BICESTER WEST COMMUNITY INSIGHT REPORT

REPORT

APRIL 2025

Contents

Table of Figures

List of Tables

Executive summary

In January 2025, Community First Oxfordshire was commissioned by Cherwell District Council and Oxfordshire County Council Public Health to undertake community insight research in Bicester West.

The aim of the research explored in this Insight Report was to capture the opinions of the community in relation to: 1- the local strengths and assets that support and enable health and wellbeing and; 2- challenges to health and wellbeing and what would help to address these. The views and experiences collected are intended to help develop a better understanding of what local people think about health and wellbeing and how it can be improved.

This Insight Report should be read in combination with the separate Bicester West Data Pack. Together, these documents comprise the Bicester West Community Insight Profile. An executive summary covering both documents has also been produced. The Profile aims to help Cherwell District Council, Oxfordshire County Council, and other local stakeholders and organisations to plan better for the future and develop services and projects to improve health and wellbeing outcomes in Bicester West.

Research

The community insight research took place from February-April 2025. A mapping exercise was undertaken at the outset to identify key community-based and non-community-based groups, organisations and agencies which are active in the area.

Key individuals were identified, and contact made to introduce the project aims and build relationships. Using these community contacts, an engagement strategy was developed. 128 individuals were consulted across a broad range of age groups: focus group attendees (39); one-to-one conversations (55); and a community survey (34).

80% of the total number of people consulted were female, while 96% were of white British/ other white ethnicity. The remaining respondents were Asian/ Asian British, Black/ African or other ethnic group.

Summary of Findings

A range of local assets to support health and wellbeing were identified.

It was generally felt that Bicester West was safe and friendly. Comment was made that there remained many long-standing residents, with different family generations living together. However, a sense of social flux and change was also noted, linked to wider changes in Bicester such as the shift away from the military and extensive ongoing housing development.

Also, some felt less safe at night and there were negative comments regarding the public consumption of drugs and alcohol and anti-social behaviour (ASB). The latter was likely partly related to a lack of available facilities, services, and opportunities for young people. This group would benefit from more places to safely congregate and access to support workers.

Additionally, some noted that the back alleyways, along with a lack or reduction of streetlighting across the area, sometimes led to feelings of vulnerability or a lack of safety, particularly for women and older people.

Local green and open spaces and playparks were generally seen as assets that supported health and wellbeing, although it was felt that these needed better upkeep to encourage usage and improve safety. It was also suggested that better use of outdoor spaces could be made for community events and pop-up activities. Additional outdoor play facilities for older children would also be welcomed.

While there are limited shops in the area (and a pub and Post Office), these appear to be well-used by residents. Many, however, noted the proximity of Bicester West to the much wider range of shops, services, and facilities in central Bicester as a benefit of living in the area. It should be noted, on the other hand, that the extensive size of the area means that those living on the fringes can have a relatively long walk or cycle to the town centre. However, there are good bus connections, as well as the Ability Bus, which helps accessibility of those who struggle with mobility.

While there is a large amount of community groups and activity taking place in the town as a whole, there is much less taking place *within* Bicester West. Residents readily travel to events, activities and sessions outside the area. However, there is scope to investigate additional opportunities within Bicester West, using existing assets such as West Bicester Community Centre. There may also be value in pursuing relationships with the two local social clubs to investigate initiatives. This may help develop increased social connection and cohesion and potentially help off-set a feeling expressed by some residents of feeling somewhat excluded from community life.

At the same time, while there is much excellent and often very highly-valued activity taking place, communication of what is happening could be improved. Some residents were more aware than others of what was available. A range of communication improvements were suggested, tailored to the needs of particular audiences, and a Bicester-wide joint communication strategy could be useful. Other suggestions to facilitate more resident involvement included free or low-cost activities, 'buddy-up' approaches, taster sessions, and holding activities and events at different days and times in order to maximise opportunities to take part.

There was mixed opinion regarding networking and communication between the voluntary sector and with other agencies or organisation and within the voluntary sector itself. Some felt it worked well, others less so. A review of existing networks could usefully be undertaken, with a view to widening access, broadening connections, facilitating more effective partnership working, and addressing common challenges. Such challenges across all community groups included a (general) lack of volunteers, and pressures of the short-term fundraising cycle, and a sense that the sector is overstretched. An over-reliance on the voluntary sector in Bicester was also noted, and it was also observed that while funding is going down, expectations from funders is going up.

With this in mind, seeking closer connections with Bicester-based businesses to explore additional support for health and wellbeing initiatives and community-based activity could be usefully explored.

Other challenges to wellbeing were expressed, including access to healthcare services. There was extensive comment about the difficulty in getting a GP appointment (with some confused or intimidated by the process and sometimes being put off even trying) or finding an NHS dentist.

Specific groups also expressed particular needs. For the youngest children and new parents/ carers, there was positive feedback about existing support and community-based services such as Home Start. Free (or by donation) activities were particularly valued and when these did not run in the school holidays, paid-for activities could be cost-prohibitive. Some concern was also expressed about access to busy health visitors.

As noted above, older children and teenagers could benefit from additional activities, more youth worker support, or simply a safe space/s to congregate. Young people also felt that they were not engaged in decision-making or asked their opinion, while also feeling somewhat ostracised. Initiatives such as a Youth Council (or simply making collective efforts to better engage young people in local decision making and the design of services) would be beneficial. The need for (especially) early intervention mental health and neurodiversity support, plus better understanding of young people's needs and concerns in general was expressed by young people themselves and multiple community-based organisations.

Mental health challenges were also relayed in relation to adults, with isolation exacerbating the challenge for older people in particular. There was a strong feeling of 'hidden isolation' and strategies should be developed to engage with those not current accessing local community support and organisations. It was increasingly common for welfare visits to be undertaken by Housing Associations.

To this end, additional on the ground community development support would be useful, not only to seek connection with the more isolated, but to offer signposting advice with regard to multiple other issues such as benefits, debt, and budgeting advice. Cost-of-living anxiety is clearly prevalent across all demographics.

Recommendations

A range of ideas were put forward regarding specific projects to meet challenges and improve health and wellbeing, and these are reflected in the recommendations. More information and underpinning rationale for these recommendations is available later in this document.

However, it is not the intention of the report to offer detailed overviews of potential projects to meet those recommendations. These are initial findings based on the research. Themes and potential initiatives will be further tested and explored in the next phase of the project, in collaboration with the local community.

A summary of recommendations is offered here, clustered by theme:

Healthcare, access, and inclusivity

1. **Access to healthcare: discussions to explore improvements to local services**
2. **Community-based mental health and associated health and wellbeing initiatives**

3. Additional support for SEND and neurodiverse needs

Community and integration

1. Develop a holistic, Bicester-wide communication strategy
2. Extend community development worker support
3. An inclusivity and access awareness campaign

Supporting community-based groups and organisations

1. Improve voluntary sector joint-working and networking
2. Seek discussions to explore or extend community-based usage of empty stores, green spaces, and existing community venues
3. Improve grant application processes and explore longer-term funding
4. Explore funding opportunities to support extended community action
5. Launch a Bicester Volunteer Drive

Community action: meeting identified needs

1. Additional support for young people and improved engagement

Community action: improving resiliency and developing skills

1. Develop a programme of community-based Life Skills sessions
2. Extend befriending initiatives

Public realm, environment, and transport

1. Local environment/ streetscape improvement discussion

Acknowledgements

Research overview

A steering group for the Bicester West Community Insight profile oversaw development of the work. This consisted of a range of community partners, including Cherwell District Council and Oxfordshire County Council Public Health.

Community First Oxfordshire were asked to undertake community engagement and insight gathering for the Profile, exploring resident opinions and observations with regard to health and wellbeing.

This report should be read in combination with a separate Bicester West Data Pack. Together, these documents comprise the Bicester West Community Insight Profile. An executive summary covering both documents has also been produced. The Profile will help Cherwell District Council, the County Council, and others to plan better for the future and develop existing local assets, as well as develop services and projects to improve health and wellbeing outcomes in Bicester West.

Specifically, Community First was asked to:

- Produce a brief overview of the history of the area.

- Gather the experiences and voices of residents from all age groups, representing the range of communities in the area.

- Collect qualitative data to capture the opinions of the community in relation to: 1- the local strengths and assets that support and enable health and wellbeing and; 2- challenges to health and wellbeing and what would help to address these.

- Collect stories of people's experiences of living in the area, with particular regard to health and wellbeing.

- Gather insight on the two topics identified above from local organisations who work with the residents of Bicester West.

- Provide recommendations for further insight needed and/ or actions to take forward from the findings, including how local assets can be developed.

Bicester West - the community

Location and brief overview

Bicester is a town and civil parish, located in the district of Cherwell, c. 11 miles north of Oxford and c. 17 miles south of Banbury.

Bicester West is a ward within the town. It had a population of 8,900 in 2021 (ONS). The largest ethnic groups were white (89.2% - higher than the UK average), Asian, Asian British, Asian Welsh (4.7%- lower than the national average), and mixed or multiple ethnic groups (3.2%- very slightly higher than the national average).

Figure 1 Bicester West Community Insight Profile area

Source: *https://www.nomisweb.co.uk/*
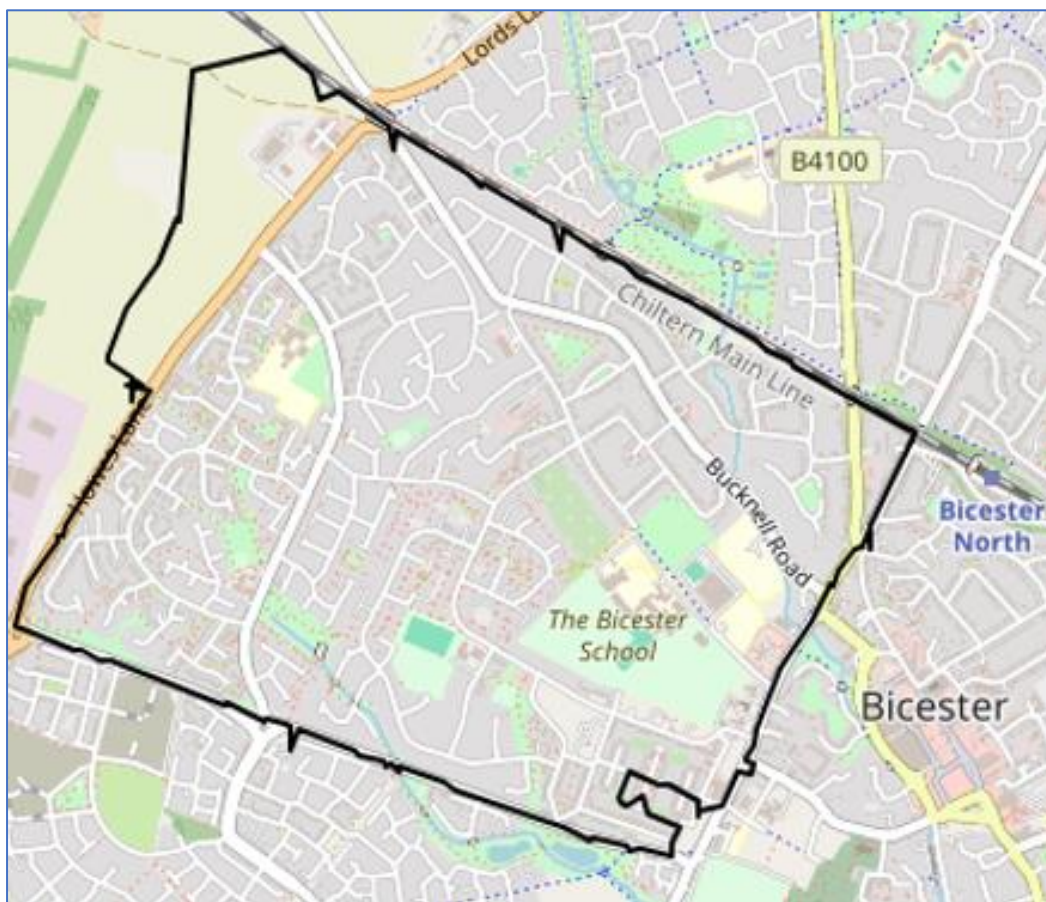
History and economic development

Bicester is mentioned in the Domesday book (1086) but recent evidence suggests there was a settlement in Saxon times. Bicester was an agricultural hub from early times, with a market charter granted in 1239 and 'Sheep Street, the main shopping street [was] built 300 years ago

to accommodate the animals brought to market.'[1] Many rural-based crafts and skills emerged, including 'leather working and saddlery, rope and sack making, basket weaving, straw plaiting, wool combing as well as lace making and brewing.'[2]

The last hundred years has seen a significant change in the socioeconomic character of the town: 'In 1921 the principal employment was still in agriculture, followed by people engaged in trade and commerce. Largely due to the permanent establishment of the RAF Station and later the Ordnance Depot and other businesses, the pattern of employment had by 1945 considerably altered encouraging a rapid rise in the population from that time.'[3]

In the area that would become known as Bicester West, 'building commenced in 1930s along Bucknell Road at Highfield. Post-war building continued on the western development at King's End, primarily to house civilian workers from the Ordnance Depot.'[4]

Development subsequently extended in the area across the twentieth century. Highfield Secondary Modern (now Bicester School) was built in 1952, with the junior school becoming a county primary on a new site at Bucknell Road (now Brookside Primary). Highfield Social Club (still in existence today) was also built on the new Highfield estate.

