achieving a good level of development at 2-2 ½ years (2021-22)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

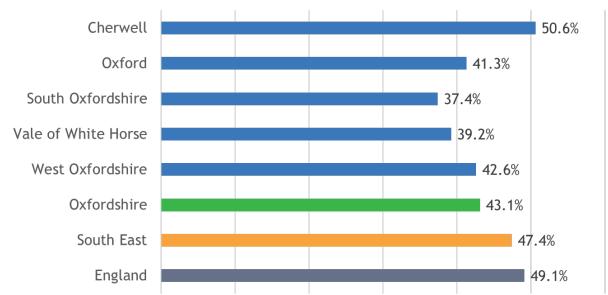
Social environment and loneliness

Finding out more

Early Years Foundation Stage

- The early years foundation stage (EYFS) statistics report on teacher assessments of children's development at the end of the EYFS, specifically the end of the academic year in which a child turns 5.
- The 2021/22 EYFS results show Oxfordshire has a lower percentage of children who had a good level of development known to be eligible for FSMs (43.1%), than the South East (47.4%) and England (49.1%) rate.
- South Oxfordshire (37.4%) had the lowest percentage of children who had a good level of development known to be eligible for FSMs.

% of children with a good level of development known to be eligible for free school meals



Early years foundation stage profile results Published 24 November 2022



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

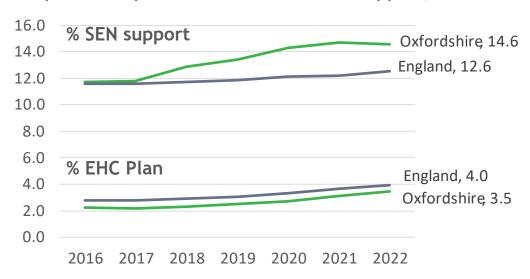
Built and natural environment

Social environment and loneliness
Finding out more

Pupils with Special Educational Needs Support

- As of January 2022, there were 21,045 pupils attending schools in Oxfordshire with Special Educational Needs (SEN) support or with an Education, Health and Care (EHC) Plan. This was up from 19,322 in January 2020 (+1,723, +9%). This percentage increase over 2 years was just above the increase across England (+8%).
- The % of pupils with SEN support at schools in Oxfordshire in January 2022 was 2 percentage points above the percentage for England.

% Pupils with Special Educational Needs support, Oxfordshire vs England



Special educational needs in England: January 2022 Department for Education, based on where child attends school



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

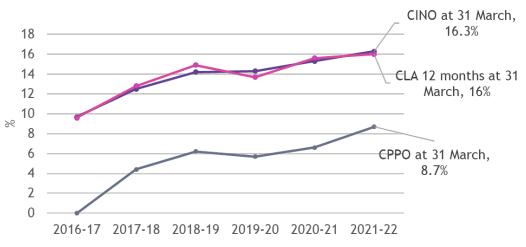
Social environment and loneliness

Finding out more

Pupils in key stage 2 with Special Educational Needs Support - Autistic Spectrum Disorder (ASD)

- The % of children on a child protection plan, excluding children looked after (CPPO) with SEN support having primary type of need for ASD in Oxfordshire schools was 2 percentage points above the percentage for England (6.8%).
- The % of children in need, excluding children on a child protection plan and children looked after (CINO) with SEN support having primary type of need for ASD in Oxfordshire schools was 2 percentage points below the percentage for England (19.3%).
- The % of children looked after (CLA) with SEN support having primary type of need for ASD in Oxfordshire schools was 9 percentage points above the percentage for England (7.3%).

% Pupils at Key stage 2 with SEN support having primary type of need: Autistic Spectrum Disorder, by social care group, Oxfordshire



Education Statistics: percentage with SEN support having primary need ASD



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

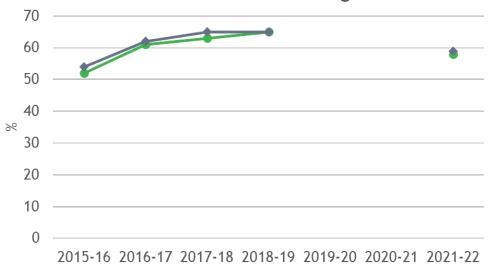
Social environment and loneliness

Finding out more

Primary results (Key Stage 2)

• In 2021/22, 58% of the 7,873 eligible 10-11 year old pupils in Oxfordshire attained at least the expected standard at Key Stage 2 in reading, writing and mathematics, similar to the national average (59%).

Percentage of pupils achieving at least the expected standard at Key Stage 2
Oxfordshire vs England



Department for Education, National curriculum assessments: key stage 2, Education statistics eligible key stage 2. Note from DfE on primary performance tables: In response to the COVID-19 pandemic, the Department for Education cancelled the 2019/20 and 2020/21 national curriculum assessments and associated data collections. As primary national curriculum assessments will be returning in 2021/22 for the first time since 2018/19, without any adaptations, the results will not be published in key stage 2 performance tables in academic year 2021/22.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary
Work, income and deprivation

Housing and homelessness

Education and qualifications

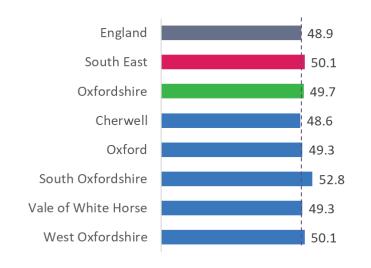
Built and natural environment Social environment and loneliness

Finding out more

GCSE attainment - Key Stage 4

- The average GCSE attainment 8 score for Oxfordshire in 2022 was 49.7 was above the England average (48.9) and below the average for the South East (50.1).
- The district in Oxfordshire with the lowest average GCSE score was Cherwell (48.6).

Average Attainment 8 score per pupil 2022



Due to the impact of the COVID-19 pandemic, the summer exam series was cancelled in both 2020 and 2021, and alternative processes set up to award grades.

A pupil's Attainment 8 score is calculated by adding up the points for their 8 subjects (with English and Maths counted twice), and dividing by 10. A Local Authority Attainment 8 score is the average of all of its eligible pupils' scores. Key stage 4 performance, Academic Year 2021/22- Explore education statistics - GOV.UK (explore-education-statistics.service.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

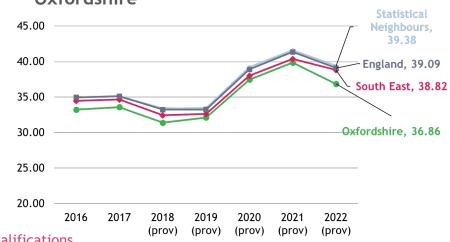
Finding out more

A level attainment - Key Stage 5

- The data shows the average point score and equivalent grade for students taking:
 - A levels, applied generals and tech levels these are all examples of level 3 qualifications, which are usually taken by 16 to 18 year olds and are equal to A levels in difficulty
 - technical certificates these are level 2 vocational qualifications
- The number of points depends on the qualification and grade. The average point score is worked out by dividing the total point score by the total size of entries. The higher the point score the better.
- In 2022, the average point score per entry in Oxfordshire is 36.86, this is a decrease of 2.99 from 2021.
- The Oxfordshire score is below the England and South East.

Due to the impact of the COVID-19 pandemic, the summer exam series was cancelled in both 2020 and 2021, and alternative processes set up to award grades.

Average point score per entry - Best 3 A levels Oxfordshire



Average score for students taking A levels and other qualifications

'Attainment and other performance measures - region and student characteristics' for All state-funded schools and colleges and All state-funded students in Oxfordshire and South East between 2017/18 and 2021/22



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation Housing and homelessness

Education and qualifications

Built and natural environment Social environment and loneliness

Finding out more

Young carers by national curriculum year group

- Data on young carers has been collected in the school census for the first time in 2022/23.
- Section <u>17ZA of the Children Act 1989</u> says a young carer is a person under 18 who provides or intends to provide care for another person (which isn't to a contract or voluntary work).
- In Oxfordshire schools, 777 (0.8%) pupils were identified as being known to be a young carer with the highest rate, 1.3% of pupils being known young carers in secondary school. This is above the South East (0.9%) and England (0.6%) rate.

Known to be a young carer by national curriculum year group 2022/23, Oxfordshire, South East and England

	Oxfordshi	re	South East %	England %
	Number of pupils	%	%	%
State-funded primary	217	0.4	0.6	0.3
State-funded secondary	560	1.3	0.9	0.6
Total	777	0.8%	0.5%	0.7%

Education Statistics - Young Carers Totals include state-funded nursery, primary, secondary, alternative provision (AP) schools and special schools, and non-maintained special schools. Does not include independent schools Data on young carers has been collected in the school census for the first time in 2022/23. The young carer indicator identifies, for those children on roll on spring census day, whether they have been identified as a young carer either by the school (including where the pupil self declares) or by parent or guardian



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Young people Not in Education, Employment or Training

- As of March 2023, in the age range 16 to 18 (school year 12-13), there was a total of **276** (2.0%) young people in Oxfordshire who were classified as Not in Education, Employment or Training (NEET). This was an increase on the rate in March 2022 (1.5%) but below a peak in March 2021.
- The district with the highest rate of young people classified as NEET was Oxford City (2.8%).

Proportion of young people aged 16-18 who are Not in Education, Employment or Training

	Mar-21	Mar-22	Mar-23
Cherwell	2.5%	2.6%	2.2%
Oxford	3.8%	1.9%	2.8%
South Oxfordshire	1.8%	1.7%	1.8%
Vale of White Horse	1.7%	1.2%	1.7%
West Oxfordshire	2.0%	1.2%	1.2%
Oxfordshire	2.4%	1.5%	2.0%

Oxfordshire County Council

Historically, this slide has used December data however March data has greater accuracy versus December data due to improved data validation.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

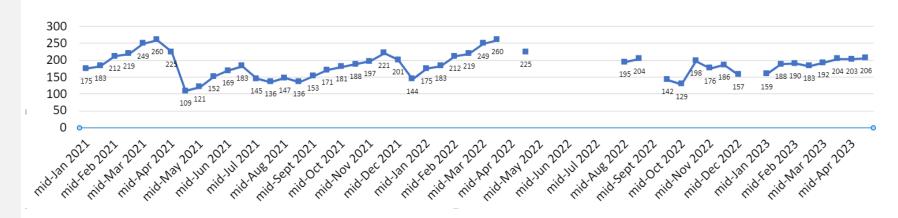
Social environment and loneliness

Finding out more

<u>Apprenticeships</u>

- Data for January to March 2023 shows that Apprenticeship vacancies have decreased since the same period in 2022.
- Apprenticeship vacancies have seen a 14% (-182) decrease from Jan March 2023 compared to the same period in 2022.

Oxfordshire Apprenticeship vacancies advertised Jan 2021 to Apr23



NOTE: Apprenticeship vacancies may contain blanks due to staff absences.

From 2021: It is possible the DfE counts of apprenticeships are currently inflated - many apprenticeships that would have ended naturally without COVID-19 lockdowns have had contracts extended or those young people were put on furlough, these still count as being in an apprenticeship. In addition, the introduction of the apprenticeship levy means that money can be spent on current members of staff and so counts do not reflect new people starting in apprenticeship (particularly affects higher level apprenticeships). Oxfordshire County Council



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

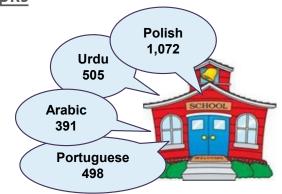
Built and natural environment

Social environment and loneliness

Finding out more

First language of Oxfordshire's primary school pupils

• The top first languages (other than English) of primary school pupils across Oxfordshire were: Polish (1,072 pupils), Urdu (505), Portuguese (498) and Arabic (391).

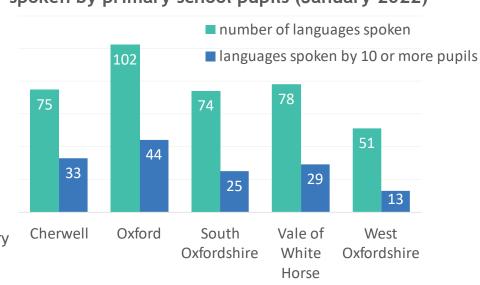


Oxford City has a very wide range of languages spoken (as a first language) by primary school pupils.

• As of January 2022, in Oxford City, there were at least 102 different languages spoken and 44 of these were spoken by 10 or more primary school pupils.

Oxfordshire County Council, School Census January 2022 - First language breakdown not available from the School Census 2023 as of 21/06/2023

Number of first languages (other than English) spoken by primary school pupils (January 2022)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

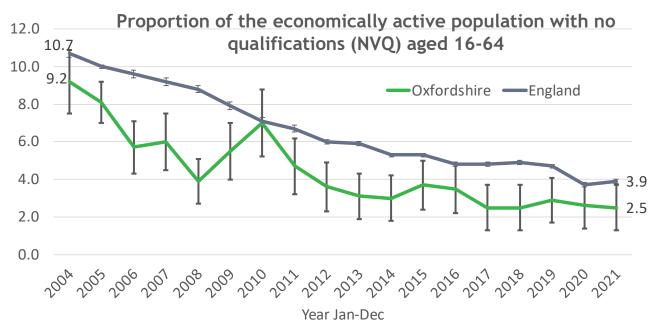
Social environment and loneliness

Finding out more

Adults without qualifications

National data shows that some of the most vulnerable members of society have the least access to the training and learning that could help improve their career prospects

- The proportion of the economically active population in Oxfordshire with no qualifications (2.5%) was statistically below the national average (3.9%) in the period Jan-Dec 2021.
- Since 2004, the proportion of adults with no qualifications in Oxfordshire has decreased, in line with the national trend.



ONS analysis of Adult Education Survey 2016 and ONS Annual Population Survey Live link here nomis

Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

The built and natural environment

- Built environment
- Access to green spaces
- 20 minute neighbourhoods
- Active travel
- Air quality
- Climate change



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary
Work, income and deprivation

Housing and homelessness
Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

The built environment

- The built environment can affect health directly and indirectly either through immediate, passive impact (e.g. effects of indoor environmental quality) or by influencing behaviours that can affect health, which can involve individuals' active participation (e.g. encouraging walking to increase physical activity)¹.
- The quality of the built and natural environment, including housing quality and affordability, access to green spaces that enable nature connectivity, and a neighbourhood that enables social interaction and sustainable, active travel to local facilities and services, are all important determinants of health and wellbeing.
- Greener living environments which support nature connectivity are known to reduce the impact of other socioeconomic determinants of health (such as low income), whilst nature-based activities or specific interventions offer the greatest health benefits to people from more deprived backgrounds or with established health needs.
- Natural England's People and Nature Survey shows that access to nature and associated health benefits is currently inequitably distributed and contributes to health inequalities in Oxfordshire.
- Healthy place shaping uses a number of tools including Health Impact Assessments, the 20 minute neighbourhood dashboard and local cycling and walking plans to promote a health enabling built environment.

The impact of the built environment on health behaviours and disease transmission in social systems | Philosophical Transactions of the Royal Society B: Biological Sciences (royalsocietypublishing.org)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

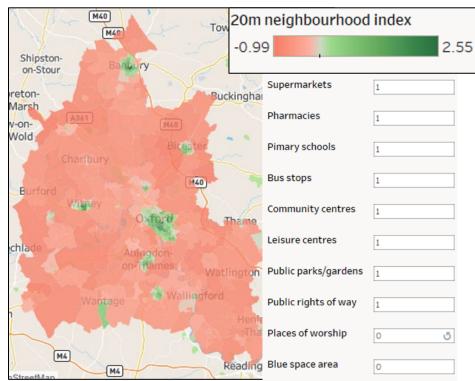
Finding out more

20 minute neighbourhoods

- Oxfordshire has developed a 20 minute neighbourhood dashboard which allows selection and weighting of community facilities to create and display a 20 minute index.
- 20 minute neighbourhoods are places where residents can meet most of their daily needs* within a short walk or cycle. The benefits include healthier communities, cleaner air, stronger local economies, and better resilience against climate change.
- 20 minute neighbourhoods involve a 10 minute walk out and a 10 minute walk back however:
 - "- the name is not the point, nor is the number of minutes specified. What matters is that, at its best, this is a holistic and transformational approach to place-making, with significant potential to improve people's health and wellbeing." (TCPA, 2021)

*E.g. shopping, school, community and healthcare facilities, places of work, green spaces

Example display from 20 minute neighbourhood tool showing overall picture of areas within a short distance of community services



Link to online 20 minute neighbourhood dashboard



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

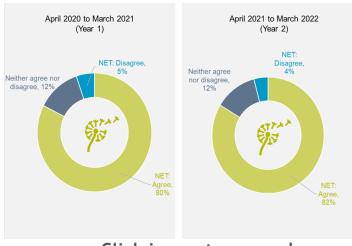
Finding out more

People and Nature survey - national

The People and Nature survey (online panel) by Natural England has replaced the previous, "Monitor of Engagement with the Nature Environment" survey (face-to-face).

- The People and Nature survey for England from April 2020 to March 2022 showed that reasons for not spending free time outdoors included:
 - Bad/poor weather (36%)
 - Being too busy at home (20%)
 - Being too busy with work/commitments (19%)
 - Poor physical health (19%)
- Concerns about contracting or spreading coronavirus was no longer the most common factor (as per previous year).

*Percentage who agree / disagree with the statement 'Being in nature makes me very happy' (April 2020 and March 2022, England.



Click image to expand

People and Nature Survey

^{*}The samples for this question were 23,314 (April 2020 - March 2021), 24,987 (April 2021 - March 2022).



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

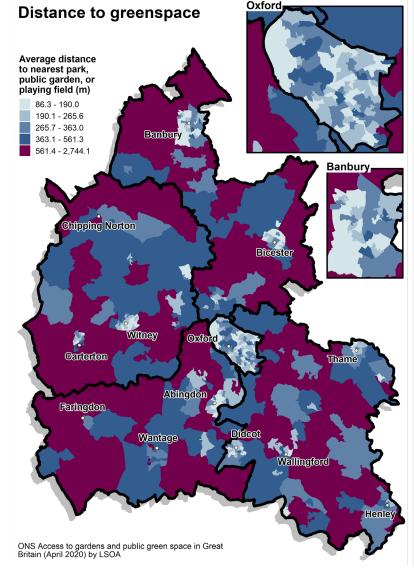
Access to public green space

The COVID-19 lockdown emphasised the importance of access to public green space and gardens.

- According to ONS analysis of Ordnance Survey data, the average distance to parks, public gardens or playing fields (greenspace) varies across Oxfordshire, with the greater distances in rural areas (as might be expected).
- By district, average distances were lowest in Oxford City and greatest in Vale of White Horse.
- Note that this data shows proximity to rather than use of green spaces.

Average distance (m) to nearest park, public garden or playing field (April 2020)

	Average distance
Cherwell	440
Oxford	290
South Oxfordshire	475
Vale of White Horse	533
West Oxfordshire	462
South East	394
England	385



ONS Access to parks, public gardens or playing fields



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Active travel



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Introduction to Active Travel

The Department for Transport's active travel fund supports plans to reallocate road space to cyclists and pedestrians and create an environment that is safer for walking and cycling. Since 2020 we've secured over £3 million of funding, including additional funds from OxLEP to deliver:

- improved and new cycle routes in Bicester and Witney
- six low traffic neighbourhoods read more here
- Quietways through the LTNs are signed cycling routes linking key destinations that follow backstreet routes avoiding some of the busier highly roads in the area.
- five Quickways quickways are cycle routes linking key destinations via main routes into the city centre.
- 20mph routes in the City along Cowley Road/Oxford Road, Iffley Road/Henley Avenue/Rose Hill, St Clement's Street, Donnington Bridge Road/Weirs Lane, Marston Road, Morrell Avenue, Between Towns Road/Church Cowley Road, and Abingdon Road



Active Travel | Oxfordshire County Council



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Finding out more

Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment
Social environment and loneliness

Active travel in Oxfordshire

- The latest Sport England data (November 2021-22) shows that Oxfordshire county had the highest proportion of adults (39.4%) participating in active travel (at least twice in the last 28 days) of England's counties. Cambridgeshire was the second highest at 36.5%.
- Oxford City had a high proportion of adults participating in active travel (60%). West Oxfordshire (32%) was just below the national average (33%).
- There has been a rise in active travel in all districts since November 2020-21. However, active travel remains lower than before the coronavirus pandemic which maybe due to changes in active travel because of home working.

Participation in active travel: At least twice in the last 28 days

	Nov 2020/21	Nov 2021/22	Change
Cherwell	23%	33%	+10%
Oxford	51%	60%	+9%
South Oxfordshire	21%	33%	+12%
Vale of White Horse	21%	36%	+15%
West Oxfordshire	20%	32%	+12%
Oxfordshire	28%	39%	+11%
England	26%	33%	+7%

Sport England, Active Lives Survey latest data as at 19/06/2023



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Introduction of Low Traffic Neighbourhoods

- Low traffic neighbourhoods (LTN's) are an area where motorised traffic is prevented from taking shortcuts through a residential area by means of traffic filters. This creates quieter and safer streets where residents may feel safer and more comfortable when making local journeys by bus, by cycle or on foot.
- There are three low traffic neighbourhoods in Cowley and three in East Oxford (currently being trialled):
 - Temple Cowley
 - Church Cowley
 - Florence Park
 - Divinity Road
 - St Clement's
 - St Mary's areas

Oxfordshire County Council



Population

Population groups and protected characteristics

Health conditions and causes of death Behavioural determinants of health

Building blocks of health

Service Use

Local research

Air quality



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Air quality and health - national

Poor air quality is a significant public health issue. There is strong evidence that air pollution causes the development of coronary heart disease, stroke, respiratory disease, and lung cancer, exacerbates asthma and has a contributory role in mortality (<u>Air Pollution Evidence Review</u> - PHE, 2019).

