

HEALTH IMPACT ASSESSMENT SCOPING REPORT

Joint Local Plan

Pre-submission Publication Version

(Regulation 19)



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1 Introduction

1.1 Background and context

1.1.1 South Oxfordshire and Vale of White Horse district councils (the councils) are working together to produce a Joint Local Plan. This plan will set out how development will be planned and delivered over time to meet the current and future needs of people living and working in a particular district, informing planning application decisions in the area.

1.1.2 The first stage of consultation, Regulation 18, was split into two parts. The first part, the 'Issues' consultation, was undertaken in May and June 2022 and asked for help in understanding the issues we need to tackle in the districts, as well as for thoughts on the plan's vision and objectives. The second part, the 'Preferred Options' consultation, took place in January and February 2024 and asked for thoughts on options identified to tackle the issues, along with potential locations for future developments. We are now at the Regulation 19 consultation stage, where the Joint Local Plan has been drafted and we are asking for thoughts on the proposed plan. The timeline of the plan is set out below in Figure 1:



Figure 1: Joint Local Plan timeline

1.1.3 It is crucial that we consider the impact the Joint Local Plan will have on the health and wellbeing of those working, living and visiting the districts. It has been well established that the built and natural environment has a demonstrable impact on our mental and physical wellbeing. The quality and

design of our built environment in particular has an ability to shape not only how we live our lives, but also our own personal behaviour and health. Due to the influence planning policies have over new development, the policies implemented by a local plan have an ability to influence our behaviour and way of life and can ultimately influence us towards (or away from) a healthier way of living.

- 1.1.4 Barton and Grant (2010) created a health map, shown in Figure 2, that is widely used to demonstrate the close relationship between health determinants and the built and natural environment. It is a useful graphic that emphasises the influence each aspect of our environment has on our health.



Figure 2: Barton and Grant 'determinants of health' graphic

1.2 What is a healthy place?

- 1.2.1 There is no shared definition of what defines a 'healthy place', however we can define the key characteristics of a healthy environment in order to gain a better picture of what a healthy place might look like.
- 1.2.2 The National Planning Policy Framework (NPPF), states that '*planning policies and decisions should aim to achieve healthy, inclusive and safe places and beautiful buildings*'. It then provides a list of how this should be achieved, giving an indication of what a healthy place includes. The list within the NPPF states that in order to create healthy, inclusive and safe places, new development should '*promote social interaction...*' be '*safe and accessible...*' and '*enable and support healthy lifestyles...*'.

1.2.3 This list can be found in the NPPF within a section on ‘Promoting healthy and safe communities’, which also sets out requirements on community facilities, public infrastructure, public safety, and open space and recreation - all of which contribute to the creation of healthy places.

1.2.4 Barton, who created the graphic in Figure 2, also set out a list of what he believed makes a healthy place. He explained that a healthy place encompasses the following:

- *Clean air and water*
- *Contact with nature*
- *A wide choice of good quality affordable housing*
- *Safe and convenient active travel networks*
- *A full range of accessible local facilities*
- *Varied and safe opportunities for outside play*
- *Convivial meeting places free from excessive noise*
- *Excellent access to a wide range of jobs, high level facilities, and wider social networks without necessary recourse to the car*

1.2.5 The Glasgow Centre for Population Health also divided impacts the built environment has on our health into two distinct categories – indirect and direct impacts. Direct impacts are those ‘traditionally associated with infrastructure planning and environmental health’, including air quality and traffic related industries.

1.2.6 The indirect impacts are those less recognised and include ‘the ways in which built environment features and their design can influence the feelings and behaviour of individuals and populations’. For example, indirect impacts range from physical activity, to an individual’s perceptions of the local area and are often associated with physical and mental health. Both indirect and direct impacts have an important influence over our health. Table 1 below illustrates these impacts:

Table 1: Direct and indirect impacts of the built environment on health (GCPH)

Direct Impact on Health	Indirect Impact on Health
Air Quality	Housing and Buildings
Climate	Neighbourhoods
Water	Social Environments
Noise	Connectivity, density, and land use mix

Traffic	Accessibility, amenities and decision-making processes
	Greenspace

1.2.7 A healthy place is also one that encourages positive behavioural change. This can be achieved through urban design as well as infrastructure. For example, a neighbourhood can be designed to promote a physically active lifestyle by offering green spaces to exercise, plentiful cycle and walking routes, and minimising car use through reducing parking spaces and giving priority to active modes of transport over vehicles. Small design features can promote behavioural change towards a more active way of living, and consequently improve health.

1.2.8 Additionally, providing infrastructure that allows for efficient public transport services will most likely encourage people to choose buses and trains, for example, over other methods of public transport, such as cars. Ultimately, where neighbourhoods are designed in a way that encourage healthier behaviours, such as active travel, people are more likely to adopt a healthier lifestyle.

1.3 Health Impact Assessments (HIAs)

1.3.1 A Health Impact Assessment, also known as a HIA, is a tool used to identify the health impacts of a plan or project, and to develop recommendations to maximise the positive impacts and minimise the negative impacts, while maintaining a focus on addressing health inequalities.

1.3.2 The National Planning Practice Guidance (NPPG) identifies HIA's as a '*useful tool to use where there are expected to be significant impacts*¹'. Government guidance also highlights that utilising HIAs in the planning process offers local authorities '*a powerful lever to improve public health and wellbeing, and ultimately reduce inequalities*²'. As set out in paragraph 1.2.2, it is also a national policy requirement for planning policies and decisions to aim to achieve '*healthy, inclusive and safe places*'. The councils are keen to ensure the new Joint Local Plan creates healthy environments, and therefore intend to utilise the HIA tool to do so.

1.3.3 Figure 3 presents a useful graphic from the Oxfordshire Health Impact Assessment Toolkit which sets out the NPPF and NPPG references to health and HIAs:

¹ [National Planning Practice Guidance \(NPPG\) Paragraph: 013 Reference ID:53-013-20220807](#)

² [Health Impact Assessment in spatial planning: A guide for local authority public health and planning teams. \(October 2020\)](#)

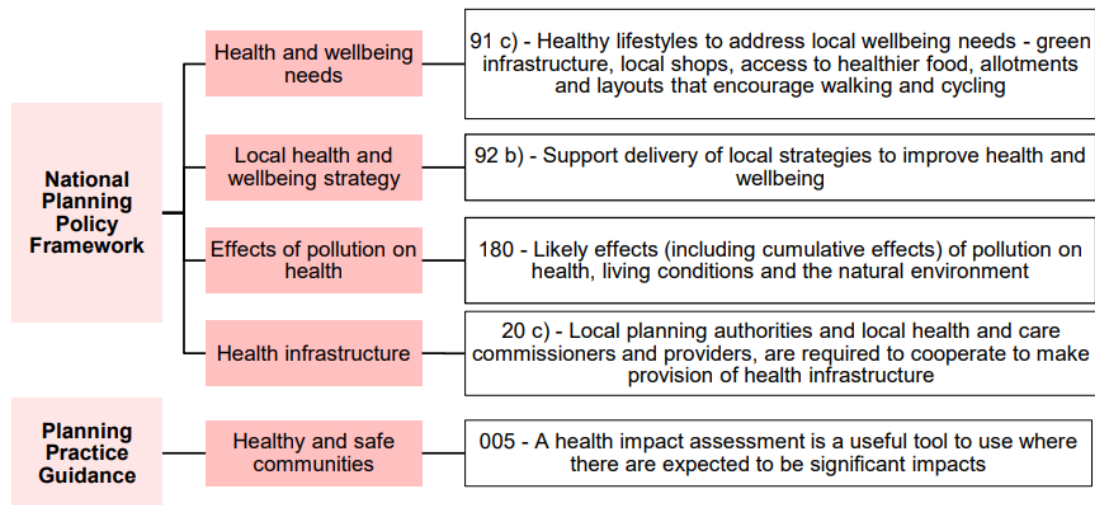


Figure 3: NPPF and NPPG references to health and HIAs

1.3.4 The purpose of this Health Impact Assessment is to assess the health impacts of the Joint Local Plan. It will be used to identify both the positive and negative ways the plan’s policies and its allocations will potentially affect the health and wellbeing of people living in, working in and visiting the districts. It will look at both direct and indirect impacts on health, as explained in paragraphs 1.2.4 and 1.2.5 of this report. Additionally, it may also make recommendations as to where impacts can be mitigated or minimised where relevant, as well as where there may be opportunities to maximise any potential health benefits identified.

1.3.5 This report will establish the key health needs and priorities of the districts through an analysis of baseline data. It will also identify members of the community that will be affected by the plan, particularly those most vulnerable to its impacts. This information will then be used to create a methodology which will rate the health impacts of each Joint Local Plan policy, from positive to neutral to negative, as well as how the identified population groups are likely to experience these effects, where relevant. It will then summarise the impacts, and provide recommendations for minimising adverse impacts, or maximising opportunities for benefits.

2 Scope of HIA and Baseline

2.1 Introduction

2.1.1 This scoping exercise has been conducted by the Vale of White Horse and South Oxfordshire District Councils’ Planning Policy Team. The scoping will consider the following:

- Geographical scope
- Existing health information
- Health determinants
- Population groups

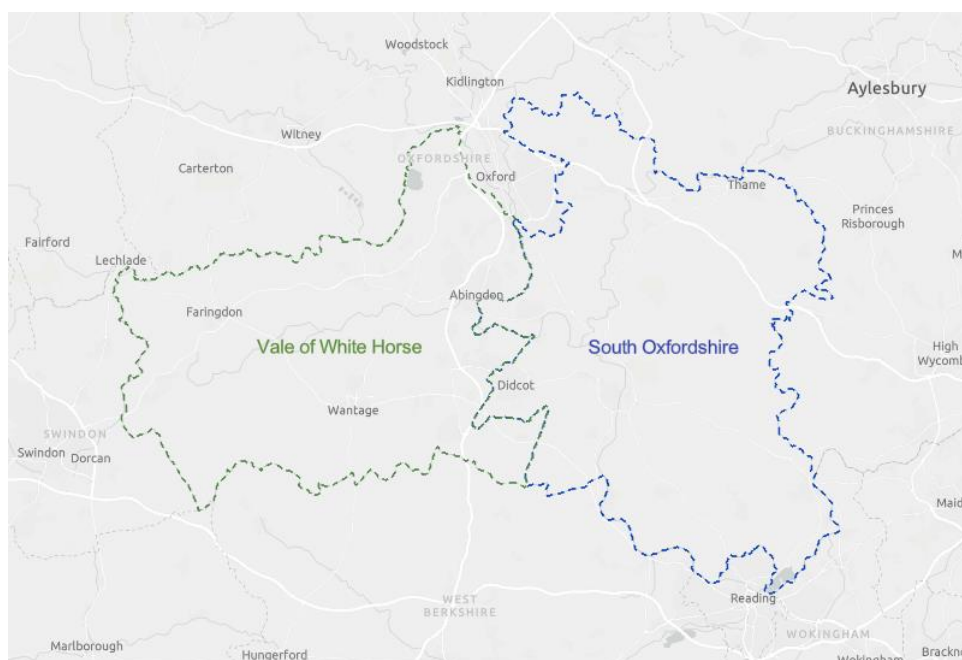
2.2 Geographical Scope

2.2.1 The geographical scope of the HIA includes the area covered by the Joint Local Plan (JLP), which includes the council areas of Vale of White Horse District Council and South Oxfordshire District Council.

2.2.2 Vale of White Horse and South Oxfordshire are mainly rural districts, that include two National Landscapes, several market towns and many rural villages. The districts share boundaries with ten local authorities, including Oxford City Council, Buckinghamshire and Wiltshire councils, Reading, Swindon and Wokingham borough councils and West Oxfordshire, Cherwell, West Berkshire and Cotswold district councils.

2.2.3 The Vale of White Horse covers an area of approximately 57,864 hectares, whilst South Oxfordshire covers an area of approximately 67,848 hectares. This is a total area of 125,712 hectares, with 22,566 hectares of that land situated in the Green Belt and 42,046 hectares within a National Landscape.

Figure 4: Map showing the location of the Vale of White Horse and South Oxfordshire



2.3 Baseline information

2.3.1 This section provides a summary of the baseline conditions that relate to the spatial scope of the HIA. The most recent available information accessible at the time of this exercise has been used to collate these profiles.

