

LITTLEMORE COMMUNITY INSIGHT REPORT- AUTUMN 2023

REPORT

December 2023



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Executive summary

In July 2023, Community First Oxfordshire was commissioned by Oxford City Council to undertake community insight research in the Littlemore parish of Oxford.

This research was part of the wider work led by Oxfordshire County Council Public Health and working with partners to develop Community Insight Profiles for ten areas across Oxfordshire that are most at risk of poor health, or experience health inequalities.

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; 3- the long-term impacts of COVID-19 and; 4- access to food and healthy eating. 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 corresponding Littlemore Data Pack. Together, these documents will comprise the Littlemore Community Insight Profile. An executive summary covering both documents will also be produced. The Profile aims to help Oxford City Council, the County Council, and others working in Littlemore to plan better for the future and develop services and projects to improve health and wellbeing outcomes in Littlemore.

Research

The project took place from September-mid-November 2023. A mapping exercise was undertaken at the outset to identify key community-based and non-community-based groups, organisations and agencies which have (or had) been active in the area since 2010.

Key individuals were identified, and contact made to introduce the project aims and build relationships. Using these community contacts, an engagement strategy was developed which combined focus groups, one-to-one interviews, and a community survey. In this way, **186 residents were reached**, across a broad demographic range.

Summary of Findings

A range of local assets to support health and wellbeing were identified, from green and open spaces to local shops and services, community spaces, community groups running a range of activities and non-Littlemore-based institutions active locally.

It was clear that many residents valued the location of Littlemore, both its proximity to the countryside (and the river) and the city of Oxford. However, there was also a sense that this dual urban-rural identity was being undermined, with ongoing housing development increasing urbanisation. At the same time, a sense of isolation within the community was also picked up. Connectivity is a significant concern – there is a strong sense that the community is poorly served by public transport and that service providers are not responsive enough to the issue. In addition, it is generally felt that the Low Traffic Neighbourhood policy has had a negative effect on access beyond the parish. In addition, the design of the existing streetscape and built environment (lots of cul-de-sacs, for example) and a lack of safe walking connections in new developments to the west, in particular, are exacerbating feelings

of isolation and making it difficult for many to access community activity in the more 'central' areas of Littlemore.

The lack of locally available healthcare services and facilities (GP, dental practice, and pharmacy), and the anxieties this can lead to, were key findings, often combining with a sense that Littlemore has been 'overlooked' in relation to investment and availability of services in neighbouring locations such as Rose Hill and Blackbird Leys. It was felt discussions are required at a strategic level between key community bodies (such as the Parish Council), Local Authorities, and the NHS to discuss the lack of provision in Littlemore and ways in which this can be practically addressed.

Green spaces and parks were generally well-used and seen as valued assets. However, there are various improvements that would be welcomed, for example to address littering, improve play equipment, improve access, and develop nature-based initiatives. At the same time, anti-social behaviour in these areas (and other locations) was also noted, with a range of ideas explored which, collectively, could help reduce ASB and increase feelings of safety within the community, where experience of crime – both as victim and witness – was also apparent.

Many users value the groups and activities available locally as well as the physical assets (such as local churches, village hall, community centre, library) which host or facilitate them. While community networking is an ever-evolving practice, there is common, positive feeling among community-based organisations and external organisations active in Littlemore that local conversations to help address local needs and innovate are increasingly effective – the health and wellbeing sub-group of the Littlemore Working Together Community Partnership is an excellent forum, both as a facilitator of discussion and as an engine of practical, partnership-based initiatives. Within this partnership, mention should be made of the leadership role played by St. Mary and St. Nicholas Church. There may be further opportunities to develop theme-based working groups to address common issues, develop joint-funding bids, provide peer-to-peer support, share capacity, offer joint-training etc.

At the same time, despite the existence of an excellent local newsletter – Littlemore Local – which includes updates on a wide range of local news and includes comprehensive listings about community activity, there was a generalised lack of awareness within the wider community about what is available locally in terms of local groups, organisations, venues, and support. Furthermore, many residents do not feel listened to or involved in decision-making – this was particularly apparent in conversations with children and young people. Communication improvements would allow more residents to be reached with information about what is happening locally and allow more routes to involvement to be developed, with positive impacts on cohesion and integration. 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. A related finding in terms of improving access were the problems experienced by elderly and disabled residents in physically getting to events and activities – community transport/ volunteer driver initiatives to address this issue are being explored by local organisations.

A range of health and wellbeing challenges were raised. Mental health and isolation were common concerns and there was a generalised perception that COVID-19 has contributed (negatively) to already existing concerns. Stress and anxiety were also being exacerbated by the cost-of-living crisis, which was a prominent theme. There was a strong sense that the community could benefit from more mental health initiatives and support as well as new (or extended) activity, such as coffee mornings aimed at new residents, life-skills courses, and cooking and community café initiatives. There were also multiple suggestions in relating to new (or extended) support and activities for young people and older people.

The challenges of community work and the ingredients of effective strategies were also explored in some depth. The necessity of working with residents to co-design what is needed (building trust and relationship and capacity building), a focus on long-term projects, sustainable funding, and on the ground community development support were emphasised. At the same time, there was a recognition that usage of existing (and perhaps new) community spaces could be explored, potentially allowing for more drop-in activities and informal socialising, while sowing the seeds for deeper community connections, organically building the relationships that need be nurtured in order to successfully co-design new initiatives.

It should be noted that Littlemore Parish Council is currently developing a Neighbourhood Plan and has conducted extensive local consultation. This evidence-base will undoubtedly offer complementary findings which will be hugely useful in terms of informing and responding to health and wellbeing challenges and opportunities within the community, while potentially also offering policy-based responses to address them.

Finally, and importantly, while the value of community-based activity being undertaken in Littlemore 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.

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 research findings. Themes and potential initiatives will be further tested and explored in the next phase of the project, via Action Planning at the community level. These discussions will involve key local forums such as the Health and Wellbeing sub-group of the Littlemore Community Working Together Partnership.

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

Public Realm, Infrastructure and Services
<ol style="list-style-type: none"> 1. Primary and secondary healthcare provision: discussions to explore improvements to local services 2. Local environment/ streetscape improvement discussion 3. Anti-Social Behaviour initiatives 4. A 'Local Infrastructure Campaign' 5. Public transport improvement discussion
Community, communication, and integration
<ol style="list-style-type: none"> 1. Develop a holistic, community-wide communication strategy 2. Develop a programme of whole-community events 3. Develop a Youth Council 4. Extend community development worker support 5. A Warm Spaces publicity campaign

Community action: innovation and resiliency

1. Improve joint-working and networking
2. Explore innovation in community building usage and/or development of a community hub
3. Explore funding avenues for community innovation
4. Launch a Littlemore Volunteer Drive

Community action: meeting locally-identified needs

1. Additional support for young people
2. Community-based mental health initiatives
3. Develop new or extend existing community activities and sessions
4. Develop community-based Life Skills sessions
5. Develop new or extend existing environment-based community activities, sessions and innovations
6. Support group for parents of children with Special Educational Needs and groups for children/ young people
7. Develop a community transport scheme/ Good Neighbours Scheme to facilitate better access to community activity
8. Explore intergenerational innovation

Acknowledgements

CFO would like to offer its sincere thanks to the residents of Littlemore and the many locally-based organisations who readily, and often enthusiastically, gave their time to talk so openly to our researchers. Huge thanks are due, in particular, to Oxford City Council, Littlemore Parish Council, St. John Fisher Primary School, John Henry Newman Academy, Growing Minds (Homestart), and St. Mary and St. Nicholas Church for their trust, help, and efforts in talking to local residents, introducing the insight project, and establishing consent for the CFO team to come along to community sessions and events to talk to people. Your time was very much appreciated. Thanks also to the Littlemore Health and Wellbeing group that includes local residents and councillors for helping to steer the project.

Research overview

Oxford City Council and Oxfordshire County Council – working with a steering group made up of community partners, particularly the health and wellbeing sub-group of the Littlemore Working Together Community Partnership – are overseeing the development of the Littlemore Community Insight Profile.

Community First Oxfordshire was asked to undertake community engagement and insight gathering for the Littlemore profile, exploring resident opinions and observations regarding health and wellbeing.

This Insight Report should be read in combination with the corresponding Littlemore Data Pack. Together, these documents will comprise the Littlemore Community Insight Profile. An executive summary covering both documents will also be produced. The Profile aims to help Oxford City Council, the County Council, and others working in Littlemore to plan better for the future and develop services and projects to improve health and wellbeing outcomes in Littlemore.

Specifically, CFO 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; 2- challenges to health and wellbeing and what would help to address these; 3- the long-term impacts of COVID-19 and; 4- access to food and healthy eating.
- Collect stories of people’s experiences of living in the area, with particular regard to health and wellbeing.
- Gather insight on the views of the four topics identified above, from local organisations who work with the residents of Littlemore.
- Provide recommendations for further insight needed and/ or actions to take forward from the findings.

Littlemore - the community

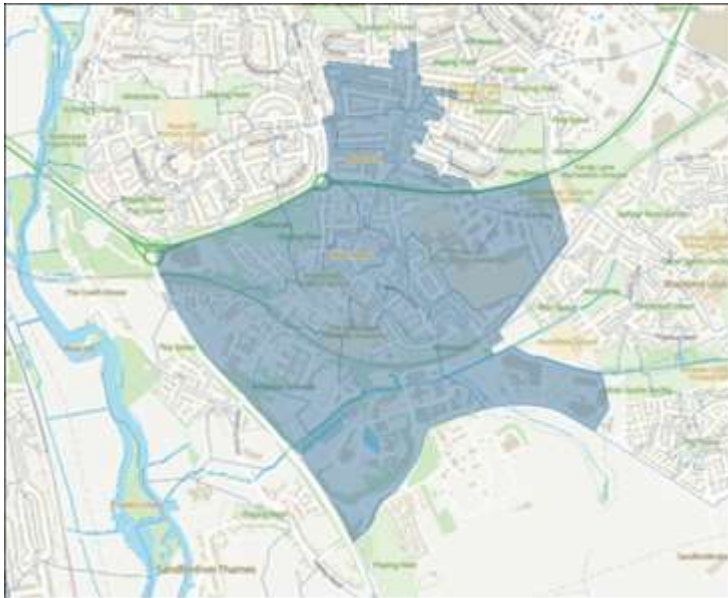
Location and overview

Littlemore is located approximately 2.5 miles south-east of the city centre of Oxford, between Rose Hill, Blackbird Leys, Cowley, and Sandford-on-Thames.

The parish of Littlemore was brought into Oxford City Council jurisdiction following local authority boundary changes in 1991. It ‘was recognised as an area of important historic character and subsequently Oxford City Council designated the village as a conservation area in December 1995’ ([Introduction to Littlemore, Oxford City Council: 2023](#)). Today, Littlemore has a population of 6300

(ONS: 2021). The largest ethnic groups were white (81%), Asian, Asian British, Asian Welsh (9.6%), and Black, Black British, Black Welsh, Caribbean or African (4.2%).

Figure 1 Map of Littlemore Ward



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

History and development

At the end of the 19th century, 'Littlemore was still a comparatively small village surrounded by fields. Farming was gradually replaced by six market gardens. The railway station was opened in 1864, closing a century later, with the small timber station building erected next to the hospital, and accessed via Railway Lane. The construction of the Oxford to Wycombe branch of the GWR line created further employment opportunities and housing demand in Littlemore' ([Littlemore Conservation Area Appraisal, Oxford City Council: 2008](#), p. 6).

