2015 Joint Strategic Needs Assessment: key points for Oxford

- By 2045 there are projected to be more residents aged over 65 years than children under 16 years. In 2011, proportionately more older people lived alone in Oxford compared to the surrounding districts.

- The rate of smoking-attributable deaths is higher in Oxford than the rest of Oxfordshire, but in line with the England average. However the rate of smoking-attributable hospital admissions is higher than the national average.

- Life expectancy in Oxford is similar to the national average at 79 years for men and 84 years for women. However there are significant geographical inequalities, particularly for men.

- Among adults, rates of obesity and physical activity are better than the national average. Child obesity is somewhat above the national average though not significantly so.

- In past years there was a high rate of under-18 conceptions in Oxford but this has recently reduced to below the national average. There are still high rates in some areas of the city. The rate of breastfeeding is above the national average.

- The city’s roads account for the largest number of Oxfordshire’s pedal cycle casualties and the number of cyclist casualties has risen in recent years.

- Oxford has a high rate of hospital admissions for self-harm and, within the county, the majority of police detentions under the Mental Health Act occur in Oxford.

- There are high rates of alcohol and drug use in the city. The rates of alcohol admissions are higher than the national average for both children and the whole population. Oxford is estimated to have among the highest rates of crack and opiate use in the country, at a rate of 16.6 users per 1,000 residents.
Introduction
Oxfordshire’s Joint Strategic Needs Assessment (JSNA) is described by the Health & Wellbeing Board as the ‘scientific bedrock’ upon which their Joint Health and Wellbeing Strategy rests. Together the purpose of the Assessment and the Strategy is to improve the health and wellbeing of Oxfordshire residents and reduce inequalities for all ages.

The JSNA contains information about people in Oxfordshire, which helps us understand their health and wellbeing needs. It brings together information from different sources and partners to create a shared evidence base and is intended to support service planning, decision-making and delivery.

The JSNA is now available on the Oxfordshire Insight website in the form of a summary report and accompanying data. This paper outlines what the JSNA covers and some of the headlines for Oxford’s population. Organised according to the same seven sections as the JSNA summary report, it takes additional material from the recently-published 2015 Oxford Health Profile from Public Health England.

Further information
- JSNA summary report (Oxfordshire Insight)
- JSNA data directory (Oxfordshire Insight)
- Joint Health and Wellbeing Strategy 2012-2016 (Oxfordshire County Council)
- Local Health (Public Health England): ward-level data
Population
JSNA 2015 covers: population by age | life expectancy | deprivation

The single biggest factor affecting health needs over the next 30 years will be the growth of the older population. In recent years the older population of Oxford has actually decreased but this is projected to change. According to Oxfordshire County Council’s principal long-term projection, in 2045 there will be more residents aged over 65 years than children under 16 years. That said, in surrounding Oxfordshire districts the ageing of the population will be much more dramatic.

Life expectancy in Oxford is similar to the national average at 79 years for men and 84 years for women. However there are significant geographical inequalities, particularly for men – men living in the most deprived areas of the city can expect to live on average 9 years less than men living in the least deprived areas.
Life expectancy at birth for men, by Oxford ward

Compared to England average of 78.9 years


Population groups

JSNA 2015 covers: ethnicity | religion | language | rurality | sexual orientation | pregnancy | disability | armed forces | carers

We know that Oxford’s population has become increasingly diverse in terms of ethnic group and country of birth; in 1991 just 9% of residents were from non-White ethnic groups - this rose to 22% by 2011. A recent study projected that the city’s White British population will make up just a third of residents by 2031.

Oxford has the highest rate of breastfeeding in Oxfordshire, higher than the national average. In past years the high rate of teenaged pregnancies was a concern in Oxford, but this has reduced to below the national average in recent years. There are still high rates in some areas of the city.
**Wider determinants of health**

JSNA 2015 covers: housing | education | employment | crime | abuse | thriving families | environment | isolation

Many of the issues highlighted in this section concern the housing crisis in Oxford: high rates of overcrowding, fuel poverty, homelessness and rough sleeping. The education section discusses the well-known dichotomy between Oxford’s highly educated workforce and the relatively poor performance of children in state schools – though the latest set of GCSE results showed some improvement. The rate of long-term unemployment (measured by claims for unemployment benefit) is significantly lower than other parts of the country.

