

Banbury Cross and Neithrop and Banbury Ruscote Community Profile

Summary

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1 Introduction

Oxfordshire is one of the most affluent areas of the country. However, this hides the fact that, as reported by the Director of Public Health Annual Report 2019¹, there are 10 wards in Oxfordshire which include areas ranked in the 20% most deprived in England.

To better understand the needs and priorities of these communities, Oxfordshire County Council's Public Health team is undertaking a programme of work with local partners to create community profiles, providing an in-depth understanding both of local health needs as well as supportive community assets. The community profiles use local data and community insight based on an asset-based community development model (ABCD).

This profile is focused on two of these wards – Banbury Cross & Neithrop ward (sometimes referred to as Neithrop) and Banbury Ruscote ward.

The aim of this profile is to:

- Understand what the experience is of those living in Banbury Cross & Neithrop and Banbury Ruscote 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 to improve health and wellbeing in this area

Note that this report is a summary and highlights the key findings from two in-depth reports:

1. *Ruscote and Neithrop Community Insight Project Report* by Community First Oxfordshire (CFO),
2. *Community (data) profile of Banbury Neithrop and Ruscote* compiled by the Public Health Intelligence team of Oxfordshire County Council.

This summary contains quotes from Community insight gathering, these quotes have been edited to aid readability and identifiable information has been removed to anonymise the respondent.

With thanks to the Banbury Neithrop and Ruscote Steering Group, Community First Oxfordshire and especially to the residents of these wards who gave their time to talk to CFO researchers. Thanks also to officers at Cherwell District Council and local councillors for their support and guidance.

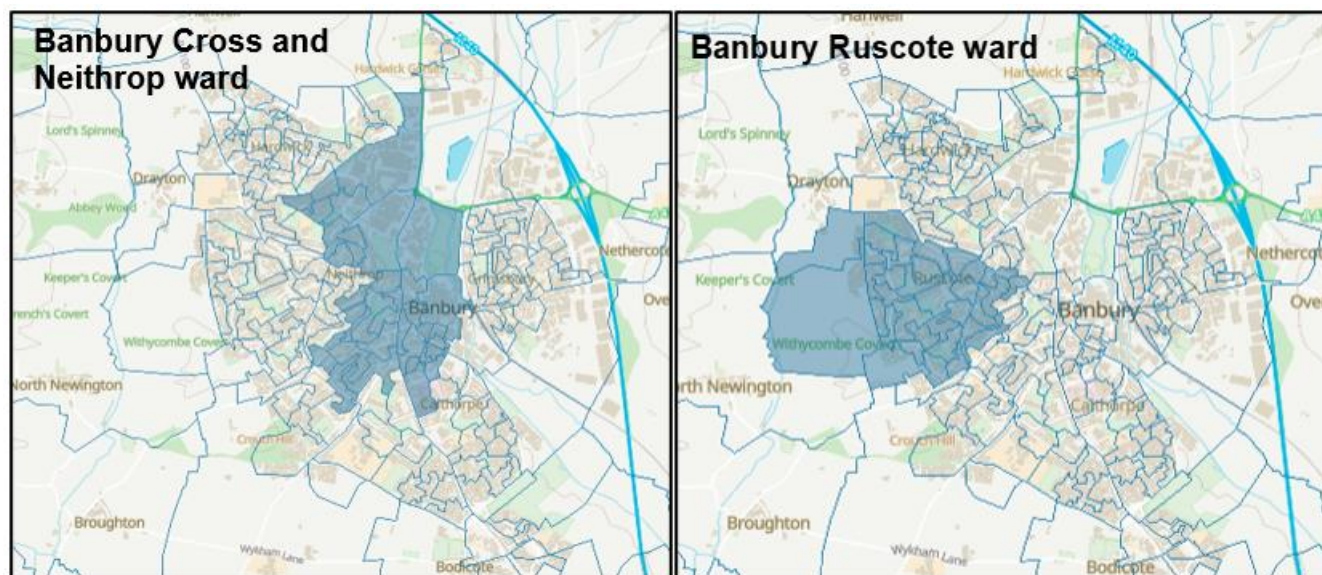
¹ [2019-20 Director of Public Health annual report | Oxfordshire County Council](#)

2 Location

Banbury Cross and Neithrop ward covers central Banbury including Banbury town centre, Castle Quay and the Light, the Jacobs Douwe Egberts factory, Spiceball Leisure Centre and country park and the People's Park.

Banbury Ruscote ward is to the west of Banbury and is mainly an area of housing, including the Bretch Hill estate and Woodgreen Leisure Centre.

Figure 1 Ward boundaries



Maps from [Build a custom area profile - Census 2021, ONS](#)

