Rochford covers an area of 65 square miles and is predominantly rural in its character. It has miles of coastline as well as vast areas of countryside. The small outlying villages and towns offer both rural and semi-rural living. These are still within easy reach of the main centres and the mainline railway. Recreation facilities include 3 golf courses, sports centres, open countryside, foot and bridle paths, the sea wall and woodland areas. Within Rochford there are many listed buildings and these include Rochford Hall, a Norman Castle and Rayleigh Windmill. Despite these cultural historic buildings there have still been modern enhancements, such as the recently completed improvements to Rochford Market Square. There is a wide variety of housing in the area ranging from stylish properties to historic listed buildings in conservation areas. Also in the area there are excellent sheltered housing schemes for the elderly.
An overview of Rochford including key issues impacting the population, health and wellbeing, and demand on services

### People and place
- **An ageing population** is increasing demand on services.
  - Over 65s
    - 2015: 0
    - 2025: +9%
    - 10,000
    - 20,000
    - 30,000
- Few deprived areas with poor health and unemployment.
- Average population density.
- Low rate of crime and residents feel safe.
- Higher than average waste recycling levels.

### Lifestyles
- Although rates are lower than average, reducing smoking and obesity, plus increasing the level of physical activity, are all areas for improvement.
- Interventions need to reach high risk groups to reduce the number of preventable health conditions and service demand.
- Hospital admissions due to alcohol related conditions are better than the England average.
- Increase in number of adults in substance misuse treatment.

### Physical and mental health
- Fourth highest rate of diabetes in the county.
- Second lowest rate of hospital admissions due to hip fractures than England.
- Both prevention and treatment are important to improving health outcomes.
- Poor wellbeing amongst adults but a lower than average percentage with mental health problems.
- Increasing number of people with dementia. Unpaid carers require support to achieve their role.

### Housing
- Higher than average proportion of owner occupied housing, with fewer in rented/social.
- Large rise in house prices.
- Low proportion on the housing waiting list.
- Fifth lowest rate of homeless households.
- Ageing population will impact on the availability of health services, housing and care homes.

### Children and Young people
- Very high rate of teenage pregnancy is linked to a range of poor outcomes in later life.
- Lower than average Chlamydia testing but higher percentages testing positive.
- Lower levels of child poverty.
- Lower than average rate of children in care.

### Education
- The proportion who achieve a good level of development at age 5 is above the average but there is a gap for those eligible for free school meals.
- Higher than average proportion achieve five or more GCSEs at grades A*-C.
- Fifth highest proportion attend a good or outstanding school.
- Higher than average persistent secondary absenteeism.
- More pupils than average aspire to go to university.

### Employment
- Below average number of adults with no qualifications.
- Higher than average adult unemployment but fewer young people Not in Education Employment or Training.
- Lower than average ratio of jobs per population and increasing number of jobs.
- Most businesses have 9 or fewer employees.

### Transport
- Above average travel time by public transport or walking to reach key services.
- Higher than average percentage of residents who are satisfied with local bus service and local transport information.
- Access to a car is essential for people out of work and not able to use public transport or walk to an employment centre. 20% may miss out on unless they have access to a car.
Greater demand on health and social care due to an ageing population and schools and services supporting 5-15 year olds

Rochford is the third smallest district in Essex in terms of total population numbers, accounting for 5.9% of the total population in Essex. It has a slightly lower proportion of over 65s compared to the county as a whole although a 19% increase is expected between 2015 and 2025 equating to 3,680 more people. This ageing population will put greater demand on health, social care services and housing needs.

The working population is essential for economic growth, requiring adequate housing, access to jobs and businesses, and the Rochford proportion is forecast to decrease by three percentage points by 2024.

Between 2015 and 2025:
- The total population will increase from 84,815 to 89,494: an increase of 5.5% or 4,679 more people.
- Over 65s will increase from 19,187 to 22,866: an increase of 19.2% (3,679) and will represent 25.6% of the total population in the district.
- The proportion of the working age population will fall slightly from 55% to 52%.
- There will be 1,040 more under 19s.
- 9,234 new babies will be born over the period.

