

Renew Oxford: Literature Review 2025

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Introduction

Across the numerous surveys, reports, and research conducted about Oxfordshire in recent years, areas of focus have generally been on assessing need or current provision, casting a vision for the future, or any combination of the three. Therefore, this review will break down each category into thematically similar sections to be able to gain a better overview and understanding of the landscape the literature covers.

The 2023 Oxfordshire Uncovered Report finds four key needs (main categories that “stop people in Oxfordshire thriving”) to be unaffordable essentials, poor health, loneliness and fear, and a lack of opportunity, which correlate with OSP’s 2015 “Our Changing City” report, which details changes in population, employment, housing, and geographical inequalities as significant in the need people face. Current provision is seen from the 2860 charitable organisations based in the area, ranging in support with things from debt advice to food to clothing to mental health support in different locations across Oxford city and surrounding areas. There also exists a strategic map composed of many different strategies which sets out a trajectory for Oxfordshire stretching into the future.

The vision cast for the future of Oxfordshire across numerous reports has a few common threads: tackling the housing crisis in an area where average housing prices are more than 12x household earnings and 3000 households are waiting for council housing; tackling the climate emergency and bringing more nature to the area; moving towards an economy that works for everyone (referencing the since withdrawn Oxford Local Plan 2040); strengthening community and sense of culture, and improving transport links. For a county which has 10 of its wards in the 20% most deprived in England, it is vital that this vision is carried out, and carried out with geographical equality.

This review highlights six specific areas of need across Oxfordshire (Children, young people, and families; mental health and loneliness; housing and homelessness; poverty, cost of living, and food insecurity; belonging and inclusion, and climate and creation care), with a particular focus

on the city of Oxford and the literature, reports, and studies that have already been done on these areas in the three categories of needs assessment, current provision, and future vision. It is important to note that many of the studies referenced focus on Oxfordshire as a whole, so unless otherwise stated, not all statistics will be Oxford city specific.

Children, Young People, and Families

Chief Insights

- 4,300 children between 8-16 years in Oxfordshire who have a “probable mental disorder,” cannot afford activities such as sports or music lessons.
- “Oxfordshire ranks in the bottom quarter nationally for the proportion of disadvantaged students achieving good development in early years,” at 6 percentage points below the national average.
- 13,961 children under 16 live in relative low-income households in Oxfordshire, which is 10.5%.
- 1 in 4 children in Oxford city is living in poverty (with a child poverty rate of 14.4%).
- There were 854 children in care in Oxfordshire in 2023.
- In 2023, 24% of Children We Care For aged 17-18 were not in education, employment, or training (NEET), which increased to 39% for care leavers aged 19-21.
- In 2022, there were 7,818 victims of domestic abuse in Oxfordshire (2% above the 3 year average 2019-2021).
- with 12,000 children living in poverty, only 1825 early help assessments had been conducted (about 79 below the national average per 10,000 population).

Perhaps unsurprisingly, the literature outlines many challenges faced by children, young people and families in Oxfordshire today. From social, mental and emotional needs to care to crime and poverty, the needs identified are vast.

Multiple needs assessments cite an increase in the number of children in the Oxfordshire area suffering from mental health problems over the last 5 years,¹ including a general increase in the proportion of school pupils with social, emotional and mental needs.² They also report that “children with a mental disorder are also financially less likely to be able to access activities,” the Joint Strategic Needs Assessment 2024 even stating that 4300 children between 8-16 years in Oxfordshire who have a “probable mental disorder,” cannot afford them.³ A pilot project in OX4 concluded that parents felt that “they would benefit from more affordable, local, flexible

¹ Integrated Care Strategy, BOB Integrated Care Board, 2023

² Oxfordshire Prevention Framework 2019-2024, Health and Wellbeing Board, 2019

³ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

and diverse activities (e.g. swimming),”⁴ further confirming the idea that affordability and locality may be an issue when it comes to children being able to access varied initiatives.

Further to this, an assessment conducted by the Oxfordshire Education Commission showed that “disadvantaged pupils (who’ve had free school meals (FSMs) in the last 6 years or have been in care or adopted) perform lower than peers at all key stages,”⁵ as well as stating that “Oxfordshire ranks in the bottom quarter nationally for the proportion of disadvantaged students achieving good development in early years,” at 6 percentage points below the national average. One needs assessment places the figures at 13,961 children under 16 living in relative low-income households in Oxfordshire, which is 10.5%,⁶ and the Early Help Strategy 2022 identifies that there are 1 in 5 children in poverty across Oxfordshire, but 1 in 4 in Oxford⁷ (whose child poverty rate was placed at 14.4%⁸).

In addition to the proportion of children living in low income households, in 2023, there were 854 children in care in Oxfordshire⁹ (also called Children We Care For), children’s social care having seen an increase in the rate of children with a child protection plan and cared for children, which is partly cited as being due to the increase in unaccompanied asylum-seeking children. Children We Care For (CWCF) face a range of Adverse Childhood Experiences (ACEs), with 58% experiencing abuse or neglect, 12% absent parenting, and 9% whose families are in acute stress. Across Oxfordshire, 2023 saw 24% of Children We Care For aged 17-18 were not in education, employment, or training (NEET), which increases to 39% for care leavers aged 19-21. In 2021/22, the overall attainment of Children We Care For was 18.7, lower than England’s average, and “in the second worst quintile nationally.”¹⁰

Domestic abuse and crime have also been seen to increase in Oxfordshire in recent years. In 2022, there were 7,818 victims of domestic abuse (2% above the 3 year average 2019-2021)¹¹ which also represents an increase in domestic crimes affecting children,¹² and the number of contacts received by the Multi-Agency safeguarding hub.¹³ Plans for preventing the increase in need are numerous, one common aim being more Early Help, which is a “form of support aimed at improving outcomes for children or preventing escalating need or risk.”¹⁴ In 2022, the Early Help Strategy for Oxfordshire concluded that if a child or family needed help, they are 3 times more likely to be assessed by a social worker than have an early help assessment, and that with 12,000 children living in poverty, only 1825 early help assessments had been conducted (about 79 below the national average per 10,000 population).¹⁵ The Family Hubs Policy also identifies a 24% reduction in preventative spending in children’s social care in the last 5yrs, perhaps part of why early help has been seen to be implemented so little.¹⁶ Key stakeholders for one report see

⁴ Pilot of Signal for OX4 Families, Marmalade (date?)

⁵ Time For Change, Oxfordshire Education Commission, 2023

⁶ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁷ Early Help Strategy, Oxfordshire Safeguarding Children Board, 2022

⁸ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁹ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

¹⁰ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

¹¹ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

¹² Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

¹³ Early Help Strategy, Oxfordshire Safeguarding Children Board, 2022

¹⁴ NSPCC: <https://learning.nspcc.org.uk/safeguarding-child-protection/early-help-and-early-intervention>

¹⁵ Early Help Strategy, Oxfordshire Safeguarding Children Board, 2022

¹⁶ Family Hubs Policy, Children’s Commissioner (date?)

key obstacles in the lack of communication between schools and local authorities, lack of clarity and partnership, a clearly siloed way of working between teams and services that prevents the feasibility of joined-up care¹⁷.