The annual burden of air pollution in the UK has been estimated to be equivalent to approximately 28,000-36,000 deaths at typical ages and an associated loss of population life of 328,000-416,000 life years lost (COMEAP, 2018).

Although air pollution can be harmful to everyone, it particularly affects people living in polluted areas, those who are exposed to higher levels of air pollution in their day-to-day lives, and those who are more susceptible to health problems caused by air pollution, widening health inequalities.

The annual average metric is a summary of typical environmental conditions and the population weighting accounts for human exposure. In addition to this indicator, other air pollutants (such as NO2), as well as indoor air pollutants, are also considered important.

Primary Particulate Matter (PM_{2 5}) can shorten lifespans. Those most likely to be affected are:

- People already suffering from lung and heat conditions;
- Elderly people, pregnant women and their unborn babies and the very young.

Nitrogen Oxides (NOx) exacerbate symptoms of those already suffering from lung or heart conditions

- Short-term exposure to high concentrations of NO₂ can cause inflammation of the airways
- Increases susceptibility to respiratory infections and allergens

A new report suggests a link between long-term exposure to air pollution and developing dementia.

Health matters: air pollution - GOV.UK (www.gov.uk)

*Fraction of mortality attributable to particulate air pollution (new method)

Air pollution: cognitive decline and dementia



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Health Impacts of poor air quality

 $PM_{2.5}$ is particularly harmful because the particles are very small and can travel deep into the lungs where they can cause damage to the tissue. Exposure has been linked to a range of health outcomes including asthma, respiratory disease, coronary heart disease, stroke, and lung cancer, with emerging evidence showing impacts on diabetes and low birth weight.

Inhaling NO_2 affects our health by diffusing into the cells which line the respiratory tract. This can cause effects such as tightening of the airways in the lungs (causing wheezing, coughing, shortness of breath), inflammation, and a reduced immune response. NO_2 has been associated with causing asthma, and lung cancer, with emerging evidence showing impacts on type 2 diabetes, low birth weight and dementia. NO_2 can also exacerbate existing conditions, especially asthma.

• In Oxfordshire, it was estimated that over 2,300 years of healthy life (DALYs) were lost due to ambient particulate matter in 2019. These were mainly attributed to cardiovascular diseases, diabetes and kidney diseases, and chronic respiratory diseases.

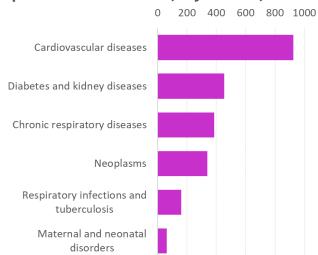
One Disability Adjusted Life Year (DALY) can be thought of as one lost year of "healthy" life. DALYs are calculated as the sum of the Years of Life Lost (YLL) due to premature mortality in the population and the Years Lost due to Disability (YLD) for people living with the health condition or its consequences.

The sum of DALYs for a population is a measurement of the gap between current health status and the situation where the entire population lives to an advanced age, free of disease and disability.

IHME, Global Burden of Disease tool, accessed 26.01.2021

PHE, Estimation of costs to the NHS And social care due to the health impact of air pollution







Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

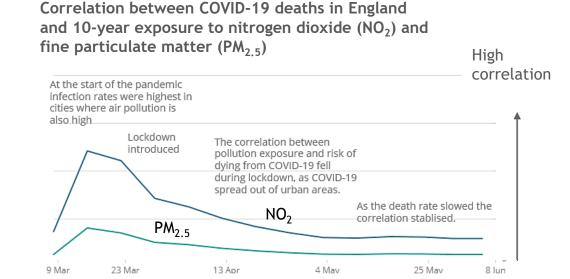
Air pollution and COVID-19 deaths - national data

Consistent exposure to air pollution is a known cause of breathing difficulties and other long-term conditions in the lungs and the heart.

- ONS data shows that more than one-third (35%) of deaths involving COVID-19 in England up to the end of June 2020 had a respiratory or cardiovascular disease as the main pre-existing health condition.
- ONS analysis found that "polluted areas initially had higher rates of COVID-19 deaths, but this trend decreased as the death toll rose".

ONS Does exposure to air pollution increase the risk of dying from the coronavirus (COVID-19)? 2020

Analysis includes 46,471 deaths involving COVID-19 among usual residents of England between 7 March 2020 and 12 June 2020, registered by 22 June 2020.





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Health Impacts of Air Pollution in Oxford

Research by King's College London (Nov19) highlighted some of the impacts of air pollution in Oxford.

- Each year on average, higher air pollution days in Oxford are responsible for:
 - 6 more cardiac arrests outside hospital.
 - 4 more hospital admissions for stroke.
 - 5 more people to hospital for cardiovascular disease than lower air pollution days.
- Roadside air pollution in Oxford stunts lung growth in children by 14.1%.
- In Oxford, an extra 1 adult and 1 child are hospitalised with asthma on days where air pollution is high compared to days where air pollution is low on average each year.
- On high air pollution days, 4 more children with asthma in Oxford experience asthma symptoms than on lower pollution days.
- Cutting air pollution in Oxford by one fifth would result in:
 - 83 fewer cases of coronary heart disease each year.
 - 28 fewer cases of lung cancer each year.
 - 77 fewer children with low lung function each year.
 - 38 fewer asthmatic children with bronchitic symptoms each year.
 - 31 fewer children with a chest infection (acute bronchitis) each year.
 - 1 less baby born underweight each year.
 - an increase in children's lung capacity by around 2.8%.

King's College London (November 2019) and Clean Air Fund



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

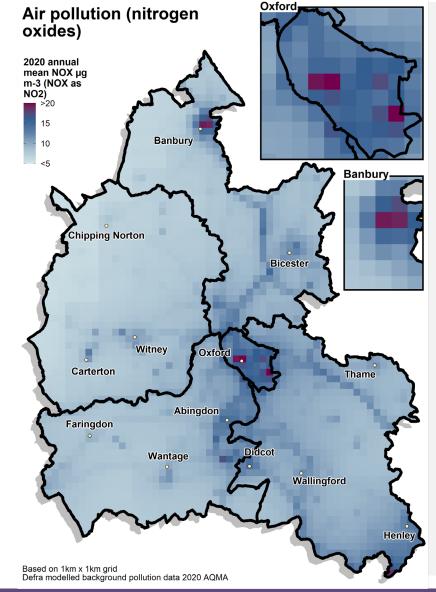
Finding out more

Air pollution - Oxfordshire

- Oxfordshire has 13 designated Air Quality Management Areas where air quality objectives are not being met.
- The latest (2020) modelled air pollution data from DEFRA highlights urban centres and roads in Oxfordshire with the highest annual average levels of nitrogen oxides.
- The sites with the highest readings for Nitrogen Dioxide (NO₂) in Cherwell, Oxford and West Oxfordshire have each seen a slight increase since 2020. The sites with the highest readings of NO₂ in South Oxfordshire and Vale of White Horse have seen a decrease in readings.

Nitrogen dioxide and nitric oxide are referred to together as oxides of nitrogen (NOx).

Modelled background pollution data - Defra, UK Oxfordshire AirQuality (air-quality.info) Air quality reports: Cherwell Oxford City South Oxfordshire Vale of White Horse West Oxfordshire





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

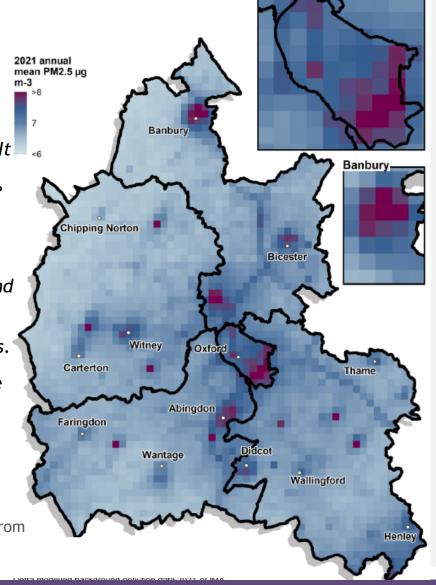
<u>Air pollution - Oxfordshire</u>

World Health Organisations (WHO) guidelines state that PM2.5, fine particulate matter of 2.5 micrometres or less in diameter, is the most dangerous pollutant because it can penetrate the lung barrier and enter the blood system, causing cardiovascular and respiratory disease and cancers. It affects more people than other pollutants and has health impacts even at very low concentrations. The updated WHO target is for annual average concentrations of PM2.5 not exceeding 5 µg/m3.

The current UK target is to achieve annual average concentrations of PM2.5 of 10 µg/m3 by 2040. Around half of UK concentrations of PM comes from anthropogenic sources in the UK such as domestic wood burning and tyre and brake wear from vehicles.

• As of 2021, the fraction of mortality attributable to particulate air pollution value for Oxfordshire was 5.5%, slightly above the South East average (5.4%) and similar to the England average (5.5%).

Based on 1km x 1km grid
Defra modelled background pollution data 2021 AQMA
Mapping by Oxfordshire County Council using modelled data from
Modelled background pollution data - Defra, UK
Oxfordshire AirQuality (air-quality.info)





Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Climate change



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

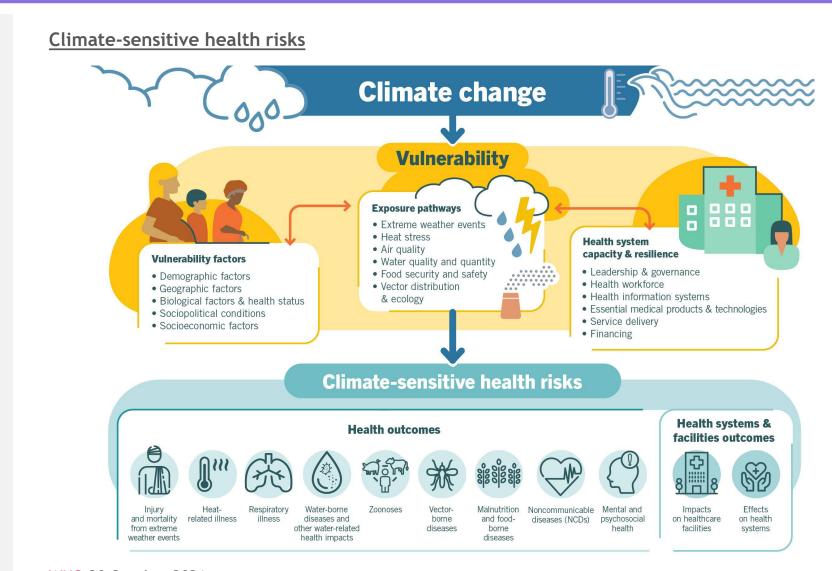
Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more



WHO 30 October 2021



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Cherwell

Oxford

Building blocks of health

Service Use

Local research

Introduction and contents Summary

Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment

Social environment and loneliness Finding out more

Carbon dioxide emissions

Between 2008* and 2020:

- Total carbon emissions from Oxfordshire fell by 39% between 2008 and 2020, from 5,516.1 kt to 3,346.3 CO2e.
- Per capita emission have reduced by 44%, from 8.6 to 4.8 tCO2e.

• In 2020, Cherwell district had the highest overall CO2 emissions (984 kt CO2) with 47% (466) relating to transport.

Department for Business, Energy and Industrial Strategy, <u>Local authority and regional carbon dioxide emissions</u> includes all sources, latest data as of Jan21 Methodology changes may mean previously published figures may differ from those noted above. *2008 is the baseline year for the Oxfordshire Energy Strategy emission reduction target

Oxfordshire Carbon Emissions per person 2008 vs 2020 (tCO2e) 10.7 2008 2020 9.1 8.7 8.6 7.4 7.1 6.5 Oxfordshire 4.9 4.8 (2020) 4.6 Oxford Oxfordshire Cherwell South Vale of West Oxfordshire White Horse Oxfordshire Oxfordshire carbon dioxide (CO2) emissions estimates 2020 (kt CO2e) 219.6 Domestic 55.1 ■ Public Sector 210.0 226.4 197.0 Commercial 172.3 465.8 73.4 57.6 87.5 46.7 Industry 89.5 Transport 316.2 310.2 90.2 73.2 23.1 76.0 179.8 112.5

South

Vale of

Oxfordshire White Horse Oxfordshire

West



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

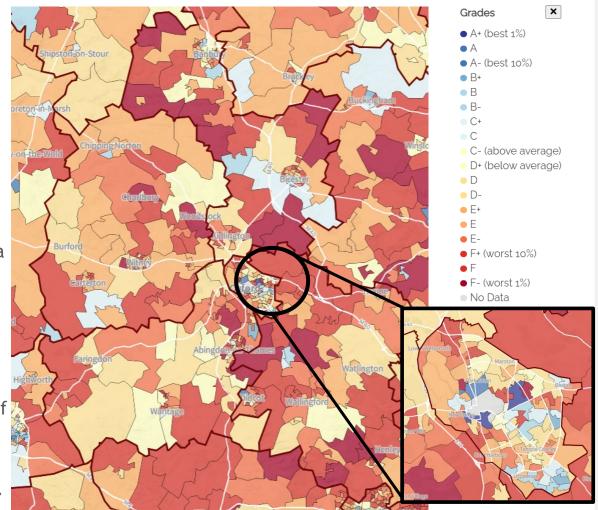
Built and natural environment

Social environment and loneliness

Finding out more

<u>Place-based carbon</u> <u>calculator</u>

- The Place-Based Carbon Calculator estimates the average (consumption based) carbon footprint per person for each LSOA* in England.
- 22 of Oxfordshire's 407 LSOAs were rated in the worst 1% in England with a grading of F- "high emissions".
- These areas of high emissions include rural parts of Cherwell and South Oxfordshire; a mix of rural and urban areas of Vale of White Horse and West Oxfordshire, and parts of North ward and Headington in Oxford City.



<u>Place-based carbon calculator</u> last updated 08/09/2022 <u>A place-based carbon calculator for England | Zenodo</u> *LSOA = Lower Super Output Area with an average of 1,300 residents



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Social environment and loneliness

- Communities
- Community volunteering
- Loneliness



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Community and voluntary groups

- In 2021-22 Oxfordshire Community and Voluntary Action (OCVA) had 270 registered members, up from 220 in 2020/21.
- OCVA supported 1,131 groups in 2021/22, an increase of 5% from the previous year.
- The Live Well Oxfordshire database provides a searchable directory of activities and support for health and wellbeing with links and contact details <u>Live Well Oxfordshire Home</u> -<u>Oxfordshire</u>



OCVA annual report



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

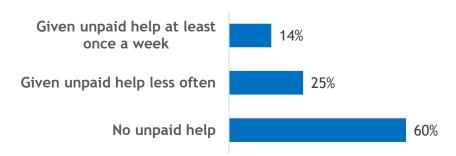
Finding out more

Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment
Social environment and loneliness

Volunteering

- In June 2022, Oxfordshire County Council undertook its 2022 residents' satisfaction survey. The survey provides an opportunity to gauge residents' satisfaction with the council's services and the area in which they live, as well as asking about their opinions of what the council's priorities should be regarding spending and saving on services.
- 40% of respondents to the Oxfordshire County Council residents survey (2022) had provided unpaid help to their local community groups, clubs or organisations in the previous 12 months.
- This was a new question for 2022 and therefore we have no previous years data to compare.

In the last 12 months have you given any unpaid help to local community groups, clubs or organisations?



Base = 1,021 (weighted total count of responses to this question)

Oxfordshire County Council residents' survey 2022



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Community transport schemes operate throughout Oxfordshire

- The Community Transport Directory 2022 is a community-led solution to unmet local transport needs. In a rural county like Oxfordshire, the minibus and car schemes provide flexible and accessible transport services for vulnerable and isolated people. Some are local and others cover the whole county.
- Of these, there were:
 - 13 in Cherwell
 - 3 in Oxford
 - 25 in South Oxfordshire
 - 16 in Vale of White Horse
 - 17 in West Oxfordshire
 - 1 that covers the entire county



From CT directory, Oxfordshire County Council and Community First Oxfordshire



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Summary
Work income and deprive

Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment
Social environment and loneliness
Finding out more

<u>Loneliness research - national</u>

- Research published April 2021 by ONS found that:
 - Age and marital status are known to be significant factors in experiences of loneliness. Pre-pandemic, those aged 16 to 24 years, renting, and single were more likely to say they often felt lonely than older age groups or those who were married.
 - Research during the pandemic found nearly two-thirds of students have reported a worsening in their mental health and well-being. Over a quarter report feeling lonely often or always, a significantly higher amount than the adult population (8%). This is likely to be affecting loneliness scores for younger people in general at a local level.

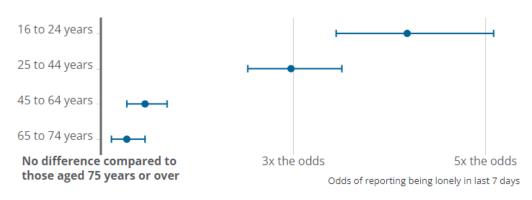
<u>Mapping loneliness during the</u> <u>coronavirus pandemic - Office for</u> National Statistics (ons.gov.uk)

The values in the chart are odds ratios; this is the comparison of the odds of reporting lockdown loneliness for someone in a certain age group compared with those aged 75 years and over, while controlling for other possible influences.

Lockdown loneliness is defined as those who said their well-being had been affected by the coronavirus through feeling lonely in the last seven days.

Younger people were more likely to experience "lockdown loneliness"

Odds of reporting feeling lonely in last 7 days, of people who said their well-being was affected by the coronavirus, Great Britain, 14 October 2020 to 22 February 2021.



Source: Office for National Statistics - Opinions and Lifestyle Survey



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Finding out more

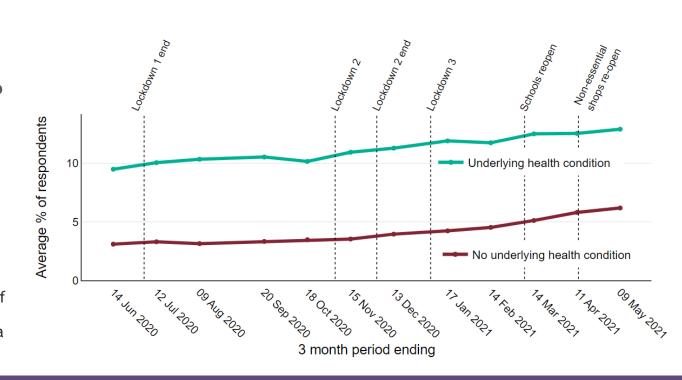
Work, income and deprivation
Housing and homelessness
Education and qualifications
Built and natural environment
Social environment and loneliness

<u>Loneliness and health - national</u>

- Data from the ONS Opinions and Lifestyle survey (included in the national Wider Impacts of COVID dashboard) from June 2020 to May 2021, shows higher rates of loneliness in people with an underlying health condition.
 - In July 2020, 10.1% of those with underlying health conditions felt lonely often, compared with 3.3% of those with no underlying health condition.
 - By May 2021 this had risen to 12.9% of those with underlying health conditions felt lonely often, compared with 6.2% of those with no underlying health condition

Percentage of respondents who are "often" lonely in England, by underlying health condition

Wider Impacts of
COVID-19
(phe.gov.uk)
PHE/OHID analysis of
Opinions and
Lifestyle Survey data
from ONS





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

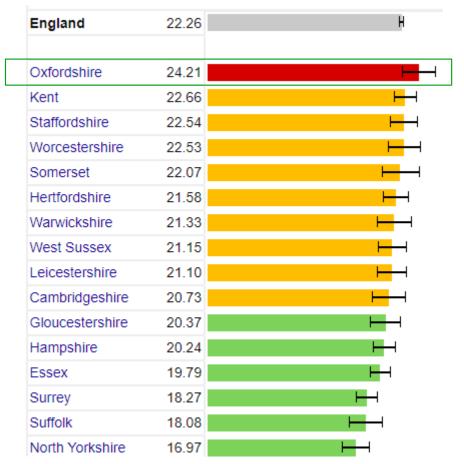
Loneliness - Oxfordshire

Loneliness is a feeling that most people will experience at some point in their lives. When people feel lonely most or all of the time, it can have a serious impact on an individual's wellbeing, and their ability to function in society. Feeling lonely frequently is linked to early deaths and its health impact is thought to be on a par with other public health priorities like obesity or smoking. Lonely people are more likely to be readmitted to hospital or have a longer stay and there is also evidence that lonely people are more likely to visit a GP or A&E and more likely to enter local authority funded residential care.

- According to the loneliness measure from the Active Lives survey (Nov19-Nov20), the rate of adults who felt lonely always/often or some of the time in Oxfordshire was above the national average (24% vs 22%).
- Oxfordshire was ranked highest (most lonely) compared with its statistical neighbours on this measure.