Source: ONS, 2012 sub-national populations
Between 2015 and 2025, the 5-10 year old and 11-15 year old age groups will be the biggest growing age groups for children: an increase of 309 and 584 respectively. School places and services will need to be available to support these changes.
Rochford is affluent with few areas of deprivation

The Indices of Multiple Deprivation are made up of a number of different domains including: income; employment; health and disability; education, skills and training and housing and services which impact the overall deprivation. The difference in deprivation between areas is a major determinant of health inequality: if deprivation inequalities decrease then health inequalities are likely to decrease also.

There are 53 Lower Super Output Areas (LSOAs) in Rochford, with none of them being amongst the most deprived 10% in England while 9 are in the most affluent 10%.

The distribution would suggest that there are many affluent areas of Rochford but few that are deprived. Rochford is ranked 281 out of 326 local authorities in England on overall deprivation (where 1 is the highest level of deprivation).

MOSAIC is a tool for identifying the characteristics of households within an area. There are 66 different household types in MOSAIC and some or all of them can be present in an area. The top three most prevalent household types in Rochford, representing 22.6% of households are:

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>9.1% of households</td>
<td>6.9% of households</td>
<td>6.6% of households</td>
</tr>
<tr>
<td>Professional families with children under 11.</td>
<td>Elderly couples with traditional views.</td>
<td>Couples without children or who have adult children living with them.</td>
</tr>
<tr>
<td>Own their homes in traditional mid-range suburbs with a mortgage.</td>
<td>Have lived in their own suburban semis and terraces for a long time.</td>
<td>Own mid-range semis or detached homes.</td>
</tr>
</tbody>
</table>
Foulness and Great Wakering ward has high levels of child poverty although long-term unemployment is just below the County average. Rochford ward has high levels of both child poverty and long-term unemployment. Sweyne Park has above average levels of both child poverty and long-term unemployment.

<table>
<thead>
<tr>
<th>Foulness and Great Wakering</th>
<th>Rochford</th>
<th>Sweyne Park</th>
</tr>
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<tbody>
<tr>
<td>• 8.9% are 'E21 Family Ties' – couples aged 46-55, who own their own homes but whose incomes of £30-49k are strained through supporting teenage and adult children.</td>
<td>• 7.4% are 'N58 Aided elderly' These tend to be single and older, around half have low incomes and most own their own home.–</td>
<td>• 8.9% are ‘H35 Primary Ambitions’ who are families with children under 11 owning 2/3 bedroom terraces or semis with household incomes of £30-59k</td>
</tr>
<tr>
<td>• 7.7% are ‘D16 Mid-Career Convention’ who are Professional families with children in traditional mid-range suburbs where neighbours are often older.</td>
<td>• 7.2% are ‘M56 Solid Economy’ who tend to be families with children renting from a social landlord with relatively low incomes.</td>
<td>• 7.4% are ‘H34 Contemporary Starts’ who are cohabiting couples and singles in their late 20s/30s living in modern houses and with an income of £20-39k.</td>
</tr>
<tr>
<td>• 7.7% are ‘G28 Local Focus’ who tend to be rural families in affordable village homes who are reliant on the local economy for jobs.</td>
<td>• 6.9% are ‘J45 Bus-Route Renters’ who tend to be 25-40, living alone and renting lower value flats.</td>
<td>• 6.2% are ‘D15 Modern Parents’ - double income (over £50k) families with school age children living in good quality detached homes.</td>
</tr>
<tr>
<td>• 6.4% are ‘G27 Outlying Seniors’ who are pensioners living in inexpensive housing in out of the way locations.</td>
<td>• 6.0% are F23 Solo Retirees’ who are elderly singles whose incomes of under £15k are satisfactory in their affordable but pleasant owned homes.</td>
<td>• 6.01% are ‘F23 Solo Retirees’ who are elderly singles whose incomes of under £15k are satisfactory in their affordable but pleasant owned homes.</td>
</tr>
<tr>
<td>• 6.01% who are ‘F25 Classic Grandparents’ Lifelong couples in standard suburban homes enjoying retirement through grandchildren and gardening.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Reducing adult obesity is an area for improvement, plus reducing smoking and drinking although prevalence is lower than average

Smoking, drinking alcohol and obesity can cause preventable health conditions. Rochford has the fourth lowest district figure for smoking prevalence, below the national average of 18.0%. Prevalence is higher in people in routine and manual jobs (32.1%).