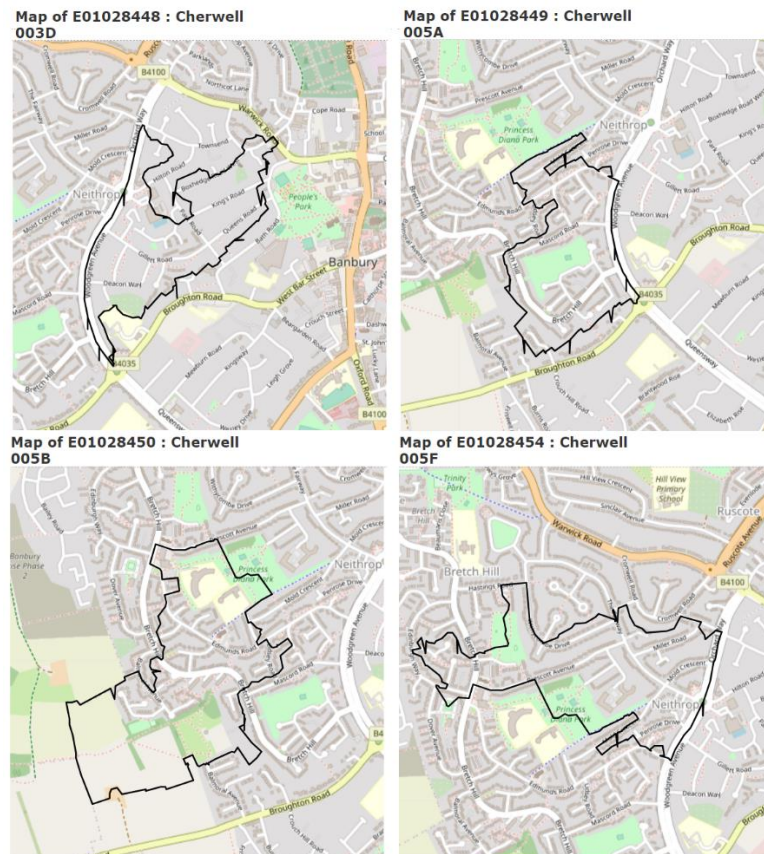
3 Summary of population and health data

Indices of Deprivation

Four LSOAs in the Ruscote and Neithrop area (Cherwell 003D, Cherwell 005A, Cherwell 005B and Cherwell 005F) are ranked within the 20% most deprived nationally.

- LSOA's Cherwell 003A, Cherwell 005A, B, D, E and F ranked within the 10% most deprived areas nationally in the domain of education, skills, and training.
- Cherwell 005B ranked within the 10% most deprived areas nationally in the domain of health deprivation and disability.

Figure 2 Maps of LSOA Cherwell 003D, Cherwell 005A, B and F



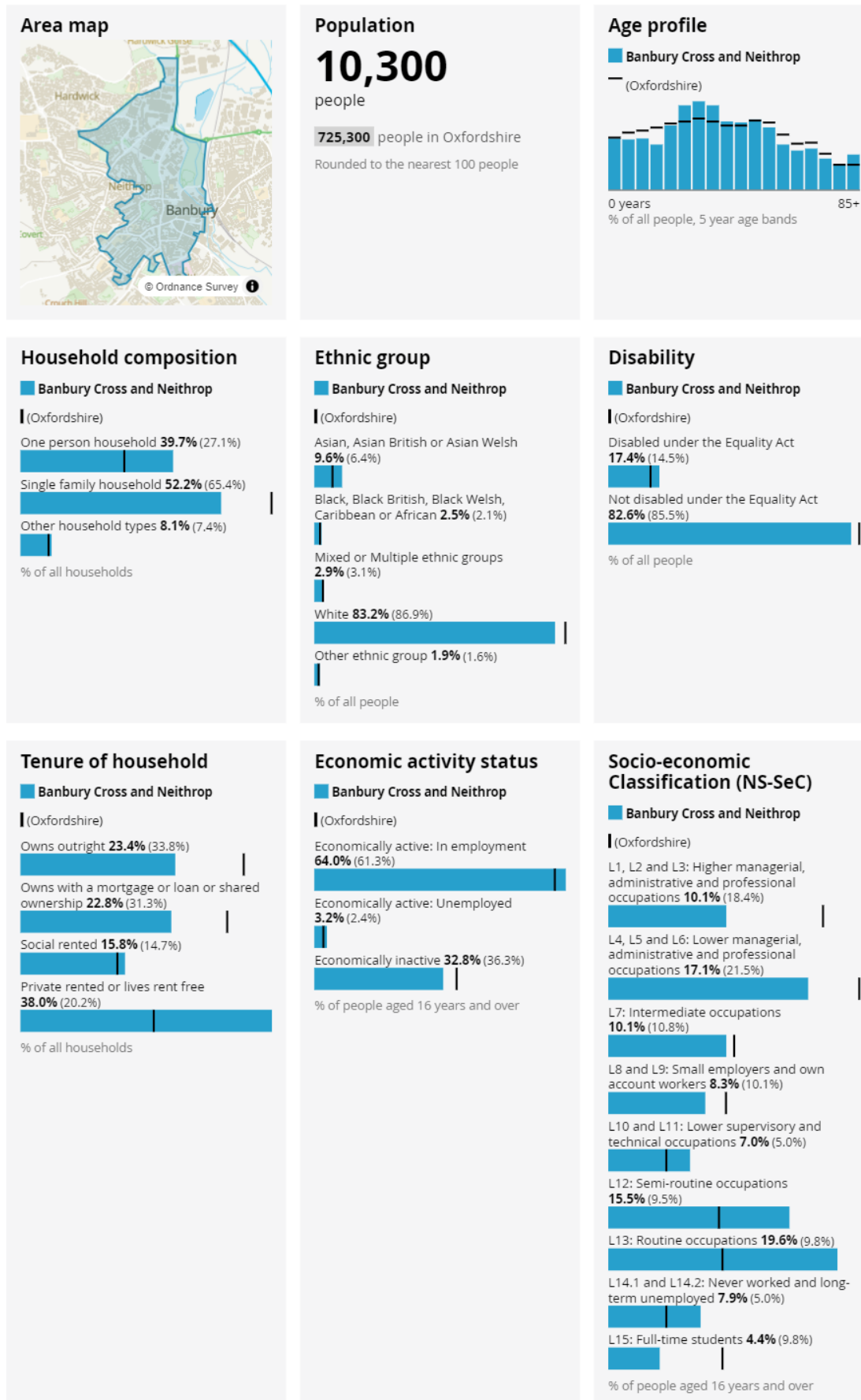
Maps from www.nomisweb.co.uk

3.1 Banbury Cross and Neithrop

Census 2021 data shows that, compared with Oxfordshire as a whole, the ward of Banbury Cross and Neithrop had an above-average proportion of:

