# Health and Wellbeing in Central Witney - 2024 Community Survey

#### Why are you asking what I think?

West Oxfordshire District Council and Oxfordshire County Council Public Health are working on a project with community partners to find out more about health and wellbeing in places across the county. One of these areas is in Central Witney. A charity, Community First Oxfordshire (CFO), has been asked to talk to local residents to find out more about the following:

- 1. What kind of things (like organisations, services, and people in the community) support health and wellbeing?
- 2. What causes the biggest problems to people's health and wellbeing and what would help improve these?

## What do we mean by wellbeing?

Wellbeing is the state of being or feeling comfortable, healthy, or happy. It also includes other things, such as how satisfied people are with their life as a whole, their sense of purpose, and how in control they feel.

#### What happens next?

Your views and experiences will help to create a really useful picture of what people in central Witney think about health and wellbeing and how it can be improved. This will help West Oxfordshire District Council, Oxfordshire County Council, and others to plan better for the future and develop services and projects to improve things.

## Important information about how we will process your responses

This survey is completely anonymised so that anyone who completes it cannot be identified. The analysis of your feedback will be undertaken on behalf of West Oxfordshire District Council and the County Council by CFO. By completing this survey, you are consenting for your response data to be shared by these organisations. Your data will be processed by these organisations in accordance with the General Data Protection Regulation (2018). Please see the back of the survey for links to data protection and privacy policies.

CFO will provide an <u>anonymous summary report</u> on survey findings for West Oxfordshire District Council and the County Council - this report will be publicly available.

You can complete the survey online by following this link or scanning the QR code:

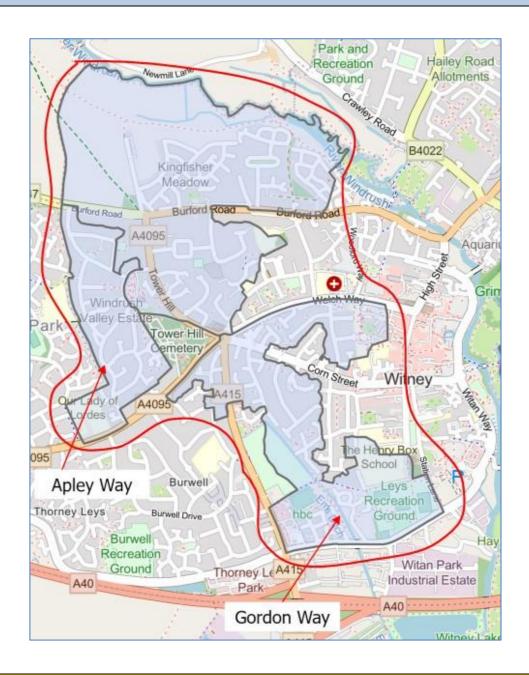
https://www.surveymonkey.com/r/WITNEYHEALTH



Or you can return a hard copy of your survey to Freepost Plus RTUH-ALLT-RAHZ, Community First Oxfordshire, South Stables, Worton Park, 0X29 4SU



#### PART 1 - WHERE DO YOU LIVE?



1 - Do you live inside the area outlined in red in the map above?	Please i	tick one
Yes – please go to Part 2		
No - PLEASE DO NOT COMPLETE THE SURVEY AS YOUR ANSWERS WILL NOT BE RECORDED		

## TURN OVER FOR PART 2 OF THE SURVEY

## PART 2 – ABOUT YOU

2 - What is	your age?					Pleas	se tick one
		This	s survey is fo	r those aged	15+		
15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54
55-59	60-64	65-69	70-74	75-79	80-84	85+	

3 - What gender do you identify as?	Please tick one
Male	
Female	
Describe myself in another way	
Prefer not to say	

4 - What is your ethnic group? Tick one option that best describes your ethnic group/	background/
White English/ Welsh/ Scottish/ Northern Irish/ British	
Other white background	
Mixed/ multiple ethnic group	
Asian/ Asian British	
Black/ African/ Caribbean/ Black British	
Other ethnic group	
Prefer not to say	