Alcohol related admissions to hospital were considerably lower than the national rate of 645 per 100,000 population in 2014/15. There were 57 arrests for drug possession in Rochford in the year to September 2015, down 36% from a year earlier and accounting for 2% of all arrests in Essex. 85 adults and 24 young people were receiving treatment for drug abuse, plus 43 adults and under five young people were receiving treatment for alcohol abuse in the district in 2014/15. This is a 3% increase since 2013/14 in the number of adults being treated although the number is the lowest in the county.

12.5% of adults are smokers, lower than the national average.
381 people (444 per 100,000) were admitted to hospital with alcohol related conditions, considerably better than the national average.
128 adults (and under 30 young people) were in treatment for drug/alcohol misuse, up 3% from a year earlier.

Citizen Insight Source: Residents Survey 2015
7% of Rochford residents stated that they smoke, below the Essex average (10%).

Obesity in adults in Rochford is higher than national figures, and levels of physical activity are mostly lower than average. The proportion of adults who are overweight or obese is in the mid-range of district figures and is above the national average (64.6%). Rochford has the fourth lowest proportion of children aged 10-11 who are obese or overweight in the county (the Essex average is 30.7%) and the figure was below the national average of 33.3% in 2014/15.

67.6% of adults and 28.9% of 10-11 year old children are overweight or obese. This is higher than the national figure for adults but lower for children.
15.9% of adults in Rochford are doing enough physical activity to benefit their health, the fourth lowest in the county and below the national average of 17.6%.

Citizen Insight Source: Residents Survey 2015
36% said that in the last week they did 30 minutes of moderate physical activity on five days or more, just below the county average of 39%.
Rochford residents (44%) are most likely to cite lack of time as the main reason for not taking more exercise (similar to the Essex average). Other reasons given are that it is too expensive...
Poor health and increasing numbers of people with dementia, diabetes and admissions due to hip fractures will put demand on health services

Increasing numbers of people with dementia will have an impact on health services including training of staff, support for unpaid carers, and the available housing stock as more places in supported and sheltered housing and care homes will be needed.

Rochford had the fifth lowest district figure for the rate of people who died prematurely from cardiovascular diseases (CVD) and the fourth lowest for the rate of preventable deaths from CV. These figures are both better than the national average of 75.7 and 49.2. There has been a general improvement of these rates which is consistent with the national picture, and likely due to improvements in treatment and lifestyle. Prevention and treatment are important to improve things further.

- 644 per 100,000 (124) residents aged 65+ were admitted to hospital with hip fractures in 2014/15.
- Rochford has the fourth highest rate of diabetes in Essex at 6.4% (4,822) of the GP registered population, and the rate has risen over the last four years.

The prevalence of hospital admissions due to hip fractures in the over 65s in 2014/15 was higher than the previous year and was above the England average of 571 per 100,000 population. The rate was highest in the county. Hip fractures can cause a loss of independence and are likely to result in an increased need for social care and care home places.

There was an increase in the number of recorded cases of diabetes in 2014/15, compared with the previous period, and the rate has been increasing over the last four years (as has the national figure). This may be due to higher levels of diabetes or improved detection by GPs. The rate is the same as the national average.
619 adults in Rochford were receiving social care support in 2014/15. 91% had personal budgets while 24% had Direct Payments, compared to 91% and 30% in the whole of Essex.

60% of adults who had accessed reablement services during the year left as self-carers, i.e. being able to live independently, below the county average of 71%.

(Reablement is a short-term service to help people with their daily living activities in order to regain or increase their independence following an illness, injury, disability or when people need some support in re-building confidence).

Citizen Insight Source: Residents Survey 2015

69% of Rochford residents rate their general health as good, the fourth lowest percentage in Essex and below the county average of 70%.

- 619 adults in Rochford were receiving social care support in 2014/15.
- 91% of them had personal budgets, in line with the county average.
Average life satisfaction for adults, above average bullying levels and adult mental health prevalence in CCG area is better than England figures

This section links to the following Essex County Council Outcomes

- Children get the best start
- Good health & wellbeing
- Learning
- Safer communities
- Economic growth
- Sustainable environment
- Independence

National research highlights that good emotional and mental health is fundamental to the quality of life and productivity of individuals, families, communities and nations. It is associated with improved learning; increased participation in community life; reduced risk-taking behaviour and improved health outcomes. Poor child emotional well-being and mental health can have a lasting effect into adulthood. Research has shown that early intervention, preventative strategies and resilience building are effective to improve emotional wellbeing and mental health and are most effective when they take a holistic, family centred approach.