- Working aged people aged 30-45 years;
- One person households (40% vs 27%);
- Residents from an Asian ethnic group (9.6% vs 6.4%);
- People with disabilities (17.4% vs 14.5%);
- People living in private rented accommodation (38% vs 20%) ;
- People in routine (20% vs 10%) or semi-routine (16% vs 10%) occupations or who are long term unemployed (8% vs 5%).

Figure 3 Census 2021 profile of Banbury Cross and Neithrop ward



From [Build a custom area profile - Census 2021, ONS](#)

The Banbury Neithrop area has higher rates of unemployment and poverty than the Oxfordshire average.

Working aged people and families

- 4% (count=275) of working aged residents in Banbury Cross and Neithrop ward were claiming unemployment-related benefits as of February 2023², above the rate for Oxfordshire of 2.1%. Note that this value has been obtained from DWP and is available every month, it differs from the self-declared unemployment data from the Census (as in figure 3 above).
- The latest fuel poverty data³ (for 2020) showed that the Banbury Neithrop area had 308 households estimated to be in fuel poverty, equivalent to 12.3% of households, above the average for Oxfordshire (8.1%).

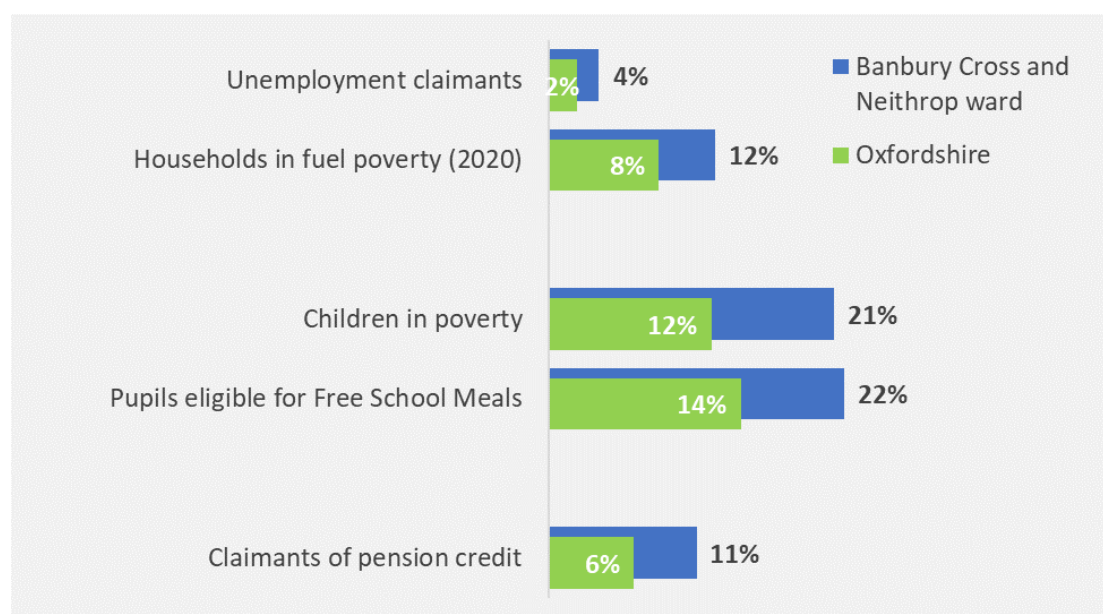
Children and young people

- 21% (count=401) of children were living in poverty⁴ in Banbury Cross and Neithrop ward, well above the average for Oxfordshire (12%).
- 22% (count=300) of primary and secondary pupils living in Banbury Cross and Neithrop ward were eligible for Free School Meals⁵, above the average for Oxfordshire of 14%.

Older people

- 10.9% (count=196) of older residents were claiming pension credit in Banbury Cross and Neithrop ward as of August 2022, above the average for Oxfordshire (6.3%).

Figure 4 Indicators of low income



² DWP claimant count January 2023 from nomisweb.co.uk including Job Seeker Allowance and Universal Credit claimants who are out of work

³ Sub-regional fuel poverty data 2020 Dept for Business, Energy and Industrial Strategy

⁴ DWP statXplore, children aged 0-15, 2021/22

⁵ January 2022 pupil census, Oxfordshire County Council

Health and Wellbeing Indicators

Health and wellbeing indicators for Banbury Neithrop Middle Super Output Area (MSOA) that are ranked **red worse** than the England average include:

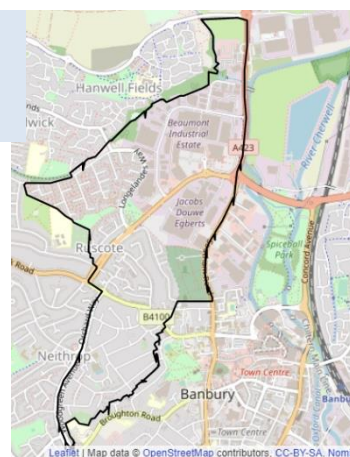
- Overall income deprivation (all ages) and older people in poverty,
- Emergency hospital admissions for all causes.

