

Understanding Forest of Dean 2015

Produced by the Strategic Needs Analysis Team, Gloucestershire County Council

Version: v1.0

Contents

1.	Introduction	3
2.	Executive summary	4
3.	Forest of Dean context	10
3.	1 About this section	10
3.	2 Demographics	10
3.	3 Deprivation	18
3.	4 Life expectancy	26
3.	5 Mortality	28
3.	6 Economy	31
3.	7 Protected characteristics	50
3.	8 Key messages	57
4.	Getting the right start in life	59
4.	1 About this section	59
4.	2 Maternity	59
4.	3 Sexual health	61
4.	4 Maintaining a healthy weight in childhood	63
4.	5 Education	66
4.	6 Promoting the welfare of children and Safeguarding	83
4.	7 Key messages	87
5.	Keeping healthy – prevention	88
5.	1 About this section	88
5.	2 Alcohol	88
5.	3 Smoking	89
5.	4 Maintaining a healthy weight in adults	90
5.	5 Social Isolation	91
5.	6 Key messages	97
6.	Particular Needs	98
6.	1 About this section	98
6.	2 Disability	98
6.	3 Mental health	112
6.	4 Long-term conditions	113
6.	5 Dementia	115
6.	6 Service use profile – community based care	117
6.	7 Service use profile – residential and nursing care	118
6.	8 Place of death	120

6.9	Key messages	121
7. H	lealthy and Sustainable Places and Communities	123
7.1	About this section	123
7.2	Community Assets	123
7.3	Carers	124
7.4	Volunteering	127
7.5	Culture and Leisure	129
7.6	Transport	132
7.7	Housing	135
7.8	Education	151
7.9	Unemployment	151
7.10	0Community Safety	151
7.1 ⁻	1Key messages	155

1. Introduction

Understanding Forest of Dean has been produced to provide an understanding of the district and its communities. It looks at the needs of communities and how we expect them to change in the future and assesses current and future health and social care needs of the residents of the Forest of Dean.

The report is part of a suite of documents, which also includes; Understanding Cheltenham, Understanding Cotswold, Understanding Gloucester, Understanding Stroud, Understanding Tewkesbury and Understanding Gloucestershire – A Joint Strategic Needs Analysis. Where possible the documents follow a similar structure to one another, although difficulties in obtaining some data at district level means Understanding Gloucestershire – A Joint Strategic Needs Analysis, features some topics that are not available in the other reports.

For any feedback please contact the Strategic Needs Analysis Team: inform.gloucestershire@gloucestershire.gov.uk

2. Executive summary

Forest of Dean context

- Between 2004 and 2014, the population of Forest Dean District grew by 2,600 people to around 83,700. This represents an average annual growth rate of 0.32%, well below the Gloucestershire and England averages of 0.68% and 0.80% respectively. However, the annual growth rate in this period for the district's older population (3.32%) was much higher than for Gloucestershire and England. The population of younger people (aged 0-64) actually fell between 2004 and 2014.
- Projections suggest that the Forest of Dean population will grow to 86,800 by 2025 and 89,900 by 2037. Again, projected overall growth rates are lower for the Forest of Dean than for Gloucestershire and England as a whole. The projected percentage increase of the older population in the Forest of Dean is inline with that of Gloucestershire between 2012 and 2037 (up 72.6% compared to 72.2%).
- The migration pattern since 2004 has been closely linked to the inflow from East European countries. This has resulted in the 'White Other' population in Forest of Dean District increasing between 2001 and 2011, from 730 to 1,200. The 'White other' group now accounts for 1.5% of the district population, compared to 0.9% in 2001. The Black and Minority Ethnic (BME) population was also 1.5% of the total District population in 2011, low compared to the county as a whole.
- In general, Forest of Dean District displays average levels of deprivation in relation to the rest of England. Out of the 13 LSOAs in Gloucestershire that rank in the top 20% most deprived nationally, one is located in Forest of Dean district – Cinderford West. The population of the Forest of Dean District is most deprived in relation to the 'Barriers to Housing and Services' domain of deprivation.
- Females in the Forest of Dean can generally expect to live around 4 years longer than their male counterparts. Overall, life expectancy for both men and women has been steadily increasing in the district over the past decade. Over this period, life expectancy has been slightly lower for Forest of Dean residents than the county average, and generally slightly higher than the national average.
- Males in the least deprived Forest of Dean decile (10th of population) can expect to live 2-3 years longer than those in the most deprived decile. For females, the gap is nearly 5 years. Over the past decade, deprived males and un-deprived males and females have seen an increase in life expectancy. However, for deprived females there has been little change over the period

and the gap in life expectancy between them and un-deprived females has started to widen which could be a cause for concern.

- The three leading causes of death in the Forest of Dean are cancer, cardiovascular disease (CVD), and respiratory disease, respectively. This is consistent with the national picture.
- The rate of Excess Winter Deaths in Forest of Dean District rose slightly from 2006-09 to 2008-11, but has since fallen. It remains lower than the national and county benchmarks, but this difference is not statistically significant.
- The number of employees in Forest of Dean district after experiencing a decrease between 2009 and 2010 increased slightly to 23,360 by 2014. The annual growth rate between 2009 and 2014 at -0.8% is the second lowest in the county after Gloucester. Between 2015 and 2025 the number of employees is predicted to grow at 0.3% a year, in line with the county average rate.
- There are nearly 3,700 businesses in Forest of Dean District accounting for 13% of the County's total. Growth in the number of businesses between 2010 and 2015 over the last five years is the lowest in the County at 2.8% compared to 8.1% for Gloucestershire as a whole.
- The district is home to a lesser-qualified and lower skilled workforce serving an economy related to basic manufacturing and service activities which is, however, projected to grow.
- The number of people claiming Job Seekers Allowance (JSA) in Forest of Dean District has shown a steady decline since May 2014 to 1.1% (580 people) in May 2015. The District has the third highest claimant rate in the county although it is well below the national average.
- The Forest of Dean in 2011 was the District with the second lowest proportion of the resident population with qualifications at Level 4 and above (24%) and the highest proportion with no qualification (25% or 16,700 people).
- In 2011 14,627 residents commuted outside the district to work and 6,015 commuted in a net outflow of 8,612, the largest in Gloucestershire.

Getting the right start in life

- The Forest of Dean has a higher percentage of low birth weight babies (3.05%) than England (2.80%) but slightly lower than Gloucestershire (3.07%).
- Under 18 conception rates have more than halved in the Forest of Dean since the 1998 recording baseline. They remain below the county and national benchmarks.

- Chlamydia detection rates in the Forest of Dean were lower than the county and national benchmarks. It is possible this reflects the proportion of people screened rather than the actual rate of young people with Chlamydia in the District.
- For the last seven years the Forest of Dean has had a higher percentage of excess weight in 4-5 year olds and 10-11 year olds compared to Gloucestershire and England.
- Forest of Dean was the poorest performing District in the county for the proportion of children achieving a good level of development at the Early Years Foundation and also below the regional and national averages.
- At Key Stage 1 achievement in Forest of Dean District is generally below or similar to the national average and county average across all subjects. However the District has shown the greatest improvement between 2010 and 2014.
- At Key Stage 2 achievement in the District was mixed but again showed the greatest rate of improvement between 2010 and 2014.
- The Forest of Dean is generally the worst performing District in Gloucestershire at Key Stage 4 and Key Stage 5 with just 60.4% of resident pupils achieving 5+ A*-C grades at GCSE compared with an average of 69.6% for the county in 2014.
- Outcomes for most children in Gloucestershire are good and getting better. The GCP Children's Partnership Plan has contributed to significant improvements as evidenced by the views of children and young people, for example, through the online pupil survey.
- During the whole of the 2014/15 reporting year, children living at an address in the Forest of Dean have the second lowest rate of referrals and the lowest rate of initial assessments. In contrast, the rate of children who are the subject of a Child Protection plan is the highest of the six districts in Gloucestershire.
- According to a snapshot taken as at 31st August 2015, Forest of Dean has the second highest rate of Children in Care, with Gloucester having the highest rate.

Keeping Healthy – Prevention

- For the last two years the rate of alcohol-related hospital admissions in Forest of Dean District has been below the Gloucestershire and England rates.
- Smoking rates in the Forest of Dean have declined between 2011 and 2013, and are now below the Gloucestershire and England benchmarks.

- In 2012, 67% of adults in Forest of Dean District were overweight or obese, which is lower than the Gloucestershire (64%) and England (64%) benchmarks.
- In 2014 the percentage of physically inactive adults in Forest of Dean District was below the the Gloucestershire and England benchmarks.
- There is a growing evidence base that links loneliness and social isolation with poorer health as well as demonstrating that declining health or the need to provide care to a loved one can lead to greater loneliness.

Particular needs

- While overall health tends to be good, this is not true for everyone and for every part of the district. Some groups of individuals, such as those on lower incomes, people from certain ethnic groups and people with mental health problems, may experience poorer health outcomes.
- 19.6% of Forest of Dean residents (16,603 people) reported having a long term health problem or disability; this was above the county, regional and national averages.
- Analysis of disability living allowance and attendance allowance claimants show Forest of Dean had a higher proportion of disability benefit claimants (7.8% of total population) than the county, regional and national averages and higher than all the other districts in Gloucestershire.
- Arthritis was the most commonly reported disabling condition in the Forest of Dean, representing almost a quarter of all claims. This reflects the picture at county, regional and national level. However, learning difficulties was the second common condition with almost 14% of claimants a higher rate than elsewhere in the county.
- The total number of pupils with Special Educational Needs attending schools in Forest of Dean schools has been falling since 2009/10, following a trend seen at county level. During this period the number of people with the lowest level of need have declined, while those with higher levels of need have increased.
- The number of people with a moderate or serious physical disability is projected to decline slightly between 2014 and 2025. In contrast the number of people aged over 65 who are unable to manage at least one mobility activity on their own, is forecast to increase steeply.
- The number of people aged 18+ with a learning disability is forecast to increase to 1,617 people by 2025, this represents an increase of 65 people or 4.2%.

- For the majority of long term conditions (LTCs) Forest of Dean District has a higher prevalence rate than the county as a whole. It should be noted that it is the only District in the county that is above average for both the proportion of older people and for deprivation and the combination of these two factors is likely to lead to higher rates of LTCs.
- There are estimated to be over 1,350 people aged 65 and over with dementia in Forest of Dean District and this is forecast to rise by almost three quarters to over 2,330 in 2030.
- The rate per 100,000 of people receiving community-based adult social care services in the Forest of Dean is the highest in the county but like the rest of the county, numbs have declined since 2013/14.
- The Forest of Dean has the highest rate of people in residential care in the county in recent years. For nursing care the Forest of Dean is close to the county average.

Healthy and Sustainable Places and Communities

- 11.8% of the population of the Forest of Dean (9,668 people) provided unpaid care each week in 2011. This represents an increase of 13.5% since 2001 mainly due to the increasing elderly population. A rise of 9.7% is projected for the next four years, the greatest proportional increase of any District in the county. The Forest of Dean has a greater share of the population with caring responsibilities when compared against the county as a whole for every age band.
- Domestic tourism takes two forms, day trips and domestic overnight stays.
 Only Tewkesbury had lower numbers of visitors in both categories than the Forest of Dean District.
- Suitable public and community transport can play a key role in reducing social isolation and making a community's assets accessible to those who need them most. Work is just starting on mapping transport usage against need.
- In 2011 there were 34,167 households in Forest of Dean District; this represents an increase of 5.0% or 1,637 households since 2001.
- The number of households in the Forest of Dean is projected to increase by 1,000 between 2012 and 2017 (2.9%) and by 5,000 between 2012 and 2037 (14.3%).
- At the time of the 2011 Census 3.8% of households in Forest of DeanDistrict had fewer rooms than the standard requirement and were therefore overcrowded, this was lower than the county and national average.
- In 2013 an estimated 4,181 households in the Forest of Dean were in fuel poverty representing 11.6% of all households.

- In 2011, there were an estimated 12,900 private sector dwellings in Forest of Dean District exhibiting Category 1 hazards..
- Over the last 10 years the number of households in the Forest of Dean that met the statutory definition of homelessness per 1,000 households has fallen from 3.1 per 1,000 households in 2004/5 to less than 0.5 in 2014/16.
- Coleford Central ward has the highest anti-social behaviour (ASB) rate of any ward in the District and has a higher rate of ASB than Gloucester city in 2014/15.

3. Forest of Dean context

3.1 About this section

This section provides a summary of the Forest's significant demographic trends and its current social and economic profile. Trends in the population profile both for adults and children contribute to changing patterns of need and demand. These patterns are also affected by variation in factors such as deprivation, ethnicity, rurality and economic activity both within the Forest of Dean and in comparison with the rest of the county.

3.2 Demographics

3.2.1 Population trend and projections

The population of Forest of Dean was estimated to be around 83,700 in 2014¹, representing a rise of approximately 2,600 people since 2004, an average increase of 260 people per annum. This is equivalent to an annual growth of 0.32% in the 10 years to 2014, well below the Gloucestershire and England & Wales averages of 0.68% and 0.80% respectively.

The growth in Forest of Dean during this period has been driven mainly by net internal migration (net movement to the district from elsewhere in the UK) with a net increase of 320 people per year. In the same period, Forest of Dean has seen a small natural decline with an average of 40 more deaths than births per year.

Between 2004 and 2014, the growth of the older population (aged 65 and above) in Forest of Dean continued to increase, while the younger population decreased. In addition, the growth rate in district's older population was well above those in Gloucestershire and England and Wales².

		Forest	Gloucestershire	England and Wales		
Age Group	Population 2004	Population 2014	Change 2004-2014	% Change 2004-2014	% Change 2004- 2014	% Change 2004-2014
All Ages	81,100	83,674	2,574	3.2%	6.8%	8.0%
0-19	19,500	18,345	-1,155	-5.9%	-0.2%	3.7%
20-64	47,100	46,148	-952	-2.0%	4.7%	6.7%
65+	14,400	19,181	4,781	33.2%	23.2%	19.6%

Table 1: Population Trends 2004-2014

¹ Mid-2004 and Mid -2014 Population Estimates, Office for National Statistics

² Ibid.

Assuming current population trends continue, the ONS projections³ for the next 25 years suggest that the population in Forest of Dean will reach 86,800 by 2025 and 89,800 by 2037. This represents an annual increase of 0.38% or 320 people between 2012 and 2025, and 0.29% or 250 people between 2025 and 2037. The district's growth rates are lower than those predicted for both Gloucestershire and England in the short, medium and long term.

The dominating feature of the projected trend for Forest of Dean is a sharp increase in the number of older people (aged 65+), while projections for children, young people and the working age group show a decline in the next 25 years.

The same projections also suggest that the number of deaths will exceed births by 4,900 during the 25-year period. At the same time, there will be a net inflow of internal migration of 9,700 people. International migration is projected to contribute 2,500 (34.2%) of the total growth in the next 25 years.

Projected Population Growth 2012-2037						
	Forest of Dean		Gloucestershire		England	
	%	%	%	%	%	%
	Projected	Projected	Projected	Projected	Projected	Projected
Age	Change	Change	Change	Change	Change	Change
Group	2012-2025	2025-2037	2012-2025	2025-2037	2012-2025	2025-2037
All Ages	5.0%	3.5%	8.9%	6.2%	9.2%	6.4%
0-19	0.0%	-1.6%	7.4%	1.0%	8.6%	0.7%
20-64	-6.0%	-6.9%	0.6%	-1.1%	3.4%	1.5%
65+	38.5%	24.6%	35.4%	27.1%	30.4%	26.6%

Table 2: Projected Population Growth 2012-2037

3.2.2 Ageing population

The number of older people aged 65 and above in the district has been growing by an average of 480 people per year between 2004 and 2014. Projections suggest that this will increase to 520 per annum between 2012 and 2037 as a result of rising life expectancy and the demographic impacts of two generations of baby boomers.

The projected percentage increase of the older population in Forest of Dean is in line with that in Gloucestershire over the period 2012-2037 (up 72.6% compared to 72.2%).

In particular, the number of people aged 75 and over (the ages at which GCC adult care and other support services are most likely to be required) is projected to increase by an annual average of 370 in the same period. The table below shows that the number of people aged 85 and above will see the fastest rate of growth particularly in the long term.

³ 2012-Based Sub-national Population Projections, Office for National Statistics

Projected Population Growth 2012-2037						
	Forest of Dean		Gloucestershire		England	
	%	%	%	%	%	%
	Projected	Projected	Projected	Projected	Projected	Projected
Age	Change	Change	Change	Change	Change	Change
Group	2012-2025	2025-2037	2012-2025	2025-2037	2012-2025	2025-2037
All 65+	38.5%	24.6%	35.4%	27.1%	30.4%	26.6%
65-74	17.0%	17.1%	19.1%	21.0%	16.8%	22.4%
75-84	64.3%	12.0%	53.3%	15.6%	42.7%	15.8%
85+	69.6%	76.9%	55.7%	70.4%	54.2%	63.9%

The number of wards with large number of older people is also increasing. In 2011, only 1 council ward (i.e. 4% of all wards) in the district had at least 1,000 residents aged 65+. By 2013, the number grew to 4 (i.e. 15% of wards).



Figure 1: Population Aged 65+ by Ward⁴

3.2.3 International migration and Ethnic population

The 2011 Census showed that 3,160 people who were usually resident in the Forest of Dean were born outside the UK, representing 3.9% of the total

⁴ Mid-2013 Population Estimates, Office of National Statistics



population (compared to 7.7% for the county and 13.4% nationally). Among these, 34% (1,080 people) were recent migrants, having arrived since 2004⁵.

Figure 2: Overseas-born Residents⁶

The migration pattern since 2004 was closely linked to the inflow from East European countries. This has resulted in the 'White Other' population in the district increasing between 2001 and 2011, from 730 to 1,200. The 'White other' group now accounted for 1.5% of the district population, compared to 0.9% in 2001.

At the same time, the percentage of Black and Minority Ethnic (BME) population rose from 0.9% to 1.5%, but the figure was low compared to the county and national percentages of 4.6% and 14.1% respectively.

Ethnic groups showing the biggest growth in the Forest in the 10 years to 2011 were White-British (+1,040 people), 'White-other' (+470), followed by 'Other Asian' (+140) and 'Mixed-White and Asian' (+100).

⁵ 2011 Census, Office for National Statistics, (Ethnic Group)

⁶ 2011 Census, Office of National Statistics (Year of arrival in the UK)



Figure 3: Changes in Ethnic Population⁷

Figure 4 shows that Black and Minority Ethnic Groups accounted for 1.5% of the total population in the Forest of Dean (the lowest proportion of all the districts in Gloucestershire), compared to 4.6% of the population in the county.



Figure 4: Population of Gloucestershire's districts by broad ethnic group 2011⁸

⁷ 2001 and 2011 Census, Office of National Statistics (Ethnic Group)

The maps below show the proportions of Non-British White population and Black and Minority Ethnic population across Forest of Dean.



Figure 5: Proportion of Non-British White Population in Forest of Dean by Lower Super Output Area (LSOA)

⁸ 2011 Census, Office for National Statistics, (Ethnic Group)



Figure 6: Proportion of Black and Minority Ethnic (BME) Population in Forest of Dean by Lower Super Output Area (LSOA)

It is difficult to predict future patterns of immigration into Forest of Dean. The latest statistics on the number of overseas nationals registering to work in Forest of Dean show that the number of migrant workers to the district has decreased from 250 in 2006/07 to 150 in 2013/14⁹. ONS long-range projections forecast that

⁹ Department for Works and Pension

on current trends, net international migration (immigration minus emigration) to Forest of Dean will be 2,500 over the 25-year period of 2012-2037¹⁰.

It is likely that the future growth of the ethnic population in Forest of Dean will be increasingly accounted for by natural growth from within the domestic population, as it has a young age structure. 90.7% of the ethnic population in the Forest of Dean were children and working-age in 2011, compared to 79.3% of Forest of Dean population as a whole.

3.3 Deprivation

The 2015 English Indices of Deprivation¹¹, published by the Department for Communities and Local Government on 30th September 2015, are used throughout this section.

The English Indices of Deprivation 2015 provide a set of relative measures of deprivation for small areas (Lower-layer Super Output Areas - abbreviated to *LSOAs*) across England, based on seven different (weighted) domains of deprivation:

- Income Deprivation (22.5%)
- Employment Deprivation (22.5%)
- Education, Skills and Training Deprivation (13.5%)
- Health Deprivation and Disability (13.5%)
- Crime and Disorder (9.3%)
- Barriers to Housing and Services (9.3%)
- Living Environment Deprivation (9.3%)

Combining information from the above seven domains produces an overall relative measure of deprivation, the Index of Multiple Deprivation (IMD). Each of these seven domains comprises of specific indicators. In addition, there are two supplementary indices: the Income Deprivation Affecting Children Index and the Income Deprivation Affecting Older People Index. These, together with the total IMD, total 37 indicators.

The IMD is the most widely used of the Indices of Deprivation and is the official measure of relative overall deprivation for small areas in England. The IMD ranks every LSOA in England from 1 (most deprived area) to 32,844 (least deprived area). Gloucestershire accounts for 373 of these LSOAs.

¹⁰ 2012-Based Sub-national Population Projections, Office for National Statistics

¹¹ Department for Communities and Local Government: English Indices of Deprivation 2015 <u>https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015</u>

3.3.1 Gloucestershire Overview

According to the IMD 2015, Gloucestershire is ranked 124th out of the 152 English upper tier authorities. This means that Gloucestershire is in the least deprived quintile of English upper tier authorities in terms of overall deprivation (IMD). Gloucestershire's ranking has changed little since 2010¹² when the county ranked 126th out of 149 English upper tier authorities.

In terms of neighbourhoods, Gloucestershire is now made up of 373 LSOAs, an increase on the 367 in 2010. As some of the previous LSOAs no longer exist and new ones have been created, direct comparisons between 2010 and 2015 are not always possible. Area populations¹³ are used in this report as an alternative to enable comparison.

Table 4: Gloucestershire LSOAs in Top 10% Most Deprived Nationally, 2015	
(IMD Ranks: Low = More Deprived, High = Less Deprived)	

LSOA	LSOA NAME	LA NAME	2015 IMD rank
CODE			(out of 32,844
			nationally)
E01022347	WESTGATE 1	Gloucester	360
E01022333	PODSMEAD 1	Gloucester	503
E01022319	MATSON AND ROBINSWOOD 1	Gloucester	902
E01022311	KINGSHOLM AND WOTTON 3	Gloucester	1,239
E01032937	WESTGATE 5	Gloucester	1,618
E01022329	MORELAND 4	Gloucester	1,883
E01022147	St MARK'S 1	Cheltenham	2,101
E01022122	HESTERS WAY 3	Cheltenham	2,222
E01022152	St PAUL'S 2	Cheltenham	2,413
E01022291	BARTON AND TREDWORTH 4	Gloucester	2,599
E01022323	MATSON AND ROBINSWOOD 5	Gloucester	2,842
E01022289	BARTON AND TREDWORTH 2	Gloucester	2,904
E01032932	WESTGATE 4	Gloucester	3,065

In IMD 2015, Gloucestershire has 13 LSOAs (3% of the population of Gloucestershire) that rank amongst the 10% most deprived LSOAs in England. This compares to 8 LSOAs (2% of the Gloucestershire population) in 2010. Of the 13 LSOAs, 10 are in Gloucester, and the remaining 3 in Cheltenham.

¹³ Office for National Statistics: Mid Year Population Estimates 2010 <u>http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-285154</u> Office for National Statistics: Mid Year Population Estimates 2013 <u>http://www.ons.gov.uk/ons/datasets-and-</u> tables/index.html?pageSize=50&sortBy=none&sortDirection=none&newguery=sape15dt1

¹² Department for Communities and Local Government: English Indices of Deprivation 2010 <u>https://www.gov.uk/government/statistics/english-indices-of-deprivation-2010</u>

Westgate 1 (Gloucester) is the most deprived neighbourhood in the county, with a national ranking of 360, whilst in 2010 it was Podsmead 1 (Gloucester) at 809. This shows that the overall most deprived LSOA in Gloucestershire ranks less favourably against the rest of England in 2015 than in 2010.