Today, as the draft Cherwell Local Plan 2042 notes: 'Bicester supports a range of employment sectors, including service industries, distribution, defence, motorsports and manufacturing. The largest employment areas are located in the eastern and southern parts of the town.'[5] Other than many home-based businesses, the main local employment in Bicester West is in leisure and services, including pubs and retail, the Bicester Leisure centre, and the schools. The fire and police stations are also located in the area.

As a whole, Bicester has expanded markedly in recent decades:

> 'Bicester has been a key location for housing growth for the District for a number of years. Since 2011, there has been an additional 3,869 homes delivered at Bicester (at 31 March 2024). Most of the new housing has been delivered on several large 'strategic' allocations on the edge of the town, including at Bure Park and South Bicester West. In addition to the houses already built, as of 31 March 2024, there were permissions in place for a total of 5,054 additional homes at Bicester.'[6]

The new Local Plan 2042 proposes to allocate a further 1500 homes above that allocated in the previous Plan.

---

[1] Bicester Local History Society (2024), *A Brief History of Bicester*. Available at:
https://blhs.org.uk/index.php/head_history-bicester/brief-history
[2] As above.
[3] Cherwell District Council (2011) *Bicester Conservation Area Appraisal - August 2011*:
https://www.cherwell.gov.uk/directory-record/1788/bicester
[4] As above
[5] Cherwell District Council (2024), *Proposed Submission Cherwell Local Plan 2042*:
https://www.cherwell.gov.uk/local-plan-review-2042-submission
[6] Cherwell District Council (2024), *Proposed Submission Cherwell Local Plan 2042*:
https://www.cherwell.gov.uk/local-plan-review-2042-submission

Access to shops, services, and leisure - overview

Bicester is the main economic centre in central Cherwell and is well served by shops, services, and facilities. Most everyday needs can be accessed within a relatively concentrated area in the town centre.

In Bicester West itself there are a number of shops, services and facilities. These include a pub, convenience stores, social clubs, and a community centre. There are also a number of play areas and open green spaces (key locations are listed in Table 2, below). However, Bicester West is a large ward and for those living on the northern and western extremities, in particular, shops, services and facilities both within the area itself and in the town centre can be some distance away.

Table 2 sets out distances on foot to key services and facilities from different points in Bicester West. Depending on location, these services have a greater or lesser ease of access. Distances may prove more challenging for those with limited mobility (who might be using a walker or scooter) and those who may be pushing a buggy or pram.

In terms of public transport, several routes serve Bicester West:

Table 1 Bus Routes Servicing Bicester West

ROUTE	DETAIL
21 – Bicester Town Service	Every ½ hour – multiple stops in Bicester West
21 – Highfield (Bowmont Sq.) to Pioneer Square (Bicester Town centre)	Every ½ hour – 1 stop in Bicester West
S5 – Oxford to Bicester	5 services per day (between 4 and 7pm) – 1 stop in Bicester West
81 – Bicester to surrounding villages	- Run by **Ability Bus**: free on-demand minibus travel for holders of a concessionary bus pass. - Two services out from Bicester West (morning) and three back from central Bicester (afternoon). 4 stops in Bicester West.

Table 2 Estimated walking distances to a selection of key services and facilities from different points in the Community Insight area

	From Bucknell Road/ Howes Lane (north)	Centre of Almond Road (east)	Jnct. of Leech Road/ Blenheim Drive (centre)	Jnct. of Kennedy Road/ Ashdene Road (south)	Centre of Isis Avenue (west)
BICESTER WEST-LOCATED SHOPS, SERVICES, AND FACILITIES					
Bicester School	1.2km	800m	800m	1km	1.7km

St Mary's Primary	1.2km	800m	800m	1km	1.7km
Brookside Primary	1.2km	600m	900m	1.4km	
Bicester Leisure Centre	1.2km	800m	800m	1km	1.7km
Morrison's Daily	1.4km	1.2km	400m	400m	1.1km
Tesco Express	1.2km	1.6km	800m	800m	450m
Shakespeare Pub	1.2km	1.6km	800m	800m	450m
Bicester West Community Centre	1.2km	1.6km	800m	800m	450m
Kea Field (green space)	1.4km	1.2km	300m	300m	1km
Kea Social Club	1.4km	1.2km	350m	250m	1km
Shakespeare Drive Play Area	500m	1.2km	700m	1.4km	1km
George St. playpark		700m	450m	1.2km	1.4km
Highfield Social Club	600m	800m	450m	1.2km	1.4km
CENTRAL BICESTER-LOCATED SHOPS, SERVICES AND FACILITIES					
Bicester Health Centre	1.6km	1km	1km	800m	1.8km
Ahmeys Pharmacy	1.6km	1km	1km	800m	1.8km
Bicester Library	1.8km	900m	1.6km	1.3km	2.5km
Central Bicester dentists (various)	1.8km	900m	1.6km	1.3km	2.5km
Sainsbury's (Pioneer Square)	1.8Km	900m	1.6km	1.3km	2.5km
Bicester Methodist Church	1.8km	900m	1.6km	1.3km	2.5km
Bicester North train station	2km	800m	1.4km	1.7km	2.7km

Community action, projects and initiatives

It is important to note that there are few services and support that are offered/ run specifically within Bicester West. The vast majority of community events and activities take place outside the Insight area, particularly in town centre locations.

Table 2 (*below*) offers a non-exhaustive list of key organisations involved in community-based activity and support: as organisers, active participants, facilitators, hosts etc.

These organisations/ assets have been involved in or host a wide range of specific activities and projects, focusing on multiple themes. These themes include: community resilience, activities to support socialising, mental and physical health and wellbeing, cost of living and food poverty, parent and family support, education, and support for young people.

More detailed information of current groups, organisations, partnerships etc. supporting health and wellbeing (with details of the services offered) can be found at appendix 1. Some of these are based in Bicester West while some are based elsewhere but offer support and services to residents of Bicester West.

Table 3 Key organisations and assets supporting residents and offering services in Bicester West/ to Bicester West residents

LOCATION	ORGANISATION/ GROUP/ AGENCY	ACTIVITY/ THEMATIC FOCUS
Bicester West-based organisations and assets	Bicester School	Secondary school
	Brookside Primary	Primary school
	Cherwell District Council	Bicester West support includes Community Warden and Community Health development Officer - promote and support community cohesion and wellbeing
	Clifton Centre (Bicester Spiritual Church)	Hosts the University of the Third Age (U3A)
	Highfield Social Club (membership)	Community events, music, comedy, bingo, quiz nights, snooker and pool, darts, bridge, exercise classes
	Kea Social Club (membership)	Quiz nights, bingo, community parties, and events
	Sanctuary Housing	Housing association - tenant support team
	St. Mary's Primary	Primary school
	Bicester West Community Centre	Community events, support sessions, classes: administered by Lifehouse Community Church (*see below*)
Non-Bicester West-based organisations and assets	Age UK Oxfordshire	Charity for older people: multiple sessions in Bicester
	Bicester Community Hub	Distribution of food to those in need
	Bicester Foodbank	People in food crisis: support by referral

	Bicester Hygiene Bank	Collect personal and domestic hygiene products
	Bicester Town Council	Local Authority
	Bicester Library	Library - hosts community events
	Churches in Bicester Refugee Support Group	Support/ advice for asylum seekers and refugees
	Citizens Advice	Advice centre; run several Community Health and Information Points (CHIPS)
	Community Albums	Support young people through music and creativity (work with Nai's House)
	Home-Start	Parent, child, and family support
	Lifehouse Community Church	Place of worship, community support
	Littlebury Hotel	Hosts Age UK community lunches
	Nai's House	Mental health support for young people
	Orchard Baptist Church	Place of worship, community support
	Oxford Health Arts Partnership	Creative health using art and nature
	Oxfordshire County Council	Bicester Community Support Service
	Oxfordshire MIND	Mental health support charity
	Ramblers Wellbeing Walks	Exercise, friendship, and wellbeing - offer walks in the wider Bicester area
Partnership projects and networks	Healthy Bicester	Annual event/ networking session
	OCVA community of practice	For community partners and statutory partners
	Bicester West Community Insight Steering Group	Community resilience, strength and cohesion

Community Insight Research

Methodology

Community mapping work identified groups and organisations which the Insight programme needed to engage in order to comprehensively explore the research aims set out in the introduction. These groups and organisations were contacted in order to make introductions to the project and build relationships.

Different methodologies were utilised in order to capture opinions from both residents and organisations:

1. ***One-to-one conversations***

Two sets of questions (one for resident-based conversations and one for representatives of community-based/ active organisations) were developed by Community First and discussed with the project steering group (see appendix 2).

Researchers then attended community activity sessions and spoke to attendees, taking them through the questions and taking notes. Community First also undertook conversations in the wider community. For community-based organisations, conversations with key representatives were conducted either face to face or, where this was not possible due to pressures of time, via email. Attendees gave consent at the outset of one-to-one conversations for their comments to be recorded.

These one-to-one conversations were particularly useful in allowing researchers to talk to a range of local residents across a range of different demographics, particularly in relation to age and gender.

2. ***Personal stories (case studies)***

Stories were identified as the research progressed, primarily developing naturally from one-to-one conversations, where individuals expanded on certain points and offered deeper personal insight on particular themes. Some details were amended/omitted to prevent potential identification of individuals.

3. ***Focus Groups***

Focus groups discussion allows for a deeper dive into given issues and can stimulate spontaneous ideas and personal disclosure. The approach that Community First took was that of semi-guided conversations: a list of questions was drafted by Community First and agreed with the Bicester West Community Insight Profile steering group (see appendix 2) and, where researchers were able and where it felt natural, guided the conversation back to consideration of those topics. Attendees gave consent at the outset of Focus Groups for their comments to be recorded.

Again, the mapping process allowed the research team to identify potential focus groups, with the intention to hold sessions across a range of demographics, client and guest groups, and community organisations.

The primary focus of the research was qualitative research. However, it was recognised that a survey could help establish more general, quantitative opinion in relation to the key research themes (whilst also giving opportunities for respondents to offer longer, written comments)

To this end, Community First and the project steering group designed a community survey (hard copy and online- Survey Monkey), which was signed off by the steering group (see appendix 3). The survey was widely disseminated (primarily via a weblink), using the multiple local networks identified during mapping.

The survey was anonymous, although respondents were invited to leave their contact details should they wish to share their experiences and opinions with the research team. Only a small number of surveys (34) were returned from residents who lived in the Bicester West research area.

Research findings

Presented in this section are summaries of the key themes identified during project research in relation to the different methodologies used and questions asked.

Non-attributed quotes from these sessions and anonymised case studies have also been used to illustrate many of the points made and opinions shared.

Resident one-to-one conversations (adults and older people)

31 residents were consulted in a range of settings, as summarised below:

Table 4 Residents consulted in a range of settings

Setting	Number of residents consulted
Age UK coffee morning	2
Café 103	5
Home Start	6
Open Doors	14
Street canvassing Bicester West	4
TOTAL	**31**

In terms of general observations, interviewees were generally quite willing to talk to researchers.

In addition, many people chose to go into some detail, without prompting, about their physical and mental health, several of whom were suffering from multiple health conditions which affected their daily lives to a greater or lesser extent.

Research question	Main themes	No. of references[7]
1. What do you like about Bicester West as a community?	Friendly/ community feel	13
	Events/ community groups/ things going on	7
	Public transport	5
	Location/ open and green spaces	5
	Good size/ manageable/ shops and services are close by	5
	Don't like it/ don't like it as much as I used to	4

'Good location. Very friendly. People keep an eye out for you and are there if you need them.'

'It's friendly. I've lived here all my life and we've lost a lot of military so it feels very different now. There's a different social mix.

'I'm concerned with the way the town is going. Years ago there used to be loads of jobs in the papers. Now there is hardly any, just warehouse stuff.'

'I recently moved here. I like it, I can walk everywhere and people are friendly and helpful. Everything is quite close.'

2. Do you feel involved in decision-making locally and feel that you are listened to?	Not really	10
	Yes	5
	No	4
	Consultation feels tokenistic/ don't feel listened to	4

'The leaders listen but they don't act on the feedback they get. It's always a minority making decisions.'

'We're old, no-one listens to us now.'

'I feel that consultation is tokenistic (e.g. just on social media or a forum for a couple of hours that people can't get to) and if we do express views, these are not listened to. People said they didn't want proposed changes to roads, traffic speed restrictions, cycle routes but they went ahead anyway.'

'Yes. When they were upgrading the Market Square options were given and we fed back. We have given feedback on the crossing and being listened to - it will be difficult for residents when the crossing is introduced, but we had the opportunity to have our say.'

---

[7] Not every respondent gave an answer to every question. Some respondents made multiple comments in response to a question.