Figure 5 Health and Wellbeing profile of Banbury Neithrop MSOA*

Indicator name	Value	Worst	Med	Best	
(D1) Deprivation score (IMD)	26.8	86.9	18.2	2.2	
(D2) Children under 16 yrs living in poverty (%) (IDACI)	17.5	64.7	13.7	0.9	
(D3) Adults over 60 yrs living in poverty (%) (IDAOPI)	18.6	76.0	13.0	2.0	
(D4) Households in Fuel Poverty (%)	12.3	54.1	12.4	2.5	
(D5) Income deprivation (%)	14.6	48.8	10.6	0.9	
(D6) Unemployment, ages 16-64 years (%)	6.3	20.8	4.0	0.7	
(CH1) Emergency hospital admissions, ages 0-4 years (crude r..	208.8	352.2	137.9	24.8	
(CH2) Emergency hospital admissions for injury, ages 0-4 year..	157.2	363.7	114.3	0.0	
(CH3) Obesity: Reception year (%)	10.2	21.4	9.5	2.6	
(CH4) Obesity: Year 6 (%)	23.4	39.0	19.6	4.3	
(CH5) Emergency hospital admissions for injury, ages 0-14 yea..	106.4	251.2	89.2	18.7	
(CH6) Emergency hospital admissions for injury, ages 15-24 ye..	161.0	733.3	126.9	14.4	
(H1) Emergency hospital admissions for self-harm (SAR)	99.0	541.4	88.3	10.2	
(H2) Hospital admissions for alcohol-attributable conditions (SA..	95.1	391.1	95.4	35.9	
(H3) Emergency hospital admissions for all causes (SAR)	130.4	215.6	96.5	31.5	
(H4) Emergency hospital admissions for COPD (SAR)	139.8	554.5	88.2	9.3	
(H5) Emergency hospital admissions for CHD (SAR)	129.0	396.1	96.2	23.0	
(H6) Emergency hospital admissions for Stroke (SAR)	92.0	260.9	99.0	28.4	
(H7) Emergency hospital admissions for heart attack (MI) (SAR)	155.7	318.7	97.0	21.4	
(H8) Emergency hospital admissions for hip fracture, over 65s (..	90.4	527.4	96.6	29.3	
(M1) Life expectancy at birth (Males)	77.9	66.6	79.8	94.1	
(M2) Life expectancy at birth (Females)	85.1	72.0	83.6	97.5	
(M3) Deaths from all causes (SMR)	88.5	251.0	97.5	36.0	
(M4) Deaths from all cancer, age under 75 years (SMR)	118.8	231.0	98.0	29.2	
(M5) Deaths from circulatory disease, age under 75 years (SM..	142.6	374.4	95.5	12.6	
(M6) Deaths from respiratory diseases (SMR)	101.5	335.4	96.8	21.8	
(M7) Deaths from stroke (SMR)	84.7	415.7	95.4	0.0	
(M8) Deaths from all causes, age under 75 years (SMR)	120.6	309.2	95.8	26.1	
(M9) Deaths from all cancer (SMR)	91.7	200.8	99.0	32.2	
(M10) Deaths from circulatory disease (SMR)	95.5	244.7	98.9	32.1	
(M11) Deaths from coronary heart disease (SMR)	100.4	307.5	98.0	16.6	
(M12) Preventable mortality (SMR)	115.2	378.4	93.3	17.3	

Source: Area is Cherwell 003; OHID Local Health from Oxfordshire JSNA inequalities dashboard
[Workbook: Oxfordshire Local Area Inequalities Dashboard \(tableau.com\)](#)