3.3.2 Forest of Dean Deprivation Key Messages

- Forest of Dean district has no LSOAs that rank in the top 10% most deprived in England, but 1 that ranks in the top 20% - Cinderford West 1. In 2010 there were no LSOAs ranking in the top 20% most deprived nationally.
- In general, Forest of Dean district displays average levels of overall deprivation in relation to the rest of England it has the highest proportion of population of all Gloucestershire districts living within the third (middle) national deprivation quintile of the IMD (54% of district).
- "Barriers to Housing and Services" remains, as in 2010, Forest of Dean's most deprived domain of deprivation with 25% of the district's population living within LSOAs in the most deprived national quintile.
- Forest of Dean district contains the county's least deprived LSOAs for "Health Deprivation and Disability" – Tidenham 4, "Crime and Disorder" – Hewelsfield and Woolaston, and "Living Environment" – Lydney East 2.
- Forest of Dean has seen a relative improvement in the national rankings since 2010 for "Barriers to Housing and Services" and "Crime and Disorder", but has slipped in the rankings for "Living Environment".

3.3.3 Forest of Dean Deprivation in Detail

Forest of Dean is the district in Gloucestershire that displays the fewest extremes in deprivation – most of the district ranks in the third (middle) national quintile of the IMD.

Figure 7 shows one LSOA in Forest of Dean district (Cinderford West 1) that is ranked within the 20% most deprived areas in England. Cinderford West 1 ranks 4,540th nationally and shows it in a less favourable position than in 2010 when it ranked 6,592th.

On the whole, Forest of Dean displays average levels of overall deprivation in relation to the rest of England. This is shown by the yellow shading on the map.



Figure 7: LSOAs shown by IMD national quintile, 2015

Contrasts in deprivation are illustrated in Figure 8. This shows the proportion of population for each national quintile in each district, to enable comparison between districts.

Forest of Dean has the highest proportion of its population living in the third (middle) national deprivation quintile (54% of district), and has the highest population proportion of all of Gloucestershire's districts living in this national quintile.

As most of the district's population live in areas that rank with average national deprivation, there are small proportions of population living in the most and least deprived quintile areas. Out of all of Gloucestershire's districts, Forest of Dean has the smallest proportion of population living within the least deprived national quintile (5% of district), and 2% in the most deprived quintile - both lower than Gloucestershire overall.



Figure 8: IMD by national quintile and district, 2015

To see a more detailed picture of how deprivation is measured in the district, Figure 9 shows the individual domains of deprivation that make up the total IMD 2015 and supplementary indices, including a comparison with IMD 2010. The chart again shows the proportion of population in the district to enable a comparison between years.

Figure 9 shows that the district's worst ranking domain is "Barriers to Housing and Services" with 20,526 people (25% of district population) living within 12 LSOAs that fall into the most deprived national quintile for this domain. "Barriers to Housing and Services" is weighted at 9.3% of the total IMD, and includes indicators such as road distances to post offices, primary schools, general stores/supermarkets and GP surgeries, as well as household overcrowding, homelessness, and housing affordability.

Forest of Dean district's "Barriers to Housing and Services" domain has shown a relative improvement in national rankings since 2010 – fewer people now live in the most deprived LSOAs, and more people now live in the least deprived LSOAs nationally in 2015 (26% of population living in least deprived national quintile in 2015, compared with 18% in 2010).

Other significant changes to note include:

- "Living Environment" which has slipped in the national rankings since 2010 there is now a higher proportion of population in the two most deprived national quintiles (25% in 2010, rising to 52% in 2015). Of all the domains, this has shown the largest increase in population proportion within the most deprived national quintile, rising from 0% of population in 2010 to 14% in 2015. There has, however, been a slight improvement in the least deprived national quintile, with a proportional increase of 7% of the district's population living within LSOAs in this quintile. In addition, Forest of Dean contains Gloucestershire's least deprived LSOA for this domain Lydney East 2, which ranks 32,591st nationally.
- "Crime and Disorder" has slightly improved in the national rankings in terms of population proportions since 2010. In 2015, none of the district's LSOAs rank in the most deprived national quintile, and 47% of the district's population live in the least deprived national quintile – an increase on 37% in 2010. "Crime and Disorder" is the district's best domain in terms of deprivation and, in addition, Forest of Dean contains Gloucestershire's least deprived LSOA for this domain – Hewelsfield and Woolaston, which ranks 32,791st nationally.
- For "Health Deprivation and Disability", Forest of Dean district contains the county's least deprived LSOA – Tidenham 4, which ranks 32,453rd nationally.



Figure 9: District deprivation as a proportion of district population, split by domain of deprivation with supplementary indices, 2010 and 2015

To summarise, Table 5 provides an overview of the Indices of Deprivation 2015, split by domain of deprivation with supplementary indices. From this it can be seen which wards contain the most deprived LSOAs, together with the LSOA population figures. The ward that is listed most frequently is Cinderford West which contains LSOA(s) across 7 of the 10 domains of deprivation and supplementary indices.

Table 5: District summary of domains of deprivation with supplementary indices,2015

Domain / Supplementary Index	No. of LSOAs in the 20% Most Deprived Nationally	Wards in which these LSOAs fall	Population living within these LSOAs	Proportion of District Population
IMD	1	Cinderford West	1,254	2%
Income	4	Cinderford East, Cinderford West, Lydney East	6,437	8%
Employment	4	Cinderford East, Cinderford West, Coleford Central, Lydney East	6,560	8%
Education Skills and Training	9	Bream, Cinderford East, Cinderford West, Coleford East, Littledean and Ruspidge, Lydbrook and Ruardean, Lydney East	13,978	17%
Health Deprivation and Disability	1	Cinderford West	1,254	2%
Crime and Disorder	0	-	-	-
Barriers to Housing and Services	12	Bromesberrow and Dymock, Christchurch and English Bicknor, Churcham and Huntley, Hartpury, Hewelsfield and Woolaston, Newland and St Briavels, Newnham and Westbury, Oxenhall and Newent, Redmarley, Tibberton, Tidenham	20,526	25%
Living Environment	7	Awre, Blaisdon and Longhope, Bromesberrow and Dymock, Lydbrook and Ruardean, Newnham and Westbury, Redmarley, Tibberton	11,950	14%
Income Deprivation Affecting Children Index (IDACI)	3	Cinderford East, Cinderford West, Lydney East	4,826	6%
Income Deprivation Affecting Older People (IDAOPI)	1	Cinderford West	1,254	2%

3.4 Life expectancy

3.4.1 Life expectancy at birth

Life expectancy at birth is one of the "overarching indicators" in the Public Health Outcomes Framework, and is an important indication of overall health outcomes. It represents the average number of years a person in a particular area would expect to live based on current mortality rates.





Figure 10: Life expectancy at birth (Note: y-axis does not start at 0 for comparison purposes)

Females in Forest of Dean can generally expect to live around 4 years longer than their male counterparts. Life expectancy for both men and women has been steadily increasing in the district over the past decade, with some notable fluctuations for women. Over this period, life expectancy has generally been slightly lower for Forest of Dean residents than the county average, and generally slightly higher than the national average.



3.4.2 Life expectancy at birth by deprivation

Figure 11: Life expectancy by deprivation (Note: y-axis does not start at 0 for comparison purposes)

Males in the least deprived Forest of Dean decile (10th of population) can expect to live 2-3 years longer than those in the most deprived decile. For females, the gap is nearly 5 years. Over the past decade, males, deprived and also undeprived, have seen a steady increase in life expectancy, whereas only undeprived females have seen an increase, and more deprived have generally decreased. For males, the gap has narrowed slightly over recent years, whereas for females it has started to widen. This is an important trend to monitor going forward as this is a signal that deprivation could be causing health inequalities.

3.5 Mortality

3.5.1 Leading causes of death

The three leading causes of death in Forest of Dean are cancer, cardiovascular disease (CVD), and respiratory disease, respectively¹⁴. This is consistent with the national picture.



Figure 12: Leading causes of death (all ages) in Gloucestershire districts 2013

¹⁴ PHE End of Life Care profiles <u>http://fingertips.phe.org.uk/profile/end-of-life</u>



Figure 13: Under 75 mortality rate from leading causes of death

Compared to the other five Gloucestershire districts, Forest of Dean's leading causes of death are generally fairly similar, although it does have a slightly higher proportion of deaths from respiratory disease. Whilst robust district level data on causes of premature (under 75) mortality is not available, we can see from the Gloucestershire and England trends that the rate of early deaths from cancer and cardiovascular disease is generally in decline, whereas respiratory mortality rates are fairly static.

3.5.2 Excess winter deaths

The number of excess winter deaths depends on the temperature and the level of disease in the population as well as other factors, such as how well equipped people are to cope with colder weather. Most excess winter deaths are due to circulatory and respiratory diseases, and the majorityoccur amongst the elderly population¹⁵. Research carried out by the Eurowinter Group¹⁶ and Curwen¹⁷

¹⁵ ONS Statistical Bulletin: Excess Winter Mortality in England and Wales, 2011/12 (Provisional) and 2010/11 (Final) is <u>http://www.ons.gov.uk/ons/rel/subnational-health2/excess-winter-mortality-in-england-and-wales/2011-12--provisional--and-2010-11--final-/ewm-bulletin.html</u>

¹⁶ The Eurowinter group (1997) Cold exposure and winter mortality from ischaemic heart disease, cerebrovascular disease, respiratory disease, and all causes in warm and cold regions in Europe. The Lancet 349, 1341-1346

 ¹⁷ Curwen M (1990/91) Excess winter mortality: a British phenomenon? Health Trends 4, 169-75 (4)
 Department of Health, Healthy lives, healthy people: Improving outcomes and supporting transparency, (23rd January 2012), accessed 15/05/13 at:

https://www.gov.uk/government/publications/healthy-lives-healthy-people-improving-outcomes-and-

found that mortality during winter increases more in England and Wales compared to *other* European countries with colder climates, suggesting that many more deaths could be preventable in England and Wales.

Research from the Marmot Review Team¹⁸ argues cold housing has a dramatic impact on the excess winter death rate either caused by poorly insulated homes or because the occupier cannot afford to adequately heat their home. The indoor temperature of a home can affect an occupant's physical, mental and social health and wellbeing. Living in sub-optimal indoor temperatures may substantially increase the risk of respiratory (influenza, pneumonia and bronchitis) and cardiovascular (heart attacks and strokes) conditions. Due to prolonged periods of time occupants over the age of 85 spend in their homes, it is no surprise that the elderly are most at risk to excess cold.



Figure 14: Excess Winter Deaths Index (all ages)

The rate of excess winter deaths in Forest rose slightly from 2006-09 to 2008-11, but has since fallen. This movement has shadowed the county rate, whilst always being below it. It remains lower than the national and county benchmarks, but this difference is not statistically significant.

supporting-transparency (5) Cold Weather Plan for England 2012

www.gov.uk/government/publications/cold-weather-plan-for-england-2012-published

¹⁸ The Marmot Review Team (2011) The Health Impacts of Cold Homes and Fuel Poverty. Available at <u>http://www.foe.co.uk/resource/reports/cold_homes_health.pdf</u>

3.6 Economy

3.6.1 Overview

The Forest of Dean district is sited in the west of Gloucestershire and is famous for the large area of mixed woodland that covers much of the area. Part of the Wye AONB also extends along its western boundary.

The district is served by an economy that supported some 23,360 employees in 2014. The economy originally based on heavy industry and dominated by coal mining also influenced the development and siting of four market towns with Coleford being the largest and the administrativecentre of the district. Since the demise of coal mining and its associated industries the area has had to adapt to more tourism and retail driven activities.

The industry base has become more diverse with specialisms relating to; Manufacturing focusing on beverages, textiles, paper, rubber & plastic and base metals; Business administration & support services and Professional, scientific & technical relating to management consultancy and engineering activities; Accommodation and food services and Retail.

Despite employment declining over the last five years it is however, predicted to grow albeit at a conservative rate matching the County trend. Unemployment in terms of Job Seekers Allowance claimants has declined, although there are still areas of relatively high unemployment around Cinderford, Lydney, Coleford and Newent.

There are nearly 3,700 businesses in the Forest of Dean district accounting for 11% of the county total growth over the last five years which has been the lowest in the county.

The district is home to a lesser qualified and semi skilled workforce serving an economy related to basic manufacturing and service activities which is however, projected to grow.

The characteristics of the job vacancies advertised are indicative of mixed occupational requirement for Nurses, Teachers, Care workers, Chefs and Information Technology support.

The commuting to work pattern indicates that just over half of the resident employed population remained within the district to work and the majority of the inward and outward flows tend to be within Gloucestershire, particularly relating to Gloucester and Tewkesbury districts.

3.6.2 Employment

The number of employees in the Forest of Dean district after experiencing a decrease between 2009 and 2010 increased slightly to a total of 23,360¹⁹ by 2014 as shown in Figure 15.



Figure 15: Trend in the number of employees in Forest of Dean district: 2010- 2014^{20}

The annual growth rates relating to the number of employees between 2009 and 2014 in the Forest of Dean district are depicted in Table 6. After the decline from 2009 and 2010, growth rates improved over the next four years, however, the annual average growth rate for the whole period was -0.8%, the second lowest after Gloucester district as shown in Table 7.

Table 6: Annual growth rates of number of employees in Forest of Dean district
from 2009 to 2014 ²¹

Forest of Dean dis	strict
Year	Annual growth rate %
2009-2010	-8.3
2010-2011	0.5
2011-2012	0.4
2012-2013	1.2
2013-2014	2.2
Average annual growth rate 2009-2014	-0.8

¹⁹ This figure is based on the number of employees and does not include self employed.

 ²⁰ Business Register and Employment Survey 2010-2014, ONS Crown Copyright Reserved.
 ²¹ *Ibid.*

Table 7: Average annual growth rates: Gloucestershire and districts 2009-2014²²

Area	Average annual growth 2009 to 2014 %
Cheltenham district	4.3
Cotswold district	1.5
Forest of Dean district	-0.8
Gloucester district	-1.6
Stroud district	-0.4
Tewkesbury district	2.2
Gloucestershire	0.9
Great Britain	1.0
South West	0.4

Regarding employment status, the ratio of full-time to part-time employees in 2014 was 62% to 38% respectively which was lower than the County average as shown in Table 8 and highlights the more part time nature of employment in this district. It is also evident from Table 8 that Forest of Dean district accounted for 8% of the total number of Gloucestershire employees which is the lowest proportion of all the districts.

District	Full-time employees		Part-time employees		Total Employees*	
	Number	%	Number	%	Number	% of total employees
Cheltenham	44,400	66.0	22,900	34.0	67,300	24.3
Cotswold	25,500	65.5	13,500	34.5	39,000	14.1
Forest of Dean	14,500	62.1	8,800	37.9	23,400	8.4
Gloucester	38,400	63.6	21,900	36.4	60,300	21.8
Stroud	30,000	67.2	14,600	32.8	44,700	16.1
Tewkesbury	31,600	75.3	10,400	24.7	42,000	15.2
Gloucestershire	184,400	66.7	92,200	33.3	276,600	

 Table 8: Forest of Dean district: Employment status 2014²³

* These figures exclude farm agriculture (SIC subclass 01000).

A further 6,700 people were self-employed²⁴ in the Forest of Dean district between 2014 and 2015.

3.6.3 Past (2010-2014) Employment by industrial sector

Figure 16 presents the industrial sectors in terms of their size, growth and local concentration²⁵.

²² Ibid.

²³ Ibid.

²⁴ Annual Population Survey July 2014-July 2015, ONS Crown Copyright Reserved.

²⁵ Location quotients (LQ) are used for identifying an industry that is concentrated in a region. A simple ratio has been used to compare the share of local employment in an industry to the share of GB employment in that industry. A LQ of <1 indicates the local area is less concentrated than GB for an industrial activity, and a value >1 indicates the local area has a higher concentration of employment in the industrial activity relative to GB.

The Manufacturing sector stands out in terms of size, local concentration and growth. It was the largest sector regarding the proportion of total employment in the district accounting for 17% in 2014 as shown in Figure 17. Growth related to the beverages, textiles, paper, rubber & plastic, basic metals and other machinery sub sectors and in addition to the food products and fabricated metal products sub sectors accounted for the majority of employees.

Also of local importance, the Business administration & support services sector, also exhibited one of the highest growth rates over the last five years focusing on activities relating to general cleaning of buildings and temporary employment agencies both accounting for the largest number of employees.

The Professional, scientific and technical sector was also locally concentrated and amongst those sectors that experienced the most growth over the last five years mainly reflected in the management consultancy and engineering related sub sectors.

The Accommodation and food sector especially in relation to tourism activity in the district is comparatively important in terms of size and local concentration. The decrease in growth has been borne not unsurprisingly by the hotels, licenced clubs and public houses and bars sub sectors.

The size and position of the Health sector including social work accounted for the second largest proportion of employees in the district as shown in Figure 17 and reflects the sizeable employee numbers associated with hospital activities e.g. the Dilke Memorial hospital, general practice and residential care activities.

Education in the Forest of Dean district is well represented being the third largest sector as shown in Figure 17 with primary, secondary and special schools, in addition to Gloucestershire College: the Forest of Dean campus and Hartpury College. There has been a slight decline in the number of employees over the last five years mainly in the primary school subsector that has just outpaced growth in the number of employees in the general secondary school sub sector.

The Financial and insurance sector although small has experienced growth that appears to be focused on auxiliary activities relating to actuarial and salvage administration while the other main employment source the banks has declined.

The Retail sector in the Forest of Dean district is relatively large as depicted in Figure 17 and concentrated around the four market towns with Lydney comprising the largest retail centre. The sector has however, experienced modest decline in the number of employees in the last five years.

Apart from a blip in 2013 the Construction sector has undergone growth in terms of number of employees over the last five years which is likely to be the result of the post-recession recovery in both the commercial and domestic building industry.

The Arts, entertainment & recreation sector is locally important to Forest of Dean district but is not well represented in terms of the number of employees as much of this sector is made up of self employed workers etc. that are not captured by the Business Register and Employment Survey.



Figure 16: A comparison of industrial sectors in terms of growth, size and specialisation in Forest of Dean district²⁶



Figure 17: The proportion of employees by broad industrial sector 2014: Forest of Dean district²⁷

²⁶ Ibid.
3.6.4 Future (2015-2025) Employment by industrial settings

Economic projections generated by the Local Economic Forecasting Model (LEFM)²⁸, provide an indication of future economic growth and predict potential changes in employment. **These projections are presented as a guide, they do not take into account the impact of current policies and initiatives.**

According to the LEFM employment (employees and self-employed) in the Forest of Dean district is set to increase between 2015 and 2025 to 32,980 people, however, growth is expected to be at a more conservative rate with a projected average annual change of 0.3% which is the same as the County but lower than the national average as shown in Table 9.

Area	Projected Average annual change 2015 to 2025
Cheltenham district	0.4
Cotswold district	0.5
Forest of Dean district	0.3
Gloucester district	0.2
Stroud district	0.2
Tewkesbury district	0.3
Gloucestershire	0.3
South West	0.5
UK	0.4

 Table 9: Projected Average annual change in employment: 2015-2025²⁹

Considering projected employment by sector over the next ten years for the Forest of Dean district compared to the County average as shown in Figure 18, three sectors stand out in terms of predicted growth, namely, Other services³⁰, Accommodation & food services and Health. The Other services and Health sectors are also predicted to increase well beyond the County average.

The Construction, Information Technology and Business administration & support services are also predicted to grow but to a lesser extent as shown in Figure 18.

²⁷ Ibid.

²⁸ The LEFM has been developed to forecast economic activity in local areas in a way that is consistent with regional and national forecasts. Although the model includes a number of econometric relationships, lack of data currently precludes the estimation of a complete model in the conventional sense. Many of the relationships are therefore imposed by assumption, based on the broader regional or national models estimated by Cambridge Econometrics and the Institute for Economic Research (University of Warwick) LEFM should therefore be regarded primarily a simulation model rather than an accurate econometric representation of a local economy.

²⁹ LEFM Aug 2015, Cambridge Econometrics/Institute for Economic Research (Univ. of Warwick).

³⁰ Other services include activities of membership organisations, repair of computers, personal and household goods, other

personal service activities e.g. hairdressing, beauty and other personal services.

The Agriculture, forestry & fishing sector is set to show the greatest decline, again above the County average.



Figure 18: Projected change in employment - Forest of Dean 2015-2025³¹

3.6.5 Businesses

The number of businesses in the Forest of Dean increased by 2.8% in the last five years as shown in Table 10 amounting to 3,690 businesses in 2015 accounting for some 13% of the County total. This growth is the lowest of all the districts and well below the national average by nearly 11%.

Growth in the number of businesses: 2010-2015								
Area	%							
Cheltenham district	8.8							
Cotswold district	9.0							
Forest of Dean district	2.8							
Gloucester district	6.9							
Stroud district	8.1							
Tewkesbury district	12.2							
Gloucestershire	8.1							
Great Britain	13.5							

³¹ LEFM Aug 2015, Cambridge Econometrics/Institute for Economic Research (Univ. of Warwick).

³² UK Business Counts – Enterprises 2015, ONS Crown Copyright Reserved.

As is the case nationally, the majority of businesses (77%) are small, employing up to four people. There are however, a number of larger businesses employing between 50 and 99 people as shown in Table 11.

	Size	Cheltenham district	Cotswold district	Forest of Dean district	Gloucester district	Stroud district	Tewkesbury district	Gloucestershire
	0 to 4	3,755	4,520	2,850	2,470	4,405	2,950	20,950
	% 0-4	77	77	77	72	77	75	76
	5 to 9	605	725	490	455	690	495	3,460
% I	% 5-9	12	12	13	13	12	13	13
and	10 to 19	295	370	210	225	370	245	1,715
Sizeband: Number	% 10-19	6	6	6	7	6	6	6
Ium	20 to 49	155	165	95	150	180	135	880
d: D	% 20-49	3	3	3	4	3	3	3
bar	50 to 99	50	50	30	60	60	45	295
Size	% 50-99	1	1	1	2	1	1	1
	250 to 499	10	10	5	10	5	10	50
yme	% 250-499	0.2	0.2	0.1	0.3	0.1	0.3	0.2
Employment	500 to 999	5	5	0	5	0	5	20
Εu	% 500-999	0.1	0.1	0.0	0.1	0.0	0.1	0.1
	1000+	5	0	0	5	5	5	20
	% 1000+	0.1	0.0	0.0	0.1	0.1	0.1	0.1
	Total	4,905	5,860	3,690	3,425	5,740	3,915	27,535

Table 11: Size breakdown of businesses in the Forest of Dean district and County2015³³

Business start-ups in the Forest of Dean increased by 29% over the last five years amounting to 335 businesses starting up in 2013 as depicted in Figure 19.



Figure 19: Trend in business births between 2009 and 2013 in the Forest of Dean district³⁴

One year survival rates at 86.5% were the lowest in the County but only slightly lower than the national average as shown in Table 12 and three year survival

³³ UK Business Counts – Enterprises 2015, ONS Crown Copyright Reserved.

³⁴ Business Demography 2013, ONS Crown Copyright Reserved.

rates were the third lowest in the County but still remain higher than the national average.

