



Ipsos MORI
Social Research Institute

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The Impact of Planning Policy on Health Outcomes and Health Inequalities in Southwark and Lambeth

Findings from quantitative and qualitative research
with local people

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Executive summary



1 Executive summary

Ipsos MORI was commissioned by the London Borough of Southwark and the London Borough of Lambeth, with the support of Guy's and St Thomas' Charity, to conduct a programme of research investigating how to enhance the impact of planning policy on health outcomes and health inequalities in the two boroughs - specifically within the Old Kent Road Opportunity Area and the Oval and Kennington Development Area.

A programme of quantitative and qualitative research was designed to inform how planning policies and regeneration strategies might be delivered to improve health and well-being, which sought to build on prior research and to build an evidence base around health in general but with a particular focus on three key themes: social interaction and isolation, health service provision and obesity and inactivity.

The research comprised of a face-to-face, in-home, survey of 352 residents aged 16+ of the Old Kent Road Opportunity Area and 101 residents ages 16+ of the Oval and Kennington Development Area (in October-December 2016) to explore the three themes in detail. In addition, two resident workshops (one in each area) and a focus group with members of a local Southwark mothers group took place to explore the social isolation theme. Six focus groups were completed with school aged children (three in each area) exploring, separately, both healthy eating and walking. A focus group with residents in the Old Kent Road Opportunity Area was also held, to discuss local health service provision and the possibility of an integrated health service. Finally, five depth interviews were carried out with primary care healthcare professionals both from within Southwark and from the West Norwood Health and Leisure Centre, also to explore health service provision and the idea of a new integrated health and wellbeing service.

Following the close of the project, an action planning workshop was held to discuss recommendations arising from the research. This meeting was attended by members of both councils, representing both public health and planning.

1.1 The local area, community cohesion and safety

From those surveyed, the two areas are made up of both long residing residents and those who are newer to the area. In particular, in the Old Kent Road Opportunity area the latter tend to be younger people. Whilst in both areas, there is a good proportion of people who report feeling a sense of belonging, in the Old Kent Road Opportunity area, those who have lived in the area for longer are more likely to report feeling a sense of belonging to it.

The qualitative research highlighted that those who have lived in the Old Kent Road Opportunity area for long enough to have seen it change over time feel that it has lost its sense of community and tightness. They feel that this is due to new people moving into the area, and plans for regeneration that have already been evidenced by old estates being knocked down. In the qualitative discussion in Oval and Kennington, the area was described as an 'in between' kind of place; densely populated with housing and known for the cricket ground, but with little to do for those who live there.

Whilst many residents in the survey report that both areas are places where people get on well together, the qualitative research points to a desire for a high street (or village-like) feel which is missing in both the Old Kent Road Opportunity and the Oval and Kennington Development Area and would encourage local people to interact more with one another.

On the whole, in the survey residents in both areas report feeling safe during the day time however this is not necessarily the case for night time. The qualitative research revealed that poor street lighting in certain back streets and dark parks

are issues for both adults and children in both areas, as are busy roads. Additionally, residents in the Oval and Kennington Development Area feel that cyclists and hazardous pavements (because of work being done to them) impinge on their personal safety.

Good numbers of residents in both areas regularly walk, with walking being a popular means for getting to and from work too. School children also enjoy walking to and from school in both areas, reporting that it is nicer and quicker than using local buses, as well as providing the opportunity to socialise with friends.

Various factors were suggested by residents and school children in both areas that might encourage them to walk more, including more time, better health, cleaner and safer pavements and fewer and less dangerous crossings.

1.2 Social Isolation

The majority of residents in both areas have contact with people they do not live with at least once a week, whether this is face to face or on the phone. However, there is a small minority of people who do not have contact with anyone.

In the qualitative research, it is clear that the area is associated with decreasing levels of social cohesion, and participants felt that the population is in a state of flux as the area undergoes what they see as “gentrification”. This has an impact on people’s perceptions of the sense of community in Oval and the Old Kent Road, which they feel is deteriorating.

A lack of places to go and things to do in the local area was identified as a particular problem. Residents in both areas felt that the high streets were lacking small shops, affordable cafes, restaurants, or pubs for local residents to congregate in. They also identified a lack of things for families to do together, or for young people to get involved in, and suggested that more community groups or leisure facilities could remedy this. With both areas being so well connected, residents are frequently going outside the immediate area to meet friends, shop, and use leisure facilities.

Residents feel as though changes to personal circumstances such as having more time or money, and improvement to facilities/amenities themselves would make getting out more attractive to them more so than changes to the local area. However, they identified a number of improvements to the local area including developing the areas around the Old Kent Road and Oval to make space for community groups. Particularly families with young children want a place to meet other parents, and a safe environment for their children to play. They also want a high street with local amenities –for example, more pubs. Finally, outdoor spaces were received positively and residents wanted to see more use of them through larger play areas, more planned activities, a community garden or allotment.

1.3 Personal health and health services

The self-reported health of residents of both the Old Kent Road Opportunity Area and the Oval and Kennington Development Area is generally very good, with those who feel a sense of community in the local area tending to report better health.

During qualitative interviews with medical professionals in the Old Kent Road area, however, a range of health problems prevalent in the area were identified, which may require more focus for example Diabetes.

Residents of both areas feel well served by local primary care services, with a majority living in close proximity to their registered GP. Most don’t feel that any specific improvements are necessary to the local primary care offer, although long waiting times are mentioned as one possible aspect of health services where there is room for improvement.

Residents of both areas feel that the benefits of an integrated health facility opening in the area would be far-reaching – for example, encouraging greater use of leisure facilities by co-locating them, or making use of multiple services more convenient for residents. In the Old Kent Road Opportunity Area, there was also particular appetite from health professionals for co-located services.

1.4 Diet and physical activity

On the whole, residents of both areas show positive attitudes towards healthy eating. Residents in both areas report feeling informed about healthy eating in the survey, which is supported by qualitative research with school children who show a good awareness of the difference between healthy and unhealthy food. Similarly, in both areas, people appear to be interested in cooking for themselves and tend to say that they try to shop, cook and eat healthily. Whilst informed about healthy eating, there were Old Kent Road Opportunity residents, however, who displayed a lack of knowledge around how to put healthy foods together in cooking suggesting a possible need for local education.

Residents in both the Old Kent Road Opportunity and the Oval and Kennington Development Area suggest fresh food is easy to buy in their local area, however the qualitative research reveals that there are residents who travel to surrounding areas to buy fresh, healthy food. The fresh food that is available in the two areas is not always affordable, and the qualitative research in the Oval and Kennington Development Area in particular supports this. Four in ten people (42%) of Old Kent Road Opportunity residents suggest take-away food is more easily available than fresh food, but notably fewer Oval and Kennington Development Area residents say the same. The qualitative research in both areas suggests that residents (including children) in these areas feel that there are too many fast food and take-away eateries and that healthy alternatives are seriously lacking.

Whilst residents in both the Old Kent Road Opportunity and Oval and Kennington Development Area areas feel informed about, and have positive attitudes towards, healthy eating, their actual dietary habits and behaviour suggest that although they have good intentions, they do not always follow through. For example, although a good proportion of people in both areas report eating home cooked meals daily, fewer residents in the Old Kent Road Opportunity area are eating the recommended daily portions of fruit and vegetables than the average in England. The equivalent numbers in the Oval and Kennington Development Area, however, are slightly above the average in England. Additionally, take-away and ready meal foods make up a large part of some people's diets with school children in the qualitative research reporting that they too frequently eat junk food and take-away.

Residents in both areas on the whole consider themselves to be at a good weight for their height: however, considering the high proportions of overweight and obese people across London (59%), and in Southwark (55%) and Lambeth (51%) specifically, they may well be underestimating this¹.

In both areas residents are not highly active, with most doing 30 minutes of moderate exercise less than five times a week. Many believe that nothing would convince them to do more exercise, with a small number of people suggesting they are already active enough. However, residents suggest that they would be more likely to lead a healthier lifestyle if it was easier financially (for example, lower prices for gyms), or if they had more available time.

¹ Data available via PHE Fingertips, at <https://fingertips.phe.org.uk/profile/health-profiles/data#page/3/gid/1938132694/pat/6/par/E12000007/ati/102/are/E09000028/iid/90640/age/164/sex/4>

1.5 Conclusions and implications for planning policy in Southwark and Lambeth

The research identified a number of key implications for planning policy in Southwark and Lambeth.

Promoting more social interaction in the local area

Though levels of social interaction in the two areas are reasonably high, residents identified a number of issues including a lack of affordable places to go, not enough time to get out as much as they would like, and not knowing many people in the local area – or a declining sense of community cohesion. Residents in both the Old Kent Road Opportunity Area and the Oval and Kennington Development Area want an inclusive place for people to congregate, and meet new people.

For example, residents in both areas felt that they currently lacked a high street with access to shops, cafes and restaurants all in one place. In particular, residents felt there were a lack of places to go in the local area to meet with friends; therefore, key to any new plans for the two areas should be ensuring there are affordable restaurants and cafes, as well as more pubs that are not focussed on serving expensive food or drinks, but that can be a place for local residents to get together.

It was also suggested that community groups would be beneficial in providing young people with activities to take them away from the home or playing on the streets, and get them interacting with each other productively. Residents of both areas also wanted a place to go where adults can socialise and children can play; specifically, they hoped that the regeneration of the area around the gasworks in Oval would provide the opportunity to build a facility that would allow communities to get together, share skills, participate in activities – for example exercise classes or cooking classes.

Residents also want better use of green spaces. The parks around Oval and the Old Kent Road are seen to be assets of the local area, but residents acknowledged that open spaces are limited and often overcrowded. They would like to see more allotments and community gardens to bring the community together and promote healthy living.

The research also identified a small group of people who do not see or speak to anyone on a local basis. While this group is quite diverse they have typically lived in the area for a long time and suffer from a long-term illness, disability or infirmity. More needs to be done to investigate the needs of this group.

Improvements to local health facilities

Though residents are relatively satisfied with health services, there was strong support for the integrated health facility models presented in the research from both the health professionals and residents alike. In fact, the benefits of bringing together a range of services under one roof was discussed spontaneously in some of the discussion groups. Moreover, as discussed above, residents wanted a place for the community to get together, and a community hub was therefore appealing to residents.

Residents and health professionals felt that having the services co-located would make using them more convenient, and might promote users to use some of the services more. Furthermore, respondents to the quantitative survey noted that they might struggle to get out as much as they would like because they are time poor; therefore, easier access to these services might assist this group of people.

If one were to be built in the Old Kent Road, residents would like to see more health services that would relieve pressure from existing services, and a focus on prevention, with services that are designed to promote healthy eating and exercise. Residents in both areas also described a need to have more leisure facilities in the area.