<u>Public health profiles - OHID (phe.org.uk)</u> (from Active Lives Adult Survey, Sport England)

The percentage of adults (aged 16+) that responded to the question "How often do you feel lonely?" with "Always / often" or "Some of the time" (Nov19 to Nov20)
Oxfordshire vs statistical neighbours





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

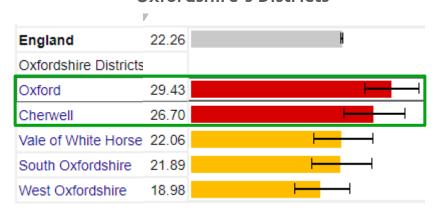
Finding out more

<u>Loneliness - Oxfordshire's Districts</u>

- The districts in Oxfordshire ranked highest on the rate of adults who felt lonely always/often or some of the time were Oxford City and Cherwell which were each significantly above the Oxfordshire (24%) and national (22%) averages.
- Vale of White Horse, South Oxfordshire and West Oxfordshire were each similar to the national average.

The percentage of adults (aged 16+) that responded to the question "How often do you feel lonely?" with "Always / often" or "Some of the time" (Nov19 to Nov20)

Oxfordshire's Districts



Public health profiles - OHID (phe.org.uk) (from Active Lives Adult Survey, Sport England)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents
Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

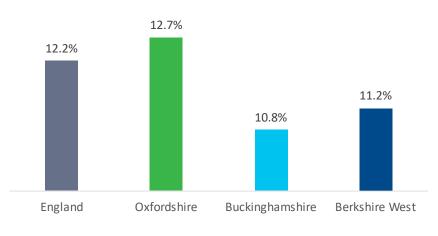
Feeling isolated - GP patients survey

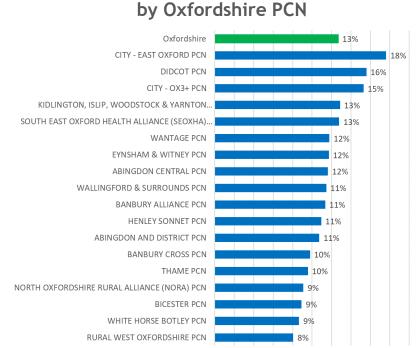
- According to the Oxfordshire's GP Patient survey (2022), Oxfordshire was above average and above both Buckinghamshire and Berkshire West on the proportion "feeling isolated from others".
- East Oxford, Didcot and OX3+ PCN's was above the Oxfordshire average and above the England average on the proportion "feeling isolated from others).

 Geeling isolated from others

 Geeling isolated from others

GP Patient survey 2022, people responding yes to "feeling isolated from others"





Data from <u>GP Patient Survey 2022 results - GOV.UK (www.gov.uk)</u> Analysis by NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board, Population Health Management. Oxfordshire base = 9,211 respondents



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction and contents

Summary

Work, income and deprivation

Housing and homelessness

Education and qualifications

Built and natural environment

Social environment and loneliness

Finding out more

Finding out more

- Citizens Advice cost of living data dashboard | <u>CA cost of living data dashboard | Flourish</u>
- PHE Fingertips Wider Determinants of Health profile
- Oxfordshire Insight- <u>Deprivation dashboard</u>

Healthy Place Shaping

- NHS England, Healthy New Towns
- King's Fund Supporting the Healthy New Towns programme
- 20 minute neighbourhoods dashboard
- The impact of the built environment on health behaviours and disease transmission in social systems
- Rojas-Rueda et al. Green spaces and mortality: a systematic review and meta-analysis of cohort studies
- Access to gardens and public green space in Great Britain Office for National Statistics (ons.gov.uk)

Climate change

- Oxfordshire County Council Climate action in Oxfordshire
- Oxfordshire Districts Air Quality Air Quality
- Climate Change Committee Climate change advice
- UK Health Security Agency Understanding the health effects of climate change
- Defra Air quality map



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 7

Service use



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

This chapter...

- This chapter provides an overview of data collected by providers of health, social care and related services in Oxfordshire including Local Authorities, Health service providers, Police and Voluntary sector organisations.
- Health and care service data in this chapter has been divided into:
 - Primary care mainly data on use of General Practice services (GPs)
 - Secondary care mainly hospital-based services
 - Mental health services data is included from health providers
 - Social care services Oxfordshire County Council adult and child social care, private care providers
 - Community safety services police and trading standards
 - Health support health visiting/nursing, smoking, alcohol, drugs services, sexual health, support from library services and voluntary sector services
- Further JSNA resources are available via the JSNA page of Oxfordshire Insight.
- With thanks to the analysts and service experts who worked with us and provided advice and data extracts for this chapter.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Summary (1)

Changes to Health and Care services

• From October 2023, there will be new plans to cap adult social care costs. This will see an introduction of a new £86,000 cap on the amount anyone in England will need to spend on their personal care over their lifetime.

Primary health care

- Oxfordshire has an above-average number of GPs and a below-average number of nurses and admin staff per population. Primary care appointments were more likely to be carried out by a GP than nationally.
- Face-to-face appointments were higher than telephone appointment in 2023. Oxfordshire have less fact-to-face appointments than nationally.
- 59% of Oxfordshire patients aged 13+ years old had registered for the NHS App in Oxfordshire.

Secondary health care

 Oxford Health Community Services saw increases in Children's Community Nursing and Falls and Care Home Support. Decreases were seen in District Nursing and Diabetes services.

Mental health and dementia services

- Mental health services have seen growing numbers of referrals, especially for young people:
 - Based on the predicted forecast from Oxford Health, 11% of 10-19 year olds were referred to mental health services in Oxfordshire.
- The estimated dementia diagnosis rate (aged 65 and over) in Oxfordshire is significantly worse than the England average.
- Dementia Oxfordshire saw an increase in active clients in Jan-Mar 2023 compared to the previous year.

Children's social care

- Comparing the latest year of 2021-22 to the prepandemic year 2019-20 shows:
 - An increase in the yearly rate of referrals to children's social care;
 - A higher rate of children who were the subject of a child protection plan;
 - A higher rate of cared for children, partly driven by the increase in Unaccompanied Asylum Seeking Children placed in Oxfordshire.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Summary (2)

- There was an increase in Strengths and Needs cases submitted to Oxfordshire County Council compared to 2021.
- There is potential for an increase in demand for children's social care services by 2031, depending on levels of housing growth.

Adult social care

- There has been an increase of adults in Oxfordshire receiving ongoing long-term social care compared to 2022.
- There is potential for an increase in demand for adult social care services as a result of the ageing population.

Community safety services

- Comparing year ending December 2022 with the average of the previous 3 years (2019 to 2021), shows an increase in the number of police recorded victims of domestic abuse, older victims of violence and sexual offences, rape and modern slavery in Oxfordshire.
- Crime statistics from Thames Valley Police indicate an increase in incidents of domestic abuse affecting children.

Health support and preventing ill-health

- The NHS Health Check programme was significantly reduced at the start of the pandemic. The latest data shows a considerable increase in the take-up of health checks.
- Oxfordshire's Library service has supported a significant increase in health and wellbeing activities and in health-related conversations with library visitors.
- Making Every Contact Count (MECC) champions within Oxfordshire's Libraries have recorded an 84% increase in MECC conversations in 2022/23 compared to the previous year.

Access to services and digital exclusion

- Close to a quarter (23%) of people aged 85+ live in areas of Oxfordshire ranked in the most deprived areas nationally on access to services.
- Ofcom research indicates that the pandemic has created an even greater digital divide.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Changes to Health and Care Services



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Buckinghamshire, Oxfordshire, Berkshire West Integrated Care System set up in 2022

The <u>2022 Health and Care Act</u> set up 42 new Integrated Care Systems (ICSs) across England.

- Each Integrated Care System has two core parts: an Integrated Care Board (ICB) and an Integrated Care Partnership (ICP).
 - an Integrated Care Board (ICB) is a statutory NHS organisation that decides how to spend the NHS budget and plans how to improve people's health, deliver high-quality care and get better value for money.
 - an Integrated Care Partnership (ICP) is a statutory committee that brings the NHS together with local authorities and other key partners, to develop the overall strategy to improve health and wellbeing.
- NHS trusts are also coming together as "provider collaboratives", new partnerships between hospitals, mental health services and community services.
- From 1 July 2022, the new Buckinghamshire, Oxfordshire, Berkshire West Integrated Care Board (BOB ICB) took over the commissioning responsibilities of the area's three Clinical Commissioning Groups (CCGs which were dissolved from 30 June), together with some current national functions, including community pharmacy, optometry and dentistry.
- ICS's are expected to reduce inequalities in healthcare and the NHS has provided a Core20PLUS5 framework to support this work.

What is the Integrated Care System? | BOB ICB





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Primary Care Networks

- The NHS Long Term Plan set out priorities for healthcare with a focus on preventing ill-health, improving care, supporting staff and investing in new technology.
- As part of the plan, Primary Care Networks (PCNs) were established across England in 2019 and continue to evolve as groups of GP practices serving patient population of 30-50,000.
- Oxfordshire's 20 PCNs continue to deliver the NHS Long Term Plan commitments including:
 - Improved access for patients including a core digital offer,
 - During 2021-22 PCN service specifications included structured medication review and medicines optimisation, enhanced health in care homes, supporting early cancer diagnosis, social prescribing and inequalities planning.
- PCNs are funded by a Directed Enhanced Service (DES) a voluntary add-on to the core GP contract. They receive allocations for some core costs plus supporting care homes.
- Most of their funding is to employ additional staff, currently:
 - clinical pharmacists and pharmacy technicians
 - social prescribing link workers, care co-ordinators and health and wellbeing coaches
 - physician associates
 - first contact physiotherapists, occupational therapists, dietitians, podiatrists
 - nursing associates and trainees
 - community paramedics and mental health practitioners

NHS England, <u>Investment and Evolution: Update to the GP contract agreement 2020/21 - 2023/24</u> NHS England, A five-year framework for GP contract reform to implement The NHS Long Term Plan



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Primary Care Networks in Oxfordshire

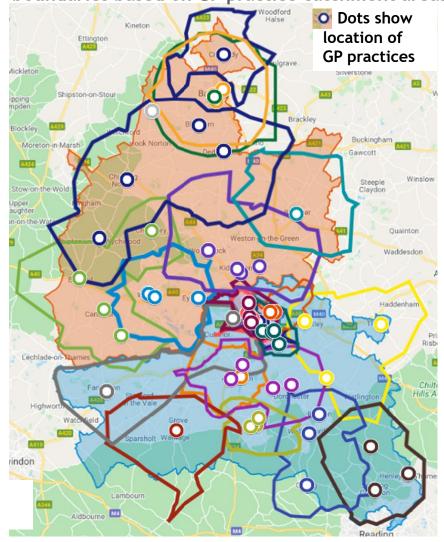
Oxfordshire providing for between 27,000 and 52,000 (GP patient population).

PCNs as of December 2020				
Northern Oxfordshire	<u>Oxford</u>			
Banbury Cross	City - East Oxford			
Banbury Alliance	City - OX3+			
NORA (North Oxfordshire Rural Alliance)	Oxford Central			
Bicester	Healthier City Oxford Network			
KIWY (Kidlington, Islip, Woodstock, Yarnton)	SEOxHA			
Eynsham & Witney				
Rural West				
Southern Oxfordshire				
Henley SonNet	Abingdon Central			
Thame	Abingdon & District			
Wallingford & Surrounds	Wantage			
Didcot	White Horse Botley			

NHS Oxfordshire Primary Care Networks

Sibford Surgery is not part of a PCN

Oxfordshire's Primary Care Networks showing boundaries based on GP practice catchment areas





Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Adult Social Care

- Adult social care is provided by Local Authorities and covers a wide range of activities to help people who are older or living with disability or physical or mental illness live independently and stay well and safe.
- Social care includes:
 - support in people's own homes (e.g. home care or 'domiciliary care');
 - care provided by care homes and nursing homes ('residential care');
 - 'reablement' services to help people regain independence;
 - providing information and advice;
 - and providing support for family carers.
- Social care is often categorised as 'short-term' or 'long-term':
 - Short-term care refers to a care package that is time limited with the intention of maximising the independence of the individual using the care service and eliminating their need for ongoing support.
 - Long-term services range from high-intensity services like nursing care to lower-intensity community support.
- In Oxfordshire, adult social care services are commissioned by Oxfordshire County Council.

Key facts and figures about adult social care | The King's Fund (kingsfund.org.uk)

Adult social care | Oxfordshire County Council
livewell.oxfordshire.gov.uk



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Adult Social Care Charging Reforms, October 2023

- From October 2023, there will be an introduction of a new £86,000 cap on the amount anyone in England will need to spend on their personal care over their lifetime.
- There will also be a change to the capital limits at which a person becomes eligible for financial support from their local authority.
- The lower capital limit, the point at which people become eligible to receive some financial support from their local authority, will rise to £100,000 from the current £23,250
- The lower capital limit, the threshold below which people will not have to pay anything for their care from their assets will increase to £20,000 from £14,250.

System	Assets less than £14,250	Assets £14,250 to £23,250 (£20,000 after reform)	Assets £23,250 (£20,000 Asseter reform) to £100k	ts over £100k
Current System	Fully LA funded for their care (except contributions from income)	Partially LA funded for their care under means test (plus contributions from income)	Entirely Self-funded for their care	
Reformed System	Fully LA funded for their care (except contributions from income)		Partially LA funded for their care under means test (plus contributions from income)	Entirely Self- funded for their care, unless they reach the cap

Adult social care charging reform



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Primary health care



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

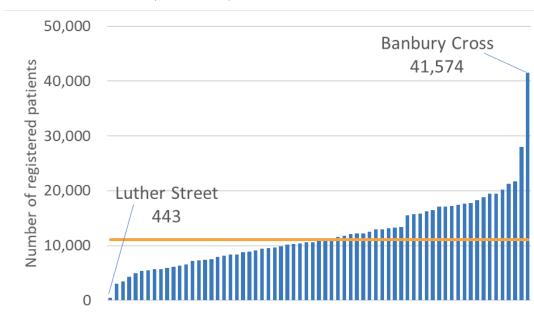
Primary health care

Primary care services provide the first point of contact in the healthcare system, acting as the 'front door' of the NHS. Primary care includes general practice, community pharmacy, dental, and optometry (eye health) services.

- In Oxfordshire there are: 67 GP practices, 85 General Dental practices, 8 Orthodontic practices and 105 Community Pharmacies (August 2022)
- As of March 2023, the number of patients registered at GP practices in Oxfordshire ranges from 41,574 (Banbury Cross Health Centre) to 443 (Luther Street Medical Practice*, Oxford).

Oxfordshire GP practices, by number of registered patients (March23)
Orange line = median (11,091 patients)

* Luther Street Medical Practice provides healthcare to people experiencing homelessness in Oxford City.



NHS England, <u>Primary care services</u> NHS Digital, <u>Patients Registered at a GP Practice, March 2023- NHS Digital</u> Oxfordshire <u>Pharmaceutical Needs Assessment</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

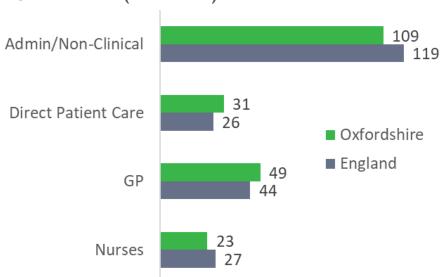
Access to service and digital exclusion

Finding out more

GP workforce to patient ratio

- As of February 2023, Oxfordshire's primary care workforce included (full time equivalent) 395 GPs and 186 nurses with ratios of..
 - 49 GPs per 100,000 patients, above the average of 44 for England
 - 23 nurses per 100,000 patients, <u>below</u> the average of 27 for England
 - 31 direct patient care staff per 100,000 patients, <u>above</u> the average of 26 for England
 - 109 admin staff per 100,000 patients below the average of 119 for England





NHS Digital <u>General Practice Workforce</u> selected information from dashboard Feb 2023 GP Registrar records are excluded as not all training placement locations are identified in the data



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

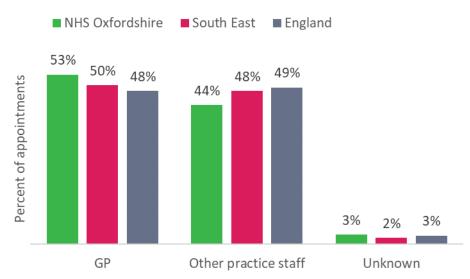
Access to service and digital exclusion

Finding out more

Proportion of primary care appointments by health care professional type

- Of the 357,461 appointments with NHS Oxfordshire GP practices carried out in February 23, 53% were by GPs, above the regional (50%) and national (48%) proportions.
- This is similar to June 2022 (NHS Oxfordshire 56% vs 52% in the South East and 50% in England).

Appointments in General Practice by Health Care Professional Type - Feb 2023



Appointments in General Practice, Feb 2023 - NHS Digital The GP appointment book systems from which this data is taken are not primarily designed for data analysis purposes. These quality issues impose limitations on what can be inferred from this data and as such they should continue to be considered as experimental statistics. The outbreak of Coronavirus (COVID-19) has led to unprecedented changes in the work and behaviour of General Practices and subsequently the GP appointments data within this publication. Read more here



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

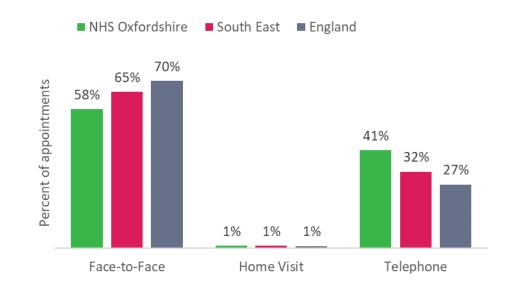
Finding out more

Proportion of appointments carried out by telephone

- Of the 357,461 appointments with NHS Oxfordshire GP practices in February 2023, 41% were carried out over the phone compared with 32% in the South East and 27% nationally.
- This is a decrease compared to June 2022 (telephone appointments = 44% NHS Oxfordshire, 36% SE, and 31% England).

Appointments marked as online, video or video conference are shown as "Online / Video". This may or may not include a video element. Non-video based online consultations such as live chat or VOIP and video based appointments are all included in this category. It is likely that many video consultations start as a telephone appointment then switch to video and therefore may be undercounted. From March 2020, face to face appointment mode data may not be entirely reflective of what happens in the practices, as appointment types have been assigned to appointment modes prior to the pandemic. Thus, even if the appointment was carried out through a different mode, the appointment registers as a face to face appointment on the system.

Appointments in General Practice by Mode, February 2023



Appointments in General Practice, Feb 2023 - NHS Digital



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

GP appointments by main mode: trend over time

- Following the first rise of COVID-19 cases in early 2020, the number of face to face GP appointments in Oxfordshire dropped sharply, accompanied by an increase in the number of telephone appointments.
- Between March 2022 and Feb 2023 the monthly average number of face-to-face GP appointments in Oxfordshire was 25% above the number carried out by telephone (202,851 face-to-face vs 151,647 by telephone average per month).

Oxfordshire monthly count of appointments in General Practice by Mode (December 2018 to Feb 2023)



Appointments in General Practice, April 2023 - NHS Digital (66 of 67 GP practices in Oxfordshire included) [1] Total triage is the system by which every patient contacting a practice is first triaged before deciding what steps need to be taken to support that patient



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

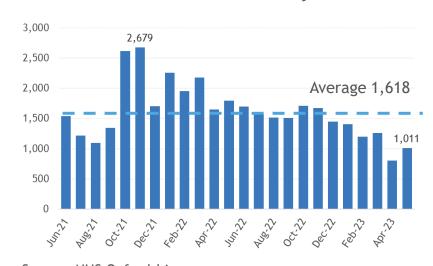
Access to service and digital exclusion

Finding out more

Use of online consultations

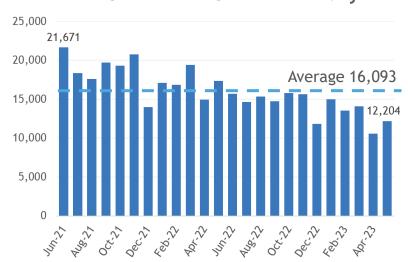
- Between June 2021 and May 2023, there were 425,063 eConsults in Oxfordshire.
- Econsults are split into diverted and submitted. The diverted submissions relate to the number of patients who started a journey and hit one of the safety red flags which diverted them to more urgent care.
- The number of diverted eConsults in May 2023 has reduced by 44% (-782) compared to May 2022.
- The number of submitted eConsults in May 2023 has reduced by 30% (5,169) compared to May 2022.

Diverted monthly submission eConsult data for Oxfordshire June 2021 - May 2023



Source: NHS Oxfordshire

Submitted monthly submission eConsult data for Oxfordshire June 2021 - May 2023





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Use of the NHS App

- The NHS App has over 15 million log-ins a month, and over 31 million people have signed up. NHS England is working to give more of the public access to following functions:
 - Navigation
 - Appointment and Choice including hospital appointment
 - Prescriptions request
 - Record Access see new information as it is added to record
 - DX therapeutics, Digital therapeutics (DTx) are software-based products for the prevention, management and treatment of health conditions.
 - Messaging, secure and safe messaging.
 - Hospital Appointment can now be seen on the NHS app for certain NHS Providers
- As of 31st May 2023, 59% of Oxfordshire patients aged 13+ years old had registered for the NHS App.