Area	Survival r	ates from birt	h in 2010
Alea	1 Year %	2 Year %	3 Year %
Cheltenham district	88.2	72.5	57.8
Cotswold district	89.5	77.9	64.2
Forest of Dean district	86.5	73.1	59.6
Gloucester district	90.0	74.3	55.7
Stroud district	87.7	74.1	63.0
Tewkesbury district	90.0	75.0	61.7
Gloucestershire	88.7	74.6	60.4
South West	88.1	74.2	59.9
Great Britain	86.7	72.5	57.1

Table 12: Business survival rates from birth in 2010³⁵

3.6.6 Unemployment

The number of people claiming Job Seekers Allowance (JSA) in the Forest of Dean district has been at its lowest in terms of both number and rate for some thirty years. After May 2015 Universal Credit was gradually introduced into the County and will ultimately replace the Job Seekers Allowance claimant measure.



Figure 20: Job Seekers Allowance claimant rate May 2014 to May 2015: Forest of Dean district³⁶

It is evident from Figure 21 that the JSA claimant rate for the Forest of Dean district followed the County average for the most part and apart from seasonal blips has shown a steady decline since May 2014 to 1.1% representing 580 people in May 2015. The Forest of Dean has not unsurprisingly the third highest claimant rate although it is well below the national average.

³⁵ Ibid.

³⁶ Job Seekers Allowance, ONS Crown Copyright Reserved.

There were ten wards with claimant rates above the district average as shown in Figure 21. The highest rates were Cinderford West at 2.7% and Cinderford East at 2.3%.



Figure 21: Forest of Dean district: ward claimant rate against district average³⁷

The trend for those 18-24 year olds claiming JSA in the Forest of Dean district claiming for more than six months and those claiming for less than six months, although showing a decline was above the County average until late in 2013 when the trend reversed and by May 2015 matched the County average as shown in Figure 22.

Those 18-24 year olds claiming JSA for over six months fell from 3.0% of the cohort in 2012 to 0.6% of the cohort in 2015. This represented a decrease in numbers from 195 to 40 people. For those 18-24 year olds claiming for less than six months the proportion of the cohort declined from 4.9% in 2011 to 1.5% in 2015 relating to a decrease from 315 to 100 people.



Figure 22: 18-24 year old claimant count as a proportion of the cohort 2011-2015³⁸

The number of 16 to 18 year olds Not in Education, Employment or Training (NEETs) in the Forest of Dean district as depicted in Figure 23 declined over the last four years from a high of 140 people in October 2011 to 51 people in May 2015.

³⁸ Jobseeker's Allowance by age and duration, ONS Crown Copyright Reserved.



Figure 23: Number of 16-18 year olds Not in Education, Employment or Training (NEETs) in the Forest of Dean district: 2011 to 2015³⁹

3.6.7 Qualifications and occupation

It is evident from Table 13 that in the Forest of Dean district some 24% of the resident population aged 16 and over had Level 4 qualifications and above in 2011. This was the second lowest proportion after Gloucester district and below both the County and national averages of 30% and 27% respectively. At the other end of the scale those with No qualification accounted for 25% of the resident population over 16 which was the highest rate of all the districts and well above the County and national averages, amounting to 16,700 people.

³⁹ Prospects.

Table 13: Level of qualification of residents aged 16 and over comparison 2011⁴⁰

Level of qualification of residents aged 16 and over: % of total											
	Forest of Dean district	Gloucestershire	England and Wales								
No qualifications	24.5	19.6	22.7								
Level 1 qualifications	14.3	13.5	13.3								
Level 2 qualifications	16.8	16.0	15.3								
Apprenticeship	4.5	4.0	3.6								
Level 3 qualifications	12.0	12.6	12.3								
Level 4 qualifications and above	24.0	29.9	27.2								
Other qualifications	3.9	4.3	5.7								
Total	67,947	490,233	45,496,780								

An interesting mix of occupations namely Skilled trades, Professional occupations and Elementary occupations feature in the Forest of Dean district equating to some 40% of the resident based employed which was well above the proportions reflected at the County and national level in 2011 as depicted in Figure 24.

The proportion of Managers, directors and senior officials was noticeably lower than the County and national rate.

The occupational structure in the Forest of Dean district relates to the fairly large proportion of the resident employed that accommodates the lower skill end requirements of its industrial base.

In terms of the projected growth of occupational employment over the next ten years, as outlined in Figure 25, the expected increase in Managers, directors and senior officials follows the national projection although at a higher rate for Forest of Dean district and at County level which may reflect the continuing growth in businesses.

The projected increase in employment in the Caring, leisure and other services occupations is undoubtedly an indication of the growing demands of an ageing population.

⁴⁰ Census of Population 2011: LC5102EW - Highest level of qualification by age, ONS Crown Copyright Reserved Level 1: 1-4 O Levels/CSE/GCSEs (any grades), Entry Level, Foundation Diploma, NVQ Level 1, Foundation GNVQ, Basic/Essential Skills; Level 2: 5+ O Level (Passes)/CSEs (Grade 1)/GCSEs (Grades A*-C), School Certificate, 1 A Level/ 2-3 AS Levels/VCEs, Intermediate/Higher Diploma, Welsh Baccalaureate Intermediate Diploma, NVQ level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma; Level 3: 2+ A Levels/VCEs, 4+ AS Levels, Higher School Certificate, Progression/Advanced Diploma, Welsh Baccalaureate Advanced Diploma, NVQ Level 3; Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma; Level 4 and above: Degree (for example BA, BSc), Higher Degree (for example MA, PhD, PGCE), NVQ Level 4-5, HNC, HND, RSA Higher Diploma, BTEC Higher level, Foundation degree (NI), Professional qualifications (for example teaching, nursing, accountancy); Other qualifications: Vocational/Work-related Qualifications, Foreign Qualifications (not stated/level unknown).



*Figure 24: Occupation as a proportion of total employment 2011: Forest of Dean district, Gloucestershire and England and Wales*⁴¹

Growth in Process, plant and machine operatives and Skilled trades occupations is projected at a higher rate than the County level and opposed to the national level. The opposite picture is portrayed for the Professional and Associate professional occupations as shown in Figure 25.

Administrative and secretarial occupations are expected to decline in line with the County and national trends.

⁴¹ Census of Population 2011: LC6112EW - Occupation by age, ONS Crown Copyright Reserved.



Figure 25: Projected change in occupational employment 2015-2025: Forest of Dean district, Gloucestershire & UK⁴²

3.6.8 Vacancies

The data used in Figure 26 are provided by Labour Insight, an interactive tool which delivers real time access to job vacancies from a comprehensive range of sources including job boards, employer sites, newspapers, public agencies etc. Data extraction and analysis technologies mine and code data from each job listing to provide analysis on industries, occupations, skills and qualifications. The tool will inevitably not capture all vacancies.

Figure 26 shows the trend in new vacancies for each month from January to October 2015. The number of new vacancies presents a slightly increasing trend from the beginning of the year to a peak of about 126 new postings in June before dropping back to about 122 in October. Not unsurprisingly the Forest of Dean had the lowest number of job vacancies of all the districts.

⁴² LEFM Aug 2015, Cambridge Econometrics/Institute for Employment Research.



Figure 26: Trend in job vacancies in the Forest of Dean district in 2015⁴³

The top fifteen occupations identified from a total of 950 job vacancies advertised during the first ten months of 2015 are shown in Figure 27. Vacancies related to a number of occupations from Nurses, Teachers, Care workers, Chefs and IT support.



Figure 27: Top occupations advertised in the Forest of Dean district in 2015⁴⁴

Table 14 represents a selection of those employers who offer some of the highest number of vacancies advertised. Not unexpectedly these correspond to

⁴³ Labour Insight.

⁴⁴ Ibid.

the Accommodation & food services, Health, Manufacturing, Public sector, Financial and Retail industrial sectors.

Table 14: A selection of employers with the largest number of vacancies in 2015⁴⁵

BROOK LODGE CARE HOME CANNOP FOUNDRY LIMITED FOREST OF DEAN DISTRICT COUNCIL FORESTRY COMMISSION HARTPURY COLLEGE INTERNATIONAL TIMBER LADDER FENCING INDUSTRIES NEWENT LIMITED MABEY BRIDGE LIMITED NATIONAL HEALTH SERVICE NATIONAL TRUST THE KILCOT INN THE MINERS COUNTRY INN THREE CHOIRS VINEYARDS LIMITED TUDOR FARMHOUSE HOTEL TWO RIVERS HOUSING

3.6.9 Commuting to Work

In 2011, of the 30,006 residents aged 16 and over in the Forest of Dean district who commuted to work in 2011, some 51% equating to 15,379 people worked within the district as shown in Table 15.

	Resident working	Resident population who	% of resident population who
Area	population aged 16+	work within the district	commute that work within the
	who commute to work	(excl working at home)	district (self containment)
Cheltenham district	49,244	29,462	60
Cotswold district	30,041	16,221	54
Forest of Dean district	30,006	15,379	51
Gloucester district	53,024	29,407	55
Stroud district	44,524	23,998	54
Tewkesbury district	33,481	12,915	39
Gloucestershire	240,320	199,735	83

Table 15: Working within the district 2011⁴⁶

Another 7,551 residents aged 16 and over commuted within the County with the largest interaction with Gloucester and Tewkesbury districts as shown in Table 16.

⁴⁵ Ibid.

⁴⁶ Ibid.

	Workplace Destination														
Resident Origin	Cheltenham	Cotswold	Forest of Dean	Gloucester	Stroud	Tewkesbury	Gloucestershire								
Cheltenham	29,462	1,768	311	4,454	1,191	6,313	43,499								
Cotswold	1,487	16,221	147	796	957	687	20,295								
Forest of Dean	1,073	329	15,379	4,036	467	1,646	22,930								
Gloucester	5,057	948	1,054	29,407	4,699	7,053	48,218								
Stroud	1,947	2,334	283	5,492	23,998	1,791	35,845								
Tewkesbury	8,293	873	464	5,457	946	12,915	28,948								
Gloucestershire	47,319	22,473	17,638	49,642	32,258	30,405	199,735								

Table 16: Commuting to Work by district for Gloucestershire 2011⁴⁷

Of those who commuted to work within the Forest of Dean district the wards with the largest resident origin were Coleford East, Lydney East and Cinderford West as shown Table 17.

The wards with the highest workplace destination included: Cinderford West, Alvington, Aylburton and West Lydney, Mitcheldean and Westbury and Cinderford East as shown in Table 17.

There was also as expected a level of containment around the towns of Cinderford, Coleford, Lydney and Newent

Forest of Dean district	Alvington, Aylburton and West Lydney	Awre	Berry Hill	Blaisdon and Longhope	Bream	Bromesberrow and Dymock	Christchurch and English Bicknor	Churcham and Huntley	Cinderford East	Cinderford West	Coleford Central	Coleford East	Hartpury	Hewelsfield and Woolaston	Littledean and Ruspidge	Lydbrook and Ruardean	Lydney East	Lydney North	Mitcheldean and Drybrook	Newent Central	Newland and St Briavels	Newnham and Westbury	Oxenhall and Newent	Pillowell	Redmarley	Tibberton	Tidenham	Forest of Dean district
Resident Origin		_		ä			-	-	-	-	-	-						_							_	· ·		
Alvington, Aylburton and West Lydney	286	6		1	13	1	2	4	9	31	41	43	1	16	3	6	101	3	27	2	9	14	0	23	2	0	25	685
Awre	56	48	4	6	3	1	1	6	11	33	17	6	3	1	2	2	34	2	14	1	7	25	1	8	0	1	7	300
Berry Hill	30	1	46	9	3	1	22	3	6	36	65	102	0	1	2	10	14	1	31	3	10	10	2	8	1	0	3	420
Blaisdon and Longhope	10	4	3	56	0	1	6	15	9	12	10	2	5	0	3	1	5	0	42	13	4	14	8	2	0		0	229
Bream	126	4	13	12	71	2	12	5	15	65	56	81	0	11	8	14	63	1	39	2	35	14	0	62	2		12	726
Bromesberrow and Dymock	5		1	2	1	51	3	2	2	5	5	4	14	0	0	1	4	0	8	27	3	1	14	1	13	3	0	171
Christchurch and English Bicknor	10			4	1	0	32	2 47	9	25	51	43	0	2	3	9	5	0	24	7	13	1	2	11	0	1	6	279
Churcham and Huntley	8		3	9	1	2	3		1	16	6	2	6	0	0	1	2	0	13	17	2	10	7	0	5		1	169
Cinderford East	24	7	17	8	5	2	9		139	249	38	61	5	2	33	25	15	2	108	7	9	45	6	16	2		6	854
Cinderford West	47	8		31	6	0	16	15		423	71	40	3	1	55	22	27	1	148	12	17	55	7	16	5		3	1,199
Coleford Central	44	6		11	6	0	25	2	15	59	188	150	0	3	7	18	16	0	63	4	29	12	1	15	1	0	8	719
Coleford East	79 5	4	68 3	6	12 1	1	56	3	27	123	265 5	382	7 82	5	13	24 2	35	6	101	6	56 4	11	1	41	0 18	0	13	1,345
Hartpury	-		3				0		3		-	5	-	-	1	_	0	·	5 9	10			10	2			2	178
Hewelsfield and Woolaston	68 49	2	4	1	4	0	1 17	0 12	э 75	12 199	12 30	6 41	1	33 3	66	5 20	25 27	0	9 104	1	13 8	1 36	0	5 16	0	0	22	231 771
Littledean and Ruspidge					2				-		30 79							-			-				1		3	
Lydbrook and Ruardean	49 443	2	36 11	14	2 17	0	25 2	16	51 9	167 82		56 64	8	7 15	17 5	134 12	16	1 20	161 79	16 9	20 31	12 29	6	11 54	2	1	5 38	914
Lydney East	443	22			7	1	2	4	9	62 19	55 31	24	1	-	3	9	317	20	23	-	9	29	-	54 25	0	0	30 9	1,330 482
Lydney North Mitcheldean and Drybrook	30	3	3 18	2 42	1	0	2 10	1 27	0 41	127	28	42	4	3	3 15	34	104 19	20	23 341	3 18	9 10	15	1 19	25 16	4	2	9 5	462 874
Newent Central	11	1	10	42	2	16	2	7	41	21	11	42	4 34	0	5	34	5	0	25	357	4	15	103	0	13		4	671
Newland and St Briavels	65	3		1	10	0	14	2	2	38	90	89	1	10	2	11	28	3	38	14	85	5	103	13	2	10	7	565
Newnham and Westbury	32	7	23	12	2	1	0	16	9 18	36	90 11	10	6	10	14	6	17	2	33	20	1	131	0	7	4	2	8	405
Oxenhall and Newent	3		1	2	0	4	4	3	3	7	3	3	14	0	0	4	2	0	7	58	2	2	48	1	17	3	5	198
Pillowell	120	19	10	2	22	4	9	2	22	56	70	54	0	5	10	4	81	4	43	30	25	23	40	118	1	0	11	723
Redmarley	2		2	0	1	3	0	- 1	0	1	2	2	50	1	0	3	1	0	43	19	20	23	4	2	46	-	0	150
Tibberton	0		1	6	0	1	0	4	3	7	3	2	9	0	0	2	3	0	7	34	1	3	8	3	6	28	5	136
Tidenham	62	4	9	1	5	0	1	3	2	17	9	17	5	15	1	2	13	4	15	2	2	3	1	6	1	3	452	655
Forest of Dean district	1,827	162	Ű	264	203	91	274	-	644	1,870	1,252		266	138	269	~	979			676	~	497	264	482	147		-	15,379

Table 17: Commuting to work within the Forest of Dean district by ward 2011⁴⁸

⁴⁷ Census of Population 2011: WU01UK - Location of usual residence and place of work by sex, ONS Crown Copyright Reserved.

Conversely, the remaining 49% of those residents who commuted to work equating to 14,627 commuted out of the district which was offset by 6,015 workers commuting in resulting in a net outward flow of 8,612 workers as shown in Table 18.

Of those who commuted out of the district some 52% (7,551 people) came from within the County as shown in Table 15, a further 16% travelled to Wales, 15% travel to the West Midlands especially Wychavon district, Worcester and Birmingham and another 12% travelled to the South West mainly South Gloucestershire, Bristol.

Table 18: Number of workers commuting in or out of Gloucestershire districts201149

Commuting to work	Total outward	Total inward	Net
Cheltenham district	19,782	24,148	4,366
Cotswold district	13,820	15,709	1,889
Forest of Dean district	14,627	6,015	-8,612
Gloucester district	23,617	26,131	2,514
Stroud district	20,526	13,287	-7,239
Tewkesbury district	20,566	25,211	4,645
Gloucestershire (includes offshore installation & outside UK)	40,585	38,148	-2,437

Of those who commuted in some 38% travelled from within the County, 25% from Wales and 24% from West Midlands resided in Wychavon district, Herefordshire, Birmingham, Worcester, and the rest from South Gloucestershire and Bristol.

3.6.10 Work at home

In addition to those who commuted to work in 2011 there were another 5,600 people who worked at home in the Forest of Dean district equating to 14% of those employed residents aged 16 and over as shown in Table 19. This was 1.8% higher than in 2001 and is the second highest percentage along with Stroud district.

The relatively high proportion of those working at home coupled with a comparatively high number of self employed may be an indication that improvements in communication along with other technological advances have enabled businesses to locate and efficiently function in a rural setting.

⁴⁸Census of Population 2011: WF01BEW - Location of usual residence and place of work (OA level). ⁴⁹ *Ibid.*

District	Work mainly at or from home Number	Work mainly at or from home as % of residents aged 16+ in employment
Cheltenham district	6,199	10
Cotswold district	8,268	20
Forest of Dean district	5,618	14
Gloucester district	4,439	7
Stroud district	8,353	14
Tewkesbury district	5,331	13
Gloucestershire	38,208	13

Table 19: Proportion of residents in employment who work at home 2011⁵⁰

3.7 Protected characteristics

The Equality Act 2010⁵¹ legally protects people from discrimination in the workplace and in wider society. The act identifies nine 'protected characteristics' or groups that are covered by the legislation: *Age, Disability, Gender Reassignment, Marriage & Civil Partnership, Pregnancy & Maternity, Race and Ethnicity, Religion & Belief, Sex, Sexual Orientation.* Some aspects of these groups such as *Age, Disability, Race and Ethnicity* are covered in other sections.

3.7.1 Age

Age influences other 'protected characteristics', with certain age groups having different characteristics to the population as a whole⁵².

- Older people are significantly more likely to be disabled
- A higher proportion of 0-19 year olds are from BME groups
- Females account for a larger proportion of older people than men
- Older people are more likely to have been widowed, and consequently are more likely to be living alone
- Older people are more likely to practice Christianity.

The age of an individual, combined with additional factors including other 'protected characteristics' may affect their health and social care needs. Individuals may also experience discrimination and inequalities because of their age. A report by the European Social Survey⁵³ suggests age discrimination is the

⁵⁰ Census of Population 2011: WU01UK - Location of usual residence and place of work by sex, ONS Crown Copyright Reserved.

⁵¹ The Stationary Office, Equality Act 2010 <u>http://www.legislation.gov.uk/ukpga/2010/15/contents</u> Accessed 15/04/2015.

⁵² ONS, 2011 Census <u>https://www.nomisweb.co.uk</u>/ Accessed 16/04/2015.

⁵³ European Social Survey, Experiences and Expressions of Ageism: Topline Results UK from Round 4 of the European Social Survey

http://www.europeansocialsurvey.org/docs/findings/ESS4_gb_toplines_experiences_and_expressions ______of_ageism.pdf Accessed 17/04/2015.

most common form of prejudice experienced in the UK, with 28% respondents saying they had experienced prejudice based on age.

For information about changes in Forest of Dean's age profile and projections please see section 3.2.2.

3.7.2 Disability

For further information about disability please see section 6.2

3.7.3 Gender Reassignment

Gender reassignment is defined by the Equality Act 2010⁵⁴ as a person proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning their sex by changing physiological or other attributes of sex. This means an individual does not need to have undergone any treatment or surgery to be protected by law.

There are no official estimates of gender reassignment at either national or local level. However, in a study funded by the Home Office, the Gender Identity Research and Education Society estimate that between 300,000 and 500,000 adults in the UK are experiencing some degree of gender variance. These figures are equivalent to somewhere between 0.6% and 1% of the UK's adult population⁵⁵. By applying the same proportions to Forest of Dean's adult population⁵⁶, we can estimate that there may be somewhere between 400 and 700 adults in the district that are experiencing some degree of gender variance.

National research suggests individuals with some degree of gender variance experience discrimination and marginalisation in a number of ways that impacts on wider factors such as education, housing and perceptions and experiences of crime and violence. They have also demonstrated higher levels of health risk behaviours, such as smoking and drug and alcohol use, as well as higher levels of self-harm⁵⁷.

3.7.4 Marriage and Civil Partnerships

The Equality Act 2010⁵⁸ protects individuals who are in a civil partnership, or marriage, against discrimination.

tables.html?edition=tcm%3A77-368259 Accessed 15/09/2015.

⁵⁴ The Stationary Office, Equality Act 2010 <u>http://www.legislation.gov.uk/ukpga/2010/15/contents</u> Accessed 15/04/2015.

 ⁵⁵ Gender Identity Research and Education Society, The Number of Gender Variant People in the UK <u>http://www.gires.org.uk/assets/Research-Assets/Prevalence2011.pdf</u> Accessed 07/04/2015.
 ⁵⁶ ONS, Mid Year Estimates 2014 <u>http://www.ons.gov.uk/ons/publications/re-reference-</u>

⁵⁷ Public Health England, The Lesbian, Gay, Bisexual and Trans Public Health Outcomes Framework Companion Document. <u>http://lgbt.foundation/policy-research/the-lgbt-public-health-outcomes-</u> <u>framework-companion-document/</u> Accessed 22/04/2015.

⁵⁸ The Stationary Office, Equality Act 2010 <u>http://www.legislation.gov.uk/ukpga/2010/15/contents</u> Accessed 15/04/2015.

In 2011, 53.2% of people aged 16 years+ in the Forest of Dean were married, Figure 28 shows this was higher than the county, regional and national average. The proportion of people in a registered same sex civil partnership in the Forest of Dean stood at 0.2%, which was in line with the county, national and regional averages.



Figure 28: Percentage of the 16+ population by marital status, 2011⁵⁹

Evidence suggests being married is associated with better mental health. There is less evidence on the benefits of being in a civil partnership; however, it is likely the benefits will also be experienced by people in similarly committed relationship such as civil partnerships⁶⁰.

3.7.5 Pregnancy and maternity

The Equality Act⁶¹ protects women who are pregnant, have given birth in the last 26 weeks (non work context) or are on maternity leave (work context) against discrimination in relation to their pregnancy.

In 2014 there were 779 live births in the Forest of Dean⁶². Figure 29 shows the largest number of live births was among the 25-34 year old age groups, illustrating the trend of later motherhood. This is also the age when the employment rate for women is at its highest. Births to mothers aged 35 and over account for a lower proportion of total births in the Forest of Dean than they do at

⁵⁹ ONS, 2011 Census <u>https://www.nomisweb.co.uk/</u> Accessed 15/09/2015

⁶⁰ Department of Health, NO HEALTH WITHOUT MENTAL HEALTH: A cross-Government mental health outcomes strategy for people of all ages - Analysis of the Impact on Equality (AIE) <u>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213763/dh_123989.pdf</u> Accessed 20/04/2015

⁶¹ The Stationary Office, Equality Act 2010 <u>http://www.legislation.gov.uk/ukpga/2010/15/contents</u> Accessed 15/04/2015.

⁶² ONS, Live Births by Area of Usual Residence, 2014 <u>http://www.ons.gov.uk/ons/rel/vsob1/births-by-area-of-usual-residence-of-mother--england-and-wales/2014/index.html</u> Accessed 21/09/2015.



a county, regional and national level. Conversely births to mothers under the age of 25 make up a higher proportion of total births.

Figure 29: Live births by age of mother, 2014⁶³

3.7.6 Race and Ethnicity

Ethnicity is an important issue because, as well as having specific needs relating to language and culture, research has found people from Black and Minority ethnic groups are more likely to have lower incomes, gain lower levels of education qualifications, have higher rates of unemployment and experience poorer health⁶⁴. Individuals may also experience discrimination and inequalities because of their ethnicity. A report by the European Social Survey suggests 15% of respondents in the UK had experienced prejudice based on ethnicity⁶⁵.