Littlemore still maintained its rural character until the early twentieth century and had 'very few residents' ([History of the County of Oxford, volume 5: 1957](#)). At this time, 'the road to Cowley remained a country lane... Church Way was a field-path to Iffley, and many who caught a late horse bus to Iffley Turn were said to fear the lonely walk across the moor... [The] increase in the hospital staff and the expansion of the motor works at Cowley created a new demand for small houses' (Ibid). New council houses were built from the 1920s onwards, 'covering much of the remaining farmlands of the parish' (Ibid) and 'within the village rows of tightly packed Victorian and Edwardian terraces were emerging and beyond the village core, large housing developments were being built' ([Littlemore Conservation Area Appraisal, op. cit.](#)).

Housing development continued after World War Two: 'in 1945 the [Oxford] housing waiting list stood at 5,000. A shortage of available land – exacerbated by the adoption of the UK's first green belt outside London in 1956 – meant that most post-war council housing was concentrated on new estates south and south east of the city' ([100 years of council housing in Oxford, Oxford City Council: 2020](#)). This included significant development at Minchery Farm, Littlemore.

In addition, late 20th and early 21st-century, 'infill development has taken place amongst the more historic buildings creating continuous edges of development along the three main roads. Additional

pockets of modern housing developments have also taken place on David Nicholls Close, Pipleay Furlong and Chapel Lane and at the former Speedwell School Site on Sandford Road' (*Littlemore Conservation Area Appraisal*, op. cit.).

Shops, services, and leisure – a brief overview

Appendix 1 sets out distances¹ and public transport accessibility to main shops, services (such as GPs and dentists), green spaces, and play and recreation areas.

Regarding local shops and services, there have been many changes over the years and periods of growth and decline. However, Littlemore, in recent decades, has suffered like many other places have from the 'decline of the high street', with many shops and businesses closing in recent years, a situation exacerbated by the 2008 banking crisis, subsequent recession, and policies of austerity.

A list of local businesses, taken from the telephone directory in 1979, included three newsagents, a grocer's and butcher's, a chemist, a hardware shop, a book-keeper's and multiple other local businesses (*The Changing Face of Littlemore*, Book 2, Boyd Publications: 2013). Today, there are fewer such establishments: a mini mart, a post office, a Polish food store, a shop and off licence, and a newsagent. The nearest large supermarket is Sainsbury's, on the western edge of the parish on the ring road, with a Tesco located to the east (and more distantly) off the ring road in Blackbird Leys. The Parish Council has produced an [excellent map](#) which lists current local business, amenities, and services.

There is an absence of healthcare facilities and services in the parish. The nearest pharmacy, The Leys Pharmacy, situated in Rose Hill, north of Littlemore on the other side of the ring road. The nearest doctor's practice is located south east of the parish at the Leys Health Centre, with health centres also used by residents available in Temple Cowley and Donnington. The nearest dental practice to Littlemore is located in Rose Hill, with others situated, more distantly, at Templar's Square and the Leys Health Centre.

There are multiple play areas and parks in Littlemore, with the Kassam leisure complex situated in the south east of the parish (the nearest sport's centre is the Leys Pool and Leisure centre in Blackbird Leys). In addition, there is a community centre in the parish and a parish hall. These offer and host many community groups, services, and organisations, as do several places of worship (see Appendix 2).

Community action, projects and initiatives - 2010 to present

In order to understand more about the range and types of community action and activity (whether community-led or led by external agencies and services) a mapping exercise was undertaken.

This combined desk-based research and conversations with the multiple community organisations and partners which have been involved in locally-based activity in recent years.

The table below summarises the range of organisations and assets which have been locally-involved in community-based activity since 2010 - as organisers, active participants, facilitators, hosts etc. The categories set out below are broad – in particular, it is recognised that there is often overlap in the function and organisation of volunteer-led and non-volunteer-led groups.

¹ These are calculated from the location of Littlemore Community Centre, Giles Road.

A more detailed overview of current groups, organisations, partnerships etc. supporting health and wellbeing and an overview of community-based activity and initiatives can be found at appendices 2. Some of these are based in Littlemore while some are based elsewhere but offer support and services in the area.

Table 1 Groups and organisations active/supporting residents and offering services in Littlemore

Littlemore-based volunteer-led groups	Littlemore Resident's Association
	Community Emergency Foodbank (Littlemore satellite)
	Women's Institute
	Rugby Club
	Gardening Club
	Angling Society
	Bowls Club
	Various exercise and fitness groups/ classes
Littlemore-based organisations	Littlemore Parish Council
	Littlemore Community Centre
	Littlemore Village Hall
	St Mary and St Nicholas Church
	Littlemore Baptist Church
	Blessed Dominic Barberi Church
	Igreja Cristã Maranata
	Growing Minds (Homestart, Peeple)
	The Oxford Academy
	John Henry Newman Academy
	St John Fisher Primary School
Emmanuel Christian School	
Non-Littlemore-based organisations (volunteer or non-volunteer led)	Citizens Advice Oxford
	Age UK
	Oxford City Council
	Oxfordshire County Council
	Restore Shop and Café
	Peabody Housing Association
Greensquare/ Accord	

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

A summary of these activities since 2010, historic and ongoing, is given in Table 2 below (the list is not exhaustive). Again, these categories are broad and it is recognised that there is often overlap in the function and organisation of volunteer-led and non-volunteer-led groups.

Table 2 Types of community-based activity and projects since 2010

Volunteer-led projects/activity	
WHAT	ACTIVITY/ THEMATIC FOCUS
Food bank (Littlemore satellite)	Distributes food – by referral – to those in need

Local places of worship	Activity/ support includes: socialising sessions, spiritual support, community larders, coffee mornings, men's breakfast.
Non-volunteer-led projects/activity	
WHAT	ACTIVITY/ THEMATIC FOCUS
Littlemore Community Centre	Hosts/ supports/ runs multiple groups and activities
Littlemore Village Hall	Hosts/ supports/ runs multiple groups and activities.
Growing Minds (Homestart, Peeple)	Parent, child and family support, including cooking classes.
Littlemore Library	Hosts community drop ins and a space for young people
Partnership projects and networks	
WHAT	ACTIVITY/ THEMATIC FOCUS
Littlemore Partnership – Community Working Together	Community resilience, strength and cohesion. Includes a Health and Wellbeing sub-group .
PREVIOUS PROJECTS/ INITIATIVES	
Oxford City Council Locality Response Hub	COVID-19 response – eastern Hub included Littlemore.

Community Insight Research

Methodology

The community mapping work, which has been summarised above, set out the groups and organisations, whether volunteer and community-led or externally based yet active in Littlemore, with which the Insight programme needed to engage in order comprehensively to explore the research aims set out in the introduction.

These groups and organisations were contacted to make introductions to the project and build relationships.

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

1. **One-to-One Interviews**

Two sets of questions (one for resident-based interviews and one for representatives of community-based organisations) were developed by CFO and discussed with the project steering group (see appendix 3).

Researchers then attended community activity sessions and spoke to attendees, taking them through the questions and taking notes. CFO also undertook interviews in the wider community. For community-based organisations, interviews with key representatives conducted either face to face or, where this was not possible due to pressures of time, via email.

These one-to-ones 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)**

These stories were identified as the research progressed, primarily developing naturally from one-to-one interviews, where individuals expanded on certain points and offered deeper personal insight on particular themes.

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 CFO took was that of semi-guided conversations. We did not wish to overly lead focus group discussion but 'go where people wanted it to go'.

A list of questions was drafted by CFO and agreed with the steering group (see appendix 3) and, where researchers were able, and where it felt natural, guided the conversation back to consideration of those topics.

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 groups, and community organisations.

4. **Community survey**

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, CFO and project partners Oxford City Council and Oxfordshire County Council public health designed a community survey (hard copy and online- Survey Monkey), which was signed off by the steering group (see appendix 4). The survey was widely disseminated (primarily via a weblink), using the multiple local networks identified during mapping. A separate Young People's Survey was also designed, again both hard copy and online.

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.

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 interviews

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

Table 3 Number of residents consulted in one-to-one interviews

Setting	Number of residents consulted
Age UK exercise session	2
Littlemore Library	1
Growing Minds parent and carer session	4

St Mary and St Nicholas coffee morning	6
Street canvassing	12
Local Care Home	1
TOTAL	26

In terms of general observations, interviewees were generally quite willing to talk to researchers. In addition, many people (across a wide age range) 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.

Summary of key themes

Research question	Main themes	No. of references
1. What do you like about Littlemore as a community?	Friendly	8
	Quite friendly	3
	Not as friendly as it used to be	3
	Quiet	3
	Community spirit	2
	Mix of people and cultures	1
	Green spaces/ parks	1
	Shops	1
	Nothing	1
<p>'I love it here; it is so peaceful. People are friendly but not gossipy or intrusive. I'm quite shy and people are kind but don't hassle you.'</p> <p>'I used to like it, but it's now got a lot of problems with drugs and prostitution. There are gangs of kids roaming around so I only come out in the daylight and when the schools are open, so that kids are not around.'</p> <p>'Reasonably quiet roads and people are quite friendly – there was a pub but I'm not sure if it's open.'</p>		
2. Do you feel involved in decision-making locally and feel that you are listened to?	No	10
	Aware/ get involved in consultations, issues and debates	9
	Yes	3
	Sometimes	1
	Need to work at getting people involved	1
<p>'Not really. Sometimes a survey to fill in and there's Littlemore Local.'</p> <p>'The Parish council are pretty good - they ask questions and let us know what is happening. I do feel listened to by them.'</p> <p>'There is a Facebook group for Littlemore which is where people discuss issues.'</p>		
3. What do you do to keep healthy, mentally, physically, emotionally, and spiritually?	Walking, cycling, and running	14
	Socialising	8
	Sport (in general)	3

	Music and dance	1
	Age UK classes	1
	Baking	1
	Crafting	1
	Gardening	1
	Church coffee mornings	1
<p>'I attend the Age UK strength and balance class and that really helps. I'd love it to be a permanent class not just for a few weeks. I also do walk around but it's boring on your own.'</p> <p>'It's always busy with 2 children. In the morning I use the bike instead of the bus or walk.'</p>		
4. What kinds of things are most challenging for you living in Littlemore that impact on your health and wellbeing?	Anti-social behaviour	7
	Getting to medical appointments outside Littlemore	6
	Low Traffic Neighbourhood issue	4
	Poor/ unreliable bus services	3
	Cost of living	3
	Lack of activities for young people	2
	Poor state of repair/ lack of playpark facilities and equipment	2
	Nothing	2
	General problems with access to services	1
	Poor state of roads/ pavements	1
	Poor parking affecting those with mobility issues	1
	Lack of fresh fruit and veg in local shops	1
	Feel vulnerable at night	1
<p>'The bus is terrible. Traffic [is an issue] with the ring road and I am aware of pollution. There are some nice places for walks but could be improved.'</p> <p>'There's a lot of parking on the path [Alice Smith Square]. No concept of less mobile people. People don't care about people in wheelchairs, with pushchairs or with poor eyesight.'</p>		
5. Do you feel safe in the community?	Yes	16
	No	5
	Have witnessed ASB	3
	Lot of crime	2
	Most of the time	1
	Need more police presence	1
	Poor lighting > insecurity	1
	Yes – in the daytime	1
<p>'I do but I know other older people don't. They won't go out at night. People walk through the community to deal drugs or to go to the drug dealers.'</p> <p>'Yes. Very safe.'</p> <p>'Yes and no. Things could be improved. It's pitch black under the flyover as there are no lights and people hang out there.'</p>		
6. What local groups, services, organisations, community spaces	Church groups	10
	None	7

etc. do you find particularly helpful or useful to your health and well-being?	Growing Minds	3
	Shop and café at Sandford	3
	Not as many groups as there used to be	2
	City Farm	1
	Library	1
	Litter pick group	1
	Green spaces/ parks	1
	Age UK groups/ classes	1
<p>'The park areas are nice but they need more equipment for the children. The church holds events, they are good.'</p> <p>'Age UK who do the classes here. I only really use Littlemore community centre and it doesn't seem like much is happening here, which is a shame as it's a great centre, with good space and in the middle of the community.'</p>		
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.)	Community spirit/ friendliness	7
	Lack of community spirit	4
	Green spaces/ river	3
	Cycle and walking paths	2
	Children's groups	1
<p>'Community spirit in the school and groups rather than generally in the community.'</p> <p>'Community spirit. People get together for good things. A group did a street clean up and it needs to be more often. When son goes to nursery I'll join and do more.'</p> <p>'There isn't much only parish and churches. The schools aren't for the community. Youth Club once a fortnight needs to be weekly.'</p>		
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/ 'we do our best'	5
	Cost of food is high/ have to economise	4
	Grow our own veg	2
	Having time to prepare meals	2
	Knowing how to prepare meals	1
	Campaigns and promotions	1
<p>'Knowing how to cook a decent meal [would help]. It would be good to have cooking classes.'</p> <p>'I'm not a fan of take away and grow my own veg. However, there are no healthy eating places - nothing local.'</p> <p>'We know what to do to cook and eat healthily. We have lots of fruit and veg, very little meat (like in the days when we were kids really - fill up on veg).'</p>		
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!	Community café/ kitchen	3
	Cookery classes	3
	Dance classes (adults)	2
	Sports/ self-defence for the elderly	2
	More events/ initiatives in the parks	2
	Improve the parks/ more facilities	2
	Coffee mornings for new residents	1
	Exercise classes (adults)	1