GP Patients 13+ registered for NHS App (31st May 2023

Area	NHS App registrations					
National	56%					
South East	58%					
Oxfordshire	59%					

Source: NHS Oxfordshire includes both High level registration verification (P9) and low Level registration verification (P5) NHS App



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

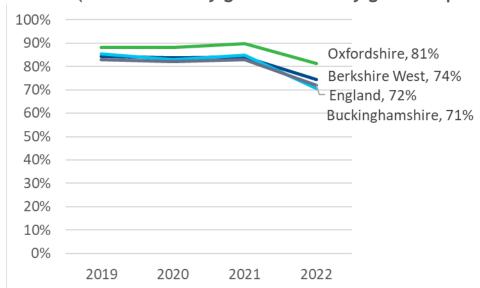
Access to service and digital exclusion

Finding out more

GP Patient survey - overall experience of GP practice

- GP Patient survey respondents who ranked their overall experience of their GP as 'very good' or 'fairly good' in 2022 was well below that in 2021 in Oxfordshire, Berkshire West, Buckinghamshire and nationally.
- Oxfordshire has remained above the national average (81% compared with 72% in England).

Overall experience of GP practice - % Summary result - Good (Combined 'very good' and 'fairly good' responses)



Note: The 2022 GP Patient survey was conducted from 10 Jan to 11 Apr 2022. This was after a rise in Covid-19 cases in Dec 2021 but as restrictions were being eased. The 2021 survey took place during the third Covid-19 lockdown.

Data from <u>GP Patient Survey 2022 results - GOV.UK (www.gov.uk)</u> Analysis by NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board, Population Health Management



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

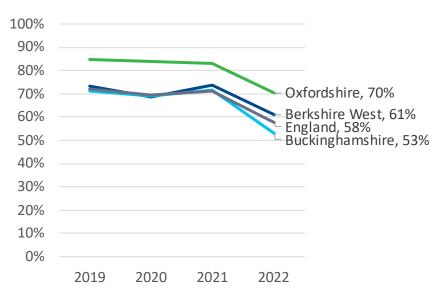
Access to service and digital exclusion

Finding out more

GP Patient survey - getting through on the phone

Oxfordshire was above average on the proportion of GP Patient survey respondents who found is easy (very or fairly) to get through to a practice on the phone.

Percentage of people who said it was 'very easy' or 'fairly easy' to get through to a practice on the phone.



Note: The 2022 GP Patient survey was conducted from 10 Jan to 11 Apr 2022. This was after a rise in Covid-19 cases in Dec 2021 but as restrictions were being eased. The 2021 survey took place during the third Covid-19 lockdown.

Data from <u>GP Patient Survey 2022 results - GOV.UK (www.gov.uk)</u> Analysis by NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board, Population Health Management



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

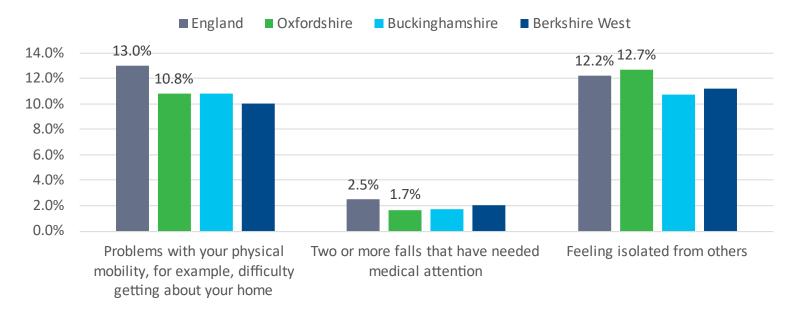
Access to service and digital exclusion

Finding out more

GP Patient survey - physical mobility, falls and isolation

- The proportion of Oxfordshire's GP Patient survey respondents (2022) was lower than the national average on (a) problems with physical mobility and (b) two or more falls needing medical attention.
- Oxfordshire was above average and above both Buckinghamshire and Berkshire West on the proportion from the GP Patient survey "feeling isolated from others".

GP Patient survey 2022, people responding yes to...



Data from <u>GP Patient Survey 2022 results - GOV.UK (www.gov.uk)</u> Analysis by NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board, Population Health Management



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

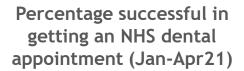
Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

GP patient survey dental statistics

- Data from the GP patient survey shows that as of Jan-Apr21, Oxfordshire had an above-average proportion of respondents successful in getting an NHS dental appointment (79% compared with 74% across England) and an above average experience of NHS services (79% vs 77%).
- The latest data for Jan-Mar22 for NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board* was 76% successful in the last year (73% Eng). (Ratings are only available at national level).



Overall, how would you describe your experience of NHS dental services? Percentage Very good and fairly good* (Jan-Apr21)



<u>Survey and Reports (gp-patient.co.uk)</u> for data from 2021 (weighted); *Data for 2022 is at ICS level and not available for Oxfordshire Place; Statistics » GP Patient Survey Dental Statistics; January to March 2022, England



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Social prescribing



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

<u>Social prescribing - introduction</u>

- Social prescribing, also sometimes known as community referral, is a means of enabling health professionals to refer people to a range of local, non-clinical services. The referrals generally, but not exclusively, come from professionals working in primary care settings, for example, GPs or practice nurses¹.
- Recognising that people's health and wellbeing are determined mostly by a range of social, economic and environmental factors, social prescribing seeks to address people's needs in a holistic way. It also aims to support individuals to take greater control of their own health.
- In order to understand the take-up and impact of social prescribing, the Professional Records Standards Body² is developing a social prescribing standard. The standard is in three parts:
 - The referral to social prescribing (unless it's a self-referral)
 - The link worker's record
 - The message back to the GP and referrer (if different)
- As of 16 January 2023, the social prescribing standard has now achieved ISN Status following rigorous quality assurance by the NHS Data Alliance Partnership Board.
- [1] What is social prescribing? | The King's Fund (kingsfund.org.uk)
- [2] Social Prescribing Standard VO.2 PRSB (theprsb.org)

Further information:

- Social Prescribing hub with a heat map (at ICS level) Social prescribing heat maps | ORCHID RSC
- Research network Home Oxford Social Prescribing Research Network



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

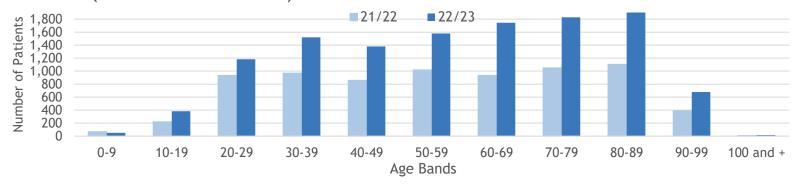
Access to service and digital exclusion

Finding out more

Provided by NHS South, Central and West Commissioning Support Unit

- Social prescribing is being rolled out in Oxfordshire with a variety of local arrangements including:
 - Link workers employed directly by GP practices
 - Link workers provided by Oxfordshire Mind, Age UK Oxfordshire or a neighbouring Primary Care Network of GP practices
- In 2022-23 there was a total of 12,287 patients referred to Social Prescribing in Oxfordshire and 19,338 referrals. Almost two thirds (62%) of patients referred were female and 38% were male.
- Between 2021-22 and 2022-23 there was a 73% (+162) increase in the number of 10-19 year olds and a 86% (+808) increase in 60-69 year olds being referred.

Age breakdown of Oxfordshire GP Patients referred to Social Prescribing (2021-22 and 2022-23)



NHS South, Central and West



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Secondary health care



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Medical provision in Oxfordshire

- The public are advised to use the NHS 111 by phone for an urgent medical problem and the NHS 999 service for a medical or mental health emergency
- Urgent medical care in Oxfordshire is provided by:
 - Accident and Emergency departments of the John Radcliffe Hospital in Oxford and Horton Hospital in Banbury (Oxford University Hospitals NHS Trust)
 - Minor Injuries Unit (MIU), patients should call 111 prior to attending the MIU to arrange an appointment in Henley, Witney or Abingdon (Oxford Health NHS FT). MIUs have X-Ray facilities and are for injuries, such as deep cuts, eye injuries, broken bones, severe sprains, minor head injury, minor burns and scalds¹.
 - First Aid Unit (FAU), patients should call 111 prior to attending the FAU to arrange an appointment in Chipping Norton, Wallingford or Bicester (Oxford Health NHS FT). FAUs are also for minor injuries but do not have X-Ray facilities¹.
 - Urgent Community Response (UCR) treatment at home for adults and older adults, who are having a health crisis or difficulties at home because their main unpaid carer is not able to cope caring for them.
- In addition, GPs can refer Oxfordshire patients to:
 - Emergency Multidisciplinary Units (EMU) providing sub-acute care based at Abingdon and Witney community hospitals (Oxford Health NHS FT)
 - Rapid Access Care Unit (RACU) for non bed-based care, Townlands Hospital Henley (Oxford Health NHS FT)

[1] NHS Oxford Health NHS Foundation Trust Minor Injuries Units and First Aid Units



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

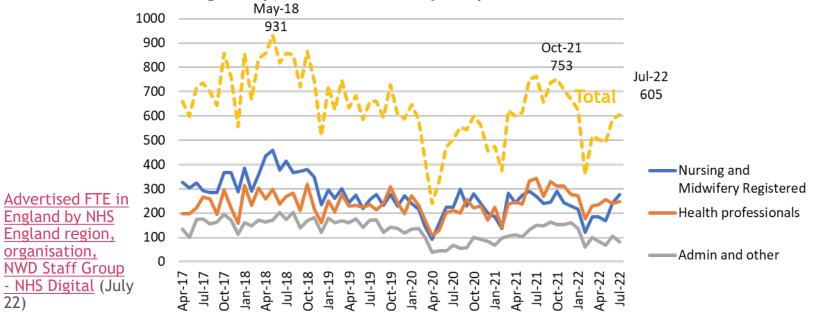
Access to service and digital exclusion

Finding out more

NHS job vacancies in Oxfordshire

- The number of advertised vacancies for staff at NHS organisations in Oxfordshire dropped significantly at the start of the COVID-19 pandemic and at times of COVID pressures in winter 2021 and winter 2022.
- In July 2022 there were **605** advertised vacancy full-time equivalents for NHS Oxfordshire Clinical Commissioning Group, Oxford University Hospitals NHS FT and Oxford Health NHS FT.

Number of advertised vacancy full-time equivalents in Oxfordshire Clinical Commissioning Group, Oxford University Hospitals NHS FT and Oxford Health NHS FT





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

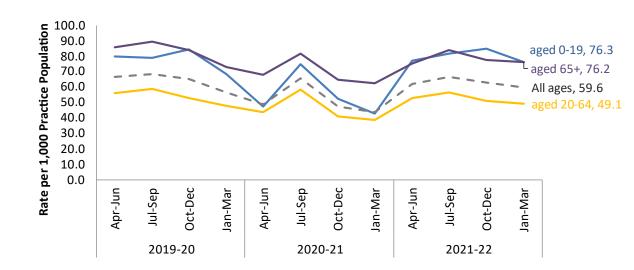
Access to service and digital exclusion

Finding out more

Use of acute services by broad age

- As a result of the COVID pandemic, in Apr-Jun20 and again in Jan-Mar21, the rate of attendance at Accident and Emergency fell significantly for all ages with the greatest reduction, on each occasion, in the youngest age group, age 0-19.
- The rates of A&E attendances by age for Jan-Mar22 were similar to the average for 2019-20

A&E Type 1 attendances Oxfordshire patients, rate by broad age group per 1,000 GP patient population per quarter



Due to System Outage at Oxford Health from August 2022, there is no update for 2023 Provided by NHS South, Central and West Commissioning Support Unit



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Use of hospital services

- In 2020-21, as a result of the COVID-19 pandemic, the monthly counts of use of hospital services was well below the previous year.
- Comparing the average monthly counts between 2019-20 (pre-pandemic) and 2021-22 for Oxfordshire patients, shows significant increases in 111 calls and outpatient attendances. Outpatient procedures more than doubled*.

Average monthly count of unplanned and planned use of hospital services (April to March)

		2019-20	2020-21	2021-22	% change 2019-20 to 2021-22
	111 Calls	11,401	14,196	12,756	11.9%
	Out of Hours	7,971	8,164	6,191	-22.3%
Unplanned	Ambulance (SCAS)	9,810	8,094	7,753	-21.0%
	A&E (AII)	16,362	13,303	16,435	0.4%
	Non-Elective	6,405	5,629	6,467	1.0%
	Elective and Daycase	5,454	3,460	4,943	-9.4%
Planned	Outpatients First Attendance	18,010	14,982	21,086	17.1%
	Outpatients Follow-ups attendance	29,392	24,821	30,052	2.2%
	Outpatient Procedures	7,657	11,264	17,218	124.9%

Due to System Outage at Oxford Health from August 2022, there is no update for 2023 Provided by NHS South, Central and West Commissioning Support Unit, NCDR data A Non-Elective Admission is one that has not been arranged in advance. It may be an emergency admission, a maternity admission or a transfer from a Hospital Bed in another Health Care Provider. *Note that OUH started recording additional Diagnostic Imaging in 2020. Without this change in recording, the First Outpatient activity would be approximately 25% lower.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Oxford Health Community Services

- Between 2020 and 2022-23, the Oxford Health Community Services that showed the greatest reductions in average monthly counts were:
 - District Nursing (-591, -3%)
 - Diabetes (-186, -34%)
- The greatest increases were in:
 - Children's Community Nursing (+785, +71%)
 - Falls and Care Home Support (+622, +49%)

Oxford Health NHS FT, top community services - monthly average of attended appointments

	FY20-21 Last	FY21-22 Last			
	year's figures provided (Averages)	year's figures provided (Averages)	FY2022/23 Figures (Averages)		
				20-21 to	%
Team Type	FY20-21	FY21-22	FY22/23	22-23	Difference
District Nursing	23,080	22,295	22,489	- 591	-3%
Podiatry	4,724	5,252	4,628	- 96	-2%
Community Therapy Service	3,023	3,241	2,979	- 44	-1%
Oxon Integrated Therapies Peadiatric SALT	1,864	1,857	2,394	530	29%
Community Respiratory Service	1,426	1,815	1,722	296	16%
Falls & Care Home Support Service	641	1,262	1,263	622	49%
Childrens Community Nursing	891	1,098	1,676	785	71%
Heart Failure	979	1,005	894	- 85	-8%
Oxon Ingegrated Therapies Paediatric OT	742	916	860	118	13%
Phlebotomy	687	699	624	- 63	-9%
Adult Speech & Language	578	648	592	14	2%
Oxon Integrated Therapies Paediatric Physio	603	614	666	63	10%
Diabetes Service	669	550	483	-186	-34%
Bladder & Bowel Service	352	332	418	66	20%

Provided by NHS South, Central and West Commissioning Support Unit

Note that a number of staff were redeployed from Oxford Health Community Services from March 2020 to help with COVID efforts around the healthcare system



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Mental health services



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

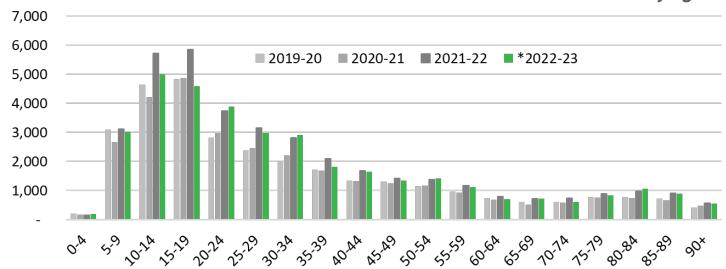
Access to service and digital exclusion

Finding out more

Referrals for mental health services by age

- Based on the predicted forecast from Oxford Health, 2022-23 saw 35,289 (5%) people referred to mental health services in Oxfordshire. This was a 7% (-2,637) decrease from 2021/22.
- We saw an increase in the age groups 0-4 (+35), 20-24 (+145), 30-34 (+83) and 80-84 (+90).
- Of the 10-19 year olds, 11% of the population were referred to mental health services in Oxfordshire.

Oxfordshire count of referrals to Oxford Health mental health services by age



Oxford Health NHS FT; *Due to System Outage at Oxford Health from August 2022, a predicted forecast has been provided based on data from April 2021 to June 2022 in Carenotes System.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Talking therapies for depression or anxiety

Improving Access to Psychological Therapies programme (IAPT) is run by the NHS in England and offers NICE-approved therapies for treating people with depression or anxiety.

- Between April 2021 and March 2022 18,210 NHS Oxfordshire patients were referred to IAPT services and 14,430 (79%) started treatment. This is higher than the England average, where 69% of referrals started treatment.
- Of the NHS Oxfordshire patients who entered treatment:
 - 92% were aged 18 to 64
 - 67% were female
 - 16% were from an ethnic minority group (compared with 23% ethnic minority in Oxfordshire county¹)
- 8,115 finished a course of IAPT treatment and 3,615 moved to recovery (i.e. they were no longer classed as having a clinical case of a mental health problem).
- 5,165 showed a reliable improvement in their condition after finishing a course of IAPT treatment.
- In Oxfordshire, deprivation has an impact on how many patients finished a course of treatment:
 - 22% of patients living in the least deprived areas finished a course of treatment
 - 4% of patients living in the most deprived areas finished a course of treatment

Data used here is taken from <u>Psychological Therapies</u>, <u>Report on the use of IAPT services</u> (last updated 19 May 23. See also <u>NHS Mental Health dashboard</u> with quarterly data for Oxfordshire CCG [1] <u>Census 2021</u>, = all groups other than white British (all ages)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

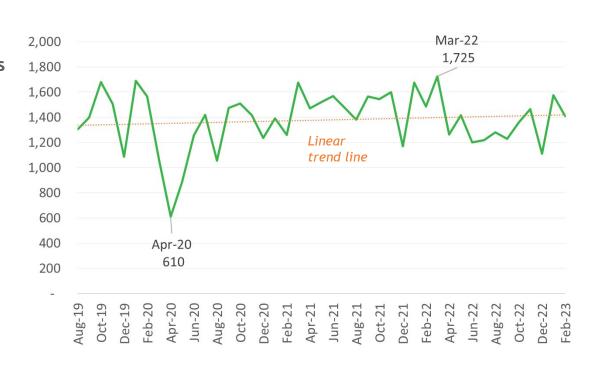
Access to service and digital exclusion

Finding out more

People accessing talking therapies

- The number of Oxfordshire patients referred to Talking therapy services (IAPT) fell in March and April 2020 at the start of the first COVID-19 lockdown.
- Between March 2021 and year ending Feb 2023, the average number of IAPT referrals decreased by 10% (from a monthly average of 1,511 to 1,355, -156).

Count of "referrals received" of NHS Oxfordshire patients to IAPT services August 2019 to Feb 2023



NHS Digital: <u>Psychological Therapies</u>, <u>Report on the use of IAPT services</u> (report accessed: 21/05/23)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

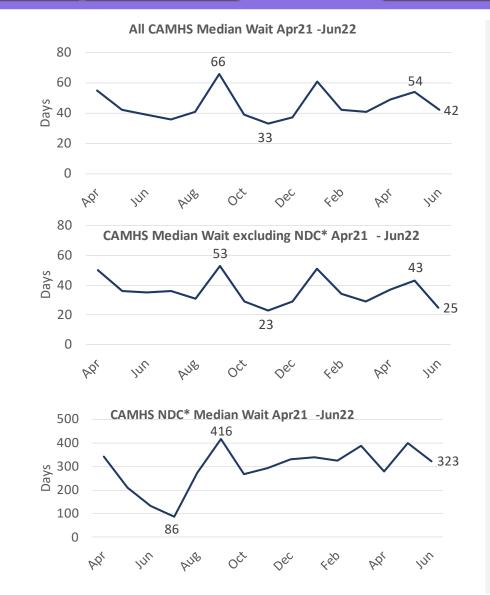
Finding out more

Access to Child and Adolescent Mental Health Services (CAMHS)

- In August 2022, there was a National clinical systems outage. The Trust is currently going through a recovery plan however this means the data on this slide is unavailable at this time.
- Between January and June 2022, the median* number of days of all children and young people waiting for CAMHS appointments was between 40 and 60 days (42 in June 2022).
- Between August 2021 and June 2022, Median Waiting Days for the Neurodevelopmental Diagnostic Clinic* has been close to or over 300 days (10 months).

Oxfordshire Health NHS FT *The Neuro-developmental Diagnostic Clinic (NDC) is one of the specialist Child and Adolescent Mental Health Services (CAMHS). The NDC offers diagnostic assessment of autism and attention deficit hyperactivity disorder (ADHD), as well as other neuro-developmental conditions *median refers the point above and below which half (50%) the observed data falls, the midpoint of the data.

National Clinical System Outage





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

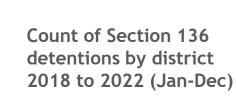
Access to service and digital exclusion

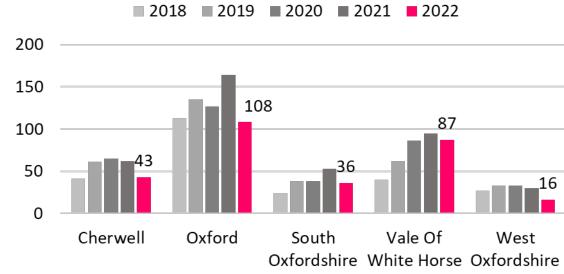
Finding out more

Police detentions under \$136 of mental health act

Section 136 of the Mental Health Act enables the police to act if they believe that someone is suffering from a mental illness and needs immediate treatment or care. The police may take that person from a public place to a place of safety, either for their own protection or for the protection of others. This is known as a Section 136 detention.