It will be important to ensure these services are integrated. Health professionals working in the West Norwood Centre suggested that a central reception area would be helpful to visually link the services together. Health professionals also wanted any facility to be designed closely with the community on board from the start, and with the needs of the local population in mind.

Encouraging a better diet and more exercise

Residents agreed that there is a high prevalence of fast food shops, and easy access to unhealthy food in the two areas. This was a particular concern around schools, and the groups with school children suggesting that many are accessing unhealthy takeaways easily in the local area. This is despite many of the children being aware of the risks involved with eating unhealthy food.

More of a range of takeaway restaurants and cafes might encourage people to have more diverse, and healthier eating habits. Children themselves would like to see better access to cheap healthy food in the area.

As discussed above, residents also wanted to have better access to leisure centres – particularly in Oval, where residents do not benefit from free gym and swim passes, and also did not feel they had a choice of leisure options within easy reach. Residents want leisure centres to be affordable – and importantly have crèches or soft play areas to allow mothers with children to access the facilities too.

Some small changes might encourage residents to walk more often. This includes better street lighting and better-lit parks, better crossings and safer junctions for pedestrians, helping pedestrians feel safer from cyclists, and helping them navigate roadworks on the pavement, and reducing the amount of uneven pavements and litter.

Improvements with the local community in mind

Finally, many of the residents were very positive about the local area, and only wanted to see small improvements, rather than a complete overhaul of the Old Kent Road and Oval. Specifically, there were concerns about gentrification, and communities being displaced. Furthermore, residents did not want to see old, traditional buildings replaced with tall sky scrapers, and they did not want to see new shops and restaurants that were prohibitively expensive for the existing residents. They wanted any regeneration to stay true to the 'soul' of the local areas; i.e. ensuring that the working class communities, old buildings, and long-standing local facilities and amenities such as nearby East Street Market are retained.

Introduction

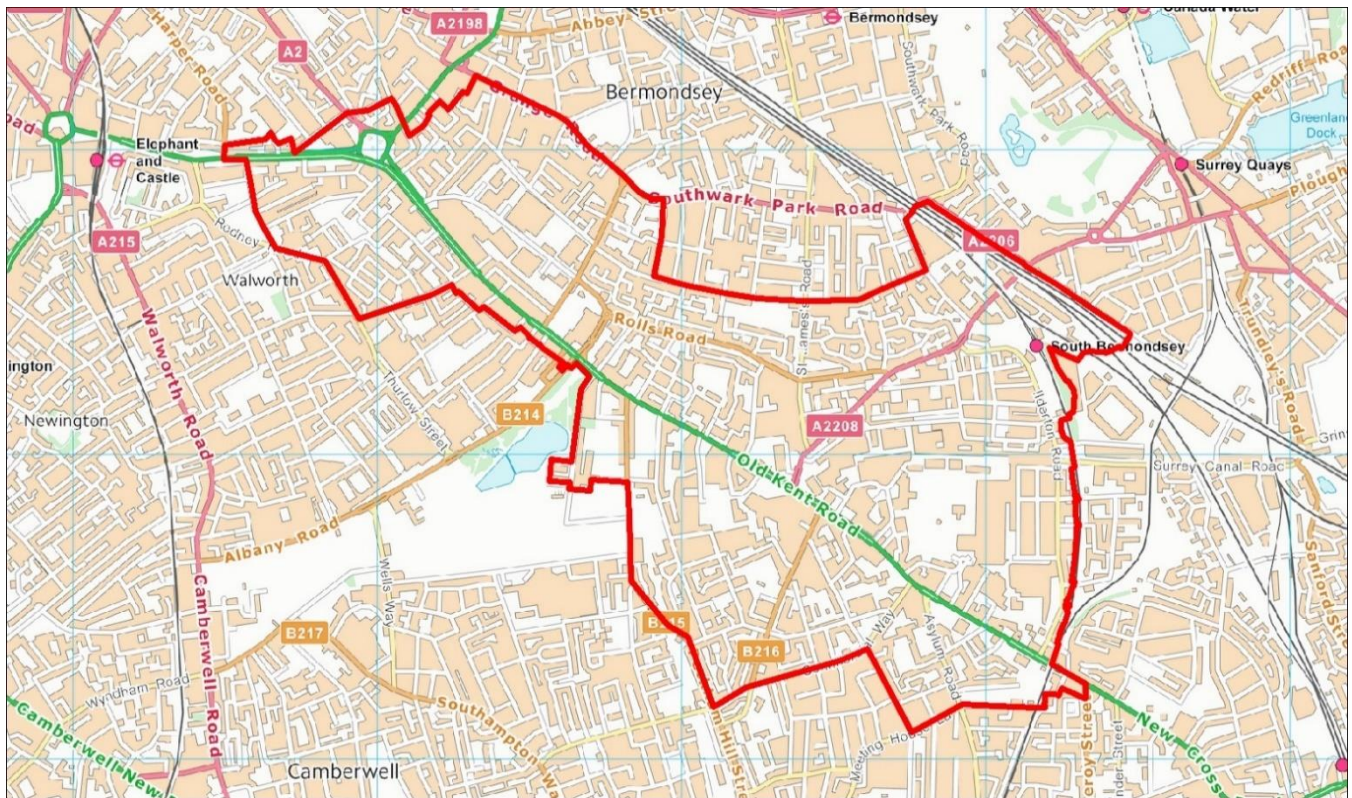


2 Introduction

2.1 Background and objectives

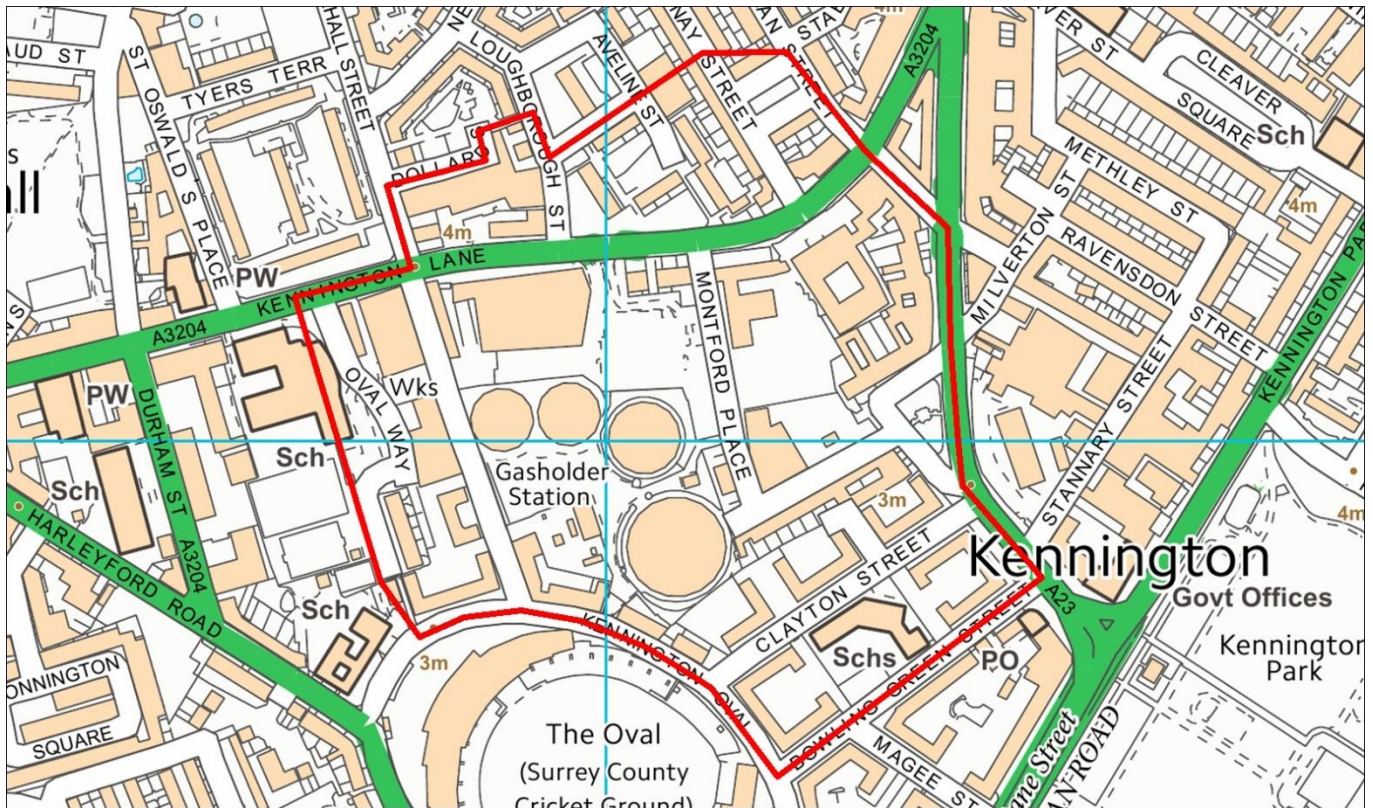
Ipsos MORI was commissioned by the London Borough of Southwark and the London Borough of Lambeth, with the support of Guy's and St Thomas' Charity, to conduct a programme of research investigating how to enhance the impact of planning policy on health outcomes and health inequalities in the two boroughs - specifically within the Old Kent Road Opportunity Area and the Oval and Kennington Development Area, shown in the maps and described below.

Figure 2.1: Old Kent Road Opportunity Area²



² For more information on the plans for the Old Kent Road see

http://www.2.southwark.gov.uk/downloads/download/4596/old_kent_road_area_action_plan

Figure 2.2: Oval and Kennington Development Area³

The Old Kent Road (A2), in Southwark, is one of London's key arterial routes. Less than a mile from London Bridge, it sits on the fringe of central London and is surrounded by areas of huge change including Elephant and Castle and Canada Water to the north, and Peckham, New Cross and Deptford to the south:

- It covers an area of 281 hectares extending from the New Kent Road to the north and the borough boundary with Lewisham to the south.
- It is a busy commercial thoroughfare, lined by high street shops, supermarkets, retail parks, industrial uses and residential homes. A lot of the land either side is currently industrial and warehousing.
- Altogether there are around 9,500 people working in the opportunity area in some 750 businesses and other organisations.
- It has a population of around 32,000 with great diversity, for example 43% of the population are born outside of the UK.
- Levels of deprivation are high, with several areas being in the 10% most deprived areas in the country.
- There are lower levels of full time employment than elsewhere in Southwark and a higher proportion in lower skilled occupations.
- There are 14 bus routes serving the Old Kent Road, South Bermondsey railway station is located in the north of the opportunity area and Queens Road Peckham in the south.
- There are 20 tenants and residents' associations (with halls, rooms or other facilities) and at least 53 premises for voluntary sector groups and 57 places of worship.
- There are 8 pubs (13 have closed in recent years) located in the area
- The area houses around 42 hot food takeaways (10 within 400m of Surrey Square Primary School and 5 within 400m of the City of London Academy).