Citizen Insight

According to the 2015 Pupil Health and Wellbeing (SHEU) survey:

- Primary pupils in Rochford scored their overall wellbeing as 14.1 out of 20, close to the county average while secondary pupils scored their overall wellbeing as 13.2 out of 20, also close to the Essex figure.
- 30.8% of secondary school pupils in Rochford say they have sometimes felt afraid to go to school because of bullying, above the Essex average of 20.5%.

72% of residents rated their life satisfaction at 7 or more out of 10, the same as the 72% in the whole of Essex (Residents Survey 2015).

People with a serious mental illness have mortality rates 2-3 times higher than the total population that is largely due to undiagnosed or untreated physical illness as there had been a focus on the mental illness.

The proportion of people with a mental health problem in the Castle Point and Rochford CCG area (0.59%) is better than the national figure. This indicator shows the prevalence of schizophrenia, bipolar affective disorder and other psychoses. This figure is much lower than the 3.4% of those completing a GP survey who report they have a long term mental health problem, which may be due to an under recording of diagnosis or the increased likelihood of people with mental or physical health problems completing GP surveys.

A large proportion of older people diagnosed with mental health problems are often related to dementia. During 2014/15 the Older Age Mental Health team conducted 45 assessments for people entering the service and 123 reviews on residents in Rochford. This represented 10% of all assessments and 7% of all reviews conducted in Essex, this is a disproportionately high number of assessments when compared to the district’s population.

In the NHS Castle Point and Rochford CCG area:

- 0.59% have a mental health problem lower than the England figure (0.86%, QOF prevalence)
- 3.4% of people completing a GP survey report a long term mental health problem, lower than the England figure (5.1%)
Rochford has very low rates of children in care, with a Child Protection Plan and children in poverty, and a low rate of teenage pregnancy

The wellbeing of children and young people can be affected by many factors. Children and young people in care are among the most socially excluded children in England and there tend to be significant health and social inequalities for these children compared with all children. Rochford has the second lowest rate of children in care in the county (6.5 per 10,000 population), although none of the children originating from Rochford are placed there.

The rate of children with a Child Protection Plan is 3.0, the second lowest in the county and considerably below the Essex average of 16.9, while its rate of children receiving other social care support at 87.1 is also the second lowest in Essex and lower than the county rate of 152.5.

During 2015, Rochford had 39 families commenced on a Family Solutions episode, representing 4% of all episodes in Essex. Family Solutions is an early intervention project.

The rate of hospital admissions caused by injury to children aged 0-14 (either unintentional or deliberate) was 72.8 per 10,000 in 2014/15, below the Essex average of 89.6 and the lowest district figure in the county.

Inequalities that develop in childhood tend to also disadvantage people as they become adults, for example poor health and social exclusion of care leavers and poor health, and financial outcomes for children who experience poverty. Early support can help to mitigate these problems later in life. Free Early Education Entitlement (FEEE) is a priority nationally for early years and Rochford, while having the fourth lowest proportion of families who are eligible, had the third highest take-up rate in the county.

Low earnings and long-term worklessness are key factors impacting child poverty. Parental qualifications, family structure and size also have an impact on available income. Child poverty can lead to poor health outcomes including child-mortality and illness such as child mental health and low birth weight. Targeting initiatives at areas of high long-term unemployment may improve income and potentially reduce the risk of child poverty.
The map below shows the percentage of children in low income families compared to long-term unemployment (those claiming Job Seekers Allowance for more than 12 months). The bandings are based on the data across all wards in Essex and the map shows that Rochford has just one area of significant child poverty when compared to the rest of the county, while two wards have above average long-term unemployment.

Percentage of children in low income families (2014) and long-term unemployment (2012/13) by ward
However, if the bandings are changed to reflect the distribution of the data purely within Rochford, then the map shows that there are differences between wards within the district and a number that do have higher levels of child poverty and/or long-term unemployment.

Six of Rochford’s 19 wards had a higher than average percentage of children living in low income families in 2013 – Rochford (23.7%), Foulness and Great Wakering (14.1%), Swayne Park (13.9%), Barling and Sutton (12.6%), Hawkwell South (10.6%) and Wheatley (9.2%). Rochford and Ashingdon & Canewdon also had levels of long-term unemployment in 2013 that were above the county average (8.2% and 6.6% respectively).