- In 2022 (Jan-Dec) Thames Valley Police recorded a total of 290 section 136 detentions in Oxfordshire.
- This was 20% below the 3 year average (for the years 2019 to 2021). Thames Valley Police saw a decrease in section 136 detentions (-13%)
- Vale of White Horse saw an increase compared to the benchmark years of +7%.





Thames Valley Police Crime Recording System - NICHE RMS & Mental Health Master



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

<u>Dementia</u>

The estimated dementia diagnosis rate (aged 65 and over) in Oxfordshire (60.7%) is significantly worse than the England (62%) average. The higher the percentage the better.

Estimated dementia diagnosis - The rate of persons aged 65 and over with a recorded diagnosis of dementia per person estimated to have dementia given the characteristics of the population and the age and sex specific prevalence rates of the Cognitive Function and Ageing Study II, expressed as a percentage with 95% confidence intervals.

Dementia Diagnosis Rate - PHE FIngertips

Estimated dementia diagnosis rate (aged 65 and over), 2022

A	Recer Trenc	Value ▲ ▼
England	→	62.0
Neighbours average	-	-
Surrey	→	64.0
Gloucestershire	→	63.1
Staffordshire	→	61.7
Hampshire	⇒	61.4
Oxfordshire	⇒	60.7
Essex	-	60.6
West Sussex	-	59.6
Hertfordshire	-	59.5
Leicestershire		59.4
Kent	-	58.3
Suffolk	→	58.3
North Yorkshire Cty	→	58.2
Warwickshire	-	54.4
Somerset Cty	-	53.6
Worcestershire	-	51.8
Cambridgeshire		51.3

Source: NHS Digital



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

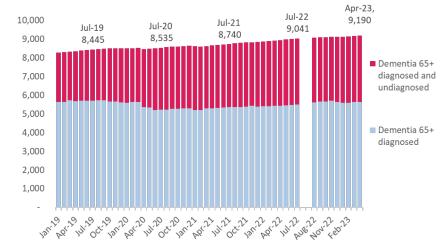
Dementia services

- As of April 2023, NHS modelled data shows the total number of older people aged 65+ with dementia in Oxfordshire (diagnosed and undiagnosed) was 9,190.
- This includes 5,649 registered patients with dementia aged 65+ recorded by Oxfordshire GPs, a diagnosis rate of 62%.
- As of April 2023, the GP surgeries with the greatest percentage of patients over 65 registered with dementia are:
 - 28 Northgate surgery 9% (211)
 - St Clements Surgery 7% (179)
 - The Leys Health Centre 7% (351)
 - Temple Cowley Health Centre 7% (371)
 - Woodlands Surgery 7% (249)
 - Berinsfield Health Centre 7% (327)
 - Cogges Surgery 7% (351)

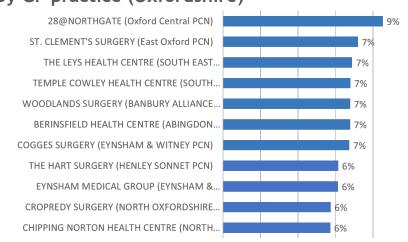
Recorded Dementia Diagnoses - NHS Digital Primary Care Dementia by LA Organisation Registered patients By GP practice

The "Primary Care Dementia Data" publication series supersedes the "Recorded Dementia Diagnoses" series.

Oxfordshire count of total patients aged 65+ with dementia - diagnosed and undiagnosed



Registered patients aged 65+ with dementia by GP practice (Oxfordshire)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

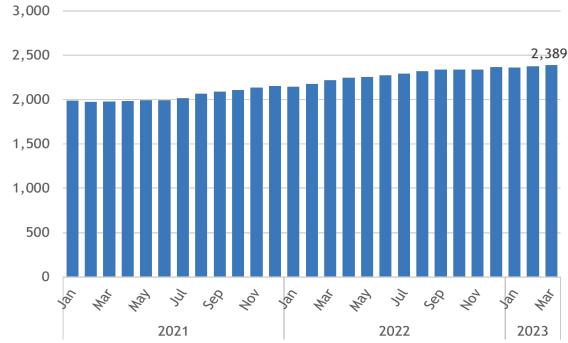
Access to service and digital exclusion

Finding out more

Dementia services

- The Dementia Oxfordshire community support service mainly takes referrals from Memory Clinics and GPs.
- Dementia Oxfordshire saw a 9% increase in active clients in Jan-Mar 2023 than Jan-Mar 2022.





<u>Dementia Oxfordshire</u> active clients shows the story of how many people Dementia Oxfordshire help rather than how many people are referred. Data unavailable prior to 2021 due to database changes.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Young Onset dementia

Dementia is described as 'young onset' when symptoms develop before the age of 65, usually between 30 to 65 years of age.

• As of February 2023, NHS data shows the total number of people aged 0 to 64 with

dementia in Oxfordshire was 147.

• Oxfordshire was below the England and South East rate per 10,000 for dementia in under 65's.

Oxfordshire count of patients aged 0-64 with a record of dementia



Primary Care Dementia Data Dementia UK

Dementia: Crude recorded prevalence aged under 65 per 10,000 (2020)

England 15,176 3.05* South East region 2,134 2.69* Isle of Wight 51 4.91 East Sussex 173 4.13 Kent 428 3.28 Hampshire 350 3.14 Milton Keynes 80 2.95 West Sussex 207 2.94* Medway 67 2.63 Buckinghamshire UA 109 2.34 Portsmouth 46 2.33 Surrey 231 2.24 Brighton and Hove 62 2.20 Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Windsor and Maidenhea 21 1.46	_		
Isle of Wight 51 4.91 East Sussex 173 4.13 Kent 428 3.28 Hampshire 350 3.14 Milton Keynes 80 2.95 West Sussex 207 2.94* Medway 67 2.63 Buckinghamshire UA 109 2.34 Portsmouth 46 2.33 Surrey 231 2.24 Brighton and Hove 62 2.20 Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	England	15,176	3.05*
East Sussex 173 4.13 Kent 428 3.28 Hampshire 350 3.14 Milton Keynes 80 2.95 West Sussex 207 2.94* Medway 67 2.63 Buckinghamshire UA 109 2.34 Portsmouth 46 2.33 Surrey 231 2.24 Brighton and Hove 62 2.20 Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	South East region	2,134	2.69* H
Kent 428 3.28 — Hampshire 350 3.14 — Milton Keynes 80 2.95 — West Sussex 207 2.94* — Medway 67 2.63 — Buckinghamshire UA 109 2.34 — Portsmouth 46 2.33 — Surrey 231 2.24 — Brighton and Hove 62 2.20 — Southampton 54 2.18 — Wokingham 27 2.05 — Bracknell Forest 22 2.03 — West Berkshire 25 1.99 — Oxfordshire 126 1.93 — Reading 35 1.69 —	Isle of Wight	51	4.91
Hampshire 350 3.14 H Milton Keynes 80 2.95 H West Sussex 207 2.94* H Medway 67 2.63 H Buckinghamshire UA 109 2.34 H Portsmouth 46 2.33 H Brighton and Hove 62 2.20 H Southampton 54 2.18 H Wokingham 27 2.05 H Bracknell Forest 22 2.03 H West Berkshire 25 1.99 H Oxfordshire 126 1.93 H Reading 35 1.69	East Sussex	173	4.13
Milton Keynes 80 2.95 West Sussex 207 2.94* Medway 67 2.63 Buckinghamshire UA 109 2.34 Portsmouth 46 2.33 Surrey 231 2.24 Brighton and Hove 62 2.20 Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	Kent	428	3.28
West Sussex 207 2.94* Medway 67 2.63 Buckinghamshire UA 109 2.34 Portsmouth 46 2.33 Surrey 231 2.24 Brighton and Hove 62 2.20 Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	Hampshire	350	3.14
Medway 67 2.63 Buckinghamshire UA 109 2.34 Portsmouth 46 2.33 Surrey 231 2.24 Brighton and Hove 62 2.20 Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	Milton Keynes	80	2.95
Buckinghamshire UA 109 2.34 ————————————————————————————————————	West Sussex	207	2.94*
Portsmouth 46 2.33 ————————————————————————————————————	Medway	67	2.63
Surrey 231 2.24 ————————————————————————————————————	Buckinghamshire UA	109	2.34
Brighton and Hove 62 2.20 Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	Portsmouth	46	2.33
Southampton 54 2.18 Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	Surrey	231	2.24
Wokingham 27 2.05 Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	Brighton and Hove	62	2.20
Bracknell Forest 22 2.03 West Berkshire 25 1.99 Oxfordshire 126 1.93 Reading 35 1.69	Southampton	54	2.18
West Berkshire 25 1.99 Oxfordshire 126 1.93 1.69 Reading 35 1.69 1.69 1.69	Wokingham	27	2.05
Oxfordshire 126 1.93 — Reading 35 1.69 —	Bracknell Forest	22	2.03
Reading 35 1.69	West Berkshire	25	1.99
	Oxfordshire	126	1.93
Windsor and Maidenhea 21 1.46	Reading	35	1.69
	Windsor and Maidenhea	21	1.46
Slough 20 1.31	Slough	20	1.31



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Children's social care



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Children's social care - summary

Comparing the latest year of 2021-22 to the pre-pandemic year 2019-20 shows:

- A decrease in the yearly rate of referrals to children's social care;
- A higher rate of children who were the subject of a child protection plan (as of March);
- A higher rate of cared for children, partly driven by the increase in Unaccompanied Asylum Seeking Children placed in Oxfordshire.

Change over time in rates of children recorded by children's social care Rate per 10,000 children aged 0-17

	2017-18	2018-19	2019-20	2020-21	2021-22	2021-22 vs 2019- 20
Yearly rate of referrals to Children's Social Care	475	468.2	513.4	439.1	452.7	-60.7
Rate of children who were the subject of a child protection plan (as of March)	47.9	40.9	37.2	30.5	37.7	0.5
Rate of cared for children (as of March)	48	54	52	53	58	5.7

Department for Education <u>Statistics on Looked After Children</u>
Department for Education, downloaded from <u>Local Authority Interactive tool</u>.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Early Help

- Early Help can reduce problems and improve outcomes for children, young people and families. Oxfordshire County Council have adapted the Early Help Assessment form into a user-friendly Strengths and Needs Form. This assessment aims to identify the children/families strengths and needs.
- In 2022, there were 3,412 Strengths and Needs cases submitted to Oxfordshire County Council. This is 15% increase on the previous year.
- We have seen a considerable increase in the abuse or neglect category of 27% (+195).

Strengths and Needs cases by presenting issue in Oxfordshire (2020-2022)

Note: figures have been grouped into high level categories to minimise anonymity. There are 70 presenting issue categories in total with each sub category falling under one of the high level categories in the table opposite.

Presenting Issue	2020	2021	2022	2022 vs 2021
Abuse or neglect	132	517	712	27%
Childs disability	375	584	656	11%
Parental illness or disability	112	192	187	-3%
Family in acute stress	607	925	1108	17%
Family dysfunction	240	381	357	-7%
Socially Unacceptable Behaviour	170	243	343	29%
Low income	18	5	18	72%*
Absent Parenting	3	6	8	25%*
Cases other than children in need	3	17	11	-55%*
Not stated	29	27	12	-125%*
Total	1689	2897	3412	15%

<u>Early Help</u> Oxfordshire County Council * denotes small figures <30</p>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

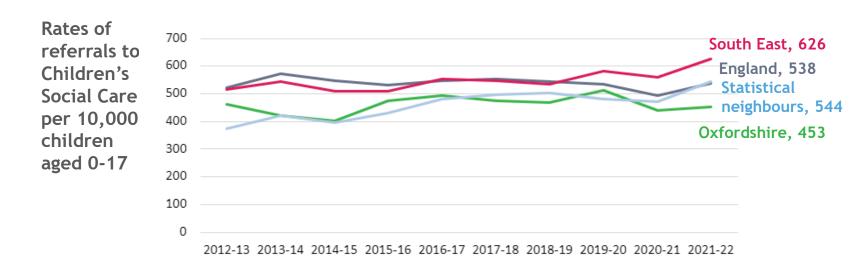
Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Referrals to Children's social care

- During 2021-22 there were 6,702 referrals to children's social care in Oxfordshire. Referrals were 3% higher than the previous year but below comparator rates.
- A significantly lower proportion of referrals than nationally resulted in no further action (3% in Oxfordshire compared with 8% nationally).
- The most recent data held by Oxfordshire County Council (not yet published) shows that at the end of March 2023, there had been 5,209 referrals to children's social care in the year.



Department for Education <u>Characteristics of children in need: 2021 to 2022 - GOV.UK (www.gov.uk)</u> Local authority interactive tool (LAIT) - GOV.UK (www.gov.uk)

Statistical neighbours include: Hertfordshire, Buckinghamshire, Wiltshire, West Berkshire, West Sussex, Bath and North East Somerset, Bracknell Forest, Cambridgeshire, Hampshire, and Gloucestershire.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

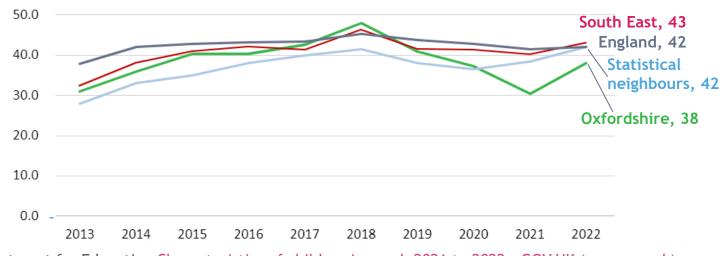
Access to service and digital exclusion

Finding out more

Children on child protection plans

- The number of children on child protection plans in Oxfordshire increased between 31 March 2021 and 31 March 2022, from 451 to 559. This is a reversal on the previous 3 years reductions.
- Oxfordshire's rate of children on Child Protection Plans remains lower than national and regional averages.
- The most recent data held by Oxfordshire County Council (not yet published) shows that at the end of March 2023, the number of children on child protection plans had increased by 1 to 560 (not shown on chart).

Rate of children who were the subject of a child protection plan (as at 31 March each year) per 10,000 children aged 0-17



Department for Education Characteristics of children in need: 2021 to 2022 - GOV.UK (www.gov.uk)



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

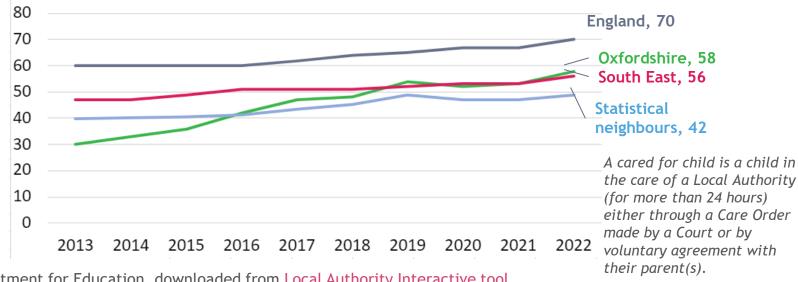
Finding out more

Children we care for

- At the end of March 2022 there were 854 cared for children in Oxfordshire, up from 784 as of 31 March 2021.
- The rate of cared for children as of March 2022 was similar to the South East average and lower than the national average.
- The most recent data held by Oxfordshire County Council (not yet published) shows that at the end of March 2023, there were 869 cared for children which includes 103 unaccompanied asylum-seeking children.

• As at 31 March 2022 there were 58 cared for children who were unaccompanied asylum-seeking children in Oxfordshire, below the number for 2019 (64). This has increased to 103 in 2023.

Rates of cared for children (as at 31 March each year) per 10,000 children aged 0-17



Department for Education, downloaded from Local Authority Interactive tool.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

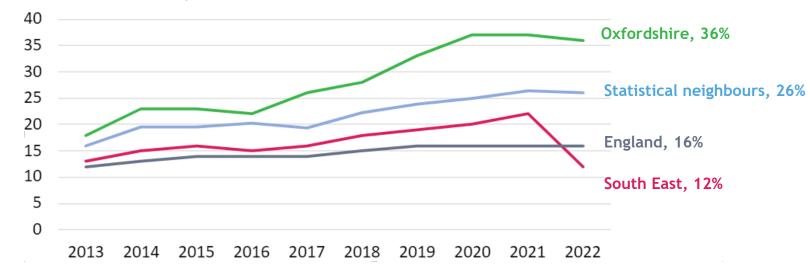
Access to service and digital exclusion

Finding out more

Children we care for - placed out of county

- The proportion of Oxfordshire's cared for children who were placed more than 20 miles from their home and outside Oxfordshire remained at 36% as at March 2022.
- Oxfordshire rate is above the regional and national rates.
- Provisional data for March 2023 shows a slight improvement with 33% of cared for children placed out of county and more than 20 miles from their home.

% of Children We Care For (at 31 March), placed more than 20 miles from their homes, outside LA boundary



Department for Education, downloaded from <u>Local Authority Interactive tool</u>. Statistical neighbours include: Hertfordshire, Buckinghamshire, Wiltshire, West Berkshire, West Sussex, Bath and North East Somerset, Bracknell Forest, Cambridgeshire, Hampshire, and Gloucestershire.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

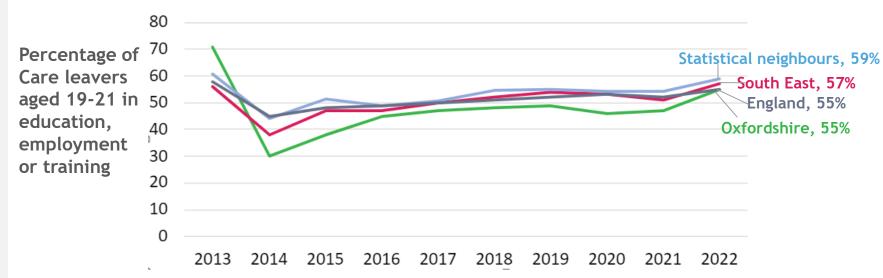
Access to service and digital exclusion

Finding out more

Care leavers in employment, education or training

Young people leaving care tend to be particularly vulnerable to poor health and wellbeing. For example, national research shows that they are at greater risk of social exclusion, unemployment, health problems, and offending.

- As of 31 March 2022, there were 332 care leavers¹ in Oxfordshire. Of these, 184 (55%) were in education, employment or training.
- Oxfordshire's rate is the same as that for England and slightly below the regional average
- Data for 2023 is not yet available.



Department for Education, downloaded from <u>Local Authority Interactive tool</u>. Next updated Nov22 NOTE: [1] Care leavers now aged 19, 20 and 21 who were looked after for a total of at least 13 weeks after their 14th birthday including some time after their 16th birthday



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Estimate of future demand for children's social care

There are two sources of predicted population growth for Oxfordshire: (1) Oxfordshire County Council forecasts which include assumptions on housing development (2) ONS projections based on past trends

- National ONS projections suggests a slight fall in the population of children aged 0-17, whereas Oxfordshire County Council's local forecasts predict an increase.
- Applying the current rate of <u>referrals to child social care</u> (i.e. assuming no change in prevalence) to population forecasts/projections gives a potential change by 2031 of:
 - +600 (6,700 to 7,200, rounded) from 2021 to 2031 based on Oxfordshire County Council population forecasts including housing growth
 - **-300** (6,700 to 6,400, rounded) from 2021 to 2031 based on ONS trend-based population projections

Oxfordshire County Council; OCC forecasts; ONS 2018-based population projections



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Register of disabled children



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Register of Disabled Children

- The Oxfordshire County Council register of disabled children and young people (CYP) is compiled from three sources:
 - OCC EYES* database which includes short Breaks and Social Care Children cases with a disability.
 - MAX Cards (had a discount card for SEN or disabled child).
- As of 31 March 2023 there were 4,177 CYP aged 0-24 (up to 25) on the register. This is a decrease of 8% (-366) from last year.
- Due to a change in the way the data is collected, there is no location data linked to Max Card data. The remaining CYP on the register (OCC EYEs) is highest in West Oxfordshire with 24 CYP per 1,000 population.

Disability register count and rate by district in Oxfordshire (March23)

District	Count of children	Rate per 1000 population		
Cherwell	856	4		
Oxford	860	19		
South Oxfordshire	504	8		
Vale of White Horse	680	17		
West Oxfordshire	936	24		

Oxfordshire County Council Disability Register Data 31 Mar 2023; *Oxfordshire County Council Early Years and Education Management System. P02 Census 2021: Usual resident population by five-year age group, local authorities in England and Wales



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Disability registered children more likely to be male and of secondary school age

- Of the total of 4,177 children and young people on the disability register in Oxfordshire as of 31 March 2023:
 - 30% had a recorded gender of female
 - 70% had a recorded gender of male
- Over half of young people on the disability register were aged 10-17.