³ For more information on the plans for Oval see <http://www.oakda.co.uk/>

Over the next 20 years the Old Kent Road Opportunity Area is expected to change. The two key drivers are the expansion of central London and its functions, and the construction of the Bakerloo Line extension. The Old Kent Road is at the core of the vision:

- The area will become increasingly part of central London, providing at least 20,000 new homes and 5,000 new jobs.
- The Old Kent Road will be revitalised and restored as a thriving high street with shops, business space, leisure, civic, cultural and community uses on either side.
- The retail parks and superstores will be replaced by development that provides strong, well-defined street frontages, making a better connected high street and neighbourhoods on either side.
- The road itself will be transformed into a modern boulevard with improved pedestrian areas, protection for cyclists and better bus infrastructure along its entire length, which will help accommodate growth prior to the Bakerloo line extension opening.
- There will be new train stations with better interchange with other modes of transport.
- Behind the Old Kent Road, the industrial and warehousing spaces will be transformed into mixed use neighbourhoods, served by new open spaces and green links. New homes will help foster mixed communities and include a range of size and mix of private and affordable homes, including council homes.
- Development will provide new schools, health and other facilities to support growth and contribute towards creating and reinforcing sustainable and healthy neighbourhoods.

The **Oval and Kennington Development Area (OAKDA)** is a five-hectare site located in north Lambeth between the Nine Elms and Vauxhall and Waterloo Opportunity Areas and (in Southwark) the Elephant and Castle Opportunity Area. It is close to the district centre at Vauxhall and increasingly recognised as 'central London' within Zone 1.

The site is bound by Kennington Lane, Vauxhall Street, the Oval and Montford Place and comprises 16 parcels of land in total. The largest land plot is the Kennington Gas Works which is owned by Scotia Gas Network (SGN). Other large sites are that of the Tesco store and car park and land currently owned and utilised by Transport for London (TfL) for the construction of the Northern Line Extension.

The Lambeth Local Plan 2015 designates most of OAKDA as a Key Industrial and Business Area (KIBA), which means the land is safeguarded for employment uses and residential development would not be permitted. However, the Local Plan recognises that the Gas Holders may become surplus to requirements during the lifetime of the Plan and that a masterplan or planning brief for the site and its vicinity may be needed to guide future development. The Council agreed a statement of common ground with the landowner and the landowner's development partner during the preparation and examination of the Local Plan, setting out an agreed way forward. This included a commitment by the Council actively to review the KIBA designation for this site as part of the forthcoming review of the Local Plan. It was also agreed that the Council would work collaboratively with Berkeley in the latter's preparation of a masterplan for the site.

In 2014 Berkeley started work on the master planning exercise for the five-hectare area surrounding the Gas Holders. The Council provided a clear steer to Berkeley that a masterplan must support the comprehensive development of the various sites, thereby maximising the benefits to be derived from development, which should include new employment floor space and associated job opportunities, new homes including affordable homes in accordance with Local Plan policy, on-site waste management capacity, open space and green infrastructure, a high quality public realm, connectivity to walking and cycling routes as well as public transport, and social infrastructure for local residents.

The boundary of the Masterplan area was extended beyond that of the Kennington Gas Works site, to take in the adjoining parcels of land (see appendix B for a map of the extended area of the site). The vision set out in the Masterplan

document is to: *'reclaim a large brownfield site and integrate it back into the Kennington and Oval neighbourhoods, enhancing and respecting the distinctive character of the local area and create a sustainable mixed use development that will provide jobs and homes in well-designed buildings, set in high quality public space'.*

The Health and Social Care Act (2012) places responsibility for reducing health inequalities and improving health outcomes firmly at the door of local government. The regeneration of the Old Kent Road and the area around the Oval offers the authorities a unique opportunity to develop the areas with a focus on health and well-being at the very heart of its re-design.

This programme of research was designed to inform how planning policies and regeneration strategies might be delivered to improve health and well-being, and sought to build on prior research and understanding such as that gained through a separately commissioned literature review. The requirement of the research was to contribute to an evidence base around health in general but with a particular focus on three key themes: **social interaction and isolation, health service provision and obesity and inactivity**. Robust, high quality, location specific and actionable insights were sought for each of these themes.

Social interaction and isolation

In order to help examine the impact that the built environment is or might be having on whether a person becomes socially isolated, Ipsos MORI were asked to help Southwark and Lambeth councils understand:

- how often residents are engaging or interacting with others, and where they go to meet others
- which places or spaces play the largest part in helping residents to develop relationship and feel part of the local community
- what opportunities there might be for developing further places, spaces and facilities to aid with social interaction
- whether residents perceive changes to the local area, and what impact these changes might be having on levels of social isolation

Health service provision

The provision of good quality and conveniently located health services is crucial to improving health outcomes for a population. Ipsos MORI were therefore asked to explore:

- residents' perceptions of their access to and the quality of local health services, along with views around potential improvements to local services
- whether there is appetite or demand among local residents for new models of health service provision, such as an integrated health facility
- how local health professionals perceive current service provision, and what improvements they might suggest

Obesity and inactivity

Thinking about future planning policy, the built environment can have significant impact on the likelihood of residents cycling or walking to their destinations. Similarly, planning policy can help to regulate access to healthy or unhealthy food. Ipsos MORI were therefore asked to examine:

- current attitudes among residents towards walking, cycling and healthy eating
- what changes might be helpful in encouraging residents to exercise more and eat more healthily
- how the built environment and provision of healthy food is affecting school children, and what might be done to encourage them to exercise more and eat more healthily.

2.2 Methodology

In order to be able to fully examine the stated research objectives, this study was comprised of two strands – an initial quantitative strand and a qualitative stage.

The quantitative research sought to provide an overview of the various aspects of the research, covering all three of the key themes. The qualitative research built on these findings, delivering in-depth and more targeted insight into the various research objectives.

Quantitative methodology

The methodology for the quantitative element of this research comprised of a face-to-face, in-home, survey of 352 residents aged 16+ of the Old Kent Road Opportunity Area and 101 residents ages 16+ of the Oval and Kennington Development Area. Fieldwork was undertaken 19th October and 12th December 2016, and the average interview length across the two areas was 21 minutes. Interviews were conducted using CAPI (computer-assisted personal interviewing).

The survey was conducted using a quota sampling approach however, the approach taken in each of the two areas differed slightly due to their different sizes. In the Old Kent Road Opportunity Area, a selection of sample points were chosen using a stratified approach to ensure the areas selected were representative of the area as a whole. As the Oval and Kennington Development Area is significantly smaller all addresses were selected, along with the adjoining streets. Quotas were set on key demographics (based on the 2011 census) to ensure that the achieved interviews were representative of the local areas.

At the analysis stage, data from the Old Kent Road Opportunity Area were weighted to the population profile of Southwark in terms of age, sex and working status, to counteract any non-response bias. Due to the small size of the sample, data from the Oval and Kennington Development Area were not weighted as there is no known population profile for this very small area and applying Local Authority level weights may have distorted the figures.

Qualitative methodology

Qualitative research took place across the three themes of the research, exploring current perceptions, attitudes and behaviours relating to social interaction, diet and exercise and local health services. This gave complementary insight into the findings from the quantitative research. Fieldwork for the qualitative strand took place between 6th February and 22nd March 2017.

a. The local area, social interaction and isolation

Two workshops were conducted on social isolation with 20 participants in each, one with residents of the Old Kent Road Opportunity Area and one with residents of the Oval and Kennington Development Area. Participants were recruited by Ipsos MORI's qualitative recruitment team, who contacted those who had taken part in the quantitative study and who had agreed to be re-contacted for further research. A £50 incentive was offered to participants to thank them for their time. The groups were recruited to ensure there was a mix across gender, age, ethnicity, working status, as well as length of time living in the area.

In addition, a focus group was conducted with the members of 'Mumspace', a community group for mothers based in Camberwell, on social interaction in the local area. 10 participants were recruited through the co-ordinator of Mumspace, and each was offered a £25 incentive.

b. Diet and exercise

Six focus groups were conducted with school children on the themes of healthy eating and walking. Three of these focus groups took place in schools within the Old Kent Road Opportunity Area and three took place in schools within the Oval and Kennington Development Area. Details of the schools are provided in appendix F of this report. Each focus group had 10-12 participants, and the school children involved covered primary and secondary age groups. Schools were contacted by the research team and were offered a £200 incentive for their participation.

c. Local health services

A focus group was conducted with residents of the Old Kent Road Opportunity Area, involving discussion of local health services and discussing the possibility of a new, integrated health facility being opened in the local area. This focus group involved 7 participants who had agreed to be re-contacted following the quantitative survey. Participants were recruited by Ipsos MORI's qualitative recruitment team and were offered a £40 incentive to thank them for their time. Again, this group was recruited to ensure there was a mix across gender, age, ethnicity, working status, and length living in the area.

In addition, five depth interviews were conducted with primary care health professionals working in both the Southwark area and at the West Norwood Health and Leisure Centre, about local health services. Each health professional was offered a £60 incentive or charity donation.

Discussion guides used in each of the above elements are included in the appendices to this report.

Following the conclusion of fieldwork, and after delivery of the first draft report, an action planning workshop was held with members of both Southwark and Lambeth councils. Individuals with expertise of both public health and planning were involved in this discussion, and insights from the meeting are included within the conclusions chapter of this report.

2.3 How to read this report

Structure of the report

This report comprises the findings from both the quantitative and qualitative elements of this research. An executive summary is provided in chapter one, which offers an overview of the key findings from the research and identifies associated implications.

Chapter three and four of this report detail findings related to the social isolation strand. This covers perceptions of the local area along with current attitudes and behaviours regarding social interaction and isolation.

Chapter five examines those aspects of the research related to the theme of health services. Residents' attitudes towards the provision of local health services are explored, along with views around integrated health facilities.

Chapters six and seven look at the theme of obesity and inactivity, exploring attitudes and behaviours relating to healthy eating and exercise.

The overall conclusions and recommendations sit at the end of the report as a stand-alone chapter (chapter eight).

Interpreting the findings

Quantitative findings: The participants of the survey are people aged 16 and over living in either the Old Kent Road Opportunity Area or the Oval and Kennington Development area. This is not referenced in full throughout this report, but when the report refers to 'people' or 'residents this should be understood as 'people living in Old Kent Road Opportunity Area or the Oval and Kennington Development area who participated in the survey'. The sampling and weighting processes applied mean participants are representative of the people living in these areas. More detail about this can be found in the appendices. Please note that, due to small sample sizes for the Oval and Kennington Development Area, data from this area are not broken down by subgroup and are only discussed at the overall level

Qualitative findings: It is important to note that qualitative research is used to explore why people hold particular views, rather than to estimate or quantify how many people hold those views. Such research is intended to be illustrative rather than statistically representative of a wider population and, as such, does not permit conclusions to be drawn about the extent to which findings can be generalised to the wider population. With this in mind, when interpreting the qualitative findings from this research, it should be remembered that this element of the research is not based on quantitative statistical evidence but, like all qualitative research, on a small number of people who have discussed the relevant issues in depth.