	Community vegetable growing	1
	Arts/ literary classes	1
	Mental health awareness	1
	Walk to school group	1
	Social education for young people	1
	Cycling proficiency	1
	Do up the flyover	1
	Don't know	1
	Community gym	1
<p>'Yes, absolutely. Coffee mornings aimed at people who have moved into the area [to get to know the area/ people].'</p> <p>'Activities in the school holidays - it's half term tomorrow and I'm worried. Need to be free or minimal cost. There are things to do such as bowling or the cinema but it's too expensive with four children.'</p> <p>'100%! Things for teenagers, cooking with kids, additional stuff in the parks, put flower beds opposite the Oxford Road shops. More groups for people with additional needs.'</p>		
10. What do you think would encourage more local people to create or take part in health and wellbeing initiatives?	Cheaper or free activities	4
	Don't know	3
	Incentives to attend	2
	Better advertising	2
	Buddy system	2
	Community events (eg cooking)	1
	More visible initiatives (eg in parks)	1
	Community-designed and led initiatives	1
	Help to get people to events/ activities	1
<p>'Word of mouth is most important. COVID-19 has put people off going out. Incentives are good to encourage people, free food. We need better advertising and also need to shout louder about what's out there.'</p> <p>'Free events - cost is a worry. Otherwise attending activities is a treat.'</p> <p>'A buddy system and free or low-cost activities.'</p>		
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?	Maybe	6
	No	6
	Yes	5
	Yes – if I had time	3
	Yes – if there was childcare	1
<p>'Yes, in something like a community kitchen.'</p> <p>'I would if I had time but I'm busy with 'A' levels and work.'</p> <p>'If I had time.'</p>		

LOCAL STORIES

'Robert' - twenties

Robert came to Littlemore as a refugee from Eastern Europe a couple of years ago. He has a very young daughter. He gets out and about and talks to people at work but although he has a 'nice neighbour there's quite a lot of racism towards me.' He doesn't feel there is much of a community spirit and 'white people do not speak to me unless to be rude.' Most of his socialising is with other immigrants to the area.

Robert is aware of what is going on in the local community. He knows, for example, if local consultation events are taking place but struggles to attend because of childcare responsibilities. He wishes that there was more available for small children, such as playgroups. He thinks events at the church are good and does appreciate the green spaces in the community.

However, although the 'park areas are nice... they need more equipment for the children.' Robert thinks that the parks could also be improved and better-used by 'hosting events that encourage people to take part,' such as people leading volleyball sessions, for example, or holding family-friendly activities.

Cost-of-living is an issue for Robert. 'I have to work very hard to earn money to live in a one bedroom flat with my child. Everything here is very expensive and I cannot buy healthy food very easily.' To economise, Robert walks everywhere.

LOCAL STORIES

'Gemma' - fifties

Gemma likes Littlemore. She thinks it is a family-oriented place and there are lots of generations which have grown up here. A lot of people know each other and that gives a good community feel. She offered the suggestion that there could be coffee mornings that people moving into the area could come along to and get to know the area and their neighbours.

Gemma doesn't have any particular health issues and the thing that helps her health and wellbeing in particular are the green spaces (she is a dog walker) although they could do with a bit of attention: '*they're a bit scruffy.*'

The major local talking point at the moment is the Low Traffic Neighbourhood issue – Gemma feels this has angered a lot of people: '*the scheme is very unpopular.*'

In comparison to the past, she feels the community has lost some groups and venues, and this was exacerbated by COVID-19. She feels that there could be more for young people to do, especially teenagers and adults in general, most groups being aimed at children, she feels. Gemma also indicated some anxiety about community safety, thinking there could be more of a police presence.

She feels that there is definitely a need for more health and wellbeing initiatives and raised the point that people were going out less after COVID-19. She would be keen to get involved in supporting potential initiatives. Promotions and campaigns are useful in this regard, using libraries and supermarkets, for example, although she felt word of mouth advertising was most important. Offering incentives could also encourage people to come to events and also '*offering free food!*' but the community also needs to '*shout louder about what's already there.*'

Locally active groups and organisations - one-to-one interviews

Table 4 Locally active groups and organisations one-to-one interviews

Organisation	
Littlemore-based	
St. Mary and St. Nicholas Church	
Community Emergency Foodbank	
City councillor	
St. John Fisher primary school	
John Henry Newman Academy	
Growing Minds (Homestart)	
Local wellbeing-focused business	
Age UK	
City Council officer	
County Council officer	
Non-Littlemore based (active in community)	
Oxford City Council	
Citizen's Advice Oxford	
Peabody Housing Association	
Greensquare/ Accord	
TOTAL	14 (individuals)

14 one-to-one interviews (face to face and/ or email) were held with groups and organisations which are (or have been in the recent past) actively engaged in projects in Littlemore. Requests for interviews and questionnaires were sent to multiple others without reply.

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

Summary of key themes		
Research question	Main themes	
1. Which projects, programmes and initiatives focused on (or including Littlemore) has your organisation been involved in (last 10 years)	See appendix 2 and Table 2 (above)	
2. In your experience, what works well in getting residents involved in projects and initiatives, and what doesn't (barriers to involvement)?	WHAT WORKS	BARRIERS
	Find out what people want – pinpoint interests and work with them	Sustainable funding (for projects and initiatives etc.)
	Develop projects that people find worthwhile – design them <i>with</i> people	Cost (for those attending sessions)
	Find key individuals to drive projects forward	Time and location of sessions/ events etc.
	Building of trust/ listening over the long term	Community perceptions of not being listened to (including by Parish Council)
		Poor 'political' relationships among local organisations/ key individuals

		Pride – sense of people not wanting to take help
		Lack of volunteers
<p style="text-align: center;">‘Keep plugging away and don’t give up, perseverance is needed.’</p> <p>‘Littlemore is an area where people don’t really want to get involved. You have to promote for a long time and when the community does take part you have to work hard to get them to come back.’</p> <p>‘The challenge is to get people singing off the same hymn sheet – people have very particular interests. Work at trying to get a wide coalition and then maintain interest and get proper resourcing.’</p> <p>There is a very strong community network in Littlemore who do a lot of community events – barriers appear to be funding and a sense that the parish council doesn’t always understand what people want.’</p> <p>‘Cost is a barrier, location can be a barrier. Pride – not wanting to ask for help or take things that are donated, a perception of being judged.’</p> <p>‘The built environment and the poor state of repair of pavements, especially if you have a walking frame or a wheelchair can be very off-putting [as can some impatient bus drivers]: “I’ve been told I’m holding up the bus so I’m not going to get the bus anymore.” It would be very simple and relatively cost effective to improve the built environment.’</p> <p>‘Find out what people actually want – what’s useful – how can we make this easier for you – how can your life be better [by getting involved/ attending etc.]. – it’s a really long process of supporting and listening.’</p> <p>‘Barriers? How long have you got? A strong feeling of not being listened to, neglected and that nothing will change. Also, a focus on what’s wrong, rather than what to do about it. There are also some more systemic issues, such as a Parish Council which has a lot of money but is not good at making decisions on how this should be spent. Divisions/suspensions between the Parish Council and City/County Councillors are a considerable problem.’</p>		
3. In terms of the discussion and design of community-based projects and initiatives – what are the ingredients for success in the long term?	A strong perception that a holistic community development approach is needed across the longer term: working with people from the bottom-up - genuine co-production of initiatives.	
	Long term funding of projects/ initiatives	
	Demonstrate success in practice – let people see the value – to bring more people in	
	An aim to hand over projects to the community – build confidence and autonomy	
	Offer incentives to get people to engage	
	Improve communication to reach more people – make it easier for people to take part (e.g. think about meeting times and locations, use technology)	
	Continue to build networks and connections – work on common aims as well as specific interests	
	Consultation must lead to actions	

‘Often people who are active don’t stick around and so there is a lack of continuity – need to get people out of their silos. The community centre, village hall, churches have different sets of people involved and different interests.’

‘Additional funding and support for people coming forward with new ideas for projects – navigating how to do this.’

‘Community-based activities are important, allowing people to talk to others in the community and get peer to peer support.’

‘Linking up with other organisations which are doing similar things – this takes time and you have to be patient. [Also need to] signpost people into other sources of support.’

People think things won’t change – need to show them success in practice of people coming together to make a difference.’

People want to know what will come out of it. People want to help, but the [City] council have a horrendous reputation so people expect nothing to come of it.’

If you have money, promote through the school, it is key to visibility.’

‘Ongoing financial backing and buy-in from the community. When planning initiatives, ensure that the community has a voice in shaping the success of the project. A key person who can oversee the projects but also disseminate knowledge and skills for succession planning.’

‘Community development approaches is core to successfully engaging and working with people in the community - need to build groups towards self-autonomy.’

‘Needs to be strategic thinking about the medium to long term and how to find possible partners (e.g. local authorities and businesses) and influence possible funders and providers. This is lacking in Littlemore although there are now some attempts to achieve this.’

4. What are the key challenges you face as a community-based organisation (or an organisation working in Littlemore)? What would help you solve them?

There was much overlap with themes set out above

Poor built environment (e.g. off-putting for disabled/ elderly)

Getting people to community events and session (transport issues, esp. for those who are elderly/ disabled)

‘Getting the people that really need the help to come and use us.’

‘Littlemore people generally feel they have been left out, compared to Rose Hill and Blackbird Leys. This feeds into the LTN response, a sense of powerlessness and people feeling done to.’

‘The disparate, splintered nature of community here, there’s families who have been here generations and others who move here as a stepping stone to somewhere else. There’s no genuine input from the bottom-up, from resident’s – we need to facilitate grassroots involvement.’

‘Communication – spreading the word everywhere and getting people actively to take part in initiatives and have their voices heard.’

‘The issue isn’t that things aren’t happening, it’s getting people there. It’s difficult for people to find out what’s happening. We do leaflet drops once a year and there is Littlemore Local, but we know people are missing these – those who know, know – those who don’t, don’t.’