3. What do you do to keep healthy, mentally, physically, emotionally, and spiritually?	Community events/ activities/ support groups/ volunteering	16
	Walking/ use green spaces	12
	Socialising/ family	7
	Exercise and sport	6
	Don't do much/ get out much	3

'I walk a lot. We have a dog and young children and go to the parks and the playground across the road. We go into town on the bus to visit friends, family.'

'I go walking but the pavements are terrible and need to be improved. My wife has had a few falls.'

'I'm not really sure. I work nights and weekends as I need the money and look after the children the rest of the time. I don't get out much.'

'I socialise and come to this group [Open Doors]. I go cycling. The ex-servicemen's group is good.'

4. What kinds of things are most challenging for you living in Bicester West that impact on your health and wellbeing?	Bus transport: expense/ infrequent	6
	Nothing challenging/ can't think of anything	6
	Cost-of-living	5
	Poor state of pavements/ roads/ public realm/ green spaces	5
	Access to a GP: getting an appointment	4
	Anti-social behaviour/ crime/ concern for safety	3
	Anxiety about cyclists using the same space as pedestrians and e-scooters	3
	Anti-social behaviour/ crime/ concern for safety	3
	Busy health visitors	2
	Housing issues: poor quality/ unaffordable/ unhealthy	2
	Loneliness and isolation	2
	Poor access to mental health support	1
	Speeding and traffic	1
	Over-development	1
	Lack of public toilets	1

'I'm worried by changes to the local bus service – it was run by Greyline for many years, now the Oxford Bus Company. I'm worried they may change times and services. Also, it's difficult when Café 103 is closed during the summer holidays.'

'The surgery is good but I haven't seen my own doctor for 4 years and it's very difficult to get through to the surgery. What makes me really angry, is that you can't assume that everyone has a computer or phone to make appointments.'

'Cost of living is a major problem for me. Water bills are going up and Thames Water make me furious. Why should we pay for their failures?'

'The streets, roads and parks could be improved. Green spaces are not well-used. It is dangerous cycling in certain places.'

'The 6-week new baby check happens by phone now not in person - this isn't right when you've got difficult issues you want to talk about. The health visitors are too thinly spread'. [8]

5. Do you feel safe in the community?	Yes	12
	Generally/ mostly	9
	No/ not really/ sometimes	4
	Not at night	4

'I feel safe in the community. It's a very quiet and secure place. I used to live in Banbury and was too scared to go out after 6pm.'

'Yes. But I wouldn't go out at night.'

'Mostly - but I worry about vandalism and verbal abuse from youngsters.'

'Sometimes. I worry about my children. There's a lot of vandalism and anti-social behaviour. There have been stabbings and rapes. Large groups of teenagers who shout, swear, throw things - its intimidating. I don't go out alone at night.'

6. What local groups, services, organisations, community spaces etc. do you find particularly helpful or useful to your health and well-being?	Open Doors	11
	Café 103	6
	Home Start/ baby and toddler groups	5
	U3A	2
	Facebook	2
	Community Orchard	1
	Bicester Green	1
	MIND group	1
	Gardening groups	1
	Age UK lunch club	1
	Refugee Support Group	1
	Move Together	1

'There are Facebook groups for everything -there's lots to do. The church has a cafe and a new mum's group and Bible reading group. We have a community help & information point [CHIP] which is part of Citizens Advice.'

'This café [Open Doors] is great. I don't use any groups. But there are night schools where they teach all sorts of things. English, flower arranging or martial arts or cooking.'

---

[8] *As a point of clarification, it should be noted that that the 6-week baby review takes place either at home or in a clinic. Both the Health Visiting Service and GP practices offer this review to families.*

'There is quite a lot for new mums and babies like a breastfeeding support group, new mums support network. Apart from Homestart there aren't many other groups that are free/ by donation.'

7. What are the other local strengths and resources that support community health and wellbeing (such as community spirit, individual skills, passions, knowledge, green spaces etc.)	Parks/ green spaces/ access to countryside	6
	Local clubs and societies	4
	Leisure centre/ gym/ outdoor gym	2
	Public transport	2
	Health walks/ walking	2
	Neighbourhood Watch	1
	Volunteering	1
	Library	1
	Mental health initiatives	1
	Baby Bank	1

'There are clubs in Bicester you can join for example the gardening club, bridge, running club, walking football.'

'There are lots of people trying to change the mental health provision and make this better. The Hummingbird centre is still open and that's really good.'

'There is a neighbourhood watch scheme here that lots of people support. Lots of veterans live here, and there's a veterans group and a community within that. There is an Ability bus to help older people get round, and a volunteer driver service.'

'The Baby Bank is great. You can get baby clothes, milk, equipment like pushchairs - and you can donate too.'

8. What do you think helps you/your family maintain healthy habits around food and eating and getting out and about, or what would help you?	Try to eat healthily/ do as well as I can	13
	Cost of healthy food makes it difficult	4
	Learned cooking skills/ developed good habits	2
	Exercise classes	2
	More education for children about healthy eating	2
	Too many takeaways with unhealthy food	1
	Need cooking classes	1

'We're getting there with better knowledge on food - people are aware of the need for a healthier diet.'

'For food you just get what you can afford. They need to educate schoolchildren about cooking so they know how to eat healthily.'

'It can be a struggle to feed everyone. I use the Food Bank at the Beacon – it's really helpful.'

9. Do you think the local community would benefit from additional projects and ideas to support health and well-being? If so, what? This could be a new group, organisation or something else – be as creative as you want!	**SPECIFIC IDEAS**	
	Healthy eating support/ classes	3
	Community hub/ drop-in centres	3
	Activities/ groups for younger people + teenagers (e.g. youth club)	2
	Elderly exercise	2
	Intergenerational activities/ events	2
	Improve parks and green spaces/ make better use of them	2
	Support for those with hidden disabilities to access groups	1
	Bereavement support	1
	Friendship group	1
	More bus services to facilitate access	1
	Running club	1
	Creative writing	1
	More music events/ gig night	1
	Mental health support	1

'Have more activities that are all year round for children of all ages that are low cost or no cost. It's hard in the school holidays as the Home Start group doesn't run. There are playschemes but they are too expensive. Also, things are really needed for teenagers.'

'We need funding so we can get the drop-in centres back. Also, the mental health place has shut down, which was provided by MIND. You see people now in the Sainsbury's cafe who used to go there and they're just sitting and not talking to each other.'

'We need things to bring older and younger people together. People don't know how to talk to each other.'

10. What do you think would encourage more local people to create or take part in health and wellbeing initiatives?	People are shy and need support/ encouragement to get involved/ need a buddy system	6
	Advertising: more/ better/ more targeted/ different methods	5
	Being asked what they want	1
	Make them free/ cheaper	1
	Some people don't want to get involved	1
	Trial/ taster sessions	1
	Don't know	1

'Information about what's going on. There are things to do if you are motivated and want to do them.'

'Local advertising - the Bicester advertiser has news from Oxford and Banbury but not from Bicester. The church newsletter can be accessed by anybody whether they go to church or not but it's going online and this is not good for older people who might not use computers. There are good Facebook groups.'

> *'Some people are insecure and don't know where to start. I was like that myself. I found it difficult to get through the door here [Open Doors]. I was so anxious. But the support from people here helped me. I think others need that too.'*

11. Would you be interested in joining with others (perhaps in a community group or project) to work on projects to support health and well-being?	Yes	9
	No	4
	Already volunteer	4
	Prefer others to lead	1
	Maybe	1

> *'There are already a lot of groups out there, but they need to be advertised better.'*
>
> *'Maybe, if it was flexible. I have other responsibilities.'*

LOCAL STORIES
'Johnnie' - 79

I have lived in Highfield [Bicester West] for over forty years. I came down to join the army and worked at the Army depot. It's very friendly but changed a lot over the years.

I don't like the changes to Sheep Street. So many shops have gone and it feels very quiet now. Greggs is coming and that will make a difference. I don't really get involved with things but I really like our new MP Calum Miller. The council could be better but you can't cover everyone with the same blanket.

I don't do many community things. I come to Open Doors and also have my son to speak to. But I don't want to bother him too much. The surgery is good but I haven't seen my own doctor for four years. And it's very difficult to get through to the surgery. What makes me really angry is that you can't assume that everyone has a computer [to make appointments].

I use a walker and I'm nervous about the plans to allow cyclists to use the same lanes as pedestrians. They need to be separate because it's dangerous. Electric scooters make me nervous too, flying up behind me. The cost of living is a big problem. Water bills are going up and Thames Water make me furious. Why should we pay for their failures.

Anti-social behaviour by kids makes me a bit nervous. I had an experience that made me anxious when they tried to block my way. I tried to say to them "would you talk to your own mum like that" to try and get them to see things from someone else's perspective. The police have got bit better dealing with ASB and the CCTV helps.

I think that more bus routes and services would be good. I worry for the older folk out there on their own. They need to be able to get out to places like this [Open Doors].

LOCAL STORIES
'Anne' - 68

I've lived here all my life and we've lost a lot of military, so it does feels very different now. There's a different social mix but the community is friendly. I feel safe though I notice vandalism. But I'm concerned with the way the town is going. Years ago, there used to be loads of jobs in the papers. Now there is hardly any, just warehouse stuff.

I think intergenerational ideas would be good and could bring people together. I don't know though. Things have changed, haven't they. Nobody is going down the pub anymore. Everyone used to know everyone but the pubs are closing now.

I socialise a lot and I go cycling but it can be dangerous in certain places. The ex-servicemen's group is good and the community lunch is excellent and uses up leftover food. The streets, roads and parks could be improved, and the green spaces are not well-used.

I haven't really used the doctor in years but recently I had to because of an injury. I had a really poor experience and there were delays in getting treatment. Then I didn't get the proper care and ended up in hospital.

We could do with more buses so we can get out to the other villages, and so people from there can come to Bicester. The cost of living is having an impact but I do okay. I'm lucky though, I have savings to see me through. I notice prices going up and we do try to look for bargains. We know how to budget.

Locally active groups and organisations: one-to-one conversations

Organisation	
Age UK Oxfordshire	Open Doors
Bicester Foodbank	Oxfordshire County Council x 2: *Community Support Service and Targeted Youth Support*
Bicester Health Centre	Sanctuary Housing Association: *housing team x 2*
Cherwell District Council x 3: *Community Health Development Officer, Community Warden, and Health Portfolio Holder*	Montgomery Surgery
Churches in Bicester Refugee Support group	Nai's House
Community Albums	North Oxford Schools Partnership
Citizen's Advice	Café 103 (Orchard Baptist Church)
Harvest at Home	University of the Third Age
Home Start: *team members x 2*	Bicester West Community Centre
Hygiene Bank	
TOTAL	**24**

24 one-to-one conversations were held with groups and organisations which are actively engaged in community activity/ projects in Bicester West and Bicester more generally. Requests for conversations and questionnaires were sent to multiple others without reply.

The main intent of these conversations was to seek opinions and insight with regard to community action in the area (whether community-led or partnership-based) and elicit insight with regard to community health and wellbeing.

Research question	Main themes	
1. In your experience, what works well in getting residents involved in projects and initiatives, and what doesn't (barriers to involvement)?	**WHAT WORKS**	**BARRIERS**
	Get the communication/ advertising right: multiple means in multiple places	Challenge in getting people involved in volunteering
	Use language people understand	Can be tricky to engage as a Council officer (negative perceptions)
	Facilitate a sense of accomplishment/ personal reward	Lack of time: busy work schedules, family life etc.
	Offer an incentive and make people feel included, work with what interests them	The *perception* it will take up too much time
	Encourage attendees/ volunteers to take a lead	Transport and location can be a problem for some
	Trusted and known individuals/ organisations leading activities	Can be a barrier attending on your own
	Make it free	Not knowing what's available
	Community information events	Not understanding what's available
	Listen to the community – what do they want	Changing social mix – can be difficult to bring people together
	Time – working across the long term – longer-term planning	Lack of a central focal point for the community in West Bicester
	Make it fun and accessible	
	Parent, carer-child groups/ sessions bring people together	

'Bicester market on a Friday is really well-attended. You could do a lot of good work by just going there.'

'We've been very successful in getting people involved but not everyone can access our venue, especially if they are from West Bicester. We'd like to have another base but it is so difficult finding premises.'

'We feel the key is listening to the community the whole time because there is no point doing something they're not interested in.'

'The social mix is different and attitudes have changed. People don't socialise together very much in West Bicester anymore. The generation which grew up in together is getting older and people are dying – that sense of strong local identity is being lost.'

'It'd be lovely if we had a café right in the middle of this estate which was accessible and people went to.'

'It's a challenge getting people involved with volunteering - have to find a topic to galvanise them and get them involved.'

'It's always the same people who get involved.'

'Parental groups are a great leveller – everyone can connect with each other because they're all going through the same issues.'