Assessment of current provision for the above needs is lacking across the board, but the Health and Wellbeing Strategy 2024 finds that 31% fewer people are waiting for social care assessments, and the Oxford University Hospital's (OUH's) "Here for Health" free wellbeing service is encouraging physical activity and smoking cessation. Oxfordshire also has one of the largest pooled budgets between social care and health in the country.¹⁸ The Early Help Strategy also cites there having been strategic expectations from the Children's Trust agreed by all organisations, giving more communication and collaboration, which is further helped by a multi-agency group redesigning the EHA (early help assessment) form to make it more concise. Since 2019, there has been an overall increase in the number of children supported at an early help preventative level.¹⁹

In terms of future vision for better supporting children, young people and families, the literature has a few common aims and strategies. One of these is aiming for better early years support, planned provision being via a Healthy Start Scheme and an app²⁰, as well as more generally providing more support for women struggling in pregnancy and strengthening links between services for under 5s,²¹ and strengthening language development pathways, especially in most deprived families. In addition to this, tackling the challenge of inaccessible activities, the Oxfordshire Health and Wellbeing Board's strategy aims at a "system-wide approach to physical activity," especially in priority neighbourhoods, aiming towards every child learning to swim, ride a bike, and be active for an hour every day.²² In addition to this, the strategy includes expanding provision of subsidised/free physical activities for those eligible for Free School Meals (YouMove), and developing schools' active programmes. Alongside physical activity, nutrition also factors in the suggested strategies, tackling holiday hunger in certain areas²³, implementing the "Good Food Strategy," and improving access to healthy food²⁴.

Mental health and the needs of young people were identified as a key issue and, along with SEND (Special Educational Needs and Disabilities) are also addressed in multiple strategies. Strategies for these include improving access to mental health support, especially in high FSM (Free School Meals) and SEN (Special Educational Needs) schools or deprived neighbourhoods and improving access to CAMHS (Child and Adolescent Mental Health Services). Earlier identification of people with SEND is also presented as an aim, alongside providing support across many contexts that can be shaped by them and their families²⁵. Across all of the above, something that bears improvement seems to be the collaboration between schools authorities and services, as well as the voluntary sector, and this features quite heavily in future vision. From supporting the VCS (voluntary community sector) to better help children and young

¹⁷ Time For Change, Oxfordshire Education Commission, 2023

¹⁸ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

¹⁹ Early Help Strategy, Oxfordshire Safeguarding Children Board, 2022

²⁰ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

²¹ Integrated Care Strategy, BOB Integrated Care Board, 2023

²² Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

²³ Director of Public Health Annual Report 2021-22, Director of Public Health, 2022

²⁴ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

²⁵ Integrated Care Strategy, BOB Integrated Care Board, 2023

people²⁶ to improving unity between services and families and working with a “strength and needs based approach” that recognises VCSE organisations²⁷. The Family Hubs policy and vision also seems to include this, integrating existing services and better connecting public and voluntary sectors, combining universal services with the voluntary sector and access to state bodies²⁸.

Mental Health and Loneliness

Chief Insights

- Depression in Oxfordshire is above the national average, and has increased from 6.6% to 10.3% among adults since 2013-14, with 73,648 patients over the age of 18 with a depression diagnosis registered in Oxfordshire’s GP practices in 2019-20.
- 3 in every 5 people will be an unpaid carer at some point in their lifetime, in Oxfordshire almost half of these are over the age of 55, nearly a third disabled, 70% struggle with mental ill health, 60% with physical ill health, and 80% feel lonely or socially isolated.
- There are currently estimated to be 9,600 people in Oxfordshire living with dementia, more people than ever.
- 25% of year 5s and 6s and 34% of year 7-13s were worried about eating – what, where, how much – and saying it interfered with their life.
- Of year 9-13s, 30% had mental health problems in the last 12 months, 33% some serious thoughts about overdosing/trying to harm oneself.
- In 2021-22, there were 545 hospital admissions for 10–24-year-olds as a result of self-harm.
- In the 6-16 age range, young people are more likely to have a probable mental disorder if they live in one of the most deprived areas, if they have SEND or both.
- Perinatal mental illness affects up to 27% of new and expectant mothers.
- 82% of homeless people reported a mental health diagnosis (in contrast to 12% in general population)
- There were 50 deaths by suicide registered in Oxfordshire in 2020.
- Areas in Oxford that are identified as being in the highest risk quintile for loneliness are Blackbird Leys, Wood Farm, Barton, St Clements, Jericho, and Cowley.
- The number of young people in Oxfordshire who were NEET doubled in 2021
- 7.7% of those in Oxford were always lonely, the highest percentage in the county.
- 88% of adults with learning disabilities in Oxfordshire are supported to live at home (79% nationally).

²⁶ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

²⁷ Time For Change, Oxfordshire Education Commission, 2023

²⁸ Family Hubs Policy, Children’s Commissioner (date?)

Across various needs assessments of mental health and loneliness in Oxfordshire, key themes are depression, dementia, perinatal mental health, suicide, and loneliness.

Depression in Oxfordshire is more prevalent than the England average²⁹, with an increase from 6.6% to 10.3% among adults since 2013-14.³⁰ In 2019-20, 73,648 patients over the age of 18 with a depression diagnosis were registered with Oxfordshire's GP practices. Over half of social care users reported being "moderately or extremely anxious or depressed" in 2019-20,³¹ and the rate of adult (GP recorded) depression continues to increase³². A focus on unpaid carers also came out of the literature, a role which 3 in every 5 people will occupy at some point in their lifetime.³³ Almost half of these were over the age of 55, and nearly a third also disabled, 70% struggling with mental ill health, and 60% with physical ill health, while 80% felt lonely or socially isolated. The latest survey of adult carers (2021-22) shows that the proportion of those who have as much social contact as they would like to has fallen to 27%, from being 39% in 2014-15.³⁴

The needs assessments also had a focus on issues affecting the elderly, perhaps the most prevalent of which being dementia, as the estimated diagnosis of dementia in Oxfordshire is worse than the England average, Dementia Oxfordshire having seen an increase in active clients in January-March 2023 compared to the previous year.³⁵ Between 2001 and 2021, the population of people aged 75 and above has increased by 49%, with a projected increase of 62% in the following 20 years, and there are more people than ever in Oxfordshire living with dementia, with a current estimate of 9,600.³⁶ More generally, between 2022-21 and 2022-23 mental health referrals increased by 9% for 80-84s, with 23% of those over the age of 85 living in areas ranked the most deprived nationally for access to services.³⁷ The presence of Making Every Contact Count (MECC) - an approach to behaviour change that uses the millions of day-to-day interactions that organisations and people have with other people to support them in making positive changes to their physical and mental health and wellbeing³⁸ - in libraries have recorded an 84% increase in MECC conversations in 2022-23 compared to the previous year.

Young people also face a lot of issues when it comes to their mental wellbeing, mental health services in Oxfordshire having growing numbers of referrals, with 11% of 10-19s being referred (based on a forecast from Oxford Health).³⁹ Schools have also seen an increase in the proportion of pupils with social, emotional, and mental needs,⁴⁰ and the Oxwell Student Survey highlighted worries being a key issue facing young people, with 25% of year 5s and 6s worried about eating – what, where, how much – and saying it interfered with their life, up to 34% of year 7-13s. In addition, 31% of year 5s and 6s worry about their family not having enough money, also

²⁹ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

³⁰ Oxfordshire Prevention Framework 2019-2024, Oxfordshire Health and Wellbeing Board, 2019

³¹ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

³² Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

³³ Integrated Care Strategy, BOB Integrated Care Board, 2023

³⁴ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

³⁵ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

³⁶ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

³⁷ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

³⁸ Making Every Contact Count Consensus Statement, Public Health England, 2016

³⁹ Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

⁴⁰ Oxfordshire Prevention Framework 2019-2024, Oxfordshire Health and Wellbeing Board, 2019

