



Oxfordshire
Joint Strategic Needs Assessment
2021

Summary of findings

DRAFT for Health and Wellbeing Board
last updated 9th March 2021

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1 Introduction to this report

The Oxfordshire Joint Strategic Needs Assessment identifies the current and future health and wellbeing needs of our local population. The annual JSNA report is provided to the Oxfordshire Health and Wellbeing Board and underpins the Health and Wellbeing strategy.

This report is a summary of the main findings from the 2021 JSNA and is based on research carried out between November 2020 and February 2021.

It includes:

- An introduction to Oxfordshire;
- A one-page summary of the data that we have been able to include in this update showing early indications of the impact of COVID-19 on health and wellbeing in Oxfordshire;
- One-page summaries for the JSNA overall and for young people, for working age adults and for older people;
- A JSNA visual summary “snake” showing data by life-stage;
- A JSNA inequalities data “tartan rug” for Oxfordshire showing health and wellbeing indicators at Middle Layer Super Output Area level and highlighting which areas rank as worse or better than the England averages.

Note that the information in this report is also included as the Executive Summary of the Oxfordshire JSNA 2021.

The [full JSNA report](#) is organised into 8 chapters:

Chapter 1: **Executive summary** includes a short overview of findings, the JSNA summary “snake” of key data by life-stage, and an inequalities data “tartan rug” for Oxfordshire showing health and wellbeing indicators at Middle Layer Super Output Area level

Chapter 2: **Population** with data on the population of Oxfordshire, the latest Office for National Statistics estimates, past trends and future projections/forecasts.

Chapter 3: **Population groups and protected characteristics** summarises data on residents in selected population groups in Oxfordshire including “protected characteristics” as defined under the Equality Act of 2010.

Chapter 4: **Health conditions and causes of death** includes information on health conditions and causes of deaths in Oxfordshire, including some information on coronavirus (COVID-19) for 2020.

Chapter 5: **Behavioural determinants of health** provides data on behavioural factors that affect health and wellbeing, such as healthy weight and physical activity, smoking and alcohol, and sexual and reproductive health.

Chapter 6: **Wider determinants of health** covers conditions in which people are born, grow, live work and age, social, cultural, political, economic, commercial and environmental factors.

Chapter 7: **Service use** provides an overview of trends from data collected by providers of health, social care and related services in Oxfordshire including Local

Authorities, Health service providers, Police and Voluntary sector organisations.

Chapter 8: **Local research** includes research carried out by organisations in Oxfordshire of relevance to the topics covered by the Joint Strategic Needs Assessment.

This report and other JSNA resources are available via the [JSNA page of Oxfordshire Insight](#)

We would like to thank the very many contributors of data and commentary from organisations across Oxfordshire including:

Oxfordshire County Council, NHS Oxfordshire Clinical Commissioning Group and NHS South, Central and West Commissioning Support Unit, Oxford Health NHS FT, Thames Valley Police, Citizen's Advice Oxfordshire, Age UK Oxfordshire, Healthwatch Oxfordshire, Cherwell District Council, Oxford City Council, South Oxfordshire District Council, Vale of White Horse District Council, West Oxfordshire District Council

Thanks also to members of the JSNA Steering Group for their oversight and guidance:

Oxfordshire County Council, NHS Oxfordshire Clinical Commissioning Group, Cherwell District Council, Oxford City Council, South Oxfordshire District Council, Vale of White Horse District Council, West Oxfordshire District Council, Healthwatch Oxfordshire, Oxford University