2. In terms of the discussion and design of community-based projects and initiatives – what are the ingredients for success in the long term?	Identify people at the grassroots – work with them
	A good pipeline of volunteers
	Build and maintain trust
	Have a group or project lead/ coordinator (across the long term)
	Find out what is wanted and needed – people have limited time - work with what they can offer (their 'gifts')
	Engage with different stakeholders/ good partnership working – builds connection and sustainability
	Have clear project objectives + realistic time-frames/ contingency plans and risk management
	Have an accessible location (with space for buggies/ mobility scooters etc.)
	Hold events at the right time of day/ different times (to reach different people)
	Need more community venues with good storage space
	Bringing different generations together
	Longer-term funding and sustainability **[see also key challenges, below]**

'Most things that succeed and have longevity have a person who is running and coordinating and managing – if you don't have that it's harder for everyone and you have to delegate it out [to volunteers], which can become burdensome. You can get "compassion burnout".'

'If you build trust and you've got a good relationship people are much more likely to engage.'

'Making sure volunteers are happy…if they are happy everything keeps going.'

'We're fighting and struggling to get funding for the work we're already doing so we're not really able to get a lot of stuff off the ground.'

'Sessions need to be regular and welcoming and open access [and have] ongoing, long-term investment.'

3. What are the key challenges you face as a community-based organisation (or an organisation working in Bicester West)? What would help you solve them?	There was much overlap with themes set out above	
	CHALLENGES	**POTENTIAL SOLUTIONS**
	Expecting voluntary sector to pick up too much – pressure from funders to do more with less	Sensible discussions with the available money
	Networking: some positive comment but a general sense that it could be improved	Improve discussions/ referrals between groups to better support individuals
	Is the approach correct – is helping people in the short terms the way to help in the long-term (dependency)?	Support groups with fundraising advice/ mentoring – peer to peer support
	Small teams and limited capacity – managing workload	Tell individual stories – these are powerful testimonies – do not just use number-based measures of impact
	Finance and funding for activities/ groups. The constant funding cycle and the pressure that comes with it/ diversion of energy from delivery of activities and support	Collaboration between groups/ sharing information and getting support from infrastructure organisations
	Recruitment and retention of volunteers (also competition for volunteers)	
	Effective demonstration of impact	
	Pressure to develop new projects	

'The thing that helps us most is funding – the more funding we get the more we can do for the community. We've been overdelivering but we can't afford to do that anymore.'

'We've got some organisations which are doing a brilliant job of applying for funding. It's almost creating peer support for fundraising and perhaps have a mentor.'

'I'd say as a community there is so much help out there. It's not really connected up, which is why this group [project steering group was formed] because we wanted to have a central way of looking at the help we can collectively provide.'

'There's loads going on, some great work, but a network management type of thing would be useful.'

'With some type of centralisation and collaboration we could get people out of their crisis situation sooner – we don't want people to fall through the gaps.'

'We've really struggled over the year to engage with partners in West Bicester.'

'We could do more sessions but we don't have enough volunteers.'

'The voluntary sector in Bicester is huge. They are all competing for volunteers.'

'We can measure impact via financial measures and say our work has saved you X millions. But how can you determine whether someone might actually have died if we hadn't helped? It's impossible.'

4. What do you think the main impacts of the pandemic were locally, and do you think any impacts are still being felt?	POSITIVE
	Community spirit – people came together/ brought out the best in people
	Community gardens increased food awareness and better understanding of food provision
	NEGATIVE
	Negative impacts on mental health across all demographics
	Isolation and lack of social contact
	(Ongoing) mental health impacts on young people who were unable to attend school
	Parental anxiety increased and is ongoing to some extent
	Demand for support from charities increased hugely – a lot of demand is still there
	'Staying in' became a habit
	More time spent online to the detriment of face-to-face interaction
	Quite a few groups did not start up again after Covid
	GPs seeing less people in person
	Not enough support for those with compromised immune systems

'There was a lot of community spirit and people coming together – organisations like Cherwell Collective were established.'

'We've had a real increase in children with high anxiety who have parents struggling with agoraphobia. The parents are so affected they haven't been able to leave the house.'

'Some young people find it impossible to get themselves into school. I think Covid has definitely played a massive, massive part in that. Such as the reliance of social media and being online to communicate. I think Covid has undone quite a lot of the normal experiences that you have as a young person. You grow up then suddenly have a couple of years where it's only online. It's hard to then undo that afterwards.'

'Young people in Year 8 and 9 are a lost generation. They missed out on transition work in Years 6 and 7. The pandemic had a huge impact on school attendance and post-pandemic non-attendance has increased hugely and with it an increase in anxiety among these young people.'

'We saw elderly people becoming more isolated and an acceleration of some people's cognitive decline as a result of a lack of socialisation, but I think we're at the end of that now.'

'Mental health has been a massive thing since Covid. It was a problem before Covid, but now it's even more of a problem. I think we've just come across a lot more residents that are needy and that need our help. And Covid has made them way worse because they've been isolated, lost family members along the way. They're completely on their own. Just don't know what to do.'

5. What worked well – locally- in terms of supporting the community through the pandemic, and what could be improved/ developed to help ensure the community is best equipped to deal with anything similar in the future?	The development of new community support groups
	Home visiting/ telephone support
	Adoption of digital technologies/ keeping in touch online
	The Integrated Neighbourhood Team
	Shift to a triage system at GPs to manage patient demand

'We used to run a booking system and you could see which GP you wanted. With Covid we moved over to a total triage system. I think that's been a good thing. It's a system that's affordable whereby anyone can't just see their GP for anything anymore because there just isn't the capacity.'

6. Have you noticed any cost-of-living crisis impacts affecting residents locally?	**The negative impacts of the cost-of-living crisis was a prominent theme in discussions**
	Low-income families struggling
	Food poverty – food bank demand increasing
	Fuel poverty, including inability to afford home energy efficiency improvements (e.g. insulation)
	People cutting back on leisure and social activities

	Cost-of-living has impacted some charities – loss of volunteers who now need to work
	Loss of winter fuel payment problematic for many

'Cost of living is huge – it's the number one worry. There's a sense of unease. People are scared to put the heating on and people are behaving more aggressively.'

'There's more reliance on the food bank. Some of the young people we are working with are in interim housing and very reliant on the foodbank to meet their basic needs.'

'People are struggling more and council spending has decreased – the gap is being filled by charities.'

'More families are having to watch money. There's a greater dependency on food banks, hygiene banks and more fuel poverty.'

7. Do you have any other observations about health and wellbeing in Bicester West and how it could be improved?	OBSERVATIONS
	General
	Challenges for people are often multiple, complex and overlapping – solutions are likewise complex
	Increased demand on charities to respond to (multiple) needs
	Generational problems within families
	Many people (across demographics) are isolated (including homeworkers)
	Mental health and wellbeing
	Families in general struggling with wellbeing
	Young people
	Increase in school non-attendance > detrimental effects on wellbeing
	Increase in prevalence and awareness of neurodiversity
	Many young people struggling with mental health
	Toxic masculinity
	Social media dependency leads to problems with socialising, neurological impacts
	Lack of facilities/ support for older children/ teenagers
	Physical health and healthy eating
	Healthy eating needs to be improved
	Type 2 diabetes and obesity increasing (not unique to Bicester)
	Ill health often has social causes – deal with them
	Access to healthcare
	Poor access to NHS dentist
	Difficulty/ challenge in getting a GP appointments/ navigating the system
	Hygiene poverty

	Some suggestion that better use could be made of the community hospital
	Housing and development
	Local housing can be challenging: cost, state of repair, overcrowding
	The speed of Bicester housing growth brings challenges
	Infrastructure improvements have not kept up with housing development
	Access to community support
	Affordable childcare is challenging for many
	Asylum seekers and refugees
	Many are isolated and anxious – feelings of insecurity
	POTENTIAL IMPROVEMENTS
	More on the ground community development support: linking groups/ acting as a community connector/ visible in the community/ supporting the vulnerable
	More healthy eating initiatives/ better strategy
	Blue line (health and walking trail) initiative has been successful.
	Street lighting could be improved – puts people off coming out at night
	Arts-based projects to build aspiration and potential career routes
	Increased engagement with young people to understand needs
	Explore a drop-in space for young people
	Raise awareness of challenges faced by asylum seekers and refugees and how people can help
	Make better use of green spaces/ nature to build community connection/ cohesion – pop up events/ community days
	Pursue intergenerational initiatives
	Explore a location for an affordable co-working space to facilitate social connection
	Connect more effectively with major businesses in the area to encourage more support for local health and wellbeing projects
	Make better use of empty retail facilities for homelessness/ community information point etc.
	Make better connections with West Bicester social clubs to explore project/ initiatives/ use of facilities

'Community development support on the ground would be brilliant – what would be really useful if there was an agency or organisation which could do weekly visits or phone calls and help with the basics: completing forms, paying a bill, things like that.'

'People out there on the ground talking to people would make a difference.'

'If you deal with concerns and anxiety and anxieties about benefits, debt, housing, immigration, whatever it is, then people will not have so many physical symptoms such as stomach problems, irritable bowel, tummy ache, sleeplessness, nausea, headaches, migraines - and that will reduce the impact on the surgeries.'

'There are major businesses in this area and some charities and the voluntary sector benefit a little from them – my perception is that pressure should be put on them as regards [better supporting] infrastructure, particularly regarding health and wellbeing.'

'[Would like to] have multiple events in the same venue so we can bring different people together at the same time, different generations, and build connections.'

'We do a lot of welfare visits for our residents – there are a lot of vulnerable people out there. We never used to do that, it was usually about antisocial behaviour.'

'People say things like, oh, do you know, before I started coming to the toddler group, I wasn't speaking to anybody all week unless my grandma or my mum came to visit. And that's an incredible success story. What we're doing is impacting people [positively] and the impact of <u>not</u> having this is huge.'

'Bicester west seems a bit forgotten about – I think there are other parts of Bicester getting more investment and lots of changes.'

'The rapid growth of Bicester is a challenge – keeping up with the emerging issues. People often talk about infrastructure, things like GPs surgeries, roads and schools. But as well as that there has to be the social infrastructure.'

'There seems to be a lack of awareness about eating in the right way [we need to] introduce that to families early on and encourage people to cook from scratch.'

'There can just be so much going on in one person… there's addiction, there's the mental health side.'

'Many young people are struggling at school. This might be because schools are reluctant or too slow to look at ways to accommodate their needs of just don't have the capacity to make the changes that are required.'

'Our clients miss out on socialising – they would have better mental health if they had more opportunities for social interaction.'

'How do we talk more to young people? How do we get more young people's voices heard. That's a challenge for us all.'

'Sometimes you see history repeating itself with some families, perhaps low educational attainment and antisocial behaviour as a youth. Then into young parenthood. We do see that pattern.'

'We're definitely seeing the impact of young women and girls affected by this [toxic masculinity]. I don't think there's been an increase in teenage sexual assault and harassment. I think young women and girls having a good understanding now of what's acceptable and not.'

'There's a real increase in young people not being able to really communicate with each other very well in terms of what they're feeling. Young people are losing the ability to structure a conversation outside of being online.'

LOCAL STORIES
'Megan' - 32

I was born in Bicester and now live in Bicester West with my two children and partner. I have seen Bicester change a lot over the years, especially after Covid. People have become more private and less interested in each other and neighbours.

Young people have a really tough time now as there is much less to do than there was when I was growing up. I love music and going to gigs. There used to be much more on offer. OYAP was a regular place that I would visit and go to gigs. We would also record music there and talk about music making. Many of my friends went on to be musicians.

There were also art workshops that would be offered by local artists. This was a great way to learn new skills and to gain confidence. I learnt loads. As you can see from my jacket, I still like sewing!

My children don't have this offer. They like being at home and playing computer games. Youth provision is poor in Bicester. They don't like going out much. I don't think they are very brave about meeting other people.

Many groups are using church buildings now. Churches are good at offering community events but not everyone feels comfortable being in a mostly Christian environment. I found Café 103 after lockdown. This is in the methodist church in town. The sessions are on a donation basis and the people are very warm and supportive. I walk on a stick, and it is easy for me to get to the building. The bus service is really good so that I can get here by myself. My kids don't like coming but it is actually nice for me to be able to come on my own, it's good to have a break.

I do miss going to live music events though. It was fun when I was young and our parents knew we were safe. Now I am worried about drugs as there seem to be more of it about than when I was going out more. I like to stay positive but find it hard at times. But Café 103 helps me stay connected.

LOCAL STORIES
'Maggie' – younger teenager

I live with my mum (who has health issues), in a new build flat. It's close to the shops, doctors and takeaways and I like the nature reserve but it would be good to have different shops and perhaps a museum. The things that keep me healthy are friendships which are important to me, being outside, animals and coming to Nai's House.

There is too much new housing development in Bicester. It's not good quality and expensive. Our flat is very small, I can hear everything from the upstairs flat. There's no ventilation in the kitchen or bathroom and there's mould growing. My chest has been awful and the council don't seem to be interested in doing anything.

People respond negatively to teenagers, like staring at you in shops, telling you not to touch things, being suspicious. They see teenagers gathering and say it's a drugs problem. We would like to be taken seriously like adults. For instance, consultations should include teenagers - why are surveys about housing development or road issues only for over 18 year olds? I'd like more opportunities to talk about issues that affect me.