‘There are also issues with getting people TO community sessions. There are problems with accessibility. We need transport solutions – people to pick them up and take them back.’

<p>‘Not having a fair share of community-based projects – often goes to Rose Hill or Blackbird Leys.’</p> <p>‘Connections – work more on connections. There is some impressive work going on to build those links in Littlemore.’</p> <p>‘[We need] a better functioning and more inclusive parish council. Which looked at long-term issues more and built partnerships with other agencies.’</p>	
<p>5. What do you think the main impacts of the pandemic were locally, and do you think any impacts are still being felt?</p>	<p>Strong perceptions of increased and ongoing anxiety, isolation, and mental health/ learning issues across a range of age groups, but especially children and young people and older people – <i>some</i> more positive counter opinion</p>
<p>‘I think at first when we came back after the pandemic people were not used to going out. But as time has gone by it has got better and things seem to be back to how it was before.’</p> <p>‘Isolation was a big thing and it is continuing- I am more aware of COVID-19 anxiety than cost-of-living anxiety.’</p> <p>‘Loneliness and isolation – people are still going out less, those who were previously isolated seem even more so. There is anxiety and it is easier to stay at home, especially if you don’t know what is going on [to tempt you out].’</p> <p>‘The SEND and SEMH needs in our school [exacerbated by COVID-19] are immense.’</p> <p>‘Mental health concerns and children’s anxiety levels have increased. There are attachment and trauma concerns [and because] two-year health checks did not happen [there are] speech and language delays [and issues with] social and emotional skills, interactions with peers.’</p> <p>‘The numbers [attending my sessions] haven’t recovered to pre-COVID-19 levels.’</p> <p>‘There are huge issues of anxiety in the community, probably exacerbated by COVID-19. Addiction issues were hidden by the pandemic.’</p>	
<p>6. 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?</p>	<p>Library-based initiatives (book deliveries)</p> <p>Collaboration between different agencies – developed relationships which continue</p> <p>City Council COVID-19 Hubs (now disbanded)</p>
<p>‘We need identity in Littlemore. What is it? What do we want it to be? Is it a village? If so, it needs facilities, shops which cover your day to day living. If it is part of Oxford we need to improve the links.’</p>	
<p>7. Have you noticed any cost of living crisis impacts affecting residents locally?</p>	<p>Very strong perception that this is a significant issue, with limited counter-opinion.</p>
<p>‘Not in general, though customers have mentioned gas and electricity prices.’</p> <p>‘Food poverty is definitely an issue, no question. People used to wait weeks before accessing their referral but there is less stigma now. This year there were twice as many referrals as last year. Need was huge during the pandemic, then there was a lull and it is now increasing again.’</p>	

‘The cost of living and energy crises have had huge [negative] impacts. There is increased loneliness with less money to go out. In some families, meals are being skipped. There is constant worry in some families about how to make ends meet.’

‘Massively so – our children and families are suffering, working a *lot*, or struggling to eat.’

‘More people asking for help with paperwork to claim more financial support.’

‘Major impacts – people used to be coy about picking up food parcels. Now they say they really need them.’

8. Do you have any other observations about health and wellbeing in Littlemore and how it could be improved?

Much discussion about the wider social and macro-economic issues related to poverty, affordable housing, the benefits systems etc. and the negative impacts on health and wellbeing

A lack of primary care facilities and community-based health support – feeding the perception that Littlemore is overlooked compared to other locations like Rose Hill and Blackbird Leys

Parental aspiration and the impact on children

Improvements to the built environment/ green spaces

‘I sense there is a lack of parental support for their children’s aspirations.’

‘Housing has been a major issue in the last few months with rent increases and S21 [eviction] notices]. The shortage of affordable housing [is also an issue].’

‘[With regard to the benefits system] we need a system that people can work with. There is a sense that the system is against them, a sense that it is stacked against you.’

‘Most of our residents are in receipt of legacy benefits but also those who are working full or part time also struggle with budgeting and living costs. This includes annual increase of rent / service charges, energy utility bills, debts and food cost

‘We need to offer support around the underpass bridge. People are accumulating there drinking and smoking – it is not great.’

‘Aspiration is a major issue – some people say I had these dreams as a child [which didn’t happen] – and that lack of aspiration is passed on to the child. We need to work with people and say those dreams can still happen.’

‘Health visitors are over-stretched. There’s not enough hours and not enough of them. Some of our parents clubbed together to buy baby scales, because there is nowhere to get babies weighed.’

‘Most obviously we need a reduction in poverty in a very disadvantaged and unequal community. The lack of primary care facilities is a disgrace. Most obviously a health centre but if not then satellite clinics, a pharmacy.’

LOCAL STORIES

‘Josh’ - teenager

Although Josh thinks Littlemore is an OK place to live he would like people to be more considerate and worries about those who are less able. *‘I want people to be kind. I want schools to teach people to be kind sometimes if they are disabled...if they struggle to get off the train or across the road... help them or just be kind in general. One lesson [in school] or go outside and find people who need help or do something kind by helping others because sometimes there are not really good people around to help people who are in need’.*

He also suggests a lesson on CPR could be helpful. *‘In Design and Technology we should do a medical one...with dummies... to teach students how to do CPR... If a friend starts to choke you can help them.’*

Issues at school are a concern for him. *‘I have dyslexia and they [schools] don’t do anything about it. Talk to the teachers about it and they say we’ll talk to you and don’t get back to you or say anything so I’m confused. When we have our tests and other things that prepare me for my future I get worried because I can’t read questions or understand what its means. Schools need to enforce more staff to help kids with dyslexia or other reading problems or speech problems.’* He added that he, *‘gets worried if I don’t do good at school now I won’t be good for the future.’*

Josh notes that teachers are overworked and *‘have a lot to juggle as well as teaching.’* He also said that the security measures in school makes him, *‘feel unsafe – because if too many teachers are walking round then it means [they are expecting] something bad... to happen... [it] feels like a prison and is not a healthy environment.’*

Josh would like more to be done about the environment and thinks, *‘more solar panels on houses [would help] because my house has a solar panel and energy goes into it and less carbon dioxide will go in the air from burning fossil fuels and lots of people will not struggle for money for fuel.’*

He has also noticed a lack of cultural accessibility in the area, *‘like mosques.’* The only mosque he knows of is in Rose Hill, but *‘it’s in someone’s house and I don’t feel comfortable entering someone else’s house’.* Josh, like other young people we spoke to, would like an opportunity to share his thoughts and for young people to have a say about the future of the community.

Focus Groups

Table 5 Focus Groups location and demographic

FOCUS GROUP ATTENDEES		
Setting/ group	Demographic	Numbers
St. John Fisher Primary	Young people aged 7-10	14
John Henry Newman Academy	Young people aged 7-10	13
Youth Ambition	Young people aged 11-19	8
Littlemore Parish Council and Neighbourhood Plan Group	Residents aged 35+	5
TOTAL		40

The intent of these discussions was to take a ‘deeper dive’ into project themes by talking to both young people and older residents of Littlemore.

Summary of focus group key themes – children and young people

Research question	Main themes
1. What do you like and value about living in Littlemore?	Green spaces and parks - <i>but improvements needed</i>
	<u>GENERAL</u> sense that the community is friendly, <i>some exceptions</i>
	<u>MIXED</u> sense of there being enough things to do
<p>‘There’s not lots to do but its’ not like you can’t do anything – go to the city centre and watch a movie.’</p> <p>‘Everyone’s friendly.’</p> <p>‘There’s lots of places to go like the park and the library.’</p> <p>‘Everyone works together to do litter picking.’</p> <p>‘It’s not too crowded and there are fun places nearby.’</p> <p>‘Nothing really, except I live close to my friends.’</p> <p>‘It’s good because I can come to youth club on Thursdays when I’m bored at home.’</p> <p>‘I like that there's quite a few places to go and things to do.’</p>	
2. Do you feel listened to and have a say in what affects your life?	Whether it was school, parents, government or local councils, while there was a range of responses the dominant one was young people are not listened to
	<p>‘People are annoying, they don’t mind their own business and come into your space.’</p> <p>‘The school councillors came to talk about what we wanted in the playground but nothing has happened yet.’</p> <p>‘The government couldn’t care less. There are so many ideas for global warming and the Low Traffic Neighbourhood but they don’t listen to us.’</p>
3. What does being healthy and wellbeing mean to you?	Healthy eating
	Getting enough sleep
	Getting exercise
	Spending time with friends
	Playing computer games/ using phone – some references to needing to reduce screen time

'I want people to be kind... I want schools to teach people to be kind because sometimes there are not really good people around to help people who are in need.'

'Drugs need to stop, and cigarettes, its probably the reason why people are going crazy. I don't know why they are still making them.'

4. Are there any challenges about living in Littlemore that affect your health and wellbeing?

Crime and anti-social behaviour, feelings of insecurity

Vaping and smoking

Litter

Poor state of repair of roads and pavements

Traffic, speeding, and pollution

Green spaces and parks: need tidied up/ improved in general

Getting around – infrequent buses

'Park equipment is in bad condition and overgrown. It's like a dog park. They could put stuff in there.'

'Loads of people want to play sports but there's no golf greens or football goals.'

'We need more slopes on the paths for people with wheelchairs, buggies and prams, and the paths are very bumpy.'

'To get out of Littlemore you need to get on a bus but buses don't come regularly so you walk a distance and then get a bus, like to Rose Hill [across the ring road].'

'I live in a dangerous neighbourhood. I feel safe knowing the police are there.'

'I've been told not to go out alone [because there have been incidences of crime] so I go out with my dad on our bikes and go to the park with my brother [supervised].'

'Litter – there is a lot of it everywhere. You find cigarettes and vapes on the floor. A lot of my neighbours smoke and it smells disgusting.'

'There is a lot of crime.'

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

Spending time outside

Socialising (online or in person)

Sleep and taking time to relax

<p>'I go outside and make forts and collect berries in the garden.'</p> <p>I cook with my mum. We're getting healthier. I like cooking with my mum because I get to spend time with her at the end of the day. I'm also going to the gym more.'</p> <p>'Taking a break once in a while, resting from pressure.'</p> <p>'Sleeping helps you be ready for the morning so you're not tired in school.'</p> <p>'Spending time on my phone communicating with friends.'</p>	
<p>6. Who would you go to if you felt you needed support with these emotions?</p>	<p>The most prominent reference was <i>friends</i>, then <i>parents</i>. <i>Teachers</i> were also mentioned though to a lesser extent.</p>
<p>'Need good relationships with adults if they are close to you.'</p>	
<p>7. Is there anything that might improve your health and well-being, yours or other people you know – is there anything in particular you would like to see happen?</p>	Befriending and volunteering initiatives
	Improve the built environment/ make it more accessible (esp. to those with disabilities)
	More tree planting/ food growing
	Improve green spaces and paths
	Improve street cleaning and deal with littering
	Get rid of the LTN as it has increased traffic and pollution
	Deal with drugs, smoking, and vaping
<p>'I think there should be more carers who can go round to people's houses who have a disability and help them out.'</p> <p>'We need better volunteering because there are lots of people who don't have family connections [to help them]. They are lonely and suffer from bad mental health. It would be good to have a volunteer and talk to them.'</p> <p>'If we're at a youth club we could go and volunteer at places. It's hard to find a charity and volunteer.'</p> <p>'Need a better park environment and more things added to the parks [and need to separate] the basketball court and football courts.'</p>	
<p>8. Do you think there was any impact from the COVID-19 pandemic on your health and wellbeing?</p>	Isolation – couldn't see friends
	Learning impacted – challenges when returning to school

'I couldn't exercise or see my friends.'

'It impacted learning, we didn't get the usual learning but played games. To do maths we played Monopoly.'