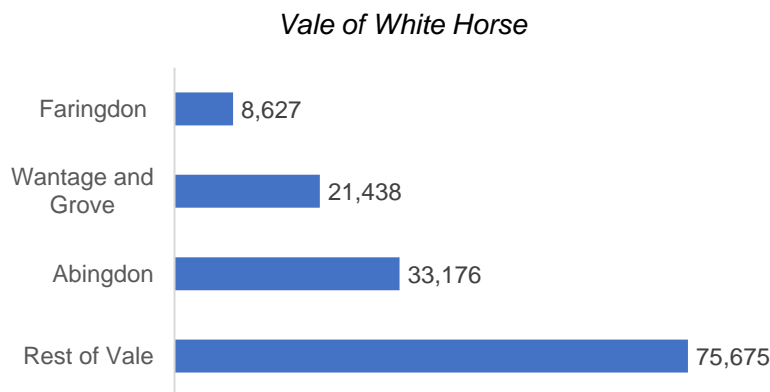
POPULATION

2.3.2 The 2021 census recorded the population of Vale of White Horse to be 138,913³, a 14.8%⁴ increase since the previous census in 2011. 50.4% of residents are female and 49.6% are male, meaning an almost even split.

2.3.3 South Oxfordshire was recorded to be 149,085⁵, a 11.1% increase compared to 2011. 50.7% of residents are female, and 49.3%⁶ are male, again meaning the split was almost even.

2.3.4 In both districts, the population is mainly concentrated in the market towns of Abingdon, Wantage (including the village of Grove) and Faringdon in Vale, and Didcot, Henley, Thame and Wallingford in South. This population split is set out in the bar charts below:

Bar Chart 1: Bar chart showing Vale of White Horse and South Oxfordshire residents split by town (Census 2021, sum of wards)



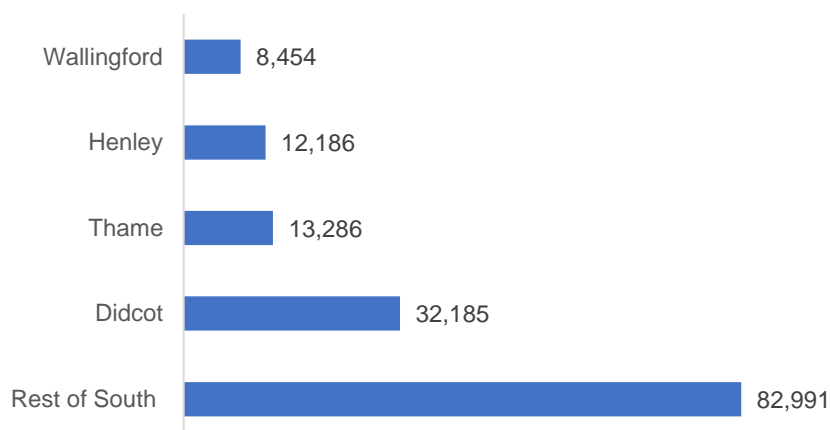
³ [ONS \(2021\) Census Area Profile – Demography and Migration table](#)

⁴ [Oxfordshire Joint Strategic Needs Assessment 2023, p6](#)

⁵ [ONS \(2021\) Census Area Profile – Demography and Migration Table](#)

⁶ [Oxfordshire Joint Strategic Needs Assessment 2023, p6](#)

South Oxfordshire



AGE

2.3.5 South and Vale generally have a more elderly age profile, with more people aged 65 and over than children aged 0-15. Approximately 18.5% of the population in South Oxfordshire are aged under 16, with 61% of people of working age 16-64 and 20.5% of people 65 and over⁷. In the Vale of White Horse, approximately 19.1% of the population are under 16, with 61.2% of the population of working age and 19.8% of people over 65⁸. The median age of people living in South Oxfordshire in 2021 was 43 and in the Vale of White Horse was 41⁹; older than both the Oxfordshire average (39) and the England average (40).

POPULATION TRENDS

2.3.6 Between 2011 and 2021, the population in the Vale of White Horse has increased by 14.8%. There has been an increase in the number of children living in the Vale of White Horse (by around 15.3%), as well as an increase in the working population (by around 11.6%). The main driver of population growth has been in the 65 and over age bracket, which has increased by 26.4% since 2011.

2.3.7 For South Oxfordshire, the population has increased slightly less than Vale, increasing by 11.1% between 2011 and 2021. There has only been a small increase in the number of children living in South (an increase of 6.7%), with a similar increase in the working population of 7.9%. Again, the key driver of population growth in South has been in those aged 65 and older, which has increased by 25.1%, a little less than Vale.

⁷ [ONS \(2021\) Census area profile – Age table](#)

⁸ [ONS \(2021\) Census area profile – Age table](#)

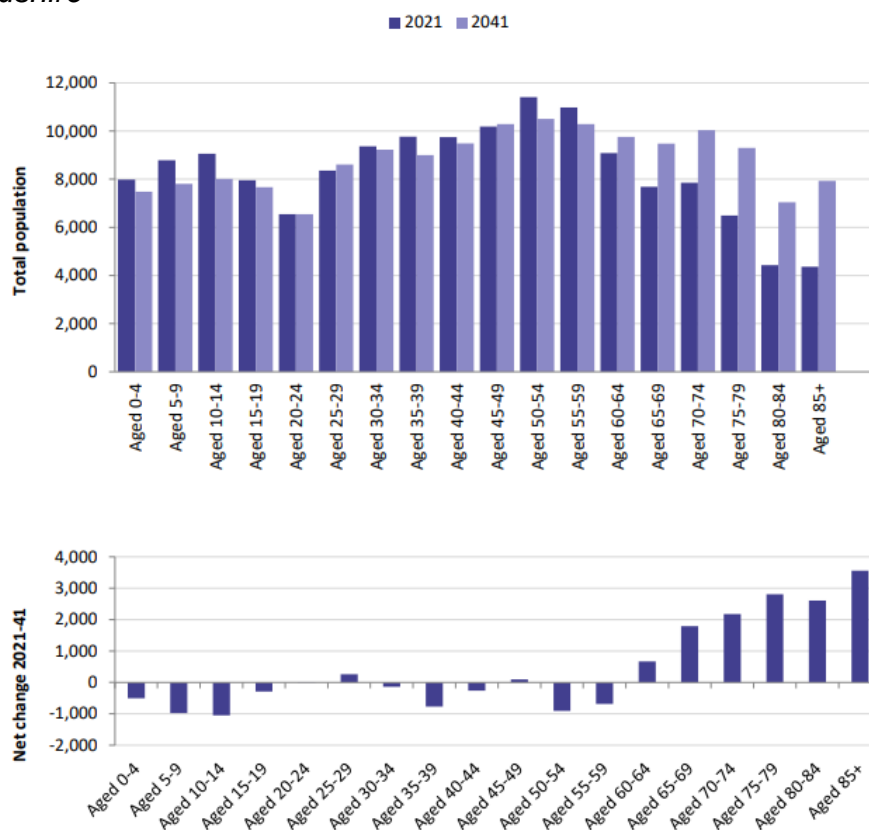
⁹ [ONS Census data TS007 Age by single year calculated from Nomis.](#)

POPULATION PROJECTIONS

2.3.8 The population is expected to increase in South Oxfordshire from 150,024 in 2021 to 158,422 in 2041, an increase of 8,400 people or 5.6%¹⁰. The population growth in South Oxfordshire is dominated by an increase in the older population, with the projected growth in the older population being larger than the total population. There is a projected growth of those over 60 by 13,614 people, which is then offset by a decline in younger persons (under 60) of 5,216, from a total growth of 8,398 people. This includes an increase of 6,169 people aged 80 or over.

2.3.9 There is a less stark picture in Vale of White Horse, where the population is expected to grow from 139,487 in 2021 to 151,655 in 2041, an increase of 12,168 people or 8.7%. Again, the projected growth in the older population is expected to be larger than the increase in the total population, increasing by 12,563 people aged 60 or over, so the population of those under 60 is projected to fall marginally.

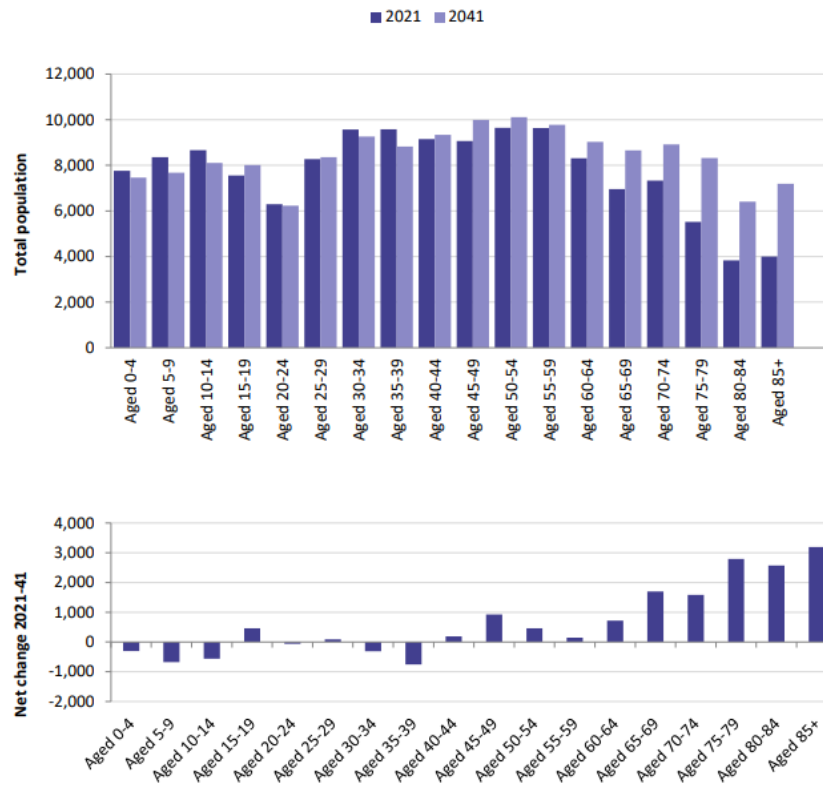
Figure 5: Population projections 2021-41 by 5-year age cohort for South Oxfordshire¹¹



¹⁰ [Joint Housing Needs Assessment \(2023\)](#)

¹¹ Source of bar charts: [Joint Housing Needs Assessment \(2023\)](#) using data from ONS 2018 based sub-national projections

Figure 6: *Population projections 2021-41 by 5-year age cohort for Vale of White Horse*



SOCIAL INCLUSION AND DEPRIVATION

2.3.10 The Indices of Deprivation (IoD) are an official measure of relative deprivation at a small local area level (Lower-layer Super Output Areas) across England, with the most recent release published in 2019. The measures of relative deprivation are based on seven facets of deprivation, including:

- Income Deprivation
- Employment Deprivation
- Education, Skills and Training Deprivation
- Health Deprivation and Disability
- Crime
- Barriers to Housing and Services
- Living Environment Deprivation

2.3.11 Combining the seven facets of deprivation, produces an overall relative measure of deprivation, known as the Index of Multiple Deprivation (IMD). This ranks every small area in England from 1 (most deprived area) to 32,844 (least deprived area), known as the Lower-Layer Super Output Areas (LSOAs). These LSOAs are often aggregated and used to describe relative deprivation for larger areas, such as local authorities.

2.3.12 The Indices of Deprivation at a local authority district level, ranks South Oxfordshire at 302 (rank of average score) out of 317 local authorities in England (where 1 is most deprived and 317 is least deprived). Vale of White Horse ranks similarly to South Oxfordshire at 305 out of 317. Both districts therefore rank within the 5% least deprived areas nationally.

2.3.13 Despite the districts ranking amongst the least deprived areas nationally, one LSOA within Vale of White Horse ranks in the 20% most deprived areas nationally. This area is Abingdon Caldecott, however it has become less deprived since 2015 when the previous IMD dataset was published.

ACCESS TO SERVICES

2.3.14 South Oxfordshire and Vale of White Horse, although predominately rural districts, have several town centres and local service centres that contain a variety of shops, facilities and services that serve the population. These include the town centres of Didcot, Henley-on-Thames, Wallingford and Thame in South, and Abingdon, Wantage and Faringdon in Vale. Additionally, the local service centres of Botley and Grove lie within Vale and Watlington in South. Outside of these town/local service centres, local services and public transport provision can be variable, and in more isolated villages can be infrequent or non-existent.

2.3.15 The Barriers to Housing and Services facet of deprivation measures the physical and financial accessibility of housing and local services. A sub-domain of this facet is 'geographical barriers' which relates to the physical proximity of local services (i.e. road distance to post office, primary school, GP and supermarket). In South Oxfordshire 25 out of 89 LSOAs are ranked within the 10% most deprived nationally on the geographical access to services sub-domain. In Vale of White Horse, 24 out of 76 LSOAs also ranked within the 10% most deprived.

ETHNICITY

2.3.16 The 2021 census¹² shows that 13% of people living in South Oxfordshire, and 14% of people living in Vale of White Horse, were born outside of the UK. The 2021 census also shows that 93.1% of people in South Oxfordshire identified themselves in a white ethnic group, 2.9% in an Asian ethnic group, 2.3% in a mixed ethnic group, 1% in a black ethnic group, and 0.8% identified themselves in an 'other' ethnic group. In Vale of White Horse, 90.8% of people identified themselves in a white ethnic group, 4% in an Asian ethnic group, 2.5% in a mixed ethnic group, 1.7% in a black ethnic group, and 1.1% identified themselves in an 'other' ethnic group.