For information about changes in Forest of Dean's BME population please see section 3.2.3.

⁶³ Ibid.

⁶⁴ The University of Manchester in Association with the Runnymede Trust, Local Ethnic Inequalities -Ethnic Differences in Education, Employment, Health and Housing in Districts of England and Wales, 2001-2011 <u>http://www.runnymedetrust.org/uploads/Inequalities%20report-final%20v2.pdf</u> Accessed 22/04/2015.

⁶⁵ European Social Survey, Experiences and Expressions of Ageism: Topline Results UK from Round 4 of the European Social Survey

http://www.europeansocialsurvey.org/docs/findings/ESS4_gb_toplines_experiences_and_expressions _of_ageism.pdf Accessed 17/04/2015.

3.7.7 Religion and Belief

In 2011, 65.8% of residents in the Forest of Dean reported they are Christian, making it the most common religion. This is followed by no religion which accounts for 25.2% of the total population⁶⁶.

Figure 30 shows the Forest of Dean has a higher proportion of people who are Christian than the county, regional and national average. In contrast it has a lower proportion of people that have no religion and who follow a religion other than Christianity, which reflects the ethnic composition of the district.



Figure 30: Percentage of the population by Religion, 2011⁶⁷

3.7.8 Gender

The overall gender split in the Forest of Dean is slightly skewed towards females, with males making up 49.1% of the population and females accounting for 50.9%⁶⁸. This situation is also reflected at county, regional and national level.

As age increases gender differences become more noticeable, with females outnumbering males by an increasing margin. Figure 31 shows 51.8% of people aged 65-84 are female, while males account for 48.2%. For people aged 85+ the difference is even more marked with females accounting for 66.1% of the total population, something which is also observed at county, regional and national level. These gender differences, has resulted in the majority of single pensioner

⁶⁶ ONS, 2011 Census <u>https://www.nomisweb.co.uk</u>/ Accessed 16/04/2015.

⁶⁷ Ibid.

⁶⁸ ONS, Mid Year Estimates 2014 <u>http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-368259</u> Accessed 15/09/2015.

households being headed by a woman⁶⁹. Females are also more likely to head lone parent households with dependent children. In the Forest of Dean 87.1% of such households are headed by women, a figure which is in line with the county and national average⁷⁰.



Figure 31: Forest of Dean's population by gender and broad age groups, 2014⁷¹

The gender of an individual, combined with additional factors such as living alone, may affect their health and social care needs. Individuals may also experience discrimination and inequalities because of their gender. A report by the European Social Survey found 24% of respondents had experienced prejudice based on gender⁷². Discrimination on the grounds of gender was reported by more respondents than discrimination based on ethnicity.

3.7.9 Sexual Orientation

The 'protected characteristic' of Sexual Orientation refers to those individuals who are attracted to those of the opposite sex, the same sex or either sex⁷³.

⁶⁹ ONS, 2011 Census <u>https://www.nomisweb.co.uk</u>/ Accessed 16/04/2015.

⁷⁰ Ibid.

⁷¹ ONS, Mid Year Estimates 2014 <u>http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-368259</u> Accessed 15/09/2015.

⁷² European Social Survey, Experiences and Expressions of Ageism: Topline Results UK from Round 4 of the European Social Survey

http://www.europeansocialsurvey.org/docs/findings/ESS4_gb_toplines_experiences_and_expressions _of_ageism.pdf Accessed 17/04/2015.

⁷³ The Stationary Office, Equality Act 2010 <u>http://www.legislation.gov.uk/ukpga/2010/15/contents</u> Accessed 15/04/2015.

There is no definitive data on sexual orientation at a local or national level. A number of studies have attempted to provide estimates for the proportion of people who may identify as lesbian, gay or bisexual, generating a range of different results.

Estimates used by the Government Treasury, and quoted by Stonewall, suggest around 5-7% of the population aged 16+ are lesbian, gay or bisexual⁷⁴. If this figure was applied to the Forest of Dean it would mean somewhere between 3,500 and 4,900 people in the Forest of Dean are Lesbian, Gay or Bisexual⁷⁵.

However, a more recent estimate from the ONS Integrated Household Survey suggests that nationally Lesbian, Gay and Bisexuals represent 1.6% of people aged 16 and over⁷⁶. If this figure was applied to the Forest of Dean it would mean there were around 1,100 Lesbian, Gay and Bisexuals in the district⁷⁷. Results from the Integrated Household Survey can also be broken down by age. There are some noticeable differences, with 2.6% of those aged 16-24 identifying themselves as Gay, Lesbian or Bisexual, compared with only 0.6% of those aged 65 and over⁷⁸.

National research suggests lesbian, gay and bisexual people experience discrimination and marginalisation in a number of ways that impacts on wider factors such as education, housing and perceptions and experiences of crime and violence. Lesbian, gay and bisexual communities have been found to demonstrate higher levels of health risk behaviours, such as smoking and drug and alcohol use, as well as higher levels of self-harm. Life expectancy for lesbian, gay, bisexual people is also lower than average⁷⁹.

For further information about the protected characteristics please see our population profile, which can be found here:

http://www.gloucestershire.gov.uk/inform/index.cfm?articleid=110774

⁷⁴ Stonewall (2009) How many lesbian, gay and bisexual people are there?
<u>http://www.stonewall.org.uk/at_home/sexual_orientation_faqs/2694.asp</u> Accessed 20/04/2015

⁷⁵ ONS, Mid Year Estimates 2014 <u>http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-368259</u> Accessed 15/09/2015.

 ⁷⁶ Integrated Household Survey, January to December 2014: Experimental Statistics
 <u>http://www.ons.gov.uk/ons/rel/integrated-household-survey/integrated-household-survey/january-to-december-2014/index.html</u>
 ⁷⁷ ONS, Mid Year Estimates 2014 http://www.ons.gov.uk/ons/publications/re-reference-

⁷⁷ ONS, Mid Year Estimates 2014 <u>http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-368259</u> Accessed 15/09/2015.

⁷⁸ Integrated Household Survey, January to December 2014: Experimental Statistics <u>http://www.ons.gov.uk/ons/rel/integrated-household-survey/integrated-household-survey/january-to-</u> <u>december-2014/index.html</u> Accessed 15/10/2015.

⁷⁹ Public Health England, The Lesbian, Gay, Bisexual and Trans Public Health Outcomes Framework Companion Document. <u>http://lgbt.foundation/policy-research/the-lgbt-public-health-outcomes-framework-companion-document/</u> Accessed 22/04/2015.

3.8 Key messages

- Between 2004 and 2014, the population of Forest Dean District grew by 2,600 people to around 83,700. This represents an average annual growth rate of 0.32%, well below the Gloucestershire and England averages of 0.68% and 0.80% respectively. However, the annual growth rate in this period for the district's older population (3.32%) was much higher than for Gloucestershire and England. The population of younger people (aged 0-64) actually fell between 2004 and 2014.
- Projections suggest that the Forest of Dean population will grow to 86,800 by 2025 and 89,900 by 2037. Again, projected overall growth rates are lower for the Forest of Dean than for Gloucestershire and England as a whole. The projected percentage increase of the older population in the Forest of Dean in line with that of Gloucestershire between 2012 and 2037 (up 72.6% compared to 72.2%).
- The migration pattern since 2004 has been closely linked to the inflow from East European countries. This has resulted in the 'White Other' population in Forest of Dean District increasing between 2001 and 2011, from 730 to 1,200. The 'White other' group now accounts for 1.5% of the district population, compared to 0,9% in 2001. The Black and Minority Ethnic (BME) population was also 1.5% of the total District population in 2011, low compared to the county as a whole..
- In general, Forest of Dean District displays average levels of deprivation in relation to the rest of England. Out of the 13 LSOAs in Gloucestershire that rank in the top 20% most deprived nationally, one is located in Forest of Dean district – Cinderford West. The population of the Forest of Dean District is most deprived in relation to the 'Barriers to Housing and Services' domain of deprivation.
- Females in the Forest of Dean can generally expect to live around 4 years longer than their male counterparts. Overall, life expectancy for both men and women has been steadily increasing in the district over the past decade. Over this period, life expectancy has been slightly lower for Forest of Dean residents than the county average, and generally slightly higher than the national average.
- Males in the least deprived Forest of Dean decile (10th of population) can expect to live 2-3 years longer than those in the most deprived decile. For females, the gap is nearly 5 years. Over the past decade, deprived males and un-deprived males and females have seen an increase in life expectancy. However, for deprived females there has been little change over the period and the gap in life expectancy between them and un-

deprived females has started to widen which could be a cause for concern.

- The three leading causes of death in the Forest of Dean are cancer, cardiovascular disease (CVD), and respiratory disease, respectively. This is consistent with the national picture.
- The rate of excess winter deaths in Forest of Dean District rose slightly from 2006-09 to 2008-11, but has since fallen. It remains lower than the national and county benchmarks, but this difference is not statistically significant.
- The number of employees in Forest of Dean district after experiencing a decrease between 2009 and 2010 increased slightly to 23,360 by 2014. The annual growth rate between 2009 and 2014 at -0.8% is the second lowest in the county after Gloucester. Between 2015 and 2025 the number of employees is predicted to grow at 0.3% a year, in line with the county average rate.
- There are nearly 3,700 businesses in Forest of Dean District accounting for 13% of the County's total. Growth in the number of businesses between 2010 and 2015 over the last five years is the lowest in the County at 2.8% compared to 8.1% for Gloucestershire as a whole.
- The district is home to a lesser-qualified and lower skilled workforce serving an economy related to basic manufacturing and service activities which is, however, projected to grow.

The number of people claiming Job Seekers Allowance (JSA) in Forest of Dean District has shown a steady decline since May 2014 to 1.1% (580 people) in May 2015. The District has the third highest claimant rate in the county although it is well below the national average.

The Forest of Dean in 2011 was the District with the second lowest proportion of the resident population with qualifications at Level 4 and above (24%) and the highest proportion with no qualification (25% or 16,700 people).

In 2011 14,627 residents commuted outside the district to work and 6,015 commuted in – a net outflow of 8,612, the largest in Gloucestershire.

4. Getting the right start in life

4.1 About this section

Getting the right start in life for children in the Forest of Dean district should mean that they have the best chance of a healthy and happy adulthood with an active and rewarding old age. In order to achieve this, the needs of mothers, families and the wider community need to be considered as well as those of the child themselves. This section examines some of the key factors in ensuring a good start for children in Forest of Dean district.

4.2 Maternity

4.2.1 Smoking in Pregnancy

Smoking in pregnancy has well known detrimental effects for the growth and development of the baby and health of the mother. Smoking during pregnancy can cause serious pregnancy-related health problems. These include complications during labour and an increased risk of miscarriage, premature birth, stillbirth, low birth-weight and sudden unexpected death in infancy.

Encouraging pregnant women to stop smoking during pregnancy may also help them kick the habit for good, and thus provide health benefits for the mother and reduce exposure to second-hand smoke by the infant.



Figure 32: Smoking at time of booking in Forest of Dean 2010/11 – 2014/15



Figure 33: Smoking at delivery in Forest of Dean, 2010/11 – 2014/15

In 2014/15, 116 women were recorded as being a smoker at their first ante-natal appointment (time of booking). 87 women were recorded as still smoking at time of the delivery for the same period.⁸⁰

4.2.1 Low birth weight

Low birth weight increases the risk of childhood mortality and of developmental problems for the child. It is also associated with poorer health in later life. At a population level there are inequalities in low birth weight and a high proportion of low birth weight births could indicate lifestyle issues of the mothers and/or issues with maternity services.



Figure 34: Low birth weight babies 2005-2012.

⁸⁰ GHNHSFT Stork data (CCG)

The percentage of low birth weight babies in Forest of Dean (3.05%) was higher in 2012 compared to England (2.80%) but slightly lower than Gloucestershire (3.07%) for the same year.⁸¹

4.2.2 Breastfeeding

Breast milk provides the ideal nutrition for infants in the first stages of life. There is evidence that babies who are breast fed experience lower levels of gastrointestinal and respiratory infection. Observational studies have shown that breastfeeding is associated with lower levels of child obesity. Benefits to the mother include a faster return to pre-pregnancy weight and possibly lower risk of breast and ovarian cancer.

Statistics about breastfeeding prevalence in the Forest of Dean are not available, however information about prevalence at county level can be found in Understanding Gloucestershire, which can be found here:

https://inform.gloucestershire.gov.uk/ViewPage1.aspx?C=Resource&ResourceID =17

4.3 Sexual health

4.3.1 Teenage pregnancies

Most teenage pregnancies are unplanned and around half end in an abortion. While for some young women having a child when young can represent a positive turning point in their lives, research evidence, particularly from longitudinal studies, shows that teenage pregnancy is associated with poorer outcomes for both young parents and their children⁸².

Teenage mothers are less likely to finish their education, are more likely to bring up their child alone and in poverty and have a higher risk of poor mental health than older mothers. Infant mortality rates for babies born to teenage mothers are around 60% higher than for babies born to older mothers. The children of teenage mothers have an increased risk of living in poverty and poor quality housing and are more likely to have accidents and behavioural problems⁸³.

⁸¹ Public Health Outcomes Framework <u>http://www.phoutcomes.info/</u>

⁸² Local Government Association, Tackling Teenage Pregnancy, 2013, <u>http://www.local.gov.uk/c/document_library/get_file?uuid=9f5ef790-eee2-422d-851c-6eb5c3562990&groupId=10180</u>

⁸³ Ibid.



Figure 35: Under 18 conceptions 1998-2013

Under 18 conception rates have more than halved in Forest of Dean since the 1998 recording baseline. They remained below the county and national benchmarks in 2013⁸⁴.

4.3.2 Chlamydia screening

Chlamydia is the most commonly diagnosed sexually transmitted infection. It causes avoidable sexual and reproductive ill-health, including symptomatic acute infections and complications such as pelvic inflammatory disease (PID), ectopic pregnancy and tubal-factor infertility.



Figure 36: Chlamydia detection rate (15-24 year olds).

⁸⁴ Public Health Outcomes Framework <u>http://www.phoutcomes.info/</u>

In 2012 and 2013, chlamydia detection rates in the Forest of Dean district were lower than the county and national benchmarks⁸⁵. It should be noted that this does not necessarily mean that we have a lower rate of young people with Chlamydia to Gloucestershire and England; it could be related to the proportion of people screened.

4.4 Maintaining a healthy weight in childhood

The UK is experiencing an epidemic of obesity affecting both adults and children. The Health Survey for England (HSE) found that among boys and girls aged 2 to 15, the proportion of children who were classified as obese increased from 11.7 per cent in 1995 to 16.0 per cent in 2010, peaking at 18.9 per cent in 2004.

There is concern about the rise of childhood obesity and the implications of such obesity persisting into adulthood. The risk of obesity in adulthood and risk of future obesity-related ill health are greater as children get older. Studies tracking child obesity into adulthood have found that the probability of overweight and obese children becoming overweight or obese adults increases with age⁸⁶⁸⁷⁸⁸. The health consequences of childhood obesity include: increased blood lipids, glucose intolerance, Type 2 diabetes, hypertension, increases in liver enzymes associated with fatty liver, exacerbation of conditions such as asthma and psychological problems such as social isolation, low self-esteem, teasing and bullying.

⁸⁵ Ibid

⁸⁶Guo SS, Chumlea WC. Tracking of body mass index in children in relation to overweight in adulthood. The American Journal of Clinical Nutrition 1999;70(suppl): 145S-8S.

⁸⁷ Serdula MK, Ivery D, Coates RJ, Freedman DS, Williamson DF, Byers T. Do obese children become obese adults? A review of the literature. Preventative Medicine 1993;22:167-77.

⁸⁸ Starc G, Strel J. Tracking excess weight and obesity from childhood to young adulthood: a 12-year prospective cohort study in Slovenia. Public Health Nutrition 2011;14:49-55.

4.4.1 Excess weight in 4-5 year olds



Figure 37: Excess weight in 4-5 year olds (2006/07 – 2013/14)

For the past 7 years Forest of Dean district has had a higher percentage of excess weight in 4-5 year olds compared to Gloucestershire and England⁸⁹.

4.4.2 Excess weight in 10-11 year olds



Figure 38: Excess weight in 10-11 year olds (2006/07 – 2013/14)

⁸⁹ Public Health Outcomes Framework <u>http://www.phoutcomes.info/</u>

For the past 2 school years, excess weight levels for 10-11 year olds in the Forest of Dean district were higher than the Gloucestershire and England benchmarks⁹⁰.

4.4.3 Physical activity

Physical activity is important for children and young people's healthy growth and development as well as helping to prevent a range of long-term medical conditions, including obesity.

Government recommendations suggest that in order to maintain a basic level of health, children and young people need to do 60 minutes of physical activity a day. This should be a mix of moderate-intensity aerobic activity, such as fast walking, and vigorous-intensity aerobic activity, such as running.⁹¹

There is limited information available about the amount of physical activity carried out by children and young people. The Online Pupil Survey 2014 asked secondary school pupils from year 8 and 10 in Gloucestershire how much physical activity or exercise they did over a week, whether it was in or out of school.



Figure 39: Percentage of pupils reporting participation in physical activity, in and out of school

The above chart shows that 27.2% of year 8 and 9 pupils in the Forest of Dean district did 6 hours of physical activity a week and only 5.6% exercised for less than one hour a week.⁹²

⁹⁰ Ibid

⁹¹ Physical activity guidelines for children and young people <u>http://www.nhs.uk/Livewell/fitness/Pages/physical-activity-guidelines-for-young-people.aspx</u>

⁹² Online Pupil Survey 2014

4.5 Education

4.5.1 Overview

This section covers educational attainment from Early Years through to Key Stage 5 with comparisons at regional, statistical neighbour⁹³ and national level for the last five years up to 2014.

In this report attainment is described as the standard of academic attainment, typically shown by test and examination results.

The data was obtained from Department for Education Statistical First Releases and is therefore in the public domain.

Two major reforms have been implemented which effect the calculation of key stage 4 (KS4) performance measures data and therefore prevent comparison of 2014 data with previous years:

- Professor Alison Wolf's Review of Vocational Education recommendations which; restrict the qualifications counted prevent any qualification from counting as larger than one GCSE cap the number of non - GCSEs included in performance measures at two per pupil
- An early entry policy to only count a pupil's first attempt at a qualification.

For more detailed analysis of the possible effects of these reforms at a national level, please see the statistical release SFR02/2015 "Revised GCSE and equivalent results in England, 2013 to 2014" for further details. It is not possible to determine the effects of these reforms on smaller pupil groups.

Apart from Key Stage 1, results at district level are based on school location rather than pupil residence location.

Where appropriate data has been presented as a chart and a table for ease of reading.

4.5.2 Early Years Foundation Stage Profile

In relation to the EYFSP the best performing districts in 2014 appeared to be Cotswold, Cheltenham and Tewkesbury as indicated in Figure 40. Apart from Cotswold all districts fell below the national average with Gloucester and the Forest of Dean faring the worst.

⁹³ There are 10 statistical neighbours of Gloucestershire: Bath and North East Somerset, Cambridgeshire, Devon, Dorset, Hampshire, Shropshire, South Gloucestershire, West Sussex, Wiltshire and Worcestershire.



Figure 40: The proportion children achieving a Good Level of Development relating to the EYFSP by district in 2014⁹⁴

4.5.3 Key Stage 1: Level 2+

At Key Stage 1 the following four figures provide a comparison by subject for Gloucestershire districts.

As shown in Figure 41 and Table 20 for Reading, despite having the lowest values compared to the other districts and falling below both the national and statistical averages both Gloucester and the Forest of Dean districts have shown the most improvement over the last five years.

⁹⁴ DfE SfR 46/2014.



Figure 41: The proportion of pupils achieving Level 2 and above in KS1 teacher assessments for Reading by district⁹⁵

Table 20: The proportion of pupils achieving Level 2 and above in KS1 teacherassessments for Reading

KS1	% of pupils achieving L2+ in KS1 teacher assessements: Reading											
	2010	2011	2012	2013	2014							
England	85	85	87	89	90							
Statistical neighbours	87	87	89	90	91							
Gloucestershire	87	87	88	89	89							
Cheltenham	89	87	87	90	90							
Cotswold	90	90	92	92	91							
Forest of Dean	84	84	86	88	89							
Gloucester	83	85	86	85	86							
Stroud	89	88	89	91	91							
Tewkesbury	89	89	91	91	91							

In terms of Writing, Stroud district appears to have made the most improvement in the last five years and along with Tewkesbury district was well above the national average in 2014 as depicted in Figure 42 and Table 21.

⁹⁵ DfE SfR 34/2014.



*Figure 42: The proportion of pupils achieving Level 2 and above in KS1 teacher assessments for Writing by district*⁹⁶

Table 21: The proportion of pupils achieving Level 2 and above in KS1 teacher
assessments for Writing

KS1	% of pupils achieving L2+ in KS1 teacher assessments: Writing				
	2010	2011	2012	2013	2014
England	81	81	83	85	86
Statistical neighbours	84	84	85	87	88
Gloucestershire	83	84	85	85	86
Cheltenham	85	84	84	84	86
Cotswold	86	86	88	88	87
Forest of Dean	81	80	82	85	85
Gloucester	81	82	84	81	84
Stroud	84	85	87	86	90
Tewkesbury	86	87	88	87	88

The picture as shown in Figure 43 and Table 21 for Mathematics reflects little change over the last five years with Cheltenham district showing a slight decline since 2010. In 2014 achievement across districts was close to the national average apart from Cotswold district at 95% lying above and Gloucester district at 90% lying below.

⁹⁶ Ibid.



Figure 43: The proportion of pupils achieving Level 2 and above in KS1 teacher assessments for Mathematics by district⁹⁷

	% of pupils achieving L2+ in KS1 teacher				
KS1	assessments: Mathematics				
	2010	2011	2012	2013	2014
England	89	90	91	91	92
Statistical neighbours	91	91	92	93	93
Gloucestershire	91	91	91	91	92
Cheltenham	92	91	89	91	91
Cotswold	94	92	92	92	95
Forest of Dean	90	88	90	90	92
Gloucester	88	90	90	89	90
Stroud	92	92	92	92	94
Tewkesbury	93	94	93	94	94

Table 22: The proportion of pupils achieving Level 2 an above in KS1 teacherassessments for Mathematics

Outcomes for Science as portrayed in Figure 44 and Table 23 are quite mixed. The Forest of Dean district showed the greatest improvement over the last five years compared to Stroud and Tewkesbury districts which underwent slight decline. In 2014 apart from Gloucester district which fell well below, all the other district results were close to the national average in this subject.

⁹⁷ Ibid.



*Figure 44: The proportion of pupils achieving Level 2 and above in KS1 teacher assessments for Science by district*⁹⁸

Table 23: The proportion of pupils achieving Level 2 and above in KS1 teacher
assessments for Science

	% of pupils achieving L2+ in KS1 teacher				
KS1	assessments: Science				
	2010	2011	2012	2013	2014
England	89	89	89	90	91
Statistical neighbours	92	91	91	93	92
Gloucestershire	90	90	91	89	90
Cheltenham	90	91	91	92	90
Cotswold	92	91	93	92	94
Forest of Dean	88	88	91	90	92
Gloucester	86	88	88	86	86
Stroud	93	91	93	91	91
Tewkesbury	91	91	91	90	90

4.5.4 Key Stage 2: Level 4+

According to Figure 45 and Table 24 the Forest of Dean district experienced the greatest improvement in the percentage of pupils achieving Level 4 at KS2 in English. In 2014 all districts reflected a high level of achievement which at 90% or above was above the national average. Stroud district had the best result at 94%.