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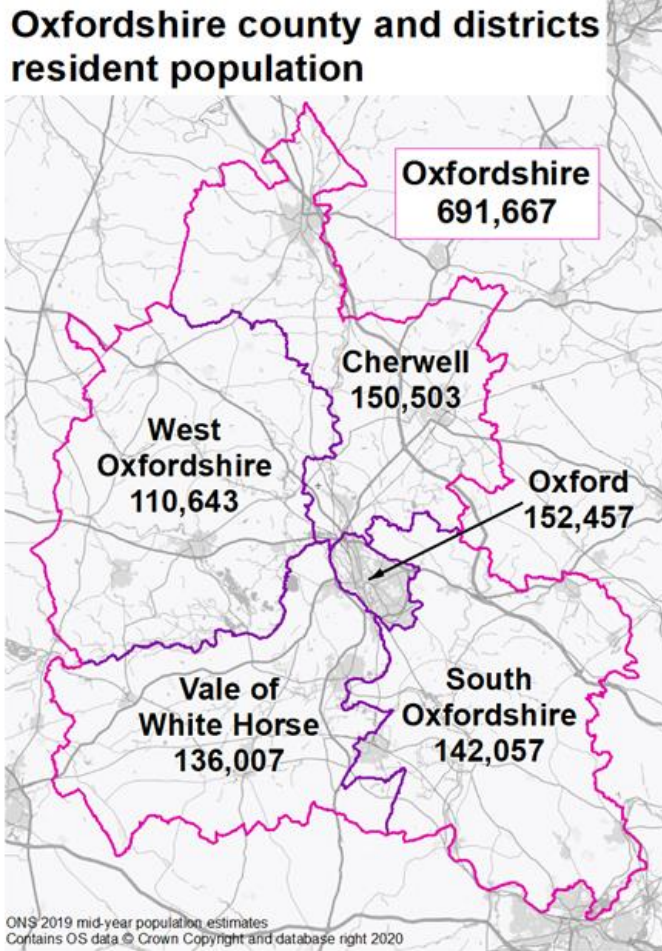
Alick Bird, Research & Insight, Cherwell District and Oxfordshire County Council

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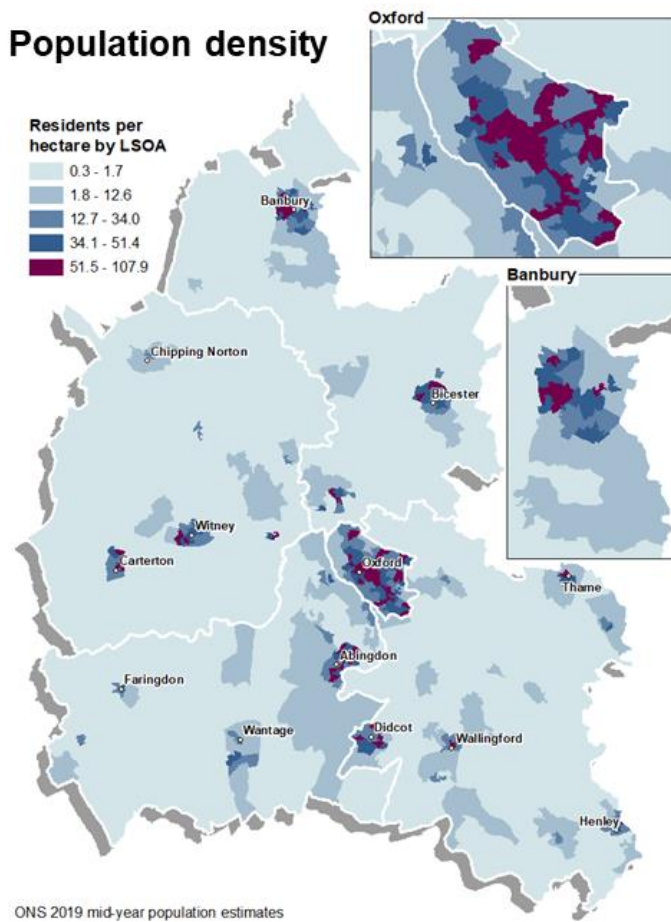
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2 Introduction to Oxfordshire

As of mid-2019, Oxfordshire was the most rural county in the South East and home to an estimated 691,667 people.