Analysis tools

In order to give further insight into the findings for mental wellbeing among residents of both areas, the survey included the shortened form of the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) in order to provide a mean mental wellbeing score for each of the analysis variables discussed. These mean scores are intended to serve as a comparative measure through which the mental wellbeing scores of one group can be compared to those of another, and can on their own provide no insight into mental wellbeing. Please see the appendices for further details on WEMWBS.

Technical note

Where figures in this report do not add up to 100%, this is the result of computer rounding or multiple responses. An asterisk (*) indicates a score less than 0.5%, but greater than zero. Unless otherwise indicated, results are based on all participants. Answers with a base size of less than 100 are to be treated with caution. For this reason, subgroup analysis is not provided for the Oval and Kennington Development Area sample (where the total sample size is 101).

Results are subject to statistical tolerances. Not all differences between the overall results and those for individual sub-groups will be significant. The descriptive sections of this report aim to highlight where findings between different sub-groups of residents are statistically significant. A guide to statistical reliability is provided in [Appendix D](#).

2.4 Acknowledgements

Thanks to Andrew Ruck and Clizia Deidda at Southwark Council, and Bimpe Oki and Dominique Barnett at Lambeth Council for their help throughout the research, and to Guy's and St Thomas Charity for funding the research. Thanks also go to Rebecca Scott, Mark Kewley and Rosemary Watts from NHS Southwark CCG for providing their advice on health services issues. Thanks to Helen Pineo from BRE for conducting the literature review, and Yvonne Rydin (UCL), Ravi Baghirathan and Danny McDonnell (NHS Healthy New Towns), Simon Bevan and Doug McNab (Southwark Council) and Catherine Carpenter (Lambeth Council) for guiding the research as the project steering group. Finally, we would like to thank the residents in both areas, as well as the schools whom facilitated access to speak with young children as without both of these, this research would not have been possible.

The local area



3 The local area

Looking at the broad theme of social integration, both aspects of the research sought to understand key perceptions of the two areas among local residents. This section explores these views, and also looks at the length of time the residents of both the Old Kent Road Opportunity Area and the Oval and Kennington Development Area tend to have lived in the local area.

The two areas are made up of both long residing residents and those who are newer to the area. In particular, in the Old Kent Road Opportunity Area the latter tend to be younger people.

Whilst in both areas there is a good proportion of people who report feeling a sense of belonging, in the Old Kent Road Opportunity Area, where we can look at differences by subgroups, those who have lived in the area for longer are more likely to report feeling a sense of belonging to it.

The qualitative research highlights that those who have lived in the Old Kent Road Opportunity Area for long enough to have seen it change over time feel that it has lost its sense of community and tightness. Money coming into the area and the regeneration of it, as well as the constant flow of people moving in and out, were seen as possible causes for this. In the qualitative discussion in Oval and Kennington, the area was described as an 'in between' kind of place; densely populated with housing and known for the cricket ground, but with little to do for those who live there.

Whilst many residents in the quantitative research report that both areas are places where people get on well together, the qualitative research points to a desire for a high street (or village-like) feel which is missing in both the Old Kent Road Opportunity Area and the Oval and Kennington Development Area and would encourage local people to interact more with one another.

On the whole, in the survey residents in both areas report feeling safe during the day time however this is not necessarily the case for night time. The qualitative research tells us that poor street lighting and dark parks are issues for both adults and children in both areas, as were busy roads. Additionally, both adult residents and school children in the Oval and Kennington Development Area mentioned the many cyclists and hazardous pavements (because of work being done to them) when talking about personal safety in the area.

3.1 The local population

Residents of the Old Kent Road Opportunity Area tend to have lived there for some time, with two thirds (66%) having lived in the local area for five or more years. **In fact, close to half (46%) have lived within a 15-20 minute walk of their current address for more than 10 years.** This aligns with data from the National Household Survey 2015-16 suggesting that the average length of time that people in England have lived in their current home for is 14.1 years.⁴ A significant

⁴ English Household Survey 2015-16, available at <https://www.gov.uk/government/statistics/english-housing-survey-2015-to-2016-headline-report> (last accessed 3rd May 2017)

proportion are, however, newer to the area. One third (34%) have lived in the local area for fewer than five years, and close to two in ten (16%) have lived in the local area for less than one year.

As might be expected, those who are newer to the area are more likely to be younger, with almost **one in five (18%) of those aged 16-34 having lived in the local area for less than six months**. Older people, meanwhile, are more likely to have lived in the area for a longer period of time. Four in five (83%) of those aged 55 and over have lived in the area for more than ten years.

Participants living in the Oval and Kennington Development Area are evenly split between those who have lived in the local area for a longer or shorter length of time. **Half (50%) say that they have lived within a 15-20 minute walk of their current address for five years or more, while the same proportion say that they have lived in the area for fewer than five years**. Two in five (40%) have lived in the area for more than ten years, while one in five (17%) have lived in the area for less than a year.

3.2 Perceptions of the local area

The quantitative research looked into specific perceptions around community feeling in the local area, how well residents perceive their area to be one where people get on well together, and how safe the areas feel both in the daytime and after dark. Across both the Old Kent Road Opportunity Area and the Oval and Kennington Development Areas residents are positive across all of these measures – although we do see fewer people saying that they feel safe after dark than we see responding positively to the other measures.

Sense of community

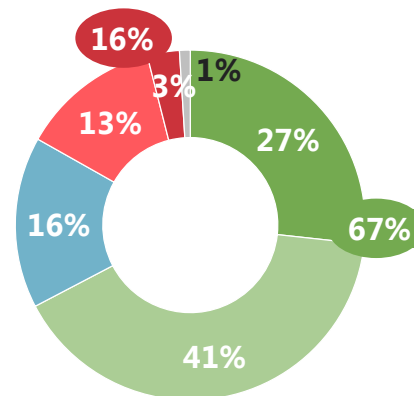
Around two thirds (67%) of those living in the Old Kent Road Opportunity Area agree that they feel a sense of belonging to their local community, with one quarter (27%) strongly agreeing. Fewer than two in ten (16%) say that they do not feel a sense of belonging. According to the UK Household Longitudinal Survey, in the financial year ending 2012, 63% of people aged 16 and over nationwide reported that they felt that they belonged to their neighbourhood. According to the study, people in London are least likely to say that they feel like they belong to their neighbourhood (60% in London say this).⁵

⁵ Understanding Society, from the UK Household Longitudinal Study, available at Understanding society, http://webarchive.nationalarchives.gov.uk/20160105160709/http://www.ons.gov.uk/ons/dcp171766_398059.pdf (last accessed 3rd May 2017)

Figure 3.1: Agreement with the statement 'I feel a sense of belonging to my local community' – Old Kent Road Opportunity Area

To what extent do you agree or disagree with the following statement about your local area?
I feel a sense of belonging to my local community

■ Strongly agree ■ Tend to agree ■ Neither agree nor disagree
■ Tend to disagree ■ Strongly disagree ■ Don't know/not sure



Base: All living in the Old Kent Road Opportunity Area (352)

Feeling a sense of belonging to the local community (in the Old Kent Road Opportunity Area) seems to be linked quite strongly to both age and length of time living in the area – although, as described in the previous section, there is significant overlap between these two groups. **Those who have lived within a 15-20 minute walk of their current address for five or more years are significantly more likely to agree that they feel a sense of belonging to the local community than those who have lived in the area for fewer than five years (72%, compared with 59% who have lived in the area for fewer than five years).** Among those aged 55 and over, close to eight in ten (78%) agree that they feel a sense of belonging (compared with 67% overall).

Unsurprisingly, feeling a sense of community also appears to be linked to whether or not people think that there are **enough places in the local area to meet with others**. Among those who think that there are enough places in the area to meet, three quarters (76%) agree that they feel a sense of belonging to their local community (compared with 59% of those who do not think that there are enough places to meet).

Those who live in housing that is rented from a local authority or from a housing association are significantly more likely than people overall to say that they do not feel a sense of belonging to their local area (20% disagree that they feel a sense of belonging, compared with 16% overall) – as demonstrated on the infographic on page 106. While the reasons for this are unclear from the research, it seems as though this is not related to other measures linked to feeling a sense of community. For example, those living in accommodation that is rented from a local authority or housing association are no more likely than others to say that there aren't enough places to meet in the local area (29% of those renting from a local authority or housing association say there aren't enough suitable places to meet, compared with 25% of those with other housing situations). Understanding and addressing the root cause of this difference in community feeling between

those in local authority or social housing and those who rent privately or own their own property could be an important area of focus in future planning.

From the qualitative research, Old Kent Road Opportunity Area residents held mixed views about the local area. Whilst viewed as being well connected (close to London and with good transport links), those who had lived in the area for a longer time expressed that **it has completely lost its sense of community and tightness**. This, was perceived to be in part due to the money and urban regeneration coming into the area, which was not seen to benefit local people, as well as the constant flow of people moving in and out. This sense that the local area is changing is explored in more depth in the next section.

"Where there were pubs and communities knew each other, now you're getting wine bars and things, it's not community socialising and that kind of thing...But on the up side, it is good because bringing more money into the area, but on the downside it doesn't really benefit people in the local area" (Resident, Social Isolation workshop, Old Kent Road Opportunity Area).

"There is money coming in but it's not benefitting local people, if you're regenerating the local area to make jobs, why not employ the local people." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area).

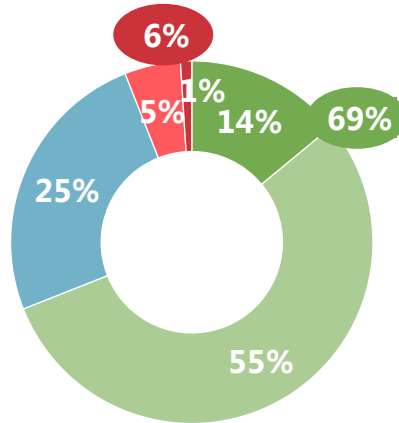
"How do you get a community when people are moving in and out, I may not even know my neighbour's name." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area).

Participants living in the Oval and Kennington Development Area are also positive about feeling a sense of belonging to their local community, with just over two thirds (69%) agreeing that they do feel a sense of belonging. This compares with fewer than one in ten (6%) who disagree.

Figure 3.2: Agreement with the statement ‘I feel a sense of belonging to my local community’ – Oval and Kennington Development Area

To what extent do you agree or disagree with the following statement about your local area?
I feel a sense of belonging to my local community

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don't know/not sure



Base: All living in the Oval and Kennington Development Area (101)

In the qualitative research, residents in the Oval and Kennington Development Area were positive about the local area in the sense that it is well connected (close to central London, good transport links), however it was often described as an **“in-between” kind of place**, in the sense that it is made up of a lot of cramped housing, the cricket ground but lacking in things to do.