Figure 45: The proportion of pupils achieving Level 4 and above at KS2 in English by district⁹⁹

KS2	% of pupils achieving L4+ at KS2: English					
1.32	2010	2011	2012	2013	2014	
England	80	82	85	87	88	
Statistical neighbours	81	83	86	87	89	
Gloucestershire	84	85	89	88	90	
Cheltenham	83	85	89	88	91	
Cotswold	87	88	91	91	93	
Forest of Dean	79	80	83	87	91	
Gloucester	84	83	88	86	90	
Stroud	84	87	91	91	94	
Tewkesbury	88	88	89	90	92	

The proportion of pupils achieving Level 4 and above at KS2 in Mathematics underwent the greatest improvement in the Forest of Dean district over the last five years but was still one percentage point behind the national average in 2014 as shown in Figure 46 and Table 25. Tewkesbury district reflected the least change over this period but along with Stroud was well above the national average in 2014.

⁹⁹ DfE SFR 33/2012 & 50/2014.



Figure 46: The proportion of pupils achieving Level 4 and above at KS2 in Mathematics by district¹⁰⁰

Table 25: The proportion of pupils achieving Level 4 and above at KS2 in
Mathematics

KS2	% of pupils achieving L4+ at KS2: Mathematics					
N32	2010	2011	2012	2013	2014	
England	79	80	84	85	86	
Statistical neighbours	72	76	82	83	86	
Gloucestershire	82	83	86	86	88	
Cheltenham	81	84	86	88	89	
Cotswold	84	84	88	89	89	
Forest of Dean	74	78	82	85	85	
Gloucester	82	81	85	84	86	
Stroud	82	84	89	86	90	
Tewkesbury	87	85	88	87	90	

Results are only available for the last two years for outcomes relating to Writing at KS2. In 2014 Tewkesbury district had the highest level of achievement at 92% and the Forest of Dean district the lowest at 84% which matched the national average as depicted in Figure 47.

¹⁰⁰ *Ibid*.



Figure 47: The proportion of pupils achieving Level 4 and above at KS2 in Writing by district¹⁰¹

In terms of Grammar, punctuation and spelling at KS2, data is only available for the last two years. In 2014 according to Figure 48 apart from the Forest of Dean district pupils achieving 74% all the district results were above the national average of 77% with Stroud district achieving the highest position at 83%.



*Figure 48: The proportion of pupils achieving Level 4 and above at KS2 in Grammar, punctuation and spelling by district*¹⁰²

The proportion of pupils achieving at KS2 in Reading, Writing and Mathematics as shown in Figure 49 and Table 26 showed the greatest improvement in the Forest of Dean district, followed by Gloucester and Stroud districts. In 2014 apart from the Forest of Dean and Gloucester districts achievements in the remaining districts were all above the national average of 79%.



*Figure 49: The proportion of pupils achieving Level 4 and above in Reading, Writing and Mathematics by district*¹⁰³

Table 26: The proportion of pupils achieving Level 4 and above in Reading, Writingand Mathematics

KS2	% of p	% of pupils achieving L4+ at KS2: Reading, Writing and Mathematics				
	2010	2011	2012	2013	2014	
England	65	67	75	75	79	
Statistical neighbours	65	68	75	75	79	
Gloucestershire	69	72	78	79	81	
Cheltenham	69	73	79	81	81	
Cotswold	73	74	82	82	84	
Forest of Dean	60	65	71	77	78	
Gloucester	65	71	75	76	78	
Stroud	70	74	80	79	84	
Tewkesbury	77	75	80	81	85	

4.5.5 Key Stage 4: GCSE and equivalents

At KS4 the proportion of pupils achieving 5+ A*- C grades including English and Mathematics GCSE presents a rather mixed picture between 2010 and 2013. Although the Forest of Dean district achievement is the lowest at 55% it has progressed steadily as has Stroud district with the latter at 68% presenting the highest level of attainment in 2013. The remaining districts all exhibit rather erratic progress as shown in Figure 50 and Table 27. In 2014, apart from the

¹⁰³ *Ibid*.



Forest of Dean all the districts attainment values were above the national average of 57%.

Figure 50: The proportion of pupils achieving 5 or more A to C grades including English and Mathematics GCSEs by district*¹⁰⁴

Table 27: The proportion of pupils achieving 5 or more A* to C grades including	
English and Mathematics GCSEs	

KS4	% of pupils achieving 5+ A*- C grades in English and Maths GCSEs						
1104	2010	2011	2012	2013	2014*		
England	55.3	58.4	59.1	60.8	56.8		
Statistical neighbours	57.3	59.7	57.9	60.4	57.5		
Gloucestershire	60.1	62.9	62.3	61.8	60.8		
Cheltenham	66.1	63.9	61.0	64.5	60.2		
Cotswold	60.9	67.9	64.1	66.4	63.9		
Forest of Dean	52.8	53.0	53.9	54.9	52.4		
Gloucester	54.4	58.9	57.8	54.4	57.5		
Stroud	61.2	63.7	66.4	68.1	64.6		
Tewkesbury	62.5	65.8	68.0	58.7	59.8		

As presented in Figure 51 and Table 28 Stroud district experienced the highest increase in the proportion of pupils achieving 5+ A*-C grades at GCSE between

¹⁰⁴ DfE SfR 04/2013 & 06/2015.

2010 and 2013 as well as the highest value in 2013 amounting to 87%. The Forest of Dean district at 75% had the lowest attainment and along with Gloucester district at 81% was below the national average. The 2014 data presents a similar picture in terms of comparisons with the national average.



Figure 51: The proportion of pupils achieving 5 or more A* to C grade GCSE by district¹⁰⁵

KS4	% of pupils achieving 5+ A*- C grades C					
	2010	2011	2012	2013	2014*	
England	76.3	80.7	83.2	83.1	65.8	
Statistical neighbours	73.9	77.3	79.1	79.6	67.1	
Gloucestershire	76.1	79.4	82.0	83.0	69.6	
Cheltenham	81.3	80.2	83.0	85.1	70.4	
Cotswold	77.9	83.2	82.5	82.6	72.4	
Forest of Dean	71.6	71.4	75.1	75.3	60.4	
Gloucester	71.3	77.8	81.4	80.8	65.7	
Stroud	75.2	80.3	83.1	86.7	73.6	
Tewkesbury	78.6	79.9	84.3	84.3	68.9	

¹⁰⁵ *Ibid*.

4.5.6 Key Stage 5: A level and Level 3

Gloucestershire's good performance has been carried over to the KS5 Level as shown in the following figures. There are two measures of performance¹⁰⁶, one is the average point score per student and the other is the average point score per exam entry, both of which need to be taken into account.

The average points score per student as depicted in Figure 52 and Table 29 has shown the greatest increase in Gloucester and Stroud districts over the last five years whereas the Forest of Dean district experienced the greatest decline. Apart from the Forest of Dean and Cheltenham all the district values were above the national average in 2014.



Figure 52: Average point score for all Level 3 qualifications: per student by district¹⁰⁷

¹⁰⁶ The **average point score per student** provides a measure of the average number of A level equivalent studied and the grades achieved. The more qualifications undertaken by a student and the higher the grades achieved, the higher the average point score per student. However, the **average point score per examination** gives an indication of the average A level grade achieved by students at an institution. The higher the grade, the higher the points score per examination entry. Neither performance indicator should be considered in isolation.

¹⁰⁷ DfE SfR 02/2011, 01/2012, 41/2013, 02/2014 & 03/2015.

KS5	Average point score for all level 3 qualifications: per student						
100	2010						
		-	-		-		
England	744.8	745.9	733.0	724.3	714.0		
Statistical neighbours	732.3	729.7	712.1	698.6	692.1		
Gloucestershire	777.3	783.3	765.4	762.1	751.9		
Cheltenham	790.3	775.1	764.8	735.4	691.7		
Cotswold	818.2	841.8	806.7	799.5	788.7		
Forest of Dean	670.7	686.8	660.8	635.7	646.9		
Gloucester	856.8	856.6	862.5	866.3	874.0		
Stroud	792.4	770.3	756.8	811.8	837.3		
Tewkesbury	743.2	743.7	728.8	721.3	711.1		

Table 29: Average point score for all Level 3 qualifications: per student	Table 29: Average	point score	for all Level 3	qualifications:	per student
---	-------------------	-------------	-----------------	-----------------	-------------

In terms of grade, the average point score per entry as shown in Figure 53 and Table 30Table 30: Average point score for all Level 3 qualifications: per entry increased in Gloucester district and the most in Stroud district while the other districts experienced decline over the last five years. Student outcomes for the Cotswold and Tewkesbury districts particularly the latter were below the national average while for Stroud district were 18 points above the national average in 2014. The two point score results indicate that students are doing more A levels particularly in Gloucester and Cotswold districts and also gaining better grades.



Figure 53: Average point score for all Level 3 qualifications: per entry by district¹⁰⁸

¹⁰⁸ *Ibid*.

KS5	Average	Average point score for all level 3 qualifications: per entry					
	2010	2011	2012	2013	2014		
England	214.4	216.2	212.8	213.7	214.6		
Statistical neighbours	211.1	212.6	209.0	210.0	210.6		
Gloucestershire	218.7	219.9	215.2	215.5	216.7		
Cheltenham	223.8	224.1	218.0	215.9	218.6		
Cotswold	213.4	219.7	213.6	211.7	209.5		
Forest of Dean	223.7	226.3	217.7	218.8	218.4		
Gloucester	221.0	219.4	218.9	219.9	222.0		
Stroud	220.7	215.5	213.7	220.6	227.1		
Tewkesbury	209.2	210.4	206.6	205.2	206.3		

Table 30: Average point score for all Level 3 qualifications: per entry

The proportion of students achieving at least 2 substantial level 3 qualifications declined between 2010 and 2014 across all districts apart from Tewkesbury district as shown in Figure 54 and Table 31. However, in 2014 Gloucester and Tewkesbury districts outperformed the national average by eight percentage points with values of 98.3 and 98.6 respectively.



*Figure 54: The proportion of students achieving at least 2 substantial level 3 qualifications by district*¹⁰⁹

KS5	Percentage of students achieving at least 2 substantial level 3 qualifications				
	2010	2011	2012	2013	2014
England	94.8	94.0	93.6	92.3	90.5
Gloucestershire	96.3	95.5	95.8	94.3	92.6
Cheltenham	96.0	93.9	97.1	93.2	83.8
Cotswold	98.6	96.4	95.7	93.6	94.6
Forest of Dean	90.9	91.0	90.4	88.4	89.9
Gloucester	98.7	97.0	97.5	97.2	98.3
Stroud	98.0	97.6	96.5	-	-
Tewkesbury	96.3	98.8	98.5	97.5	98.6

Table 31: The proportion of students achieving at least 2 substantial level 3qualifications

It is evident from Figure 55 and Table 32 that the percentage of students achieving 3 A*-A grades or better at A level or Applied single/double award A level over the last five years has been highest in Cheltenham, Stroud and Gloucester districts. Apart from Cotswold and Tewkesbury districts, this proportion has increased slightly for all districts in the last five years. In terms of the national average Cheltenham was 14 points above while Tewkesbury was 10 percentage points below in 2014.



Figure 55: The proportion of students achieving 3 A* to A grades or better at A level or Applied single/double award A level by district¹¹⁰

¹¹⁰ *Ibid*.

	% of students achieving 3 A*- A grades or better					
KS5	at A level or Applied single/double award A level					
	2010	2011	2012	2013	2014	
England	12.8	13.1	12.8	12.5	12.0	
Statistical neighbours	10.0	10.1	9.9	9.3	9.2	
Gloucestershire	12.5	13.2	12.9	13.3	14.0	
Cheltenham	22.5	23.4	25.2	25.9	25.8	
Cotswold	9.3	10.0	11.0	10.9	9.1	
Forest of Dean	5.2	9.1	3.8	3.8	6.8	
Gloucester	15.2	13.4	13.0	14.6	15.6	
Stroud	14.6	14.8	10.9	13.5	18.2	
Tewkesbury	6.2	5.3	6.3	4.4	2.1	

Table 32: The proportion of students achieving 3 A* to A grades or better at A levelor Applied single/double award A level

4.6 Promoting the welfare of children and Safeguarding

4.6.1 Summary

Local authorities have overarching responsibility for safeguarding and promoting the welfare of all children and young people (CYP) in their area. They have a number of statutory functions including specific duties in relation to children in need and children suffering, or likely to suffer, significant harm, regardless of where they are found. The Director of Children's Services and Lead Member for Children's Services in local authorities are the key points of professional and political accountability, with responsibility for the effective delivery of these functions.

4.6.2 Early help

Whilst children make up a reducing percentage of the total population of Gloucestershire, there are significantly rising numbers of children living in the county. This is particularly so in the urban areas, both with children being born here and due to in-migration. This can be clearly seen in the rising demand for primary and secondary school places.

Outcomes for most children in Gloucestershire are good and getting better. The GCP Children's Partnership Plan has contributed to significant improvements as evidenced by the views of children and young people, for example, through the online pupil survey.

Families First¹¹¹ (our local name for the national Troubled Families programme¹¹²) is successfully delivering an Early Help Offer and is preparing for the 2015 expanded programme as an early adopter.¹¹³

¹¹¹ <u>http://www.gloucestershire.gov.uk/families-first</u> Accessed 20/11/2015

¹¹² https://www.gov.uk/government/policies/support-for-families Accessed 20/11/2015

4.6.3 Social care overview

Social Care in Gloucestershire is delivered in seven CYP Localities, which broadly follow the six districts with Gloucester split into two, although the boundaries do not match exactly to the district boundaries, and vary to greater or lesser extents for each locality.

For full information about Children's Social Care in Gloucestershire, please see the 'Understanding Gloucestershire – a Joint Strategic Needs Assessment 2015'¹¹⁴ document. This includes more figures than are presented here, as published statistics are not made available at a district (or lower) level.

The following gives some key definitions and explanations of the key stages into which a child or young person may fall: child in need, child protection, and child in care.

A CYP is legally defined as being a Child in Need (CiN) if:

- They are unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for them of services by a local authority;
- their health or development is likely to be significantly impaired, or further impaired, without the provision for them of such services; or
- they are disabled.

As a Local Authority, Gloucestershire has the duty to instigate section 47 enquiries if they are informed that a child who lives, or is found, in their area is:

- the subject of an emergency protection order; or
- in police protection

or there is reasonable cause to suspect that a child who lives, or is found, in their area is suffering, or is likely to suffer, significant harm¹¹⁵. From these enquiries, it is possible that a child will need further protection, and an Initial Child Protection Conference will be held, from which a plan is put in place to protect the CYP, namely the Child Protection Plan (CPP).

A child who is being looked after by the local authority is known as a child in care. In some cases a child will have been placed in care voluntarily by parents struggling to cope. In other cases children's services will have intervened because a child was at risk of significant harm.

The following chart gives a snapshot for the rates of social care activity for CiN, CPP, and Children-in-care in districts, as at 31st August 2015.

¹¹³ <u>http://www.gloucestershire.gov.uk/cyppp</u> Accessed 20/11/2015

¹¹⁴ <u>http://www.gloucestershire.gov.uk/inform/index.cfm?articleid=94018</u> Accessed 20/11/2015

¹¹⁵ http://www.legislation.gov.uk/ukpga/1989/41/section/47 Accessed 20/11/2015.



Figure 56: Snapshot of rates per 10,000 CYP aged 0 to 17 of social care activity by district.¹¹⁶

The following chart shows the rates of social care activity across the whole of the 2014/15 reporting year.

¹¹⁶ Extract from LiquidLogic ICS as at 31/08/2015. 0 to 17 population from ONS 2014 mid-year estimates.



Figure 57: Rates per 10,000 CYP aged 0 to 17 of social care activity by district.¹¹⁷

During the whole of the 2014/15 reporting year, children living at an address in Forest of Dean have the second-lowest rate of referrals, and the lowest rate of initial assessments. The rate of children who are the subject of a CP plan is the highest of the six districts in Gloucestershire. Looking at the snapshot taken as at 31st August 2015, Forest of Dean has the second highest rate of Children in Care, with Gloucester having the highest rate.

As previously stated, further information about Children's Social Care in Gloucestershire can be found in the 'Understanding Gloucestershire - a Joint Strategic Needs Assessment 2015^{,118} document.

¹¹⁷ Extract from LiquidLogic ICS 01/05/2015. 0 to 17 population from ONS 2014 mid-year estimates. ¹¹⁸ http://www.gloucestershire.gov.uk/inform/index.cfm?articleid=94018 Accessed 20/11/2015

4.7 Key messages

- The Forest of Dean has a higher percentage of low birth weight babies (3.05%) than England (2.80%) but slightly lower than Gloucestershire (3.07%).
- Under 18 conception rates have more than halved in the Forest of Dean since the 1998 recording baseline. They remain below the county and national benchmarks.
- Chlamydia detection rates in the Forest of Dean were lower than the county and national benchmarks. It is possible this reflects the proportion of people screened rather than the actual rate of young people with Chlamydia in the District.
- For the last seven years the Forest of Dean has had a higher percentage of excess weight in 4-5 year olds and 10-11 year olds compared to Gloucestershire and England.
- Forest of Dean was the poorest performing District in the county for the proportion of children achieving a good level of development at the Early Years Foundation and also below the regional and national averages.
- At Key Stage 1 achievement in Forest of Dean District is generally below or similar to the national average and county average across all subjects. However the District has shown the greatest improvement between 2010 and 2014.
- At Key Stage 2 achievement in the District was mixed but again showed the greatest rate of improvement between 2010 and 2014.
- The Forest of Dean is generally the worst performing District in Gloucestershire at Key Stage 4 and Key Stage 5 with just 60.4% of resident pupils achieving 5+ A*-C grades at GCSE compared with an average of 69.6% for the county in 2014.
- Outcomes for most children in Gloucestershire are good and getting better. The GCP Children's Partnership Plan has contributed to significant improvements as evidenced by the views of children and young people, for example, through the online pupil survey.
- During the whole of the 2014/15 reporting year, children living at an address in the Forest of Dean have the second lowest rate of referrals and the lowest rate of initial assessments. In contrast, the rate of children who are the subject of a Child Protection plan is the highest of the six districts in Gloucestershire.
- According to a snapshot taken as at 31st August 2015, Forest of Dean has the second highest rate of Children in Care, with Gloucester having the highest rate.

5. Keeping healthy – prevention

5.1 About this section

While age is the leading risk factor for the majority of chronic health conditions, people's lifestyle can also impact on their health and wellbeing; notably their likelihood of developing conditions such as cardiovascular disease, cancer and respiratory disease. According to the World Health Organisation almost half of diseases such as the above are associated with four risk factors: poor diet, physical inactivity, smoking, and excess alcohol consumption. Poor mental and emotional wellbeing has also been shown to impact on health outcomes.

This section looks at the prevalence of some of these lifestyle risk factors to help inform decisions about how ill health might be prevented.

5.2 Alcohol

5.2.1 Alcohol Hospital Admissions

Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions, including liver disease, cardiovascular disease and some cancers. It is also a factor in crime and antisocial behaviour. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually.

Alcohol related hospital admissions are one indicator of the extent of harmful drinking in a community.



Figure 58: Admission episodes for alcohol-related conditions (2008/09 – 2013/14)

For the last 2 years, the rate of alcohol related hospital admissions in Forest of Dean district has been below the Gloucestershire and England rates¹¹⁹.

5.3 Smoking

5.3.1 Smoking prevalence

Smoking is a major risk factor for many diseases, including lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease. It is estimated that up to half of smokers will die from a smoking related condition.

Nationally, in 2008/09, some 463,000 hospital admissions in England among adults aged 35 and over were attributable to smoking, or some 5 per cent of all hospital admissions for this age group. Illnesses among children caused by exposure to second-hand smoke lead to an estimated 300,000 general practice consultations and about 9,500 hospital admissions in the UK each year¹²⁰.



Figure 59: Smoking prevalence 2010-2013

Smoking rates in the Forest of Dean district have declined between 2011 and 2013, and are now below the Gloucestershire and England benchmarks.¹²¹

¹¹⁹ Public Health Outcomes Framework <u>http://www.phoutcomes.info/</u>

¹²⁰ Passive Smoking and Children, Royal College of Physicians, London, 2010.

¹²¹ Public Health Outcomes Framework <u>http://www.phoutcomes.info/</u>

5.4 Maintaining a healthy weight in adults

5.4.1 Excess weight in adults

Obesity in adults is a major determinant of premature mortality and avoidable ill health. It is associated with a number of conditions, including cardiovascular disease, type 2 diabetes, and cancer. Obesity can also impact on an individual's emotional wellbeing, and is a factor in absenteeism from work.



Figure 60: Excess weight in adults 2012 Note: No time-series data currently available due to change of definitions

Excess weight is calculated using the number of adults with a BMI classified as overweight or obese. In 2012, 67% of adults in Forest of Dean were overweight or obese, which was higher than the Gloucestershire (64%) and England (64%) benchmarks.¹²²

5.4.2 Physical activity in adults

Physical inactivity is the fourth leading risk factor for global mortality accounting for 6% of deaths globally. People who have a physically active lifestyle have a 20-35% lower risk of cardiovascular disease, coronary heart disease and stroke compared to those who have a sedentary lifestyle. Regular physical activity is also associated with a reduced risk of diabetes, obesity, osteoporosis and colon/breast cancer and with improved mental health. In older adults physical

¹²² Ibid.

activity is associated with increased functional capacities. The estimated direct cost of physical inactivity to the NHS across the UK is over £1.6 billion per year.

The Chief Medical Officer currently recommends that adults undertake 150 minutes (2.5 hours) of moderate activity per week, in bouts of 10 minutes or more.



Figure 61: Physically inactive adults (2012-2014)

In 2014, the percentage of physically inactive adults in the Forest of Dean district was below the Gloucestershire and England benchmarks.¹²³

5.5 Social Isolation

5.5.1 National evidence

Loneliness and social isolation affects different people in different ways. Some people are lonely in a crowd whilst others are perfectly content living on their own with little social contact. There is, though, a growing evidence base that links loneliness and social isolation with poorer health as well as demonstrating that declining health or the need to provide care to a loved one can lead to greater loneliness.

The Campaign to End Loneliness on their website¹²⁴ summarises research on the effects of loneliness on health as follows:

Physical health

- As bad as 15 cigarettes a day
- Increased risk of high blood pressure and diabetes

Mental Health

¹²³ Ibid.

¹²⁴ <u>http://www.campaigntoendloneliness.org/loneliness-research/</u> 12/05/2015

- Increased risk of cognitive decline and dementia
- More prone to depression and increased risk of suicide

Maintaining independence

- More likely to visit GP, higher medication use, more falls
- Earlier entry to residential and nursing care
- More likely to access A&E services

5.5.2 Living alone

Living alone in itself does not mean that people will be lonely or socially isolated. However, research has shown that living alone is associated with higher levels of premature death and other negative outcomes. The following map, using data from the 2011 Census, shows in which areas in Forest of Dean District older people are more likely to be living alone.



Figure 62: Older people living alone in Gloucestershire

5.5.3 Estimated local need

In Gloucestershire we have adapted a methodology, initially developed by Essex County Council, to estimate where people are most likely to be socially isolated in the county¹²⁵. A number of risk factors were aggregated to give a 'vulnerability to social isolation' score. This was then mapped as follows.



Figure 63: Estimated vulnerability to social isolation in Gloucestershire

5.5.4 Actual local need

In the last year and a half a variety of qualitative and quantitative data in relation to the Forest of Dean District was gathered and considered. What emerged was a complex picture that does not lend itself to 'top down' views of loneliness and social isolation in the District. Whilst some places could be highlighted as areas with high risk and levels of social isolation a systematic picture was impossible to build up because of the complexity of the relationship between individual-level factors such as living alone and caring for others and the community context.

There are people living alone, caring for others or experiencing dementia dispersed across the District. More concentrated are those who spend the most hours caring, live alone in an area of high social deprivation and adult social care service users who have high levels of need for social contact. For instance, Cinderford West and Lydney East were highlighted as such areas.