Just under a quarter (22%) of Oxfordshire's population are resident in Oxford City and 38% in the county's main towns. The remaining 40% live in smaller towns and villages.

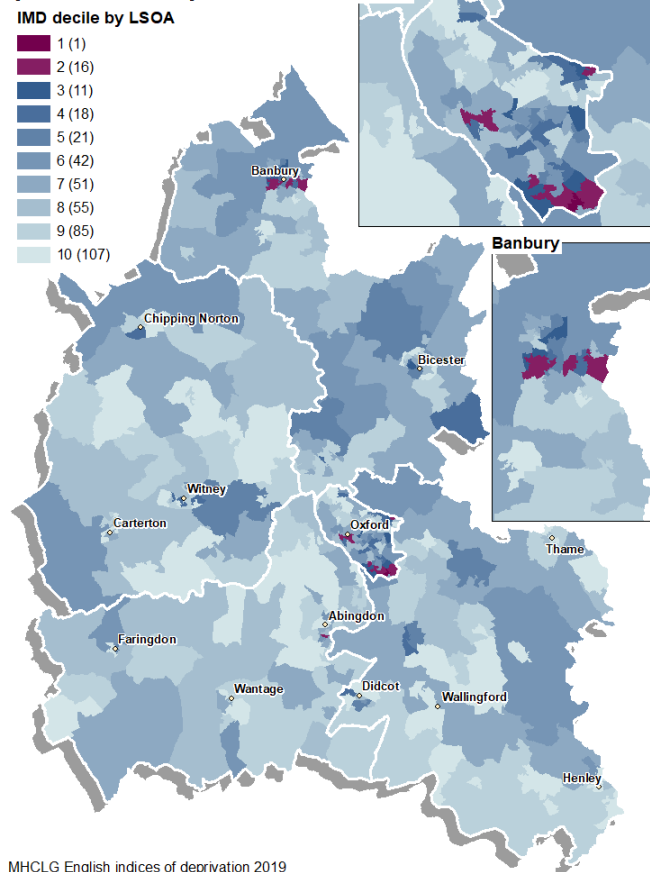


According to the Indices of Multiple Deprivation (IMD 2019), Oxfordshire was ranked the 10th least deprived of 151 upper-tier local authorities in England (up from 11th in 2015).

Oxfordshire had 1 out of 407 Lower Super Output Areas (LSOAs) ranked within the 10% most deprived areas nationally, part of Northfield Brook ward, south east Oxford.

A further 16 areas were ranked in the 20% most deprived areas nationally, 9 in Oxford City, 6 in Banbury and 1 in Abingdon.

Index of Multiple Deprivation (IMD 2019)



MHCLG English indices of deprivation 2019

[Explore deprivation data using our interactive dashboard on Oxfordshire Insight](#)

MHCLG [English indices of deprivation 2019](#)

3 Early indications of the impact of COVID-19 on Health and Wellbeing in Oxfordshire

Key findings

- From Jan-Dec 2020 there were over 19,000 confirmed cases of COVID-19 in people living in Oxfordshire and approximately 700 deaths with COVID-19 on the death certificate in Oxfordshire in 2020.
- National data shows that COVID-19 has had a disproportionate impact on ethnic minority communities and that the mortality rates from COVID-19 in the most deprived areas were more than double the least deprived areas.
- Around 21,600 people in Oxfordshire (3% of the population) were identified as Clinically Extremely Vulnerable (Feb21) and at highest risk from COVID-19.
- As a result of the COVID-19 lockdown in early 2020, the number of people claiming unemployment-related benefits in Oxfordshire increased significantly. This has particularly affected Oxford City and Cherwell and the younger age group.
- In May 2020, a Good Food Oxford survey found the number of users of Community Food Services had increased by 3 times since the start of COVID-19.
- The first lockdown of 2020 saw a significant fall in car use nationally and an increase in cycling. Cycling and walking fell in Oxford City in 2020, likely to be a result of more people working from home, less student travel and a drop in tourism visits.
- National data reports a deterioration in mental health of young people with existing mental health needs in lockdown, particularly linked to increased loneliness and anxiety.
- There has been an increase in young people Not in Education, Employment or Training and a significant reduction in advertised Apprenticeships in Oxfordshire during 2020.
- In 2020 (Jan-Dec), police recorded increases in the number of victims of domestic abuse, elder abuse, modern slavery and child sexual exploitation in Oxfordshire.
- The number of scams related to “bogus selling” reported by Oxfordshire residents has increased significantly since the start of the COVID-19 pandemic.
- All types of hospital activity and use of mental health services dropped significantly as a result of the first wave of the pandemic in 2020.
- Between March and May 2020, over 15,000 volunteers were recorded in Oxfordshire as available to help vulnerable people who were socially isolating during the Covid-19 pandemic.