'It was weird to be in a group again.'

'It was a challenge to come back to school, my maths had suffered.'

'I was lucky because I came to school because my parents were key workers.'

SUPPLEMENTARY THEME – HEALTH AND WELLBEING IN THE SCHOOL ENVIRONMENT

Across the young people discussions there were references to school-specific issues. Themes included:

- The need for student mentoring initiatives so that people didn't fall into bad company.
- School uniforms – some support wearing them, others don't.
- More support for those with Special Educational Needs and dyslexia:

'I talk to the teachers, and they say we'll talk to you but then they don't do anything so I'm confused.'

'Other people [with learning challenges] are struggling.'

- Anxiety about exams/ educational expectations.
- Awareness of the pressures and challenges that teachers are under, and how that impacts students.
- Anxiety about security measures in schools, such as cameras:

'I feel unsafe because of the security. More security makes you feel under pressure, like being in a prison.'

- Relaxing rules about mobile phones:

'In break times we should be allowed to use our phones. Usual teenage activity is to be on phones.'

LOCAL STORIES

'Brenda' - sixties

Brenda has lived in Littlemore for 12-13 years and although she's not completely satisfied with the area but she feels she is part of the local community and is a very active volunteer. She notes she *'could tell you a lot of negative things [about living here but] the positive is that you can support people...I see a need and then I just go for it.'* She likes the local shops and has a lot of health issues including four chronic illnesses but *'doesn't let them define her [and feels] part of a church family who are supportive.'*

Over the years she has observed that *'there's a lot of alcohol... there's a lot of selling drugs, dealing drugs, taking drugs [and that] we haven't got a real support system for people with habits and drugs and we don't do enough with the hospital... It's a fear of the unknown... if you haven't been trained or you don't see behind [the behaviour]. I'm sort of in a capacity of helping others to understand, to show the person behind the problem. And it's getting better.'* She also notes *'there needs to be more awareness raising in the community [about alcoholism, drugs and mental health] so people aren't so frightened.'*

Brenda feels more policing might help but realises ‘they can only do so much... they do have police raids, where they go in, like a drug bust - that’s happened a few times’. She mentioned that she had to phone the police about a neighbour who she has a good relationship with but because of what was going on with her ‘*alcoholism, drugs and everything... If she goes off the medication and drinks.. [her behaviour becomes challenging]. I feel so, so sorry for her but I have to keep my health and safety.*’

Brenda feels there definitely needs to be more training and more facilities and ‘*more money to be able to run something for people who need support.*’

Summary of focus group key themes – residents aged 35+

Research question	Main themes
1. What do you value about Littlemore?	Green spaces and parks - <i>but improvements needed</i>
	Diversity of the community and culture
	Proximity to the countryside (e.g. access to Sandford and the river) and City – best of both worlds – but need to ensure future connections as development happens in the area
	A unique rural-urban identity. But rapidly losing the rural element as development happens
	Support and sense of community for young parents
	Support and sense of community for older people
<p>‘Chose to live here because it’s close to town but you can also get out to the countryside easily.’</p> <p>‘Real, strong community supporting parenthood, motherhood in particular, believe it or not there is a group happening every day in Littlemore. If you look for it, and it is relevant to you, there is a real sense of community here [which is counter to] what you see on Facebook where people are often talking about a lack of community.’</p>	
2. What are the local strengths, resources, local groups and organisations etc. that support community health and wellbeing?	Church groups – almost every day of the week there is activity
	Library – a good asset but very far away from the new development (on Henley Road)
	Food bank
	John Henry Newman and Oxford Academy – new community Hub being developed at JHN
	Slow cooking initiative
	Outreach service from Donnington advice centre
<p>‘JHN and Oxford Academy are very valued parts of our community [including] support for families in need.’</p>	
3. What kinds of things are most challenging for you or people you know living in	Need to work on community activity/ interaction with those in the ‘middle’ between having children and being older

Littlemore that impact on health and wellbeing?	Ensuring integration/ access to community activity for those in new peripheral developments
	Sense of being overlooked in relation to Rose Hill and Blackbird Leys.
	Distances within Littlemore can be problematic (e.g. with poor mobility) for those trying to access community activity/ locations
	Real gap between providing support for people (e.g. foodbank) and helping them to help themselves, through classes/ advice etc.
	A whole range of needs – need to analyse where the gaps in support are
	Lots of people whose health and wellbeing is compromised by low income and other circumstance
	City Council do not appreciate the particular needs/ issues of Littlemore
	Significant disadvantage in Littlemore
	Transport - poor bus service/ unreliable/ routes are difficult and time-consuming
	People feel they have to leave Littlemore to get service – the focus is taken away from the community (negative impacts on identity)
	Lack of locally-available medical services having a negative impact on health and wellbeing
	The location of medical services also an issue: not everyone is able to register with a GP closest to where they live (and still outside Littlemore) – compounds access problems
	If there was an outreach medical service – challenge about where to put it to achieve equity of access for people in different parts of Littlemore
Isolation in development in the east of Littlemore (near Sainsbury's) – no easy access to the centre	
<p>'There is a sense of community when you have children because you meet other parents but as your children leave that's when you need something in the middle. There's things for older people but it's people in the middle who fall off the edges.'</p> <p>'The people who are coming into the big housing development [need to be able to access] the opportunities in the centre because they are going to be further away. If you are at the other end of Armstrong Road it is a quite a walk, particularly with young children, to get to the bus stop, and even further to walk round to the school.'</p> <p>'There are gaps – strongly need to look at where the gaps are and then see what kind of helps do families and individuals need, the homeless coming into accommodation- and people will have different needs.'</p> <p>'The City Council say we put money into the Rose Hill foodbank [and direct people there from Littlemore] but people can't get there from Littlemore, there isn't a bus. And if you walk it's very</p>	

<p>heavy with the food packages. And if you are a family with children in school... the times don't match up with pick up.</p> <p>'It's been shocking for me to find out what people are coping with in Littlemore – the significant disadvantage. Not being able to afford food, school uniforms... '</p> <p>'[The attitude of the City Council] is get people to go there [Rose Hill or Blackbird Leys] but its very difficult for some people to get there. It's fine if you are fit and healthy but those who are not are disadvantaged.'</p> <p>'[Medical appointments/ services] People find it very difficult to get where they want to be on time.'</p> <p>'It's only more recently that we have had conversations about a lack of medical facilities but the City Council told us it is not our responsibility, it's health.'</p> <p>'There's plenty of community activities – if people could only get to them.'</p>	
<p>4. In your experience, what works well in getting residents involved in projects and initiatives, and what doesn't (barriers to involvement)?</p>	Free and low-cost activities
	Work with people – don't do things to them
	Focus on disadvantaged areas – more activity needs to take place in those areas
<p>'How do you bridge the gap where we think [parish council] we are asking what residents want and providing solutions but the perception is that you are doing this to us and that is not necessarily what we want?'</p> <p>'The best thing to do is to work in depth with disadvantaged communities and try and get people to engage with each other to draw them out, join in, and set things up in those areas.'</p>	
<p>5. In terms of the discussion and design of community-based projects and initiatives – what are the ingredients for success in the long term?</p>	Befriending service
	Need for multiple groups and organisations to come together collectively to deal with issues of disadvantage
	Work on access – getting people to activities
	Work towards handing over work to the community – build confidence and create autonomy - build in skills development for volunteers
<p>'[There are groups and sessions available] but there's nowhere to go in the daytime to hang out and meet your friends. And the fact that we can't easily get to those facilities and services in other places really brings that into sharp focus.'</p>	
<p>6. Do you have any other observations about health and wellbeing in Littlemore and how it could be improved?</p>	Development does not provide additional infrastructure
	Bridge needed to cross the railway line at Railway Lane and facilitate access from east Littlemore to the centre– <i>this is in the planning application for housing development in this location</i>
	Need somewhere to go – a community hub/ centre/ café to act as focal point – potential further use of the village hall

	Community development support – a worker in the community
	A focus on integrating new arrivals – could be hugely beneficial, esp. for those new residents who need support
	Improvements to parks: exercise equipment, play equipment, accessible path – somewhere where people want to go
<p>‘The city council is not doing anything to help to create spaces within which [community services like a satellite medical practice] could open.’</p> <p>‘There needs to be somewhere to go, somewhere to talk, somewhere to share concerns, get information or whatever.’</p> <p>‘[Need a place] like a community centre like Rose Hill that is fully open most of the time so people can drop in. Village hall doesn’t offer that. Need something that is freely open and available to open up community to people.’</p> <p>‘A community centre should also be fun to go as a destination, somewhere you want to hang out. Not exclusively for those who have needs, but everyone.’</p> <p>‘You need experienced development workers, people who have those social skills and that understanding of circumstance and how to manage those situations. If there is a nice environment to share [and go to] a development worker could perhaps learn more about what the barriers are and what might be needed or appreciated by those people themselves.’</p>	

LOCAL STORIES

‘Malcolm’ – 70s

Malcolm has lived in the wider area all of his life. He feels he know Littlemore very well and moved to the area 8 years ago. He likes the friendly atmosphere and feels safe in the community.

Malcolm uses a mobility aid to get about and although he struggles to speak on the phone, he finds in person, one to one, conversations easier and also uses email to communicate. Although he can’t walk and finds speech difficult, he ‘helps himself’ as talking makes his speech stronger and he knows he needs to get out [for his mental health] and likes to chat so *‘he gets on with it’*.

He attends a local coffee morning – *‘my carer takes me and I enjoy it - chatting and playing games’* – but has realised that there are a lot of older people not going out, maybe only to the shops and so *‘they have no joy’*. He said, *‘you work and pay taxes and then get dumped. Older people need support. With support they would be happier and therefore healthier which would save money in the long run’*.

The challenges he has noticed are the state of the footpaths to get about and to the shops which he describes as, *‘terrible, diabolical and dangerous and a hazard for older people as they could fall over’*. He says, *‘It stops people going out and they could end up in hospital and cause more problems so just mend the paths.’*

He also thinks there is a need for a local GP surgery and activities to bring people together and get people out, *‘older people need companionship’*. He says, *‘some [older] people just sleep and have no motivation and loose energy. They need mental stimulation and activity... and help to get to*

places and those who can't walk very far and the disabled. They'd like to go out but can't and don't know who to ask and are too proud ...someone needs to ask them.'

LOCAL STORIES

'Andrew' - thirties

Andrew has a wife and two children and is generally satisfied with life in Littlemore. They choose to work part-time to look after their children [rather than pay for profession childcare] and have a mortgage on their house which will increase when the deal runs out in May so they *'have to think carefully about how we spend money.'*

At different points over the last four or five years he has struggled with his mental health and anxiety but is, *'grateful for the help I've had.'* He used a counselling service outside of the ward and hasn't seen mental health groups in Littlemore advertised locally but notes that *'it can be difficult to work out what's best because what's helpful for some is one-on-one ... structured private support but for other people it's meeting other people'*. Also, he misses the pharmacy that closed at Sainsburys and uses Donnington health centre on Iffley road: *'it doesn't feel like there are as many health services this way.... more towards going into town.'*

He thinks that the Low Transport Neighbourhoods (LTNs) are positive because *'my daughter can cycle to school which she couldn't before. We can have chats as we can hear each other. We are grateful it's safer and nicer. The sort of anti-LTN voices are loud, but know that there's lots of quiet, very grateful voices.'* He also cycles to work as, *'it's not very far'* and, *'we go to the local toddler group in Littlemore'*.