Conversations were held with a variety of people including staff from the District Council community engagement team, Citizens Advice Bureau, Forest of Dean Integrated Care Team as well as lunch club volunteers, carers and other

¹²⁵ Social isolation in Gloucestershire, Gloucestershire County Council, 2013, <u>http://www.gloucestershire.gov.uk/inform/index.cfm?articleid=94013</u>

members of the community. The following issues were highlighted in the course of these conversations. This does not pretend to be a comprehensive or representative summary of all relevant issues but they may reward consideration when attempting to address social isolation in the county.

- A raft of solutions is required to address social isolation and loneliness as there are lots of contributory factors and different people need different solutions and for some people it changes over time
- The people and organisations and people who can identify and route the socially isolated need to be identified and understood
- People prefer information and advice from a familiar face
- There is a need for better marketing that doesn't just create demand but effectively matches volunteers to need
- Commissioners need to listen to local voices to fully understand local need
- Early diagnosis of dementia accompanied by appropriate support is crucial if social isolation of both the carer and the person with dementia is to be minimised
- The community can be more inclusive for people with dementia and their carers if it is sufficiently informed and educated and volunteers empowered through appropriate support
- Important to reduce the stigma and negativity attached to dementia
- We need to look at older people as someone who has something to offer their community rather than people who need services.
- Carers, stroke and Parkinsons disease patients all have particular need for help in reducing social isolation and loneliness
- Lunch clubs and similar initiatives have important role in combating social isolation
- There is a need for more volunteer befrienders and buddy systems if volunteers are socially isolated themselves this can be doubly effective
- Some feel that befriending creates dependency but to be effective it needs to be a preventative, non-health intervention delivered by volunteers with funding to coordinate and ensure safeguarding not an issue
- More volunteer drivers are needed to improve accessibility of social isolation solutions
- People often know about local social groups and services but don't access them a friendly face going with them the first time would make it much easier for them to get involved .

- Churches play an important role in the District. An audit in 2014 identified over 40 church-based activities such as befriending and community activities that address social isolation¹²⁶
- Newent and Sedbury have particular issues because of their cross-border position

5.5.5 Social prescribing

Gloucestershire Clinical Commissioning Group, in partnership with local district councils and third sector organisations, in the last year and a half set up and supported several pilots of social prescription services across the county. Social referrals were defined here as 'a clear, coherent and collaborative process in which healthcare practitioners work with patients and service users to select and make referrals to community-based services'.

As Table 33 shows, social isolation was the commonest reason for social referrals accounting for 64% of all reasons for referral in the Forest of Dean.

Locality	Most Commonly Included Reason for Referral	Total No. of Referrals including this reason	% of Referrals including this reason
Forest of Dean (n=84)	Social Isolation	55	64%
	Mental Health & Wellbeing	51	60%
	Benefits Advice	31	36%
South Cotswolds (n=87)	Mental Health & Wellbeing	43	48%
	Social Isolation	38	43%
	General Health & Fitness	26	29%
Stroud & Berkeley Vale (n=21)	Social Isolation	12	55%
	Mental Health & Wellbeing	10	45%
	Benefits Advice	3	14%
	General Health & Fitness	3	14%
Total (n=192)	Social Isolation	105	54%
	Mental Health & Wellbeing	104	53%
	General Health & Fitness	59	30%
	Benefits Advice	56	27%

Table 33

Change in wellbeing following social prescription was measured in a small number of cases with an improvement in 72% of cases in the Forest of Dean. In the Forest 67.6% of patients saw a reduction in their total number of primary care appointments in the 6 months after referral.

5.5.6 Adult social care service user need for social contact

Other ways of identifying the real extent of loneliness and social isolation in the county are being explored. When social workers carry out needs assessments of adult social care service users one of the needs they assess is their need for

¹²⁶ Cinnamon Faith Action Audit, 2015, <u>http://www.cinnamonnetwork.co.uk/cinnamon-faithaction-audits/</u>

social activities and relationships. By mapping the number of service users who are recorded with a need that is high or very high in local areas we can see where adult social care users with the highest level of actual loneliness are concentrated as shown in Figure 64. It should be stressed that this dataset is not comprehensive – not all assessments in the period include such as rating. It should also be stressed that it does not show actual levels of need for social activity and relationships for the whole population with social care needs. The means testing element of the social care system will exclude many who do have high levels of need for social contact. This might explain why areas of the Cotswolds that the model suggests would be characterised by higher levels of loneliness do not show up in this map. However, it should highlight areas that contain concentrations of those with most loneliness and least financial resources.



Figure 64: Adult social care users recorded as having a high or very high level of need for social activities and relationships December 2012 - May 2015.

5.5.7 Future work on social isolation

The various strands of intelligence about loneliness and social isolation in Gloucestershire have been collated in a report for the Health and Wellbeing Board which will be available shortly.

5.6 Key messages

- For the last two years the rate of alcohol-related hospital admissions in Forest of Dean District has been below the Gloucestershire and England rates.
- Smoking rates in the Forest of Dean have declined between 2011 and 2013, and are now below the Gloucestershire and England benchmarks.
- In 2012, 67% of adults in Forest of Dean District were overweight or obese, which is lower than the Gloucestershire (64%) and England (64%) benchmarks.
- In 2014 the percentage of physically inactive adults in Forest of Dean District was below the the Gloucestershire and England benchmarks.
- There is a growing evidence base that links loneliness and social isolation with poorer health as well as demonstrating that declining health or the need to provide care to a loved one can lead to greater loneliness.

6. Particular Needs

6.1 About this section

Some groups of people across all age ranges can have particular health and social care needs. Some are born with severe conditions; some develop them during childhood or early adulthood whilst the majority develop more specific needs as part of the ageing process. As the elderly population grows so the need for effective targeting of support becomes increasingly important. The aim is to help people remain as independent as possible in the community and out of hospital and residential care because that is what they, in general, want and because it is becoming increasingly unaffordable to continue to meet what can often be relatively high level needs, in this way.

6.2 Disability

6.2.1 Total population

Under the Equality Act¹²⁷ a person has a disability if he or she has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities. The definition is designed to be as broad as possible to cover a wide variety of conditions and impairments including; Sensory Loss, Physical Disabilities, Learning Disabilities, Mental Illness, as well as diseases such as Cancer.

There is no single measure of the number of people with disabilities; instead information is available from a number of sources, many of which use slightly different definitions of disability. The Census of Population is one of the most widely used measures and is based on a broad definition of disability.

According to the 2011 Census 19.6% of Forest of Dean residents (16,063 people) reported having a long term health problem or disability, this was above the county, regional and national average. The following graph shows the proportion of people reporting a long-term limiting health problem or disability increases with age, following the county and national trend.

¹²⁷ The Stationary Office, Equality Act 2010 <u>http://www.legislation.gov.uk/ukpga/2010/15/contents</u> Accessed 15/04/2015.



Figure 65: Percentage of the population with a long-term limiting health problem or disability by broad age group, 2011¹²⁸

The information provided by the Census has some limitations, it is based on selfreported health, it is not updated regularly and provides no information about the type of health problem or disability.

Individuals with disabilities may be entitled to claim Disability Living Allowance (DLA)¹²⁹, Attendance Allowance (AA)¹³⁰ or Personal Independence Payments (PIP)¹³¹. The purpose of these benefits is to contribute towards the extra cost of a health problem or disability, they can be claimed by those in employment as well as those without employment and in conjunction with other benefits. The number of people claiming these benefits is often used as a measure of disability as the information is regularly updated and can be broken down by condition. The data set will not reflect all of those with a disability, there will be people who feel they do not need financial help and therefore do not apply for these benefits.

¹²⁸ ONS, 2011 Census <u>https://www.nomisweb.co.uk</u>/ Accessed 16/09/2015.

¹²⁹ Disability Living Allowance can be claimed by a person who has a disability or health condition which requires them to have help with their personal care or have supervision needs, and/or those who have difficulty getting around provided they claim before the age of 65. Disability Living Allowance is being replaced by Personal Independent Payments for all people aged 16+.

¹³⁰ Attendance Allowance is available to people aged 65+ who develop a disability or health condition which requires them to have help with their personal care or have supervision needs, and/or those who have difficulty getting around.

¹³¹ Personal Independence Payments are replacing Disability Living Allowance for people aged 16-64. The transfer to Personal Independence Payments should be complete by late 2017.

There will also be people who apply but are not eligible because their disability is not considered severe enough.

Disability Living Allowance and Attendance Allowance cannot be claimed at the same time, this means it is possible to combine the counts of these benefits to estimate the total number of disabled people claiming a disability benefit. In February 2015 there were 6,520 people claiming Disability Living Allowance or Attendance Allowance in the Forest of Dean, representing 7.8% of the total population¹³², Figure 66 shows this was higher than the county, regional and national averages. The Forest of Dean also had a higher proportion of disability benefit claimants than all of the other districts in Gloucestershire.



Figure 66: Proportion of the population claiming Disability Living Allowance or Attendance Allowance, February 2015¹³³

Figure 67 shows the total number of disability benefit claimants in the Forest of Dean and Gloucestershire has being falling since 2013. This is primarily due to the introduction of Personal Independence Payment for new working age claimants, which began in April 2013.

¹³² DWP, Tabulation Tool – WPLS(100% of claimants) <u>http://tabulation-tool.dwp.gov.uk/100pc/tabtool.html</u> Accessed 07/10/2015.

¹³³ *Ibid.*



Figure 67: Five year trend in the number of Disability Living Allowance and Attendance Allowance Claimants in the Forest of Dean and Gloucestershire, 2010-2015¹³⁴ (Note: y-axis does not start at 0)

The characteristics of the Forest of Dean's Disability Living Allowance and Attendance Allowance claimants are illustrated in Figure 68. Females and people aged 65+ account for the largest proportion of disability benefit claimants, the majority of claimants have been long term claimants, with almost 70% claiming for over 5 years. These characteristics are reflected at a county, regional and national level.

¹³⁴ Ibid.



Figure 68: Profile of Disability Living Allowance and Attendance Allowance Claimants in the Forest of Dean, February 2015¹³⁵

There is some variation between age groups. Figure 69 shows that males are responsible for 57% of claims made by 0-17 year olds and 41% of claims made by people aged 65+. The variation between genders is however, less marked in the Forest of Dean than the other districts within Gloucestershire and the county as a whole.



Figure 69: Disability Living Allowance and Attendance Allowance Claimants by age and gender, February 2015¹³⁶

¹³⁵ Ibid.

Benefit data can be broken down by the main disabling condition of the claimant. Five percent of all claims are sampled, the percentages derived from this sample data are applied to the total number of disability benefits claims to create an estimated count of claims for each condition. Figure 70 shows that in February 2015, arthritis was the most commonly reported disabling condition in the Forest of Dean, representing almost a quarter of all claims and following the county and national trend. Learning difficulties was the second most common condition in the Forest of Dean, reported by almost 14% of claimants. This differs slightly from the picture at county level where mental health and "other conditions" accounted for a larger proportion of claimants.



Figure 70: Disability Living Allowance and Attendance Allowance Claimants by main disabling condition, February 2015¹³⁷

There are some differences in the conditions reported by Disability Living Allowance claimants and Attendance Allowance claimants. The following graph shows age related conditions such as arthritis, heart disease, stroke related and frailty all account for a significantly higher proportion of Attendance Allowance claimants than Disability Living Allowance claimants, reflecting the older nature of the claimants. Learning Difficulties account for just over 21% of Disability Living Allowance claimants, but no Attendance Allowance claimants. This is unsurprising as Attendance Allowance can only be claimed for conditions that

¹³⁶ Ibid.

¹³⁷ DWP, Tabulation Tool – 5% sample data <u>http://tabulation-tool.dwp.gov.uk/5pc/tabtool.html</u> Accessed 07/10/2015.

develop after the age of 65, and the nature of learning difficulties means they are usually diagnosed earlier in life.



Figure 71: Main disabling condition by type of disability benefit, February 2015¹³⁸

Personal Independence Payments are replacing Disability Living Allowance for the working age population. Since April 2013 new working age claimants have had to apply for Personal Independence Payments. Existing working age claimants of Disability Living Allowance will eventually be asked to claim Personal Independence Payments instead of Disability Living Allowance. This process is being introduced in stages and was due to start in the Forest of Dean in September 2015¹³⁹. Data about the numbers of Personal Independence Payments claimed in the Forest of Dean is experimental and is not comparable with data about Disability Living Allowance and Attendance Allowance. The latest data for July 2015 shows that in the Forest of Dean there were 562 people claiming Personal Independence Payments¹⁴⁰.Figure 72 shows the number of Personal Independence Payment claimants has been increasing month on month since April 2013.

¹³⁹ DWP, Introducing Personal Independence Payment

¹³⁸ Ibid.

https://www.gov.uk/government/policies/simplifying-the-welfare-system-and-making-sure-workpays/supporting-pages/introducing-personal-independence-payment Accessed 08/10/2015. ¹⁴⁰ DWP, Stat-Xplore https://stat-xplore.dwp.gov.uk/ Accessed 08/10/2015.



Figure 72: Number of Personal Independence Payment Claims in Payment, April 2013 to July 2015¹⁴¹

6.2.2 Children with Special Educational Needs

Census data and information about disability related benefit claimants provide an overall picture of the number of disabled people. Other sources of information provide us with a partial picture by focusing on particular age groups. The number of children with Special Educational Needs is often used as a proxy measure for children with disabilities. Special Educational Needs affect a child's ability to learn and can include; behavioral issues, learning difficulties physical disabilities. The definition of Special Educational Needs means it will not capture all disabilities, only those that affect a child's learning.

In 2013/14 there were 2,998 children and young people in maintained schools in the Forest of Dean with Special Educational Needs. Figure 73 shows this equates to 18.6% of pupils, which was higher than the county average and all of the other districts with Gloucestershire.

¹⁴¹ Ibid.



Figure 73: Percentage of pupils with Special Educational Needs by district of education, January 2014¹⁴²

Figure 74 shows the total number of pupils with Special Educational Needs in Forest of Dean schools has being falling since 2009/10, following a trend seen at county level. The decline was due to a fall in the number of children with School Action¹⁴³ or School Action Plus¹⁴⁴ level of need, while the number of children with Statements of Special Educational Needs¹⁴⁵ increased during the period, perhaps reflecting an increase in the severity of needs.

¹⁴² School Census, Jan 10-Jan 14.

¹⁴³ Pupils who require School Action usually have additional learning needs and should receive additional support from within the school, such as small group tuition.

¹⁴⁴ School Action Plus is used when School Action has not been able to help a child make adequate progress. Staff that work with Pupils requiring School Action Plus, should receive advice or support from outside specialists

¹⁴⁵ Statements of Special Educational Needs are given to those in need of the most intensive support.



Figure 74: Number of pupils on the Special Educational Needs Code of Practice, 2009/10 – 2013/14 ¹⁴⁶

Information about the primary need (or condition) is recorded for all pupils at School Action Plus or with a Statement of Special Educational Needs. Figure 75 shows that in 2013/14 the most common category of need in Forest of Dean schools was Speech, Language and Communication Needs, this reflects the picture at county level.

¹⁴⁶ School Census, Jan 10-Jan 14.


Figure 75: Percentage of pupils at School Action Plus or with Statements of SEN by primary need, January 2014¹⁴⁷

Figure 76 illustrates the trend in primary need over the last 5 years. The greatest change has been in the number of children with Severe Learning Difficulties, which increased by 28 children. The greatest increase (25 pupils) has been in the number of children with Behavioural, Emotional and Social Difficulties.



Figure 76: Number of pupils with Special Educational Needs by primary need, $2009/10 - 2013/14^{148}$

¹⁴⁷ Ibid.

For further information about children with Special Educational Needs please see our SEND needs analysis¹⁴⁹.

6.2.3 Adults with disabilities

The Projecting Adult Needs and Service Information (PANSI) and Projecting Older People Population Information (POPPI) provide current and future estimates of the number of adults with learning and physical disabilities.

In 2014 there was an estimated 5,455 people aged 18-64 with a severe or moderate physical disability living in the Forest of Dean¹⁵⁰ and an additional 3,402 people aged 65+ who are unable to manage at least one mobility activity on their own¹⁵¹.

Figure 77 shows the number of people with a moderate or serious physical disability is projected to decline slightly between 2014 and 2025. In contrast the number of people aged over 65 5 who are unable to manage at least one mobility activity on their own, is forecast to increase steeply during the period, from 3,402 in 2014 to 4,754 in 2025. This increase is likely to result in a noticeable increase in demand for health and social care services.

¹⁴⁸ *Ibid.* 149

¹⁵⁰ Projecting Adult Needs and Service Information (PANSI) <u>http://www.pansi.org.uk/</u> Accessed 07/05/2015.

¹⁵¹ Projecting Older People Population Information (POPPI) <u>http://www.poppi.org.uk/</u> Accessed 07/05/2015.



Figure 77: Projected number of people with moderate or serious physical disability (aged 18-64)¹⁵² or unable to manage at least one mobility activity on their own, 2014-2025¹⁵³

In 2014 there was an estimated 1,552 people aged 18+ with a learning disability living in Gloucestershire. Figure 78 shows the number of people aged 18+ with a learning disability is forecast to increase to 1,617 people by 2025, this represents an increase of 65 people or 4.2%.

¹⁵² Projecting Adult Needs and Service Information (PANSI) <u>http://www.pansi.org.uk/</u> Accessed 07/05/2015.

¹⁵³ Projecting Older People Population Information (POPPI) <u>http://www.poppi.org.uk/</u> Accessed 07/05/2015.



Figure 78: Projected number of people aged 18+ with a learning disability, 2014- 2025^{154}

6.2.4 Experiences and outcomes of people with disabilities

National research has shown people with disabilities are more likely to be at risk of poor outcomes than their peers. A report by the Office for Disability Issues shows that nationally people with disabilities are¹⁵⁵:

- More likely to live in poverty, 19% of individuals in families with at least one disabled member live in relative income poverty compared to 15% of individuals in families with no disabled member.
- More likely to experience unfair treatment at work than non-disabled people. In 2008, 19% of disabled people experienced unfair treatment at work compared to 13% of non-disabled people.
- More likely to be victims of crime than non-disabled people. This gap is largest amongst 16-34 year-olds where 39% of disabled people reported having been a victim of crime compared to 28% of non-disabled people.
- Less likely to live in households with access to the internet than nondisabled people. In 2011, 61% of disabled people lived in households with internet access, compared to 86% of non-disabled people

¹⁵⁴ Ibid.

¹⁵⁵ Department for Work and Pensions and Office for Disability Issues, Disability Facts and Figures <u>https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures</u> Accessed 07/05/2015.

Local data also shows people with disabilities are:

- Less likely to be in employment than non-disabled people. During the period April 2014-March 2015, 76.6% of working age disabled people were in employed in the Forest of Dean, compared to 81.5% of nondisabled people¹⁵⁶.
- Less likely to achieve 5 or more GCSE's grades A*-C. In Gloucestershire, in 2014 21.4% of pupils with SEN but without a statement and 8.1% of pupils with a statement of SEN achieved 5+GCSE A*-C grades including English and mathematics, this compares to 68.1% of pupils without SEN¹⁵⁷.
- Less likely to participate in sport. In Gloucestershire in 2012/13, 20.1% of people with a limiting illness or disability participated in sport at least once a week, compared to 39.8% of people without a limiting illness or disability¹⁵⁸.

However there is also evidence to suggest people with disabilities are increasingly achieving great things, and building better lives. Employment rates for disabled people in Gloucestershire are improving, children with Special Education Needs are achieving greater success at GCSE Level and participation of disabled people in sports is increasing¹⁵⁹.

6.3 Mental health

Unfortunately, very little mental health data is published at a district level, as it is generally recorded at an Upper Tier Local Authority or CCG level by organisations such as Public Health England and the HSCIC. The only available data at a district level is either heavily modelled from national estimates, or only gives very small and unreliable pieces of information around the highest levels of need, all of which would give an unrepresentative message on the levels of mental health need in each district. County and CCG level mental health data can be found on various Public Health England portals, which are available here:

http://fingertips.phe.org.uk/profile-group/mental-health

¹⁵⁸ Active People Survey, Sport England

http://archive.sportengland.org/research/active_people_survey/active_people_survey_7.aspx Accessed 30/04/2015.

¹⁵⁶ ONS, Annual Population Survey <u>https://www.nomisweb.co.uk</u> Accessed 07/08/2015.

¹⁵⁷ DfE SfR 50/2014.

¹⁵⁹ Strategic Needs Analysis Team, Children and young people (0-24) with Special Educational Needs and Disabilities (SEND) - Needs Analysis

<u>https://search3.openobjects.com/mediamanager/gloucs/glosfamilies/files/children_and_young_people_0-24_years_with_special_educational_needs_and_disabilities_-_needs_analysis_v1_0.pdf</u> Accessed 28/04/2015.

6.4 Long-term conditions

About 15 million people in England have a long-term condition ¹⁶⁰. Long-term conditions or chronic diseases are conditions for which there is currently no cure, and which are managed with drugs and other treatment.

Long-term conditions are more prevalent in older people (58 per cent of people over 60 compared to 14 per cent under 40) and in more deprived groups (people in the poorest social class have a 60 per cent higher prevalence than those in the richest social class and 30 per cent more severity of disease)¹⁶¹.

People with long-term conditions now account for about 50 per cent of all GP appointments, 64 per cent of all outpatient appointments and over 70 per cent of all inpatient bed days.

Treatment and care for people with long-term conditions is estimated to take up around £7 in every £10 of total health and social care expenditure¹⁶².

Projections for the future of long-term conditions are not straightforward. The Department of Health (based on self-reported health) estimates that the overall number of people with at least one long-term condition may remain relatively stable until 2018. However, analysis of individual conditions suggests that the numbers are growing, and the number of people with multiple long-term conditions appears to be rising.¹⁶³ ¹⁶⁴

 ¹⁶⁰ Department of Health (2012). Report. <u>Long-term conditions compendium of Information: 3rd edition</u>
¹⁶¹ *Ibid*.

¹⁶² Ibid.

¹⁶³ The Kings Fund <u>http://www.kingsfund.org.uk/time-to-think-differently/trends/disease-and-</u> <u>disability/long-term-conditions-multi-morbidity</u>

¹⁶⁴ Department of Health (2012). Report. Long-term conditions compendium of Information: 3rd edition

<u>Key</u>

Significantly higher than Gloucestershire average Not significantly different to Gloucestershire average Significantly lower than Gloucestershire average

	CCG			Gloucester	North	South	Stroud and	
Condition	prevalence	Cheltenham	Forest of Dean	City	Cotswold	Cotswold	Berkeley Vale	Tewkesbury
Hypertension	13.92%	12.82%	16.48%	13.25%	16.28%	14.57%	14.01%	14.17%
Asthma	6.49%	6.41%	7.33%	6.07%	6.60%	6.72%	6.81%	5.96%
Depression (18+)	6.24%	6.44%	8.29%	6.51%	5.00%	5.93%	5.58%	4.68%
Diabetes (17+)	6.12%	5.31%	7.35%	7.02%	6.06%	5.55%	5.70%	5.90%
Chronic Kidney Disease (18+)	6.01%	5.42%	7.39%	6.09%	6.23%	6.38%	6.06%	4.96%
Hypothyroidism	4.64%	4.36%	5.22%	4.60%	5.28%	5.06%	4.42%	4.46%
Coronary Heart Disease	3.19%	2.95%	3.84%	3.01%	3.78%	3.14%	3.30%	3.12%
Cancer	2.38%	2.40%	2.54%	1.94%	3.20%	2.60%	2.63%	2.23%
Atrial Fibrillation	1.87%	1.78%	2.09%	1.53%	2.61%	2.26%	1.95%	1.91%
Stroke	1.87%	1.79%	2.36%	1.64%	2.34%	1.94%	1.84%	1.97%
COPD	1.68%	1.69%	2.11%	1.64%	1.65%	1.61%	1.62%	1.52%
Epilepsy (18+)	0.86%	0.82%	1.01%	0.94%	0.76%	0.70%	0.80%	0.88%
Dementia	0.76%	0.78%	0.86%	0.65%	0.87%	0.83%	0.84%	0.64%
Mental Health	0.74%	0.86%	0.71%	0.77%	0.66%	0.53%	0.73%	0.57%
Heart Failure	0.69%	0.74%	0.92%	0.62%	0.61%	0.70%	0.69%	0.52%

Figure 79: Long term conditions. All data from 2013/14, aside from Chronic Kidney Disease which is 2012/13. Data not age standardised. Data is dependent on GPs diagnosing and recording conditions correctly.¹⁶⁵

For the majority of long term conditions (LTCs) recorded on QOF disease registers, Forest of Dean has a higher prevalence rate than for the county as a whole. QOF data is not age standardised, and as such the high prevalence of LTCs is likely to partly reflect the locality's fairly old age structure. However, there are likely to be additional causal factors as well as this. It should be noted that Forest of Dean is the only locality in the county that is above average for older people and also deprivation, so these two combined are likely to lead to higher rates of LTCs.