¹² [ONS \(2021\) Census area profile – Ethnic group table](#)

2.3.17 The ethnic group experiencing the largest population percentage change in the districts between 2011 and 2021 was the Asian ethnic group, which increased by 1.1% in South and 1.5% in Vale¹³.

ASYLUM SEEKERS

2.3.18 Between 2016 and 2023, a total of 42 asylum seekers were resettled in Vale of White Horse, and 7 in South Oxfordshire¹⁴.

GYPSY, TRAVELLER AND TRAVELLING SHOWPEOPLE

2.3.19 In the 2021 census 0.2% of people identified as Gypsy or Irish Traveller in South Oxfordshire. Similarly, 0.2% of people also identified as Gypsy or Irish Traveller in the Vale of White Horse.

ECONOMY AND EMPLOYMENT

Employment and economic activity

2.3.20 The Annual Population Survey¹⁵ conducted by ONS provides recent economic activity, employment and unemployment statistics for the UK. As of 2022, the economic activity rate of working age residents (aged 16 to 64) in South Oxfordshire was 79.4%, and in Vale of White Horse was 86.7%. The former rate is broadly in line with the South East region (80.7%) and England and Wales (78.6%), whereas the economic activity rate in Vale of White Horse (86.7%) notably exceeds all of these geographies. In line with the wider geographical areas of the South East region and England and Wales, the economic activity rate in South Oxfordshire has decreased since the COVID-19 pandemic whereas the rate in Vale of White Horse has recovered to pre-pandemic levels; in 2019, the economic activity rates were 84.3% in South Oxfordshire and 82.0% in Vale of White Horse.

2.3.21 The Economic Land Needs Assessment (ELNA)¹⁶ also conducted average economic activity rates over the past decade to provide a more accurate representation. Between 2012 and 2022, the average recorded economic activity rate in South Oxfordshire was 83.3% and in Vale of White Horse was 82.3%. Therefore, a high proportion of the working age population of South Oxfordshire and Vale of White Horse is economically active, relative to the wider comparator areas, between 2012 and 2022.

¹³ [ONS \(2023\) How your area has changed in 10 years: Census 2021](#)

¹⁴ [Home Office \(2021\) Immigration statistics, asylum and resettlement – resettlement by Local Authority](#)

¹⁵ [Office for National Statistics, \(2023\); Annual Population Survey \(January 2022 to December 2022\).](#)

¹⁶ [Employment Land Needs Assessment \(ELNA\).](#)

2.3.22 The employment rate amongst working age residents, as of 2022, is 77.0% in South Oxfordshire and 85.0% in Vale of White Horse. Data for the economic activity rate and employment rate for all geographies is summarised in Table 2 below.

Table 2: Economic Activity and employment rate (aged 16 to 64)¹⁷

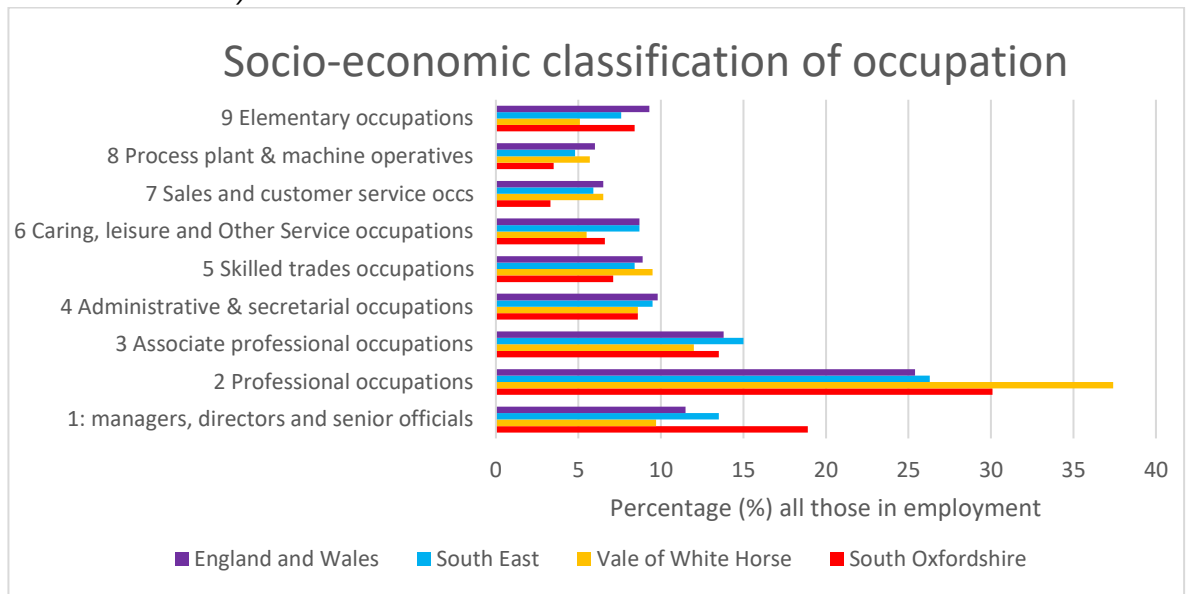
	South Oxfordshire	Vale of White Horse	South East	England and Wales
Economic activity rate (2022)	79.4	86.7	80.7	78.6
Average economic activity rate (2012-2022)	83.3	82.3	85.0	78.1
Employment rate (2022)	77.0	85.0	78.1	75.7
Average employment rate (2012-2022)	80.9	79.9	77.3	74.0

2.3.23 The socio-economic data from January 2021 to December 2021¹⁸ highlights that South Oxfordshire and Vale of White Horse have a significantly higher proportion of their workforce in managerial and professional occupations compared to the South East region and England and Wales¹⁹. In South Oxfordshire, 16.9% of the workforce are managers, directors, and senior officials, which is significantly higher than the South East's 13.1% and England and Wales' 11.4%. Professional occupations are also notably high at 32.6%, compared to 26.2% in the South East and 25.3% in England and Wales. In Vale of White Horse, 14.3% of the workforce are in managerial roles, and 36.0% are in professional occupations, both surpassing regional and national averages. Additionally, South Oxfordshire has a lower percentage of workers in administrative, skilled trades, and elementary occupations compared to regional and national figures, while Vale of White Horse similarly shows lower proportions in caring, leisure, and elementary occupations.

¹⁷ Office for National Statistics, (2023); Annual Population Survey (January 2022 to December 2022).

¹⁸ Occupational profile data presented is derived from the 2021 dataset because it represents the latest Annual Population Survey data for which a complete dataset is available to facilitate a comparison between all comparator geographies.

Figure 7: Socio-economic classification of occupation (January 2021-December 2021)²⁰



Out of work benefits²¹

2.3.24 As of 2022, the claimant count of South Oxfordshire (2%) and Vale of White Horse (2.1%) is lower compared to the regional average (3.4%) and national average (4.4%). The highest proportion of claimants of out of work benefits in both districts are those in the 18-24 age group.²²

Earnings²³

2.3.25 Table 3 presents the median gross weekly earnings recorded in the Annual Survey of Hours and Earnings in 2022. It shows that the median gross weekly earnings of residents of South Oxfordshire are approximately £753 and in Vale of White Horse are approximately £726, both of which are considerably higher than the regional (£685) and national (£643) rates.

2.3.26 The median gross weekly earnings of those working in South Oxfordshire are approximately £697, and in Vale of White Horse are approximately £765. The difference between resident-based and workplace-based earnings suggests that a portion of South Oxfordshire's residents may commute out of the district to access higher-paying jobs elsewhere, whereas the opposite may be true in Vale of White Horse (i.e. a portion of the workforce commutes into the area to access higher wages). Workplace-based earnings in both

²⁰ Office for National Statistics, (2022); Annual Population Survey (January 2021 to December 2021).

²¹ Note - Data in this section is derived from the 2022 dataset for consistency.

²² Nomis (2024) Labour market profile – South Oxfordshire; Vale of White Horse

²³ Note – Data used in this section is derived from the Economic Land Needs Assessment (2024) for consistency.

South Oxfordshire and Vale of White Horse are higher than recorded across the South East region (£664) and England (£642).

Table 3 Comparative resident and workplace median earnings (2022)²⁴

	South Oxfordshire	Vale of White Horse	South East	England
Resident-based	£753	£726	£685	£643
Workplace-based	£697	£765	£664	£642

EDUCATION AND SKILLS

Qualifications

2.3.27 The 2021 census shows that 12.4% of residents in South Oxfordshire and 12.5% of residents in Vale of White Horse who are aged 16 and over obtained no educational qualifications. This is lower than the regional (15.4%) and national average (18.1%). Both districts have a higher proportion of residents with qualifications at Level 4 and above, compared to regional and national averages. Specifically, 43.6% of residents in South Oxfordshire and 44.0% in Vale of White Horse hold these qualifications, surpassing 35.8% in the South East and 33.9% nationally.²⁵

Table 4: Qualifications (Census 2021)

	South Oxfordshire	Vale of White Horse	South East	England
Level 1 and entry level qualifications	8.5%	8.5%	9.8%	9.7%
Level 2 qualifications	12.7%	12.2%	13.9%	13.3%
Apprenticeship	4.8%	5.0%	5.1%	5.3%
Level 3 qualifications	15.7%	15.4%	17.4%	16.9%
Level 4 qualifications or above	43.6%	44.0%	35.8%	33.9%

²⁴ Office for National Statistics, (2022); Annual Survey of Hours and Earnings – Resident and Workplace Analysis.

²⁵ Nomis (2024) 2021 Census Profile for area in England and Wales.

Other qualifications	2.2%	2.3%	2.7%	2.8%
No qualifications	12.4%	12.5%	15.4%	18.1%

HOUSING AND HOUSING STOCK STANDARDS

Housing stock

2.3.28 As of 2023, there were 66,687 dwellings in South Oxfordshire and 62,973 dwellings in Vale of White Horse. These figures demonstrate that around 70.2% of households in South Oxfordshire own their homes, and around 68.2% in Vale of White Horse. Both districts have a higher percentage of home ownership than the regional average (65.7%). In addition, both districts have lower rates of private renting, with 15.9% in South Oxfordshire renting and 15.7% in Vale of White Horse, compared to 19.3% regionally. Social renting is slightly lower in South Oxfordshire (12.0%) than the regional average (13.6%), while Vale of White Horse has a slightly higher rate at 14.3%. These figures demonstrate that both districts have a stronger homeownership and lower private renting than the regional average.

2.3.29 Table 5 shows the total housing completions within the districts since 2011. The total number of housing completions between 2011 to 2023 was 10,385 in South Oxfordshire, and 12,965 in Vale of White Horse.

Net housing completions

Table 5: Housing completion across the districts (2011-2023)²⁶

	South Oxfordshire ²⁷	Vale of White Horse ²⁸
2011/12	508	346
2012/13	475	270
2013/14	484	578
2014/15	600	739
2015/16	615	1,133
2016/17	722	1,613
2017/18	935	1,573
2018/19	1,369	1,258

²⁶ 5 year housing land supply statement (2024)

²⁷ South Oxfordshire (2023) 5 Year Housing Land Supply Statement

²⁸ Vale of White Horse (2023) 5 Year Housing Land Supply Statement

2019/20	1,478	1,602
2020/21	868	1,108
2021/22	972	1,213
2022/23	1,359	1,532

Housing need

2.3.30 As of October 2024, the annual housing need set by the standard method is 579 and 633 homes per year for South Oxfordshire and the Vale of White Horse respectively. Over the course of the plan period (1 April 2021 to 31 March 2041), this results in a housing need of 11,580 for South Oxfordshire, and 12,660 for the Vale of White Horse.

2.3.31 Our existing local plans agreed to accommodate unmet housing need from Oxford City Council's Local Plan 2036. The Joint Local Plan will continue to make provision for this, with an additional 4,950 homes for South Oxfordshire, and 1,830 homes for the Vale of White Horse. This makes the total housing need 16,530 for South Oxfordshire, and 14,490 for the Vale of White Horse.

Housing conditions and health

2.3.32 Poor-quality housing harms health and evidence shows that exposure to poor housing conditions (including damp, cold, mould, noise) is strongly associated with poor health, both physical and mental. The longer the exposure to poor conditions, including cold, the greater the impact on mental and physical health. Specific physical effects are morbidity, including respiratory conditions, cardiovascular disease and communicable disease transmission, and increased mortality. In terms of mental health impacts, living in non-decent, cold or overcrowded housing and in unaffordable housing has been associated with increased stress and a reduction in a sense of empowerment and control over one's life and with depression and anxiety. Children living in overcrowded homes are more likely to be stressed, anxious and depressed, have poorer physical health, attain less well at school and have a greater risk of behavioural problems than those in uncrowded homes²⁹.