- 9.6% of all children were in low-income families in 2013, the second lowest figure in Essex and below the national figure (18.0%).
- 2.5% of adults were long-term unemployed in 2014, below the national average of 7.1%.
- A larger proportion of children were in non-working households (13.3%) in 2014 than in 2013, and this was higher than the Essex average of 12.5%.

2.5% of Rochford residents were long term unemployed in 2014, the third lowest proportion in the county (the Essex average was 4.9%), and below the national average of 7.1%. 86.7% of children in 2014 were in working/mixed households, compared to 87.3% in 2012.
Research evidence suggests that 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.

- Rochford had the fifth lowest rate of under 18s teenage conceptions in Essex in 2013, at 16.8 per 1,000, which was also below the national rate.
- 8.5% of Chlamydia tests were positive in 2014, the fourth highest proportion in Essex (7.6%).

The teenage pregnancy figures for Rochford were lower than both the national and Essex averages (24.3 and 22.3 per 1,000) in 2013.

Chlamydia testing suggests that Rochford has a high proportion of 15-24 year olds testing positive (the fourth highest in the county). 20.1% of 15-24 year olds were tested compared to a county average of 21.5%.
Early years measures and GCSE results are higher than average and aspirations are high

The general level of educational attainment within a population is closely associated with the overall health of that population. The long-term demographic and health problems for a child born into a family with traditionally low standards of educational attainment may be severe, affecting health choice behaviour and service provision uptake into adulthood. Parental unemployment, single parent households, having parents with low educational qualifications, being a persistent absentee and eligibility for free school meals are factors linked to low educational attainment. All attainment data relates to pupils attending schools in Rochford.

The percentage of children in Rochford who are deemed ‘ready for school’ is close to the Essex average of 78%. The percentage who achieve a good level of development in the first year of school is above to the county average.

8% of primary and 6% of secondary pupils were eligible for free school meals in 2015, compared to 12% and 9% in the whole county. In 2014/15, just 51% of pupils in Rochford who were eligible for free school meals (ie families with low income) achieved a good level of development, compared to 64% of those not eligible for meals, higher than the equivalent Essex figures of 43% for those eligible and lower than the 66% non-eligible. The proportion of those receiving free school meals who achieve this is an area for improvement.
The percentage of pupils at Rochford secondary schools who achieved five or more GCSEs at grades A*-C including English & Maths in 2015 fell from 63.8% a year earlier. This appears to be consistent with the national trend. The results are the fifth highest in the county and are above the Essex average of 57.6%.

86.0% of all primary and secondary children studying in Rochford attend a good or outstanding school, higher than in 2014 and higher than the 84.3% in the whole of Essex.

- 5.2% of half days in state funded secondary schools in the district were missed due to authorised and unauthorised absences in 2014/15.
- 6.1% of secondary pupils are deemed to be persistent absentees, above the county average.

Young people who attend school regularly are more likely to get the most they can out of their time at school, more likely to achieve their potential, and less likely to take part in anti-social or criminal behaviour. Reducing absenteeism and exclusion levels are therefore important. Rochford is close to the Essex figure (5.1%) for absenteeism (in state funded secondary schools) and has the fourth highest percentage of persistent absentees in the county (the Essex average is 4.8%).

- 59.2% of pupils attending secondary school in Rochford achieved five or more GCSEs at grades A*-C including English & Maths, the fifth highest proportion in Essex.
- 86.0% of all pupils attend a good or outstanding school, the fifth highest proportion in the county.
Lower than average proportion of adults with no qualifications while adult unemployment is higher than average but youth unemployment is lower

Health and employment are intimately linked, and long term unemployment can have a negative effect on health and wellbeing. Unemployment leads to loss of income, which affects standards of living. The long-term effects can include depression and anxiety, a loss of identity and reduced perceptions of self-worth. In addition, work can play an important role in social networks and the complex interactions between the individual and society, as work is an integral part of modern day social networking.

Young people with no qualifications are more likely to not be in education, employment or training post 16 and more at risk of not being in paid work and of receiving lower rates of pay.