Register of disabled children by age (March23)

Age band	Count	Percent of total
0-4	236	5.7%
5-9	1,172	28%
10-14	1,746	41.8%
15-19	1,003	24%
20-24	19	0.5%
TOTAL	4,176*	100%
0-17	4,145	99%
10-17	2,737	66%

Source: Oxfordshire County Council Disability Register Data 31Dec21 *missing age information for 1xCYP



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

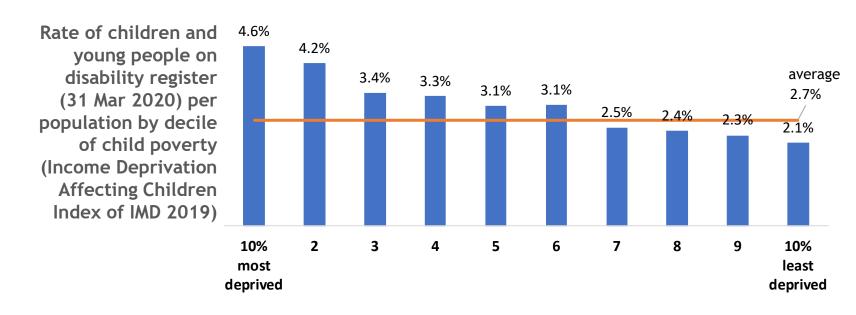
Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Disability register by child poverty index

- Research by Contact a Family in 2012, and cited by Public Health England, estimated that it costs three times as much to raise a disabled child^[1]
- Areas of Oxfordshire ranked as more deprived on child poverty also have higher rates of children and young people on the Oxfordshire disability register



Disability register Oxfordshire County Council as of 31 March 2020 MHCLG IMD 2019 Income Deprivation Affecting Children decile Denominator used is children aged 0-17 from ONS mid year population estimate by LSOA as of mid 2018

[1] <u>Public Health England Disabilities in Children and Young People in London September 2017</u>

1 Contact a Family (2012) Counting the Costs 2012: The Financial reality for families with disabled children UK



Population

Population groups and protected characteristics

Health conditions and causes of death Behavioural determinants of health

Building blocks of health

Service Use

Local research

Adult social care



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Vacancies in health and social work have reduced - national

- Job vacancies for all types of jobs in the UK have seen a slight reduction in the latest data (Jan-March 2023) to a vacancy rate of 3.5 per 100 jobs.
- Vacancies in health and social work have decreased on year by 6.5%, compared to a decrease of 14.5% for all vacancies. The rate of vacancies remain above average at 4.6 per 100 jobs.

Number of vacancies in Health and Social Work vs All vacancies UK trend



Vacancies and jobs in the UK - Office for National Statistics (ons.gov.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Adult Social Care workforce

- The total number of (whole time equivalent) jobs in Adult Social Care (ASC) in Oxfordshire in 2021-22 was 11,500, equivalent to a rate of 89 per 1000 people aged 65+. This was above the rate per population of selected comparator areas.
- The ASC workforce turnover rate in 2021-22 was 46% and the vacancy rate was 11%.

Adult Social Care workforce statistics 2021-22, Oxfordshire and selected comparator authorities

	Jobs (whole time equivalent)	Jobs per 1,000 people aged 65+	Turnover rate	Vacancy rate
Buckinghamshire	8,400	81	31%	11%
Cambridgeshire	9,800	78	40%	10%
Oxfordshire	11,500	89	46%	11%
West Berkshire	2,400	76	33%	7%

Local area information (skillsforcare.org.uk) from the Adult Social Care Workforce Data Set Population estimates: Census 2021 (ons.gov.uk)

These 2021-22 estimates refer to the adult social care sector as those jobs in the local authority sector and independent sectors only. Those working in the NHS and for direct payment recipients are not included in these workforce estimates.

Independent sector information is derived from the ASC-WDS as at May 2023. Data has been rounded.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Reablement and short term social care interventions

- Between April 2021 and March 2022, 2,663 people in Oxfordshire received reablement.
 - Of these, 2,331 were helped to leave hospital, 30 were diverted from hospital and 302 were supported via a community referral.
- In the same period 2,983 people who made requests for support in Oxfordshire received equipment or Occupational Therapy (OT) support.
- In 2020-21, 3.2% of older people (aged 65+) in Oxfordshire who left hospital were supported via reablement compared to 3.1% nationally (see following slide).

Oxfordshire County Council, Department of Health SALT return STS001 tables 1a and 1b, "low level support" (equipment). *Oxfordshire is expected to be lower than the England average given the health and income profile of the county.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

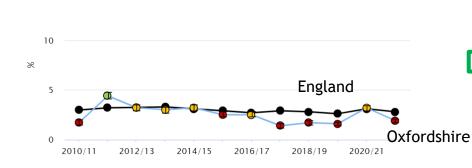
Finding out more

Reablement

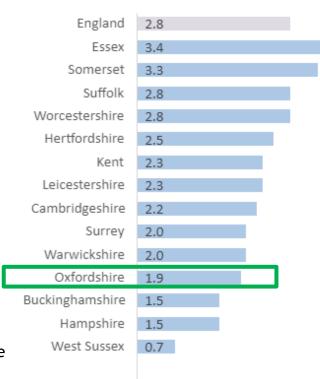
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- As of 2021-22, Oxfordshire was ranked 12th in its group of 16 statistical neighbours on the % of older people offered reablement services following discharge from hospital.
- 1.9% of people aged 65 and over are offered reablement services in Oxfordshire. This is lower than the national average (2.8%).

Percentage of people aged 65 and over offered reablement services following discharge from hospital to 2021-22



Percentage of people aged 65 and over offered reablement services following discharge from hospital, Oxfordshire and Statistical Neighbours (2021-22)



<u>Measures from the Adult Social Care Outcomes Framework</u>, England 2021-22 (statistical neighbours are relevant to adult social care) <u>Public health profiles - OHID (phe.org.uk)</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Adults provided with long-term social care

- As of 1 April 2023 there were 6,415 adults in Oxfordshire receiving ongoing long-term social care from Oxfordshire County Council, up from 5,954 at 1 April 2022 (+8%).
- The majority (61%) of Oxfordshire's ongoing long-term social care clients were older people aged 65 and over. 15% were aged 90 or over.
- Just over a quarter (26%) of people receiving social care support are people with learning disabilities.

Number of adults provided with long-term social care services by Oxfordshire County Council as of 1 April 2023

	Learning Disability	Physical/ Mental	Total	%
TOTAL	1,659	4,756	6,415	100%
% of Total	26%	72%	100%	
aged 65 and over	191	3,693	3,884	61%
aged 18 to 49	1,044	459	1,503	24%
aged 50 to 59	298	346	644	10%
aged 60 to 69	225	537	762	11%
aged 70 to 79	72	949	1021	16%
aged 80 to 89	18	1527	1554	24%
aged 90 and over	2	938	940	15%

Oxfordshire County Council CONTROCC system



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

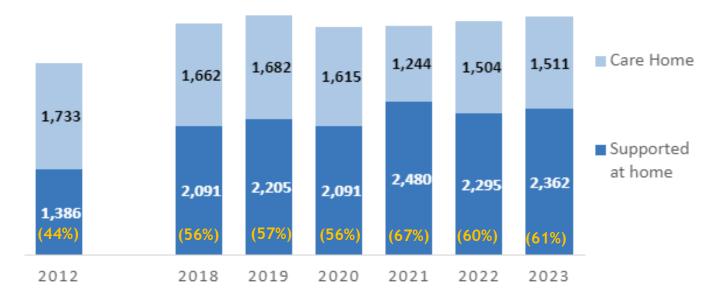
Access to service and digital exclusion

Finding out more

Older social care clients supported at home

- More than half of older social care clients are supported at home.
- At the beginning of April 2023, 61% of older adult social care clients were receiving a service at home. This proportion was higher than 10 years previously as of April 2012 (44%).

Number of older clients (65+) of long-term social care services provided by Oxfordshire County Council receiving services at home vs in a care home as at 1 April



Oxfordshire County Council CONTROCC system



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Older people supported by social care services by district

- By district, the highest number of older people being supported with long-term social care services as of 1 April 2023 was Cherwell and the highest rate (per 1,000 population aged 65+) was Oxford City.
- Care support is means tested, so if an area has a higher proportion of its older population living in more deprived areas, it is more likely that a higher proportion of the older population will qualify for care.
- South Oxfordshire had the lowest rates of people supported either in a care home or at home.

Older clients (65+) of long-term social care services provided by Oxfordshire County Council by setting: count as of 1 April 2023 and rate per 1,000 aged 65+ population

(1 Apr23)	In care home count	Rate	At home count	Rate	TOTAL count	Total Rate
Cherwell	297	1.02	574	2.03	864	3.05
Oxford	234	1.35	438	2.29	696	3.64
South Oxfordshire	257	0.83	425	1.38	681	2.21
Vale of White Horse	285	1.07	470	1.70	767	2.77
West Oxfordshire	334	1.24	443	1.78	753	3.02
Oxfordshire	1,407	1.08	2,350	1.80	3,761	2.87
Outside Oxfordshire	97		12		112	
Total	1,504		2,362		3,873	

Oxfordshire County Council CONTROCC system; ONS 2021 mid-year estimates



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Care home beds for older people in Oxfordshire

- As of 1 April 2023, there were 133 care homes in Oxfordshire providing 5,771 care home beds for older people of which 4,334 (75%) included nursing care.
- As a proportion of the number of residents aged 75 and over, the rate of care home beds for older people in Oxfordshire was 9.3 per 100. Cherwell and West Oxfordshire were each above the county rate.

Care home beds for older people in Oxfordshire (as of 1 April 2023)

	Care homes	Beds for older people	Beds with nursing	Beds per pop aged 75+
Cherwell	28	1293	1048	9.9
Oxford City	17	709	429	7.8
South Oxfordshire	33	1309	1009	8.7
Vale of White Horse	28	1225	943	9.2
West Oxfordshire	27	1235	905	10.3
Oxfordshire	133	5771	4334	9.3

Source: <u>Care Quality Commission (with filters)</u> as of 1 April 2022. ONS 2021 population estimates from <u>nomis</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

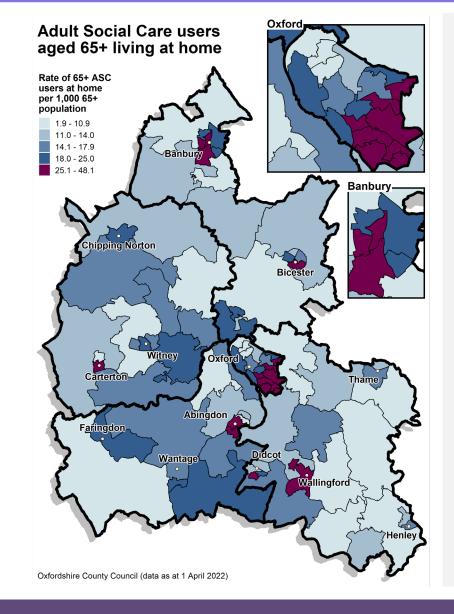
Access to service and digital exclusion

Finding out more

Adult social care users mapped

- Older adult social care users (living at home) are more likely to be living in urban areas of Oxfordshire than the general older population.
- In urban areas* there is:
 - 57% of the total 65+ population (ONS 2020).
 - 66% of aged 65+ adult social care users living at home or in a care home.
 - 69% of age 65+ adult social care users living at home.
- Areas with higher rates of adult social care users living at home include the more deprived urban areas of Oxfordshire in Oxford, Banbury and part of Abingdon.

Oxfordshire County Council, adult social care users (aged 65+) as at 1 April 2022, 2011 rural-urban classification, *analysis based on classification by middle layer super output area. ONS 2020 mid-year population estimates





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Estimate of future demand for adult social care

- There are two sources of predicted population growth for Oxfordshire: (1) Oxfordshire County Council forecasts which include assumptions on housing development (2) ONS projections based on past trends
- Applying the current rate of <u>older people (aged 65+) provided with long-term social care</u> (i.e. assuming no change in prevalence) to population forecasts/projections gives a potential change by 2031 of:
 - +900 (3,900 to 4,800, rounded) from 2021 to 2031 based on Oxfordshire County Council population forecasts including housing growth
 - **+700** (3,900 to 4,600, rounded) from 2021 to 2031 based on ONS trend-based population projections

Oxfordshire County Council; Oxfordshire Housing-led Projections 2021 to 2031; ONS 2018-based population projections



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Community safety services



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Abuse and exploitation - summary

- Comparing year ending December 2022 with the average of the previous 3 years (2019 to 2021), shows an increase in the number of police recorded victims of domestic abuse, older victims of violence and sexual offences, rape and modern slavery in Oxfordshire.
- There was a decrease in the number of recorded victims of child sexual exploitation, honour-based violence and female genital mutilation, however these are often hidden harms which are not reflected by crime figures.

Number of police recorded victims* of abuse and exploitation in Oxfordshire (Jan-Dec)

Recorded victims of	2018	2019	2020	2021	2022	_	om average 21 to 2022
Domestic abuse	7,163	7,285	7,851	7,950	7,818	123	2%
Older victims of violence and sexual offences	403	410	555	601	589	67	13%
Rape crimes	473	508	503	588	597	64	12%
Modern slavery	124	132	149	182	209	55	35%
Child sexual exploitation	106	60	94	90	72	-9	-11%
Honour-based violence	33	34	24	26	26	-2	-7 %
Female genital mutilation	6	2	1	0	0	-1	-100%

Thames Valley Police Crime Recording System - Niche RMS; [1] count is of total recorded unique victims in the 12 month period, whether or not individuals have been a victim more than once



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

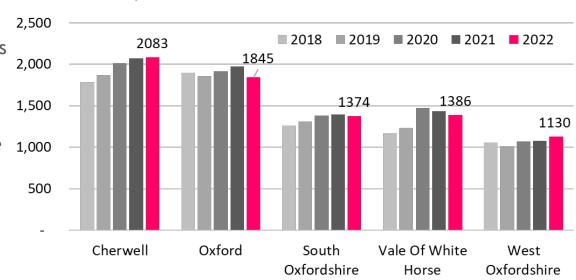
Health support and preventing ill-health Access to service and digital exclusion

Finding out more

Domestic abuse

- In 2022 (Jan-Dec) Thames Valley Police recorded a total of 7,818 victims of domestic abuse in Oxfordshire
- This was 2% above the 3 year average for the years 2019 to 2021, with the greatest increases in West Oxfordshire (+7%) and Cherwell (5%).
- The rate (per 1,000 population) of domestic abuse victims, for year ending December 2022, was highest in the age group 25-34 (20 per 1,000 population).
- There has been an increase in the rate (per 1,000 population) of domestic abuse victims compared to 2020 data, in the age groups 0-15 and 75+.

Count of police recorded victims¹ of domestic abuse (all occurrences)



Thames Valley Police Crime Recording System - Niche RMS; * count is of total recorded unique victims in the 12 month period, whether or not individuals have been a victim more than once



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Domestic abuse affecting children

- Data for Apr22-Mar23 shows a total of 4,202 police recorded domestic crimes involving children in Oxfordshire and a 16% increase compared with the previous year.
- All districts saw an increase with the greatest change in South Oxfordshire (+25%).

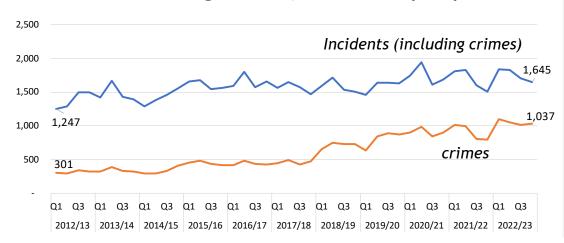
Thames Valley Police Crime
Recording System - Niche
Data includes where domestic
abuse qualifiers have been applied
to the offences and a child has
been recorded as "involved".

Domestic Abuse | The Crown
Prosecution Service (cps.gov.uk)
children are deemed to be victims of
DA if they see, hear, or experience the
effects of abuse and they are related
to the victim or offender.

Police recorded domestic crimes involving children

	2020-21	2021-22	2022-23		o 2022-23 nge
Cherwell	985	985	1,106	+121	+12%
Oxford	823	856	946	+90	+11%
South Oxfordshire	624	591	739	+148	+25%
Vale of White Horse	687	671	810	+139	+21%
West Oxfordshire	504	514	601	+87	+17%
Oxfordshire	3,623	3,617	4,202	+585	+16%

Number of police recorded domestic abuse incidents and crimes involving children, Oxfordshire per quarter





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

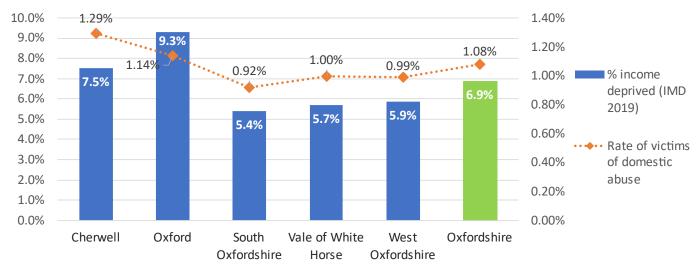
Access to service and digital exclusion

Finding out more

Rates of poverty vs domestic abuse by district

- Districts with higher rates of income deprivation also have higher rates of victims of domestic abuse, but the pattern for Cherwell and Oxford is reversed.
 - Oxford had the highest rate of income deprivation of districts in Oxfordshire (IMD 2019).
 - Cherwell had the highest rate of victims of domestic abuse (Jan-Dec 2022)

Rate of victims of domestic abuse per population Jan-Dec 2022 vs % income deprived (from IMD 2019)



Thames Valley Police Crime Recording System - Niche

<u>English indices of deprivation 2019 - GOV.UK (www.gov.uk)</u> uses underlying indicator (count) for Income deprivation and the population denominator supplied with the IMD publication



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Rape

- In 2022 (Jan-Dec) Thames Valley Police recorded a total of 597 victims of rape crimes in Oxfordshire. This was 12% above the 3 year average (for the years 2019 to 2021), with the greatest increases in West Oxfordshire (+33%) and Cherwell (+29%)
- 88% of victims were female
- 63% of victims were aged under 25

Crime Related Occurrence: This term is used to describe a record of an incident which has come to the attention of the police, which, on the Balance of Probabilities would normally amount to a notifiable crime, but a resultant crime has not been recorded. The specific circumstances where this would happen are 1. The incident is reported by a third party and either

The alleged victim declines to confirm the crime or

The alleged victim cannot be traced

- 2. The incident is being dealt with by another police force
- 3. The National Crime Recording Standard or Home Office Counting Rules for Recording Crime direct that a crime should not be recorded

250 2018 2019 2020 2021 2022 200 177 156 150 90 90 84

South

Vale Of

Oxfordshire White Horse Oxfordshire

West

Recorded victims¹ of rape crimes

Oxford

Thames Valley Police Crime Recording System - Niche RMS. Year is Jan-Dec. NOTE: that police recorded rape is at the time of reporting rather than time of offence. * Iotal recorded unique victims in the 12 month period, whether or not individuals have been a victim more than once

Cherwell



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Female genital mutilation, forced marriage and honour based violence

- In 2022 (Jan-Dec) Thames Valley Police recorded a total of:
 - No victims of Female Genital Mutilation in Oxfordshire, same as 2021 figures;
 - NHS data indicates there were between 1 and 5 women and girls who had an attendance within Oxfordshire where FGM was identified.
 - No victims of forced marriage in Oxfordshire (none in 2018, 2019, 2020 and 2021).
 - 25 victims of honour-based violence in Oxfordshire, mainly in Cherwell and Oxford (see table below).

Recorded victims* of Honour-based violence (Crime and non Crime)

Note: According to the Crown Prosecution Service guidance:
There is no specific offence of "honour-

There is no specific offence of "honour-based crime". It is an umbrella term to encompass various offences covered by existing legislation. Honour-based violence (HBV) can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

				<u> </u>		
	2018	2019	2020	2021	2022	Value change 2021-22
Cherwell	10	18	10	10	5	-5
Oxford	19	11	13	10	14	4
South Oxfordshire	0	2	0	2	4	2
Vale Of White Horse	2	2	1	4	0	-4
West Oxfordshire	2	1	0	0	2	2
Oxfordshire	33	34	24	26	25	-1

Thames Valley Police Crime Recording System - Niche RMS Note: The above HBV data is a count of unique victims of offences where either the HBV Latest or HBV Finalisation qualifier has been used or the Occurrence Type or Classification has been recorded as Honour Based Violence - Non Crime Occurrence. NHS Digital FGM quarterly Statistics



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

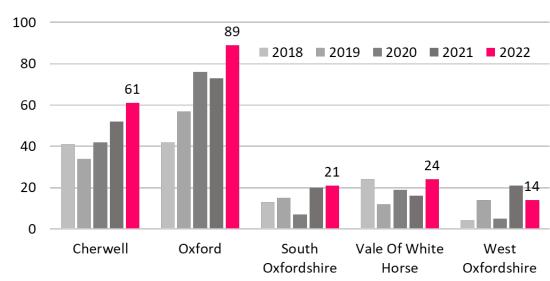
Finding out more

Modern Slavery

- In 2022 (Jan-Dec) Thames Valley Police recorded a total of 209 victims of Modern Slavery in Oxfordshire.
- This was 35% above the 3 year average (for the years 2019 to 2021), with the greatest increases in the rural districts of Vale of White Horse (+53%) and South Oxfordshire (+50%)

Recorded victims¹ of Modern Slavery and Trafficking - All Occurrences (Crime and Non Crime)

According to Modern slavery is closer than you think: infographic, modern slavery comprises sexual exploitation, criminal exploitation, domestic servitude, forced labour. There has been a 17% increase in victims since 2015.