2.3.33 Through the Decent Homes standard, a home is considered decent if it meets four criteria around minimum standards for health and safety as well as reasonable standards of repair, modern facilities, and thermal comfort. Data from the English Housing Survey 2023 confirms that 3.5 million households (14%) in England lived in a home that failed to meet the Decent Homes Standard, 2.1 million households (9%) lived in a home with at least

²⁹ The Health Foundation (2020) Health Equity in England: The Marmot Review 10 Years On

one Category 1 hazard, and 1.0 million households (4%) lived in a home with damp³⁰. The security and stability of housing also affects people's health. Struggling to pay for accommodation, overcrowding and living under the threat of eviction all pose risks for mental health and wellbeing. These issues have become more prevalent by the growth of the private rented sector. It is reported that private rented households with members with a long-term illness or disability or those who receive housing support were more likely to live in poor quality homes.

2.3.34 Fuel poverty is also a health issue that relates to the condition of a home. More detail on food poverty can be found in the section on Climate Change within this report.

Homelessness

2.3.35 In 2023, the statutory homelessness rate – (eligible homeless people not in priority need in South Oxfordshire and Vale of White Horse) are both around 0.034. This rate is significantly lower than that of the South East (0.15) and England (0.23).

2.3.36 The latest data available (April – June 2023)³¹ shows that in South Oxfordshire, there are 16 households in temporary accommodation, while in Vale of White Horse there are 15 households in temporary accommodation.

2.3.37 On the other hand, there were 3 people in South Oxfordshire and 1 in Vale of White Horse estimated to be sleeping rough on a single night in Autumn 2023³². Both districts have a relatively low numbers compared to neighbouring authorities over the same period – Cherwell had 7; Oxford City had 46; West Oxfordshire had 3 people sleeping rough.

Housing price to income ratio

2.3.38 Affordability ratios are calculated by dividing house prices by gross annual workplace-based earnings. Lower ratios tend to suggest greater affordability with higher ratios indicating lower affordability.

2.3.39 Table 6 presents the mean affordability ratios between 2003 and 2023 in South Oxfordshire, Vale of White Horse, the South East, and England. As of 2023, the mean affordability ratios are 11.0 times workplace-based earnings in South Oxfordshire; 9.6 times workplace-based earnings in Vale of White Horse. Between 2003 and 2023, the affordability ratio in South Oxfordshire

³⁰ Ministry of Housing Communities & Local Government (2024) English Housing Survey 2022 to 2023: housing quality and condition

³¹ Gov.UK (2024) Dashboards on homelessness

³² [Gov.UK \(2024\) Official Statistics – Rough sleeping snapshot in England: autumn 2023](#)

has increased from 7.9 to 11.0 (+3.1); while Vale of White Horse has increased from 7.5 to 9.6 (+2.1).

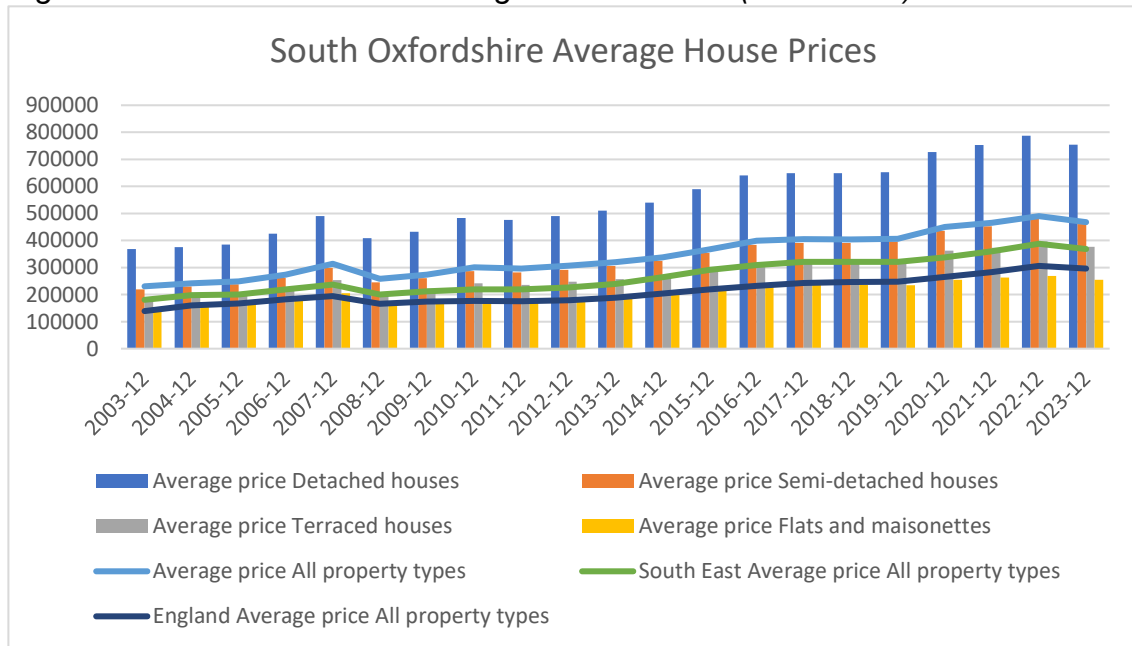
Table 6: Mean housing affordability ratios (2003-2023) ³³

	South Oxfordshire	Vale of White Horse	South East	England
2003	7.9	7.5	7.6	5.93
2013	10.5	7.5	8.7	6.76
2023	11.0	9.6	11.1	8.26

Average house prices

2.3.40 Figure 8 and 9 indicates that both South Oxfordshire and Vale of White Horse districts recorded a consistently higher average property price than the regional and national average. Median house prices in South Oxfordshire have grown by £243,000 (2003: £203,000; 2023: £446,000)³⁴ between 2003 and 2023. While median house prices in Vale of White Horse have grown by £210,000 (2003: £185,000; 2023: £395,000)³⁵.

Figure 8: South Oxfordshire Average House Prices (2003-2023)³⁶



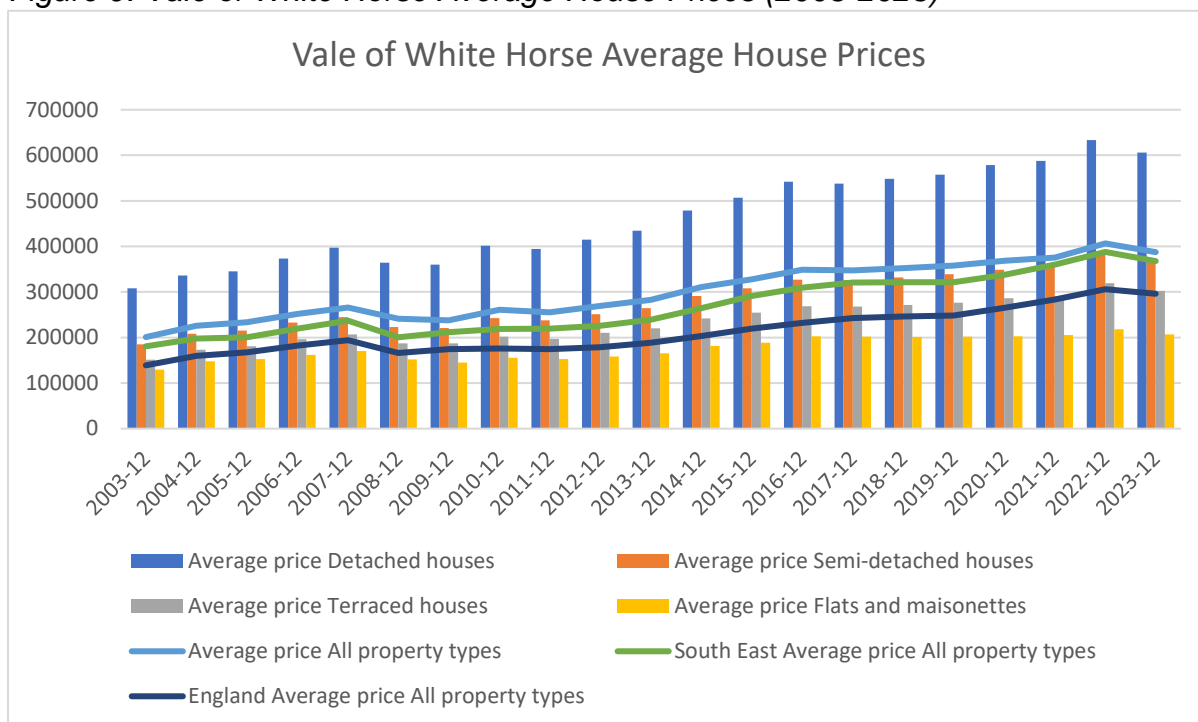
³³ [ONS \(2024\) Housing affordability in England and Wales: 2023](#)

³⁴ [ONS \(2024\) Housing prices in South Oxfordshire](#)

³⁵ [ONS \(2024\) Housing prices in Vale of White Horse](#)

³⁶ [Land Registry \(2024\) Housing Price Statistics – South Oxfordshire](#)

Figure 9: Vale of White Horse Average House Prices (2003-2023)³⁷



Average rents

2.3.41 As of 2023, the average private rent per month in South Oxfordshire (£1,219) and Vale of White Horse (£1,206) is slightly less than the median rent in the South East region (£1,253) and England (£1,254)³⁸.

TRANSPORT AND ACCESS³⁹

Road network

2.3.42 Collectively covering an area of approximately 480 square miles, South Oxfordshire and the Vale of White Horse Districts are largely rural, with significant areas of greenbelt and National Landscapes. The districts have good transport connections to London and the Southwest, via the Great Western Railway from Didcot Parkway and the M4 and M40 motorways. Further road connections provide access to the Solent and the Midlands via the A34 and M40.

2.3.43 In South Oxfordshire there is one Strategic Road, the M40, which connects the M25 London ring road to the east to the M42 Birmingham ring road. In the Vale of White Horse there is the A34, which is part of the Strategic Road network connecting the Solent to the Midlands. Also, in the Vale of White Horse is the A420 which is a Major A road connecting to Swindon. Other A

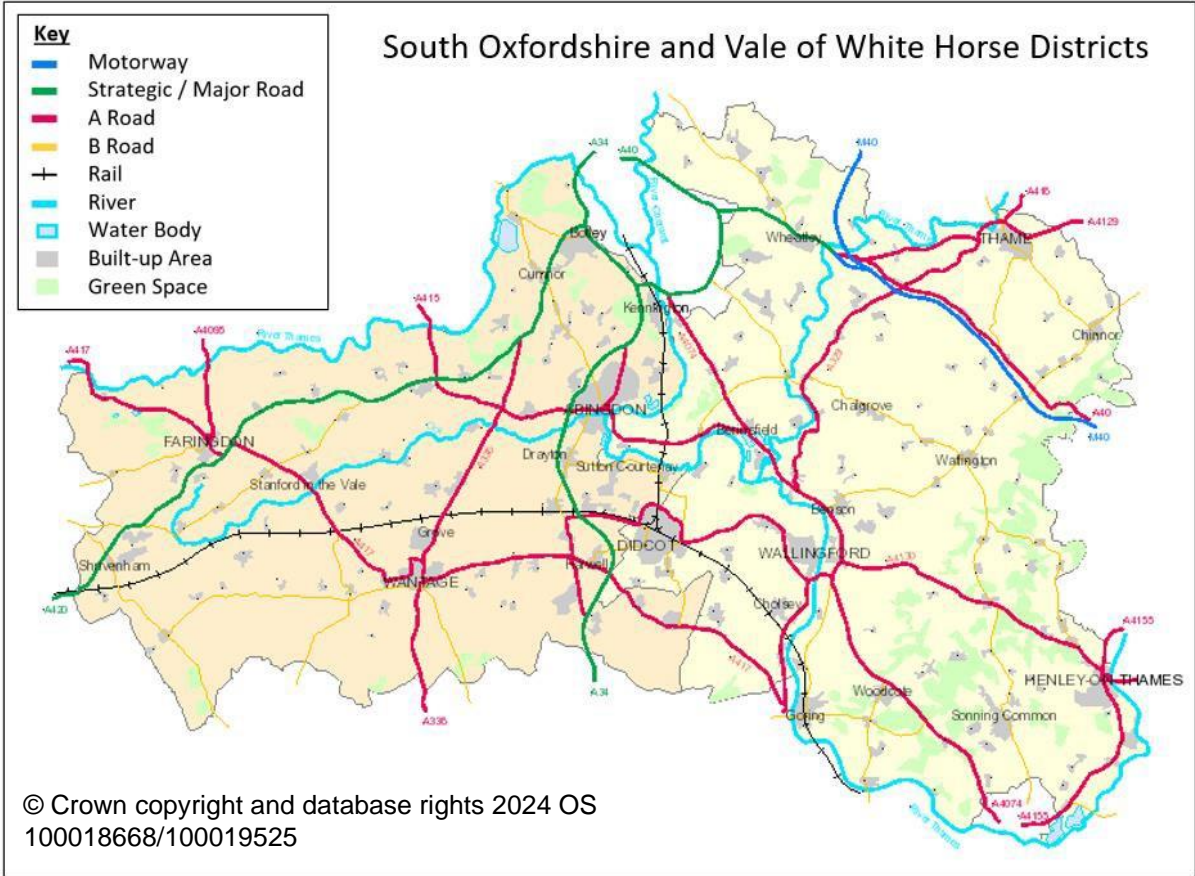
³⁷ [Land Registry \(2024\) Housing Price Statistics – Vale of White Horse](#)

³⁸ [ONS \(2024\) Private rent and house price, UK](#)

³⁹ Note – Data used in this section is derived from the [Existing Transport Conditions Report \(2024\)](#) for consistency.

roads in the districts are: A40, A329, A338, A415, A417, A418, A423, A4074, A4129, A4130, A4155, A4183, and A4185.