31% for year 7-13s, and 44% of year 7-13s said they worry about the climate/environment. Of year 9-13s, 30% had mental health problems in the last 12 months, 33% some serious thoughts about overdosing/trying to harm oneself, and 21% found it difficult to access mental health support.⁴¹ In 2021-22, there were 545 hospital admissions for 10–24-year-olds as a result of self-harm (402 per 100,000)⁴². Locally, research showed that mental health disorders affect certain groups more than others, for example, those who have a disability, those from less affluent backgrounds, those from ethnic minority backgrounds, and young carers. In addition, 21% of 5-16 year olds in the most deprived areas have a probable mental disorder (17.6% in the least deprived), and 56.7% of 6-16-year-olds with SEND do (12.5% for those without SEND).⁴³

Maternal mental health was also mentioned in multiple reports, stating that perinatal mental illness affects up to 27% of new and expectant mothers.⁴⁴ Of the respondents to a survey on the topic, 38% felt their experience of care and support during and after labour and childbirth negatively affected their mental wellbeing, 41% who experienced mental health difficulties said they were not offered a referral or any information about organisations that could support them, a recurring theme being that they had to advocate for themselves.⁴⁵

One needs assessment in particular also referenced that 82% of homeless people reported a mental health diagnosis (in contrast to 12% in general population), and that an estimate states that just over 18,000 adults may benefit from some kind of treatment/support for harmful gambling.⁴⁶ The final key point drawn out about mental health was suicide being one of the leading causes of death in England for 20s-64s, with a disproportionate risk for those in deprived areas,⁴⁷ there having been 50 deaths by suicide registered in Oxfordshire in 2020.⁴⁸

Loneliness seems to be quite a big issue facing residents in Oxfordshire today. One survey notes that for working age adults their “wellbeing across Oxfordshire is generally good,” while noting young adults and older adults as faced with the issue of loneliness.⁴⁹ One survey notes that 24% of those over 16 feel lonely always, often, or some of the time (6% always/often lonely), and in 2023, 23.3% of unpaid carers reported sometimes, often, or always feeling lonely.⁵⁰ Areas in and around Oxford that are identified as being in the highest risk quintile for loneliness are Cherwell (Banbury, Bicester Town); Oxford (Blackbird Leys, Wood Farm, Barton, St Clements, Jericho, Cowley); and South Oxfordshire (Didcot South).⁵¹ According to the ONS (Office for National Statistics), 16% of 12 year olds, and 13% of 18 and 20 year olds said they often feel lonely, 27.5% of those on free school meals did, compared to 5.5% who were not, and of children living in urban areas 19.5% said so, whereas only 5% of those in rural areas did. In a different survey,

⁴¹ OxWell Student Survey, Oxfordshire Health and Wellbeing Board, 2023

⁴² Oxfordshire Mental Health Prevention Framework 2024-27, Mental Health Prevention Concordat Partnership, 2022

⁴³ Children and Young People's Emotional Wellbeing Promotion and Mental Ill Health Prevention Strategy 2022-25 Draft, Oxfordshire County Council, 2022

⁴⁴ Oxfordshire Mental Health Prevention Framework 2024-27, Mental Health Prevention Concordat Partnership, 2022

⁴⁵ Maternal Mental Health in Oxfordshire, Healthwatch, 2023

⁴⁶ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁴⁷ Integrated Care Strategy, BOB Integrated Care Board, 2023

⁴⁸ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁴⁹ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁵⁰ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁵¹ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

19% of those in years 7-13 said they often felt lonely⁵². Higher rates of young adults (16-24s) deal with unemployment and loneliness, and the number of young people who were NEET doubled in 2021. The highest percentages of those always lonely were in Oxford (7.7%) and Cherwell (7.5%).⁵³

In terms of current provision for those facing these issues in Oxfordshire, a Mental Wellbeing Needs Assessment highlights the value of and strength in partnerships across organisations in Oxfordshire, for example the partnership between Public Health Oxfordshire, PHE South East and Banbury Madni Mosque for an “Every Mind Matters” mental health campaign, or the partnership between Cherwell District Council, Oxfordshire Mind and Resilient Young Minds working with year 5 and 6 students to better understand stress, anxiety & self esteem.⁵⁴ Another emphasis on the current provision being given was on the support given for independent living, such as the City Council Home Improvement Agency, which supports older, disabled, and vulnerable residents to live in their own home, as also 88% of adults with learning disabilities in Oxfordshire are supported to live at home (79% nationally).⁵⁵ MECC is also listed as key to provision for the elderly⁵⁶, and the literature also places and emphasis on social prescribing in Primary Care Networks, having link workers in GP practices, and how in some areas (such as in Barton), social prescribing is well-embedded into the GP practice system.⁵⁷ Other things noted include Community First Oxfordshire supporting the running of a community space,⁵⁸ and one strategy identifies 55 services which address different parts of the issue from “getting advice” (8 organisations, 8 projects) to “getting help” (15 organisations, 15 projects) to “getting more help” (1 organisation, 6 projects) to “getting risk support” (1 organisation, 1 project), but also notes this is not exhaustive.⁵⁹ It is also noted that there are many tools available digitally for finding a range of support from talking therapies referrals to interactive maps detailing different organisations and the support they offer⁶⁰.

With regards to future vision for Oxfordshire in this regard, there are a few issue-specific aims that are highlighted such as gathering data aiming towards a better understanding of perinatal wellbeing and early years,⁶¹ and listening to ethnic minority groups on how to provide relevant support, ensuring cultural sensitivity.⁶² In addition to these, there is an emphasis on supporting more older residents to remain independent and healthy for longer, and increasing formal diagnoses of dementia, with an improvement in the support available, and effective prevention plans including expanding the use of the local Better Care Fund to provide integrated support.

⁵² OxWell Student Survey, Oxfordshire Health and Wellbeing Board, 2023

⁵³ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁵⁴ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁵⁵ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

⁵⁶ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁵⁷ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁵⁸ Director of Public Health Annual Report 2021-22, Director of Public Health, 2022

⁵⁹ Children and Young People’s Emotional Wellbeing Promotion and Mental Ill Health Prevention Strategy 2022-25 Draft, Oxfordshire County Council, 2022

⁶⁰ Oxfordshire Mental Health Prevention Framework 2024-27, Mental Health Prevention Concordat Partnership, 2022

⁶¹ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁶² Integrated Care Strategy, BOB Integrated Care Board, 2023

On top of this, strategies state an aim to improve support for dementia carers and review dementia diagnosis pathways and memory clinic capacity.⁶³

Community care also stands out as a core theme, aiming to utilize community health development officer roles to build community connection in priority areas, increasing their resilience in covering a range of support and addressing barriers to excluded groups, and promoting the use of social prescribers.⁶⁴ There is also an emphasis on improving access to support, identifying those likely to need earlier support (such as unpaid carers), and joining it up across healthcare, mental health care, and the VCSE sector, ensuring that care staff are also aware of the opportunities to signpost to.⁶⁵ This support also includes providing early help, and ensuring positive transitions for children and young people from child to adult mental health services.⁶⁶ By far the most mentioned aspect of future vision is better training for staff and those in the VCSE sector, one strategy mentioning increasing the skills (training) of VCS in promoting health & wellbeing, and support to gather evidence of effectiveness,⁶⁷ another discussing identifying opportunities to train those people turn to for initial support⁶⁸, and a third aiming to “upskill frontline staff.”⁶⁹

Housing and Homelessness

Chief Insights

- 600-700 people sleep rough in Oxfordshire every year.
- The number of people estimated to be sleeping rough on a single night has risen for the third year in a row (to 60 people).
- 77% of rough sleepers in Oxfordshire on a single night in autumn 2023 were in Oxford.
- In 2023 there were an estimated 1827 working age homeless households in the county.
- There were 27 recorded deaths of homeless people in Oxfordshire between 2021 and 2023, an estimated increase of 53.7% from previous years.
- 1/3 of homeless women have experienced sexual trauma, and ¼ of women sleeping rough have been sexually assaulted while on the street.
- 75% of the street homeless experience mental ill health.
- People who are homeless also attend A&E 6 times as often, are admitted to hospital 4x as often, stay 3x as long.
- House prices in Oxfordshire are 61% higher than the England average.