The area was also described as very mixed in terms of the makeup of the population. Unemployed people to MPs, with a large Portuguese community. The area was described as ‘friendly’ by some, however others felt that the flow of people in and out, coupled with the multicultural nature means that people don’t stay long enough to get to know one another:

“Well no I don’t know many of my neighbours; subletting; people move on; speak a different language and you don’t often see them...people coming and going, no one stays long enough to get to know them” (Resident, Social Isolation workshop, Oval and Kennington Development Area).

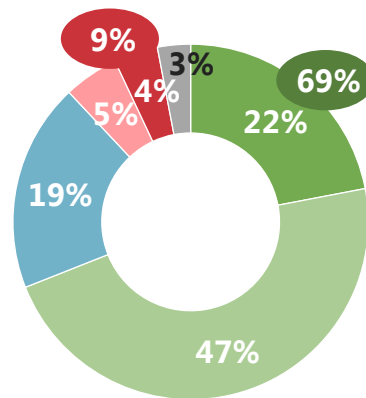
Getting on well together

Tying in with the feeling of community, more than two thirds (69%) of those living in the Old Kent Road Opportunity Area agree that their local area is a place where people get on well together. Fewer than one in ten (9%) disagree.

Figure 3.3: Agreement with the statement ‘The local area is a place where people get on well together’ – Old Kent Road Opportunity Area

To what extent do you agree or disagree with the following statement about your local area?
The local area is a place where people get on well together

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don't know/not sure



Base: All living in the Old Kent Road Opportunity Area (352)

Feeling a sense of belonging to the local area is linked to feeling that the local area is a place where people get on, and to the view that there are enough places in the area to meet. Among those who feel a sense of belonging to the local community, eight in ten (82%) agree that the local area is a place where people get on well (compared with just 31% of those who don't feel a sense of belonging). Similarly, close to three quarters (74%) of those who say that there are enough places to meet in the local area agree that the local area is a place where people get on well together (compared with 58% who disagree). As might be expected, this suggests that provision of places to meet up with others is an important consideration in helping to foster a greater sense of getting on well together.

In the qualitative research, Old Kent Road Opportunity Area residents were on the whole positive about the amenities in the area. There are ample supermarkets, cafes and pockets of cocktail/wine bars that have cropped up in or nearby to the Old Kent Road area in recent times, however a lack of nice bars and community pubs was also noted by some and this acts as a barrier to meeting up with others for certain people. Those who had lived in the area for longer recognised that the Old Kent Road lacks the 'high street' feel it once had, for example by the closure of the banks and the lack of local shops run by local people. It was noted that the lack of a high street means that you are now less likely to bump into people and meet with local people, than you once were.

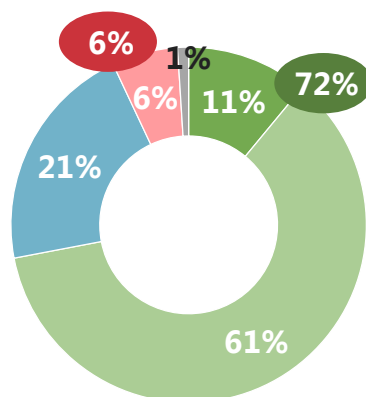
Participants in the Oval and Kennington Development Area also believe that their local area is a place where people get on well together. Close to three quarters (72%) agree that this is the case, while around than one in twenty (6%) disagree.

Figure 3.4: Agreement with the statement ‘The local area is a place where people get on well together’ – Oval and Kennington Development Area

To what extent do you agree or disagree with the following statement about your local area?

The local area is a place where people get on well together

■ Strongly agree ■ Tend to agree ■ Neither agree nor disagree
■ Tend to disagree ■ Strongly disagree ■ Don't know/not sure



Base: All living in the Oval and Kennington Development Area (101)

The physical makeup of the Oval and Kennington Development Area (lots of housing but a lack of bars, restaurants and cafes), coupled with where it is on the map, was viewed by residents in the qualitative research as a barrier for local people to meet other local people, and for residents to spend time in the area. People leading busy lives, along with the fact that social networks are often so geographically dispersed, were also noted as reasons why the area lacks a sense of community. This view was not universal, however.

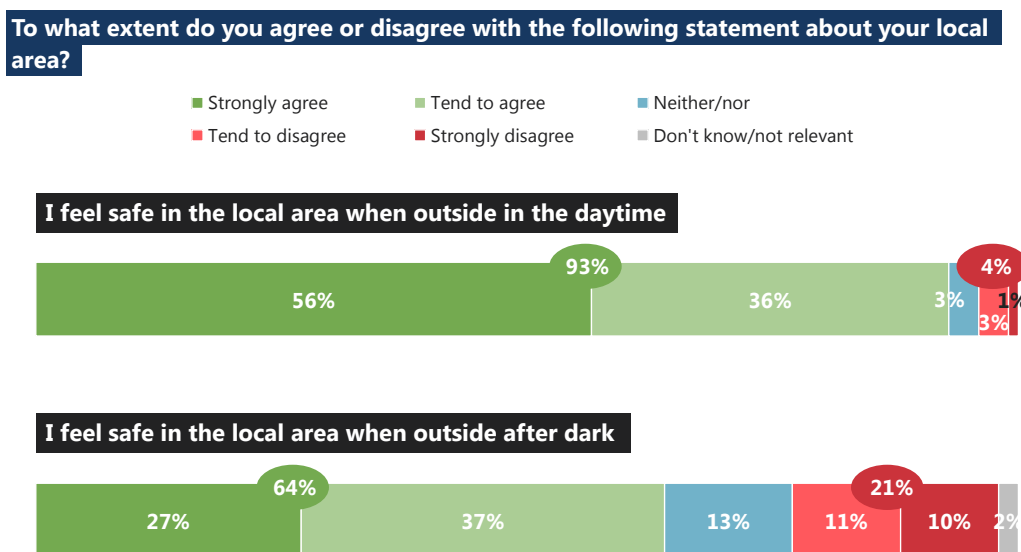
As with the qualitative findings from the research in the Old Kent Road Opportunity Area, there was a **general sense of a desire for more of a village-like, or high-street feel among Oval and Kennington Development Area residents**. Residents talked about wanting the amenities you would expect on a small high street (banks, cafes, fewer Tesco Metros and more local shops). Oval and Kennington Development Area residents were, however, clear that they wouldn't want the area to change so much that it became as busy and built up as places like Clapham or Brixton. They were also clear that they didn't want the area to be taken over by expensive housing which will end up pushing existing people out:

"I am worried they're going to build rich people's homes. I am staying, I want the right to buy. Poor people are getting kicked out to go North, why should we be kicked out.? Right to buy my flat, to put in a foothold" (Resident, Social Isolation workshop, Oval and Kennington Development Area).

Feeling safe in the local area

In addition to looking at general perceptions of the local area, the research asked specifically about feelings of safety. In line with the positive findings seen earlier, an overwhelming majority (93%) of participants in the Old Kent Road Opportunity Area feel safe in the local area outside in the daytime. We do, however, see a significant lower proportion agreeing that they feel safe when outside in the local area after dark, with only around two thirds (64%) saying this.

Figure 3.5: Agreement with the statements ‘I feel safe in the local area when outside in the daytime’ and ‘I feel safe in the local area when outside after dark’ – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

Across both these measures, those who walk for more than three hours in a typical week are more likely than those who walk fewer than three hours to strongly agree that they feel safe. Looking at feelings of safety in the daytime, two thirds (64%) of those who walk three hours or more strongly agree that they feel safe outside in the daytime, compared with half (50%) of those who walk for fewer than three hours. Similarly, one third (32%) of those who walk for more than three hours strongly agree that they feel safe outside after dark, compared with one in five (23%) of those who walk for fewer than three hours. While it is not possible to say which way round this relationship works, it appears that there is some link between length of time spent walking in a typical week and the tendency to feel safe in the local area.

Looking specifically at feelings of safety when outside in the local area after dark, **men are far more likely than women to say that they feel safe** (72% of men say that they feel safe when outside in the local area after dark, compared with 56% of women). Younger people are also far likely to feel safe outside after dark (71% of those aged 16-34 say that they feel safe, compared with 64% overall).

In the qualitative research, Old Kent Road Opportunity Area residents talked about feeling safe in the area during the day time, however they were mixed in relation to whether they feel safe at night. Some talked about how the area has improved over the last few years and now feels safer, whilst others said that they would avoid walking around at night if they didn't need to. School children in the Old Kent Road Opportunity Area also mentioned how they don't like walking around at night. **Poor street lighting, and dark parks, were mentioned in relation to concerns over personal safety by both residents and school children:**

"Sometimes I go from the Old Kent road to the Peckham Rye road, it's really dark, quite dark, not many lights. Some evenings its dark, sometimes even the UBER services or pizza deliveries, they don't want to come down there, they say to come to the main road...there is a place that is empty and a garden, that is full of bushes, it is nice area but full of bushes, no space for kids or for children, so we and our children are playing around it. Especially in the summer, the bushes are quite high, and they are not being maintained" (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area).

"No light in burgess park it's pitch black, it's okay if there's more than one person" (Pupil, Year 10, Old Kent Road Opportunity Area)

In the qualitative research, residents also talked about the roads and traffic when discussing personal safety. Old Kent Road Opportunity Area residents, for example, occasionally noted that the **Old Kent Road itself is dangerous to cross**:

"There is that one roundabout, there is no lights, and there is passing, it's like across the motorway bit, just after ASDA, you get trapped in the middle of the road. That is just before that little charity shop. In between the charity shop and ASDA on the Old Kent Road" (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area).

Whilst women in the Mothers group, as well as those with children in the workshops, reported that crossing with prams and with children can be difficult:

"When you're doing the school run in the mornings, you have to cross that bit there near ASDA, you have to come back on yourself, and you have to cross to the middle just to cross again and like come back on yourself" Resident, Social Isolation Workshop, Old Kent Road Opportunity Area).