Thames Valley Police Crime Recording System - Niche RMS. The above data is for a count of unique victims of Modern Slavery and Trafficking offences. Modern Slavery offences have been identified where either the HO Category Number is 106 or the Modern Slavery Finalisation Qualifier has been used. Trafficking offences have been identified where either the classification or Occurrence Type has been recorded as trafficking for exploitation or sexual exploitation, into, out of or within the UK. [1] Total recorded unique victims in the 12 month period, whether or not individuals have been a victim more than once



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

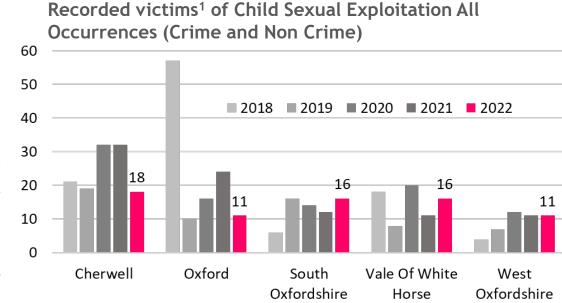
Access to service and digital exclusion

Finding out more

Child Sexual Exploitation

- In 2022 (Jan-Dec) Thames Valley Police recorded a total of 72 victims of Child Sexual Exploitation in Oxfordshire.
- This was 11% below the 3 year average (for the years 2019 to 2021), with the greatest reductions in Cherwell (-35%) and Oxford (-34%). The greatest increases were in Vale of White Horse (+23%).

Note: The definition of Child Sexual Exploitation from government guidance is: Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.



Thames Valley Police Crime Recording System - Niche RMS. The above CSE data is for all victims of offences where either the 'Child Sexual Exploitation' qualifier has been used or the Occurrence Type has been recorded as 'Suspected CSE - Non Crime Incident' [1] Total recorded unique victims in the 12 month period, whether or not individuals have been a victim more than once



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

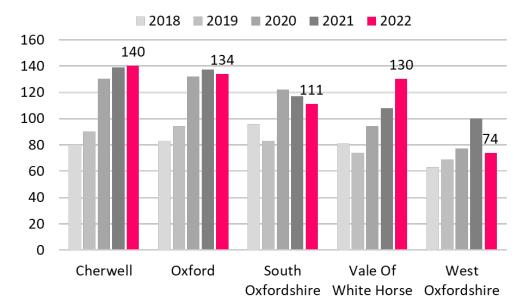
Access to service and digital exclusion

Finding out more

Older victims of crime (violence or sexual offences)

- In 2022 (Jan-Dec) Thames Valley Police recorded a total of 589 older victims (aged 65 and over) of crimes of violence or sexual offences in Oxfordshire.
- This was 13% above the 3 year average (for the years 2019 to 2021), same as the increase across Thames Valley (+13%) and with the greatest increases in Vale of White Horse (+41%).
- The increase is well above the growth in the older population in Oxfordshire.
- The rate of older victims of crime per 1,000 population aged 65+ was highest in Oxford City 7.1 compared with 4.5 in Oxfordshire and 5.2 across Thames Valley)

Recorded victim*
aged 65 or over of
violence against the
person or sexual
offences (crimes)



Thames Valley Police Crime Recording System - Niche RMS. *Total recorded unique victims in the 12 month period, whether or not individuals have been a victim more than once



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Victims of fires

- In 2022-23 there were 310 dwelling fires in Oxfordshire, down from 354 in 2021-22 (-44, -12%).
- There were 29 recorded injuries due to fire* (up from 37 in 2021-22) and 1 fire-related fatality.

Number of victims of fire related injuries and fatalities (indicated by (+)) by broad age group

	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23
age 0-20	11	5	7	8	5	3	6	14	2	3	3
age 21 to 60	32 (+2)	31	22 (+1)	20	12 (+1)	7	24	26	18	18	22
age 61+	11 (+2)	10 (+2)	9	9 (+2)	9 (+3)	5	17 (+1)	14 (+1)	12 (+3)	16 (+1)	4 (+1)
unknown	13 (+4)	21 (+2)	4 (+2)	17 (+2)	20 (+4)	9	0 (+1)	0 (+1)	0	0	0
Total	67 (+8)	67 (+4)	42 (+3)	54 (+4)	46 (+8)	24	47 (+2)	54 (+2)	32 (+3)	37 (+1)	29 (+1)

Oxfordshire County Council Fire and Rescue Services

^{*}Includes all injuries confirmed as fire related or not known excludes fatalities



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Victims of criminal traders

- In 2022 there were 175 victims of traders classed as a criminal breach within Oxfordshire, down from 296 in the previous year, a fall of 41% (-121).
- In 2021-22 there was an increase in the monies paid by victims.
- Roofing, roof sealing and chimney repairs was the most reported complaint with 24 complaints made during 2022.

Top 5 Goods Service Areas in Oxfordshire 2022

Goods Service	Count
Roofing, roof sealing and chimney repairs	24
Gardeners, tree surgeons and landscapers	23
Window frames and doors (excluding electric garage doors)	19
Major renovations (including lofts, conversions and extensions)	18
Plumbers and plumbing	16

Trading Standards - Citizens Advice Portal



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

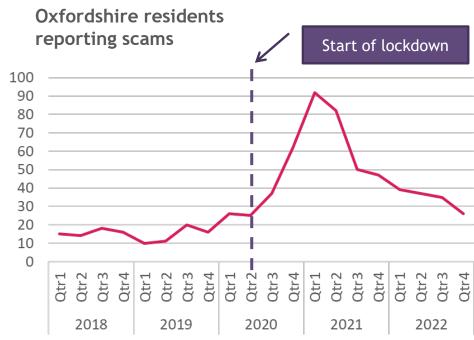
Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Victims of scams

- The Covid pandemic has accelerated change in the consumer protection landscape. Some of the more traditional scams such as doorstep crime were curtailed by the imposed lockdown restrictions. Criminals adapted quickly, which has led to a surge in different tactics being deployed by scammers, who have sought to exploit social change and evolving technology. UK Finance has reported that so-called 'impersonation scams' have doubled as criminals pretend to be from banks, delivery firms or the government to dupe consumers and businesses.
- The number of scams reported by Oxfordshire residents increased significantly at the start of the COVID-19 pandemic.
- Data ending December 2022 indicate levels remain higher than pre-COVID.
- These scams relate to 'bogus selling' which can be via unsolicited phone call, unsolicited mail or email.



Action Fraud, National Trading Standards, Citizens Advice data for 'bogus selling' Oxfordshire consumers



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

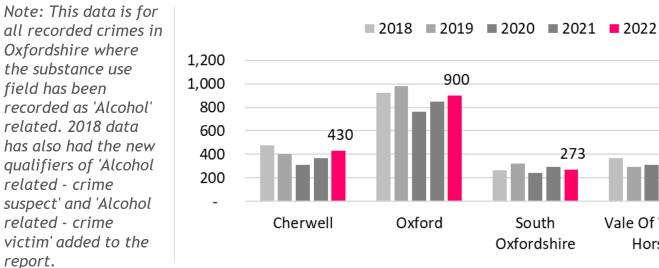
Access to service and digital exclusion

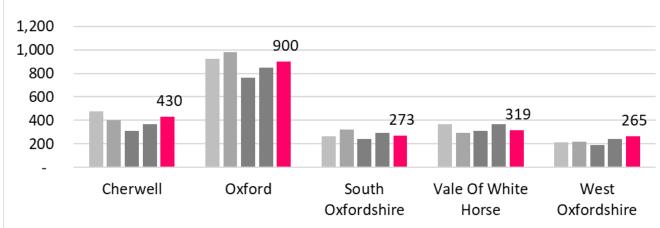
Finding out more

Alcohol-related crime

- In 2022 (Jan-Dec) Thames Valley Police recorded 2,187 alcohol-related crimes in Oxfordshire above the number in 2021 (2,187). Alcohol-related crimes were 5% of all crimes in the county.
- Comparing 2022 with the average for 2019-21 shows a 7% increase in Oxfordshire and the greatest increase in West Oxfordshire (22%).

Alcohol-related crimes in Oxfordshire





Thames Valley Police Crime Recording System - Niche RMS



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Health support and preventing ill-health



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

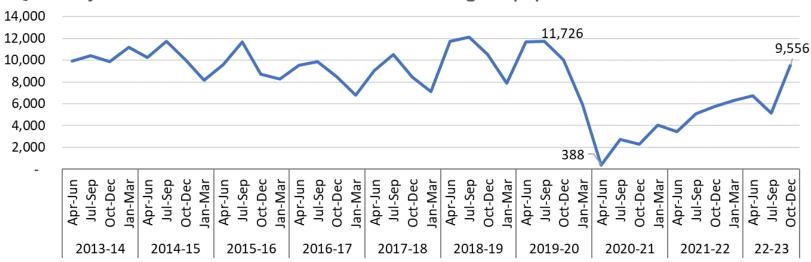
Finding out more

NHS Health Checks

The NHS Health Check programme aims to help prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia. People between the ages of 40 and 74 (not already diagnosed with one of these conditions) is invited once every five years to have a check to assess their risk and be given support and advice to help reduce or manage that risk.

• The average quarterly number of health checks offered to the eligible population in Oxfordshire in 2018-19 and 2019-20 was 10,200. In April-June 2020, at the start of the pandemic the total for the quarter was 388. Between October December 2023 the total health checks offered had reached 9,556.

Quarterly count of NHS Health Checks offered to eligible population in Oxfordshire



NHS Health Check - Home *people aged 75+ are provided with health checks via an alternative service NHS Health Check - Data - OHID (phe.org.uk)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

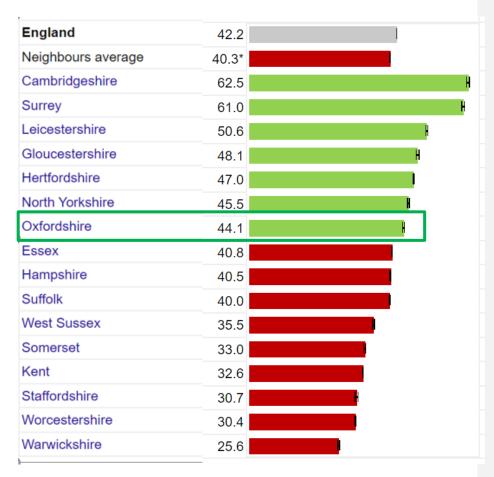
Access to service and digital exclusion

Finding out more

NHS Health Checks

From April 2018 to January 2023, the proportion of people taking up a health check invitation in Oxfordshire was above average (44.1% compared with 42.2% across England).

People taking up an NHS Health Check invite 2018-19 Q1 to 2022-23 Q3 (crude rate %) Vs nearest statistical neighbours to Oxfordshire



NHS Health Check - Data - OHID (phe.org.uk)

Local authorities collect information on the number of NHS Health Checks offered and the number of NHS Health Checks received each quarter and return this data to OHID.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Drug and alcohol services

Adults

- In 2021-22 there were **2,014** adults (aged 18 and over) in specialist drug treatment in Oxfordshire. This is up by 1.1% since the previous year.
- 73% of the total adults in drug treatment were males and 27% were females.
- The majority of those in drug treatment were aged between 30 to 49 (1,395 people, 69%)
- The number of adults in treatment for alcohol only in Oxfordshire in 2021-22 was **694.** This was up by 12.5% from last year. The majority (74%) were aged 30 to 59.

Young people

- In 2021-22 the number of young people (aged under 18 years) in specialist substance misuse services in Oxfordshire was 144, up by 4% from the previous year.
 - 73 began using their main substance before they reached 15 years of age
 - 74 were using two or more substance (this includes Alcohol)
 - 63 Identified as having a mental health treatment need
 - 47 Receiving treatment for their mental health needs
 - 20 were affected by domestic abuse
- Referrals were predominantly from education services (32%) and children and family services (44%).

Oxfordshire County Council, Public Health team



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Health Visiting and Family Nurse Partnership

Pregnant mothers are seen during the antenatal period, and again at 6-8 weeks after birth to receive a maternal mood assessment. Babies are seen and checked at least by 14 days old, at 6-8 weeks and at 1 year and 2 years.

- In 2021-22, there were 7,309 births to Oxfordshire residents.
- In the same year, health visitors had 95,315 contacts.

The Family Nurse Partnership (FNP) supports first time mothers aged up to 19 years. It focuses on supporting young mothers for a healthy pregnancy, improving child's health and development and improving parents' economic self-sufficiency. Oxfordshire has 200 places available. Once the child reaches 2 years they transition into the Health Visitor Service and receive ongoing advice and support.

- Averaging the caseload across the year 2021-22, 196 of 200 places were filled. This is broken down by district areas with individuals in Cherwell occupying the most places, followed by Vale of White Horse and Oxford City. West Oxfordshire and South Oxfordshire have fewer places. This does fluctuate during the year as families do move locations.
- 65.4% of mothers are recruited before 16 weeks of pregnancy in line with the licence, the national figure is 37.4% (2021-22).

Oxfordshire County Council



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Health Nurse Services

School nurses are specialist community public health nurses who work with school-aged children and young people (aged 5-19) and their families to improve health and wellbeing outcomes and reduce inequalities and vulnerabilities.

During academic year Sept 2021 to July 2022, Oxfordshire Health Nurse Services carried out:

- 6,316 **primary school** 1:1 interventions
 - 25.3% children were universal
 - 32.9% children were universal plus/targeted
 - 41.1% children were universal partnership plus/specialist interventions
- 15,795 **secondary school** 1:1 interventions
 - 12.9% of young people were universal
 - 61.2% of young people were universal plus/targeted
 - 21.5% of young people were universal partnership plus/specialist
- 1,632 **college** 1:1 interventions
 - 3.0% young people were universal
 - 72.5% of young people were universal plus/targeted
 - 19.9% of young people were universal partnership plus/ specialist

Oxfordshire County Council

Health visiting and school nursing partnership

Universal Services include prompts for immunisations, conducting health and development reviews.

Universal Plus delivers a rapid response from the health visiting team eg parental mental health, attachment, domestic abuse; Universal Partnership Plus provides ongoing support to families who have complex needs.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Stop Smoking Services

It is estimated that approximately 30% of smokers every year make a serious attempt to quit. Most are unsuccessful with only 5% of smokers achieving a successful attempt at stopping smoking. Of the people who quit, 2% do so through a Local Stop Smoking Service.

Oxfordshire County Council currently commission a Local Stop Smoking Service, known as Stop for Life Oxon, to help smokers to quit with the use of nicotine replacement therapy, e-cigarettes, behavioural support and pharmacotherapy (when available). There is strong evidence that offering behavioural support in combination with these approaches is the most effective way to quit smoking.

The Oxfordshire Tobacco Control Strategy sets out the aim to reduce smoking prevalence in the adult population, and in the following priority populations:

- People in routine and manual occupation group
- People with serious mental illness
- Pregnant women
- Children and young people
- During 2022-23, 803 smokers in Oxfordshire successfully stopped smoking, of which 106 were from routine and manual occupations/ not employed/ unable to work.

Oxfordshire County Council,

The Final Push: A Tobacco Control Strategy for a smokefree society in Oxfordshire 2020-2025 NHS Digital, Statistics on NHS Stop Smoking Services in England



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Specialist Sexual Health Services

The Oxfordshire Sexual Health Service provides free STI testing and treatment, notification of sexual partners of infected persons and free provision of contraception across clinics, tiered from Level 1-3 (set by the British Association for Sexual Health and HIV (BASHH):

- Level 1 for asymptomatic services users
- Level 2 for symptomatic service users
- Level 3 for service users with complex/specialist needs
- During 2021-22 there were 38,045 contacts with Oxfordshire Sexual Health Service for STI testing and treatment services (excluding online provision), an increase from 33,100 in 2020-21. In addition, there were 23,657 STI / HIV self-sampling test kits requested via the online pathways (compared to 18,154 in 2020-21 and 4,447 in 2019-20), with 97% of these STI and HIV self-sampling kits issued within two working days of the request.
- During 2021-22 there were 13,670 contacts with the Oxfordshire Sexual Health Service for contraception services (compared to 11,084 in 2020-21), with 100% of women having access to emergency contraceptive services within 48 hours of contacting the Service. In addition, there were 22,464 free condoms distributed to Oxfordshire residents.

Oxfordshire County Council BASHH Standards for the management of sexually transmitted infections (STIs)



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Contraception Services in primary care

The Long Acting Reversible Contraception (LARC) Service in GP Practice settings provides further access to methods of birth control that provide effective contraception for an extended period of time without requiring user action. The provision of services fitting LARCs is seen as essential health care in preventing unplanned pregnancies.

• During 2021-22 there were 5,379 LARCs fitted (excluding injections) by GP Practices in Oxfordshire. In 2020, the rate of GP prescribed LARC (excluding injections) was 35.4 per 1,000 resident female population aged 15-44 years, this is greater than both the South East (29) and England (21.1) averages.

Access to emergency contraception comes in the form of a Emergency Hormonal Contraception (EHC) Service, commonly known as the 'morning after pill', and can be accessed within Community Pharmacy settings. The aim of the service is to reduce the risk of unintended and unwanted pregnancy in young women.

• During 2022-23, there were 763 consultations to provide EHC, for free to all women where there was unprotected sexual intercourse (where pregnancy was not desired), or in the event of contraceptive failure (e.g. slit condom).

Oxfordshire County Council.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

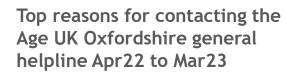
Health support and preventing ill-health

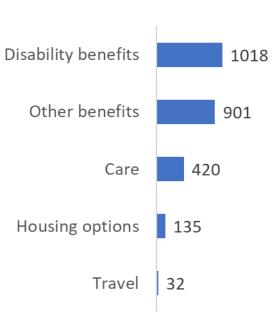
Access to service and digital exclusion

Finding out more

Age UK Oxfordshire helpline

- In 2022-23 the Age UK Oxfordshire helpline received a total of 1,654 calls covering 2,725 topics.
- Age UK ran a cost-of-living campaign focused on Pension Credit which resulted in the helpline experiencing a 27% increase in calls, which resulted in an 80% increase of benefits checks for the period October -December 2022 compared with Oct -Dec 2021.
- Of the callers/subject of the call in 2022-23:
 - 61% female, 36% male (3% withheld),
 - 61% were aged 75 and over,
 - 14% had an informal carer involved with them,
 - 41% had a long-term illness or memory problems.
- The top reasons for contacting the helpline were: benefits, including disability-related, care and housing options.





Age UK Oxfordshire. Note that data relates to the general Age UK Oxfordshire helpline. Full demographic details are not always recorded from each enquirer, e.g. if the enquiry is unrelated to disability then the disability status of the caller may not be recorded.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Health and Wellbeing support provided by Libraries

Oxfordshire's Library Service supports the health and wellbeing of residents through book lending, access to information and ICT resources, and the provision of community spaces. The Service also provides specific health and wellbeing engagement and outreach activities, and book collections.

Health and wellbeing activities

• In 2022/23 Oxfordshire's Libraries delivered 515 health and wellbeing activities attended by 5,010 people.

Health and wellbeing themed collections

- Books on Prescription/Reading Well collections cover themes including young people's mental health, dementia, adult mental health, long term conditions, and children's health
- In 2022/23 there were 358,270 loans of health and wellbeing books/e-books) from Oxfordshire Libraries.