⁶³ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

⁶⁴ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

⁶⁵ Integrated Care Strategy, BOB Integrated Care Board, 2023

⁶⁶ Children and Young People’s Emotional Wellbeing Promotion and Mental Ill Health Prevention Strategy 2022-25 Draft, Oxfordshire County Council, 2022

⁶⁷ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

⁶⁸ Mental Wellbeing Needs Assessment, Oxfordshire County Council, 2021

⁶⁹ Oxfordshire Mental Health Prevention Framework 2024-27, Mental Health Prevention Concordat Partnership, 2022

- Nursing staff working in Integrated Care Systems (ICS) are likely to spend 58% of their salaries on housing.
- In 2018-19, only 13% of those placed in supported housing gained access to settled housing, not fulfilling quotas.

600-700 people sleep rough in Oxfordshire per year,⁷⁰ with the number of people estimated to have been sleeping rough on a single night in Oxfordshire in March 2023 being 58, a 76% increase from March 2022. The number of people estimated to be sleeping rough on a single night has risen for the third year in a row (to 60 people).⁷¹ The Joint Strategic Needs Assessment 2024 also found that 77% of rough sleepers on a single night in autumn 2023 were in Oxford, which had the highest number of rough sleepers in March 2023 (followed by Cherwell). That's a rate of 10 people per 100,000 (over 18s), higher than the rate of 6 in the South East. In 2023 one needs assessment found there to be 1827 working age homeless households in the county,⁷² and in 2022-3 2,091 households were assessed as owed homeless duty (prevention or relief) in Oxfordshire, up from 1,822 in 2021-22, also in contrast to 2,655 being assessed in January-December 2023. There are many factors identified as endangering the wellbeing of those sleeping rough, from physical ill-health to mental ill-health. The average age of death of someone experiencing homelessness is roughly 30 years lower than the general population, dying on average between 43 and 47⁷³. There were 27 recorded deaths of homeless people in Oxfordshire between 2021 and 2023, and an estimated increase of 53.7% in the number of deaths. Between April 2022 and March 2023, 344 homeless patients were admitted to hospital, with 15.2% staying over 3 weeks, and within a 28 day period 19.8% of patients were readmitted in an emergency to hospital.⁷⁴ There are also other factors: approximately 1/3 of homeless women have experienced sexual trauma, and many experience domestic violence while homeless. Those sleeping rough are 17 times more likely to be victims of violence, with ¼ of women sleeping rough have been sexually assaulted while on the street.⁷⁵ 75% of the street homeless experience mental ill health, with 82% being reported to have a mental health diagnosis (12% in the general population), it can be "both a cause and a consequence." 2/3 report using drugs or alcohol to cope. Those sleeping rough are also more likely to have physical ill health, from being 34 times more likely to have TB; 50 times more likely to have Hep C; 12 times more likely to have epilepsy; 6 times more likely to have heart disease; 5 times more likely to have a stroke; and 2.5 times more likely to have asthma. People who are homeless also attend A&E 6 times as often, are admitted to hospital 4x as often, staying 3x as long.⁷⁶

The literature also outlines some of the issues with regard to housing itself. House prices in Oxfordshire are 61% higher than the England average, compared to 2011 there are now fewer owner occupiers and more private renters with poorer quality homes. In the last year, 39% of homes don't meet the standard set by the government's fuel strategy. One report states that nursing staff working in Integrated Care Systems (ICS) are likely to spend 58% of their salaries

⁷⁰ Oxfordshire's Homelessness and Rough Sleeping Strategy 2021-26, Oxford County Council, 2021

⁷¹ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁷² Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

⁷³ Oxfordshire's Homelessness and Rough Sleeping Strategy 2021-26, Oxford County Council, 2021

⁷⁴ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁷⁵ Oxfordshire's Homelessness and Rough Sleeping Strategy 2021-26, Oxford County Council, 2021

⁷⁶ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

on housing. The Better Homes Better Health report also finds poor quality homes, financial stress impacts on health, and seeking support is stressful and exhausting.⁷⁷

Another key aspect of the needs assessment was housing provision and social housing. The Oxfordshire housing, social and health systems are fragmented, and linked to location which means people are given very little choice or input.⁷⁸ In 2018-19, only 13% of those placed in supported housing gained access to settled housing, the quotas for move on allocations are not being filled, and the level of social housing lettings per 1000 is above the national average. The number on social housing registers has fallen faster than national average, and those with mental health diagnoses are frequently denied access to housing registers, and council/voluntary work to secure access to the private rented sector is patchy, not consistent across the county.

In terms of what the literature says on the current provision, the Better Housing Better Health (BHBH) report states that the service provided by the NEF (National Energy Foundation) started home visits in 2022, which brings with it the practical benefit that they don't need to go to tons of external organisations, reducing stigma and meant that residents felt supported and listened to, complementing wider networks of support.⁷⁹ Other than this, there is little literature on the current provision for housing and homelessness.

The future vision presented for housing is presented as continuing to provide emergency support during the cost of living crisis, supporting residents to increase energy efficiency in homes and engaging with OxLEP and charter. The aim is also for increased quality and affordability of homes with improved material standards, preventing and reducing homelessness by providing settled homes. They also aimed to ensure major developments carry out health impact assessments and aspire to the Future Homes Standard, as well as implementing the Healthy Place Shaping Delivery Plan.⁸⁰ Other elements of this include for the BHBH continuing to provide home visits, cementing partnerships in working processes and taking a holistic approach to monitoring.⁸¹

The second focus of the literature tackles homelessness, emphasising making the services more personal, treating service users with respect, acknowledging people as individual and working with their strengths. The aim being increasingly to work in a “psychologically informed way,” with an awareness of the effects of past trauma and adverse childhood experiences. They focus on avoiding “gatekeeping” the delivery of services, and providing face-to-face contact, as well as ensuring services are “culturally competent” and able to respond to the diversity and individuality.⁸² Other aspects drawn out including that those in multiple exclusion homelessness are not required to sleep rough in order to get help, keeping people in the local area where possible, providing a range of flexible accommodation, adaptable for singles/couples and create safe spaces for women and LGBTQ+ rough sleepers. They also aim to identify appropriate safety nets for people with No Recourse to Public Funds (including EEA – European Economic Area – nationals having problems with Worker status), and working with

⁷⁷ Better Housing Better Health, National Energy Foundation, 2024

⁷⁸ Oxfordshire's Homelessness and Rough Sleeping Strategy 2021-26, Oxford County Council, 2021

⁷⁹ Better Housing Better Health, National Energy Foundation, 2024

⁸⁰ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

⁸¹ Better Housing Better Health, National Energy Foundation, 2024

⁸² Oxfordshire's Homelessness and Rough Sleeping Strategy 2021-26, Oxford County Council, 2021

Registered Providers to ensure applicants with support needs are ‘tenancy supported’ not ‘tenancy ready.’