## PART 3 – LIVING IN CENTRAL WITNEY

5 - What do you like about living in central Witney?	Please tick all that apply
Community feeling	
Local shops and services	
Schools (Henry Box, Tower Hill Community Primary School, West Witne Our Lady of Lourdes School, Queen Emma's Primary, The Batt School)	y Primary,
Green and open spaces	
Playparks	
Sports and recreation facilities	
Community groups and organisations	
Other: please tell us what	

6 – How satisfied at all, 5 = very	are you about centra satisfied.	l Witney as a	place to I	live on a scale	of 1-5		t satisfied e tick one
1	2	3		4		5	
7 DI 11	.,	***			•		
5 = completely	if you agree or disag , agree.	ree with the		statements: I * Please tick the			
		1	2	3		4	5
I feel involved in t making in central							<u> </u>
I feel my views ar when asked abou Witney	t living in central						
I participate in conconsultations abo							
I know where to g about central Witi	I						
I feel I am part of community in cen							
I would like to be decision making a consultations in c	and community						
	acted any of the follo t living in central Witr		( assistan				ss a hat apply
Community group	, organisation, or cha	arity					
Council officer (To	own, District or Coun	ty)					
Local councillor (	Town, District or Cou	nty)					
Member of Parlia	ment						
Other: <i>please tell</i>	us who						
	are you with your ho						
I = not satisfie	d at all, 5 = very satis	ı	ı	Clease tick the	1		
		1	2	3	<b>'</b>	4	5
Cost (rent or mor	tgage)						
Access to social (	affordable) housing						
Location / neighb	ourhood						
Adequate size							
State of repair							
Other: please tell	us what						

## PART 4 – YOUR DAILY LIFE

10 – How often do yo	u/ your hous	ehold use the	ese modes of t		elect a frequency	for each
	Daily	Weekly	Fortnightly	Monthly	Less than once a month	Never
Car						
Bus						
Train						
Taxi						
Motorbike/Moped						
E-scooter						
Bicycle						
Walking						
Wheelchair/ mobility aid						
Other: please tell us	what					

11 - How easy do you find it to 1 = not easy at all, 5 = very	_	in and outside		ey on a scale o	
	1	2	3	4	5
To get around within central Witney					
To get from central Witney to other parts of the town					
To get from central Witney to other locations					

12 – Please tell us what would be helpful to you for getting around in central Witney?  Please tick a	all that apply
Improved bus frequencies or routes	
Increased parking options	
More cycle routes	
Improved pavements/ walking routes	
Other: please tell us what	

13 – Which community grou	ips, classes, or activities		tney? ase tick all that apply
Groups and activities speci	fically for BABIES AND	TODDLERS	
Groups and activities speci	fically for CHILDREN		
Groups and activities speci	fically for TEENAGERS /	AND YOUNG PEOPLE	
Groups and activities speci	fically for OLDER PEOP	LE	
Sport and exercise groups,	/activities		
Craft and hobby groups/act	tivities		
Physical health support gro	oups/activities		
Mental health support grou	ps/activities		
Faith or religion-related gr	oups/activities		
LGBTQ + groups/activities			
Other – <i>tell us what below</i>			
Please tell us specifically v	, men groupe eter you as		
this could be a variety of	derneath each space/pl	Please tick the relevant face, please tell us what y de ease of access, opening	ou think about them:
	Never use	Use occasionally	Use often
Community halls/ centres			
Thoughts - tell us which pl	ace you are commenting	g on:	
Witney Library			
Thoughts - tell us which pl	ace you are commenting	g on:	