Figure 10: Transport Links within South Oxfordshire and Vale of White Horse



Public transport network

2.3.44 There are a number of bus companies which operate within South Oxfordshire and the Vale of White Horse, most of these are operated by Stagecoach and 2 subsidiaries of Go-Ahead which are Oxford Bus Company and Thames Travel.

2.3.45 According to bus timetables for November 2023, there are a total of 38 regular bus services that operate 4 or more services per weekday in each direction within South Oxfordshire and the Vale of White Horse. 20 of these services operate 7 days a week, 7 operate 6 days a week, and 10 operate 5 days a week (as shown in Appendix B). A summary of the 7-day bus services and the number of services operating in one direction is shown (i.e. the 3A operates 30 services per weekday from Cowley to Oxford) in Table 7.

Table 7: Monday-Sunday bus services

Service no.	Route	Weekday	Saturday	Sunday
3A	Cowley-Oxford via Sandford-on-Thames	30	29	16
4A	Botley-Oxford	35	32	30
11	Watlington-Oxford	10	10	5
33	Wallingford-Oxford	17	11	10
35	Abingdon-Oxford	50	45	28
46	Great Milton-Oxford	19	19	19
280 (X8)	Aylesbury-Oxford	35	30	15
400	Wheatley-North Hinksey	79	56	38
Airline LHR	Oxford-LHR	19	19	19
Airline LGW	Oxford-LGW	31	31	30
Oxford Tube	London-Oxford	76	83	71
E1	Eynsham-Oxford	33	30	12
S1	Carterton-Oxford via Farmoor	50	51	39
S6	Swindon-Oxford	49	46	26
S9	Wantage-Oxford	41	38	24
X1 (NX1)	Wantage-Oxford	31	33	17
X2 (NX2)	Didcot-Oxford	50	49	33
X3	Abingdon-Barton Park	52	49	34
X32	Didcot-Oxford (JR)	29	28	10
X40	Reading-Oxford	29	28	15

2.3.46 In addition, there are a total of 8 railway stations in South Oxfordshire and the Vale of White Horse, with Radley and Appleford in the Vale of White Horse, and Culham, Didcot Parkway, Cholsey, Henley-on-Thames, Goring & Streatley, and Shiplake in South Oxfordshire.

Commuting patterns

2.3.47 Tables 8 and 9 provide a summary of data from the census, showing methods of travel to work for 2011 and 2021 respectively. Census categories for 'Underground', 'Taxi' and 'Other' modes have not been included as these entries were less than one percent for all Oxfordshire locations, notably because there is no underground system within the districts.

2.3.48 Census data for 'Total Residents' refers to usual residents living in the pre-defined areas who were aged 16 years and over and in employment the week of the survey. The 2011 census data also had an upper threshold of 74 years.

Table 8: Method of travel to work (Census 2011)

Method of travel 2011	South Oxfordshire	Vale of White Horse	Oxfordshire	England
Total residents	70,087	63,181	334,419	25,162,721
Mainly work from home	15%	12%	12%	10%
On foot	9%	8%	11%	10%
Bicycle	4%	6%	7%	3%
Bus, minibus, or coach	3%	6%	7%	7%
Train	5%	2%	3%	5%
Car or van passenger	4%	4%	4%	5%
Car or van	59%	60%	54%	54%

Table 9: Method of travel to work (Census 2021)

Method of travel 2021	South Oxfordshire	Vale of White Horse	Oxfordshire	England
Total residents	76,474	70,862	364,563	26,405,214
Mainly work from home	43%	41%	38%	32%
On foot	7%	6%	9%	8%
Bicycle	2%	3%	4%	2%
Bus, minibus, or coach	2%	3%	3%	4%
Train	1%	NIL	1%	2%

Car or van passenger	3%	3%	3%	4%
Motorcycle, scooter, or moped	NIL	NIL	NIL	NIL
Car or van	41%	42%	40%	45%

2.3.49 The 2011 and 2021 census results show that 'car or van' mode and 'mainly work from home' hold the highest responses for both surveys.

2.3.50 Table 10 shows the changes in method of travel between 2011 to 2021. There is a distinct increase in the proportion of entries reporting that they 'mainly work from home' and a clear reduction in the use of a 'car or van' to travel to work. However, the results from 2021 are likely to have been influenced by the Covid-related restrictions in place at the time of the census. All other mode categories show a reduction as well, while the 'motorcycle, scooter, or moped' category shows no proportional change.

Table 10: Census changes 2011 to 2021

Changes in method of travel - 2011 to 2021	South Oxfordshire	Vale of White Horse	Oxfordshire	England
Total residents	+6,387	+7,681	+30,144	+1,242,493
Mainly work from home	+28%	+29%	+25%	+21%
On foot	-2%	-2%	-2%	-2%
Bicycle	-1%	-3%	-3%	-1%
Bus, minibus, or coach	-2%	-3%	-3%	-3%
Train	-4%	-2%	-2%	-3%
Car or van passenger	-1%	-1%	-1%	-1%
Motorcycle, scooter, or moped	NIL	NIL	NIL	NIL
Car or van	-18%	-18%	-14%	-9%

2.3.51 An extract of the National Travel Survey (NTS)¹⁶ is shown in Table 11. This shows the average number of trips by mode as a proportion of 2002 figures. For example, average trips undertaken by surface rail in 2010 were 145% that of the average trips taken in 2002.

2.3.52 The NTS includes a data entry for 'London Buses' which has not been included in the data shown below due to these not existing within the districts.

Table 11: National Travel Survey average number of trips by mode

Number of trips by mode	2010 (%)	2011 (%)	2012 (%)	2013 (%)	2014 (%)	2015 (%)	2016 (%)	2017 (%)	2018 (%)	2019 (%)
Walk	89	92	88	84	83	83	92	96	99	95
Pedal cycle	85	91	94	80	100	95	81	92	95	90
Local buses	91	91	89	90	88	89	77	81	71	68
Surface rail	145	129	145	151	155	149	156	156	164	158
Car or van passenger	89	87	89	87	86	85	84	85	86	83
Car or van	92	90	90	87	88	87	89	89	90	87

2.3.53 The NTS data shows a moderate increase in walking and rail modes over the 10-year period. There is a clear decline in local bus service use and / or provision shown from 2017 to 2019. Car or van driver mode and passenger modes remain fairly consistent, while cycling usage fluctuates. The 2022 NTS results suggest that the most common trip purpose was for shopping, followed by commuting.

2.3.54 As indicated previously, the 'method of travel to work' census data for 2021 needs to be interpreted and compared with caution due to global pandemic changes to travel and the interpretation of the census questions by participants.

2.3.55 The 'method of travel to work' census data for 2011 data is now considerably out of date, while the only other publicly available data collection for travel is the NTS which does not collect a sufficient number of surveys for regional or local travel analysis. The NTS identifies that journeys to supermarkets and retail outlets generate more trips than travel to work, which is not captured in the census results.

2.3.56 In summary, this means that robust local understanding of travel by mode is a little unclear from publicly available data at present. Notwithstanding this, it is useful to consider the baseline data available from census and NTS to understand approximate existing travel demands.

Car ownership

Table 12: Car and van ownership in the districts, the South East and England (Census 2021)

	South Oxfordshire	Vale of White Horse	South East	England
All households	61,496	57,499	3,807,966	23,436,085
No cars or vans in household	10.8%	12.2%	16.9%	23.5%
1 car or van in household	38.5%	39.8%	40.8%	41.3%
2 cars or vans in household	36.1%	35.2%	30.5%	26.1%
3 or more cars or vans in household	14.6%	12.8%	11.8%	9.1%

2.3.57 Car ownership in South Oxfordshire and Vale of White Horse is high.

According to 2021 census data, 10.2% of households in South Oxfordshire and 12.2% of households in Vale of White Horse had no cars or vans in household, which is significantly lower than the national average of 23.5%. Around 50% of households in both South Oxfordshire (50.7%) and Vale of White Horse (48.0%) had at least 2 cars.

Road traffic casualties

Table 13: Road casualties in the districts (2022)

	South Oxfordshire	Vale of White Horse
Driver/rider	140	144
Passenger	36	20
Pedestrian	16	18
Killed	2	4
Serious	38	45
Slight	152	153

2.3.58 The district level collision data for 2022 illustrates that the majority of road collisions result in slight injury and injury, typically caused to the driver or rider. As per Oxfordshire County Council's Vision Zero⁴⁰ policy aspirations, the districts and county seek to eliminate all fatal and serious injury incidents on our roads.

⁴⁰ <https://news.oxfordshire.gov.uk/ambition-to-eliminate-all-road-deaths-and-serious-injuries-by-2050>

HEALTH PROFILE

General health

Table 14: General Health Profile (Census 2021)⁴¹

	South Oxfordshire	Vale of White Horse	South East	England
Very good health	53.4%	52.4%	50.0%	48.5%
Good health	33.0%	33.6%	34.0%	33.7%
Fair health	10.3%	10.8%	11.8%	12.7%
Bad health	2.6%	2.6%	3.3%	4.0%
Very bad health	0.7%	0.7%	0.9%	1.2%

2.3.59 The 2021 census statistics indicate that perceived health in South Oxfordshire and Vale of White Horse is generally positive. In South Oxfordshire, 86.4% of the population reported themselves to be in very good or good health, with 53.4% in very good health and 33.0% in good health. In the Vale of White Horse, 86.0% of residents reported being in very good or good health, with 52.4% in very good health and 33.6% in good health.

2.3.60 In terms of poorer health, 10.3% of South Oxfordshire's population described their health as fair, while 2.6% reported being in bad health and 0.7% in very bad health. Similarly, in Vale of White Horse, 10.8% of residents stated they were in fair health, with 2.6% in bad health and 0.7% in very bad health.

2.3.61 When compared to regional and national averages, both districts show a higher percentage of residents in very good or good health than the South East (84.0%) and England overall (82.2%). Additionally, both areas have a lower proportion of people reporting bad or very bad health than the regional and national averages.

Life expectancy

2.3.62 Census 2021 also shows that the life expectancy in South Oxfordshire and the Vale of White Horse is notably higher than both the county and national averages. For males, the life expectancy in South Oxfordshire is 82.1 years, while in the Vale of White Horse, it is slightly higher at 82.3 years. These figures are above the average for Oxfordshire, which stands at 81.5 years, and significantly exceed the national average of 79.5 years for England.

⁴¹ Census 2021 – South Oxfordshire, Vale of White Horse

2.3.63 For females, life expectancy is also high. In South Oxfordshire, females can expect to live to 85.5 years, and in the Vale of White Horse, the figure is 85.4 years. Both of these are higher than the Oxfordshire average of 84.8 years and well above the national average of 83.2 years for females in England.

2.3.64 These statistics reflect the overall good health and well-being of residents in South Oxfordshire and Vale of White Horse, suggesting that the quality of life in these areas is conducive to longer life expectancy when compared to broader regional and national trends.

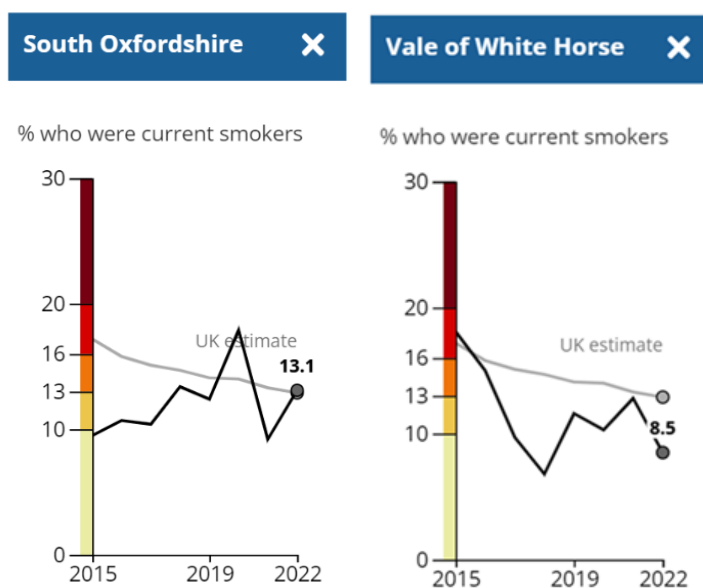
Life choices, behavioural risk factors, i.e. alcohol, smoking, drugs, etc.

