Rose Hill Community Insight Profile **Summary**

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1 Introduction

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

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

This profile focuses on one of these areas – Rose Hill - which falls within the Rose Hill and Iffley ward.

The aim of this profile is to:

- Understand what the experience is of those living in Rose Hill in relation to health and wellbeing,
- Outline the health outcomes and the factors which can influence these health outcomes and bring this to life through the voices of the community
- Present a series of recommendations that will guide action planning towards the improvement of the health and wellbeing of the community in this area
- Provide information that can be used by local organisations and stakeholders working in collaboration with residents to improve health outcomes in the area

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

- Rose Hill Community Insight Project Report by Oxford Hub
- Data for Rose Hill Estate compiled by the Public Health Intelligence team of Oxfordshire County Council

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

With thanks to The Oxford Hub, Oxford City Council and especially the Rose Hill Community Health Development Officer, the community researchers, the Rose Hill Community Profile Steering Group and the residents who gave their time to share their views.

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2 Location

Rose Hill is a neighbourhood in South-East Oxford, within the ward of Rose Hill and Iffley. Rose Hill is bordered by the village of Iffley to the north, the River Thames to the west, Littlemore to the east and the Eastern Bypass to the south.

The data relating to Rose Hill community will be presented using the Lower Super Output areas¹ (LSOAs) Oxford 16E and 16F which cover the Rose Hill Estate.

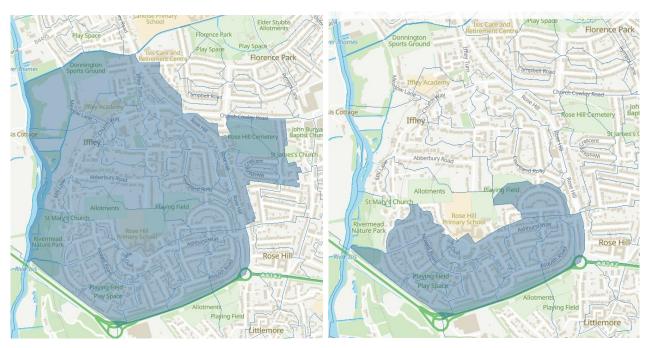


Figure 1 Map of Rose Hill and Iffley ward, and map of Rose Hill Estate.

Maps from : Build a custom area profile - Census 2021, ONS (Accessed 02/03/2023)

3 Summary of population and health data

Census 2021 data shows that, compared with Oxfordshire as a whole, the Rose Hill estate had an above-average proportion of:

- Working aged people aged 30-45 years;
- Residents from an Asian ethnic group (22% vs 6%), from a Black ethnic group (8% vs 2%) and from a Mixed background (6% vs 3%)
- People with disabilities (16% vs 15%);
- People living in social rented accommodation (45% vs 15%);
- People in routine (18% vs 10%) or semi-routine (16% vs 10%) occupations
- People who are long term unemployed (i.e. never worked or long term unemployed) (13% vs 5%).

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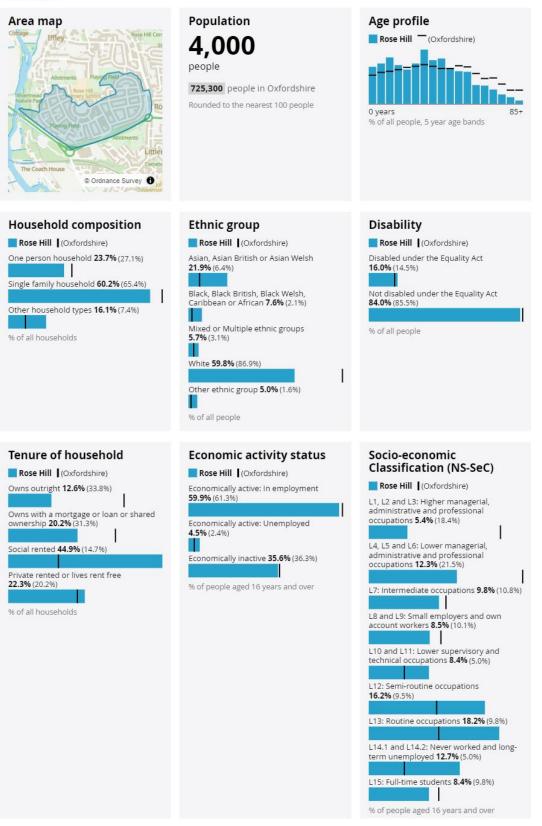
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¹ Definition of geographies available at <u>Guide to geography | Oxfordshire Insight</u>

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Figure 2 Census 2021 profile of Rose Hill estate

Rose Hill



From Build a custom area profile - Census 2021, ONS

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The three largest industry sectors for residents of the Rose Hill & Iffley ward in employment (Census 2021)² were:

- Education (18%)
- Health & Social Work (16%)
- Retail (13%)

The Rose Hill estate (LSOAs 16E and 16F) has significantly higher rates of unemployment and poverty than the Oxfordshire average.