- 6.8% of 16-64 year olds have no qualifications (2014), below the Essex and England averages (8.7% and 8.6%).
- 4.7% of young people were not in education, employment or training from Nov 2014 - Jan 2015, lower than the Essex average of 5.7%.
- 6.5% of 16-64 year olds were unemployed in June 2015, higher than the Essex average (4.9%).

Fewer working age adults in Rochford have no qualifications when compared to the national and Essex averages. Rochford has a slightly higher proportion (51.6%) of adults with qualifications at level NVQ 3 or above than the county average (49.5%). 2,810 adults were engaged in some form of further education in Rochford in 2013/14.

The proportion of adults over 16 who are unemployed in Rochford is higher than the Essex average of 4.9% but the percentage of young people aged 16-18 who are not in education, employment or training (NEET) is the second lowest in Essex.

300 young people under 19 were in apprenticeships in 2014/15 (plus another 440 aged 19+), a 32% rise over the previous year.
Rochford has an unemployment rate that is higher than the Essex average of 4.9% but has a percentage of adults aged 16-64 who were in employment in June 2015 that is just below the county average of 76.2%. The district has a proportion who were economically inactive that is slightly above the Essex figure of 19.7%. The latter group includes, for example, all those who are looking after a home, retired or studying.

- 74.7% of adults were employed in June 2015, in the mid-range of districts in Essex.
- 20.1% were economically inactive, the fifth highest figure in Essex.

**Citizen Insight** Source: Residents Survey 2015

32% of Rochford residents consider themselves to be a participant in lifelong learning, below the county average of 34%. The main barriers preventing them from participating in lifelong learning are lack of time and the cost of courses.
The number of jobs is expected to increase by just 0.2% in the next five years, compared to 2.8% in the whole of Essex. Job density in Rochford is lower than the county average, with the ratio of total jobs to working age population in 2013 being 0.63 compared to 0.74 in Essex, and 0.80 in England.

Average gross weekly earnings for full time workers in 2015 were £525 in Rochford, lower than the Essex and England average of £575 and £533 respectively.

23% of jobs are in the public sector, 16% are in financial/other business services and 17% are in the wholesale/retail sector. 90.4% of businesses in Rochford have 9 employees or less (greater than the Essex average of 89.5%).

Superfast broadband coverage in Rochford will rise from 82% to 97% by 2020.

The superfast broadband project is expected to make a real difference to Rochford residents and businesses, whose ability to trade and communicate online will be greatly enhanced. Better connectivity will also support digital inclusion in terms of lifelong learning and skills development as well as the use of public services provided through online channels.

Although superfast broadband coverage in Rochford was above the Essex average in 2013, the planned investment in the project should mean that 97% of Rochford premises (compared to 94% in the whole of Essex) will have access to superfast broadband by early 2020.
Residents of Rochford residents feel safe and the rate of crime is the lowest in Essex

This section links to the following Essex County Council Outcomes

- Children get the best start
- Good health & wellbeing
- Learning
- Safer communities
- Economic growth
- Sustainable environment
- Independence

A high proportion of Rochford residents say that they feel safe during the day or after dark.

**Citizen Insight** Source: Residents Survey 2015

- 87% of adults in Rochford say they feel safe during the day, close to the Essex average of 85%.
- 49% say they feel safe after dark, on a par with the county average of 49%.
- 42% of adults are satisfied with safety on the roads, matching the county average of 42%.

Motor vehicle traffic accidents are a major cause of preventable deaths, particularly in younger age groups. For children and for men aged 20-64 years, mortality rates for motor vehicle traffic accidents are higher in lower socio-economic groups. The vast majority of road traffic collisions are preventable and can be avoided through improved education, awareness, road infrastructure and vehicle safety. Rochford had a rate per 100,000 population of people killed and seriously injured on the roads in 2012-2014, that was lower than the Essex figure of 42.2 and the England rate of 39.3.

The rate of those killed/seriously injured on the roads (35.0 per 100,000 population) is lower than the county and national rates.

There are many risk factors that increase the likelihood of offending and other poor outcomes. These risk factors include: a person’s attitude to crime, risk taking behaviour, substance misuse, mental and physical health, access to employment and training, financial issues and family relationships. These poor outcomes may not only impact the individual but their children and have long-lasting effect. The pathways into offending are very complex and there may be no link, an indirect link or direct link from risk factor to offending and some risk factors may make certain types of offending more likely. Evidence suggests that supporting people with the right support at the right time and ensuring that there are not any gaps or inconsistencies between agencies may be most effective way in reducing crime.
Rochford had a crime rate per 1,000 population in the 12 months to September 2015 that was up 4.1% on the previous year and the lowest in the county. Theft offences accounted for half of all offences during this period (this comprises burglary 14.7%, vehicle theft 10.9% and other theft 24.5%).