4 Health and wellbeing overall

- Oxfordshire is the most rural county in the South East region.
- Oxfordshire's population is relatively healthy.
 - Oxfordshire does better or similar to the national average on most Public Health indicators.
 - Life expectancy and healthy life expectancy in Oxfordshire are each significantly higher than national and regional averages for both males and females.
- Oxfordshire's population is ageing, a trend that is forecast to continue.
- House prices are continuing to increase and the cost of renting remains well above average.
- The future growth of the population (especially the numbers of young people) is very dependent on levels of house building in future and will vary across the county.
- Air pollution causes more harm than passive smoking, and is linked to asthma, heart disease and stroke. Transport now makes up the largest share of carbon emissions in Oxfordshire.
- For 2017 to 2019, cancer was the leading cause of death in Oxfordshire, followed by Heart Disease and stroke for males and Dementia for females.
- Levels of reported anxiety in Oxfordshire appear to have increased and remain above the England average.
- Mental health rates of diagnosis and referrals are continuing to increase.
- Despite Oxfordshire's relative affluence, there are wide inequalities in health and wellbeing, Oxfordshire's more deprived wards experience significantly higher mortality rates than England.

Explore Public Health indicators for Oxfordshire, see Public Health England [Oxfordshire Public Health profile](#)

5 Summary – young people

Key findings

- After removing housing costs, 1 in 5 children in Oxfordshire are estimated to be living in poverty – within Oxford City this figure rises to a quarter of children (2018/19).
- The number of pupils with Special Educational Needs support in Oxfordshire has increased at double the England rate (to Jan20).
- The gap in early years development between lower income pupils and other pupils in Oxfordshire had increased for the second year in a row (up to 2019).
- Average GCSE attainment in Oxfordshire (2019/20) was below the regional average and similar to the national average.
- The persistent absence rate for pupils in Oxfordshire secondary schools was above (worse than) the national average (2018/19).
- The proportion of Oxfordshire's cared for children who were placed more than 20 miles from their home and outside Oxfordshire increased from 33% as at 31 March 2019 to 36% as at December 2020.
- The % of Oxfordshire's care leavers in employment, education or training was below (worse than) the national average (2019/20).
- The proportion of all young people Not in Education, Employment or Training has increased significantly (from 1.6% in Dec19 to 2.6% in Dec20) and the COVID-19 lockdowns have reduced advertised apprenticeship opportunities in Oxfordshire for young people.
- There has been a significant increase in the number of police recorded domestic abuse crimes in Oxfordshire involving children (2019/20).
- The number of mental health referrals for young people has increased significantly over the past 5 years, especially for those aged 20-24.
- Rates of self-harm hospital admissions in younger people (aged 10-24 years) have increased over time. The rate in Oxfordshire is similar to England.
- Alcohol-specific admissions for females under 18 in Oxfordshire remain higher than national and regional averages (2016/17 to 2018/19).
- Excess weight in children has remained high. As of 2019/20, 18.6% aged 4 or 5, and 29% in aged 10 or 11 were overweight or obese.
- 42% of children in Oxfordshire were not meeting the daily physical activity guidelines (2019/20).