He appreciates the park, *'it feels like a lovely space'*, but thinks that it could be better. *'The equipment is tired and there's a lot of unused space. No real play equipment that is engaging or inviting for children... but there's a lot of potential.'* He thinks Florence Park is a great model, *'a real hub for different things and events.'*

He feels also that Littlemore needs a community space. *'Littlemore is between Sandford and Florence Park [both have great cafes] and doesn't have anything where people from the community can really meet. A café... with outdoor space where you can relax and the children can have a run around... would be something that would really help a community feel and help people get to know each other.'*

He notes that, *'it's not that people aren't willing but they are sort of quite disparate in terms of working together... groups sort of spring up and try one focus or just generic sort of wanting to do something.'* He suggests, *'a sort of central, building or place where people can gather'* would be helpful. This place could have *'events that people pass through and can meet other people.'*

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. **186 individuals were consulted across the project**; focus group attendees (40) including a focus on groups of young people; one-to-one interviews (40); and the community survey (106).

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

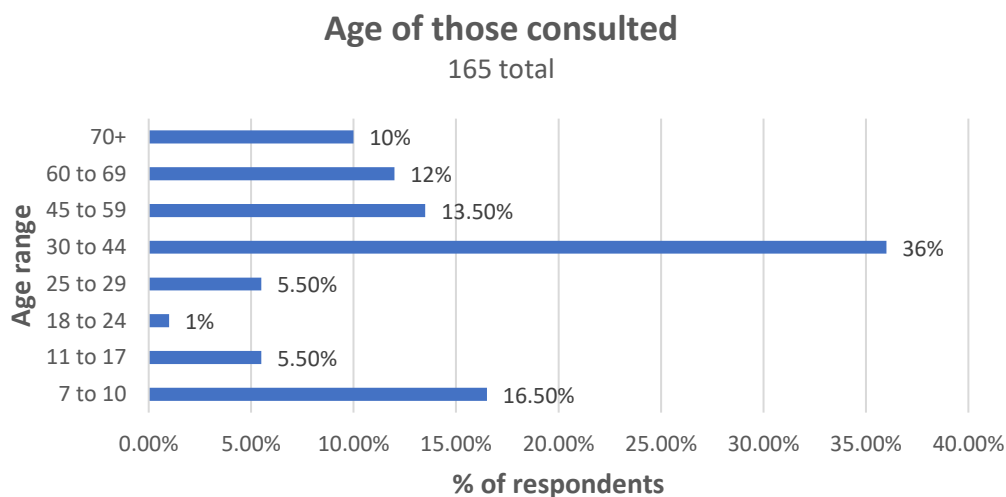
CFO had a limited, approximately ten-week period in which to undertake the research. The first weeks focused on introducing the project, building trust with local organisations and residents, and arranging specific research activities.

The objective of the qualitative research undertaken by CFO was to produce in-depth information in order to understand more about the research questions (see appendix 3). 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 interviews and the community survey) and complement this with more in-depth approaches (longer one-to-ones interviews, 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 follows²:

Figure 2 Chart showing age range of those consulted



As can be seen, the project engaged with a broad range of age groups. Over 60% of the total number of people consulted were female while over 80% were of white British/ other white ethnicity, 4.5% were Asian/ Asian British, and 2% were Black/ African/ Caribbean/ Black British. Additional research focusing on the latter ethnic groups would allow more representative opinion to be gathered, given that around 10% of the local population are Asian/ Asian British and 4% are Black/ African/ Caribbean/ Black British (ONS: 2021).

² Except 4 individuals who worked for organisations and agencies based outside Littlemore, 16 survey respondent who did not give their age, and 1 community 121 respondent.

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, such as Eastern European.

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. Evidence from the community survey – **complete survey results are available at Appendix 5** – are also presented to further and inform these findings.

Public Realm

42% of respondents to the community survey chose **green and open spaces and playparks** as something they liked about living in Littlemore. This was also reflected quite strongly in 1 to 1 conversations and focus groups across a range of demographics. 44% of respondents use parks and playparks frequently. 27% used other green spaces. The location of Littlemore, which offers access to the countryside and connections to the city of Oxford, were also referenced.

Local shops and services

26% of respondents chose **local shops** as something they liked about living in Littlemore. This suggests, conversely, a level of *dissatisfaction*, which was also noted in 1 to 1 and focus groups. However, 52% said they use local shops 'occasionally' and 38% 'frequently'.

Dissatisfaction was most noticeable and strongly expressed in relation to **healthcare facilities and services**, there being no GP surgery or health centre, pharmacy, or dental service located within the parish.

Community and social infrastructure

As is clear from mapping of community assets and community-based initiatives and projects (appendix 2), much community-based work has been undertaken in Littlemore both historically and currently on multiple themes across different demographics.

There is also a **wide range of local groups, courses and classes, community sessions, social and support groups, sports clubs, community venues** etc. available in Littlemore. It is also clear from multiple conversations that many people use and value these. There is much positive energy being expended on developing the links and relationships between volunteer and non-volunteer-led organisations and agencies active in Littlemore.

However, outside of core users it would appear that, *in general*, **quite large numbers of respondents are unaware of these opportunities**. While only 22% of people were unaware of the afternoon tea sessions at the village hall, for example, 75% were unaware of local orchestras and bands, 71% were unaware of arts and crafts courses and 69% were unaware of the gardening group.

At the same time, large numbers of respondents were unaware of most local sports groups and activities while there was *somewhat* better awareness of local groups and organisations etc. for children and young people. However, with regard to the latter, 71% were unaware of The Hang (teenage social drop in at the library), 65% were unaware of the youth club, and 41% were unaware of Growing Minds (project for parents and carers of under-5s). Other than usage of parks and green

spaces (*see above*), 'occasional' use of community venues varied from 30% for religious settings to 35% for the community centre to 59% for the village hall.

Community feeling was the top response (42%) from respondents about what they like about living in Littlemore. In addition, it would appear that people felt **generally safe in the community**, with an average response of 3.18 on a scale of 1-5 (where 5 was 'very safe') when asked if they felt safe in Littlemore.

Challenges to health and wellbeing and improvements needed

Set out in this section is: 1- further evidence relating to the local assets that support health and wellbeing set out above and how they could be improved; 2- other health and wellbeing challenges identified from research and 3 specific 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

Public realm

There was much comment about the **poor quality of roads and pavements**, with parking on pavements impeding accessibility, a situation exacerbated by the fact that many pavements in Littlemore are narrow. It was felt this was causing problems for older people, those with disabilities, and those with prams and buggies, with not enough attention being paid to the needs of these residents and the impact on their wellbeing.

The **lack of cleanliness of the built environment and the extent of litter** was also a prominent finding, including bottles being left in playgrounds. There were also many references also to public smoking, drug taking and drug and alcohol detritus. 92% and 69% of survey respondents respectively **noticed alcohol and drug consumption/ litter in public**, notably parks but also outside shop and at bus stops. Young people also made mention of people vaping and the drinking of alcohol at the underpass. There is a strong sense that – taken as a whole – these issues are causing anxiety, particularly to younger and older people.

There was a perception that **more streetlighting was needed**. Young people commented that (at this time of year) when they go to school and come back it is dark. There was also comment that not all streetlights were turned on and that they seemed less bright than they used to. Overall, this was contributing to feeling of insecurity and vulnerability, with the lack of lighting in particular locations, such as the footbridge to Sainsbury's, also mentioned.

As has been noted above, **green and open spaces and parks** are key local assets and the need to improve them was often a reference point. This is perhaps to be expected, given that 69% of survey respondents keep mentally, physically, emotionally, and spiritually healthy by spending time outside. People wanted more planting of trees, for example, improvement to paths, and desired more protection for nature in general. Concern was also expressed at the need to safeguard green spaces from potential loss, such as The Oxford Road Recreational Ground. For young people, notably, concern for green spaces was linked to wider concerns about the environment and mitigating climate change.

It should be noted that the **Littlemore Community Partnership/ Parish Council is currently taking forward several nature-based initiatives**: street tree planting; biodiversity initiatives (potentially at Oxford Road Recreation Ground); a Tiny Forest; and a community garden (a longer-term project).

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Efforts to **better include children and young people in these initiatives is to be encouraged**, given: 1- the prominence of such themes in discussions with young people and 2; the need – in general – to include children and young people more prominently in local discussions and decision making (*see below*).

Also related to outdoor spaces, there was a strong theme regarding the need to **improve facilities in local parks/ playparks**, both in terms of looking after what is already there and having more equipment, such as football goals and swings. There was also a sense that parks and local green spaces are not being used to their full potential – holding events and sessions in these locations could encourage more people to use them, to the benefit of their mental health (and also community cohesion). *It is noted that there is ongoing community-led research and community-parish council discussions regarding park improvements at the Littlemore Recreation ground.*

Local healthcare services

There was much concern noted about a **lack of access to health services**. Significant numbers of respondents found it difficult to access the John Radcliffe or Headington hospitals (49%), a pharmacy (48%), dental practice/ services (46%), and a health centre/ GP (41%). This is clearly causing anxiety for some. Problematic access likely compounds anxieties and issues noted above for certain groups in relation to the poor state of the built environment. 34% of survey respondents noted that **access to healthcare was a barrier** in looking after themselves.

The pharmacy at Sainsbury's, Heyford Hill, is now closed, as is the surgery in St Nicholas Road. Today, most people use health and dental services located in Blackbird Leys, Rose Hill or Donnington. These locations are all somewhat distant from Littlemore (more or less distant depending on where exactly people live in the parish) and can involve crossing the ring-road and walking (if you are able). In addition, local buses to/ from Littlemore do not stop in Rose Hill.

It was felt that there must be more discussion with service providers at a strategic level to explore opportunities to improve primary and secondary healthcare within Littlemore, including outreach and satellite services.

Roads and transport

There is much community activism around the **Low Traffic Neighbourhood (LTN)**. For example, the LTN is apparently one of the main issues underpinning the creation of a new, recently formed, Resident's Association.

The LTN is contentious and has contributed to community disharmony, splitting people into for and against positions as well as physically affecting the community. Traffic is now funnelled to an 'A' road to get to Cowley Centre from Littlemore (there is now no direct through road towards Cowley Centre).

For some, there are positive benefits, such as a safer road environment for children, allowing them to cycle to school, for instance. For others the LTN has led to more queues, traffic, and pollution, whilst further impeding access to services such as healthcare which are not available in Littlemore. There is a strong perception of feeling 'done to' and that the LTN was imposed on the community, with local concerns continuing to be ignored.

Public transport was also a common theme in discussions. There is a general perception that the **bus services are unreliable, infrequent, and take a long time** (exacerbated, for some, by the additional

traffic caused by the LTN). Only 9% of survey respondents use the bus daily (compared to 48% who use their car daily) and 34% found it 'not at all easy' to get from Littlemore to other parts of the city. Some people choose to cross the ring road and get a bus in Rose Hill to access services and amenities beyond Littlemore. Access to key facilities such as health care are also affected by there being no direct bus to, for example, the GP surgery in Donnington, while there is a sense that services are particularly lacking in the southern area of the parish. There was a perception that bus providers are not particularly responsive to these issues and that discussions to explore improvements in provision are necessary.

Community and social 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:

These are prominent issues for many community-based (or led) groups and organisations. It is clear that most, if not all, are stretched in terms of available time and financial resource and, for those who work with them, the volunteer pipeline is drying up (compounded by the fall-off in community activity with COVID-19 which has still not recovered).

To help tackle the volunteering challenge, a **Littlemore-wide volunteer drive** could usefully 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 and flexibility of role and time commitment**. There are excellent examples of training, supporting, and developing volunteers which can be shared and the drive could also link into the Volunteer Vision work undertaken by Oxfordshire Community and Voluntary Action and Community First Oxfordshire to learn and feed into best practice.