Another focus is on the systems themselves, aiming for cooperation to deliver coordinated and consistent services across the county, with positive engagement with the voluntary sector and faith-based groups, and will prevent those in need of housing and support being passed between agencies. Furthermore, further vision is cast for the prevention of homelessness in future, with effective, evidence-based prevention strategies with strong links to specialist services (mental health, drug and alcohol misuse), improving access to timely, accurate information and advice on homelessness prevention, and having a data-led approach to proactively identify those who may be at risk of losing accommodation or of being discharged without accommodation. They also attempt to ensure those in supported temporary housing have clearly identified & regularly reviewed routes into settled accommodation and improving access to social housing for single households at risk (strong focus in Housing Needs teams, changes in relevant policies).

Poverty, Cost of Living, and Financial Insecurity

Chief Insights

- 9-14% of Oxfordshire households experience food insecurity. Those who are limited by health problems or disability are five times more likely to experience it.
- Of 39 areas in Oxfordshire ranked priority 3 or higher among the Priority Places for Food Index, 21 are in Oxford (53.8%).
- Food insecurity affects 9 children in every class of 30 in Oxford city.
- 60% of Oxfordshire adults are classified as being either overweight or obese, with the highest prevalence in Blackbird Leys, and 3 of the top 7 wards being within Oxford city.
- 80% of children leaving primary school can swim in contrast to 10% in areas facing greatest challenges.
- 15.3% of all Oxfordshire adults find meeting monthly bills to be a heavy burden.
- Oxford is the least affordable city in the UK.
- There are 100 community food services across Oxfordshire.

Literature around Poverty, Cost of Living, and Food Insecurity in Oxfordshire is vast, and covers multiple different aspects of this issue, from unemployment to food insecurity and hunger, the wealth gap, as well as obesity and physical activity.

Food insecurity is noted as describing anything from “worrying about ability to attain food to hunger and skipping meals,”⁸³ and one study estimates that 9-14% of households in Oxfordshire experience food insecurity⁸⁴, and that those limited by health problems or disability are five

⁸³ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

⁸⁴ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

times more likely to experience it, with people who are severely clinically vulnerable being two times more likely, food sector workers 1.5 times, and BAME (Black, Asian, and Middle Eastern) residents 2 times⁸⁵. Nationally between 2021/22 and 2022/23, the number of people in “food insecure” households has risen by 2.5 million to 2.2 million, and among the Priority Places for Food Index, Oxford contains the most highest priority areas in the district (12%), of 39 areas ranked priority 3 or higher, 21 are in Oxford (53.8%).⁸⁶ Nationally, 1/3 children in the UK live with daily food insecurity, in Oxford city it affects 9 in every class of 30.⁸⁷ One study places the percentage of those who sometimes hunger, those who struggle with food, and those who are worried about food (defined below⁸⁸) as 3.48%, 11.89%, and 12.07% respectively in Oxford City in 2021.⁸⁹ It also finds foodbank usage to be a complex picture, where those from low-income households, single people, single parents, and people affected by disability and poor health are more likely to use them. It also found that chronic low income did not lead to food bank usage as frequently as a change in economic conditions, and that due to the stigma surrounding foodbank use, it could not be used to sufficiently gauge how widespread food insecurity really is.⁹⁰

Another issue that the literature focuses on is obesity. One study states that “obesity can be a result of food poverty/insecurity,” and states that 7.3% of reception children, 16.4% of year 6 children, and 20.7% of adults are classified as obese.⁹¹ The Joint Strategic Needs Assessment 2023 finds that 60% of Oxfordshire adults are classified as being either overweight or obese,⁹² with an unequal distribution across the county as hospital admissions directly attributable to obesity are found to be four times more likely in the most deprived areas compared to in the least deprived.⁹³ In 2019-22, the highest prevalence of overweight and obesity was in Blackbird Leys, and 3 of the top 7 wards were located within Oxford City.⁹⁴ Community insights on this issue were cited as revealing that parents tend to have bigger issues than the weight of their child, and lack the skills, capacity and resources to change habits, where professionals also lack the resources and skills to advise about weight.

A further impact of the cost of living that the literature explores is the physical activity children are exposed to, as in the richest areas, 80% of children leaving primary school can swim in contrast to 10% in areas facing greatest challenges. Children from lower-income families are also 30% more likely to have low activity than children from high income families.⁹⁵

In addition to this, a large focus is the high cost of living in Oxford City, and how the average income being higher than the national average hides severe inequalities.⁹⁶ One of these

⁸⁵ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

⁸⁶ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁸⁷ Listen and Act: Roundtable on Child Food Poverty, Good Food Oxfordshire, 2023

⁸⁸ Definitions - Hungry: having skipped food for a day or more in previous month, or hungry but not eaten because couldn't afford/access food / Struggle: positive response to having sought help accessing food; skipping or shrinking a meal / Worry: chose 'very worried' or 'fairly worried' when asked about getting food)

⁸⁹ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

⁹⁰ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

⁹¹ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

⁹² Joint Strategic Needs Assessment 2023, Oxfordshire County Council, 2023

⁹³ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

⁹⁴ Listen and Act: Roundtable on Child Food Poverty, Good Food Oxfordshire, 2023

⁹⁵ Active Oxfordshire Impact Report 2022-23, Active Oxfordshire, 2023

⁹⁶ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

inequalities is financial. One study finds that to eat well the minimum income required would be £19,911, which exceeds the minimum wage and any living wage also, and would still require compromise on other aspects of life. Indeed, 15.3% of all Oxfordshire adults find meeting monthly bills to be a heavy burden, and 8% of households experience fuel poverty, having to make difficult decisions between eating and heating. Housing wise, the average house price is also 26 times the National Living Wage,⁹⁷ and the average house price is 17 times the average salary.⁹⁸ The choices of food available also seem to pose an issue, as 37% of responses to one survey indicated there wasn't a great enough cultural choice of food available, and 26% didn't feel that they had a choice but to buy the cheapest food on offer.⁹⁹ In 2019/20 a typical family needed to spend 42% of their income after housing costs on food and needs and earn approximately £16000 to not be in food poverty, this is far above the minimum wage. In fact, Oxford is the least affordable city in the UK (in 2020 it had a 17.23 housing affordability ratio). Transportation also poses an issue here, as the city centre caters for the "wealthier elevated cost of healthy eating without access to a supermarket,"¹⁰⁰ and in December 2020 there were 479 fast food outlets in Oxfordshire, generally closer to people's homes in the most deprived wards of the county,¹⁰¹ with healthier foods being nearly 3x as expensive as less healthy foods¹⁰². Poverty is also an issue across the county, with 7 MSOAs (Medium Super Output Areas) that have the higher rates of child poverty than the national benchmark¹⁰³ and approximately 10.3% of under 16s living in poverty, which rises to 21% when housing costs are considered. Life expectancy is also affected by these circumstances, which is shown as 8 MSOAs have a shorter life expectancy than the England benchmark, and how life expectancy at birth has widened from a gap of 8.5 years (2010/12) to 9.5 years (2017/18).¹⁰⁴

The needs assessed are great and vast, and provision for them is wide-ranging, with 100 community food services across Oxfordshire operated by 74 organisations (39 Emergency foodbanks, 14 Community Larders, 13 Community Fridge/cupboards, 27 Community Kitchen/Prepared meal services, 7 others),¹⁰⁵ which various studies each describe and reference a selection of. Other than the work of these various organisations which cover family support, food support, support with getting active, food waste, and much more, there is a Housing and Growth Deal and Housing Infrastructure Fund of over £500mil as an investment into infrastructure and housing¹⁰⁶, and Equality, Diversity and Inclusion (EDI) training opportunities and peer groups¹⁰⁷.