I had an autism diagnosis years ago. I've been waiting since then for therapy and only just been offered something. I don't attend school. It took ages to put in any support in place and it only works for certain people. They also separated people out with problems, put us all together on one table, we couldn't help each other as we were all behind. There's no support if you're struggling.

CAMHS is the only place for support, there isn't anywhere else. But the staff are overworked and under paid. They underestimate how bad you're feeling and only do something if it gets serious - Its either 'too much' or 'not bad enough'. They need to explore what's causing the mental distress. If CAMHS helped before you're in crisis, Nai's House wouldn't be needed although I'd like to come to Nai's House more often. There also needs to be something for young people out of the education system such as a home education group for people like me and my friends.

Focus Groups

Table 5 Focus Group Attendees

FOCUS GROUP ATTENDEES		
Setting/ group	**Demographic**	**Numbers**
Home Start coffee morning	Female: 20s – 50s	4
Age UK lunch	Male and female: 70+	10
Age UK coffee morning	Male and female: 70+	6
Community Insight Project steering group	Male and female: 30s – 50s	8
TOTAL		**28**

Research question	Key themes
1. What do you like about Bicester West as a community?	People very much felt that the community was friendly and that people interacted well with each other.
2. Do you feel involved in decision-making locally and that you are listened to?	There were mixed opinions – some said no, whilst one person makes her voice heard by attending the relevant meetings. There were also mixed opinions about local Councillors. Some felt that they could communicate with them and others felt that they weren't listened to at all. Comment was also made that there's good info on how to get involved but doesn't mean what you say will be acted upon.
3. What do you do to keep healthy – mentally, emotionally and physically?	Volunteering and helping others were referred to, as was socialising and with friends, neighbours and family. A wide range of groups and activities was also mentioned, including walking, gardening, arts and craft, reading and going organised groups (such as those offered by Age UK).
4. What kinds of things are most challenging for you living in Bicester West that impact on your health and wellbeing?	There were mixed comments on access to local surgeries and appointment timings. Some struggled to get doctor's appointments while others did so with relative ease. Cost of living was a prominent theme, with many seeking out free activities. The need for groups for toddlers and older children which were free of charge was expressed. There was also a feeling that too many groups and activities were located in the town centre and that groups sometimes do not feel welcoming when you first attended. For some, a lack of mobility meant they had getting to community events etc. The closing of the crossing on London Road was also noted, and the concern it would cut Bicester in half and make areas difficult to access
5. Do you feel safe in the community?	The consensus was 'yes'. However, some anti-social behaviour was mentioned. An increased police presence was noted.

	Generally, in their immediate area, people felt safe and that their neighbours were friendly. However, some did not feel safe at night and there were also concerns about being knocked over by e-scooters and bikes.
6. What groups, services, organisations, community spaces do you find particularly helpful to your health and wellbeing?	Multiple groups were mentioned: • Term-time toddler/baby groups (the free ones) • Gatherings in the park during the holidays • Stay and Play groups • Age UK lunches and coffee mornings • Widows group • Craft club Other resources that support health and wellbeing included good transport links, socialising, and a good community feel and peaceful location. Green spaces were also positively viewed, as were paths in the parks and the Blue [walking] Lines.
7. What helps you and your family maintain healthy habits around eating, and getting out and about?	For food, lower costs for healthy food would help. The availability of healthy snacks for children at stay and plays etc. was beneficial, while the groups themselves encouraged people to socialise. Good transport links were also seen as a useful encouragement to getting out and about.
8. Do you think the community would benefit from additional projects and ideas to support health and wellbeing	A range of ideas were suggested: • Funding and facilitation for a youth group/club (for older children) • More food banks or help with food costs • More groups for older people to attend • A walking group • A helpline which offered 'comfort calls' • Mindfulness sessions • T'ai chi and (seated) yoga • A Bank Club: where could be helped with their on-line banking or representatives from various banks could come to the area and meet at a venue once a month to speak to local residents A need for more benches was also expressed, as was more groups being held during the day rather than in the evening.

9. Would you be interested in joining with others to work on projects to support health and wellbeing?	There was a range opinion offered. Some were keen, others less so, preferring others to lead. Some were already involved in groups.
10. What do you think would encourage more people to take part in health and wellbeing initiatives?	Comment was made about the need for more funding for groups. Assistance was also needed to get new things going and connect with people.
	More and better advertising for what was currently taking place was mentioned, as was making better use of community noticeboards and leafleting.

SUPPLEMENTARY QUESTIONS FOR LOCALLY ACTIVE COMMUNITY GROUPS, AGENCIES, AND ORGANISATIONS	
11. What works well in getting residents involved in projects and initiatives, and what doesn't (barriers to involvement)?	Hyper-local advertising strategies: **'by prioritizing an area, we can get more people to come than we would have if it was wider advertising.'**
	Making things free, or cheaper was a strong theme: **'I think that really is really helpful to families, especially if they're on a low income.'**
	Accessibility was felt to be a concern and it was important to reduce barriers to encourage people to attend. This could be facilitated by, for example, running events in cooperation with others, such as schools. This would make it easier for parents to get their children there and also allow contact to be made with adults: **'You can then talk to the parents while their kids are engaged in the activity.'**
	Physical accessibility was also noted as a concern, especially for less mobile older people: **'the more mobile you are, the easier it is, the less mobile you are, the less options there are.'** However, the Ability Bus was seen as an excellent asset.
12. In terms of the discussion and design of community-based projects and initiatives, what are the ingredients for success in the long-term?	Getting volunteers can be an issue *for some*. Home Start noted they have none in West Bicester. **'We do have families that we support there, and a reasonable amount of referrals coming from that area, but no volunteers ever come forward.'** However, getting volunteers is not an issue for other organisations.
	Funding and financial sustainability is an issue. There is a tension that comes from knowing the funding is not long term: **'some community groups that I've worked with where they see like they tend to see, you know, funding**

coming in and then and then sort of realise that it's not here for them in the long run. And then they sort of like, then steer away and then don't tend to engage and trust anymore.'

The need for good connections between groups/ activity: **'It's about linking up and really having an awareness of who is actually helping those people in that area because there's so much in Bicester. And some of its connected and some of it's very disconnected.'**

Affordable locations for community groups – there are empty locations that could be used. Hirings costs can be costly, especially for newer groups. **'There are a lot of organizations that have approached me to see if I know anywhere that they can go. And I think that is a real problem. There are lots of empty shops and things, but charities can't afford them. Some charities are using community centres, but they really want somewhere permanent. And there just isn't.'**

The importance of local networks was also discussed and **'the quality of networks depends on who you are and what you're doing.'** It was felt that existing networks are good and **'maybe we just need to do some work on expanding some of the existing networks or broadening them out a bit.'**

13. Have you noticed any cost-of-living impacts affecting residents locally?	There was general consensus that the cost-of-living crisis is causing problems for local residents and that there are a lot of people with debt. Financial concerns were also felt to be compounded by the benefits system**: 'there are a lot of people trying to navigate the benefits system with the DWP [Department of Work and Pensions]. It's really difficult.'**
14. Do you have any other observations about health and wellbeing in Bicester West and how it may be improved?	Multiple concerns were raised: **'There's just such a lot of things going on really [in terms of Health and Wellbeing challenges].'** At the same time, the level of need meant, **'It is increasingly difficult to know where to signpost people for the particular support they might need, such as mental health, because all those sort of services are really stretched. There's a long wait for everything.'** The need for more mental health support for young people in particular was mentioned. In addition, **'we're seeing**

children with additional needs or neurodiversity's coming through and not being able to get help and support with that as well.'

Mental health was also related to social isolation, which was felt to be not only concerning with regard to older people but also for young families.

Another key discussion point was accessing health services/ making GP appointments etc. Difficulties in navigating the appointments system was noted, especially utilising online systems: **'We have a bit of transition going on with older people.'**

I have lived in the area my whole life. I have always felt safe during the day and I'm happy to walk around, however I would not wish to venture out alone at night. It feels unsafe as people park anywhere and are often loitering in their cars which makes me uneasy, especially now that my partner has passed away. It took us 10 years for the council to listen to our pleas for double yellow lines on our roads, although these are rarely adhered to.

The transport links are very good, which makes it very easy for me to get around. All the amenities that I need are within close proximity or I can easily get to via public transport. I fear that the bank that I use will close though and that would make it very difficult for me to do my banking locally.

I go to a lot of the organised groups now. They help to keep me in a routine and encourage me to meet new people. I attend a few of the Age UK groups and also go to many of the talks and activities organised by U3A and Evergreen. I go on a "health walk" every Saturday with another group. I find it helps to keep busy. I also have my dog, so I often go to Garth Park which is lovely.

I do find, as a single person, it more difficult financially as I only have one pension coming in. The food costs are high. The groups that I attend help to keep these costs down a little, but it would be nice to have more events that are free.

Also, with some of the new groups that I attend, I find it hard to integrate as many already have their own groups of friends. It would be nice to have a "greeter" person to help to introduce new people in, like they do have at the Age UK coffee morning.

Children and Young People: group discussions

Table 6 Group Discussion Attendees

GROUP DISCUSSION ATTENDEES		
Bicester School	Male and female: 11-15	8
Nai's House	Females: 15-16	3
TOTAL		**11**

Summary of findings – children and young people

Research question
1. What do you like about living in Bicester West?
Positive comment was made about the **friendliness of the community** and the **proximity to the centre of town** shops, health services and takeaways. There was also enthusiasm about the availability and value of **sports and activity groups** (such as football, rugby, dance, and scouts). *'It's a close community very friendly. Where I live everyone knows each other really well.'*
2. What's not so good and what could be improved?
Green spaces were the focus of much comment. Some felt that the existing green spaces were an asset while others felt that there were **not enough of them or that they could be improved and better utilised**. Comment was also made about the cutting back of wild spaces in order to deter drug use, with negative effects on nature and the availability of quiet places. *'They don't let nature flourish. Now it's harder to find quiet spaces without people around.'* *'More people would be out playing if there were more green spaces. I would like to use the green spaces for family time, picnics, walks, football, and rugby.'* There was a sense that while there were good facilities like playparks for younger children, there was **little for older children and teenagers**. Comment was also made about **younger children feeling intimidated** in the presence of older children, and some evidence of bullying. There was a general feeling that **more clubs and places to hang out** would be beneficial, but not necessarily organised activities. *'Having older children in the park makes us a bit vulnerable if they say something I don't know what to do.'* *'Don't force teenagers together, we don't want to 'do' a lot, just be together.'*

The subject of housing development was raised, and the perception that there is much **expensive housing of poor quality** being built. The **poor state of repair of housing** and its negative impact on health was also referred to.

'I can hear everything from the upstairs flat. There's no ventilation in the kitchen or bathroom and there's mould growing. My chest has been awful.'

The younger cohort were vocal regarding **vaping**. They did not like being near people vaping and were aware of the negative health implications of vaping (and smoking). Some had seen **drugs being consumed** in public and there was a sense of anxiety about this.
'If I see someone with drugs I cross the road.'

'Parents with young children shouldn't smoke it's not healthy for anyone. There are kids smoking and vaping.'

Social media was also discussed. The younger cohort had less access to phones, were less active on social media, and mentioned the potential negative impacts of spending too much time online and how it can lead to a pressure to conform.

'Social media stops people from achieving their ambitions and can lead to really serious issues such as depression.'

'When people use social media language it can be repeated in school and people start to think like others they hear or see.'

For the older cohort, there was less disapproval of social media, with some seeing it as a positive communication tool and important to connecting with other people and avoiding isolation. At the same time, some were critical of social media, especially the negativity it could generate/ express.

'If you're not on Facebook you don't exist'

3. Do you feel that you are listened to and have a say in what affects your life?

There was a mixed response. The younger cohort were more positive, feeling they were listened to at school and had a say (as members of the school council).

The older cohort felt that teenagers are viewed negatively and with suspicion by many people when they are not doing anything other than being themselves – there was a sense of being misunderstood.

This older group also felt that they should be included in consultations and asked their opinions more often than they currently are. Some also felt it would be beneficial to have more day-to-day opportunities (not necessarily via therapeutic/ formal means) to talk about the issues that affect them.

'Teenagers get put down. We want to be taken seriously, like adults.'

'They see teenagers gathering and say it's a drugs problem.'

4. What does being healthy mean to you and what kinds of things help you to keep healthy?

The younger cohort in particular mentioned taking part in multiple **sports and activities**. There was positive comment about **being outside and being with friends, and animal-based therapies.**

The topic of **mental health and SEND needs** was prominent. The general observation made was that many people (younger people and older) are struggling with their mental health. Some expressed quite strongly that **more must be done to understand** why this is happening and intervene and offer support at an earlier stage. Comment was also made that **more funding and services are required** – there are long waiting lists for support and this is having negative and sometimes extremely serious impacts.

'A lot of people have anxiety and mental health. Children and parents don't always realise you need space.'

'If CAMHS helped before you're in crisis, Nai's House wouldn't be needed.'

While the **younger cohort were more positive** about the support that school was able to offer those with mental health and SEND needs, the older group was somewhat less so, with some feeling there was **a lack of support and attention to individual needs**.