Smoking

2.3.65 Smoking causes lung cancer, respiratory disease and cardiovascular disease as well as many cancers in other organs including lip, mouth, throat, bladder, kidney, stomach, liver and cervix. Smoking reduces fertility, significantly raises the risk of developing type 2 diabetes, eye disease and dementia, and is associated with a range of poor pregnancy outcomes. Second hand smoke is dangerous for anyone exposed to it, but children are especially vulnerable⁴².

2.3.66 In 2022, smoking prevalence in adults (18+) in South Oxfordshire was 13.1% which is higher than the national (12.7%) and regional (11.5%) average. While Vale of White Horse had a significantly lower rate (8.5%)⁴³.

Figure 11: The proportion of current smokers, all persons aged 18 years and over by local authority, UK, (2015 – 2022)



⁴² [Office for Health Improvement & Disparities \(2022\) Smoking and tobacco: applying All Our Health](#)

⁴³ [Office for National Statistics \(2023\) Adult smoking habits in the UK: 2022](#)

Alcohol

2.3.67 UK Chief Medical Officers (CMOs) advise that to keep your risk from alcohol low, adults should not regularly drink more than 14 units of alcohol per week⁴⁴. Alcohol adversely affects health in a range of ways and there is no definitively ‘safe’ lower limit – no level of regular alcohol consumption improves health. There is a significantly increased risk of oral cancers among drinkers, particularly when combined with smoking or any form of tobacco use. These behaviours are linked; it is therefore important to recognise that drinking alcohol during an attempt to stop smoking can potentially reduce the chances of effectively quitting and this needs to be considered carefully⁴⁵. Alcohol has a wide range of health impacts including cardiovascular disease, cancers (breast, bowel, throat and mouth), and drinking during pregnancy can lead to long-term harm to the baby⁴⁶.

2.3.68 For alcohol, frequency of consumption is more important than duration in years – higher consumption over a few years has a higher risk for oral cancer than a lower intake over many years⁴⁷, although duration is still important as a risk factor for other chronic diseases like cardiovascular disease. There is some variation by site, with evidence by head and neck cancer sites that drink-years are associated with more pharyngeal/oral cavity site cancer when compared with laryngeal cancer.

Table 15: Alcohol Profile (2022/23)

	South Oxfordshire	Vale of White Horse	South East	England
Mortality				
Alcohol-related mortality	31.1	25.1	34.8	39.7
Potential years of life lost (PYLL) due to alcohol-related conditions [Male]	871	758	1,032	1,211
Potential years of life lost (PYLL) due to alcohol-related conditions [Female]	316	201	445	536
Admissions				
Admission episodes for alcohol-specific conditions [Male]	439	542	689	823
Admission episodes for alcohol-specific conditions [Female]	249	230	307	355

⁴⁴ Office for Health Improvement & Disparities (2021) Delivering better oral health: an evidence-based toolkit for prevention: Chapter 12: Alcohol

⁴⁵ NHS England (2019) [Alcohol and Tobacco Brief Interventions Programme](#)

⁴⁶ Public Health England (2016) The public health burden of alcohol: evidence review. 6

⁴⁷ Lubin JH, Purdue M, Kelsey K, et al. (2009) Total exposure and exposure rate effects for alcohol and smoking and risk of head and neck cancer: a pooled analysis of case-control studies. American journal of epidemiology; 170(8):937-47

2.3.69 In 2022/23, South Oxfordshire had 439 admissions per 100,000 people for alcohol-specific conditions among males, and 249 admissions per 100,000 among females. In Vale of White Horse, the rates were 542 per 100,000 for males and 230 per 100,000 for females. These figures are better than the regional averages, which are 689 per 100,000 for males and 307 per 100,000 for females in the South East. They also outperform the national averages of 823 per 100,000 for males and 355 per 100,000 for females.

2.3.70 Similarly, the alcohol-related mortality rate in South Oxfordshire was 31.1 per 100,000 people, and 25.1 per 100,000 in Vale of White Horse, both lower than the South East's average of 34.8 per 100,000 and the national average of 39.7 per 100,000.

2.3.71 Additionally, the potential years of life lost (PYLL) due to alcohol-related conditions were lower in these areas compared to the regional and national averages. For males, South Oxfordshire recorded 871 PYLL and Vale of White Horse 758 PYLL, compared to 1,032 PYLL in the South East and 1,211 PYLL across England. For females, South Oxfordshire had 316 PYLL and Vale of White Horse 201 PYLL, both significantly below the regional average of 445 PYLL and the national average of 536 PYLL.

Drug use

2.3.72 Drug use can cause a range of health-related problems including lung damage, cardiovascular disease, blood-borne viruses, arthritis and immobility among injectors, poor vein health in injectors, liver damage from undiagnosed and untreated hepatitis C virus, sexual risk taking and associated sexually transmitted infections, mental health problems, overdose and drug poisoning⁴⁸.

2.3.73 Between 2020 and 2022, the rate of deaths from drug misuse in South Oxfordshire and Vale of White Horse was notably lower than the regional and national averages. South Oxfordshire reported 2.5 deaths per 100,000 people, while Vale of White Horse had a slightly higher rate of 2.7 deaths per 100,000 people. These rates are considerably below the South East's average of 4.1 per 100,000 and the national average of 5.2 per 100,000. This indicates that both South Oxfordshire and Vale of White Horse have significantly lower drug misuse mortality rates, reflecting a more favourable public health outcome in these areas compared to broader regional and national trends.

Obesity and physical activity/active travel

2.3.74 It is estimated that the NHS spent an estimated £6.1 billion on overweight and obesity-related ill-health in 2014/15. More broadly, obesity has a serious impact on economic development. The overall cost of obesity to wider

⁴⁸ Public Health England (2021) Misuse of illicit drugs and medicines: applying all our health

society is estimated at £27 billion. The NHS costs attributable to overweight and obesity are projected to reach £9.7 billion by 2050, with wider costs to society estimated to reach £49.9 billion per year.

2.3.75 Excess weight in adults is a complex problem with multiple causes and significant implications. It is recognised as a major determinant of premature mortality and avoidable ill health. Adults are defined as overweight (including obese) if their body mass index (BMI) is greater than or equal to 25kg/m². Obesity is defined as a BMI greater than or equal to 30.

2.3.76 In 2022/23, South Oxfordshire and Vale of White Horse had a lower overweight and obesity rate than the average for the South East and England⁴⁹.

Table 16: Overweight and Obesity rate (2022/23)

	South Oxfordshire	Vale of White Horse	South East	England
Overweight (including obesity) prevalence in adults (18+ yrs)	59.4%	57.5%	62.8%	64.0%
Obesity prevalence in adults (18+ yrs)	22.3%	20.6%	24.3%	26.2%

Obesity in young children

2.3.77 During childhood, living with excess weight appears to be associated with lower educational attainment⁵⁰ and with worse psychological and emotional health, in part because of the associated stigma⁵¹. Many studies have shown that obesity in children strongly predicts adult obesity, with obese children and adolescents around five times more likely to be obese in adulthood than those who are not obese. On average, obesity reduces someone's life expectancy by around three years with severe obesity shortening life by as much as lifelong smoking – by up to 10 years⁵².

2.3.78 Between 2019 and 2022, childhood obesity rates in South Oxfordshire, Vale of White Horse, the South East region and England, show a clear upward trend increasing with age. In Reception (ages 4-5), obesity levels were 7.9%

⁴⁹ Office for Health Improvement & Disparities Local Health profiles from Fingertips

⁵⁰ Bowman et al. 2022. Mediators of the association between childhood BMI and educational attainment: analysis of a UK prospective cohort study - Abstract - Europe PMC

⁵¹ Singh et al. 2008. Tracking of childhood overweight into adulthood: a systematic review of the literature (wiley.com)

⁵² Lung, T et al. 2019. Impact of overweight, obesity and severe obesity on life expectancy <https://www.nature.com/articles/s41366-018-0210-2>

in South Oxfordshire, 7.1% in Vale of White Horse, 8.4% in the South East, and 9.9% across England. By Year 6 (ages 10-11), these figures rose significantly to 14.9%, 15.8%, 18.3%, and 21.5%, respectively. This data highlights the regional and national challenges in addressing childhood obesity as children grow older, with rates in South Oxfordshire and Vale of White Horse being slightly lower than the broader South East and England averages.

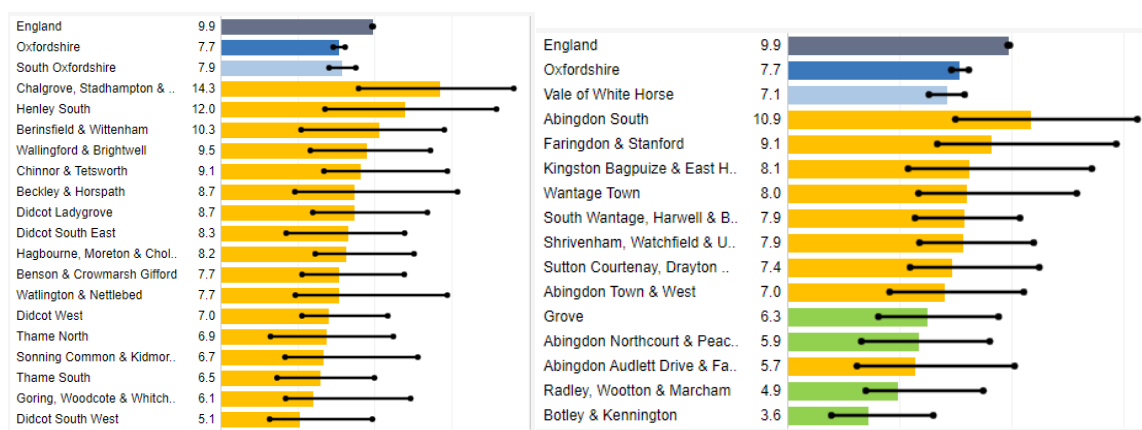
Table 17: Obesity rate in reception and year 6 (2019-2022)

	South Oxfordshire	Vale of White Horse	South East	England
Obesity: Reception year (aged 4-5 years)	7.9%	7.1%	8.4%	9.9%
Obesity: Year 6 (aged 10-11 years)	14.9%	15.8%	18.3%	21.5%

2.3.79 Most recently available data (2019-2022) shows a wide variation in prevalence of childhood obesity across Oxfordshire with some areas having significantly higher rates of children measured as obese or overweight.

2.3.80 The rate of obesity for reception aged children in Vale of White Horse ranges from the lowest rate of 3.6% in Botley & Kennington to the highest of 10.9% in Abingdon South. While the rate of obesity for reception aged children in South Oxfordshire is higher than Vale of White Horse on average, ranging from the lowest rate of 5.1% in Didcot South West to the highest of 14.3% in Chalgrove.

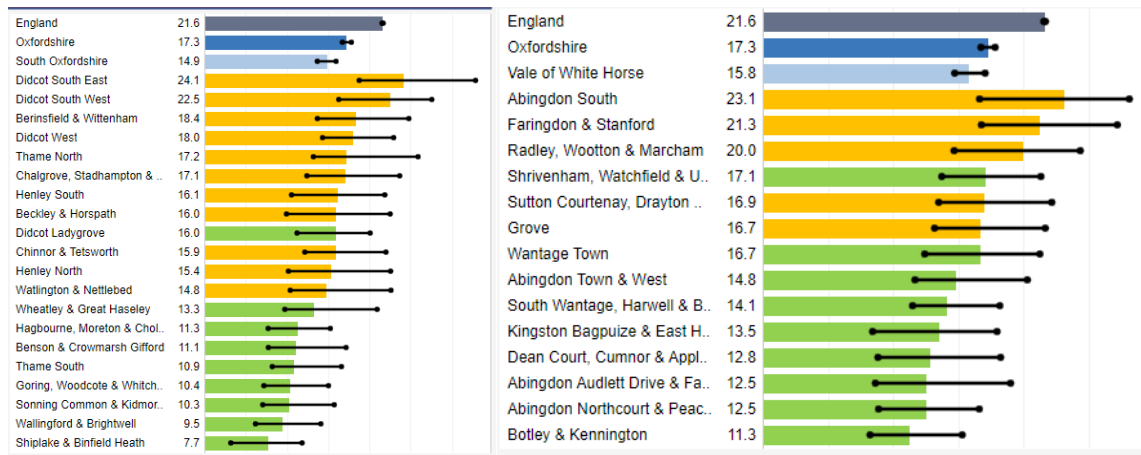
Figure 12: Obesity Rate across the Districts - Reception year (aged 4-5 years)



2.3.81 While the rate of obesity for year 6 in Vale of White Horse is slightly higher than South Oxfordshire, ranging from the lowest rate of 11.3% in Botley & Kennington to the highest of 23.1% in Abingdon South. The rate of obesity

for reception year in South Oxfordshire ranges from the lowest rate of 7.7% in Shiplake & Binfield Heath to the highest of 24.1% in Didcot South East.