Area map –
Neithrop
MSOA

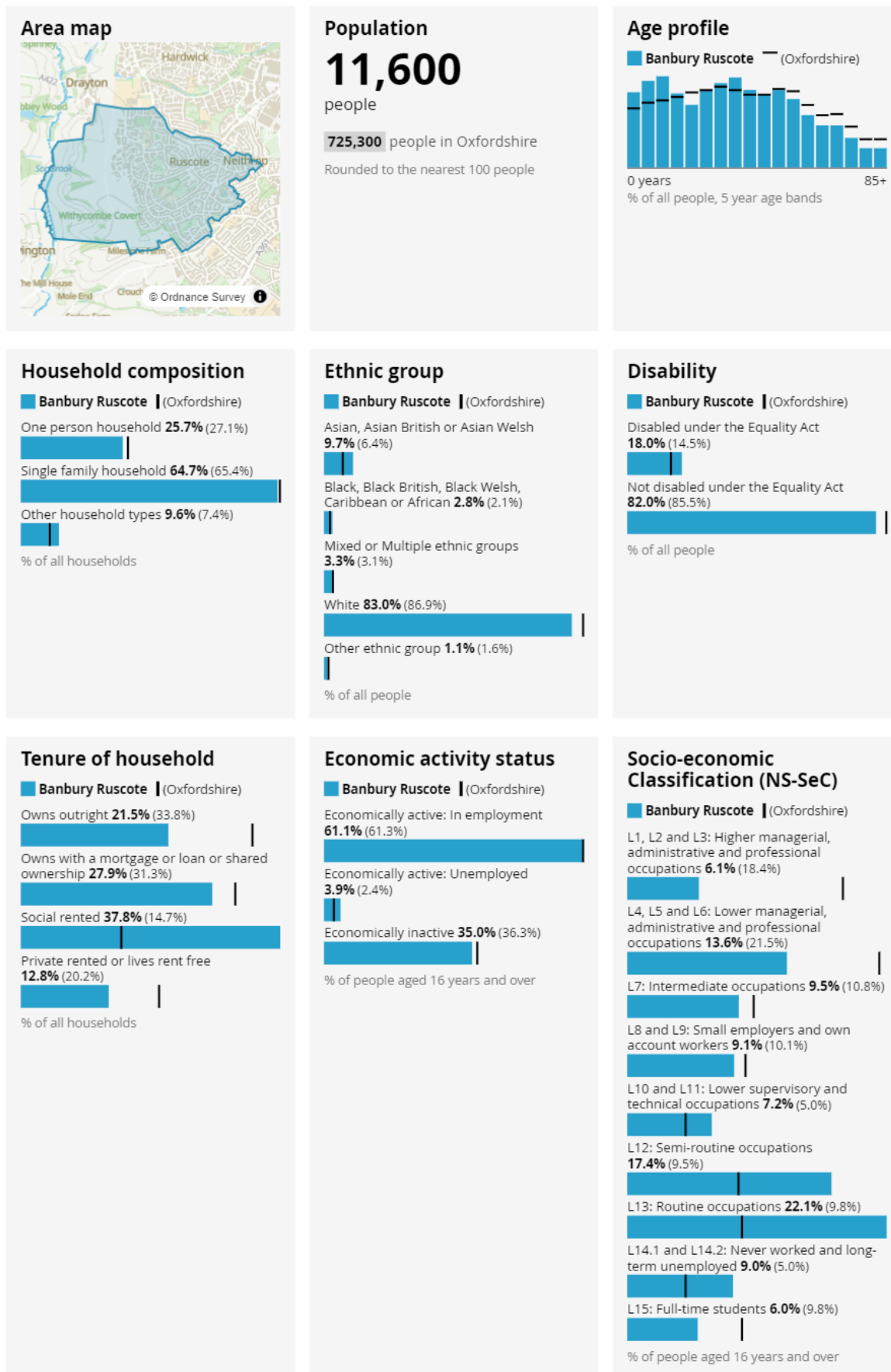


3.2 Banbury Ruscote

Census 2021 data shows that, compared with Oxfordshire as a whole, the wards of Banbury Ruscote had an above-average proportion of:

- Young people aged 0-15 years;
- Residents from an Asian ethnic group (9.7% vs 6.4%);
- People with disabilities (18% vs 14.5%);
- People living in social rented accommodation (38% vs 15%);
- People in routine (22% vs 10%) or semi-routine (17% vs 10%) occupations or who are long term unemployed (9% vs 5%).

Figure 6 Census 2021 profile of Banbury Ruscote ward



From [Build a custom area profile - Census 2021, ONS](#)

The Banbury Ruscote area has rates of unemployment and poverty that are well above the Oxfordshire averages.

Working aged people and families

- 4.9% (count=305) of working aged residents in Banbury Ruscote ward were claiming unemployment-related benefits as of January 2023⁶, over double the rate for Oxfordshire of 2.1%. Note that this value has been obtained from DWP and is available every month, it differs from the self-declared unemployment data from the Census (as in figure 6 above).
- The latest fuel poverty data⁷ (for 2020) showed that the Banbury Ruscote ward area had 539 households estimated to be in fuel poverty, equivalent to 15.8% of households, almost double the average for Oxfordshire (8.1%).

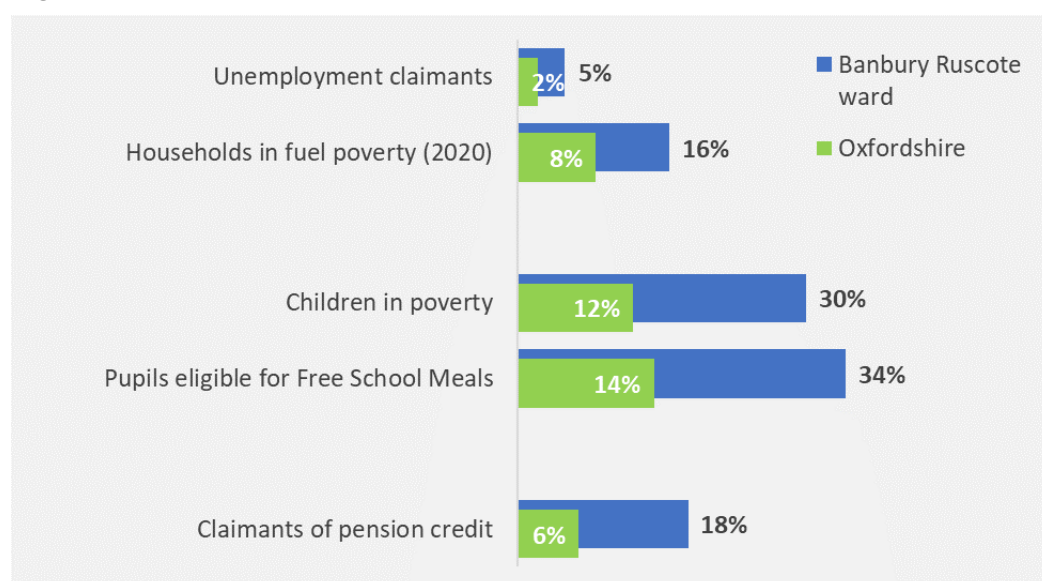
Children and young people

- 30% (count=814) of children were living in poverty⁸ in Banbury Ruscote ward, over double the average for Oxfordshire (12%).
- 34% (count=747) of primary and secondary pupils living in Banbury Ruscote ward were eligible for Free School Meals⁹, over double the average for Oxfordshire of 14%.