Networking and mutual support:

As noted above, as is abundantly clear from mapping work and multiple conversations and general feedback, there is lots of community activity taking place, much of it highly regarded by partners and clients. However, **one area of improvement relates to networking and joint-working**.

It was noted from conversations with research participants that *historically*, despite occasional successes, there had been a perception of less than effective networking and communication between organisations active in the community (community-based or otherwise). Today, there is a genuine sense of optimism that this is changing due to on the ground efforts to address just this issue. **The Littlemore Community Working Together Partnership (LCWTP)**, with its health and wellbeing subgroup, is the most visible manifestation these improvements.

Comment was also made that **partnership links should also be further explored with local businesses**, such as those at the Science Park and the Ellison Institute of Technology. Such outreach could also facilitate active business representation on the LCWTP.

To make networking additionally effective and **address common issues**, there could be a focus on specific topics. For example, volunteering, training, health and safety, safeguarding, and funding etc. These workshops could also be an opportunity to combine resources, provide joint-training (to make better use of stretched time and resources), offer pastoral support and discuss and develop joint initiatives etc.

That said, there is still a sense that more needs to be done to **facilitate inclusive community-led decision-making**, with a perception that ‘silo thinking’ continues to create barriers to effective, collective discussion. However, this is likely not because of any deliberate unwillingness to come together more effectively or because the value of doing so is not recognised, but rather reflects how stretched community organisations are and the fact that they are ‘just getting on with things’ and have a focus on different areas of the community.

As the roots of wider, more open and positive community relationships deepen, the process may help to overcome some of the **other ongoing difficulties** (likely historically rooted) that were noted, such as **problematic relationships between some key community members** as well as mitigate the criticism – also noted – of the Parish Council and its ability effectively to connect with, represent and respond to what residents want. The Neighbourhood Plan, as a resident-driven process which has undertaken extensive community consultation, will hopefully act as a positive counter to this perception. The Plan will cover a number of themes and will be very useful in terms of informing and responding to health and wellbeing challenges and opportunities within the community, while potentially offering policy-based responses to address them.

It should be noted that there is a **huge amount of determination, enthusiasm and effort being put in by a broad range of skilled and committed individuals and organisations** who are determined to make a difference to health and wellbeing in Littlemore. Sometimes this has a negative driver – the sense that Littlemore has been overlooked in comparison to community-based projects and initiatives in neighbouring places such as Blackbird leys and Rose Hill. More often, and increasingly, it appears to have a positive driver, looking to the assets within the community to build community confidence, identity, and a positive sense of place to drive community-based change.

Communication, citizenship, and involvement:

The need for **improved communication and publicity** in order to spread the word about community groups, sessions, activity etc. was a key finding. Various means of communication were referenced but the overall sense was that there is no single solution – multiple methods should be used. A holistic community communication strategy could be very usefully discussed and developed, combining a calendar, noticeboards, leafleting, and technology (websites and social media). Linking in more effectively with school communication networks is another important means of reaching certain demographics. It should be noted that ‘Littlemore Local’, the community newsletter, is an excellent resource.

At the same time, notwithstanding the clear and obvious value that many see in the work of community groups and organisations, others (*as previously noted*) are unaware of this work and the myriad organisations, sessions, and groups available locally. This is despite the fact that a significant proportion of survey respondents (43%) agree or completely agree that they know where to get information about Littlemore. Again, this suggests that ways must be found to improve communication with the wider community.

When asked how **satisfied they were with Littlemore as a place to live**, the average response on a scale of 1-5 was 2.89 (where 5 = very satisfied). This **suggests a general ambivalence**, with several reasons suggested from the research.

First, as noted above, while survey respondents could be described as feeling *generally safe* in the community, 1 to 1 and focus group conversations did pick up multiple references to **crime and anti-social behaviour** across all demographic groups, with some people stating they had been the victims of crime, including children. The overall situation could be characterised as falling into two broad

categories: those who feel safe and others who won't go out at night, in particular, or let their children go out alone.³

Second, a significant percentage of survey respondents did not agree *at all* that they are listened to (34%) or that they feel involved in decision making (40%). Only 5% agreed completely that they were involved in local decision making and only 2.5% agreed completely that their views are listened to when asked about living in Littlemore. Therefore, it is clear that a **significant minority feel somewhat estranged from 'community democracy.'**

Encouraging more people to take part in health and wellbeing activities:

In order to help achieve wider participation in community activities there was also consistent comment emphasising the need for **activity to be low cost or free**. 38% of survey respondents agreed that **taster sessions** would help improve health and wellbeing, while 66% of survey respondents stated that **free or reduced cost access to events and activities** would also help, while 51% thought that **strong community relationships and activities would bring people together**.

Comment was also made that more use of **'bring a friend' or 'buddying-up' approaches would be useful, while the timing of sessions** was also noted - some are unable to make sessions due to them taking place at times which did not fit in with their schedule. 48% of survey respondents **suggested sessions and activities at different times of the day/ week** would help improve health and wellbeing.

Encouraging residents to take part and get more involved in the community was also affected by the **location of activities**. Much happens in the 'central area' near Oxford Road. However, the distance and access to these areas from, for example, the new developments in the west by the Henley Road and in the west towards Blackbird Leys can be quite problematic. There is a strong sense from those active in the community and attending groups and activities that in these areas **many people are not accessing activities and support** (i.e. this is suspected by their *absence*). Feedback from the Neighbourhood Plan consultation would appear to support this. In a similar way, while the library was identified as an excellent local asset, it is also difficult to access for many in the community, being located in Sandy Lane, again, quite distant from *both* the 'centre' and the new developments in the west.

Location was also a factor in discussion about the potential development of a new community hub/ café (*see below- new ideas*).

OTHER HEALTH AND WELLBEING CHALLENGES IDENTIFIED FROM RESEARCH

Two prominent themes and challenges in the community conversations relevant to the wider context were the following:

Cost-of-living

The increase in the **cost of living was a prominent issue in the research**, as can be seen from 1 to 1 evidence collated above. In addition, 60% and 48% of survey respondents, respectively, have experienced barriers in looking after themselves in relation to cost and affordability and access to healthy, affordable food.

³ It is noted that Oxfordshire County Council are currently (November 2023) running a consultation on anti-social behaviour in public spaces.

Clear indications were given by those working directly to support residents in food poverty and or/ financial distress (including debt) that the **numbers seeking support have increased significantly** in the last year, and that stigma around accepting support is much lessened – this suggests a somewhat troubling ‘normalisation’ of the cost-of-living crisis. According to data provided as part of this research by Citizen’s Advice Oxford, the top debt issue among Littlemore residents from April to September 2023 was ‘fuel debts’.

Compelling anecdotal evidence was also offered (by those working directly with people affected) for example, about people skipping meals to keep food costs down and babies being bathed in cold water to reduce energy usage, and concern about the approaching winter and the ability for people to heat their homes.

In addition, the local foodbank in the Baptist Church is by referral and while people are also directed to the service at the Rose Hill Community Centre (supported by the City Council) this **is quite distant from Littlemore** and there is no bus – carrying heavy bags of food for a long distance is problematic for many and, in addition, foodbank times do not fit with school pick up, creating anxiety for parents who might not be able to get back from the foodbank in time to collect their children.

Housing

26% of survey respondents were not at all satisfied/ quite **unsatisfied with the cost of housing**. This supports evidence from those working directly/ offering advice to affected residents that housing has been the biggest issue in the past few months, including S21 eviction notices, benefits advice and rent increases.

While the **lack of social housing is a structural problem** across Oxford, including Littlemore, housing development in general was raised as a concern in the research. Criticism was made that **development** happens in a piecemeal form, with no apparent long-term strategy and a **lack of accompanying infrastructure**, which has **negative impacts on social and community cohesion**. New residents, for example (in the same way as existing ones, of course) have to seek service and healthcare requirements outside Littlemore.

There can also be potential implications for resident safety because of a lack of infrastructure. In relation to the latter, comment was made that the decision not to build a footpath linking the new development on the Reading Road through to the Sandford Road and into Littlemore has forced residents to use less safe routes along the (ever-busier) bypass.

The Littlemore Neighbourhood Plan will, it is hoped, offer community-evidenced policies to facilitate constructive discussions and develop solutions to local planning and development issues in liaison with relevant stakeholders and the local community.

SPECIFIC IDEAS IDENTIFIED TO BUILD ON EXISTING ACTIVITY AND INITIATIVES OR TO DEVELOP NEW ACTIVITY

As well as ideas noted above in relation to improving existing assets that support local health and wellbeing, other ideas were also put forward in relation to potential new initiatives and projects, related to key challenges and/ or specific demographic groups:

Mental health, isolation, and aspiration

Findings and discussion regarding **isolation** have been noted above (particularly in relation to ease of access to community activities and services). 19% of survey respondents do not find it easy at all to get round Littlemore (22% find it very easy). This likely – at least partly – reflects where people live *within* Littlemore and how the nature and design of the built environment makes it easy/ more problematic to get around. At the same time, **10% of respondents felt lonely ‘most of the time’, while 41% felt lonely ‘sometimes’.**

Mental health and anxiety were prominent themes in the research, linked, most notably, to the cost-of-living crisis (*see above*), the ongoing effects of the pandemic, and wider factors related to disadvantage. In terms of the pandemic, 23% of respondents to the survey thought that across the long term their/ their family’s health or **health and wellbeing in general was ‘very negatively affected’**, while 24% thought community health and wellbeing in general – again across the long term – was ‘very negatively affected.’ Thus, it is understandable that 51% of respondents think there should be **‘more community-led activities focused on health and wellbeing’** and 42% think there should be ‘community events to encourage interest in health and wellbeing.’

A lack of aspiration, which may also be another cause-effect of poor mental health as well as being related to other factors related to disadvantage was also noted in 1 to 1 and focus groups discussion. **Lack of local opportunities to gain skills or qualifications** may also be a causative factor in this regard: **35% did not agree at all** or very strongly disagreed **that there are local opportunities to learn new skills** and/or gain qualifications, while 42% did not agree at all or very strongly disagreed that they *felt able* to access local opportunities to learn new skills.

There was also some comment that patients from the mental health centre in the community (sometimes with support workers) can make residents ‘uneasy’. This points to somewhat of a **lack of understanding in the community regarding mental health** – therefore, it could be socially beneficial **to develop awareness training**, perhaps as **joint-projects** between the mental health centre and community organisations.

Community development practice

There was a common perception that **holistic, long-term community development approaches** yield the most positive outcomes. Working with people from the bottom-up means a commitment to **building relationships, trust, finding out what people and the community/s want and working with them to identify and design new projects** etc. An ongoing commitment to this practice, which entails the need for sustainable long-term funding may also help address community perceptions picked up in the research about not being listened to.

To this end, the value of an **on the ground community development worker** was also advocated. There is already a Rose Hill and Littlemore Community Health Development Officer (CHDO) within Oxford City Council (funded by the Public Health Grant of Oxfordshire County Council) who is in place to build and connect relationships, understand the needs of the community and to help bring forward specific ideas, projects and initiatives identified in this report to utilise the £25k funding which is attached to the Littlemore Community Insight profile. The Well Together programme (managed by Oxfordshire Community and Voluntary Action and Community First Oxfordshire) will also liaise with the CHDO and the existing community groups to award funding. **It is important that these projects and available funding are considered in the round** in order to maximise best use of resources (and share resources if and where possible) to enable the most effective health and wellbeing outcomes in the community.

The point was also made that a community development worker should also aim to **hand over projects to the community**, reducing dependency and building local confidence and building/ releasing skills and capacity by supporting and mentoring residents to 'take over'. This could also facilitate pathways to skills development, education and training, also improving outcomes related to aspiration and mental health (*see above*).

