

# CALDECOTT COMMUNITY INSIGHT PROJECT: MAY-JUNE 2022

## **Annex 4**

### **Community and Young People Surveys**

# Health, Wellbeing, and Healthy Eating in Caldecott, South Abingdon: Community Survey

MAY-JUNE 2022

Dear Resident

## Why are you asking what I think?

Oxfordshire County Council Public Health are working on two projects with community partners to find out more about health and wellbeing and healthy eating. One of these areas is Caldecott in South Abingdon. Two charities, Community First Oxfordshire and Press Red, have been asked to talk to residents to find out more about the following:

1. What kind of things (like organisations, services, and people in the community) support health and wellbeing?
2. What causes the biggest problems to peoples health and wellbeing and what would help fix these?
3. How has Covid affected health and wellbeing?
4. What do people think about healthy eating?

## What happens next?

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

## Important information about how we will process your responses

This survey is completely anonymised so that anyone who completes it cannot be identified. The analysis of your feedback will be undertaken on behalf of Oxfordshire County Council by Community First Oxfordshire (CFO). By completing this survey, you are consenting for your response data to be shared by Community First Oxfordshire and Oxfordshire County Council. Your data will be processed by CFO and Oxfordshire County Council in accordance with the General Data Protection Regulation (2018). You can read CFO's Privacy Policy at: <https://www.communityfirstoxon.org/privacy-policy/>. You can read Oxfordshire County Council's Privacy Notice at:

<https://www.oxfordshire.gov.uk/council/about-website/privacy-notice#paragraph-5977>.

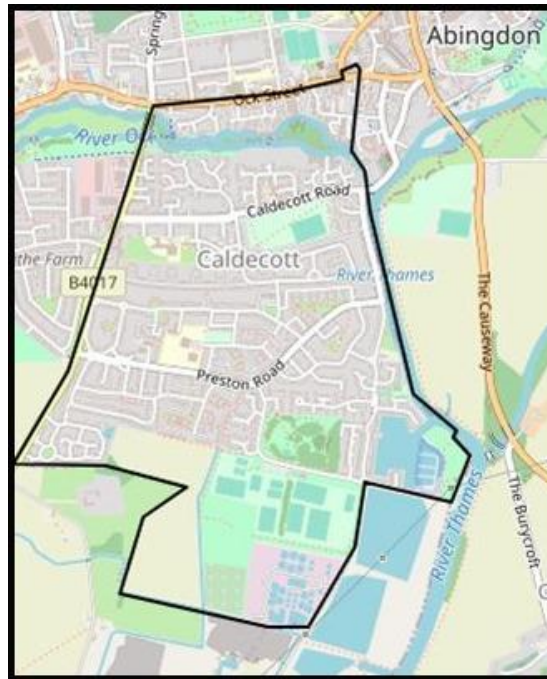
CFO will provide a summary report on survey findings for Oxfordshire County Council.

**YOUR VIEWS REALLY DO MATTER!**

Please return your survey using the Freepost envelope by 23 JUNE

## PART 1 – DO YOU LIVE IN CALDECOTT?

ABINGDON CALDECOTT



**1 – Do you live inside the area highlighted by the black line on the map above? *Please tick one***

Yes – please go to Part 2

No – **PLEASE DO NOT COMPLETE THE SURVEY AS YOUR ANSWERS WILL NOT BE RECORDED**

## PART 2 – ABOUT YOU

**2 – What is your age? *Please tick one***  
*If you are under 13, please get parental consent to complete this survey.*

| Under 13 | 13-15 | 16-24 | 25-44 | 45-59 | 60-70 | 70+ |
|----------|-------|-------|-------|-------|-------|-----|
|          |       |       |       |       |       |     |

**3 – What gender do you identify as? *Please tick one***

|                                |  |
|--------------------------------|--|
| Male                           |  |
| Female                         |  |
| Describe myself in another way |  |
| Prefer not to say              |  |

**4 – What is your ethnic group? *Tick one option that best describes your ethnic group/background***

|  |  |
|--|--|
| White                                    |  |
| Mixed/ multiple ethnic group             |  |
| Asian/ Asian British                     |  |
| Black/ African/ Caribbean/ Black British |  |
| Other ethnic group                       |  |
| Prefer not to say                        |  |