School children too raised safety concerns around certain crossings (particularly around Tesco), with some being scared of the road and the busy traffic:

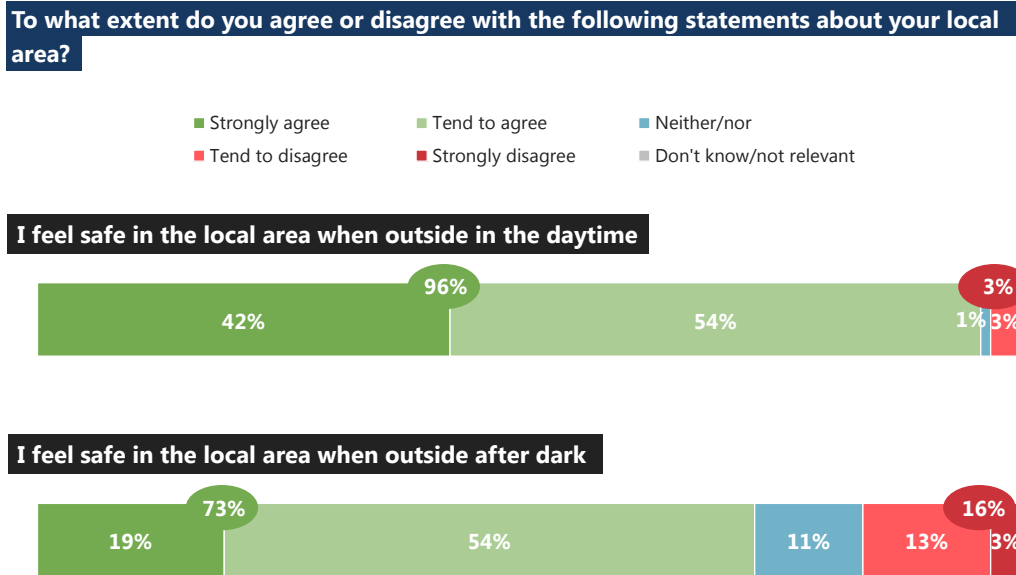
"Green man never shows around Tesco's" (Pupil, Year 10, Old Kent Road Opportunity Area).

"Don't like walking around Tesco's – so many crossings" (Pupil, Year 10, Old Kent Road Opportunity Area).

[In relation to disliking Tesco as a place to manoeuvre around] *"because of the cars coming in the petrol station"* (Pupil, Year 10, Old Kent Road Opportunity Area).

A similar pattern to that of the Old Kent Road Opportunity Area emerges when looking at perceptions of safety among residents of the Oval and Kennington Development Area. Almost all (96%) agree that they feel safe when outside in the daytime, while close to three quarters (73%) say that they feel safe when outside after dark.

Figure 3.6: Agreement with the statements ‘I feel safe in the local area when outside in the daytime’ and ‘I feel safe in the local area when outside after dark’ – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

As with the qualitative research findings for the Old Kent Road Opportunity Area, residents were mixed in terms of whether they felt safe at night however most agreed that it was safe during the day time. **Poor street lighting was mentioned, as were youths and gangs hanging around at night by both residents and school children in the area:**

“That’s [feeling safe] probably day time, but what about night time? You don’t see the gangs until night time.”
 (Resident, Social Isolation Workshop, Oval and Kennington Development Area).

“Depends on how long it takes [to walk], it depends on the time, past 7 or 8 it feels less safe, we will stay at school for event.” (Pupil, Year 11, Oval and Kennington Development Area).

Similarly, Oval and Kennington Development Area residents and school children raised issues with busy roads. The number of buses coming through the area makes the roads feel unsafe. **The area was also noted for being a ‘cycle through-way’, which raises safety issues for pedestrians.** The pavements were recognised by both residents in the social isolation workshop and by children in the school research as being dangerous because of the continuous work on them, meaning that you often have to walk on the road to avoid the works.

Giving unpaid help in the local area

A further aspect of views and feelings of the local area examined by the research is the proportion of people who are involved in volunteering with local groups, clubs or organisations. Only a minority (17%) of those in the Old Kent Road Opportunity Area have given unpaid help one of these in the last 12 months, while four in five (82%) have not.

Those who have given unpaid help to a local group, club or organisation in the past 12 months tend to have higher mental wellbeing scores than those who have not (mean score of 25.12 compared with 24.03). As you might expect, and possibly linked to these higher wellbeing scores, those who see other people once a week or more are more likely to have given unpaid help to a local group, club or organisation recently (21% who see others once a week or more have given unpaid help, compared with just 6% of those who see people less frequently).

Among participants in the Oval and Kennington Development Area, close to two in ten (17%) have given unpaid help to a local group, club or organisation in the last 12 months. Eight in ten (83%) have not given unpaid help.

3.3 Changes in the local area and gentrification

As discussed above, in the qualitative discussions, participants in both Oval and the Old Kent Road area agreed that the area had been going through a period of transition. Participants who had spent a number of years living in the area, some growing up there, described a **lost sense of community cohesion in both the Old Kent Road and Oval**. They identified a number of reasons for this, focusing largely on what they called s 'gentrification' and the transient community it brought with it, but also a lack of places to go and meet people.

Gentrification was something heavily associated with both areas, particularly because they are so well connected to central London and increasingly seen as desirable places to live. There was a strong sense among people who lived in the area that the community was being slowly replaced by something new. They felt that the area was being irreversibly changed from a place where people are born and bred in the same place and grew up together, to one where disparate and disconnected groups live amongst each other.

"Economically, people moving in are not the people born and bred here – now those people moving in have not felt the struggle of building this place, they've not made the place how it was and how it really is still, in the sense of the community." (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

Participants from both Southwark and Lambeth pointed to social housing being replaced by private rental accommodation as one indicator of gentrification in the area, with high rents and the cost of living going up each year. They felt that poorer people who once thrived in the two locations were being priced out, and would one day not be able to afford to live in the areas. This was a particular problem because both areas are central, well connected, and increasingly seen as desirable places to live.

"I'd definitely say that in 16-17 years that I've lived very near the gasworks, it has gradually become more and more gentrified. I'm a lease holder – a year ago my building was given a potential bill for £32,000 for works I didn't need or want for my home...it left a lot of people in an awkward position." (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

"Southwark council's policy of making new housing by knocking down Heygate estate has caused a lot of tension, because it's forcing some people out of their area, and preventing people from getting back into their local area" (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

Participants were concerned that as a result of homes becoming more expensive in the local area, local amenities such as restaurants and shops were also becoming more expensive; increasingly designed to cater for the wealthier demographic who were moving in. They gave the example of restaurants and pubs becoming more expensive, modern gyms for young professionals that cost more than a lot of locals could afford, and changing patterns in how local people shop meaning that market stalls on East Street are disappearing.

"There's a pure gym – bit like a twenty-something's gym. It is expensive though, the one by Oval, the one I could walk to, is expensive, so I joined the one I have to drive to." (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

"East street market - a lot of stalls have disappeared because they can't afford being there, people who used to shop there are now going to Waitrose. This market will disappear in 10 years' time". (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

Crucially, these changes were not seen by the participants as improvements benefitting the local people already living in the area, and instead replacing it with something entirely new. This was coupled with their perception that the regeneration plans were not bringing new jobs to the local area, so residents failed to see any benefits for themselves.

"It's all well regenerating somewhere, but if you're not employing the local people you're dismantling the whole area and building a new area." (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

These changes to the local area were having an impact on people's perceptions of the community around them; participants in Oval and the Old Kent Road felt that the community was now highly transient, not giving people enough chance to develop connections with others around them. They compared this to their experiences in the area when they were younger when they felt it was easier to develop links with neighbours and others in the local area.

"15 years ago you'd move in and have friends before you know it – now you don't." (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

There was acknowledgement as well that this reflected a general trend in society; participants agreed that perhaps people were more interested in their own lives, mobile phones, or social media than they were in interacting with others in the community.

"When I was a kid there was no patch of grass where you didn't see someone playing football on it. Now, it's a thing of the past – people have headphones on and they're looking at their screens, they're just oblivious – it's the way the society is changing, more so than the area itself." (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

Social integration



4 Social integration

This section looks at how the residents of the Old Kent Road Opportunity Area and the Oval and Kennington Development Area spend their time, looking specifically at where they go, who they speak to and places they use for social interaction. This section is also focused on what would enable residents to interact with others more.

The majority of residents in both areas have contact with people they do not live with at least once a week, whether this is face to face or on the phone. However, there is a small minority of people who do not have contact with anyone.

In the qualitative interviews, it is clear that the area is associated with decreasing levels of social cohesion, and participants felt that the population is in a state of flux as the area undergoes what they defined as gentrification. This has an impact on people's perceptions of the sense of community in Oval and the Old Kent Road, which they feel is deteriorating.

A lack of places to go and things to do in the local area was identified as a particular problem. Residents felt there were not enough of a high street in the two areas, including small shops, or affordable cafes, restaurants, or pubs for local residents to congregate in. They also identified a lack of things for families to do together, or for young people to get involved in, and suggested that more community groups or leisure facilities could remedy this. With both areas being so well connected, residents are frequently going outside the immediate area to meet friends, shop, and use leisure facilities.

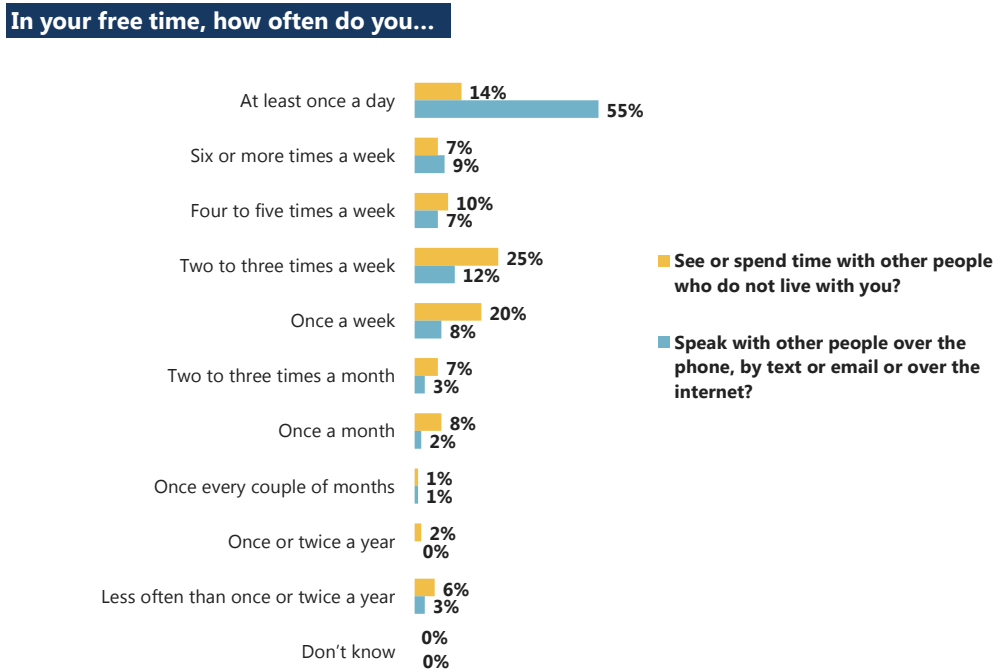
Residents are more likely to say that changes to personal circumstances such as having more time or money, would make getting out more attractive to them more so than changes to the local area. However, they identified a number of improvements to the local area including developing the areas around the Old Kent Road and Oval to make space for community spaces such as allotments and sporting activities for younger residents. Particularly families with young children want a place to meet other parents, and a safe environment for their children to play. They also want a high street with local amenities –for example, more pubs or affordable cafes for the community. Finally, outdoor spaces were received positively and residents wanted to see more use of them through a community garden or allotment.