'Early Intervention support (in school) is good but they need to work with people who are not in school too.'

'At school, they separated people out with problems, put us all together on one table, we couldn't help each other as we were all behind. There's no support if you're struggling.'

Nai's House was clearly *valued extremely highly* as a place of support, with the wish expressed that more resources were available (although there was clear awareness of funding pressures). Some negativity was expressed regarding CAHMS although it was again recognised that the service was under much pressure.

'CAMHS is the only place, there isn't anywhere else. But the staff are overworked and under paid.'

'I've been self-harming and had depression for years. Only got CAMHS help after I'd got really bad. They only do something if it gets serious.'

LOCAL STORIES   **'Archie' - 22**
I have lived in West Bicester all my life.   *Me and my family like to keep active but we don't have a car and get around by walking or taking the bus. We like coming to Home Start and socialising with other parents. We also*

use the parks and play areas but sometimes these are dominated by older children playing football.

Sometimes we go to the indoor soft play at a local garden centre but that costs money. I'd like to have more places to go. When we went on holiday to Bournemouth we noticed how many more activities there were for families.

The cost of living has been tough on us. The baby bank has been very useful for clothes, equipment and milk and we've been given things too. I like the maternity pages on Facebook and the idea that people are helping others by donating things they don't use anymore and helping the environment by recycling.

I'm very aware of what I eat and try to limit unhealthy food like fizzy drinks and keep portion sizes reasonable. I worry about the increase in crime and antisocial behaviour and don't always feel safe. My partner works in a local shop and there is constant shop lifting but the police don't seem to take it very seriously. I'm also unhappy about the [an offensive term for people using drugs has been censored] I've seen in town and in Kings End.

I'd like to see larger, outdoor multiactivity and play areas developed locally and also more attention to keeping public spaces safe and clean (like having more dog poo bins, regular emptying of bins and clearing up broken glass and rubbish).

I'd also like to feel listened to. When I made some suggestions about improvements to communal areas where I live it didn't result in any change.

LOCAL STORIES
'Steve' - 58

I moved to West Bicester 10 years ago. I like my area because it's a small enough place to have a sense of community and I have nice neighbours – we have a neighbourhood forum where we can share things like good plumbers which is really helpful. There's also lots of children around which makes me happy. Though that's also the problem round here – I think there's lots of activities on for children but not much for us older people.

This Age UK lunch is pretty much the only thing I do outside the house now that Silver Threads has shut down (it was such a good group!). But my daughter comes and visits me a lot which is really nice. Her visits and a bit of arts and crafts keep me well.

It's hard to go anywhere because most things are in the centre of town. At least the roads are a bit safer now that the police are out stopping those scooters and things going so fast. I still worry about being knocked over on the pavement though. But we're lucky because Garth Park has good walking paths. I wish there was a walking group for older people though – I think lots of people would really like it. Oh, and benches so we can sit down.

It's hard to find out what's going on. I'm not sure where to look. But I would love it if there were more groups, like a seated yoga or mindfulness group.

Discussion of findings

Introduction

Research themes

The research undertaken explored: 1- the local strengths and assets that support and enable health and wellbeing and; 2- challenges to health and wellbeing and what would help to address these. **128 individuals were consulted across the project**; focus group attendees (39); one-to-one conversations (55); and the community survey (34).

From the totality of research summarised above, key themes, issues, challenges, and opportunities were identified. These are discussed below, while also responding to the final element in the research brief, which was to provide recommendations for further insight needed and/ or actions to take forward from the findings.

### Research and data overview/ limitations

Community First had a three-month period in which to undertake the research. The first weeks focused on introducing the project, building trust with local organisations and residents, and arranging specific research activities.

The objective of the qualitative research undertaken by Community First was to produce in-depth information in order to understand more about the research questions (see appendix 2). However, it is recognised that qualitative research can only provide illustrative information and data, sometimes very personal and perhaps only indirectly comparable.

Despite the shortness of the research window, a key focus was to reach a large number of people via higher-level approaches (shorter one-to-one conversations and the community survey) and complement this with more in-depth approaches (longer one-to-one conversations, personal stories and focus groups). This allowed findings to combine both numbers (of people consulted) and depth, building a richer, more detailed and more nuanced set of findings to support the recommendations set out below.

The age of those consulted was as follows:[9]

Figure 2 Age of those consulted in community engagement

---
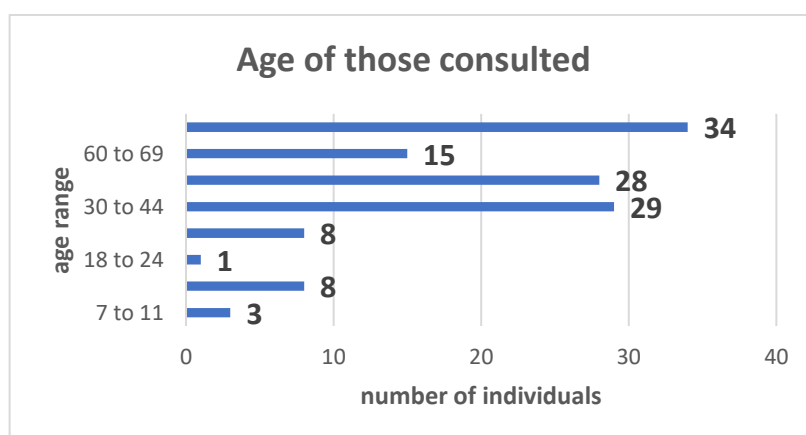
[9] Total of individuals is 126 - 2 survey respondents did not give their age.

As can be seen, the project engaged with a broad range of age groups. 80% of the total number of people consulted were female while 96% were of white British/ other white ethnicity. The remaining respondents were Asian/ Asian British, Black/ African or other ethnic group. Further research focusing on the male voice and younger adults would be useful, as would exploring the opinions of those with other ethnicities and backgrounds.

Local strengths and assets that support and enable health and wellbeing

A range of themes were identified and explored. Key findings are set out here to frame general perceptions and inform the discussion about improvements needed.

These summaries are predominantly derived from one-to-one conversations and Focus Group evidence. However, secondary evidence from the community survey is also presented to further inform the findings – complete survey results are available at Appendix 4**.**

The community and social cohesion

In general, respondents noted that the area was friendly and safe, with nice neighbours – a place where people look out for each other. It was felt Bicester West was a pleasant estate and small enough to be a community. An asylum seeker stated that it was welcoming to refugees and people gave help if needed. 33% of survey respondents agreed that *community feeling* was something they liked about living in Bicester West, while 44% were *somewhat or very satisfied about West Bicester as a place to live*.

Also noted were good area councillors (town councillors in particular were positively mentioned), while there were also useful local forums (related to Bicester in general), such as forums to recommend tradespeople, the Facebook community page, and pages to exchange free items.

Feelings of safety during the day were generally positive, with 73% of survey respondents feeling *somewhat or very safe*. However, at night-time this dropped significantly, when 38% felt *somewhat or very safe*. Feelings of a lack of safety at night-time was noted in particular among older people.

Public realm and transport

The location of Bicester West was positively noted, particularly in relation to location (close to town centre facilities such as shops, GPs and dentists) and good transport links (bus routes into town and Bicester North station. The Ability Bus was viewed as a valuable asset for those struggling with mobility and disability.

88% percentage of survey respondents walked daily, while 73% found it *somewhat easy or very easy to get around Bicester West*, while 58% found it *somewhat or very easy to get from West Bicester to other parts of the town*.

Green spaces and playparks both within West Bicester and nearby (Garth Park and Kingsmere) were seen as local strength/resource. 38% of survey respondents *use green spaces frequently*

and for 50% and 38% respectively, *green spaces and playparks were something they liked about living in West Bicester.*

Good paths in some parks and generally being out in nature were seen as positive for health and wellbeing, as were the blue lines health routes which are marked on pavements (there are several in Bicester as a whole and one in Bicester West).

Local services and amenities, including healthcare and education

There are few local shops and amenities within the Bicester West Community Insight Profile area – a Post Office and two small supermarkets. 46% of survey respondents use these frequently, while for 70% *local shops and services* was something that they liked about living in Bicester West. However, this may partly relate to shops and services in the nearby town centre, given that 60% stated that they *meet most or all of their needs <u>outside</u> Bicester West.*

This latter point is particularly important with regard to healthcare facilities (GPs, community hospital, dentists), all of which are located outside the area (albeit nearby). Local schools were generally seen as good.

Social and community infrastructure

As set out at section *community action, projects, and initiatives* (above) and at appendix 1, there is a wide range of local groups, courses and classes, community sessions, social and support groups, sports clubs, community venues etc. available in Bicester *as a whole* that local resident's access. However, it was also pointed out that many groups and organisations did not start up again after the COVID-19 pandemic.

It was clear from multiple conversations that many people use and valued these groups, sessions and services. Those mentioned as particularly useful were:

- Nai's House
- Home Start
- Foodbank
- Baby bank
- Hygiene bank
- Methodist Church-hosted groups: Café 103 (where other services such as CAB, Age UK are accessible), Open Doors café (offers a free meal using surplus food from the Oxford Food Hub and donations from Bicester Food Bank), and Turning Point (substance misuse service).
- Veterans group
- Multiple clubs and classes: exercise, gardening (e.g. Harvest at Home), bridge, running, walking football, children's sports etc.
- Scouts and Beavers
- Hummingbird Centre
- Library
- Community orchard
- Church gatherings
- Widows group

- MIND group at the Beacon

However, there were relatively few groups and activities available *within* Bicester West. Correspondingly, relatively small numbers of survey respondents accessed groups and activities in the area.

The U3A is based at the Clifton Centre but only a relatively small number come from Bicester West. The Leisure Centre is also based in Bicester West and used by local residents. There are two social clubs in the area which offer entertainment, games, music nights etc. However, these clubs do charge a membership fee.

The main community hub is the West Bicester Community Centre. Run by Lighthouse Church, the centre (recently refurbished) offers a wide range of groups and support sessions, including for older people, younger people (a youth club) and parents/ carers. The Centre has also hosted sessions run by Sanctuary Housing.

Challenges to health and wellbeing and improvements needed

Set out in this section is:

- Further evidence relating to the local assets that support health and wellbeing set out above and how they could be improved.
- Health and wellbeing challenges in relation to specific groups and key themes.
- Specific improvement ideas identified in the research which could build on existing activity and initiatives or to develop new activity.

LOCAL ASSETS THAT SUPPORT HEALTH AND WELLBEING SET OUT ABOVE AND HOW THEY COULD BE IMPROVED

The community and social cohesion

In terms of being or feeling involved in community life, there were mixed opinions. Some felt listened to by local councillors (and found one in particular to be useful) and were asked for their views. Others disagreed and saw consultations as tokenism or felt a minority was making decisions. 85% of survey respondents *disagree/ do not agree at all that they are involved in decision-making*. 76% *disagree/ do not agree at all that their views are listened to*.

The consultation about the Market Square was mentioned – again, some felt this was positive while others felt that the decision had already been made. It was noted that recent changes to local road infrastructure went ahead despite the consultation finding that some people did not want them to happen. Some were also confused by the different levels of local government and who did what: Town Council, District Council and County Council.

For young people, there was mixed opinion about being listened to and consulted – *this will be discussed below.*

As noted above, people felt generally safe though less so at night. There was anxiety expressed about crime and attacks, with many avoiding certain areas such as alleyways, especially at night.

Fear of crime was also noted – a sense of feeling less safe as a result of social media. Some noted public consumption of drugs and alcohol and an awareness of serious crime incidents in the area was also noted. A recent increase in a visible police presence on local streets was welcomed by some.

Older people stated that they were worried about being knocked over by fast scooters and bikes, while others reported that they worry about or have been subject to intimidation and rudeness or verbal abuse by groups of young people.

Young people themselves noted that they occasionally felt intimidated by other young people, usually teenagers, and – again – exposure to public drug and alcohol consumption and vaping.

Comment was also made about the changing social mix in Bicester West, socioeconomic change having altered patterns of employment (focused on the military and ancillary industries) and historically established social and community networks. There was some feeling of a loss of identity and less resident interaction, which is also linked to wider trends, such as people spending more time at home rather than congregating in venues such as the pub. However, it should be noted that Bicester West does have two social clubs, which suggests a continuity of social tradition.

The pace and extent of housing development in Bicester more widely and the resulting increased pressure on (already stretched) local infrastructure was also commented upon.

Public realm and transport

Transport

It was noted that while transport links are good, it could be difficult getting to bus stops and train stations) for those with a mobility issue. Given the proximity, those with mobility scooters could access the town centre with relative ease (notwithstanding public realm challenges – *see below*). And the Ability Bus was an asset to accessibility.

Concern was expressed about local bus services. Services were run by Greyline for many years and with the change to the Oxford Bus Company, some worried that times and routes may be changed.