- The rate of crime in Rochford is 34.3 per 1,000 population and represents 2,912 offences.
- The rate of domestic abuse offences at 9.0 is below the county average.
- The rate of anti-social behaviour incidents is 19.6 (1,597 offences).
- 15.01% of offenders re-offended in 2013, the lowest rate in Essex.

There were 276 domestic abuse offences in 2014/15, a rate per 1,000 population which was below the county average of 19.7. The rate of anti-social behaviour incidents in Rochford is the second lowest in the county at 19.6, although this is a 3.8% increase over the previous year.

The percentage of all offenders who re-offended was the lowest in the county in 2013 (this is the latest data publically available).
Some areas show significantly worse health across a number of indicators, compared to England

Health inequalities are differences in health outcomes between different population groups. To improve health and reduce inequalities, we need to consider all the factors that influence health, which are known as the wider determinants of health. This ‘tartan rug’ table shows for each Middle Super Output Area (MSOA) in the local authority, the value for each key indicator and whether it is significantly different from the England average. The map shows the exact location of individual MSOAs.

The health of people in Rochford is generally better than or similar to the England average. The chart also demonstrates that the Rochford district has a higher than average 65+ population, which also varies throughout MSOA’s. The areas with a higher population of over 65+ appear to perform better on wider health determinant indicators than areas with a younger population.

Please note that some of this data may differ from those presented earlier in the report due to varying data sources. (It may not be the most recent source as it is broken down by MSOA).
Life expectancy for both men and women in the Rochford district is significantly better than the national average. Middle Super Output Areas (MSOA) Rochford 004, has significantly worse outcomes for a number of the indicators listed in the table.

### Life expectancy & Causes of death (per 100,000 population)

<table>
<thead>
<tr>
<th></th>
<th>Life Expectancy for males</th>
<th>Life Expectancy for females</th>
<th>Deaths all ages, all causes</th>
<th>Deaths under 75, all causes</th>
<th>Deaths under 75, all circulatory disease</th>
<th>Deaths under 75, all cancer</th>
<th>Deaths under 75 all coronary heart disease</th>
<th>Deaths all ages, stroke</th>
<th>Deaths all ages, all respiratory disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
<td>78.8</td>
<td>82.8</td>
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Highest recycling levels and higher than average satisfaction with the environment and buses

Rochford has a population density of 4.63 persons per hectare, the sixth highest district in the county and above the 3.8 average of the whole of Essex. The population density map below shows where the highest rates of population are, although 80% of the Rochford district is classified as green space (the Essex highest is 93% in Uttlesford, while the Essex lowest is 51% in Castle Point): green spaces are important for wellbeing, community cohesion and for wildlife.

Citizen Insight  Source: Residents Survey 2015

- 80% of Rochford residents agree that they have a high quality environment, above the Essex average of 75%. 88% are satisfied with the local area as a place to live, also above the county average of 82%.
- 22% say they have given unpaid help to groups, clubs or organisations over the last 12 months (volunteering), close to the county average of 23%.
Transport impacts on the health of a population via a number of factors including unintentional injuries, physical activity undertaken, air pollution and access to services. The last of these involves people traveling for basic necessities such as work, education, healthcare and purchasing food. Good transport links have an important role in enabling access to business and jobs which are important to allow for economic growth. Some 20% of people seeking jobs in Rochford (ie on job seekers allowance) may miss out on employment opportunities unless they have access to a car.

The affordability and accessibility of driving a car has increased over the past 30 years and this has heavily influenced planning decisions to be car focussed. However, there is still a significant proportion of the population without car access who are reliant on public transport, cycling and walking. The 16 minute average travel time by public transport or walking to reach key services is higher than the Essex average of 13 minutes. Improvements in the travel time to key services (i.e. employment centres, primary schools, secondary schools, further education, GPs, hospitals and food stores) by public transport/walking is a national trend.

In 2015, 1-2% of the main road network was in a condition where structural maintenance should be considered (similar to the countywide figure). 8% of the local road network was in this condition, the fourth lowest district proportion in Essex and better than the county average of 13%.