4.1 Levels of social integration

People living in the Old Kent Road Opportunity Area generally enjoyed frequent social contact. **The majority (76%) of people see or spend time with people who they do not live with at least once a week**, with a quarter speaking to people two to three times a week (25%). In this area, **nine in ten (90%) speak with others who they do not live with over the phone, by text or on social media sites at least once a week.**

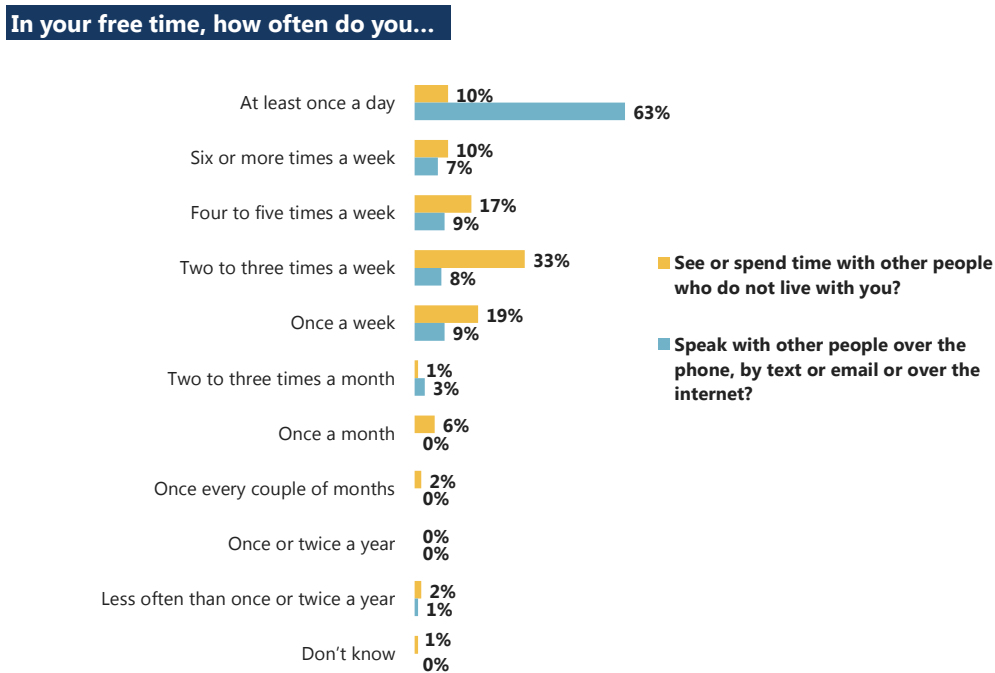
People are more likely to speak to people on the phone or by text/social media at least once a week than they are to see others who they do not live with at least once a week (90% compared to 76%). The majority (55%) of participants communicate with others over the phone or internet at least once a day.

Figure 4.1: Frequency of seeing or speaking with others – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

A similar pattern is evident among participants living in the Oval and Kennington Development Area, where the majority (88%) of residents see or spend time with people who they do not live with at least once a week, and a third (33%) see people two to three times a week (33%). Very few residents (4%) say that they see others less than once a month. Mirroring the picture in Southwark, nine in ten people (96%) in the Oval and Kennington Development Area speak with others who they do not live with over the phone, by text or on social media sites at least once a week. The majority (63%) of people communicate with others in this way at least once a day, while just one percent of people speak to others with the use of technology on a monthly or yearly basis.

Figure 4.2: Frequency of seeing or speaking with others – Oval and Kennington Development Area

Base: All living in the Oval and Kennington Development Area (101)

Despite these good levels of social interaction, there is a small minority (8%) of residents in the Old Kent Road who only see or spend time with others once a month. Perhaps surprisingly, this group of people have on average a mental wellbeing score of 24.96, which ranks second highest, second only to those people who see or spend time with others four to five times a week (26.15). This implies that the relationship between social interaction and mental wellbeing is a complex one, involving a number of different factors.

There is also a small group of people (27%) in the Old Kent Road area who see others and also speak with others over the phone, email or social media less than once a week. Those in this group tend to have lived in the area for a long time, suffer from a long-term illness, disability or infirmity, and rent from the Local Authority.

There is a similar group of people in the Oval and Kennington Development Area, where nearly two in ten (18%) of residents see others and also speak with others over the phone, email or social media less than once a week. Whilst these are relatively small groups of people, they are important nonetheless and should be considered for future planning decisions, given how socially isolated they appear to be.

4.2 Going out in the local area

When residents of Old Kent Road Opportunity Area spend time with people who they do not live with, the most popular past time was meeting in a restaurant or cafe (31%) with a similar proportion (27%) spending time with others in someone else's home. Other popular meeting locations for residents include parks, pubs and shopping centres.

Young people between the ages of 16 and 34 are the age group most likely to meet in restaurants or cafes (45%). Perhaps unsurprisingly, those in Old Kent Road Opportunity Area who consider themselves to be financially comfortable are significantly more likely to meet people in cafes and restaurants than those who are not (38% compared to 23%).

Correspondingly, people who are not working are more likely to meet in a park or green/open space (28%) or visit someone else's home (29%). Therefore, **an important planning implication will be to consider ensuring that there are a range of different meeting places that cater for all types of people, including affordable places to eat and drink.**

People with self-reported very bad health are most likely to meet others in local shops (37%) or other people's homes (34%). **An important consideration may therefore be how provision can be made for people in poor health or with disabilities to meet and engage with others. Issues of accessibility, for example, might be important here.**

Those who have lived in the Old Kent Road Opportunity Area for less than five years are far more likely to meet in a restaurant or cafe than those who have lived in the area for five years or more (44% compared to 25%). This group of people are also more likely to leave their local area to go to a restaurant or cafe than people who have lived in the area for five years or more (46% compared to 29%). This may be linked to effects of gentrification in the area, meaning that people who have lived in the area for a long time are not able to afford to visit the new restaurants and cafes opening in the area, or it may be the case that younger groups find it easier to travel out of the area than older groups do.

Despite some concerns about how the local area is changing, residents were broadly very positive about the area in the qualitative discussions. Specifically, residents in the Old Kent Road area described the number of shops, including supermarkets, that meant they were able to easily access anything they needed to buy. Burgess Park was also discussed positively, as was Southwark Park, East street market, and 'the Blue' – a small market area.

"I hang around [points to willow walk] that area quite a bit, I work from a laptop so I go wherever. I go to like cafes and stuff, but there could be better spaces in this area to go." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

"I've plotted the library that I go to on East Street where I go to use computer, but I'm not very happy with it because it's very noisy and they've turned libraries into crèches." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

"This week I had to go to the Recycling centre – also went to Elephant and Castle shopping centre – my son goes to London school academy – we also often go to Southwark park, which is a very nice park actually." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

When residents of the Oval and Kennington Development Area spend time with people who they do not live with, they are most likely to meet up in places serving food or drink; a restaurant, cafe, pub or bar. Around four in ten participants say they are likely to spend time with others in someone else's home or in their own (39% and 38% respectively).

In the Oval and Kennington Development Area, residents enjoyed the easy access to a range of parks, particularly the garden at Kennington park, and walks along the riverside. Some of the pubs within walking distance of the Oval were also mentioned, and participants enjoyed the farmer's market, although they acknowledged that it could be expensive. Residents also said they felt there was a good range of shops that were easily accessible to them, including the choice of supermarkets.

"The garden in Kennington Park absolutely beautiful, whether with children or alone can pinch figs off fig tree, really lovely...kept at really lovely standard (both appreciate din pair)." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

“Walk along the river, having Southbank on your doorstep is great for a summer evening, suits all budgets because doesn't cost anything.” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

“Once you get to know a place... there's nothing I cannot get given the day and week that's not within a two-mile radius... different shops you wouldn't see anywhere else lingerie and Spanish book shops and East street market” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

A lack of opportunities to meet people or places to go

However, despite these examples, there was agreement among the participants in both the Old Kent Road and Oval group that there was a **lack of places to go to meet other people**, and that neither area was a place where you would invite friends to socialise.

“There is nowhere to meet friends on the Old Kent Road – there's nowhere there, no restaurant or somewhere to meet, only little shops.” (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

Participants felt that former community hubs were disappearing and not being replaced. Participants described a lack of amenities, such as a pub, but also a lack of community centres, and popular estates being dismantled. For example, Oval residents said that a community centre near Kennington Park was being closed down and replaced by a Sainsbury's and more flats. They suggested that this meant there were **few opportunities to meet local people because they were not frequenting the same places** on a regular basis.

“There is no place to go – you don't bump into the same people because you don't go to the same place a lot because there isn't anywhere to go.” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

“Where there were pubs and communities knew each other, now you're getting wine bars and things, it's not community socialising and that kind of thing...it is good because bringing more money into the area, but...it doesn't really benefit people in the local area.” (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

The Oval area in particular was not felt to be somewhere people spent any time in, and it was seen as more of a transport hub, and described as an ‘in-between kind of place’.

“The inherent geography of the place means people don't go to spend time in the local area.” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

Participants strongly agreed that there was a **lack of pubs in the local area**. This view was held particularly strongly by some of the older men who were part of the group discussions. They pointed out that they did not have a local pub anymore, that would have once formed the centre of their community and social life, and where they could have gone to meet other people. Notably, there are currently eight open pubs in the Old Kent Road Opportunity area, and 13 have closed in recent years⁶, and approximately 5 pubs in the Oval and Kennington Development area⁷.

⁶ Figures supplied by Southwark Council.

⁷ <https://www.lambeth.gov.uk/sites/default/files/PublicHousesinLambeth.pdf>

"18 years ago, you'd only go to the pub...but now there is nowhere to really go, nowhere to meet your neighbours...In the night time, in the winter...Even in the summer...Nowhere to go and just talk. Not actually many places for a bloke." (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

It was suggested that the pubs that are in the local area were increasingly gastro pubs, built to meet the needs of a younger professional demographic rather than the local communities from the housing estates that they once served.

"A lot of my friends have died from old age or whatever and I wouldn't want to go to pub to get drunk but just to see people and spend time with people. Pubs have changed completely, only gastro pubs." (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

In the qualitative discussions some particular groups stood out as facing particular challenges meeting new people in their local area. Specifically, young mothers and older men reported barriers to interacting with other people, and a lack of opportunities to get out and socialise.

Young mothers in the two areas felt particularly isolated, saying that although there were sometimes activities for young mums, they often felt that most of the time their only option was to go for a walk by themselves in the local area. This was a particular problem in winter when the parks were cold. They lacked opportunities to mingle with other mums, and felt that many amenities such as cafes and libraries were not set up for children (i.e. they don't have soft play areas).