## PART 3 – YOUR HEALTH AND WELLBEING

**5 – When thinking about the health and wellbeing of you/ your family, what are the FIVE MOST IMPORTANT THINGS for you?** *Please tick up to 5 only*

|  |  |
|--|--|
| Feeling happy                            |  |
| Less worry                               |  |
| Dealing well with stress when it happens |  |
| Getting enough exercise                  |  |
| Sleeping well                            |  |
| Healthy and affordable food              |  |
| Healthy habits around food and eating    |  |
| Being without illness or pain            |  |
| Other: <i>please tell us what</i>        |  |

**6 – Please choose the FIVE MOST IMPORTANT THINGS that help you/ your family to live a healthy life with a sense of wellbeing?** *Please tick up to 5 only*

|  |  |
|--|--|
| Not worrying about money                             |  |
| Job security   |  |
| Good quality, affordable housing                     |  |
| Healthy and affordable food                          |  |
| Good local schools                                   |  |
| Adult education and training opportunities           |  |
| Good, locally available services                     |  |
| Access to the internet                               |  |
| Getting exercise (walking, cycling or playing sport) |  |
| Supportive family, neighbours, and friends           |  |
| Good local green and open spaces                     |  |
| Other: <i>please tell us what</i>                    |  |

**7 – What is you/ your family's personal experience of the following on a scale of 1-5:  
1 = not positive at all, 5 = very positive. *Please tick the relevant box for each***

|  | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| Financial security                                   |   |   |   |   |   |
| Job security   |   |   |   |   |   |
| Quality of housing                                   |   |   |   |   |   |
| Affordability of housing                             |   |   |   |   |   |
| Able to afford enough healthy food                   |   |   |   |   |   |
| Local schools  |   |   |   |   |   |
| Adult education and training                         |   |   |   |   |   |
| Locally available services                           |   |   |   |   |   |
| Access to the internet                               |   |   |   |   |   |
| Getting exercise (walking, cycling or playing sport) |   |   |   |   |   |

**8 – What do you do to keep healthy - mentally, physically, emotionally, and spiritually?  
*Please tick all that apply***

|   |  |
|---|--|
| Socialise with friends  |  |
| Attend groups and organisations   |  |
| Keep active (e.g. playing sport, exercising, gardening, cycling, walking) |  |
| Spend time outside  |  |
| Maintain healthy habits around food and eating                            |  |
| Go to a religious setting or place of worship                             |  |
| Other: <i>please tell us what</i>   |  |

**9 – What kinds of things about living in Caldecott are most challenging or difficult to you/ your family's health and well-being?  
*Tell us below***

|  |
|--|
|  |
|--|

**10 – What things in Caldecott help support you/ your family's health and wellbeing? *Tell us below***

|  |
|--|
|  |
|--|

**11 – What do you think would encourage more local people to take part in health and wellbeing activities?** *Please tick all that apply*

|   |  |
|---|--|
| Community-led activities                                      |  |
| Community events to encourage interest                        |  |
| Strong relationships in the community                         |  |
| Free or reduced cost access to events and activities          |  |
| Taster sessions   |  |
| Activities at different times of the week/ day                |  |
| Activities that bring together people in different age groups |  |
| Activities and groups which link to what people care about    |  |
| Other: <i>please tell us what</i>                             |  |

**12 – Would you be interested in joining with other people in the community to work on projects to support health and wellbeing?** *Please tick one*

|       |  |
|-------|--|
| No    |  |
| Maybe |  |
| Yes   |  |

## PART 4 – IMPACTS OF COVID-19

**13 – How do you feel COVID-19 has affected the following on a scale of 1-5:**  
1 = hardly at all, 5 = very negatively. *Please tick the relevant box for each*

|   | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| Your or your family's health and wellbeing in general |   |   |   |   |   |
| Community health and wellbeing in general             |   |   |   |   |   |

**14 – Have you experienced personal stress related to the pandemic?** *Please tick one*

|   |  |
|---|--|
| No, no stress at all  |  |
| Yes, mild stress such as occasional worries or minor stress-related symptoms, such as feeling a little anxious, sad or angry, or having mild trouble sleeping |  |
| Yes, moderate stress with frequent worries, often feeling anxious, sad or angry, or having some trouble sleeping  |  |
| Yes, severe stress with constant worries or feeling extremely anxious, sad or angry, or having frequent trouble sleeping                                      |  |

15 – What kind of support, if any, did you and your family receive from community groups, the council, or other local services during the pandemic?

*Tell us below (leave blank if not relevant)*

|  |
|--|
|  |
|--|

16. If you answered question 15, how useful do you think this support was for you/ your family on a scale of 1-5:

1 = very useful, 5 = not useful at all.