Working aged people and families

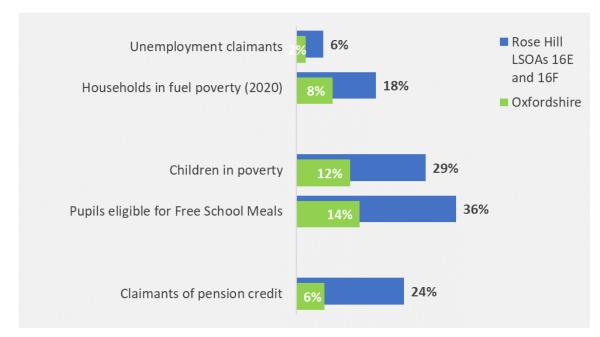
- 6% (count=125) of working aged residents in Rose Hill were claiming unemploymentrelated benefits as of February 2023³, almost three times the rate for Oxfordshire of 2%.
- The latest fuel poverty data⁴ (for 2020) showed that the Rose Hill area had 239 households estimated to be in fuel poverty, equivalent to 18% of households, over double the average for Oxfordshire (8%).

Children and young people

- 29% (count=278) of children were living in poverty⁵ in Rose Hill, over double the average for Oxfordshire (12%).
- 36% (count=300) of primary and secondary pupils living in Rose Hill were eligible for Free School Meals⁶, over double the average for Oxfordshire of 14%.

Older people

• 24% (count=105) of older residents were claiming pension credit in Rose Hill as of August 2022, over three times the average for Oxfordshire (6%).





² ONS Census table TS069 (not available by LSOA)

³ DWP claimant count February 2023 from nomisweb.co.uk including Job Seeker Allowance and Universal Credit claimants who are out of work

⁴ Sub-regional fuel poverty data 2020 Dept for Business, Energy and Industrial Strategy

⁵ DWP statXplore, children aged 0-15 in relative low income families, 2020/21

⁶ January 2022 pupil census, Oxfordshire County Council

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Indices of Deprivation

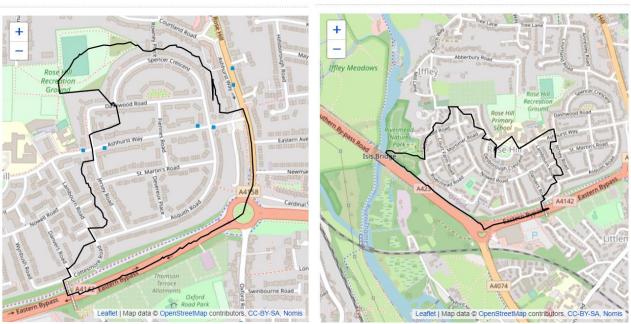
The latest Index of Multiple Deprivation report (2019) ranked one LSOA in Rose Hill (Oxford 16E), as within the 20% most deprived areas in England. LSOA Oxford 16F was ranked within the 30% most deprived areas.

016F

Map of E01028577 : Oxford

Figure 4 Maps of LSOAs Oxford 16E and Oxford 16F

Map of E01028576 : Oxford 016E



Maps from <u>www.nomisweb.co.uk</u>

On the domains of the IMD:

- LSOA Oxford 16E was classified as one of the 10% most deprived areas nationally on education and older people in poverty.
- LSOA Oxford 016F was ranked as one of the 10% most deprived areas for child poverty.

Health and wellbeing indicators

Health and wellbeing indicators for Littlemore & Rose Hill Middle Layer Super Output Area (MSOA) that are ranked **as worse** than the England average include:

- Deprivation income deprivation (all ages), children in poverty and older people in poverty,
- Emergency hospital admissions for all causes
- Deaths from all causes and preventable mortality.