Figure 13: Obesity Rate across the Districts - Year 6 (aged 10-11 years)



Physical activity

2.3.82 NHS recommends adults to achieve at least 150 minutes of moderate intensity activity or 75 minutes of vigorous intensity activity per week⁵³. In 2022, 26.6% of adults in Oxfordshire were not meeting physical activity recommendations. 73.4% of adults aged 19+ years were achieving at least 150 minutes of moderate intensity activity per week. This proportion was similar to the data for the South East (70.5%) and higher than England overall (67.3%). Data for the districts also reflects this trend as the proportion of adults meeting physical activity recommendations was higher than the national average in the calendar year for 2021. In the academic year 2021-22, 46.6% of children and young people in Oxfordshire were achieving an average of 60 minutes of physical activity per day, similar to the national average of 47.2%⁵⁴.

Mental Health

2.3.83 People with mental health disorders and disabilities have a higher risk of poor physical health and premature mortality than the general population. Reasons for this include the impact on physical health of deprivation and poverty, but also associated lifestyle behaviours with poor nutrition, obesity, higher levels of smoking, heavy alcohol use and lack of exercise contributing to higher rates of morbidity and lower life expectancy among people with mental health problems⁵⁵.

2.3.84 The most recent data (2017) shows that the estimated prevalence of common mental disorders in people aged 16 and over in South Oxfordshire

⁵³ <https://www.nhsinform.scot/healthy-living/keeping-active/physical-activity-guidelines/>

⁵⁴ Oxfordshire County Council (2023) Oxfordshire Joint Strategic Needs Assessment.

⁵⁵ Friedli, L. and Dardis, C. (2002). Not all in the mind: mental health service user perspectives in mental health.

was 12.3%, and 12.5% in Vale of White Horse. Both districts have a lower rate than the South East average (14.8%) and the England average (16.9%)⁵⁶.

2.3.85 While data setting out the number of ‘people with high anxiety’ for 2022-23 reveals significant differences across regions. In South Oxfordshire, 16.0% of individuals report high anxiety, which is notably lower compared to other areas. In Vale of White Horse, the percentage is much higher at 28.8%, surpassing both the regional rate of 24.0% and the national average for England of 23.3%. This suggests that anxiety levels in South Oxfordshire are considerably lower than in surrounding areas, while Vale of White Horse experiences a much higher prevalence of high anxiety.

2.3.86 On the other hand, recent data (2022/23) shows that both districts have a lower rate in smoking prevalence among adults aged 18 and over with long-term mental health conditions compare to the regional (23.8%) and national (25.1%) average. In South Oxfordshire, 17.7% of adults with a long-term mental health condition are current smokers, while the rate is higher in Vale of White Horse at 20.5%.

Loneliness and social isolation

2.3.87 Isolation and loneliness have been found to be a significant health risk and a cause of increased use of health services. In 2019/20, both districts have a slightly higher level of loneliness than the regional average (20.83%) but a slightly lower level than the national average (22.26%). In South Oxfordshire, 21.89% of adults felt lonely often or always, while the rate is higher in Vale of White Horse at 22.06%⁵⁷.

Long term health issues

2.3.88 Both districts have a lower rate of disability rate than the regional and national average as shown from the 2021 census. However, both districts have a slightly higher long-term illness rate than the regional and national average.

Table 18: Disability rate (Census 2021)

	South Oxfordshire	Vale of White Horse	South East	England
Disabled under the Equality Act: Day-to-day activities limited a lot	4.9%	5.1%	6.3%	7.3%
Disabled under the Equality Act: Day-	9.1%	9.6%	9.9%	10.0%

⁵⁶ Public Health England (2024) Common mental health disorders

⁵⁷ Public Health England (2024) Productive Healthy Ageing Profile

to-day activities limited a little				
Not disabled under the Equality Act: Has long term physical or mental health condition but day-to-day activities are not limited	8.3%	8.2%	7.5%	6.8%
Not disabled under the Equality Act: No long term physical or mental health conditions	77.7%	77.1%	76.3%	75.9%

Open space, leisure and recreation

2.3.89 There is significant and growing evidence documenting the physical and mental health benefits of green spaces. Research shows that access to green space is associated with better health outcomes and income-related inequality in health, is less pronounced where people have access to green space. Key messages from the Public Health England report *Local Action on Health Inequalities: Improving Access to Green Spaces (2014)*⁵⁸ indicates that access to good quality green space is associated with a range of positive health outcomes including better self-rated health; lower body mass index scores, overweight and obesity levels; improved mental health and wellbeing and increased longevity in older people.

2.3.90 Table 19 outlines the quantity (area in hectares) and number of individual sites identified as part of the South Oxfordshire and Vale of White Horse District Councils Green Infrastructure Strategy and Open Space Study. Overall, this identified 1,379 open space sites across both districts, which provide over 5,000 hectares of greenspace. When accounting only for freely accessible sites (i.e. not allotments or outdoor sports provision where access is often restricted), the amount of open space reduces to 4,793.11 hectares, provided by 1,164 individual sites.

⁵⁸https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/357411/Review8_Green_spaces_health_inequalities.pdf

Table 19: Quantity of open space with the districts ⁵⁹

Primary typology	Number of sites	Area (hectares)
Parks and gardens	79	190.85
Recreation grounds	110	330.15
Natural greenspace	183	4,082.20
Amenity greenspace	481	190.01
Provision for children and	78	11.49
Churchyards and cemeteries	234	102.37
Outdoor sports	78	232.20
Community growing spaces (including allotments)	137	117.59
Total	1,379	5,256.90

2.3.91 Open space provision in the districts is dominated by natural greenspace, comprising over 75% of all open space by area. This includes nine natural greenspaces sites over 100 hectares in size. The largest natural greenspace within the districts is Wytham Woods, which equates to 379 hectares.

2.3.92 The most common type of open space within the districts is amenity greenspace, followed by churchyards and cemeteries. These sites tend to be smaller in size and comprise a total of 190.01 hectares and 102.37 hectares respectively.

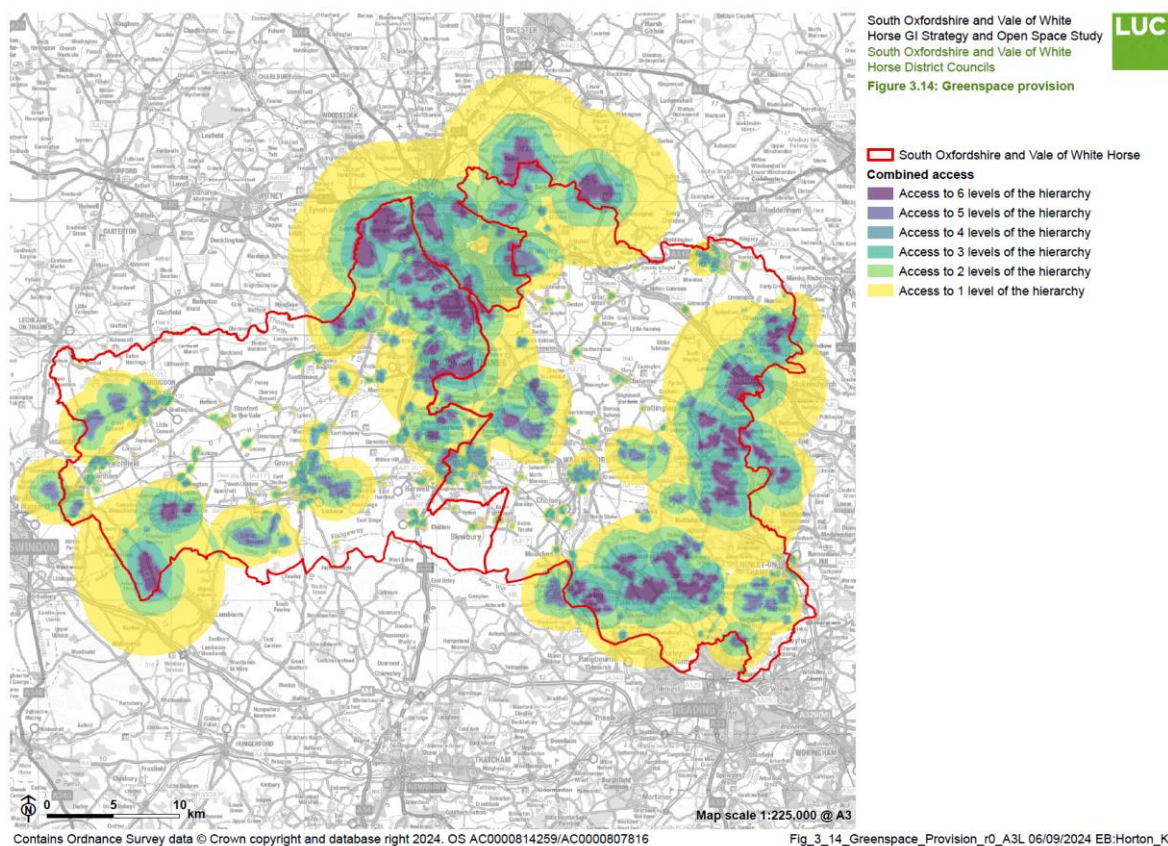
Access to public green space

2.3.93 Natural England recommends that residents should have access to at least a neighbourhood (at least 10 hectares in size) scale greenspace within a 15 minute walk, as well as a local (at least two hectares in size) or doorstep (at least 0.5 hectares in size) scale greenspace within a 5 minute walk⁶⁰. Figure 14 shows the pattern of access to different levels of this greenspace hierarchy across the districts.

⁵⁹ Data derived from South Oxfordshire and Vale of White Horse District Councils (2024) Green Infrastructure Strategy and Open Space Study. Please visit the study for a higher resolution graphic. Further details regarding the districts' green infrastructure and open spaces can be found in the study.

⁶⁰ [Natural England \(2023\) Green Infrastructure Standards for England – Summary.](#)

Figure 14: Greenspace provision ⁶¹



2.3.94 Within the Tier 1 settlements, gaps in accessibility exist within large sections of Henley-on-Thames, south west and north east Abingdon-on-Thames, eastern areas of Thame, the western edge of Wallingford, south east Didcot and land to the west of Wantage.

2.3.95 In smaller villages within the districts, accessibility to at least one open space is generally available. However, there are some deficiencies in access within Wheatley (Tier 2 settlement), East Hendred (Tier 3 settlement), Whitchurch-on-Thames, Lower Shiplake and Milton Heights (Tier 4 settlements). Larger areas of natural greenspace attract visitors from a wider area and act as destination spaces. These sites are primarily located on the edge of Oxford and in the south within the Chilterns National Landscape. Gaps in this provision is evident within the districts, notably around Thame, south of Didcot and between Wantage and Faringdon.

2.3.96 Community growing spaces and allotments are distributed throughout the districts. However, this provision is more scattered within the south east of South Oxfordshire district; with villages such as Ipsden, Checkendon, Stoke

⁶¹ Figure derived from South Oxfordshire and Vale of White Horse District Councils (2024) Green Infrastructure Strategy and Open Space Study. Please visit the study for a higher resolution graphic. Further details regarding the districts' green infrastructure and open spaces can be found in the study.

Row and Whitchurch Hill exhibiting deficiencies in access to these types of open space.

Crime and safety

2.3.97 Figures 15 and 16 show the crime rate trend from 2018 to 2022 in South Oxfordshire and Vale of White Horse. The most common type of crime in both districts is violence and sexual offence (detailed in figures 15 and 16).