See also Public Health England [Child Health Profiles](#)

6 Summary – working age adults

Key findings

- Earnings of Oxfordshire residents have remained above the South East and national averages.
- As a result of the COVID-19 lockdown in early 2020, the number of people claiming unemployment-related benefits in Oxfordshire increased significantly. This has particularly affected Oxford City and Cherwell and the younger age group.
- The number of people from overseas registering for a National Insurance number in Oxfordshire has continued to decline.
- In 2017-19 there were over 3,500 deaths in those aged under 75, from cancers, cardiovascular disease, liver disease and respiratory disease. 1,540 (43%) of these deaths in under 75s were considered to be preventable.
- Over half of Oxfordshire adults are classified as overweight or obese. Prevalence is higher in males, older people, some ethnic groups and more deprived areas.
- A slightly higher percentage of Oxfordshire adults meets recommended physical activity guideline (150 minutes per week) than national and regional figures, but 1 in 4 adults do not meet the guidelines
- Around 15% of the population suffer with a musculoskeletal condition. Depression and anxiety are more common in people with persistent pain.
- Learning Disabilities
 - People with learning disabilities (LD) have a lower life expectancy than average and are likely to have much higher rates of certain health conditions than the general population.
 - Rates of Epilepsy are 29 times higher for people with LD.
 - People with LD are more than twice as likely to have diabetes (non-type 1) than the general population and much more likely to be measured as obese (40% compared with 29%).

See also Public Health England [Learning Disability Profiles](#)