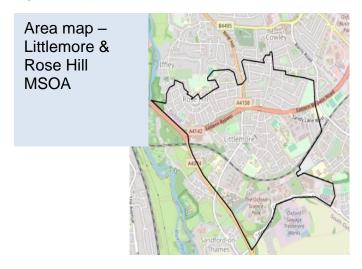
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Figure 5 Health and wellbeing indicators for Rose Hill and Littlemore MSOA

Indicator name	Value	Worst	Med	Best
(D1) Deprivation score (IMD)	29.6	86.9	18.2	2.2
(D2) Children under 16 yrs living in poverty (%) (IDACI)	28.8	64.7	13.7	0.9
(D3) Adults over 60 yrs living in poverty (%) (IDAOPI)	18.6	76.0	13.0	2.0
(D4) Households in Fuel Poverty (%)	12.1	54.1	12.4	2.5
(D5) Income deprivation (%)	19.5	48.8	10.6	0.9
(D6) Unemployment, ages 16-64 years (%)	7.8	20.8	4.0	0.7
(CH1) Emergency hospital admissions, ages 0-4 years (crude r	160.6	352.2	137.9	24.8
(CH2) Emergency hospital admissions for injury, ages 0-4 year	119.6	363.7	114.3	0.0
(CH3) Obesity: Reception year (%)	12.1	21.4	9.5	2.6
(CH4) Obesity: Year 6 (%)	17.7	39.0	19.6	4.3
(CH5) Emergency hospital admissions for injury, ages 0-14 yea.	91.6	251.2	89.2	18.7
(CH6) Emergency hospital admissions for injury, ages 15-24 ye	204.8	733.3	126.9	14.4
(H1) Emergency hospital admissions for self-harm (SAR)	174.6	541.4	88.3	10.2
(H2) Hospital admissions for alcohol-attributable conditions (SA.	122.2	391.1	95.4	35.9
(H3) Emergency hospital admissions for all causes (SAR)	143.0	215.6	96.5	31.5
(H4) Emergency hospital admissions for COPD (SAR)	138.6	554.5	88.2	9.3
(H5) Emergency hospital admissions for CHD (SAR)	74.8	396.1	96.2	23.0
(H6) Emergency hospital admissions for Stroke (SAR)	104.9	260.9	99.0	28.4
(H7) Emergency hospital admissions for heart attack (MI) (SAR)	76.0	318.7	97.0	21.4
(H8) Emergency hospital admissions for hip fracture, over 65s (.	129.7	527.4	96.6	29.3
(M1) Life expectancy at birth (Males)	78.2	66.6	79.8	94.1
(M2) Life expectancy at birth (Females)	83.7	72.0	83.6	97.5
(M3) Deaths from all causes (SMR)	99.7	251.0	97.5	36.0
(M4) Deaths from all cancer, age under 75 years (SMR)	121.1	231.0	98.0	29.2
(M5) Deaths from circulatory disease, age under 75 years (SM	104.8	374.4	95.5	12.6
(M6) Deaths from respiratory diseases (SMR)	101.6	335.4	96.8	21.8
(M7) Deaths from stroke (SMR)	77.5	415.7	95.4	0.0
(M8) Deaths from all causes, age under 75 years (SMR)	126.3	309.2	95.8	26.1
(M9) Deaths from all cancer (SMR)	129.9	200.8	99.0	32.2
(M10) Deaths from circulatory disease (SMR)	77.1	244.7	98.9	32.1
(M11) Deaths from coronary heart disease (SMR)	62.9	307.5	98.0	16.6
(M12) Preventable mortality (SMR)	135.3	378.4	93.3	17.3

Source: Area is MSOA Oxford 016; OHID Local Health from Oxfordshire JSNA inequalities dashboard <u>Workbook: Oxfordshire Local Area</u> <u>Inequalities Dashboard (tableau.com)</u>

Figure 6 Map of Littlemore and Rose Hill MSOA



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4 Community assets and local groups

As part of insight gathering Oxford Hub undertook an asset mapping exercise supported by the steering group. A range of assets were identified which supported the health and wellbeing needs of the community. Many of these groups operated out of the Rose Hill Community centre – an asset greatly appreciated by residents. A full list of these assets, including local groups, can be found within the *Rose Hill Community Insight Project Report*.

5 Community Research

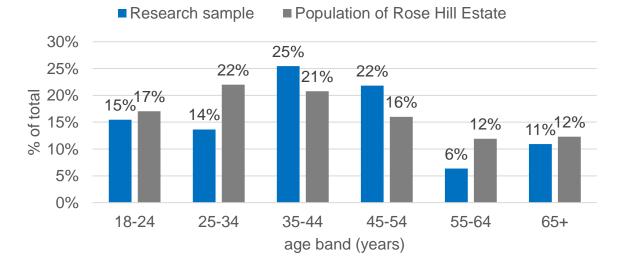
5.1 Research methodology and sample

The community insight gathering exercise was carried out between late November 2022 and early January 2023 and included:

- 87 in person surveys completed by three community researchers
- 33 responses to an online survey
- All questions used within the in person and online surveys were optional. As a result the count of respondents varied for each question and percentages presented within this report relate to respondents for individual questions.
- In total 120 individuals participated in the community insight gathering. 91.6% of these respondents (110) lived in the Rose Hill Estate at the time of the survey. The remaining 18.4% (10) respondents were former residents or lived in the neighbouring areas of Littlemore and Iffley
- An interactive "opportunity tree" activity was used at local events to gather information regarding what residents would improve about the area and what they liked.