	Never use	Use occasi	onally	Use often
Religious setting				
Thoughts - tell us which pl	ace you are commentii	ng on:		
Shops				
Thoughts - tell us which pl	ace you are commentii	ng on:		
Parks and playparks				
Thoughts - tell us which pl	ace you are commentii	ng on:		
Other green spaces				
Thoughts - tell us which pl	ace you are commentin	ng on:	·	
Other community spaces				
Thoughts - tell us which pl	l 'ace you are commentii	ng on:		
15 – How easy do you find i	t to access the following			vant box for each
In the comment box ur and/or what could be ii				
	Never use	Difficult	0K	Easy
Health centre / GP				
Thoughts:				
Witney community hospital				
Thoughts:				

Pharmacy							
Thoughts:							
Dental practice / services							
Thoughts:	<b>'</b>	<u>'</u>					
Oxford hospitals (e.g. JR, Churchill)							
Thoughts:							
16 – Tell us how safe you feel 1 = not safe at all, 5 = ver		nunity at dif					1-5: ox for each
	1						_
	1	2	3		4		5
Day-time	l	2	3		4		5
Day-time Night-time	'	2	3		4		5
Night-time							
-	eelings of sa			feel co		ove s	
Night-time  17 - Tell us more about your	eelings of sa			feel co		ove s	
Night-time  17 - Tell us more about your	eelings of sa			feel co		ove s	
Night-time  17 - Tell us more about your	eelings of sa			feel co		ove s	
Night-time  17 - Tell us more about your	eelings of sassues).	afety (such	as what you	feel co			
Night-time  17 - Tell us more about your fexperiences with safety i	eelings of sassues).	afety (such	as what you	feel co			afety or your
Night-time  17 - Tell us more about your fexperiences with safety i	eelings of sassues).	afety (such	as what you	feel co			afety or your
Night-time  17 - Tell us more about your to experiences with safety it.  18 - Which of the following st.  I feel lonely all the time	eelings of sassues).	afety (such	as what you	feel co			afety or your
Night-time  17 - Tell us more about your fexperiences with safety in the	eelings of sassues).	afety (such	as what you	feel co			afety or your
Night-time  17 - Tell us more about your fexperiences with safety in the	eelings of sassues).	afety (such	as what you	feel co			afety or your

0K

Difficult

Never use

Easy

	1	2	3	4	5
I have the skills and/or qualifications to find employment					
There are local opportunities to learn new skills and/or gain qualifications					
I feel able to access local opportunities to learn new skills and/or gain qualifications					
TANT 3 - TO	JOK HEAL	IH AND	WELLBEII	NG	
	urself, both p	hysically and		a scale of 1-	
21 – How healthy do you consider yo	urself, both p	hysically and	I mentally, or	a scale of 1-	
21 – How healthy do you consider yo 1 = not healthy at all, 5 = very he	urself, both p ealthy.	hysically and <i>Ple</i>	I mentally, or	a scale of 1- relevant box	for each
21 – How healthy do you consider yo	urself, both p ealthy.	hysically and <i>Ple</i>	I mentally, or	a scale of 1- relevant box	for each

19 - Please tell us whether you agree or disagree with the following statements: 1 = do not agree

2

1

Please tick the relevant box for each

4

at all, 5 = completely agree.

There are places and spaces where people can meet in central Witney

People from different backgrounds

can mix in central Witney

I know where I can meet other people in central Witney

22 – Do you have a	long-standing il	lness or disability	that affects day		ease tick one		
Yes							
No							
If you feel comfortable, you are welcome to share details of your illness or disability:							
23 - Has the COVID	-19 nandemic ha	nd any long-term	impacts on your	nhysical or mer	ntal health?		
20 Mas the Sovie	17 pariaerine na	id any tong term		tick the relevant			
	A very negative	A somewhat negative	No particular impact	A somewhat positive	A very positive		
	impact	impact	mpact	impact	impact		
Physical health							
Mental health							
If you feel comforta	able, you are wel	come to share de	etails of the impa	act of COVID-19 o	on your health:		
24 – What do you d	o to look after yo	our health/ yours	elf?	Please tick	all that apply		
Socialise with frien	ds	<u> </u>					
Attend groups and organisations							
Keep active (e.g. playing sport, exercising, gardening, cycling, walking)							
•	Spend time outside						
Maintain healthy habits around food and eating							
Go to a religious setting							
Other: <i>please tell u</i>	s what						