There has been a recent increase in the rate of recorded abuse and sexual offences involving children in Oxford. Violent crime rates in Oxford were significantly above the national average but in recent years have declined to be similar to the rest of England.
In Oxford proportionately more older people aged 65 and over lived alone (36%) in 2011 relative to the surrounding districts, where around 27% of the older population lived alone.

**Morbidity & mortality**

JSNA 2015 covers: diabetes | cancer | circulatory diseases | mental health | self-harm | dementia | excess winter deaths | transport casualties | suicide

Oxfordshire does not differ from the national picture in terms of leading causes of death in males and females (data is not currently available for Oxford). Across the county the two biggest killers are heart disease and dementia, causing around 20% of deaths between them. Lung, bowel, breast and prostate cancers account for around 13% of deaths and strokes around 7%.

Rates of smoking attributable deaths are higher in Oxford than the rest of Oxfordshire, but in line with the England average. However the rate of smoking-attributable hospital admissions is higher than the national average.

Relative to the size of its population, Oxford has a lower rate of people killed & seriously injured on its roads than the rest of Oxfordshire. Partly because it has a much higher volume of cyclists, the city’s roads account for the largest number of
Oxfordshire’s pedal cycle casualties and the number of cyclist casualties has risen in recent years.

Cyclist casualties in Oxford road traffic accidents, 2000-2014

Source: Oxfordshire County Council

Mental illness is a considerable concern in Oxford. The city has a high rate of admissions for self-harm and, within the county, the majority of police detentions under the Mental Health Act occur in Oxford.

Hospital stays for self-harm 2013/14 per 100,000 population
(for areas in ‘Thriving London Periphery’ ONS cluster group)

Source: Public Health England
Oxford has a relatively high rate of tuberculosis, probably due to the high number of recent international migrants who live in the city.

**Lifestyles**

JSNA 2015 covers: excess weight | smoking | alcohol | illegal drugs | oral health | sexually-transmitted infections

The headline indicators show that, among adults, rates of obesity and physical activity are better than the national average in Oxford. This is strongly influenced by the city’s young age profile. Child obesity is somewhat above the national average though not significantly so. Rates of child tooth decay in Oxford are higher than the national average; 40% of Oxford children have some experience of tooth decay by age 5.

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**Oxford children classified obese at end of primary school 2006/07-2013/14**

![Graph showing obesity rates](source: National Child Measurement Programme, Public Health England)
There are high rates of alcohol and drug use in the city. The rates of alcohol-related hospital admissions are higher than the national average for both children and the whole population.

Oxford is estimated to have among the highest rates of crack and opiate use in the country, at a rate of 16.6 users per 1,000 residents.

**Prevalence of opiate and/or crack use 2011/12 per 1,000 working age residents**

Local authorities with highest estimated rates in England

Source: Public Health England
The HIV prevalence rate in Oxford (2.4 per 1,000 15-59 year olds in 2012) is significantly higher than the national average. This is likely to be due to the diverse population including more young people and proportionately more people from ethnic minority groups. HIV is more prevalent in people of Black African ethnic origin.

**Service demand**

JSNA 2015 covers: primary & secondary health care | emergency care | disability | mental health | social care | transport services

In Oxfordshire there were 75 GPs for every 100,000 residents in 2013, compared to a national average of 67 GPs. During the first eight months of 2014/15 A&E waiting times at Oxford University Hospitals Trust were within four hours 92% of the time, compared with an England average of 95%.

The rate of delayed transfer of care (‘bed blocking’) - where a patient is deemed medically fit to depart from their current care, but is unable due to non-clinical reasons - is above the national average in Oxfordshire. In 2013/14 the average daily rate of delayed transfers of care within Oxfordshire was 27 people aged 18 and over per 100,000, significantly higher than the England average rate of 9.6 per 100,000 people.

**Quality of services**

JSNA 2015 covers: social care user survey | hospital surveys | GP patient surveys

In 2013/14 nine in ten Oxfordshire adult social care users were satisfied with the care and support received. These results were similar to previous years, and to satisfaction levels for England. The proportion of patients who would recommend services at Oxford University Hospitals Trust is broadly in line with the national average. Satisfaction and recommendation rates for GP surgeries in Oxfordshire were significantly higher than for England overall in 2014.