*Please tick the relevant box*

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
|   |   |   |   |   |

17 – What services and support, if any, would have helped you cope better with the pandemic?

*Tell us below (leave blank if not relevant)*

|  |
|--|
|  |
|--|

## PART 5 – YOUR PERSONAL EXPERIENCES OF HEALTH AND WELLBEING

18 – We would really like to find out a bit more about your personal experiences of health and wellbeing. This could be:

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

Please write in the box underneath if you have something to share.

|  |
|--|
|  |
|--|

19. If you would be happy to be contacted about your story, please leave your contact details below.

We will only use these details to contact you about your experience - they will not be shared with anybody else.

PLEASE FILL IN THE DETAILS BELOW IF YOU CONSENT FOR COMMUNITY FIRST OXFORDSHIRE TO CONTACT YOU.

|       |  |
|-------|--|
| Name  |  |
| Email |  |
| Phone |  |

Many thanks for completing this survey - please return your survey using the *Freepost* envelope by 23 JUNE



# Health and Wellbeing in Caldecott, South Abingdon – Youth Survey

MAY-JUNE 2022

## Why are you asking what I think?

Oxfordshire County Council Public Health Team has asked a charity, Community First Oxfordshire, to talk to young people about health and wellbeing and healthy eating. Your thoughts are important in finding out new and better ways to support young people in the local community.

## What happens next?

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

## Important information about how we will process your comments

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**YOUR VIEWS REALLY DO MATTER!**



Please return your survey ... by  
23 JUNE

## DO YOU LIVE IN CALDECOTT?

### ABINGDON CALDECOTT



**1 – Do you live inside the area highlighted by the black line on the map above? *Please tick one box***

Yes – please go to Part 2

No – **PLEASE DO NOT COMPLETE THE SURVEY AS YOUR ANSWERS WILL NOT BE RECORDED**

## YOUR THOUGHTS

**2 – What is your age? *Please tick one***

*If you are under 13, please get parental consent to complete this survey.*

| Under 10 | 10-12 | 13-15 | 16-18 |
|----------|-------|-------|-------|
|          |       |       |       |

**3 – How would you describe your health in general? *Please tick one for each option***

|                 | Very good | Good | Okay | Poor | Don't know |
|-----------------|-----------|------|------|------|------------|
| Physical health |           |      |      |      |            |
| Mental health   |           |      |      |      |            |

**4 – What does being healthy mean to you?**

*Please tick all that apply*

|  |  |
|--|--|
| Feeling happy                            |  |
| Less worry                               |  |
| Dealing well with stress when it happens |  |
| Getting enough exercise                  |  |
| Sleeping well                            |  |
| Eating well                              |  |
| Healthy and affordable food              |  |
| Healthy habits around food and eating    |  |
| Being without illness or pain            |  |
| Other: <i>please tell us what</i>        |  |

**5 – What helps you with difficult emotions (things like low mood, worry, anger, stress, sadness, fear, jealousy, feeling anxious)?**

*Please tick all that apply*

|   |  |
|---|--|
| Sport or other physical activity              |  |
| Creativity – art, writing, poetry, drama etc. |  |
| Socialising                                   |  |
| Music   |  |
| Sleeping                                      |  |
| Eating  |  |
| Using social media                            |  |
| Technology (like playing video games)         |  |
| Chatting to parents                           |  |
| Chatting to brothers and sisters              |  |
| Chatting to friends                           |  |
| Doing nothing                                 |  |
| Other: <i>please tell us what</i>             |  |

**6 – Who would you go to if you felt you needed support with these emotions?**

*Please tick all that apply*

|  |  |
|--|--|
| Friends  |  |
| Boyfriend/girlfriend   |  |
| Parent/guardian  |  |
| Brother/sister   |  |
| Doctor/GP  |  |
| Teacher  |  |
| School Nurse   |  |
| Extra-curricular activity tutor – e.g. music teacher, sports coach |  |
| Mentor/Counsellor  |  |
| Youth Worker/Scout or Guide leader                                 |  |
| Online/social media information or support                         |  |
| No-one   |  |
| Other: <i>please tell us what</i>                                  |  |

**7 – Has the Covid-19 pandemic had a positive or negative impact on your mental and health and wellbeing?**

*Please tick one*

|                              |  |
|------------------------------|--|
| Strongly positive            |  |
| Slightly positive            |  |
| Neither positive or negative |  |
| Slightly negative            |  |
| Strongly negative            |  |

**Many thanks for completing this survey - please return by 23 JUNE**