The age profile of respondents was broadly similar to the profile of residents of the Rose Hill area (Census 2021) aged 16 and over.

Figure 7 Broad age breakdown of respondents to Rose Hill insight research vs Census 2021 population of LSOA 16E AND 16F.



Research sample = 110 respondents that stated they live in Rose Hill Estate ONS Census 2021 age group 16 and over for LSOAs Oxford 16E and 16F table TS007 from <u>www.nomisweb.co.uk</u>

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5.2 Living in Rose Hill

Respondents reported many positive aspects of Rose Hill as an area to live, citing location, community feel, ethnic diversity and facilities available to them.

The majority of respondents (73%) reported being either very or quite satisfied with Rose Hill as a place to live.

• 25% of thoes responding to the question " how satisfied are you with Rose Hill as a place to live" reported being very satisfied and a further 48% reported being quite satisfied with Rose Hill as a place to live

The proportion satisfied was slightly lower than respondents to the Oxfordshire residents survey (2022) where 78% of respondents county-wide were fairly or very satisfied with their local area as a place to live.

75% of respondents reported finding it easy to get around Rose Hill, with a total 9% disagreeing or strongly disagreeing.

75% of respondents agreed that it is easy for them to access green spaces, but a total 12% disagreed or strongly disagreed (3%).

44% of respondents reported being very satisfied and a further 25% reported being satisfied with their housing.

easy to get to centre of Oxford for work on a bike, good location to access the river and fields

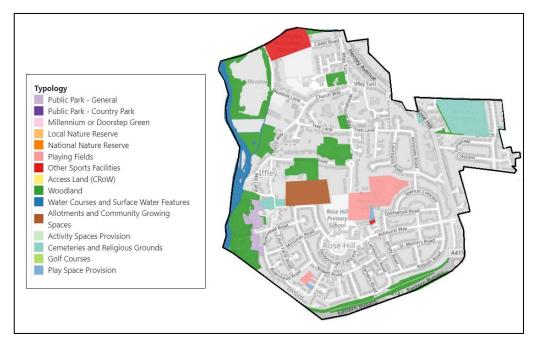
The lack of green spaces, the back of the community centre is positive but other than that, there isn't much around."

I like the Oval because you got all the trees in the spring, the tulips, daffodils, and it gives you the peace for your wellbeing...

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Figure 8 Map of Green and Blue Infrastructure in Rose Hill and Iffley Ward



Map from : Green Infrastructure Map (naturalengland.org.uk)

Local opportunities to learn new skills

The majority of respondents (55%) strongly agreed that they have the skills and/or qualifications to access employment. However, there was a strong sense that there were no local opportunities to develop skills or gain qualifications.

I don't think there are many opportunities living here I think they should produce some courses for the public in fun and engaging ways

An emerging theme amongst the professionals interviewed was the lack of confidence and low aspirations amongst residents in Rose Hill.

People who have been to uni have better access to higher level jobs. If you were to grab a person in Rose Hill and say you are going to be the financial director of a company, they will just shake their head or even laugh at you. This shows a lack of confidence.

Vulnerability and sense of belonging

42% of respondents said they rarely feel lonely, the same number said they feel lonely some of the time and 15%, said they feel lonely most of the time

45% of respondents disagreed or strongly disagreed that their views are listened to when asked about the local area, while 61% (20) disagreed or strongly disagreed that they feel involved in decision making in the local area.

The majority of respondents (62.5%) said they feel 'very safe' or 'quite safe' in Rose Hill.

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I have never felt unsafe myself but would not go through the Recreation Ground or down alleys at night.

Income and cost of living

The cost of living was referenced in relation to access to:

- healthy food
- support and facilities to get active
- healthcare
- transport

More huge issues on this estate is food poverty, having a cold house, having burglars break in and there's nothing for them to steal.

Education

Professionals interviewed regarding access to education cited (amongst other issues affecting their school):

- The impact that inequalities are having on children's learning
- The likely high levels of emotional needs experienced by local children
- Parental mental health issues, financial insecurity and drug and alcohol dependency
- Schools needing to take responsibility for providing non-statutory social care

5.3 Health and wellbeing

The majority of respondents to the Rose Hill community survey reported feeling good about their health

- Over 60% of respondents reported feeling very good or good about their health
- Those who felt their health was bad, or neither good nor bad mentioned mental health problems and physical health conditions including knee pain, asthma and COPD.