Public realm and access

Common concerns included: poor parking (emergencies vehicles unable to get through and a lack of traffic wardens); cyclists sharing the same space as pedestrians and concerns (particularly from older people about safety); speeding and traffic; nervousness over electric scooters; and a lack of benches. 44% of survey respondents felt that *increased parking options would be helpful to getting around Bicester West.*

Critical comment was made about the poor state of repair of pavements, especially for those with mobility issues (e.g. using a stick). Also mentioned was the closure of the crossing on London Road, with the concern that it might 'cut Bicester in half' and make areas difficult to access. 44% (again) of survey respondents felt that *improved pavements and walking routes would be helpful to getting around Bicester West.*

Despite improvements needed, it was felt that the local foot and cycle path networks were good (some wanted more cycle routes) but they are much less used when it is dark as streetlighting has been cut back. It was noted, specifically, that this was putting people off coming to Bicester Community Support Centre in the winter.

Improvement needed can be summarised as the introduction of more benches, improved upkeep of pavements and paths, and improved parking.

Parks and green spaces

These assets were generally viewed favourably. However, there was a sense that their **upkeep and cleanliness could be improved and that bins could be more regularly emptied, litter removed etc.**

There was a feeling from younger children that some parks were sometimes occupied by older children, who intimidated them and/ or prevented them using the facilities. At the same time, some parks were limited to use by younger children, with older children having have few playpark alternatives nearby. The state of repair of some parks was also criticised (broken equipment, broken glass etc.).

It was also clear from conversations with young people that as well as valuing these areas as quiet spaces away from others, climate and environmental concerns were also important. They would like to see more **ecologically-aware management of green spaces**: no weedkillers, protection of trees, and undertaking less cutting back so nature is allowed to flourish.

In general, there was a sense that **West Bicester parks and green spaces could made to feel more attractive and welcoming places.** In addition, green spaces could be **better utilised for community activity, for example pop up activities and community events such as a local fete, which would benefit social cohesion.**

Local services and amenities, including healthcare and education

Healthcare access

A prominent concern in resident one-to-one conversations was access to a GP and other healthcare services such as an NHS dentist and hospital services. In addition, 44% of survey respondents stated that *poor access to healthcare when needed made it more difficult to look after themselves/ their household*. Healthcare professionals recognised the challenge and noted it was a national issue, with increased workloads for GPs and a lack of available funds.

There was much comment that it is difficult to get a GP appointment or access an NHS dentist. Online-based systems could be intimidating and off-putting for some. 46% of survey respondents found it *difficult to access the health centre or GP*, while 36% found it *difficult to access a dentist*. **Means to meet the needs of those disadvantaged/ intimidated by current booking processes should be explored.**

Concern was also noted about the loss of the minor injuries unit at the community hospital and the lack of a local accident and emergency department. There was a suggestion that both be (re)considered, particularly in the light of Bicester's quickly growing population.

Access to community groups

Comment was made that access for people with disabilities and hidden disabilities to activities, groups and venues can be problematic. There can be a sense of being judged which creates anxiety and puts people off attending. **A local training and awareness raising campaign would be useful, with a focus on making existing activities etc. more welcoming.**

Social and community infrastructure

A range of issues, challenges, and opportunities were raised and discussed in this regard, many of which are overlapping and mutually informing:

Funding, resourcing, and need

The key challenges identified for community groups and organisation were:

- **Lack of volunteers**: not enough to go around.
- **The constant fundraising cycle**: time-consuming and very tiring for already stretched individuals, diverts resource from service delivery. There were different opportunities so it was difficult to know about all of them and some groups lacked the knowledge of how to make a strong funding bid.
- **Short termism**: short term funding equals short term projects. A lack of long-term funding creates tension, could lead to groups closing, and residents losing trust in a group/activity when it disappeared.
- **Funder pressure for new projects**: what was <u>more</u> needed was core funding for activities which have been proven to impactful.
- **Increased demand for services without increased funding (increased pressure on the local VCS sector)**

These were prominent issues for many community-based (or led) groups and organisations. It is clear that most are stretched in terms of available time and financial resource and, for those who work with them, the volunteer pipeline is drying up.

To help tackle the volunteering challenge, a **Bicester volunteer drive could be undertaken**, with specific strategies to reach different parts of the community (language and cultural outreach) and different age groups. Such a drive could consider ease of access for volunteers, flexibility of role, why people would want to become volunteers (individuals shared examples of their volunteering and said it contributed to their health and wellbeing), and time commitment. It was also commented upon that there was more work to be done to promote the idea that everyone was part of a thriving community and therefore had a stake in it, rather than it just being a place to live and work.

There were excellent examples of training, supporting, and developing volunteers which could be shared and a volunteer drive could also link into the Volunteer Vision work undertaken by Oxfordshire Community and Voluntary Action and Community First Oxfordshire. Oxfordshire

Volunteers could be promoted for volunteers to find positions and for groups to advertise. OCVA are also able to assist with fundraising support.

Networking and communication within the local Voluntary Sector

There was mixed comment regarding collaboration and networking between organisations which are active in the community. Some felt it worked well and others less so. There are also various local forums such as Healthy Bicester, OCVA Community of Practice, and others, such as a reinstated charity network for charities and support organisations. Different organisations attended different ones and found them useful.

However, despite the fact there was good (sometimes very good) collaboration between certain organisations (notably those which have worked together for a long time), others have struggled to develop effective relationships. Therefore, some organisations appear better connected than others and not all organisations are aware of all forums. In general, connectivity and networking across the VCS as whole could be improved.

The Community Insight Steering Group could **very usefully map all local networks and discuss how to improve awareness of and widen access to already existing forums or use the steering group itself as a general forum**. This may have positive impacts on the design of shared projects, facilitate shared training, and build new connections both within the VCS and with statutory etc. services and providers.

Encouraging more residents to take part in health and wellbeing activities

A number of potential solutions were identified:

- **Keep it simple**: involve everyone and let people do what they want.
- **Offer free activities and taster sessions.**
- **Make it resident-led**: find out what people want, don't do it to them.
- **Use a befriending or buddying system to support new attendees.**
- **Extend on the ground community development support:** a consistent, known face in the community, building connections and relationships with people and home-visiting
- **Accessibility:** consider all barriers. These could be cost, access, transport (especially for those with limited mobility), timings (e.g. family commitments and very young children at home as well as working).
- **Intergenerational activities:** bring different age groups together to foster social cohesion and connection

In addition, 83% and 74% of survey respondents respectively stated that *free or reduced cost access to events and activities* and *taster sessions* would help improve health and wellbeing in Bicester West. 47% thought *more community-led activities* would improve health and well-being, while 51% supported *activities that bring together people of different ages*.

Communication

The need for improved communication and publicity in order to spread the word about community groups, sessions, activity etc. was noted in multiple conversations. It was also clear

from resident one-to-ones that some were more aware than others about what community activity was taking place. Also, 69% of survey respondents *did not agree at all/ did not agree* that they know where to get information about Bicester West.

However, many groups don't have the resources to cover all the bases/different communication formats and it can be a challenge to find volunteers to do managerial/administrative work such as communications.

One option could be to **promote Live Well as the online resource for communication (to groups and residents), with another body (perhaps the Town Council) producing the same as a paper version**. The **Garth Gazette** gets delivered to every household three times a year and **could include a directory of groups and activities**.

Various means of communication were referenced but the overall sense was that there was no single solution – multiple methods should be used and it is important (as noted above) to tailor the method/s to the audience/s. A holistic community communication strategy could be very usefully discussed and developed, combining a calendar, noticeboards, leafleting, and technology (websites and social media) and mapping of opportunities to share information by word of mouth.

Venues, access, and inclusivity

Within Bicester as a whole, comment was made that there was a lack of venues for community groups to meet. They could be expensive, had problems with access, or did not offer enough storage. Some groups did use (and are happy to use) community centres and churches to host their activities, others would prefer new or dedicated spaces.

It was noted that there are lots of empty shops and buildings in Bicester. The steering group could – perhaps **via Bicester Vision** - **explore using these as temporary (or permanent) community spaces at reduced rates.**

Regarding Bicester West specifically, comment was made that the community lacks a focal point, such as a café, where people could come together. However, there is limited available real estate to make this feasible.

There may be other options in this regard, such as **seeking connections and conversations with the two West Bicester social clubs to explore joint community projects and initiatives and/ or use of club facilities. There may also be additional opportunities with regard to the newly refurbished West Bicester Community centre.**

HEALTH AND WELLBEING CHALLENGES: SPECIFIC GROUPS AND KEY THEMES

SPECIFIC GROUPS

Children aged 0-5 and new parents

Other than a parent/ carer group at West Bicester Community Centre, all services were in town centre locations. Conversations suggested the following activities and groups were most useful:

term-time toddler and baby groups (especially the free ones); gatherings in the park during the holidays; Stay and Play groups; the play area at the Blue Diamond Garden Centre; and the Baby Bank (which offers, for example, clothes, formula, and equipment like pushchairs).

Overall, provision was quite good for new mums and babies (including a breastfeeding support group and a new mum's support network). However, apart from Home Start there were few groups which were cost-free (or by donation). It was suggested there **isn't much to do with children other than parks and play areas,** which was likely related to an **identified need for free groups for toddlers and older children.** In addition, an additional challenge was **ensuring consistency in service across holiday periods**. Home Start does not run in school holidays and while there are playschemes they can be cost-prohibitive**.**

There was some concern expressed about health visitors being busy, which makes the community-based support for young children and families offered by groups such as Home Start and others important. **Increased resource for such services and improved accessibility to health visitors would allow more people to be supported.** This would appear particularly important given comment that young families could be isolated.

Comment was made that toddler and baby groups were a chance for parents to get together and also allowed people from across the community to mix and get to know each other. There is therefore an **opportunity to use parent-carer groups as a springboard for other community initiatives/ outreach**.

Children and young people

As noted in young people focus group summaries, there was a mixed response as to whether they felt that their opinions were sought or listened to. The younger cohort were more positive, feeling they were listened to at school, while teenagers felt they were viewed negatively and with suspicion by older people – there was a sense of being misunderstood or that they were 'up to no good'.

In general, young people would welcome more opportunities to talk about the issues that affect them. In many locations across Oxfordshire **Youth Councils are being developed – a similar initiative may be beneficial in Bicester/ Bicester West, in partnership with schools and the Town Council.**

While the County Council (Targeted Youth Support) and Lighthouse Church (youth club at West Bicester Community Centre) offered support for young people, these resources were spread very thinly. A regular observation across organisations and residents was that **more activities and groups for older children/ teenagers were needed**. Such a lack of social, recreational etc. opportunities are likely contributing to issues of anti-social behaviour involving young people which were noted in conversations. It was suggested that a **drop-in space would be very useful**. The younger cohort would prefer a space with adult supervision, while the older cohort of young people were more reticent.

There was also concern expressed by the younger cohort about the levels of vaping and smoking they have witnessed both with young people and adults (the consumption of drugs and alcohol was also mentioned). Some had seen children as young as 10 vaping and comment was also made about lots of empty vapes on the floor near Bicester School. Vaping therefore combined

health and environmental concerns and there would be value **in more information/ awareness for young people about vaping and its different impacts.**

Young people's mental health was a significant topic of concern – *this will be discussed below.*

Older people

Several health and wellbeing challenges have been noted in this report, such as the accessibility of healthcare, mobility and transports, and community safety. However, other challenges were also mentioned.

With regard to healthcare, it was noted that Bicester West has seen a higher-than-average admissions for falls. The Integrated Neighbourhood Team/PCN (all three surgeries in Bicester) works with the frail elderly who may be housebound, those who are at risk of admission/ who have just been discharged or have complex needs (in partnership with local groups such as Age UK). This also supported some patients who may find it difficult to access primary healthcare due to digital access or a lack of transport. However, an ageing population and the increasing burden of chronic disease, was a challenge for primary care due to issues with funding.

Several issues relating to digital exclusion were mentioned, including difficulties in navigating online surgery systems and banks moving to online services. For many, the reduction of in-person services and support was a source of anxiety, as was the closing down of much-valued community groups such as Silver Threads.

Specific suggestions for new activity for older people included games groups, swimming sessions for the elderly so that people can swim at a leisurely pace, and seated yoga, as well as a walking group (it should be noted that local health and wellbeing walks are offered in Bicester via the Ramblers). Volunteers/ staff with the specific task of greeting people attending groups was also suggested, in order to offer support to the less confident (as was a buddy system, as referenced above).

Additionally, there is a very wide-ranging offer of activities that promote wellbeing for retired people run by the University of the Third Age (U3A) which is very active in Bicester and holds regular events in the Clifton Centre (in West Bicester). There would be value in promoting these more widely to West Bicester residents

Other themes such as the cost of living, loneliness and isolation will be considered below.

Those with special educational and neurodivergent needs

In research conversations, several organisations noted that they are seeing more children and young people with additional needs or neurodiversity who are not able to access help and support.