QOF registers only capture people who have been diagnosed by their GP as such they may not reflect the true level of need in the locality. It is also worth noting that this data is recorded at a GP level, it reflects which GP they attend, not necessarily where they live. The data is presented at GP Locality level rather than district, although they are largely the same. However, it should be noted here that only GPs in the southern half of the Forest of Dean district are included in the locality, as Newent and Staunton GPs are aligned with Tewkesbury locality.

The higher prevalence rates of LTCs in the district are likely to have implications for health and social care spend.

¹⁶⁵ PHE GP Profiles <u>http://fingertips.phe.org.uk/profile/general-</u> practice/data#mod,1,pyr,2014,pat,19,par,E38000062,are,-,sid1,3000008,ind1,273-4,sid2,-,ind2,-Accessed 02/07/2015

6.5 Dementia

There are 850,000 people estimated to be living with dementia in the UK¹⁶⁶ though recent research suggests that actual prevalence may be lower¹⁶⁷. The cost to the country has been estimated at £26.3 billion a year as shown in the following infographic.



Figure 80: National dementia costs¹⁶⁸

The Alzheimer's Society has produced a comprehensive report detailing the evidence of dementia need and costs¹⁶⁹.

 ¹⁶⁶ Alzheimer's Society, 2014, Dementia UK 2nd Edition, <u>http://www.alzheimers.org.uk/dementiauk</u>
¹⁶⁷ Yu-Tzu Wu *et al,* 2015, Dementia in western Europe: epidemiological evidence and implications for policy making, The Lancet, <u>http://www.thelancet.com/journals/lanneurol/article/PIIS1474-4422(15)00092-7/abstract</u>

¹⁶⁸ Alzheimer's Society, Dementia 2014 infographic, <u>http://www.alzheimers.org.uk/infographic</u>

¹⁶⁹ Alzheimer's Society



There are estimated to be almost 1,350 people aged 65 and over with dementia in Forest of Dean District and this is forecast to rise by almost three quarters to over 2,330 in 2030. Over 62% are women.

Figure 81: Predicted dementia prevalence by age in Forest of Dean¹⁷⁰.



Figure 82: Predicted number aged 65+ with dementia 2015-2025¹⁷¹

¹⁷⁰ POPPI, 2015

¹⁷¹ Ibid.

The main risk factors for dementia are type 2 diabetes, hypertension, midlife obesity, depression, low levels of physical activity and smoking

Using modeled GP practice data we can see where those with dementia are most likely to live.



Figure 83: Estimated dementia prevalence of Gloucestershire neighbourhoods

6.6 Service use profile – community based care

In 2014/15 1,819 people received community-based adult social care services in Forest of Dean District¹⁷². The rate per 100,000 population (see Figure 84 below) is the highest in the county. In the Forest of Dean, as elsewhere, there is a general trend for a reduced number of people receiving community-based services since 2013/14.

¹⁷² Gloucestershire County Council, 2015



Figure 84: Adults who received any community based support during the year per 100,000 2011/12 – 2014/15

6.7 Service use profile – residential and nursing care

Eventually many adults with social care needs have to move in to residential or nursing care. There were 328 adults in residential care and 184 in nursing care in Forest of Dean District in 2014/15. The following graph shows that the Forest of Dean has the highest rate of people in residential care in the county in recent years. For nursing care the Forest of Dean the rate in 2014/15 is close to the county average¹⁷³.



Figure 85: Adults in residential care during the year per 100,000 2010/11- $2013/14^{174}$



Figure 86: Adults in nursing care during the year per 100,000 2010/11-2013/14¹⁷⁵

¹⁷⁴ Ibid

It should be noted that for all types of ongoing care there is a general trend of reducing numbers of services locally, regionally and nationally. This is happening at a time when levels of need will be increasing as the population ages. This reduction in the numbers of people receiving such services can only be achieved by reducing the level of their needs through services such as reablement or telecare or their needs being met in the community.

6.8 Place of death

The national End of Life Care Strategy¹⁷⁶ sets out an ambition to provide all adults nearing the end of life, regardless of diagnosis, access to high quality care and to support more people to realise their choices and preferences for care. Survey data suggests that many people would, given the choice, prefer to die at home and few wish to die in hospital.

50.3% of Forest of Dean District residents who died between 2011/12 and 2014/15 did so in their usual place of residence. 'Usual place of residence' includes deaths that occurred at home, care home or religious establishment. Forest of Dean performs better in this regard than England (44.1%) and for Gloucestershire as a whole (50%). In 2014/15, of Forest of Dean residents who died, 27% died at home, 44% died in hospital, 25% died in a care home, 2% in a hospice and 2% in other places¹⁷⁷.



Figure 87: Deaths in usual place of residence 2011/12 – 2014/15

¹⁷⁵ Ibid.

¹⁷⁶ Department of Health,

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136431/End_of_life_str ategy.pdf, 2008

¹⁷⁷ National End of Life Care Intelligence Network, <u>http://www.endoflifecare-intelligence.org.uk/data_sources/place_of_death</u>, 18/11/2015

6.9 Key messages

- While overall health tends to be good, this is not true for everyone and for every part of the district. Some groups of individuals, such as those on lower incomes, people from certain ethnic groups and people with mental health problems, may experience poorer health outcomes.
- 19.6% of Forest of Dean residents (16,603 people) reported having a long term health problem or disability; this was above the county, regional and national averages.
- Analysis of disability living allowance and attendance allowance claimants show Forest of Dean had a higher proportion of disability benefit claimants (7.8% of total population) than the county, regional and national averages and higher than all the other districts in Gloucestershire.
- Arthritis was the most commonly reported disabling condition in the Forest of Dean, representing almost a quarter of all claims. This reflects the picture at county, regional and national level. However, learning difficulties was the second common condition with almost 14% of claimants a higher rate than elsewhere in the county.
- The total number of pupils with Special Educational Needs attending schools in Forest of Dean schools has been falling since 2009/10, following a trend seen at county level. During this period the number of people with the lowest level of need have declined, while those with higher levels of need have increased.
- The number of people with a moderate or serious physical disability is projected to decline slightly between 2014 and 2025. In contrast the number of people aged over 65 who are unable to manage at least one mobility activity on their own, is forecast to increase steeply.
- The number of people aged 18+ with a learning disability is forecast to increase to 1,617 people by 2025, this represents an increase of 65 people or 4.2%.
- For the majority of long term conditions (LTCs) Forest of Dean District has a higher prevalence rate than the county as a whole. It should be noted that it is the only District in the county that is above average for both the proportion of older people and for deprivation and the combination of these two factors is likely to lead to higher rates of LTCs.
- There are estimated to be over 1,350 people aged 65 and over with dementia in Forest of Dean District and this is forecast to rise by almost three quarters to over 2,330 in 2030.

- The rate per 100,000 of people receiving community-based adult social care services in the Forest of Dean is the highest in the county but like the rest of the county, numbs have declined since 2013/14.
- The Forest of Dean has the highest rate of people in residential care in the county in recent years. For nursing care the Forest of Dean is close to the county average.

7. Healthy and Sustainable Places and Communities

7.1 About this section

Local communities already play a huge role in meeting the needs of their members. This happens in many ways, such as formal voluntary groups, informal networks of friends or adults and children caring for their loved ones. As levels of need increase in a challenging and financial climate for the state sector the importance of the community contribution can only increase.

7.2 Community Assets

There is already a wealth of community activity taking place across Gloucestershire in neighbourhoods, villages through clubs, interest groups and community organisations. Some of these activities take place with the support and involvement of the public sector in the Forest of Dean District. Even more communities thrive through the enthusiasm and commitment of their own members and the creativity and drive of local people.

We recognise that there is a host of other community assets that meet people's needs across the district and we intend to develop an evidence base that much better captures both the extent of such assets and the value they provide to the community. Understanding the needs of the population and the performance of the services they use is useful but it is only part of the picture; a vital part of any needs assessment and commissioning process is hearing the voice of the people who live in the area. What people say about their needs and the services they use gives important information on how to improve the services being commissioned in a way that responds to the needs of the population.

It is also recognised that real, sustainable change, can only come from the local community itself by harnessing the energy, skill and commitments ('assets') of local people and that by understanding these assets we will be better placed to support communities.

The 'Call for Evidence' seeks to gather the views and opinions of Voluntary & Community Sector (VCS) organisations in Gloucestershire to better understand the needs of the people & communities that they serve. It also aims to collect evidence around community assets, which could include physical assets, community networks and much more.

The timeline and details about the 'Call for Evidence' are still to be determined but it will primarily focus on the five priorities set out in the Gloucestershire Health and Wellbeing Strategy and more information will be available on Inform Gloucestershire in due course.

7.3 Carers

The role of carers can often be complex with many also in full time employment or education as well as having to care for loved ones. This increased pressure in the life of a carer can lead to having a negative impact on the health and wellbeing of the carer (a recent survey found that 6 out of 10 carers had reached breaking point with a quarter of those requiring medical treatment as a result, 63% suffered from depression and 79% reported anxiety¹⁷⁸). Records of carers whose needs have been assessed by Gloucestershire County Council reveal that approximately 85% of carers are either the wife/husband/partner or son/daughter. Carers can be classified into 4 generalised groups;

- Parent carers combining caring for a child with special needs alongside other childcare responsibilities (estimated at 8% of total carers, locally this equates to an estimated 773 parent carers in Forest of Dean District)
- Sandwich Carers Combining looking after an older relative alongside childcare responsibilities (estimated at 3.5% of people aged 35-69 which, when equating this to Forest of Dean District's total 35-69 population, is an estimated 1,413).
- Caring for more than one person The Survey of Carers in Households estimates that up to 17% of carers care for more than one person¹⁷⁹ (Forest of Dean District estimate 1,644).
- Mutual Carers Examples are two older people living together, or a person with learning difficulties providing care for his/her parents.

A total of 9,668 people in Forest of Dean District provided unpaid care each week in 2011, representing 11.8% of the population. This number of unpaid carers in Forest of Dean District has risen by 13.5% since 2001 and is expected to rise by another 7% by 2017 due mainly to the increasing number of older people.¹⁸⁰

The ageing population is also likely to lead to a substantial increase in the number of mutual carers, generally older married couples looking after each other. The latest data from Projecting Older People Population Information (POPPI) supports this in regards to carers aged 65 and over. When applied locally to Forest of Dean District, projects a 9.7% increase of these carers in the next 4 years (see Figure 88). When compared against other districts in Gloucestershire, the increase in Forest of Dean District is projected to be the greatest proportional increase.

¹⁷⁸ <u>Carers At Breaking Point</u>, Carers UK: https://www.carersuk.org/for-professionals/policy/policylibrary/carers-at-breaking-point-report

¹⁷⁹ <u>Survey of Carers in Households 2009/10</u>: http://www.hscic.gov.uk/catalogue/PUB02200/surv-care-hous-eng-2009-2010-rep1.pdf

¹⁸⁰ ONS, 2011 Census and <u>Inform Gloucestershire Census Page</u>, "Unpaid Care" spreadsheet



Figure 88: People aged 65 and over providing unpaid care to a partner, family member or other person

Figure 89 is taken from the most comprehensive information produced regarding carers and shows the broad age breakdown of carers. This information comes from the Provision of Care data from the 2011 Census and shows the proportion of the total population that provide unpaid care. For both Forest of Dean District and Gloucestershire as a whole, the highest proportion of each broad age group is found in the 50 to 64 age column. It should also be noted that for each age band, Forest of Dean District has a greater share of the population with caring responsibilities when compared against the county as a whole.



Figure 89: Proportion of Forest of Dean District Population Who Are Carers ¹⁸¹

¹⁸¹ Provision of Unpaid Care (DC3301EW) –Census 2011

Young Carers are defined as children and young people under 25 years-old, who provide unpaid care for family members, friends, neighbours or others because of long-term physical or mental ill-health, disability or problems relating to old age.

Nationally there were 413,779 young carers which equates to around 2.5% of the age group ¹⁸². There were 555 young carers in Forest of Dean District (2.6% of total 0-24 population) ¹⁸³ at Census day in 2011.

Looking at all young carers in the Gloucestershire County Council care system during Quarter 2 2015/16, approximately every one in every six carers in Gloucestershire come from Forest of Dean District.



Figure 90: Proportion of Young Carers by District/Borough¹⁸⁴

Unpaid care relieves pressures on health and social services but adequate state support for these carers is essential to avoid someone who is a carer ending up having to be cared for also. Data capture must be improved locally and nationally (currently mainly available in "projections" except for the ten yearly population census which gives the most comprehensive data available to analyse although this is now 4 years old) in order to understand the true nature and scale of caring and how best to support this group in society. The report published by Carers UK in September 2014 states that "Carers save the economy an estimated £119 billion per year with the unpaid care they provide, an average of £18,473 per carer" - what with shrinking funding available to public services to help support

¹⁸² Census 2011 (table KS301EW), <u>http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-286262</u>

¹⁸³ Provision of Unpaid Care (DC3301EW) –Census 2011

¹⁸⁴ Gloucestershire County Council - Challenge and Performance Team

carers this estimated saving to the economy will be less and the pressures and costs to public services will increase.

The views of over 500 carers whose needs had been assessed by or on behalf of Gloucestershire County Council were captured in the 2014/15 carers survey¹⁸⁵. Five measures in the Adult Social Care Outcome Framework (ASCOF) are derived from this survey (Table 34). The following table shows that performance has declined since the last survey. This at least partially reflects the trend nationally. Work is ongoing to understand what underlies these outcomes.

	Gloucestershire	
ASCOF measure	2012-13	2014-15
ASCOF 1D Carer Reported Quality of Life score (composite of responses to 6 survey questions)	7.70	7.40
ASCOF 1I :Proportion of people who use services and their carers who reported that they had as much social contact as they would like	31.3%	26.8%
ASCOF 3B Overall Satisfaction of Carers with Social Services	46.1%	38.5%
ASCOF 3C The proportion of carers who report that they have been included or consulted in discussions about the person they care for	69.6%	68.1%
ASCOF 3D The proportion of people who use services and carers who find it easy to find information about services	71.9%	64.6%

Table 34: Carers survey – ASCOF measures

7.4 Volunteering

Volunteers play a huge role in meeting the needs of people in the Forest of Dean. Nationally in 2013/14 48% of people volunteered in some way at least once a month and 74% at least once a year¹⁸⁶.

The County Council's Strategic Needs Analysis Team has recently started work on developing a better understanding of where volunteers live at a local level, using customer segmentation data. Figure 91 uses this information to show the likelihood of residents having a hobby of charity/voluntary work. It shows that in most areas in the Forest of Dean the likelihood of having a hobby of charity/voluntary work is higher than the national average. Those areas where people are least likely to have a hobby of charity/voluntary work include parts of Cinderford, Coleford, Lydney.

¹⁸⁵ NASCIS, 2015, <u>https://nascis.hscic.gov.uk/</u>

¹⁸⁶ Community Life Survey England 2013-14, Cabinet Office, 2014.



Figure 91: Likelihood of having a hobby of charity/voluntary work¹⁸⁷

¹⁸⁷ Acorn, CACI.

7.5 Culture and Leisure

There is a wide and varied choice of cultural and leisure activities in the Forest of Dean that improve the health and wellbeing of its residents whilst bringing in tourists which in turn bolsters the economy. Tourism and the visitor economy make an essential contribution to the economic and social wellbeing of local people, businesses, and the environment.

In 2011 tourism industries¹⁸⁸ contributed £0.71 billion to Gloucestershire's economy, which represents around 5.77% of the county's total output; this was slightly lower than the national average of 6.25%¹⁸⁹. This data is not available at district level, however there is other information that will help us develop some understanding of tourism in the Forest of Dean.

An important aspect of tourism is accommodation; in 2013 6.6% of all tourism related businesses in England were accommodation businesses¹⁹⁰. Visit England, the country's national tourist board, has also recognised that maintaining and enhancing the supply of accommodation for visitors is one of the key elements required in order for the tourism industry to expand¹⁹¹.

In 2012 there were 186 accommodation businesses in the Forest of Dean. Figure 92 shows this was the second highest in the county. The makeup of accommodation businesses differs between areas, with the graph showing in the Forest of Dean serviced or self-catering accommodation account for the majority of businesses, while in Cheltenham accommodation businesses are primarily serviced accommodation such as hotels.

¹⁸⁸ This includes transport activities, accommodation for visitors, travel agencies, food and beverage serving activities, transport equipment rental, sporting and recreational activities, and cultural activities.

¹⁸⁹ T-Stats-Summary Report <u>http://www.t-stats-uk.co.uk/visitengland/SummaryReport.aspx</u> Accessed 14/12/2015.

¹⁹⁰ Ibid.

¹⁹¹ England – a strategic framework for tourism 2010-2020 <u>http://www.visitengland.org/Images/Strategic%20Framework%20main%20document_tcm30-33240.pdf</u> Accessed 14/12/2015



Figure 92: Number of accommodation businesses, 2012¹⁹²

At a national level domestic tourism accounts for the largest share of total visitor economy spending¹⁹³. Domestic tourism takes two forms, day trips and domestic overnight stays. In the three year period 2011-2013, there were an estimated 1,310,000 day trips to the Forest of Dean bringing in around £26 million. Figure 93 shows the number of day trips to the Forest of Dean was lower than all districts with the exception of Tewkesbury, while visitors spend was at its lowest in the district.

¹⁹² T-Stats-Summary Report <u>http://www.t-stats-uk.co.uk/visitengland/SummaryReport.aspx</u> Accessed 14/12/2015.

¹⁹³ Government Tourism Policy

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/78416/Government2_T ourism_Policy_2011.pdf Accessed 14/12/2015.



Figure 93: Number of day visits and visitors spend, 2011-2013¹⁹⁴

In the three year period 2011-2013 there were an estimated 183,000 domestic overnight visits to Cheltenham, this contributed around £32 million to the economy. Figure 94 shows the number of domestic overnight visits to the Forest of Dean was lower than all districts with the exception of Tewkesbury, while visitors spend was the fourth highest in the county, below Cheltenham, Cotswold and Gloucester.



Figure 94: Number of domestic overnight visit and visitors spend, 2011-2013¹⁹⁵

¹⁹⁴ T-Stats-Summary Report <u>http://www.t-stats-uk.co.uk/visitengland/SummaryReport.aspx</u> Accessed 14/12/2015.

While domestic tourism accounts for the largest share of total visitor economy spending, trips by overseas visitors play an important role and are a priority for the UK government. This is because a proportion of the spend on domestic tourism would have happened anyway if the visitors had simply stayed at home - whereas foreign visitor spending adds 100p in every pound to the UK's GDP. Information about overseas visitors is recorded for some towns or cities, there is unfortunately no information about overseas tourism in towns in the Forest of Dean. This does not mean overseas tourism does not contribute to the Forest of Dean's economy, but that the data does not capture its contribution.

7.6 Transport

Suitable public and community transport can play a key role in reducing social isolation and making all that a community has to offer accessible to those who need it most. Work is just starting on mapping transport usage against need to better understand the effectiveness of transport services in meeting community needs. The following map (Figure 95) shows the variation in accessibility by public transport of key services such as post offices, supermarkets, libraries, schools and GPs across the county



Figure 95: Overall Accessibility by Public Transport to Key Facilities

The MAIDeN accessibility toolkit 2014196 both provides accessibility maps and allows interactive production of accessibility reports that can be based on individual postcodes. The second map in this section (*Figure 96*) focuses solely on GP access if using public transport.

¹⁹⁶ http://www.maiden.gov.uk/mapsAccess.asp



Figure 96: Accessibility to GP Surgeries by Public Transport The key facilities covered by the bi-annual MAIDeN Accessibility Matrix are:

- Post Offices
- Supermarkets
- Libraries
- Primary Schools
- Secondary Schools
- Children Centres
- GPs
- Pharmacies
- Emergency Departments (A&E) and Minor Illness/Injury Units (MIIUs)

7.7 Housing

Housing provision has a direct impact on health, educational achievement, economic prosperity and community safety - all of which are important to the success and wellbeing of communities within the Forest of Dean.

7.7.1 Housing supply and type

In 2011 there were 34,167 households in the Forest of Dean, this represents an increase of 5.0% or 1,637 households since 2001^{197} . The number of households in the Forest of Dean is projected to increase by 1,000 between 2012 and 2017 (2.9%) and by 5,000 between 2012 and 2037 (14.3%)¹⁹⁸.

Figure 97 shows at the time of the 2011 Census, detached housing accounted for the largest proportion of housing in the Forest of Dean. Detached and semidetached houses accounts for a larger proportion of households in the Forest of Dean than Gloucestershire as a whole, conversely terraced houses and flats, maisonettes or apartments account for a smaller proportion.



Figure 97: Housing type by district, 2011¹⁹⁹

In recent years much of the growth in housing in the Forest of Dean has been in detached and semi-detached properties with an increase of 928 between 2001

¹⁹⁷ ONS, 2011 and 2001 Census, <u>https://www.nomisweb.co.uk/</u> Accessed 21/10/2015.

¹⁹⁸ DCLG, Household projections for England and local authority districts – 2012 based,

https://www.gov.uk/government/statistical-data-sets/live-tables-on-household-projections Accessed 21/10/2015

¹⁹⁹ ONS, 2011 Census, <u>https://www.nomisweb.co.uk/</u> Accessed 21/10/2015.

and 2011, this represents 56.6% of all household growth. At county level detached and semi-detached properties make up a significantly smaller proportion of growth at $47.0\%^{200}$.

In 2011 the majority of households in the Forest of Dean were owner occupied, with Figure 98 showing they accounted for 74.3% of all households, this was higher than the South West, England, Gloucestershire and the other districts that make up the county. Levels of private renting were noticeably lower in the Forest of Dean than the county, regional and national average.



Figure 98: Housing by tenure, 2011²⁰¹

Over the last 10 years the proportion of owner occupied households in the Forest of Dean declined from 76.2% in 2001 to 74.3% in 2011. During the same period the proportion of households that were privately rented increased from 7.0% to $11.2\%^{202}$. A similar trend was observed at county, regional and national level and reflects the difficulties facing first time buyers and the increase of the buy to let market.

Social rented housing is let at low rents on a secure basis to those who are most in need or struggling with their housing costs. It includes properties rented from the local authority, housing associations and socially registered landlords. Figure 98 shows that in the Forest of Dean, socially rented housing accounts for 12.4% of all households, which was below the county, regional and national average.

²⁰⁰ ONS, 2011 and 2001 Census, <u>https://www.nomisweb.co.uk/</u> Accessed 21/10/2015.

²⁰¹ ONS, 2011 Census, <u>https://www.nomisweb.co.uk/</u> Accessed 21/10/2015.