The future vision aims seem to encapsulate the majority of the issues listed above, with particular emphases on equality in systems, more affordable food options, supporting families with nutrition, and various forms of community support. One study states an aim to "rebalance food costs," making healthier food more affordable, and using local authority planning powers

⁹⁷ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

⁹⁸ Inclusive Growth Seminar Series, Oxford Strategic Partnership, 2019

⁹⁹ OX4 Food Report, Healthwatch and Oxford Community Action, 2024

¹⁰⁰ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

¹⁰¹ Director of Public Health Annual Report 2022-23, Director of Public Health, 2023

¹⁰² Director of Public Health Annual Report 2022-23, Director of Public Health, 2023

¹⁰³ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

¹⁰⁴ Inclusive Growth Seminar Series, Oxford Strategic Partnership, 2019

¹⁰⁵ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹⁰⁶ Inclusive Growth Seminar Series, Oxford Strategic Partnership, 2019

¹⁰⁷ Active Oxfordshire Impact Report 2022-23, Active Oxfordshire, 2023

to reduce the proliferation of unhealthy fast-food outlets.¹⁰⁸ Addressing this imbalance between pricing and how healthy the food is leads multiple pieces of literature to cite the Good Food Movement as a way to educate and engage employees and individuals on the importance of nutrition,¹⁰⁹ as well as for community groups to sign the Oxfordshire Good Food Charter and participate in Food Action Plans and their development. In addition to this, multiple reports hold the suggestion that supporting people in having access to affordable food can look like supporting cooking skills programmes (in a way that is culturally sensitive) and food poverty training as well as foodbanks and food networks.¹¹⁰ There is also an emphasis on supply chains being made to be more resilient through becoming more local, and the need for a growing awareness between the connection of having a target of net zero and food.¹¹¹ In addition to this, the OX4 food report, plans to introduce growing food in Blackbird Leys and other parts of East Oxford as a way to bring people together, as well as aiming to introduce advice sessions in collaboration with different organisations.¹¹²

As well as having a vision for access to affordable food, certain reports also focus more closely on providing support for families in this regard by monitoring school compliance with food requirements and approach to healthy eating,¹¹³ reducing the price of school lunches as well as allowing for free school meals to be available without it being signalled to peers, and addressing early years support with Healthy Start, increasing awareness of its existence.¹¹⁴

Another form of support there is a general aim to provide relates to employment and financial support. The Health and Wellbeing Strategy for Oxfordshire states an aim to improve quality access to employment for those furthest from the labour market, ensuring they are fairer¹¹⁵, and just generally to help the local economy by businesses and organisations choosing to buy more locally.¹¹⁶ In addition to this, providing practical financial support and advice on budgeting as well as advice on healthy food is a way this is going to be tackled in OX4¹¹⁷, as well as more generally promoting “cash-first solutions” as a preferred route for emergency aid as it allows people to be supported and still treated with dignity.¹¹⁸

The final main target for support from the literature is systemic. From aims to minimise avoidable and unfair health differences,¹¹⁹ addressing the variation in length of wait time for planned services,¹²⁰ to councils helping create food policies and supporting the development of a Food Action Plan¹²¹, there is an aim for larger institutions and systems to become more supportive and inclusive. They also aim to explore the development of local programmes to improve access for community groups and low-income families,¹²² and exploring opportunities

¹⁰⁸ Director of Public Health Annual Report 2022-23, Director of Public Health, 2023

¹⁰⁹ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹¹⁰ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

¹¹¹ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹¹² OX4 Food Report, Healthwatch and Oxford Community Action, 2024

¹¹³ Director of Public Health Annual Report 2022-23, Director of Public Health, 2023

¹¹⁴ Listen and Act: Roundtable on Child Food Poverty, Good Food Oxfordshire, 2023

¹¹⁵ Inclusive Growth Seminar Series, Oxford Strategic Partnership, 2019

¹¹⁶ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

¹¹⁷ OX4 Food Report, Healthwatch and Oxford Community Action, 2024

¹¹⁸ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

¹¹⁹ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

¹²⁰ Integrated Care Strategy, BOB Integrated Care Board, 2023

¹²¹ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹²² Community Cooking and Healthy Eating in Oxfordshire, Good Food Oxfordshire, 2024

through the Well Together programme, which links the Oxfordshire Food Strategy and healthy planning. Alongside this, raising awareness for the cost of living support available and finding ways to provide more deep-rooted and culturally appropriate support in communities seems to be integral.¹²³

To conclude, there is a wide range of vision for what provision for this issue looks like into the future, centring predominantly around community groups and programmes, signposts to relevant and helpful support – both financially and otherwise – and gaining support for initiatives around food poverty and education around the importance of nutrition.

Belonging and Inclusion

Chief Insights

- There are an estimated 12,000 young carers in Oxfordshire.
- In 2023, there were 486 care leavers aged 17-21 in Oxfordshire and 372 aged 22-25.
- In 2023, there were 8,375 victim survivors of domestic abuse.
- Between January and December 2023, there were also 217 victims of modern slavery in Oxfordshire.
- In the 2021 census, there were 1,880 people from traveller communities in Oxfordshire, with 561 in Oxford itself (0.35%).
- In January 2021, 20% of BAME households had experienced food insecurity over the last 6 months, as opposed to 9% for white British households.

In terms of Belonging and Inclusion, the literature focuses mainly around care leavers, care givers, asylum seekers, and those whose backgrounds and nationalities leave them victim to inequality or disadvantage in various regards.

The number of care givers, one report states, has fallen according to the 2021 census, but the number of hours provided by each has risen. That said, 1 in 5 UK adults provide unpaid care¹²⁴. In terms of young carers, there are an estimated 12,000 in Oxfordshire alone¹²⁵. On average, they miss 23 school days per year, which is 60% more than their peers, and are more likely to struggle at school (fall behind in reading, struggle to study for exams, and be excluded).¹²⁶ In 2023, there were 486 care leavers aged 17-21 in Oxfordshire and 372 aged 22-25, and 8,375 victim survivors of domestic abuse, a 6% increase on the 3 year average for 2020-22, with the greatest increases being in Cherwell, Oxford, and West Oxfordshire.¹²⁷ Between January and December 2023, there were also 217 victims of modern slavery in Oxfordshire (16% above the 3

¹²³ OX4 Food Report, Healthwatch and Oxford Community Action, 2024

¹²⁴ All-Age Unpaid Carers Strategy, Oxfordshire County Council, 2023

¹²⁵ charity today, 23/07/2025, <https://www.charitytoday.co.uk/data-shows-young-carers-miss-more-than-a-month-of-education-annually/>

¹²⁶ Caring and classes: the education gap for young carers, the Carers Trust,

¹²⁷ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

year average, with the greatest increase in number in Oxford in over 10 years), with Oxfordshire having the highest rate per district, which is 5.9 per 10,000.

In the 2021 census, there were 1,880 people from traveller communities in Oxfordshire, with 561 in Oxford itself (0.35%). In addition, there are quite a few people within specific immigration groups, who are often subject to inequalities under certain determinants of health for multiple different reasons, they may experience loss of identity, racism, and discrimination.¹²⁸ Such inequality is widely addressed in the literature, as one report looks at inequality experienced by people from ethnic minority backgrounds, finding that as of January 2021, 20% of BAME (Black, Asian, and Middle Eastern) households had experienced food insecurity over the last 6 months, which for white British households is 9%. For people in these situations, identity and nationality can massively affect their experience of food if they have no recourse to public funds, then foodbanks that are surrounded by stigma can be one of the only options. Even then, and also in the case of food parcels, these may be culturally inappropriate and lead to food waste.¹²⁹ Recent government reporting also shows that those from Black and Asian heritage and those in higher deprivation often suffered from significant health inequalities and higher mortality rates (as well as income, educational, and intergenerational inequalities).¹³⁰ One of the starkest inequalities noted is the social gradient of health, in which Oxford has a 13 year gap in life expectancy between the most and least deprived areas,¹³¹ and according to the 2019 Index of Multiple Deprivation (IMD), 10 of Oxford City Council's 83 neighbourhood areas are in the 20% most deprived in the UK.