Older people

- 17.7% (count=268) of older residents were claiming pension credit in Banbury Ruscote ward as of August 2022, almost three times the average for Oxfordshire (6.3%).

Figure 7 Indicators of low income



⁶ DWP claimant count January 2023 from nomisweb.co.uk including Job Seeker Allowance and Universal Credit claimants who are out of work

⁷ Sub-regional fuel poverty data 2020 Dept for Business, Energy and Industrial Strategy

⁸ DWP statXplore, children aged 0-15, 2021/22

⁹ January 2022 pupil census, Oxfordshire County Council

A range of health and wellbeing indicators for Banbury Ruscote Middle Layer Super Output Area (MSOA) shows that the area has a relatively poor health profile.

Over half (25 out of 32) of local health and wellbeing indicators are ranked **as worse** than the England average including:

- Overall income deprivation (all ages) and each of children and older people in poverty,
- Life expectancy (lower than average for males and females),
- Emergency hospital admissions for all causes and deaths for all causes,
- Premature deaths from all causes,
- Preventable deaths.

Figure 8 Health and Wellbeing profile of Banbury Ruscote MSOA *

Indicator name	Value	Worst	Med	Best	
(D1) Deprivation score (IMD)	34.0	86.9	18.2	2.2	
(D2) Children under 16 yrs living in poverty (%) (IDACI)	25.6	64.7	13.7	0.9	
(D3) Adults over 60 yrs living in poverty (%) (IDAOPI)	20.8	76.0	13.0	2.0	
(D4) Households in Fuel Poverty (%)	15.8	54.1	12.4	2.5	
(D5) Income deprivation (%)	19.5	48.8	10.6	0.9	
(D6) Unemployment, ages 16-64 years (%)	6.1	20.8	4.0	0.7	
(CH1) Emergency hospital admissions, ages 0-4 years (crude r..	194.9	352.2	137.9	24.8	
(CH2) Emergency hospital admissions for injury, ages 0-4 year..	183.0	363.7	114.3	0.0	
(CH3) Obesity: Reception year (%)	11.3	21.4	9.5	2.6	
(CH4) Obesity: Year 6 (%)	23.4	39.0	19.6	4.3	
(CH5) Emergency hospital admissions for injury, ages 0-14 yea..	122.5	251.2	89.2	18.7	
(CH6) Emergency hospital admissions for injury, ages 15-24 ye..	191.9	733.3	126.9	14.4	
(H1) Emergency hospital admissions for self-harm (SAR)	118.6	541.4	88.3	10.2	
(H2) Hospital admissions for alcohol-attributable conditions (SA..	129.6	391.1	95.4	35.9	
(H3) Emergency hospital admissions for all causes (SAR)	148.8	215.6	96.5	31.5	
(H4) Emergency hospital admissions for COPD (SAR)	188.4	554.5	88.2	9.3	
(H5) Emergency hospital admissions for CHD (SAR)	136.9	396.1	96.2	23.0	
(H6) Emergency hospital admissions for Stroke (SAR)	123.1	260.9	99.0	28.4	
(H7) Emergency hospital admissions for heart attack (MI) (SAR)	160.1	318.7	97.0	21.4	
(H8) Emergency hospital admissions for hip fracture, over 65s (...)	158.0	527.4	96.6	29.3	
(M1) Life expectancy at birth (Males)	76.0	66.6	79.8	94.1	
(M2) Life expectancy at birth (Females)	79.0	72.0	83.6	97.5	
(M3) Deaths from all causes (SMR)	162.4	251.0	97.5	36.0	
(M4) Deaths from all cancer, age under 75 years (SMR)	156.5	231.0	98.0	29.2	
(M5) Deaths from circulatory disease, age under 75 years (SM..	116.5	374.4	95.5	12.6	
(M6) Deaths from respiratory diseases (SMR)	222.6	335.4	96.8	21.8	
(M7) Deaths from stroke (SMR)	177.6	415.7	95.4	0.0	
(M8) Deaths from all causes, age under 75 years (SMR)	144.3	309.2	95.8	26.1	
(M9) Deaths from all cancer (SMR)	147.2	200.8	99.0	32.2	
(M10) Deaths from circulatory disease (SMR)	136.8	244.7	98.9	32.1	
(M11) Deaths from coronary heart disease (SMR)	127.1	307.5	98.0	16.6	
(M12) Preventable mortality (SMR)	158.7	378.4	93.3	17.3	

Source: Area is Cherwell 005; OHID Local Health from Oxfordshire JSNA inequalities dashboard
[Workbook: Oxfordshire Local Area Inequalities Dashboard \(tableau.com\)](#)

Area map –
Ruscote
MSOA



4 Community assets and local groups

A local asset-mapping exercise¹⁰ carried out by Community First Oxfordshire (CFO) found that the Neithrop and Ruscote areas of Banbury (similar to the finding from the separate report on Banbury Grimsbury and Hightown) have benefited from long term community development work, which local residents and groups recognise as often high quality, well-targeted and well-received by the community.

The mapping exercise developed a long list of assets and activities for residents including those based at the Hill Community Centre, Ruscote Community Centre, the Sunshine Centre, The Beacon Drop in Centre, local places of worship, schools and colleges.