25 – What things have made it more difficult for you to look after yourself/ your house.  **Please tick a	
Income	
Lack of access to healthcare when I need it	
Job insecurity	
Problems with housing situation	
Lack of time	
Access to healthy and affordable food	
Getting around/ transport	
Access to the internet	
Health condition (physical and/or mental)	
Access to exercise (e.g. costs of classes/ availability)	
Childcare (e.g. costs or availability)	
Other: please tell us what	-1
26 - What do you think supports health and wellbeing in central Witney?  Please tick	all that apply
Community spirit/ relationships	
Volunteering	
Green spaces, parks, and playparks	
Community groups/ organisations/ charities	
Religious settings	
Other: please tell us what	
27 - What do you think would improve the health and wellbeing of people living in ce Please tick	entral Witney? k all that apply
More community-led activities focused on health and wellbeing	
Community events to encourage interest in health and wellbeing	
Free or reduced cost access to events and activities	
Taster sessions for activities	

Activities at different times of the week/ day								
Activities that bring together people in different age groups								
Support groups for specific health issues								
Stronger community relationships								
Do you have any other thoughts about how to improve health and wellbeing? Do you have any specific ideas? This might be a new group or specific activities for people to do.  Please tell us below!								
28 – In relation to food, ple	ase tick w	hether you ag	ree with the follow	ving statements	i.			
		Yes	Sometimes / m	aybe	No			
I can access affordable and healthy food options								
I and/or my family maintain healthy habits around food and eating								
I would value information and support about healthy food and eating habits								
Please tell us more, if you	wish:			•				
29 – Do you notice any of the following activities taking place in central Witney?								
Yes No								
People smoking								
People drinking alcohol and/or alcoholic drink litter								
People taking drugs and/or litter	drug							

#### 30 - If you answered 'yes' to any of Q29, where do you see these things taking place? Please tick all that apply Inside the School Parks / Shops Bus home gate green stops spaces etc. areas People smoking People drinking alcohol and/or alcoholic drink litter People taking drugs and/or drug litter

Other location: please tell us where

## PART 6 – YOUR PERSONAL EXPERIENCES OF HEALTH AND WELLBEING

31 -	We would	really	like to	find	out a	bit m	ore a	about	your	personal	experie	nces o	of healtl	n and
	wellbeing.	-												

- Your experience with a local service or project
- How you overcame a personal challenge
- Your personal or family experience during the COVID-19 pandemic
- How you/ your family maintain healthy habits
- Something different

Please write in the box underneath if you have something to share. Any information you provide will be anonymised but will be used as part of the report

32 - If you would be happy to be contacted about your story, please leave your contact details below.						
We will only use these details to contact you about your experience - they will not be shared with anybody else.						
PLEASE FILL	IN THE DETAILS BELOW IF YOU CONSENT FOR COMMUNITY FIRST OXFORDSHIRE TO CONTACT YOU.					
Name						
Email						
Phone						

## MANY THANKS FOR YOUR TIME!

#### **PRIVACY POLICIES**

- You can read Community First Oxfordshire's Privacy Policy at: <a href="https://www.communityfirstoxon.org/privacy-policy/">https://www.communityfirstoxon.org/privacy-policy/</a>.
- You can read West Oxfordshire District Council's Data Protection Policy at: https://www.westoxon.gov.uk/support/privacy-and-data/
- You can read Oxfordshire County Council's Privacy and Data policies at: <a href="https://www.oxfordshire.gov.uk/council/about-website/privacy-notice#paragraph-5977">https://www.oxfordshire.gov.uk/council/about-website/privacy-notice#paragraph-5977</a>.