Oxfordshire County Council Library Service: CollectionHQ (books) and Overdrive e-platform (ebooks, eaudio, emags). Note that these figures are known to be an undercount due to the difficulty of analysing detailed catalogue/performance data on the library management and e-loans systems.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion Finding out more

Make Every Contact Count (MECC)

- MECC is an approach that uses opportunistic conversations in everyday life to talk about health-related behaviour. It involves responding appropriately to cues from others to encourage them to think about behaviour change and steps that they could take to improve their health and wellbeing.
- MECC training involves giving people in contact with members of the public the skills and confidence to have brief conversations about health with others and to follow up with signposting for support.
- In Oxfordshire the Oxfordshire Live Well website is used as the main signposting tool.
- Oxfordshire's Library Service is well established in supporting MECC, and as of May 2023 there were 44 library service MECC champions.
- Between April 2022 and March 2023 there were a total of 7,324 MECC conversations recorded through Oxfordshire Libraries (an 84% increase on the 3,977 conversations in 2021/22). Conversations were about:
 - Smoking (63)
 - Alcohol (76)
 - Weight/healthy eating (282)
 - Physical activity (454)

- Mental health and wellbeing (3,130)
- Other health topic (2,056)
- Signpost to health resource or services (1,263)

<u>Making Every Contact Count (MECC)</u> <u>New models of care | Oxfordshire County Council Council Library Service</u>



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Access to services and digital exclusion



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

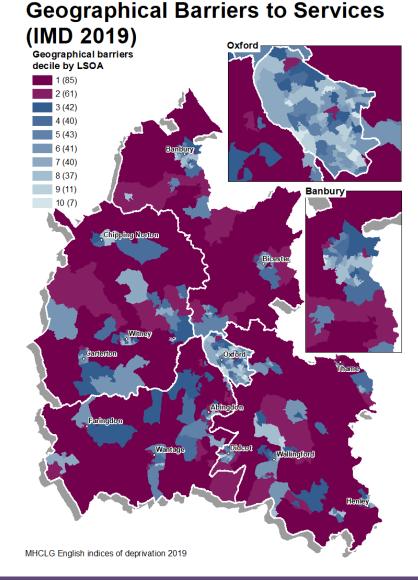
Access to service and digital exclusion

Finding out more

Geographical access to services

- According to the sub-domain of the 2019 Indices of Deprivation, 85 out of 407 lower super output areas (LSOAs) in Oxfordshire are ranked within the most deprived 10% nationally on the geographical access to services sub-domain (road distance to post office, primary school, GP and supermarket) of the 2019 IMD.
- By district the number of LSOAs ranked within the 10% most deprived are:
 - Cherwell: 22 out of 93
 - Oxford: 1 out of 83
 - South Oxfordshire: 25 out of 89
 - Vale of White Horse: 24 out of 76
 - West Oxfordshire: 13 out of 66
- Areas ranked poorly on geographical access to services (within worst 10%) include:
 - 21% of the total population
 - 27,600 (21%) people aged 0-15
 - 30,100 (24%) people aged 65+ and
 - 4,000 (23%) people aged 85+

English indices of deprivation 2019, MCLG





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

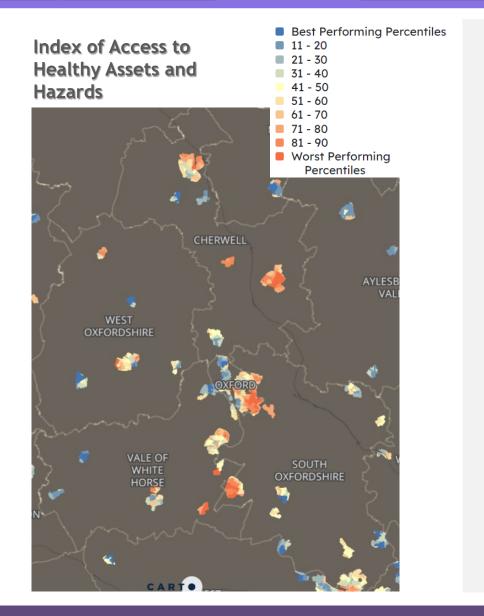
Access to health assets and hazards

CDRC has developed a multi-dimensional index measuring how 'healthy' neighbourhoods are. It combines indicators under four different domains of accessibility: retail environment, health services, physical environment and air quality. A higher score indicates that an area has a poorer health-related environment.

- The percentage count of areas ranked within the worst performing decile in Oxfordshire include:
 - Cherwell 7%
 - Oxford 10%
 - South Oxfordshire 9%
 - Vale of White Horse 11%
 - West Oxfordshire 2%

Access to Healthy Assets & Hazards (AHAH) | CDRC Data (Nov 2022).

Map from Local Insight (communityinsight.org)





Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Internet use (national)

- According to (national) 2020 ONS data on internet access:
 - 92% of adults in the UK were recent internet users in 2020, up from 91% in 2019.
 - Almost all adults aged 16 to 44 years in the UK were recent internet users (99%), compared with 54% of adults aged 75 years and over.
 - While there has been little change in internet use for adults aged 16 to 44 years in recent years, the proportion of those aged 75 years and over who are recent internet users nearly doubled since 2013, from 29%, to 54% in 2020.
 - 6.3% of adults in the UK had never used the internet in 2020, down from 7.5% in 2019.
 - The number of disabled adults who were recent internet users in 2020 reached almost 11 million, 81% of disabled adults; up from just over 10 million (78% of disabled adults) in 2019.
 - London continued to be the UK region with the highest recent internet use (95%) in 2020, the rate for the South East region was 94%.

Internet access - households and individuals, Great Britain: 2020 The survey data for this release were collected by the Labour Force survey (LFS) between January and March 2020. This straddles the period before and after the COVID outbreak in March 2020 so it is not possible to use the 2020 data to indicate changes in internet usage as a result of the pandemic.



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Digital exclusion and health - national

- A study by the Good Things Foundation (Aug21)¹ on digital exclusion and health highlights:
 - a correlation between digital exclusion and social exclusion and
 - that poverty is the most reliable predictor of internet access.
- People experiencing digital exclusion are:
 - Locked out of digital health tools and services;
 - Unable to access jobs requiring digital skills impacting earnings;
 - May be more isolated than those who are able to use digital to connect with family/friends/communities
- However the data is not yet good enough..
 - We still don't have enough good quality data quantitative or qualitative to understand and track whether (and how) digital exclusion contributes to poor health outcomes, and whether (and how) digital inclusion promotes better health outcomes and healthier lives.
- Ofcom research² indicates that the pandemic has:
 - created an even greater digital divide;
 - resulted in an abundance of information, which includes inaccurate and misleading information. In late March 2020, when the UK had just gone into lockdown, 46% of UK adults who were getting news or information about the coronavirus pandemic said that they had come across information or news that they thought was false or misleading. This proportion had fallen to 30% by early 2021.

[1] Good-Things-Foundation-2021---Digital-Exclusion-and-Health-Inequalities-Briefing-Paper.pdf (goodthingsfoundation.org) [2] Online Nation 2021 report (ofcom.org.uk) Digital exclusion: a review of Ofcom's research on digital exclusion among adults in the UK (March 2022)



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

<u>Digital exclusion and health - Oxfordshire</u>

- The Oxfordshire County libraries began offering day-to-day assistance to library customers with digital needs in 2017, through a digital helper volunteer programme. Library users can sign up in person or call to schedule 30-minute digital help sessions with a volunteer.
- Research in 2020 (published 2021) by the University of Oxford and Oxfordshire County Council Libraries looked into the digital needs of people who rely on public library digital services.
- The research found that:
 - Many digital help seekers are interested in achieving a particular end goal, such as signing up for Universal Credit or applying for a specific job.
 - The service is reaching a relatively high proportion of people on low incomes, 58.4% have incomes of £20,000 or less, compared to 40.9% of the British population.

HOUSEHOLD INCOME

The library primarily serves low-income people. 31% of computer users have annual household incomes of £12,500 or less and another 27% have incomes between £12,500 and £20,000.

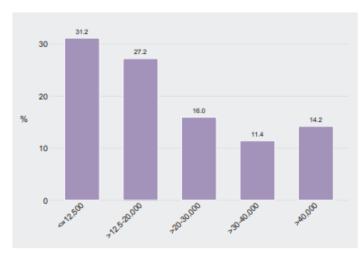


FIGURE 2: HOUSEHOLD INCOME OF LIBRARY COMPUTER USERS

<u>Libraries on the front lines of the digital divide: the Oxfordshire Digital Inclusion Project Report 2021</u>

<u>Oxfordshire Digital Inclusion Strategy</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Summary

Changes to Health and Care services

Primary health care

Social prescribing

Secondary health care

Mental health services

Children's social care

Register of disabled children

Adult social care

Community safety services

Health support and preventing ill-health

Access to service and digital exclusion

Finding out more

Finding out more

- Indices of Deprivation 2019
- Population data for Oxfordshire
- Public health profiles OHID (phe.org.uk)
- Public Health Mental Health Dashboard
- Care Quality Commission surveys
- Live Well Oxfordshire
- Local authority interactive tool (LAIT) for statistics on children GOV.UK (www.gov.uk)
- GP practice workforce data NHS Digital
- Local Adult Social Care workforce intelligence (skillsforcare.org.uk)
- Oxfordshire's Overarching Domestic Abuse Strategy 2022-2025



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Chapter 8

Local research



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers
Reports by Healthwatch Oxfordshire
Men in Carterton 2023
Good Food Oxfordshire research
Oxfordshire Community Insight Profiles
WODC Youth Needs Assessment
OxWell School Survey 2021
Finding out more

Introduction

- This chapter provides an overview of recent needs assessments and local research carried out by organisations in Oxfordshire of relevance to the topics covered by the Joint Strategic Needs Assessment.
- Whilst local research approaches, ethos and methodologies vary, insights can help bring the statistical data included in the JSNA to life. It can often bring added 'qualitative' depth and, more importantly, highlight the lived experiences and voices of local communities.
- The following slides include examples of local research carried out by:
 - Local people as 'community researchers'
 - Healthwatch Oxfordshire
 - Community and voluntary sector groups in Oxfordshire
 - Local Authorities working with communities.
 - Oxfordshire's academic institutions in conjunction with communities
- There is more out there...if you know of other local research of relevance and would like it added to the JSNA please get in touch jsna@oxfordshire.gov.uk



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Local research: working with community researchers



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers

Reports by Healthwatch Oxfordshire

Men in Carterton 2023

Good Food Oxfordshire research

Oxfordshire Community Insight Profiles

WODC Youth Needs Assessment

OxWell School Survey 2021

Finding out more

Working with community researchers

Community Participatory Action Research (CPAR)

- Involves communities at all stages of the research process
- Focus on social, structural, environmental inequities
- Uses knowledge gained to benefit the community involved
- Iterative process ongoing reflection and action
- Empowering people at the heart of investigating their own situation

Other terms

- Action research
- Participatory research
- Co-operative inquiry





Your voice on health and care services

Healthwatch Oxfordshire

has developed two models of community research:

- Model one: Supporting community action researchers on their chosen topic
- Model two: Working with community researchers on specific issues

Healthwatch Oxfordshire model of engagement https://network.healthwatch.co.uk/guidance/2022-08-25/working-community-researchers-to-achieve-change-people
Video from our community researchers https://www.youtube.com/watch?v=CGpQUn0CL7M

Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research



Local research: Healthwatch Oxfordshire

Healthwatch Oxfordshire is an independent watchdog, established in 2012 under the Health and Social Care Act. Healthwatch Oxfordshire listens to the experiences of people in Oxfordshire using health and social care services through thematic and geographical research, outreach and engagement, with the aim of ensuring these voices are heard by those that design and deliver services.

healthwatchoxfordshire.co.uk



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Finding out more

Working with community researchers

Reports by Healthwatch Oxfordshire

Men in Carterton 2023

Good Food Oxfordshire research
Oxfordshire Community Insight Profiles
WODC Youth Needs Assessment
OxWell School Survey 2021

Research and reports by Healthwatch Oxfordshire



Healthwatch Oxfordshire research carried out between 2022 and 2023, can be found here: Home - Healthwatch Oxfordshire

In addition to <u>working with community researchers</u>, examples of Healthwatch Oxfordshire reports published during this time include:

- Experiences of Visiting Care Homes in Oxfordshire since COVID-19 Guidelines Changed in 2022 (July 2022)
- Getting Your Prescriptions -August 2022
- Leaving Hospital With Medicines January 2023
- Men In Carterton February 2023
- Healthwatch Oxfordshire outreach at Oxford University Hospitals 2022-23 March 2023
- Healthwatch Oxfordshire community outreach visits 2022-23

And: 'Enter and View' reports including twelve visits in the year to care homes, hospitals, dentists. Visits included Churchill Hospital Renal Dialysis Unit, East Oxford Dental Clinic, and Accident and Emergency Departments at the Horton and John Radcliffe Hospitals among others: healthwatchoxfordshire.co.uk/our-work/enter-and-view-reports/

All Healthwatch Oxfordshire reports can be found here: Reports - Healthwatch Oxfordshire

<u>Home - Healthwatch Oxfordshire</u>



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers
Reports by Healthwatch Oxfordshire

Men in Carterton 2023

Good Food Oxfordshire research
Oxfordshire Community Insight Profiles

WODC Youth Needs Assessment

OxWell School Survey 2021

Finding out more

Men in Carterton February 2023

Healthwatch Oxfordshire carried out a 'rapid appraisal' in Carterton speaking to 31 working men on the streets, in shops and workplaces.

Interactions with me involved short but meaningful conversations, prompted with the question 'What makes it easy and what's hard about looking after your health in Carterton?' Our work linked with the Oxfordshire Men's Health Forum initiative in November 2022 #30Chats in 30 days.

This report highlights what men told us in their own words narrated by theme. Reflecting the views of the 31 men we spoke to, their voices give rich insight into some of attitudes and views men of working age held towards important issues of health and wellbeing

- Some men still felt pressure to provide, be strong, using words like 'Man up', 'carry on' when talking about health and wellbeing.
- Men faced barriers to health and wellbeing including lack of time, caring responsibilities, cost of living pressures, loneliness and long hours of work.
- Men did not always know where to turn for help and support, and were not always aware of local services and what they offer.
- Male friends and men in workplaces could be important in giving peer support for men to talk about health.
- Hobbies, and being part of local groups gave opportunity for men to support one another.

This work will lead to further focus on men in 2023-4

https://healthwatchoxfordshire.co.uk/our-work/research-reports/



#30Chats with men in Carterton



"Things are changing, blokes are talking to each other more now since the pandemic..."

"It's harder for men to open up because it makes us look weak, and I don't want to look weak"



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Local research: Voluntary and Community Sector



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers
Reports by Healthwatch Oxfordshire
Men in Carterton 2023

Good Food Oxfordshire research

Oxfordshire Community Insight Profiles
WODC Youth Needs Assessment
OxWell School Survey 2021
Finding out more

Good Food Oxfordshire research

The aims of the Food Poverty Action Plan for Oxfordshire (August 2021) by Good Food Oxfordshire were to:

- describe the extent of food poverty in Oxfordshire and its underlying causes;
- highlight the work that is already happening to support those experiencing food poverty;
- make recommendations on supporting those in need, and move beyond emergency support to prevent food poverty and build resilience;
- share commitments to collective action with 63 pledges from 39 different organisations and individuals on how they are tackling food insecurity locally.

Key findings on the extent of food poverty:

- Food insecurity ranges from worrying about the ability to obtain food to hunger and skipping meals (FAO, 2021).
- An estimated 8-10% of households in Oxfordshire experience food insecurity. This equates to 55,000-69,000 people.
- Groups with higher levels of food insecurity include those limited by health problems or disability (5 x more likely to experience food insecurity); those severely clinically vulnerable (x2 more likely to experience food insecurity); food sector workers (x1.5 times); BAME residents (x2) (Source: Food Foundation, 2021).

Good Food Oxford | Food Poverty Action Plan (FPAP) for Oxfordshire

A Food Poverty Action Plan for Oxfordshire

GOOD FOOD OXFORD REPORT

Authors: Good Food Oxford, with contributions from the Community Food Networks and those who have pledged action to tackle food insecurity.

August 2021



Healthy, fair, sustainable and delicious food for Oxfordshire www.goodfoodoxford.org



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Local research: Local Government



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers
Reports by Healthwatch Oxfordshire
Men in Carterton 2023
Good Food Oxfordshire research
Oxfordshire Community Insight Profiles
WODC Youth Needs Assessment
OxWell School Survey 2021
Finding out more

Oxfordshire Community Insight Profiles

- Oxfordshire County Council's Public Health team is working with local partners and communities to produce in-depth Community Insight Profiles for areas across Oxfordshire. The areas selected are those where residents are most at risk of poor health, or experience health inequalities, as identified in the 2019 Oxfordshire Director of Public Health Annual Report.
- The community insight profiles aim to:
 - Understand what the experience is of those living in these areas in relation to health and wellbeing
 - Outline the health outcomes and the factors which can influence these health outcomes and bring this to life through the voices of the community
 - Provide information and recommendations for local organisations, stakeholders and residents working together to improve health and wellbeing in this area
- Community Insight Profiles completed so far:
 - Published in September 2022 Vale of White Horse Abingdon Caldecott, Oxford the Leys (Blackbird Leys and Northfield Brook)
 - Published in March 2023 Cherwell Banbury Grimsbury and Banbury Ruscote and Neithrop, Oxford - Barton and Rose Hill
- Further Community Insight profiles are in development as follows:
 - To be published by December 2023 Oxford City: Littlemore and select areas of Osney and St. Thomas and Hinksey Park wards

Full reports and related summaries can be accessed here: Community Insight Profiles | Oxfordshire Insight



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers
Reports by Healthwatch Oxfordshire
Men in Carterton 2023
Good Food Oxfordshire research
Oxfordshire Community Insight Profiles
WODC Youth Needs Assessment
OxWell School Survey 2021
Finding out more

West Oxfordshire District Council Youth Needs Assessment

- Young people were disproportionately affected by the COVID-19 pandemic their learning was interrupted, they lost opportunities to develop social skills, to earn and to work and they were not able to access professional services to support with their physical and mental health.
- This project aimed to better understand youth needs in the local district and to be able to consider youth voices in decision making and service design where it impacts young people.
- Key findings on mental health:
 - In total 489 young people said that mental health was a challenge that young people face specifically pressure, stress, anxiety and depression were words commonly used to describe these mental health challenges.
 - 38% of young people have received help with their mental health of these 60% got support from parents and 42% got support from their best friend.
 - Of those who responded, 44% of young people said that COVID-19 affected their mental health.
 - Over the last year, most young people rated their mental health as low at its worst.
- Key findings on COVID-19:
 - The top 3 responses on how COVID-19 has affected young people were:
 - Not seeing family and friends and being disconnected.
 - Not being active.
 - Getting behind at school.
 - Some young people reported that COVID-19 improved their wellbeing, with individuals reporting that lockdown allowed them to have an improved exercise routine and also gave them time to rest and be alone.



Population

Population groups and protected characteristics

Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Local research: academic

OxWell School Survey (Dept of Psychiatry, University of Oxford)

Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers
Reports by Healthwatch Oxfordshire
Men in Carterton 2023
Good Food Oxfordshire research
Oxfordshire Community Insight Profiles
WODC Youth Needs Assessment
OxWell School Survey 2021
Finding out more

OxWell School Survey 2021 Preliminary Report

- The OxWell School Survey asks questions on a range of health and wellbeing-related issues to pupils at participating schools in Oxfordshire and elsewhere in England.
- The aim of the survey is to inform individual schools and Oxfordshire County Council, as well as to contribute to academic research into improving the wellbeing and mental health of children and adolescents.
- The study findings in this report cover around 30,000 respondents aged between 8 and 18 years old.
- o The initial observations of responses of 17,439 students in years 8 13 who took part in the survey show that 1,161 reported having self-harmed within a month of the survey, which amounts to 6.7% of the completed responses. Please be aware that only students in years 8-13 see any questions related to self-harm.



Summary Report:
Mental Health and Wellbeing
OxWell Student Survey May-July 2021

Report of Preliminary Findings

Karen Mansfield, Stephen Puntis, Christoph Jindra & Mina Fazel Department of Psychiatry, University of Oxford

List of Figures

1	Warwick-Edinburgh Mental Wellbeing Score (WEMWBS)
2	Frequency that pupils are too worried to sleep
3	Revised Children's Anxiety and Depression Scale (RCADS)
4	Revised Children's Anxiety and Depression Scale (RCADS) Subscales
5	How easy is it to access mental health support at school?
6	Who provides mental health support at your school (tick all that apply)?
7	Weekly exercise both in and out of school
8	Effect of pandemic on amount of exercise
9	How often do you feel lonely?
10	Ability to concentrate compared to before the pandemic
11	Have you been bullied in the last year?
12	How well do you think your school deals with bullying?

OxWell survey 2021 Preliminary Puntis C, Mansfield KL, Jindra C, Fazel M: The OxWell Student Survey 2021 Summary Report: Mental Health and Wellbeing. Dept of Psychiatry, University of Oxford



Population

Population groups and protected characteristics Health conditions and causes of death

Behavioural determinants of health

Building blocks of health

Service Use

Local research

Introduction

Working with community researchers
Reports by Healthwatch Oxfordshire
Men in Carterton 2023
Good Food Oxfordshire research
Oxfordshire Community Insight Profiles
WODC Youth Needs Assessment
OxWell School Survey 2021
Finding out more

Finding out more

- For the latest reports and data resources please see Oxfordshire JSNA web pages For information on a community research approach see:
- Healthwatch Oxfordshire "Model of Engagement" working with community researchers: Working with community researchers to achieve change for people | Healthwatch Network website (staff)
- Community participatory action research (CPAR)
 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2774214/
- Community Research Literature Review

Reports highlighted in previous JSNAs (latest versions) for reference

- State of Nature in Oxfordshire 2017
- Mental health in Oxfordshire: children and young people 2019
- Turning Point Vaccine Hesitancy Report August 2022 | Oxford City Council
- Oxfordshire Storytelling Project Report August 2022
 - Report can be read here: https://insight.oxfordshire.gov.uk/cms/mental-health-and-wellbeing
 - Stories can be read here: https://oldfirestation.org.uk/oxfordshire-storytelling-report/
- VOXY 'Be Supported' 2022 Questionnaire 2022: Full report for 2022
- Mothers 4 Justice Ubuntu 2022
- Research reports Healthwatch Oxfordshire



Finding out more

Related JSNA resources for Oxfordshire are published alongside this report on Oxfordshire Insight, including:

Inequalities indicators small area level dashboard
Community Insight Profiles
Health Needs Assessments
JSNA Bitesize

Public Health England provides a wide range of health indicators and profiles on Fingertips

ONS population estimates and population projections for county and districts, benefits claimants and the annual population survey are available from www.nomisweb.co.uk

Nomis provides Census 2021 data.

Oxfordshire County Council population forecasts are published on Oxfordshire Insight

web: https://insight.oxfordshire.gov.uk/cms/joint-strategic-needs-assessment email: jsna@oxfordshire.gov.uk

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