Improved use of existing/ new community venues

There are a number of existing community spaces/ buildings in the parish, including the village hall (59% of survey respondents use occasionally, community centre (35%), library (30%), and local religious settings (30%). There was discussion in 1 to 1 and focus groups regarding **improving them and potentially creating a new space in order to positively develop community cohesion and wellbeing**.

As noted above, these venues are more or less distant from residents, depending on where they live in the parish, with corresponding impacts on ease of access (and likely contributing to isolation). Notwithstanding these issues, it was felt that community might benefit from a hub/ centre which functioned in much the same way as centres in Rose Hill or Blackbird Leys. That is, a **welcoming place with extensive opening hours where people could drop in, with café facilities**. This would in turn facilitate more community connections and begin to create the relational foundations and trust needed to explore resident-led initiatives, particularly if combined with an *in situ* community development worker who could nurture these relationships.

There was discussion about whether this **could be developed in existing venues or whether a (major) new community venue could be taken forward as a local project**, identifying a space such as The George public house and developing a strategy to bring it into local ownership and management (perhaps as a CIC or a community benefit society). Such a space could act as that community Hub and even offer a setting for additional beneficial initiatives such as satellite health services and creche facilities for those parents which want to take part in events but cannot access childcare. It is recognised that this would be an ambitious project but there are multiple examples of buildings being taken into community ownership and potential funding (and other avenues such as community share offers) available to facilitate them. Also to be factored into this discussion is the imminent completion of a new community Hub at John Henry Newman Academy.

Whether in a new venue or in better-utilised existing spaces, beneficial new services suggested from the research included: **coffee mornings aimed at new residents, life-skills courses** (might include budgeting, energy efficient households), **cooking initiatives** (this could build on the success of the slow cooker classes run by the Peep learning together programme and might include a **community kitchen**, perhaps in partnership with the foodbank and), and sessions/ drop in space for **young parents** (breastfeeding, peer to peer support, stay and play etc.).

In addition, and with winter in mind, **more warm spaces in the community** would be beneficial for residents, perhaps a network of buildings, clearly advertised – a **warm space campaign could also highlight where all the spaces are located and when they are open**. The 'warm space' concept could also be developed into a 'safe space' or 'listening space,' bringing residents into community peer support networks and making links to external support services.

Young people and schools

It was noted that in terms of community session/activities to take children to, 'there is a group taking place every day of the week.'

However, there was a mixed response as to whether there was **enough for older children to do**. Some older residents perceived that there was not, while young people themselves were more split (although there was more consensus around the **need to improve facilities in the parks**). It was also noted that there are many sports groups etc. available at the schools. Also, while there is excellent youth provision via Youth Ambition in Littlemore, it may also be useful to explore whether the proposed new youth hub in Blackbird Leys may be able to provide some additional **youth outreach support to Littlemore**. A worker who could – in conjunction with existing services (such as Youth Ambition and the City Council Community Health Development Officer) - undertake **detached youth work on the street** would also be valuable.

Furthermore, as noted in the young people focus groups summaries above, whether it was school, parents, government, or local councils, while there was a range of responses, the dominant one was **young people are not listened to**. Youth representation on the Parish Council and other resident groups would be beneficial: **a youth council could be developed**, with representatives from primary and secondary schools, better ensuring that the voice of children and young people is heard and that they are represented in project (even as leaders). In turn, this could more easily **facilitate the discussion and design of intergenerational initiatives**.

Those working in education settings also noted **mental health concerns in relation to children and young people and lots of anxiety**, often linked to the continuing longer-term impacts of the pandemic (interrupted education, lack of social interaction during lock down). This has contributed to and **compounded SEND and SEMH needs**, which was described in one primary school as 'immense.' The need for quicker referrals and more support was noted, as was the fact that this is a critical issue more widely in the education sector and beyond. Young people did express frustration at a lack of SEND support, but it was also recognised both by young people and others that teachers are overworked and there are deep underlying structural problems in this area which need to be addressed. However, a **SEND support group** was put forward as an initiative which could be very beneficial for parents.

Concerns were also noted by children and young people in relation to crime and ASB, again increasing anxiety.

Older people

Compounding issues relating to isolation, access and the poor state of the public realm in many places, and particularly in relation to older people and those with mobility issues and/or disabilities, the issue of **taking clients to and from community groups/ activities etc.** was also raised.

There are ongoing discussions within the community (led by, for example, St Marys & St Nicholas Church and Age UK) to develop a **volunteer driver/ transport initiative** – this could be very beneficial for isolated residents (a previous local attempt to develop a Good Neighbours Scheme to facilitate this was unsuccessful).⁴

Multiple other ideas were also suggested to improve the health and well-being of older people: **intergenerational activities and initiatives** (there was comment made that we have to get away from idea that older people just want to be with older people); a **'buddy system'** to build confidence for

⁴ Community First Oxfordshire runs a community transport support service and can offer advice and support.

those who wish to attend activities; **music aerobics**; **community dance**; **sports for older people** such as walking rugby; and **guided health walks**.

Recommendations

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

A cross-cutting recommendation is that the health and wellbeing subgroup of the Littlemore Community Working Together Partnership (LCWTP) acts as the key local structure (and is adequately resourced to do so) in which to locate discussion and design of community-based initiatives, including the recommendations set out below. External bodies and organisation should be *strongly encouraged* to bring discussions, projects, and programmes which focus on or include Littlemore to this group.

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 will be clear from the Data Pack for the Littlemore Insight Profile, the community has significant socio-economic 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 Littlemore 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.

Public realm, infrastructure, and services

Recommendation	
1. Primary and secondary healthcare provision: discussions to explore improvements to local services	Key partners (LCWTP, Parish Council, community groups, Oxford City Council, Oxfordshire County Council etc.) to seek discussions at a strategic level with service providers to explore solutions to meet needs in Littlemore, including outreach and satellite services.
2. Local environment/ streetscape improvement discussion	Key partners to discuss: <ul style="list-style-type: none"> - Improvement of litter issues (regular community-led litter picks) - Improvements to management of verges and trees etc. - Introduction of new/ upgraded park-based equipment (including exercise equipment) and facilities – <i>community discussions are ongoing</i> - Improvements to state of repair of pavements and roads

3. Anti-Social Behaviour initiatives	Key partners to discuss ASB concerns holistically (additional police support, more support for young people, improvements to street lighting, support groups for alcohol/ drugs or those affected by it) – <i>see other specific recommendations below.</i>
4. A ‘Local Infrastructure Campaign’	Key partners to discuss how effectively and collectively to raise the profile of and address core infrastructure challenges: safer connections within new developments; local health service; bus services etc. Identify a Littlemore Infrastructure Champion (perhaps a local councillor) to raise awareness at senior levels within governmental, health etc. structures.
5. Public transport improvement discussion	Key partners to seek discussions with local bus providers with a view to improving provision for Littlemore residents.

Community, communication, and integration

Recommendation	
1. Develop a holistic, community-wide communication strategy	Key partners to explore/ discuss: <ul style="list-style-type: none"> - Shared resources - Most effective ways of reaching community and target groups (hyper-local approaches) - Economies of scale regarding publicity and outreach
2. Develop a programme of whole-community events	Key partners to develop a calendar of events for the whole community: <ul style="list-style-type: none"> - ‘Piggy-back’ on existing events or develop new ones (e.g. community lunches and community celebrations/ open days) - Introduce more school holiday events/ activities - Explore most effective ways to attract a large and diverse audience (e.g. food-based events) - Ensure community groups have stalls/ buildings are open to welcome residents (to get the word out about what’s happening locally and recruit volunteers) - Explore open-air events and exercise-based initiatives in the local parks
3. Develop a Youth Council	Key partners to lead on the creation of a Youth Council (or similar) to bring young people into community decision-making and facilitate intergenerational initiatives etc.
4. Extend community development worker support	Key partners to discuss ways and means (including funding) to look at the totality of available community development support to strategically plan and join up initiatives and help facilitate improved links between local organisations and agencies, build bridges with residents (especially those at disadvantage) etc.
5. Warm Spaces publicity campaign	To highlight to the community the location of all available warm spaces.

Community action: innovation and resiliency

Recommendation	
1. Improve joint-working and networking	<p>Discussion between local partners using existing networks to:</p> <ul style="list-style-type: none"> - Explore ideas for community activity suggested by the research and how to potentially deliver - Explore more partnership links with local businesses, such as those at the Science Park and the Ellison Institute of Technology - 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) - Identify where innovations such as creche/ childcare facilities could most usefully be made available to allow better access to community activities for parents and guardians
2. Explore innovation in community building usage and/or development of a community hub	<p>Explore usage of venues and where new or extending activity could best be targeted and located, including the potential development of a new community space/ hub. This may also include opening out facilities at Oxford Academy.</p>
3. Explore funding avenues for community innovation	<p>Parish Council to set up joint-discussion with City and County Councils to explore sources and levels of available funding (for example, Section 106 and Community Infrastructure Levy developer contributions, and also the use of Parish Council funds).</p>
4. Launch a Littlemore Volunteer Drive	<p>Discussion between local partners using existing networks to launch a volunteering drive.</p>

Community action: meeting locally-identified needs

Recommendation	
<p>Project ideas set out below are those suggested from community research. These would need to be discussed within community networks and subsequently developed via genuine and bespoke co-production (community-led).</p>	
1. Additional support for young people	<p>Key partners to discuss additional resource, including youth workers, to provide additional support sessions, including potential outreach from new initiatives in Blackbird Leys and on-street support.</p>
2. Community-based mental health initiatives	<p>Key partners to discuss improved support. This might include funding for a mental health visitor to undertake one-to-ones and group support sessions at community venues (including schools),</p>

	<p>being available for informal chats at set times in different venues, offering groups support (organised via existing community activities/ sessions).</p> <p>This might also include awareness raising sessions regarding mental health and drugs and alcohol, including dealing with difficult behaviour - these initiatives could usefully be explored in partnership with the Mental Health Centre.</p>
3. Develop new or extend existing community activities and sessions	<p>Multiple partners across the community offer informal and safe spaces where residents support each other. They are also places where new project ideas to support needs can be creatively explored.</p> <p>Key partners to discuss:</p> <ul style="list-style-type: none"> - How existing services could be developed (funding and resource requirements) - How suggestions identified in this research could be developed: new resident coffee mornings; healthwalks; exercise for older people; drop-in sessions for parents; community kitchen and cooking etc.
4. Introduce community-based Life Skills sessions	<p>Key partners to discuss resourcing and running a regular programme of community-based support sessions. These might focus on, for example:</p> <ul style="list-style-type: none"> - Household budgeting - Cooking and nutrition - Energy saving - Benefits advice - Parenting advice - Mental health coping strategies - Personal development – confidence building/ developing resilience etc.
5. Develop new or extend existing environment-based community activities, sessions, and innovations	<p>Key partners to continue to explore existing biodiversity and nature-based initiatives (e.g tree planting, Tiny Forests, community garden), and also facilitate involvement of young people.</p>
6. Support group for parents of children with Special Educational Needs and groups for children/ young people	<p>Key partners to discuss the creation of a parent-led SEN support group for parents (and/ or a group for parents <u>and</u> children/ young people).</p>
7. Develop a community transport scheme/ Good Neighbours Scheme to facilitate better access to community activity	<p>Key partners to continue to explore this initiative, which could also usefully encompass a buddy system/ befriending.</p>

8. Explore intergenerational innovation	Key partners to improve links between children and young people to develop new intergenerational connections and projects.
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Appendices

Appendix 1 - Distance to Services

Appendix 2 - Local Groups, Organisations and Assets

Appendix 3 - Research Questions

Appendix 4 - Littlemore Community Survey

Appendix 5 - Littlemore Community Survey Results