Figure 9 Banbury Neithrop and Ruscote community venues



Map generated by Oxfordshire County Council

¹⁰ Carried out November 2022 to January 2023

5 Community research

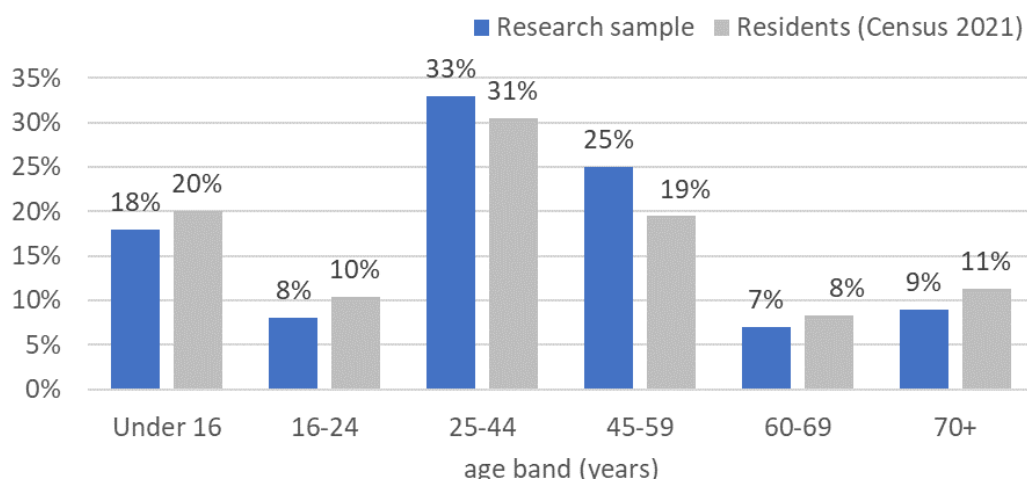
5.1 Research methodology and sample

Community insight research carried out from November 2022 to January 2023 by Community First Oxfordshire (CFO), included:

- 30 interviews with local residents,
- 19 interviews with representatives from local organisations,
- Four focus groups attended by 46 people in total (specific groups were held with young people aged 6-11; young people aged 8-13, women aged 18-60 and women aged 50+)
- An online survey completed by 73 respondents.

Comparing the age profile of respondents to the insight research (interviews, focus groups and online survey) with the proportion of residents by age (Census 2021) shows a similar distribution by age group.

Figure 10 Broad age breakdown of respondents to Neithrop and Ruscote insight research vs Census 2021 population of Banbury Cross and Neithrop and Banbury Ruscote wards



Research sample = 156 in total (excluding individuals working for organisations based outside the area). ONS Census 2021 table TS007 from www.nomisweb.co.uk

The main ethnic minority (non-white British) group in the area according to the Census 2021 survey¹¹ was “Other white” background and this group was well represented in the online survey.

- 15% of respondents to the online survey were from “Other white” background and the proportion of the resident population was the same at 15%.

Non-white groups were less well represented. The comparisons between the proportion of survey respondents and the resident population were:

- Asian group – 1.4% survey vs 10% resident population,
- Black group – 0% survey vs 3% resident population.

¹¹ ONS Census 2021 table TS021 from www.nomisweb.co.uk for the two wards

5.2 Living in Banbury Neithrop and Ruscote

Banbury Neithrop and Ruscote as a place to live

Around a third of online survey respondents were satisfied with the Neithrop and Ruscote area as a place to live with 33% (of those answering the question) fairly or very satisfied and 18% very or fairly dissatisfied (48% neutral).

The proportion dissatisfied was higher than respondents to the Oxfordshire residents survey (2022) where 11% of respondents county-wide were fairly or very dissatisfied with their local area as a place to live¹².

The top things that survey respondents (base=51) liked about living in the area were:

- Local shops and services (49%)
- Green and open spaces (49%)
- Playparks (31%)
- Community feeling (24%)

Focus groups and interviews highlighted a close and supportive local community.

- *“Everyone knows everyone. People mingle and do stuff together. It's good because I know where my kids are, who they are with and what they are doing as all of the neighbours keep an eye out.”*
- *“It's like a giant family, depending on where you are.”*

Getting around

When asked which mode of transport “you use most often” on a typical day, online survey respondents selected:

- Car (78%)
- Walking (49%)
- Public transport or taxi (41%)
- Cycling (7%)

Local opportunities to learn new skills

The majority of online respondents (79%) agreed that they have the skills/qualifications to find employment. A significantly lower proportion agreed that there are local opportunities to learn new skills and/or gain qualifications.

- 17% of respondents agreed that there are local opportunities to learn new skills and/ gain qualifications and 44% disagreed.
- A similar proportion (17%) felt able to access local opportunities to learn new skills and/or gain qualifications (50% disagreed).

The Retail Park and Banbury town are walking distance, there are good local shops with lots of choice.

¹² Note that the profile of the sample of the Neithrop and Ruscote survey is different to the weighted sample used in the Oxfordshire residents survey and the question wording was slightly different. Local respondents were much more likely to be neutral about their area as a place to live (48% compared with 11% across Oxfordshire).

5.3 Keeping healthy

Respondents selected money, support and job security as key factors linked to their wellbeing.

- When asked “*what are the most important things that help you/your family to live a healthy life with a sense of wellbeing*”, survey respondents (base = 47) were most likely to choose factors that are linked to income and support:
 - Not worrying about money (68%),
 - Access to healthy and affordable food (62%)
 - Supportive friends/family (55%) and
 - Job security (55%).