Figure 15: South Oxfordshire crime rate trend (2018-2023)

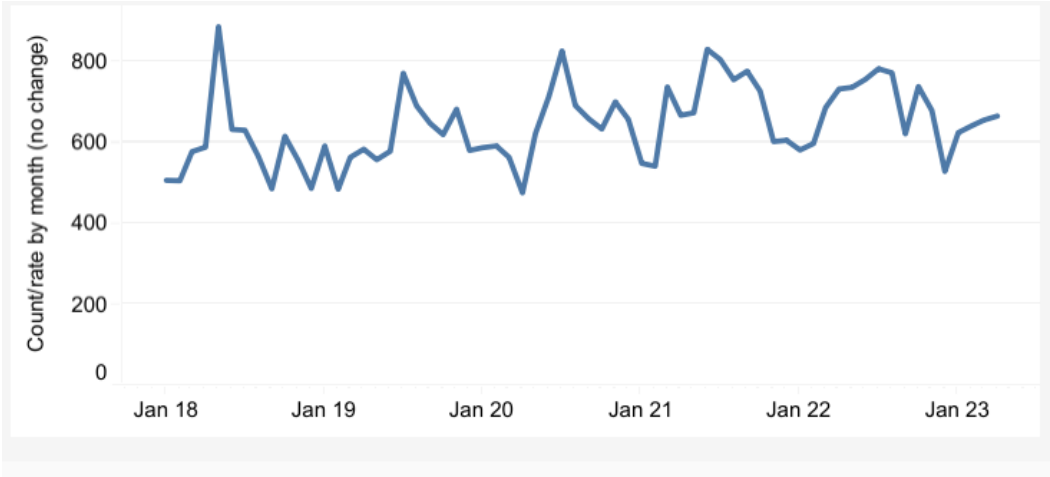


Figure 16: Vale of White Horse crime rate trend (2018-2023)

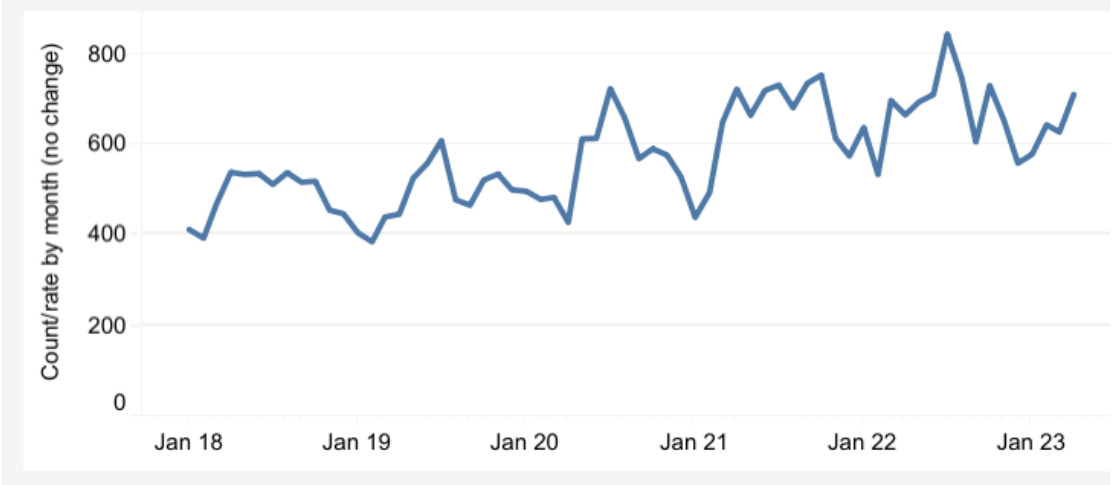


Figure 17: South Oxfordshire crime type (2022)

Crime type	Offences	Rate	Change
Violence and sexual offenc..	3,234	21.5	+1.7%
Public order	914	6.5	+0.3%
Other theft	757	5.5	+3.4%
Anti-social behaviour	739	5.6	-17.2%
Criminal damage and arson	683	5.1	-7.2%
Vehicle crime	614	5.0	+8.3%
Burglary	336	3.0	-20.3%
Shoplifting	314	4.2	-6.6%
Drugs	200	2.5	-16.6%
Other crime	149	2.4	-1.7%
Theft from the person	94	2.1	+1.6%
Bicycle theft	88	2.5	+26.2%
Possession of weapons	49	1.6	-14.6%
Robbery	25	1.2	-13.7%

Figure 18: Vale of White Horse crime rate (2022)

Crime type	Offences	Rate	Change
Violence and sexual offenc..	3,373	23.9	+7.1%
Public order	1,008	7.5	-2.0%
Anti-social behaviour	915	7.0	-0.2%
Criminal damage and arson	788	6.1	+5.6%
Other theft	527	4.1	+15.7%
Vehicle crime	343	3.0	-5.3%
Burglary	284	2.6	-15.7%
Drugs	246	2.9	-19.1%
Shoplifting	191	2.8	-22.0%
Other crime	139	1.8	-3.3%
Bicycle theft	104	2.3	+7.1%
Theft from the person	94	1.8	+33.8%
Possession of weapons	45	1.5	-2.0%
Robbery	16	0.9	-30.3%

CLIMATE CHANGE

2.3.98 The growing impacts of climate change are evident, and it could be argued that climate change is the greatest challenge facing the world today. We recognise this, and both Councils are committed to tackling climate change and lowering greenhouse gas emissions. This is evident as South Oxfordshire and Vale of White Horse have both declared climate emergencies.

2.3.99 The impacts of climate change can influence our health and wellbeing in a variety of ways. As temperatures increase, there is an increased risk of death and illness, particularly for vulnerable groups such as the elderly,

children and those chronically ill who are at most risk of heat-related deaths. Hot weather can also impact health and social care services, as well as the health care system's ability to respond and provide routine care. Notably, Oxford University Hospitals NHS Foundation Trust reported the highest burden of overheating events across the southeast region in 2022⁶². Parts of Abingdon within Vale of White Horse have also been identified by the Oxfordshire Climate Vulnerability Assessment (2024)⁶³ as holding some of the highest heat wave risk in Oxfordshire.

- 2.3.100 Flooding can also have huge impacts on communities, businesses, and infrastructure. Areas of high current flood hazard have been identified⁶⁴ in Vale of White Horse and is visible along river channels including the River Thames in Abingdon and the River Ock in the district. Low current flood hazard was recorded in the south-east of Oxfordshire in South Oxfordshire in the Chilterns AONB which has higher elevations.
- 2.3.101 Droughts, high winds, and storms can also pose risk to people's health as well as the district's critical infrastructure, and with the impacts disproportionately felt by the most vulnerable and disadvantaged. Climate impacts can also affect people's mental health, with eco-anxiety, anxiety driven by climate change, becoming more prevalent.
- 2.3.102 Fuel poverty occurs when a household's income fails to meet the cost of heating and powering the home adequately, which can create health problems including excess winter deaths, childhood asthma and poor mental health. There is a crucial link between climate change and fuel poverty. In the UK we generate a lot of energy from gas, a fossil fuel, and fossil fuels are becoming more expensive, meaning more people are at risk of fuel poverty. One way we can help improve fuel poverty is by retrofitting homes to improve their energy performance. This can have wide reaching benefits including financial, comfort, and social benefits as well as helping to prevent health risks from damp and mould.
- 2.3.103 Although fuel poverty in the districts is significantly better than the regional average of 9.7%, (8.8% in South and 8.1% in Vale), fuel poverty has worsened since last year. In South Oxfordshire it increased from 7.7% to 8.8% (+1.1%) and in Vale it increased from 7% to 8.1% (+1.1%)⁶⁵. Eight areas in South Oxfordshire have more than 10% of their households in fuel poverty. The range from highest proportion (Watlington and Nettlebed) to lowest (Didcot Ladygrove) is 10.1%. Additionally, two areas in Vale of White Horse have more than 10% of their households in fuel poverty. The range

⁶² [JSNA \(2024\) – Climate](#)

⁶³ [Climate Vulnerability Assessment Oxfordshire \(2024\)](#)

⁶⁴ [Climate Vulnerability Assessment Oxfordshire \(2024\)](#)

⁶⁵ [JSNA \(2024\) – Climate](#)

from highest proportion (Shrivenham, Watchfield, and Uffington) to lowest (Abingdon Northcourt and Peachcroft) is 6.3%.

3 Summary of Health Issues, Impacts and Scope

3.1 Health Issues

3.1.1 The baseline set out in this report has highlighted the following as health issues present within South Oxfordshire and Vale of White Horse Districts:

POPULATION

- Both South Oxfordshire and Vale of White Horse's population is increasing.
- The main driver of population growth has been in the elderly population.
- There is one LSOA in the districts that is ranked amongst the 20% most deprived nationally. This is within Abingdon Caldecott ward in Vale of White Horse.
- Several areas within the districts rank within the 10% most deprived nationally in respect to geographical access to services, notably in rural areas.

HOUSING

- The housing affordability ratio for South Oxfordshire and Vale of White Horse is well above the national average.
- Average property prices in both districts are consistently higher than the regional and national average.
- Vale of White Horse has a higher rate of social renting than the regional average.

ECONOMY AND EMPLOYMENT

- In terms of commuting patterns, there has been a significant increase in people reporting that they mainly work from home, with a reduction in people commuting to work by car or van.

TRANSPORT AND CONNECTIVITY

- Car ownership in South Oxfordshire and Vale of White Horse is high, with almost half of the population having at least 2 cars.

HEALTH AND WELLBEING

- High anxiety levels in Vale of White Horse are higher than the regional and national average.
- There are slightly higher levels of loneliness compared to regional averages in the districts.

- Childhood obesity rates in the districts were lower than national and regional averages, however there are pockets of the districts that had higher than average childhood obesity rates.
- Smoking rates in South Oxfordshire were higher than the national and regional average.
- Both districts have a slightly higher long-term illness rate than the regional and national average.

VULNERABLE GROUPS

3.1.2 This baseline study has identified the following vulnerable groups:

- Ethnicity and race
- Age – infants (0-5)
- Age – children (6-10)
- Age – young people (11-17)
- Age – adults (18-74)
- Age – older people (75+)
- Disability
- Long-term health conditions
- Unemployed/workless/low quality employment
- Refugee/asylum seekers
- Homeless or no permanent home
- Gypsy and travellers

KEY DETERMINANTS OF HEALTH

3.1.3 The following have been identified as possible key determinants of health for South Oxfordshire and Vale of White Horse for the Joint Local Plan:

- Housing
- Physical activity
- Healthy food environments
- Environment, including: air quality, noise, traffic and transport
- Crime and antisocial behaviour
- Economy and employment
- Education and skills
- Local natural environment and access to green spaces
- Access to services

POTENTIAL IMPACTS OF THE JOINT LOCAL PLAN

3.1.4 The following have been identified as possible health impacts of the Joint Local Plan:

Housing

3.1.5 The Joint Local Plan will result in the provision of new housing developments in future. The provision of an increasing in housing within the districts, will provide more access to affordable housing (as a proportion of the new

housing will be affordable), and also could increase the number of residents in the districts in becoming homeowners. Higher design quality and increased space standards could improve the quality of homes, as well as increasing the provision of adaptable and accessible homes for the aging population, which could enable them to live independently for longer.

Physical activity

3.1.6 The Plan will present further opportunities to encourage active travel, as well ensure an adequate provision of provide sports and recreational facilities which will encourage a more active lifestyle and further physical activity within the districts.

Healthy food environments

3.1.7 The Plan presents an opportunity to create healthy food environments in the districts, for example by ensuring there is an adequate provision of allotments and community growing spaces, which will help communities learn about horticulture as well as healthier eating and gain access to affordable vegetables and fruit.

Environment

3.1.8 The Plan presents opportunities to improve the quality of our environment, for example through improvements to air quality, pollution as well as help to reduce traffic and emissions, all of which can have a negative impact on our health.

Crime and antisocial behaviour

3.1.9 The Plan can influence how we design new developments to actively discourages and reduces the likelihood of crime and antisocial behaviour, for example by ensuring spaces are overlooked by other properties, creating natural surveillance.

Economy and employment

3.1.10 The Plan will ensure an adequate provision of employment sites, as well as protecting existing employment sites. This will help to ensure that there's enough employment sites to provide for the number of jobs needed over the plan period, as well as support economic growth in the districts contributing to its success and vitality in future.

Education and Skills

3.1.11 Plan policies that help support the local economy could increase the level of education and skills within the districts. Community employment plans could be utilised to ensure that new developments give local people access employment, skills and training opportunities.

Local natural environment and access to green spaces

3.1.12 New development coming forward as a result of the Plan could affect the character and quality of the existing natural and built environment, depending on its location and quality. The plan policies can be utilised to prevent any significant adverse impacts to the districts natural and built environment, providing protections where necessary. The Plan also provides an opportunity to ensure the adequate provision of open space and green infrastructure, which has a positive influence on mental and physical health.

Access to services

3.1.13 This HIA has identified an aging population, and also has identified that due to the districts rural character, access to services is quite limited in more isolated areas of the districts. The plan can provide opportunities to improve the access to services for those in areas where these are limited. This could consequently provide health benefits if for example, access to transport links, employment, healthy food, greenspace and recreation are improved.

4. Conclusion and next steps

4.1.1. This HIA Scoping Report has provided the context for and established the scope and approach of the HIA for the Joint Local Plan.

4.1.2. This scoping exercise has found that the districts have a generally positive health profile, with many aspects of the district's health being above national and regional averages. It has also pulled out (in section 3) the potential health issues that should be recognised when moving forward with the assessment stage.

4.1.3. The next stage of the HIA will be to progress with the assessment of the Joint Local Plan policies, establishing their potential health impacts and identifying any potential mitigations or actions moving forward.

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