In order to meet some of these needs, there are a variety of organisations reaching different groups of people who are among the most affected, and others working to help alleviate any disadvantage they may face. For instance, there are multiple charities including Be Free Young Carers, and Carers Oxfordshire that aim to support young carers mentally, emotionally, and practically, offering support groups, wellbeing advice, and more.¹³² There is also mental health support available from the Oxfordshire Mental Health Partnership, who aim to “support recovery and reduce isolation.”¹³³

In terms of support for migrants who need to access council services equitably, housing, community spaces, transport and employment, the Oxford EDI (equality, diversity, and inclusion) strategy aims to give any necessary extra support so that they can use our services and understand their rights and responsibilities.¹³⁴ In more deprived communities, where inequalities are particularly present, the council is deploying community connectors – people who are part of the community but have some training in providing support, encouraging people to connect with others. There is also a GP scheme being developed that aims to provide intensive support to a small number of patients in different areas.¹³⁵ For those in Adult Social Care, there is a framework of support in place that is performing well overall well, but leaves

¹²⁸ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

¹²⁹ A Food Poverty Action Plan for Oxfordshire, Good Food Oxfordshire, 2021

¹³⁰ Oxford Equality, Diversity and Inclusion (EDI) Strategy, Oxfordshire County Council, 2024

¹³¹ Health statistics, Oxford City Council, <https://www.oxford.gov.uk/statistics-oxford/health-statistics>

¹³² All-Age Unpaid Carers Strategy, Oxfordshire County Council, 2023

¹³³ Oxfordshire Mental Health Partnership, <https://www.oxfordhealth.nhs.uk/omhp/>

¹³⁴ Oxford Equality, Diversity and Inclusion (EDI) Strategy, Oxfordshire County Council, 2024

¹³⁵ Oxfordshire County Council: tackling hidden inequalities – Case Study, <https://www.local.gov.uk/case-studies/oxfordshire-county-council-tackling-hidden-inequalities>

some room for improvement, with support being available for family and friends who are unpaid carers.¹³⁶

In terms of vision for the future, the literature addresses many things previously discussed, focusing on ensuring services are inclusive and accessible, tackling inequality, crisis prevention, and supporting carers. One of the main priorities of the Oxfordshire EDI Strategy is to provide inclusive services, addressing barriers to them and focusing on community engagement, connecting different communities in order to jointly address issues, and shifting the focus to more asset-based community development, working with rather than for residents in their respective communities. Practically, the aim is that this looks like events that bring the community together, working with stakeholders to support access to core service provision for migrant and refugee communities, and empowering communities to help themselves, ensuring that no one is left behind.¹³⁷

In order to tackle inequality, leisure centre activities will be made more accessible, providing creches, free swimming for under 17s, and ladies-only swimming sessions, there will be a continued effort to tackle racism and hate language, tackling their root causes, and they will try to contribute to wider thriving communities objectives, such as address youth unemployment through apprenticeships, work hubs, and the Oxford Living Wage.¹³⁸ In order to prevent crises, one strategy also states an aim to prevent early, joined-up services that support customers to prevent the worst issues of inequality.

In terms of support for carers, there is an aim to identify and support them, providing opportunities for a break from a caring role, safeguarding adult and young carers at risk, and to encourage and enable them to have an active life outside of caring. It is also important to better identify the necessary support by aligning work plans across health, education, and social care, and to value and treat them as the experts in their needs.¹³⁹

To conclude, the visions cast by the reports that address it mention creating more inclusive communities, where they are given a greater voice in their development, improving accessibility of services and tackling any inequalities, as well as providing carers with space to voice their needs and provide support.

Climate and Creation Care

Chief Insights:

- In 2013, ½ of Oxford's food supply came from the UK and 1/3 from the EU with 15% coming from further afield. Of all this less than 1% was sourced directly from the region itself despite 74% of Oxfordshire's land area being agricultural.
- Since 3 of 11 Air Quality Management Areas in Oxfordshire exceeded the national target of NO2.
- Roadside air pollution in Oxford is estimated to stunt lung growth in children by 14.1%.

¹³⁶ The Oxfordshire Way in Adult Social Care, Oxfordshire County Council, 2024

¹³⁷ Oxford Equality, Diversity and Inclusion (EDI) Strategy, Oxfordshire County Council, 2024

¹³⁸ Oxford Equality, Diversity and Inclusion (EDI) Strategy, Oxfordshire County Council, 2024

¹³⁹ All-Age Unpaid Carers Strategy, Oxfordshire County Council, 2023

- It is estimated that fine particulate air pollution's effect on mortality in Oxfordshire as a whole was equivalent to 354 deaths in 2022.
- 84% of healthcare facilities in Oxfordshire are in areas of high heat risk.
- 19% of the population of Oxfordshire are exposed to a flood risk.

The literature on Climate and Creation Care expresses significant issues in Oxfordshire as being air quality, heat and flood risks, and greenspace deprivation. To set the scene in terms of greenhouse gas emissions in Oxfordshire, these were down 35% from 2008 in 2021, with road transport accounting for 32% of these emissions.¹⁴⁰ In terms of how food supply is changing, in 2013, ½ of Oxford's food supply came from the UK and 1/3 from the EU, with 15% coming from further afield. Of all this, less than 1% was sourced directly from the region itself despite 74% of Oxfordshire's land area being agricultural.¹⁴¹

The literature focused quite heavily on air quality and its ramifications for people's health, since 3 of 11 Air Quality Management Areas in Oxfordshire exceeded the national target of NO₂, including The Plain in Oxford¹⁴². One report stated that "poor air quality is the largest environmental risk to public health in the UK," with long term exposure being able to cause chronic conditions, and unequal health impacts for different groups of people (having a worse impact for pregnant women, children, those from lower socio-economic backgrounds, and non-white ethnic groups)¹⁴³. For example, roadside air pollution in Oxford is estimated to stunt lung growth in children by 14.1%¹⁴⁴. It is estimated that fine particulate air pollution's effect on mortality in Oxfordshire as a whole was equivalent to 354 deaths in 2022 (not being a direct cause, but a contributing factor).¹⁴⁵ Health effects of such poor air quality range from a low birth rate in pregnancy and asthma, stunted lung development, and the start of atherosclerosis in children, to coronary disease, stroke, lung cancer, and diabetes in adults and an accelerated decline in lung function, lung cancer, diabetes, dementia, and heart failure in the elderly. In addition to this, environmentally it can lead to a reduced crop yield, acidification of rain, and animal health problems.¹⁴⁶

In addition to air quality and its health impact, another issue that was focused on was risk, both in terms of flooding and temperature. Of health facilities across Oxfordshire, the majority of healthcare facilities are located in areas of medium/high heat and flood risk, especially Cherwell and Oxford itself. 84% of facilities are in areas of high heat risk.¹⁴⁷ One report states that there have been 18 significant floods since 2007, and approximately 19% of the population of Oxfordshire are exposed to a flood risk.¹⁴⁸ Higher risk areas in Oxford City with relation to the health impacts of flooding are Blackbird Leys, and Littlemore, and can mean a compromised water supply and water quality. In terms of temperature, high extremes can lead to dehydration,