Citizen Insight Source: Residents Survey 2015
- 57% of residents are satisfied with their local bus service, above the County average of 51%, and 38% are satisfied with their local transport information. Just below the county averages of 39%.
- 18% are satisfied with the condition of roads in Rochford, close to the county average (17%).

Rochford has the highest levels of recycling in the county with just 65.2% of household waste sent for reuse, recycling or composting in 2014/15.

- With 65.2% of household waste being recycled in 2014/15, Rochford was the highest district and above the Essex average of 51.1%.
- It had 337 kg of residual waste per household, the third lowest in the county.
Low rate of homelessness and households in temporary accommodation, but low proportion of social tenants and high house price increases

The relationship between housing and health is a recognised association but a complex one. A number of elements in and around the home can impact on health and wellbeing and will be influenced by other determinants such as education, employment and infrastructure. Specific housing related issues affecting health are indoor pollutants, cold and damp, housing design, overcrowding, accessibility, neighbourhood safety, social cohesion and housing availability.

Additionally as people get older and demand for people to stay within their own homes for longer increases the demand for specific housing needs will also increase.

Economic growth and housing are inextricably linked. Without a sustainable housing programme providing homes for people to live in and without a growing local economy, an area will be unable to provide the jobs and homes to attract new people and retain current residents and drive the economy forward.

- The number of dwellings in Rochford rose by 1.1% to 34,810 between 2011 and 2014, less than the rise in Essex and England (both 1.7%).
- House prices have increased by 13.3% since 2011, the mid-range of district figures.
- 7.2% of Rochford households were deemed fuel poor in 2013, the second lowest district in Essex.

The 1.1% increase in dwellings in Rochford since 2011 is lower than the increase in Essex and England.

House prices across Essex have been increasing year on year outstripping wages, making home ownership less and less affordable for a large proportion of the Essex community. The 13.3% rise in Rochford has been in the mid-range of district figures.

High energy prices coupled with low income mean 7.2% of people in Rochford are considered to be fuel poor, the second lowest district figure in Essex. (A household is said to be fuel poor if it needs to spend more than 10% of its income on fuel to maintain an adequate standard of warmth.) From 2013-2014 there were 6 excess winter deaths in Rochford. This is around 2.4% additional deaths, well below the national average (11.6%).
83.1% of households in Rochford are people that own their own homes (either with a mortgage or outright), and there is a small proportion of social tenants, who may be impacted by low stock levels, and a low proportion of private tenants.

Local authorities have a duty to ensure that dwellings in their area should provide a safe and healthy environment for the occupants and any visitors, and they have a statutory duty to take enforcement action to deal with defects and deficiencies which may pose a category 1 hazard. In 2014/15 800 properties were identified in Rochford as having category 1 hazards (accounting for 2% of all these properties in Essex), of which 81% were in the private sector.

- Residents in Rochford are more likely than most other districts to own their homes, either with a mortgage (41.5%) or outright (41.4%).
- 800 properties in the district have been assessed as having category 1 hazards, one of the lowest figures in Essex.

<table>
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<th>Percentage Household Tenure in 2011</th>
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<td>Private tenants/other</td>
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There were 704 households on the housing waiting list in 2014/15, which was the second lowest number in Essex although Rochford has the fourth smallest population in the county.

Homelessness is associated with severe poverty and is a social determinant of health. It is also associated with adverse health, education and social outcomes, particularly for children. In 2014/15, 73 households were accepted as homeless or in priority need in Rochford, the fifth lowest rate in Essex and better than the national rate of 2.4 per 1,000. Rochford had 47 homeless households in temporary accommodation awaiting a settled home in March 2015, the fourth lowest rate in the county (the Essex average was 2.21 per 1,000 households).
Essex Insight is the Partnership information hub for Essex and a website about Essex and the people working and living in Essex.

The website can be used to find data, also join in surveys and use table, charting and mapping tools to support reporting.

It is home to a suite of products that supports the Joint Strategic Needs Assessment (JSNA).

There are links in this report to the JSNA specialist topic reports found on Essex Insight e.g. Child Poverty and CAMHS Needs Assessments.

**Bookmark it now as your one stop shop for data on Essex**

[www.essexinsight.org.uk](http://www.essexinsight.org.uk)