Young people also discussed these needs. As recapped above in field group summaries, some expressed quite strongly that more must be done to understand why more and more people had these needs and stated that intervention and support was required at an earlier stage. In addition, more support was advocated for those not attending school, such as home-based

Page 53

Version No: 1st edition Issue date: June 2025
THIS DOCUMENT IS UNCONTROLLED WHEN PRINTED.
The electronic version of this document is the approved and most current. Any printed version is uncontrolled and may not be current. You can read the current, controlled version of the Bicester West Community Insight Profile on the Oxfordshire Insight website.

study groups. The argument was strongly made across the consultation that **more funding and services are required for SEND support.**

Regarding schools, the younger cohort of young people were more positive about the support offered to those with mental health and SEND needs. The older group was somewhat less so. However, it was felt that pastoral health managers for each age group at secondary school were helpful to talk to, as well as form teachers.

It was also suggested that while a lot of young people have anxiety and mental health issues, friends and family do not always realise that what is often needed is space. The availability of a space at (Bicester) school where young people could go to read and be quiet was seen as helpful.

CROSS-CUTTING THEMES

Several prominent themes and challenges in the community conversations were also discussed:

Cost-of-living

It is clear from summaries of one-to-one conversation and focus groups summaries that the cost of living is clear challenge.

Younger individuals, families, and older people have been affected by rising prices, inflation, and energy costs, although some have been affected more than others. As an example, when researchers spoke to people at a Home Start session, many were attending the group because it was the only one in the area that was free. 44% of survey respondents stated that *(lack of) income made it more difficult to look after themselves*.

More widely, multiple organisations noted that many people were struggling with debt, sometimes caused by the cost of living and sometimes by bureaucracy slowing down benefits payments. This impacted health and wellbeing and family life. Some people were taking on extra work at nights and weekends as they needed the money, while looking after children the rest of the time. The recent significant rise in Thames Water bills[10] was also mentioned as an extra challenge, as was the loss of the winter fuel allowance. It is clear that cost of living is a prominent driver of anxiety for many residents.

In addition, conversations with Sanctuary Housing, in particular, noted that many families (especially younger ones) struggled with household budgeting, housing upkeep, and managing benefits. **Life skills support sessions could be a useful means to mitigate the impact of the cost-of-living crisis.**

Healthy eating and food poverty

Several conversations explored the ongoing need to support some individuals and families with healthy eating strategies (meal planning, cooking from scratch, avoiding junk food etc.).

---

[10] Average metered bill increases for 2025/26 were 39%. Anecdotal evidence suggests some bills increased by 50% in the Oxfordshire area. https://www.thameswater.co.uk/media-library/home/help/billing-and-account/understand-your-bill/statement-of-significant-change-2025-26-charges-schemes.pdf. See p. 3.

Local organisations have undertaken healthy eating initiatives. The Food Bank produced a recipe book[11], the Community Fridge and Food Bank held a cookery course (where people were given the recipe book and a slow cooker) and the local Stay and Play groups offer snacks of fruit and veg for the children.

The number of local takeaways was also criticised and the sense that this contributes to an unhealthy eating culture, particularly in relation to children and young people. It was felt that **school-based healthy eating, cooking, and nutrition programmes could be beneficial in instilling better habits**.

However, it was also clear that affordability of healthy food was a problem for some, with the Food Bank noting that people often vented their frustration about food prices. Food poverty combined with other cost-of-living pressures and was driving a **need for more food banks to support those in need.**

Housing and local services

Housing-related concerns were regular topics of conversation. Those working for housing associations noted a growing vulnerability amongst tenants. They were undertaking a lot more welfare visits than used to be the case. There was also a wider sense of hidden need. Relevant here was the suggestion noted above regarding **on the ground community workers/ connectors, offering pastoral support, links and introductions to community groups, and signposting advice (on multiple topics).**

Also discussed, was larger houses being used as Homes in Multiple Occupation, with some people experiencing overcrowding. There were additional challenges with the vulnerably housed and the anxiety this could create, including refugees in temporary housing waiting for permanent housing. 17% of survey respondents stated that *problems with their housing situation was making it more difficult to look after themselves or their household*.

For those working with families, there was also concern expressed about the state of repair of housing and issues of overcrowding. 50% of survey respondents were *somewhat satisfied/ not satisfied at all with access to social housing*, while 32% were *somewhat satisfied/ not satisfied at all with the state of housing repair.*

Mental health and isolation

Mental health, loneliness, and isolation were frequent reference points across all demographic groups in one-to-one conversations and focus groups.

In general, there was a sense that mental health had deteriorated since the pandemic and had been compounded by the cost-of-living crisis. 25% of survey respondents stated that the *pandemic had a somewhat or very negative particular impact on their mental health*. One interviewee talked about a 'pandemic of anxiety'. Isolation was particularly referenced in relation to older residents and some social housing tenants, but also with regard to mothers and

---

[11] Healthy eating on a budget, which also includes meal planners – this has been adopted by CDC.

carers looking after families at home. It was also suggested that for some older residents there remained a post-pandemic reticence to leave their homes.

Positive comment was made that there are multiple groups and individuals trying to improve the provision of mental health support. For example, it was felt that the support provided by MIND for children and young people across the Bicester GP practices had been very useful (there remained much demand). In addition, Citizen's Advice also run Community Health & Information Points (CHIPS) across Bicester which try to tackle, amongst other challenges, the underlying social causes of poor mental health. Given the demand, initiatives to **extend community-based drop-in mental health support could very usefully be explored.**

Much comment was made in relation to young people's mental health. It is commonly and widely felt that there has been a decline in mental health for young people since the pandemic and that the situation was getting worse. For example, Nai's House, which works on suicide prevention and wellbeing with those aged 5 to 30, currently has 100 guests (clients) and has a further 200 people on their waiting list.

Common challenges were social anxiety, compounded by negative social media experiences/ pressure, mental health and wellbeing challenges issues in the wider family, and neurodivergent needs (the latter is discussed above). This led some to feeling unable to attend school, which could have additional impacts. More serious mental health impacts, both potential and actual can accrue, as the work of Nai's House makes clear.

Various organisations are undertaking much valuable work in supporting young people's mental health and wellbeing, building confidence and reducing anxiety etc., as well as encouraging more physical activity. However, as with the community in general, **given the level of demand, more support is needed for young people and their specific requirements, particularly with regard to early intervention.**

Integrally associated with this, importantly, were the suggestions made above regarding meeting the wider needs of children and young people, especially **ensuring that the voices of children and young people is heard and their concerns and opinions genuinely reflected in decision-making and in the design of services and activities which affect them.**

Recommendations

Recommendations have been clustered by key themes explored in the discussion of findings in previous sections.

It should be added that many of the recommendations should not be viewed or discussed in isolation: there is much overlap in theme and content, and discussions should emphasise the need for a holistic, strategic approach and design.

This discussion and recommendations set out below do not exist in a vacuum. While much has been identified in regard to community needs, wider and more deeply rooted long-term socio-economic indicators and the challenges of the current fiscal climate must also be recognised. As clear from the Data Profile for the Bicester West Community Insight Profile, the community has significant socioeconomic issues and challenges across a range of indicators, many deep-rooted and structural.

In addition, while the value of community-based activity being undertaken in Bicester West and Bicester more widely is evident and potential initiatives to support, widen, and deepen volunteer and community-led activity have been identified, there is only so much that these groups – constricted in so many ways by funding, time, and the pool of available volunteers – can continue to achieve and deliver, and be expected to achieve and deliver, in a context which rightly makes a virtue of voluntary and community-based activity but often does not provide the resource to maximise the potential of that activity.

Healthcare, access, and inclusivity

Recommendations	
1. Access to healthcare: discussions to explore improvements to local services	Community steering group to seek discussions at a strategic level with service providers to explore solutions to key issues. These include: - Improving appointment systems to meet the needs of older residents/ residents with learning difficulties who struggle with or are intimidated by with online systems. This could be working with The Bicester Health Centre/ Integrated Neighbourhood Team and an initiative around digital skills (as mentioned above). - More availability of health visitor support in the community, including more community-based services to help meet needs where practicable.
2. Community-based mental health and associated health and wellbeing initiatives	Community steering group to discuss improved support, including: - Investigating additional funding to provide extended support services. This may include: one-to-one and group support sessions at community venues (including schools); informal drop-in support at set

	times in different venues and offering workshops to existing groups.
	- Exploring the possibility of extending successful (and in-demand) young people's mental health support offered by MIND.
	- Positive promotion of community services and their capability to counteract negative media publicity.
	- A tailored strategy for support for young people, co-designed with young people.
	- Further developing arts-based initiatives and opportunities to support health and wellbeing.
3. Additional support for SEND and neurodiverse needs	Community steering group to seek discussions with key partners on: - Improved and extended community-based support for those with SEND and neurodiverse needs (including parents and carers), including setting up new groups for those outside of the education system.

Community and integration

Recommendations	
1. Develop a holistic, Bicester-wide communication strategy	Community steering group to discuss: - Improving promotion and visibility of existing activities and groups. - Sharing communication resources. - The most effective ways of reaching community and target groups (hyper-local approaches). - How to achieve economies of scale regarding publicity and outreach and consider utilising Live Well Oxfordshire and the Garth Gazette or similar. - Using parent-carer groups as a springboard for further community engagement and integration and building awareness of other community initiatives.
2. Extend community development worker support	Community steering group to discuss: - Totality of available community development support - Opportunities to join up initiatives and help facilitate improved links between local organisations and agencies, build bridges with residents (especially those at disadvantage) etc. - Possibility of new community connector/ community development resource.
3. An inclusivity and access awareness campaign	Community steering group to discuss: - A local training and awareness raising campaign, with a focus on making existing activities etc. more

	welcoming to all, but particularly those with disabilities (which may be hidden). - Explore how best to facilitate intergenerational connection.

Supporting community-based groups and organisations

Recommendations	
1. Improve voluntary sector joint-working and networking	Community steering group to: - Explore ideas for community activity suggested by the research and how to potentially deliver. - Map local networks and discuss how to improve awareness of and widen access to already existing forums (or use the steering group itself as a general forum). - Map existing activity to identify gaps and crossovers in key themes, complement existing activity, avoid duplication, identify new provision etc. - Facilitate joint-activity (potentially theme-based steering groups) and funding bids - Explore common themes, challenges, opportunities and solutions (e.g. volunteering, safeguarding, training)
2. Seek discussions to explore or extend community-based usage of empty stores, green spaces, and existing community venues	Community steering group to work with local partners to: - Explore making empty stores/ properties available for community activity/ multi-purpose community hubs. - Explore opportunities for extended use of the newly refurbished West Bicester Community Centre. - Develop links and initiate a dialogue with the two Bicester West social clubs to explore use of these venues for community-based support/ develop joint projects. - Discuss opportunities to make better use of local green spaces for community projects and events.
3. Improve grant application processes and explore longer-term funding	Community steering group to work with local partners to: - Discuss ways and means to simplify grant/ funding application processes and coordinate the promotion of opportunities. - Extend 1-year funding agreements to multi-year arrangements. - Encourage those with little fundraising experience to seek support from OCVA or others.
4. Explore funding opportunities to support	Discussions with Town, District and County Councils and Housing Associations to explore sources and levels of available funding (for example, Section 106 and future Community

extended community action	Infrastructure Levy developer contributions, and the use of other funds). Develop more links with the private sector (e.g. Bicester Village and other large companies based in and around Bicester) to discuss how they can contribute to health and wellbeing initiatives locally.
5. Launch a Bicester Volunteer Drive	Discussion between local partners using existing networks to launch a volunteering drive and/ or coordinate/promote the use of existing initiatives such as Oxfordshire Volunteers.

Community action: meeting identified needs

Recommendations	
1. Additional support for young people and improved engagement	Community steering group to discuss improvement to engagement with children and young people and additional resource, including: - The setting up of a Youth Council, in partnership with key local stakeholders such as the Town Council and schools. - More youth workers, to provide additional support sessions based on discussion of needs with young people. - Identification of a potential 'safe space' for young people to meet. - Working with schools and other stakeholders to provide more information/ awareness for young people and their parents about the harms of smoking, vaping and substance misuse.

Community action: improving resiliency and developing skills

Recommendations	
1. Develop a programme of community-based Life Skills sessions	Community steering group to discuss resourcing and running a regular programme of community-based support sessions. These might focus on, for example: - Household budgeting. - Cooking and nutrition. - Energy saving. - Benefits advice. - Parenting advice. - Mental health coping strategies/ mental health first aid

	- Personal development – confidence building/ developing resilience etc. - Working with schools to roll out healthy eating, cooking, and nutrition programmes for children and young people. Efforts should also be made to explore how relevant sessions could be led by local residents.
2. Extend befriending initiatives	Community steering group to discuss opportunities to extend existing befriending support to reach more isolated residents and encourage access to community support – perhaps via additional on the ground community development resource (*see above*).

Public realm, environment, and transport

Recommendations	
1. Local environment/ streetscape improvement discussion	Community steering group to seek discussions and link into existing projects with relevant partners regarding: - Improvement of litter issues (such as regular community-led litter picks). - Improvements to management of verges, trees, open and green spaces, community gardens etc. - Introduction of new benches in West Bicester and the town centre (potentially via a community art project). - Improvements to state of repair of pavements and roads.

Appendices

Appendix 1 – Local Groups, Organisations and Assets

Appendix 2 – Research Questions

Appendix 3 – Bicester West Community Survey

Appendix 4 – Bicester West Community Survey Results