¹⁴⁰ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

¹⁴¹ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹⁴² Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

¹⁴³ Air Quality Strategy 2023-2030, Oxfordshire County Council 2023

¹⁴⁴ Director of Public Health Annual Report 2023-24, Director of Public Health, 2024

¹⁴⁵ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

¹⁴⁶ Air Quality Strategy 2023-2030, Oxfordshire County Council 2023

¹⁴⁷ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

¹⁴⁸ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

heat stroke and heart attacks, where low extremes can lead to influenza, hypothermia, and heart attacks.¹⁴⁹

The final main focus of the needs assessments across the literature on this issue is greenspace deprivation. One needs assessment places Oxfordshire's most greenspace-deprived neighbourhoods (and here Oxford's most greenspace-deprived neighbourhoods) as being Barton, Littlemore, and Blackbird Leys.¹⁵⁰ Indeed, one survey identified 16 high-priority neighbourhoods in the lowest 30% of socio-economic deprivation in England, which were all located in urban clusters in Oxford and Banbury. Significant obstacles were seen to be in the majority of greenspace not being publicly accessible, and that there is no publicly accessible greenspace large enough to meet the sub-regional Accessible Greenspace Standard requirement, though one can be accessed via Public Rights of Way.¹⁵¹

In terms of current provision, most is looked at in terms of either health and nutrition, food and nature, or plans and farming. One report references the planning of "healthy weight environments" and 20-minute neighbourhoods, as well as focusing on areas where food/health outcomes are worse than the Oxfordshire average¹⁵². In addition to this, there is reference to the Climate Action Framework which looks at emissions and biodiversity, how food and waste are handled, and aims to reduce emissions and improve local supply chains. The Oxfordshire Plan 2050 also focuses on climate action planning and infrastructure, with the inclusion of growing spaces and a focus on land use¹⁵³. Good Food Oxford is also referenced, especially its Wychwood Project, which is a charity working with locals to understand, conserve, and restore Wychwood forests and habitats.¹⁵⁴

As well as these existing strategies around food supply and nature, there are also corporate and local plans that aim to assess the role of farming in climate and the economy, including sustainable food businesses as part of a green economy, and food as a facilitator of inclusive communities, where community health and wellbeing can be improved through access to affordable and nutritious food.¹⁵⁵ Concrete examples of how greener systems are being implemented include the Low Carbon Hub, in which a partially locally-funded Oxford-based social enterprise has developed 38 clean energy systems across the county having worked with schools, councils, social housing, and businesses. There is also Project LEO (low energy Oxfordshire) which aim to show potential for communities to be active in future energy systems, building on the success off Project ERIC which worked with homes in Rose Hill¹⁵⁶. There are projects underway that aim to work together to have a positive environmental impact.

In terms of future vision, a lot of the literature looked at building homes, transport and energy, services, healthcare, and the environment. In terms of homes, upgrading them was seen as a priority,¹⁵⁷ particularly in terms of insulating all existing homes to at least EPC C level and eradicating fuel poverty by 2035, and council requirements for future homes becoming requiring

¹⁴⁹ Director of Public Health Annual Report 2023-24, Director of Public Health, 2024

¹⁵⁰ Joint Strategic Needs Assessment 2024, Oxfordshire County Council, 2024

¹⁵¹ Oxfordshire's Greenspace-deprived Neighbourhoods, Leverhulme Centre for Nature Recovery, 2024

¹⁵² Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹⁵³ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹⁵⁴ Zero Carbon Oxfordshire in 2040, Friends of the Earth Oxford, 2022

¹⁵⁵ Oxfordshire Food Strategy, Good Food Oxfordshire, 2022

¹⁵⁶ Zero Carbon Oxfordshire in 2040, Friends of the Earth Oxford, 2022

¹⁵⁷ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

zero carbon standards in local plans, as well as ensuring access to safe and attractive open spaces and leading local partnerships to coordinate area-wide retrofitting beginning with the most deprived.¹⁵⁸ Another core aim stated was for more active and sustainable travel as well as improved air quality and reduced pollution. This includes adopting low carbon energy and supply chains for cleaner air, and promoting Oxon air.¹⁵⁹ It is also noted as being important to prioritise investing in integrated cycling, walking and public transport systems as well as ebike charging points and cycle routes in and between larger towns.¹⁶⁰ Energy aims include modern and clean energy infrastructure, halving emissions by 2030 in various ways (more renewable energy, retrofitting homes, more electric and active travel), in order to reach net zero by 2050, and enhancing partnerships across the county.¹⁶¹ There are also aims mentioning food but these can be found discussed at length in Poverty, Cost of Living and Food Insecurity.

In addition to these, work is also mentioned. The aim is to build a circular economy¹⁶² where businesses are meeting their carbon targets, and the local Green Infrastructure Bank is able to provide investment for economic projects with significant carbon reduction targets.¹⁶³ Access to greenspaces is also stated as being a key aim, collaborating with local communities to increase awareness of accessible greenspace, considering biodiversity, and exploring opportunities for green infrastructure to increase neighbourhood “greenness.”¹⁶⁴ There is also an aim to reduce emissions of indoor and outdoor pollutions, extend the distance from pollution sources (reprioritising road space for sustainable/active travel), and working with stakeholders on joining campaigns, providing energy efficiency advice and retrofit programmes for those in fuel poverty.¹⁶⁵

To conclude, future vision for Climate and Creation Care in Oxfordshire encompasses energy use to transport reforms to access to greenspaces, increasing neighbourhood greenness, and retrofitting homes as well as aiming to build new ones with zero carbon footprint.

Conclusion

Across the literature, Oxfordshire’s challenges are clearly interwoven and geographically uneven: high housing costs, rising mental ill-health and loneliness, food and fuel insecurity, and exposure to climate risks cluster in the same neighbourhoods (e.g., Blackbird Leys, Barton, Cowley), and are borne disproportionately by children, carers, care leavers and marginalised communities. Provision is rich but fragmented – strong VCSE activity, social prescribing and early-help ambitions often sit alongside siloed systems, variable access, and data gaps. The most credible visions point the same way: shift upstream to prevention; integrate health, social care, education and VCSE; improve affordability and quality of homes and food; expand inclusive, culturally competent services; and invest in green, connected places.

¹⁵⁸ Zero Carbon Oxfordshire in 2040, Friends of the Earth Oxford, 2022

¹⁵⁹ Health and Wellbeing Strategy 2024-2030, Oxfordshire Health and Wellbeing Board, 2024

¹⁶⁰ Zero Carbon Oxfordshire in 2040, Friends of the Earth Oxford, 2022

¹⁶¹ Climate Action Framework, Oxfordshire County Council, 2020

¹⁶² Climate Action Framework, Oxfordshire County Council, 2020

¹⁶³ Zero Carbon Oxfordshire in 2040, Friends of the Earth Oxford, 2022

¹⁶⁴ Oxfordshire’s Greenspace-deprived Neighbourhoods, Leverhulme Centre for Nature Recovery, 2024

¹⁶⁵ Air Quality Strategy 2023-2030, Oxfordshire County Council 2023

Renew Oxford's added value into this landscape is to attempt to knit together the wider Church's response to what has been highlighted here. We can convene a shared citywide map of needs and assets, broker practical partnerships around schools, family hubs and community spaces, and co-design place-based pilots that join early help, mental health support, and affordable activity/food access. By amplifying resident voice, championing evidence-led practice, and agreeing a small set of shared outcomes (e.g., school readiness, NEET reduction, housing stability, loneliness reduction), Renew Oxford has the potential to help move the system from good intentions to coordinated action – and ensure that progress is felt first where the gap is widest.