When discussing what prevents them looking after themselves. respondents identified.

- Long term conditions or disabilities (15%)
- Difficulties accessing ways to get active (21%)

I feel I don't have support or access to help me build confidence back up. I think small groups to get people together to get over anxiety etc would be good. More classes and courses available locally

Mental Health

Although not explicitly asked about within insight gathering, the theme emerged throughout the responses in the context of needing support to look after or improve mental health.

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it has been very hard to get my son to be on the CAMHS waiting list, it's a joke – Inperson survey

Access to food and healthy eating

Most online survey respondents felt that it was easy to access healthy, and affordable food

- 42% strongly agreed, and 21% agreed, healthy and affordable food was easily accessible. However, qualitative responses showed more variation in residents experiences of accessing food.
- For some residents, access to any food is a challenge, particularly with the cost-of-living crisis

The community larder saves and has saved me many times. I try to tell people that it is available. - Interview with a resident

Physical activity

Some respondents to the survey reported satisfaction with the availability of opportunities to get active.

Some of the barriers to getting active included;

- Cost of gym membership and classes
- Transport connections to the nearest leisure centre
- Limited options in the Rose Hill gym
- A lack of childcare options to enable attendance of classes

exercise classes can get expensive and can be a hard commitment with money

Perceptions of smoking, drinking and drug use

The majority of respondents to the online survey reported noticing activity or litter relating to smoking and alcohol use within the local area. Fewer respondents reported noticing activity or litter relating to drug use

- 61% said they notice people smoking around them
- 74% of respondents reported noticing litter related to drinking around them
- 57% of respondents had not noticed any activity associated with drug taking around them

Drinking isn't the issue, it is deprivation. Connecting alcohol with social concerns is a eugenics-based idea whose days have ended

Access to health care

Access to health care was a strongly emerging theme from the insight gathering. Of online respondents;

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30% disagreed that it was easy for them to access healthcare, and 15% strongly disagreed

...at times can be very hard to get down to Donnington if money is short it means a walk down and with a baby and not feeling well it can be hard, I've also found it hard having to drag my baby down to the surgery when likely getting on the bus with a poorly baby isn't nice and can feel overwhelming, I feel like Rosehill is a big place and we need our own doctors if that can't be done then I feel like we need a space we can go for health advice or just for check-ups maybe use a base in rose hill for a starting point and if it's more serious, then we would need to go to the surgery

Impact of COVID-19

Overall, respondents experienced the pandemic in different ways. The online survey showed that:

- 34% of respondents agreed or strongly agreed that they had been well supported,
- 24% of respondents disagreed or strongly disagreed that they had been supported.
- 40% of respondents agreed or strongly agreed that they had experienced a decline in their health and wellbeing,
- 23% of respondents disagreed or strongly disagreed that they had experienced a decline in health and wellbeing

6 Community priorities for improving health and wellbeing in Rose Hill

Below is a summary of the issues the respondents felt would support an improvement of health and wellbeing in the area. Further details are provided in the community insight report.

Activities

- Family workouts
- Dance classes
- More gym classes
- Half term activities for children
- More activities for babies and toddlers

Healthcare

- Health centre in Rose Hill
- Regular health drop-ins
- Community wellbeing services
- Mental health support
- Specialist support

Facilities and infrastructure

- Separate space and more funding for the youth club
- Flood lights on the recreation ground
- Goal posts in the park
- Football training pitch
- More bins and more frequent litter removal
- More shops and cafes around the oval

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Communication and awareness

- Improved communication about local activities and events
- Strengthening Rose Hill news

Accessibility and inclusion

• Subsidised or free space hire or activities

Empowerment

- Community ownership of the implementation of recommendations
- Support for community leaders to take ideas forward

Wider determinants of health

- Improvements to housing including insulation
- Investing in education and school buildings
- Providing activities and support for older children

7 Recommendations

The following is a summary of recommendations derived from the community insight project clustered by those that are shorter term and those that are longer term.

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

1. Quick wins

- Brightening up the oval with a gardening project
- Health walk for Rose Hill
- Womens only class at the Rose Hill gym
- Strengthening Rose Hill News

2. Longer term

- Improvements to housing (private and social)
- Improving access to and uptake of education
- Improvements in employment and training opportunities
- Improving residents access to healthcare including mental health support
- Changing perceptions of Rose Hill through mentoring schemes
- Community ownership of initiatives resulting from the recommendations
- Partnership working to ensure collaboration across communities and wards