“The amount of times I’ve got no food...”

Walking and spending time outside were both mentioned as ways of keeping healthy.

- When asked “*what do you do to keep healthy*”, survey respondents (base=47) were most likely to mention:
 - Spend time outside (68%)
 - Socialise with friends (68%)
- “*I walk and spend time with others in the block - some of them have known me from a child.*”

The need to eat healthily was recognised as important and also a challenge made more difficult if children were fussy about food and time was short.

- “*I’m supposed to eat healthily but not a good cook. It’s snacking that is difficult. We’re good with meals and the kids eat well and I encourage the kids to eat well even though I don’t always myself.*”
- “*My family are not healthy eaters. My youngest won’t eat fruit and veg but my oldest will.*
- “*As they all want different things or versions of meals. I have to cook different meals for the family so I don’t bother for myself - I eat a sandwich.*”

5.4 Challenges to keeping healthy

Cost of living

The increase in the cost of living was a prominent issue in the research.

- Cost of living was the top “challenge to health and wellbeing” mentioned by residents in interviews.
- “Not worrying about money” was most frequently chosen as important for health and wellbeing from the survey (68% of 47 respondents).
- Foodbanks are being used by 17% of survey respondents.

“The gas bill is expensive and my mortgage is too high – everything has gone up”

“Processed food is cheaper”

Feeling safe

It is possible that respondents in Neithrop and Ruscote feel less safe in their area than the average for Oxfordshire, however the questions from the two sources and the sample profiles are not fully comparable.

- 58% of Neithrop and Ruscote survey respondents agreed that they felt safe in their neighbourhood (base=52).
- The county-wide Oxfordshire residents survey (2022) showed that 91% of respondents felt safe when outside in their area during the day and 65% after dark.

In relation to the question about feeling safe, some specific comments were made by interviewees about alcohol, fear of crime and experiences of crimes.

- *"I feel safe in my house, but I won't walk through the park or into town by myself as I don't feel safe. There are groups of men drinking in the church yard and groups of loud people". There are no police walking the streets anymore."*
- *"As a mother of girls, I don't feel safe letting my girls outside. I see all these kids of 6, 7, 8 or 9 running about the streets on their own".*
- *"Someone broke into our flat. They came and stole things". [young person]*

"The Hill [community centre] is a space where I feel safe, find support and advice".

Crime data shows the Banbury Neithrop area in particular had a high rate of police-recorded crime, Anti-Social Behaviour and Criminal Damage.

- Street level police recorded crime data¹³ shows that the Banbury Neithrop area had a high rate of **total crimes** in 2021 at 165.8 per 1,000 population. This ranked it as 6th out of 86 areas in Oxfordshire. Banbury Ruscote had a lower overall rate of crime at 119.2 per 1,000 (ranked 13th).
- Banbury Neithrop area had the second highest rate of **Anti-Social Behaviour** crimes in 2021 in Oxfordshire (23.2 per 1,000 population) and Banbury Ruscote was ranked 10th at 14.9.
- Banbury Neithrop was ranked top (highest) of areas in Oxfordshire with regards to the rate of **Criminal Damage and Arson** in 2021 (14.7 per 1,000) and Banbury Ruscote was ranked 12th (10.1 per 1,000).

Impact of COVID-19

When asked about the impacts of the COVID-19 pandemic for "you or for the community", respondents highlighted loneliness, stress/anxiety and activities being stopped.

- Over half of online survey respondents reported feeling lonely with just under 1 in 5 (19%) feeling lonely all or most of the time.
- *"There were impacts across the board but the anxiety in children and adults is probably the worst."*
- *"You've got a lot of teenagers who are under pressure and have anxiety after lockdown and I don't think there's enough support for them."*

¹³ [Community safety | Oxfordshire Insight](#) Oxfordshire Crime Dashboard with data from police.uk (data by MSOA Jan-Dec2021)

5.5 What more could be done to support health and wellbeing

When asked what more could be done to support health and wellbeing, respondents proposed help with budgeting, life skills and encouraging people to access support.

- Over two thirds (70%) of survey respondents agreed that free or reduced cost of events and activities would help improve health and wellbeing, followed by strong community relationships (56%).
- Proposals by interviewees and focus group attendees included:
 - Teaching budgeting skills *"It's one thing that should be taught in schools. There's too many kids coming out of skills without [any sense of] the value of money"*.
 - *"The Sunshine Centre used to do a life skills club and they've got rid of it because of funding"*.
 - *"I think the main barrier is getting people to that first session because I think they lack confidence when coming to something that's unknown"*. [community group representative]

6 Recommendations

The following is a brief summary of recommendations clustered by theme that have been derived from the results of the community insight project.

Further discussion of the recommendations is available in the community insight report.

1. Community spaces

- Local environment improvement discussion
- Improve lighting in certain areas

2. Community, communication, and cohesion

- Develop a community-wide communication strategy
- Run language classes for speakers of English as a second language
- Develop a programme of whole-community events

3. Community action: innovation and resiliency

- Funding and bid-writing support
- Improve joint-working and networking
- A (north) Banbury Volunteer Drive

4. Community action: meeting locally identified needs

- Additional support for young people
- Community-based mental health initiatives
- Fund additional (or extend) sessions which already offer peer-to peer support and drop-in sessions
- Explore food-based initiatives
- Produce a map of foodbanks
- Introduce community-based Life Skills sessions
- Improve walking infrastructure
- More support for children with Special Educational Needs (and parents)