²⁰² ONS, 2011 and 2001 Census, <u>https://www.nomisweb.co.uk/</u> Accessed 21/10/2015.

Most of the socially rented properties in Gloucestershire are let through Gloucestershire Homeseeker the county's choice based lettings scheme. Applicants are awarded priority for housing based on their level of housing need, taking into account criteria such as overcrowding, homelessness, or medical or welfare needs. Data from October 2015 shows that in the Forest of Dean there were 2,638 active applications²⁰³ for social housing using the Homeseeker scheme²⁰⁴. Figure 99 provides a breakdown of active applications by priority need, it shows that in the Forest of Dean the majority of applications (63%) were classified as bronze need, which is the lowest level of need, while 3% of applicants had the highest level of need, emergency need²⁰⁵.



Figure 99: Active applications to Gloucestershire Homeseeker by priority band, October 2015²⁰⁶

In order to allocate homeseekers to a priority band, applicants are asked about their circumstances, including whether they believe their current housing conditions make health conditions or social problems worse. Figure 100 shows that in the Forest of Dean the majority of active applicants to Gloucestershire Homeseeker do not believe their current housing conditions make health conditions or social/welfare problems worse. The most common condition thought to be made worse by current housing situations is the broad category of medical conditions, affecting almost 400 active applicants. This information is

²⁰³ Active Applications are those who have had their application form checked and are ready to bid for properties

²⁰⁴ Gloucestershire Homeseeker

²⁰⁵ For information about the criteria used to determine band of need please see <u>https://www.gloshomeseeker.co.uk/Data/Pub/StreamTemp/usiaipmu.pdf</u>

²⁰⁶ Gloucestershire Homeseeker

based on self-definition by applicants, this is checked at a later stage before homes are allocated.



Figure 100: Active applications to Gloucestershire Homeseeker who believe their current housing situations make the following conditions/problems worse²⁰⁷

7.7.2 House prices and affordability

The cost of housing can have a significant impact on an individual's health and wellbeing, with a report by Shelter stating that nearly one quarter of households in Great Britain are suffering from stress and depression due to their housing costs²⁰⁸.

In the second quarter of 2013, the mean house price in the Forest of Dean was £193,543, Figure 101 shows this was lower than the county and national average and all of the other districts in Gloucestershire with the exception of Gloucester.

²⁰⁷ Ibid.

²⁰⁸ Shelter, Breaking Point – How unaffordable housing is pushing us to the limit, <u>https://england.shelter.org.uk/___data/assets/pdf_file/0009/86787/Breaking_Point.pdf</u> Accessed 21/10/2015.



Figure 101: Mean house price, Quarter 2 2013²⁰⁹

Housing affordability is not determined purely by house prices, average incomes also play a part. The most common indicator of housing affordability is the ratio between lower quartile incomes and lower quartile house prices. This allows an assessment of whether people with the lowest incomes can afford the cheapest housing.

Figure 102 shows that in 2013, someone earning a lower quartile sum in the Forest of Dean, required 7.14 times their earnings to purchase a lower quartile priced property. This is higher than England average of 6.45 and in line with the Gloucestershire average of 7.23.

Given that the Bank of England²¹⁰ has placed restrictions on mortgages that are more than 4.5 times an individual's salary, the Forest of Dean's income to house price ratio, may make it difficult for first time buyers to get on the property market which in turn may result in the out migration of young people.

²⁰⁹ DCLG, Table 581 Housing market: mean house prices based on Land Registry data, by district, from 1996 (quarterly) <u>https://www.gov.uk/government/statistical-data-sets/live-tables-on-housing-market-and-house-prices</u> Accessed 25/10/2015

²¹⁰ This is money, Risky mortgages of more than 4.5 times income to be limited as Bank acts to prevent a damaging house price bubble <u>http://www.thisismoney.co.uk/money/article-2670424/Bank-England-set-announce-stricter-mortgage-rules-cool-overheating-housing-market.html#ixzz3Thb7aTVt Accessed 05/10/2015</u>





7.7.3 Housing conditions

Poor housing conditions including cold, damp and mouldy housing, overcrowding and temporary accommodation can have a negative effect on health and wellbeing²¹².

Living in overcrowded housing has implications for mental and physical health. The effects of living in overcrowded conditions are perhaps most keenly felt by children, it is estimated that children growing up in difficult housing conditions are 25% more likely to suffer severe ill health and disability during childhood/early adulthood. Overcrowding can also impact negatively on a child's educational and emotional development, a lack of space to study, for example, can lead to academic underachievement and strained family relations which can lead to feelings of isolation and unhappiness²¹³.

The Census provides a measure of whether a household's accommodation is overcrowded or under occupied, based on the number of rooms/bedrooms in a household's accommodation, the ages of the household members and their

²¹² The Marmot Review – Fair society Healthy Lives

²¹¹ DCLG, Table 576 Ratio of lower quartile house price to lower quartile earnings by district, from 1997 <u>https://www.gov.uk/government/statistical-data-sets/live-tables-on-housing-market-and-house-prices</u> Accessed 25/10/2015

http://www.instituteofhealthequity.org/Content/FileManager/pdf/fairsocietyhealthylives.pdf Accessed 04/11/2015

relationships to each other. Figure 103 shows at the time of the 2011 Census 3.8% of households in the Forest of Dean (1,306 households) had fewer rooms than the standard requirement and are therefore overcrowded, this was lower than the county and national average. There was a 0.3 percentage point increase in households that were overcrowded in terms of rooms since 2001 (170 households), this compares to a 1.0 percentage point increase for Gloucestershire. The percentage of households that were overcrowded in terms of stood at 2.3% in 2011 (774 households) this was lower than the county average of 2.7%.



Figure 103: Percentage of households that are overcrowded in terms of rooms and bedrooms, 2011²¹⁴

Fuel poverty is a complex issue which arises from a combination of factors including housing in poor condition; low household income; poor energy efficiency performance of the property; and high fuel costs. Fuel poverty often results in cold and damp homes, which contribute to ill health and increases in excess winter deaths²¹⁵. A household is considered to be in fuel poverty if their

²¹⁴ ONS, 2011 Census, <u>https://www.nomisweb.co.uk/</u> Accessed 04/11/2015.
²¹⁵ The Marmot Review – Fair society Healthy Lives

http://www.instituteofhealthequity.org/Content/FileManager/pdf/fairsocietyhealthylives.pdf Accessed 04/11/2015

income is below the official poverty line and their fuel bills are higher than that of the national median²¹⁶.

In 2013 an estimated 4,181 households in the Forest of Dean were in fuel poverty representing 11.6 % of all households, this compares to 10.7% of households in Gloucestershire and 10.4% of households nationally²¹⁷.

Gloucestershire's Warm and Well scheme aims to improve energy efficiency in the home and reduce the risk of fuel poverty by; raising public awareness; providing advice to householders and making referrals for grants and discounts. Between 2011/12 and 2014/15 844 measures were installed in properties in the Forest of Dean to improve energy efficiency. Figure 104 breaks down the measures installed in the latest period (2014/15) by type. It shows that the most common type of measure installed in the Forest of Dean and most other areas in the County was cavity wall insulation. Other measures installed in the Forest of Dean include loft insulation, heating work and solar pv.



Figure 104: Breakdown of measures installed as a result of the Warm and Well scheme by type, 2014/15²¹⁸

²¹⁶ DECC, Annual Fuel Poverty Statistics Report 2014,

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/319280/Fuel_Poverty_ Report_Final.pdf Accessed 04/11/2015

²¹⁷DECC, 2013 Sub- regional fuel poverty data, <u>https://www.gov.uk/government/statistics/2013-sub-</u> regional-fuel-poverty-data-low-income-high-costs-indicator Accessed 04/11/2015

²¹⁸ Severn Wye Energy, Warm and Well End of Year Reports, 2011/12,2012/13,2013/14 and 2014/15.

The Housing Health and Safety Rating System (HHSRS) is a system for assessing the overall health and safety risks in dwellings and was introduced under the Housing Act 2004. This system enables a differentiation between minor hazards and Category 1 hazards where the most serious harm outcome is identified, for example, death, permanent paralysis, permanent loss of consciousness, and loss of a limb or serious fractures.

Local authority districts have a duty to consider the condition of private sector housing. Forest of Dean District Council commissioned a study to estimate the presence of hazards which may affect the health of occupiers and visitors to dwellings. The study found there were an estimated 12,900 Category 1 hazards present in properties in the Forest of Dean²¹⁹.

Figure 105 shows the type of Category 1 hazards estimated to be present in properties in the Forest of Dean, the most common Category 1 hazards are excess cold, followed by falling on stairs.



Figure 105: Type of Category 1 hazards 220

As part of a strategy to improve the health, safety and wellbeing of residents in private sector housing, Gloucestershire's district councils have developed a consistent approach to model the extent of the public health costs arising from five of the most common Category 1 hazards. The following table shows that if the hazards identified in the Forest of Dean were addressed it would result in an

²¹⁹ BRE, A health impact assessment of the cost of private sector housing and prospective housing interventions in the Forest of Dean.

²²⁰ Ibid.
annual saving to the NHS of £1.2 million if they were addressed at a county level it would result in savings of £4.6 million.

	Hazards for Forest of Dean			Hazards for Gloucestershire		
	No. of Hazards	Cost to NHS (£)	Savings to NHS (£)	No. of Hazards	Cost to NHS (£)	Savings to NHS (£)
Excess Cold	4,310	409,019	368,074	20,344	1,930,645	1,737,377
Damp & Mould	590	144,491	144,007	1,478	361,962	360,750
Falls on level	1,540	225,256	202,710	5,664	828,473	745,552
Falls on stairs	3,600	392,472	365,328	15,547	1,694,933	1,577,709
Falls between levels	860	66,848	66,478	2912	226,349	225,097
TOTAL	10,900	£1,238,086	£1,146,597	45,945	£5,042,362	£4,646,485

Table 35: Cost to the NHS of the most common Category 1 hazards, Forest ofDean and Gloucestershire

Gloucestershire's district councils are working to remove Category 1 hazards, through a combination of advice, grants, loans, enforcement and through the Warm & Well Scheme, this activity relates to owner occupied, privately rented and socially rented dwellings. Table 36 shows that between 2011/12 and 2014/15 390 Category 1 hazards have been removed from homes in the Forest of Dean.

	2011/12	2012/13	2013/14	2014/15	2011/12- 2014/15
Cheltenham	214	276	191	153	834
Cotswold	132	84	121	54	391
Forest of Dean	137	174	52	27	390
Gloucester	114	175	245	52	586
Stroud	193	204	57	54	508
Tewkesbury	123	95	46	23	287
Gloucestershire	913	1008	712	363	2,859

Table 36: Category 1 hazards removed from Gloucestershire Homes²²²

²²¹ Gloucestershire Local Authority Districts ,Improving Homes and Improving Health and supporting evidence

²²² Data sourced from District Councils, by Stroud District Council

7.7.4 Additional needs

Housing needs change for people as their circumstances change, especially as people age or become more vulnerable. The Local Housing Authority has a mandatory duty to provide Disabled Facilities Grants²²³ for housing adaptations to help disabled people to live independently. When delivered early, alongside other preventative measures, they may contribute to preventing admissions to hospital and residential care. With an increasingly elderly populations, and more disabled children surviving their early years through to adulthood, the need for adapted housing is projected to continue to increase, but most new-build homes are still not designed to meet the needs of disabled people, meaning the grants play an important role in ensuring housing is suitable for those who have additional needs²²⁴.

Table 37 shows the number of Disabled Facilities Grants completed between 2012/13 and 2014/15. In 2014/15 there were 125 grants completed in the Forest of Dean to the value of £502,624. The number of grants completed in the Forest of Dean has increased year on year, while the costs peaked in 2013/14 before falling in 2014/15, this reflects the pattern seen at county level.

	2012/13		2013/14		2014/15	
	No. grants Completed	Total Cost Completed Grants	No. grants Completed	Total Cost Completed Grants	No. grants Completed	Total Cost Completed Grants
Cheltenham	68	£511,216	76	£595,564	64	£514,230
Cotswold	151	£872,830	150	£775,250	93	£605,191
Forest of Dean	94	£408,887	103	£584,470	125	£502,624
Gloucester	88	£500,857	81	£665,260	66	£408,680
Stroud ²²⁶	36	£247,066	31	£199,983	32	£212,029
Tewkesbury	101	£674,509	117	£676,577	132	£772,409
Gloucestershire	319	£1,831,319	332	£2,126,290	355	£1,895,742

Table 37: Disabled Facilities Grants Completed in Financial Year in
Gloucestershire ²²⁵

²²³ Disabled Facilities Grants eligible works are major works which are currently defined as adaptations costing over £1,000, with the maximum grant which can be paid being £30,000. The works for which Disabled Facilities Grants is to be given are detailed within statutory guidance but relate mainly to major works of adaptation to a disabled persons home to enable access and personal care needs. The applicant of the grant is subject to a statutory means test however, there is no means test for adaptations for children.

Disabled persons meeting the legislative criteria are entitled to apply for DFG funding regardless of the type of tenancy they occupy be it owner occupation, private letting or social housing.

²²⁴ Astral Advisory, Disabled Facilities Grants in England: A research report, 2013

²²⁵ Data sourced from District Councils, by Stroud District Council

²²⁶ Stroud District Council is the only district council in Gloucestershire who still own and manage their own stock. Adaptations to Council stock are carried out by SDC and not through the DFG process and are not therefore included in the DFG figures above

7.7.5 Homelessness

Homelessness is a complex problem. It is both the cause and consequence of many other problems, such as family and relationship breakdown, domestic violence, mental health, substance misuse, the loss of employment and debt.

The impact of homelessness on health can be stark; with Crisis reporting the difference in life expectancy for a homeless person compared to someone who is not homeless is 30 years, at an expected age of mortality of 47 for a rough sleeping homeless person²²⁷.

Homeless people can be categorised into three main groups:

- Single homelessness: This group include rough sleepers and those living in hostels, shelters and temporary supported accommodation
- Hidden homelessness/ at risk of homelessness: This group is difficult to quantify. Many hidden homeless are 'sofa-surfers', residing temporarily with family or friends
- Statutory homelessness: This group refers to people who meet specific criteria set out in legislation. Broadly speaking, somebody is statutorily homeless if they are unintentionally homeless, fall within a specified priority need group and do not have accommodation that they have a legal right to occupy, which is accessible and physically available to them and which it would be reasonable for them to continue to live in. It would not be reasonable for someone to continue to live in their home, for example, if that was likely to lead to violence against them (or a member of their family.

Local authorities have a duty to secure suitable accommodation for the statutory homeless, this is referred to as acceptances²²⁸.

In 2014/15 13 people were accepted as homeless in the Forest of Dean, this equates to a rate of 0.37 per 1,000 population, which Figure 106 shows is lower than the national average of 2.4 per 1,000 population.

 ²²⁷ Crisis, Homelessness kills: An analysis of the mortality of homeless people in early twenty-first century England <u>http://www.crisis.org.uk/publications-search.php?fullitem=371</u> Accessed 06/11/2015
²²⁸ DCLG, Statutory Homelessness: April to June Quarter 2015 England, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/463017/201506_Statut ory Homelessness.pdf Accessed 09/11/2015.



Figure 106: Number accepted as being homeless and in priority need per 1,000 households, 2014/15²²⁹

Figure 107 shows that over the last 10 years the number of acceptances per 1,000 households in the Forest of Dean has fallen from 3.1 per 1,000 households in 2004/5, this reflects the national trend as councils have become a lot more successful at preventing homelessness.

²²⁹ DCLG, Table 784: local authorities' action under the homelessness provisions of the Housing Acts, financial years 2004/05 to 2014/15, <u>https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness Accessed 09/11/2015</u>.



Figure 107: Number accepted as being homeless and in priority need per 1,000 households, 2004/5 – 2014/15²³⁰

It is not possible to determine the reason for homelessness within the Forest of Dean from nationally published data. However local information suggests the most common reason people were accepted as homeless was because their private rented Assured Shorthold Tenancies had been brought to an end. This reflects the situation at national level where the most common reason for acceptances was because their private rented Assured Shorthold Tenancies had been brought to an end (29.8% of acceptances) followed by parents no longer willing to accommodate (15.6% of acceptances)²³¹.

Not every household who approaches the local authority as homeless is accepted as homeless. Some may get advice and assistance which means they can avoid becoming homeless; others simply do not meet the statutory definition of homelessness.

Table 38 shows that in 2014/15 27 approaches were made to Forest of Dean District Council by people who are eligible but not homeless.

²³⁰ Ibid.

²³¹ DCLG, Detailed local authority level homelessness figures: April to June 2015,there 27 <u>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/463076/Detailed_LA_L</u> <u>evel_Tables_201506.xlsx</u> Accessed 10/11/2015.

	Eligible, homeless and in priority need, but intentionally	Eligible, homeless but not in priority need	Eligible, but not homeless
Cheltenham	-	-	221
Cotswold	13	64	45
Forest of Dean	-	-	27
Gloucester	38	36	248
Stroud	-	-	32
Tewkesbury	-	-	28
England	8,990	20,420	28,510

Table 38: Number of households that have approached local authorities as homeless, but have not been accepted, 2014-2015

Under the Homelessness Act 2002, local housing authorities must have a strategy for preventing homelessness in their district. The strategy must apply to everyone at risk of homelessness, including cases where someone is found to be homeless but not in priority need and cases where someone is found to be intentionally homeless. Under the strategy local housing authorities must provide:

- homelessness prevention, which involves providing people with the ways and means to address their housing and other needs to avoid homelessness. This is done by either assisting them to obtain alternative accommodation or enabling them to remain in their existing home.
- homelessness relief occurs when an authority has been unable to prevent homelessness but helps someone to secure accommodation, even though the authority is under no statutory obligation to do so.

In 2014/15 there were 214 instances of homelessness prevention and relief in the Forest of Dean, this equates to a rate of 6.10 per 1,000 households, which Figure 108 shows was lower than the national average of 9.72.



Figure 108: Number of cases of homelessness prevention or relief, per 1,000 households, 2014/15²³²

In the Forest of Dean the majority of homelessness prevention and relief (60.30%) focused on assisting people to find alternative accommodation. This reflects the picture seen in other districts; while nationally the most common type of homelessness prevention and relief entailed helping people remain in their existing homes.

²³² DCLG, Table 792: total reported cases of homelessness prevention and relief by outcome and local authority, 2009-10 to 2014-15,

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/443451/Live_Table_79 2_Homelessness_Prevention_and_Relief.xls Accessed 10/11/2015. Stroud figures have been revised at the recommendation of Stroud District Council, so will differ from those found in the official publication.



Figure 109: Types of homelessness prevention and relief, 2014/15²³³

7.8 Education

For information about education please see section 3.6.7

7.9 Unemployment

For information about unemployment please see section 3.6.6

7.10 Community Safety

Community safety is about helping communities to be and feel safe. Road safety, trading standards, fire and rescue, regulating licensed premises, producing and implementing partnership strategies for anti-social behaviour (ASB) and domestic abuse, and reducing criminal activities by installing "guardians" such as CCTV or alley gating are just some examples of community safety.

7.10.1 Police Recorded Crime and ASB Incident Rates

Police recorded crime rates provide a consistent way of comparing crime trends over time and also indicate police workload. The following section will cover total recorded crime rates and anti-social behaviour incident rates by local authority ward - how these rates compare against county, regional and national rates and

²³³ Ibid.



the trend over time. More data on crime and incident rates can be found on Inform Gloucestershire²³⁴.

Figure 110: Total Crime Rates over Time by Local Authority Ward

Forest of Dean District has experienced crime rates much lower than the overall rates for England and Wales, South West region and Gloucestershire County since 2003/04. Crime rates are between regional and national rates in Coleford Central ward mainly due to part of the town centre being inside the boundary of that ward²³⁵ – crime rates for wards are shown in the table to the left of the map (Figure 110). The wards of Cinderford East, Oxenhall and Newent, Lydney East, Alvington/Aylburton/West Lydney, Cinderford West and Newent Central are also above the Forest of Dean district rate for 2014/15.

²³⁴ <u>http://www.gloucestershire.gov.uk/inform/communitysafety</u>

²³⁵ Boundary map shows administrative (e.g. ward) boundaries at street view level: <u>http://www.maiden.gov.uk/InstantAtlas/BoundaryViewer/atlas.html</u>



Figure 111: Total ASB Incident Rates over Time by Local Authority Ward

Figure 111 shows police recorded anti-social behaviour (ASB) incident rates over the last 8 years. As found in Figure 110, Coleford Central ward has the highest rate of any ward in the district and has a higher ASB incident rate in 2014/15 than the rate for Gloucester City.

7.10.2 Road Safety

Road Safety is a statutory duty for every local authority. To deliver the best results in reducing road traffic collisions it is essential to adopt partnership working. This is indeed the case for Gloucestershire's Road Safety Partnership which incorporates the County Council, Gloucestershire Highways, Police and

the Fire and Rescue Service. The following two charts show yearly totals (calendar years) for Road Traffic Collisions in the district²³⁶.



Figure 112: Number of Casualties Killed or Seriously Injured²³⁷ by RTCs in Forest of Dean District by Calendar Year



Figure 113: Number of Casualties with Slight²³⁸ injuries from RTCs in Forest of Dean District by Calendar Year

²³⁶ Data provided by Gloucestershire Road Safety Partnership. For more information on Road Safety go to: <u>http://roadsafety-gloucestershire.org.uk/data/</u>

²³⁷ Serious injury: An injury for which a person is detained in hospital as an "in-patient", or any of the following injuries whether or not they are detained in hospital: fractures, concussion, internal injuries, crushings, burns (excluding friction burns), severe cuts, severe general shock requiring medical treatment and injuries causing death 30 or more days after the accident.

²³⁸ Slight injury: An injury of a minor character such as a sprain (including neck whiplash injury), bruise or cut which are not judged to be severe, or slight shock requiring roadside attention. This definition includes injuries not requiring medical treatment.

7.10.3 Gloucestershire Fire and Rescue

This simple chart (Figure 114) provided by Gloucestershire Fire and Rescue Services (GFRS) shows the number and proportion of all Call Outs to each district of Gloucestershire. Forest of Dean District averages 1.2 call outs per day.



Figure 114: Proportion of Call Outs by District 2014/15

7.11 Key messages

- 11.8% of the population of the Forest of Dean (9,668 people) provided unpaid care each week in 2011. This represents an increase of 13.5% since 2001 mainly due to the increasing elderly population. A rise of 9.7% is projected for the next four years, the greatest proportional increase of any District in the county. The Forest of Dean has a greater share of the population with caring responsibilities when compared against the county as a whole for every age band.
- Domestic tourism takes two forms, day trips and domestic overnight stays. Only Tewkesbury had lower numbers of visitors in both categories than the Forest of Dean District.
- Suitable public and community transport can play a key role in reducing social isolation and making a community's assets accessible to those who need them most. Work is just starting on mapping transport usage against need.

- In 2011 there were 34,167 households in Forest of Dean District; this represents an increase of 5.0% or 1,637 households since 2001.
- The number of households in the Forest of Dean is projected to increase by 1,000 between 2012 and 2017 (2.9%) and by 5,000 between 2012 and 2037 (14.3%).
- At the time of the 2011 Census 3.8% of households in Forest of Dean District had fewer rooms than the standard requirement and were therefore overcrowded, this was lower than the county and national average.
- In 2013 an estimated 4,181 households in the Forest of Dean were in fuel poverty representing 11.6% of all households.
- In 2011, there were an estimated 12,900 private sector dwellings in Forest of Dean District exhibiting Category 1 hazards.
- Over the last 10 years the number of households in the Forest of Dean that met the statutory definition of homelessness per 1,000 households has fallen from 3.1 per 1,000 households in 2004/5 to less than 0.5 in 2014/16.
- Coleford Central ward has the highest anti-social behaviour (ASB) rate of any ward in the District and has a higher rate of ASB than Gloucester city in 2014/15.