7 Summary – older people

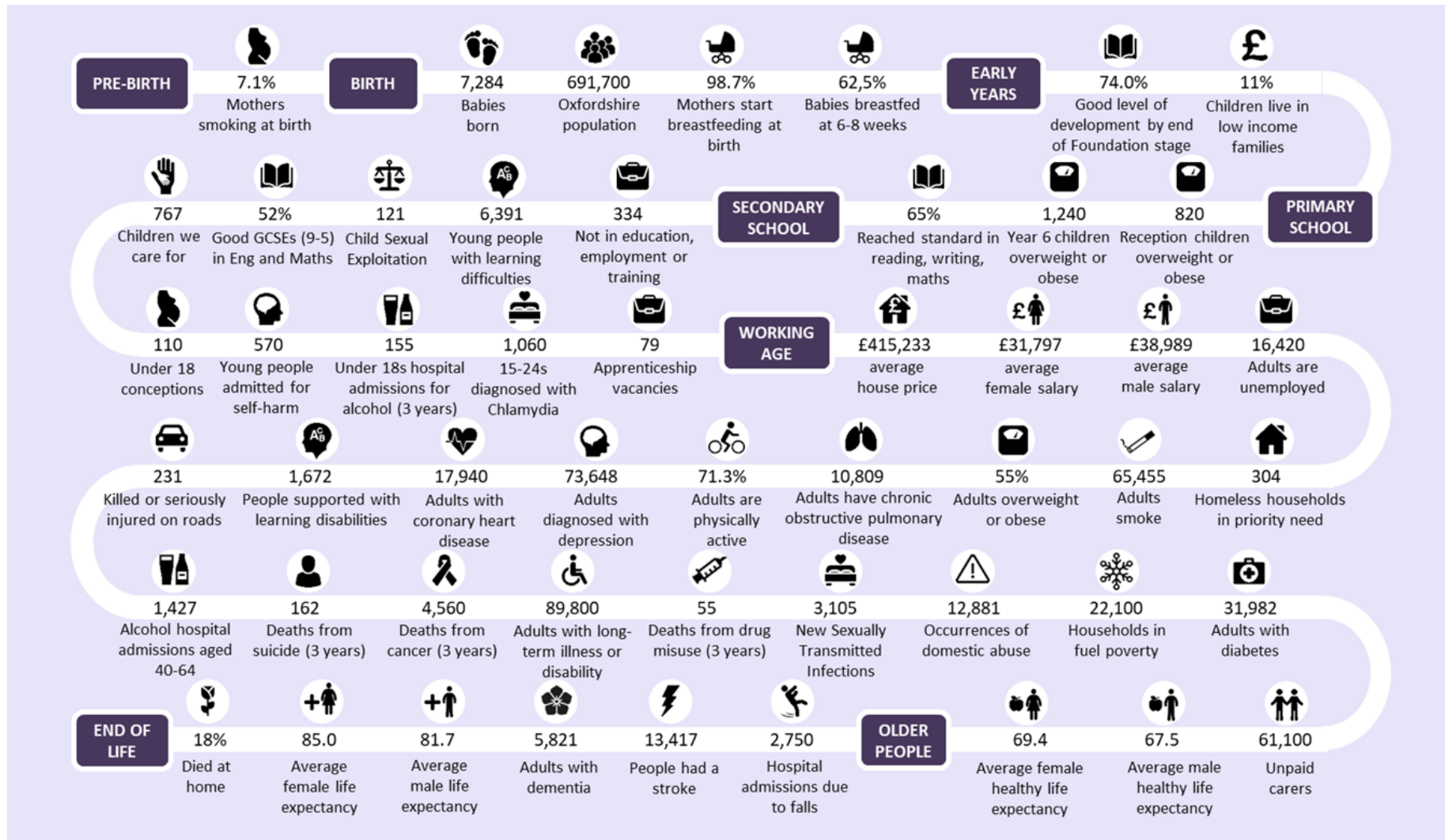
Key findings

- Oxfordshire's population is ageing, with a substantial recent and predicted growth in the number of older people.
- People aged 65+ made up 20% of the population of Oxfordshire's four rural districts, compared with 12% of the population of Oxford City (18% overall).
- For people aged 75+, cancer remains the leading cause of death. Between 2013 and 2019 there was a significant increase in deaths recorded as a result of Dementia and Alzheimer's disease.
- The Dementia Oxfordshire service, which mainly takes referrals from memory clinics and GPs, saw a big drop in referrals during the first COVID-19 lockdown in 2020. These have since recovered.
- Falls are the largest cause of emergency hospital admissions for older people (65+); Oxford City has a rate consistently significantly worse than England (2018/19).
- Fear of falls is the top concern among older users of adult social care services.
- The proportion of older people offered reablement services has remained below the national and statistical neighbour averages (2019/20).
- By district, the highest number of older people being supported with long-term social care services as of April 2020 was Cherwell and the highest rate per population was Oxford City.
- Alcohol-related hospital admissions are highest in men aged 65+ (2018/19)
- In 2020 (Jan-Dec) Thames Valley Police recorded 520 older victims (aged 65 and over) of crimes of violence or sexual offences in Oxfordshire. This was a significant increase on 2019 and has continued an increasing trend at above the overall growth in the older population.
- Wide areas of rural Oxfordshire are ranked poorly on geographical access to services.
- Isolation and loneliness have been found to be a significant health risk and a cause of increased use of health services.
- Before the pandemic, use of the internet by older people was increasing nationally and is likely to have increased further in 2020.

See also Public Health England [Productive Healthy Ageing Profiles](#)

8 JSNA “snake” data by life-stage

Oxfordshire Health and wellbeing facts and figures 2021



9 JSNA “tartan rug” inequalities data by small area

The table shows health indicators for small areas in Oxfordshire grouped by district.

Overall, most indicators are ranked as significantly better than (green) or similar to (yellow) the England average.

Areas that are ranked as significantly worse (red/dark) are mainly concentrated in Oxford City and Banbury.

Note: Graphic for illustration only

Explore this data using our interactive [inequalities dashboard](#)

Source: Data by Middle Layer Super Output Area (86 MSOAs in Oxfordshire) from Public Health England Fingertips [Local Health](#)

- Significantly worse than England
- Statistically similar to England
- Significantly better than England