"Since having my child I feel totally isolated, live right near the gasworks; many sessions but very specific times, all on at the same time, for the rest of the time so little to do, so we just go and walk; I have no friends in the area." (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

Some residents also mentioned that activities can sometimes be too expensive for them to get involved in – for example, going to restaurants or leisure centres. Housing can also be an issue. Although the mothers who attend a community group, 'Mumspace'⁸ in Camberwell, did not mention this as an explicit problem, their facilitator pointed out that small, cramped housing means that mothers are not able to have friends over to their homes. This can limit the opportunities to socialise further, as the expense of leaving the house can also be a deterrent to socialising.⁹

The young mothers did acknowledge that there were some free options in the area; the parks in the Oval area were an advantage for families, and residents in Old Kent Road also had the advantage of having free gym and swim sessions.

"From the perspective of a young mum, I now appreciate three parks in the area, exceptional for London; maybe all of them are not the greatest, but at least we have them." (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

"I go to the library every Tuesday with my son, they have a sing along play centre. I go to the free gym and swim as well, it's all the leisure centres connected I think." (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

⁸ http://www.citizensuk.org/mumspace_overview

⁹ Notably, ONS data shows that both Lambeth and Southwark have significantly more overcrowded housing than the rest of England (28.8% living in overcrowded housing in Southwark and 30.1% in Oval, compared to 8.7% in England overall).

http://localhealth.org.uk/GC_preport.php?lang=en&s=158&view=map11&id_rep=r03&selld0=363&nivgeo=ward_2015

Another problem for residents in both areas was the **lack of a high street to walk along and shop, eat, and meet friends**. In the Oval and Kennington Development Area, residents felt there were a lack of shops and restaurants concentrated in one area – instead they said that shops and restaurants were dispersed around a larger area meaning that people did not tend to congregate in one place. Residents in the Old Kent Road Opportunity Area on the other hand said that although there was a high street, the emphasis was on larger shops and supermarkets rather than small places to browse and spend time in. Particularly, they agreed that there was a lack of restaurants and cafes along the Old Kent Road.

“Not too much around the area – estates or the cricket ground itself – not many shops or restaurants.” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

“It’s like pound shop, fast food shop, and repeat, it’s not really a shopping centre there anymore...The shops near me have been shut down and are now flats. There aren’t any real shops left on [the Old Kent Road] just have an Argos and a Mothercare.” (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

However, some were able to identify some cafes that they spent time in. For example, some liked going to traditional ‘greasy spoon’ cafes along the Old Kent Road, and residents in Oval mentioned a couple of cafes that were dispersed around the area – for example, the Vanilla black cafe, and the Sugar pot café. It was also pointed out that there are some cafes along the Old Kent Road that are frequented by certain communities (e.g. Cypriots).

“The Cypriots, the Algerians and the Polish, they have communities, when I walk passed I think if only I could go in there but you can’t because you’re not Polish or Cypriot.” (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

“On the Old Kent Road I tend to use the Caffe a lot – that’s how people meet and socialise – the old school places, that’s where you see the real community.” (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

There was also a discussion in both areas about a **lack of neighbourhood events**. Residents discussed the need to have a calendar of events targeting everyone in the community such as discussion groups, book groups, workshops and classes, to give people the opportunity to interact with others. This was not something they felt the two areas offered at the moment – or at least these things were not visible to them.

“We need more activities...there’s a Library, and good to go, staff are great but there’s no mingling. You go in and everyone’s busy, when a session is finished everyone leaves again.” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

“There used to be a library, but now it’s a church. They used to do plays and theatre. I used to go to them, a drama club on the hummingbird estate, but that’s now completely gone and it’s just a church.” (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

A popular idea was to have a cinema – either a permanent fixture or a pop up cinema to get the local community together. The parks in the local area were also seen as assets, and residents would like to see a programme of activities happening here.

“There should be monthly cinema event – bring friends along and watch films – small pop up cinema type thing.” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

"It would be nice if more stuff was going on, like Southwark park, I didn't even know it was there, until the other day. Would be nice if there were more things going on there" (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

However, others pointed out that there are plenty of things going on. There are currently 53 premises for voluntary sector groups, 20 tenants and resident's associations (with halls, rooms or other facilities), 57 places of worship in the Old Kent Road Area¹⁰. There are 3 youth groups in the Oval area¹¹. However, residents did suggest that finding out about classes, events or schemes can be challenging as they are poorly advertised. A common complaint was that only a few people knew what was happening in the area and what was on offer, and this was evident in the discussion groups themselves with participants educating others on what might be suitable nearby.

"Underneath the church there is [a community group]; how do you find out about these things though? Spent hours on websites but difficult to find information." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

"There are places but the word doesn't get spread beyond the group of people who set it up, so the local community don't hear about it." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

Participants in both the Old Kent Road and Oval groups also felt that there was **nowhere for children and young people to hang out**. This included a lack of open spaces close to homes (not including parks), for example usable open spaces around housing estates, and also no community groups for young people to meet and socialise with each other. This was also evident in the discussions with school children, who were more likely to meet with friends in shops and takeaway restaurants in the surrounding area, rather than open spaces or community centres.

"I lived on the Friary estate...round the back used to be a nice green, but it's been tarmacked over and they have 'no ball' signs up, so kids they can't play out there, so come the summer time the kids play in the car park" (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

Participants did point out, however, that this reflected changes in society as a whole, with young people more interested in social media for example, rather than playing outdoors.

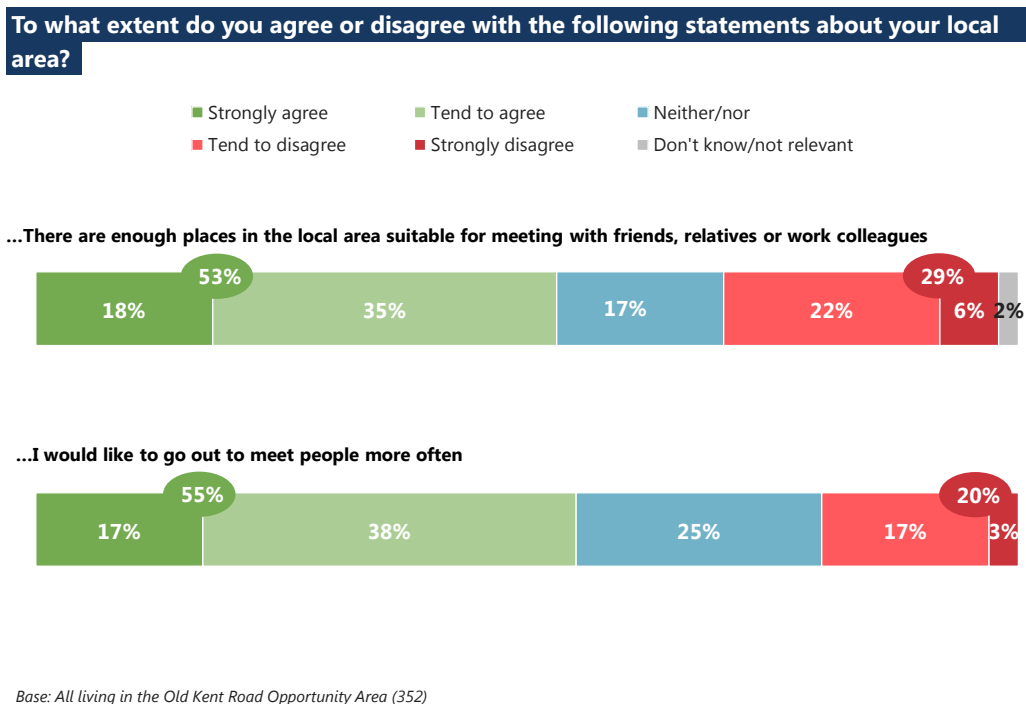
"When I was a kid there was no patch of grass where you didn't see someone playing football on it. It's a thing of the past – people have headphones on and they're looking at their screens. It's the way the society is changing more so than the area itself." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

Overall, these views are reflected in the quantitative data, where **almost three in ten (29%) residents in the Old Kent Road disagree that there are enough places in the local area** suitable for meeting with friends, relatives or work colleagues. Over half (55%) of the residents agree that they would like to go out to meet people more often.

¹⁰ Figures provided by Southwark Council

¹¹ <https://public.tableau.com/profile/lambeth.council#!/vizhome/CLIPdataplatfom/AboutThisPlatform>

Figure 4.3: Perception of the local area as a place to meet – Old Kent Road Opportunity Area



The residents of Old Kent Road Opportunity Area who say that they feel a sense of belonging to the local area are nearly twice as likely to agree that there are enough places in the local area to meet other people than those who do not feel a sense of belonging (59% compared to 31% who disagree). In the qualitative discussions, those who had been in the area for an extended period of time (e.g. their whole lifetime) tended to have more knowledge of the local area and the various activities they could get involved in – and were able to notify others in the group about these opportunities. These residents were less likely to feel that the area needed more opportunities to meet others but they did feel there had been a loss of community cohesion.

Over half (55%) of the participants in Old Kent Road Opportunity Area say that they would like to go out to meet people more often, of which the highest proportion are those aged between 16-54 (61% compared to 36% of those aged 55+). It may be that provision of meeting places for younger people is important for future planning, but it is likely that this younger age group are more likely to want to get out more regardless of how much they are doing so already.

Those who say that they *would not* like to go out to meet people more tend to have a higher mental wellbeing score than those who say they *would* like to go out to meet people more (26.26 compared to 23.47). Correspondingly, **those with the lowest mental wellbeing score (23.66) are also those who *strongly agree* that they would like to go out to meet people more**, suggesting that there is an unmet need for social interaction.

This supports the well-established view that social interaction promotes good mental health and personal wellbeing, as evidenced by a report on the value of 'Connected Communities', which suggests that "social connectedness may correlate

more strongly with wellbeing than social or economic characteristics such as employment¹². As such, finding ways to break down the barriers that stop people from meeting and interacting with others is likely to have a positive impact on the mental wellbeing of the local population. It may also be successful in relieving the demand on health services that address individuals’ mental health issues.

Six in ten people in the Oval and Kennington Development Area agree that there are enough places in the local area suitable for meeting with friends, relatives or work colleagues (64%). A slightly lower proportion of residents – roughly five in ten people (52%) – are happy with how often they currently get out.

Figure 4.4: Perception of the local area as a place to meet – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

Meeting up with others outside of the local area

Participants in Oval and the Old Kent Road were leaving the area frequently, not just for work, but for leisure activities as well. Residents in the Old Kent Road spent a lot of time in Peckham – where they enjoyed the range of shopping facilities, Elephant and Castle shopping centre, Surrey Quays for supermarkets, and Camberwell leisure centre. In Oval, residents mentioned a range of places that they could easily access, notably Brixton and Clapham, the Southbank and West End.

“The places we go aren’t actually on the map. I go to the castle centre, and the Camberwell gym. I live on the map, but we go off it for other things” (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

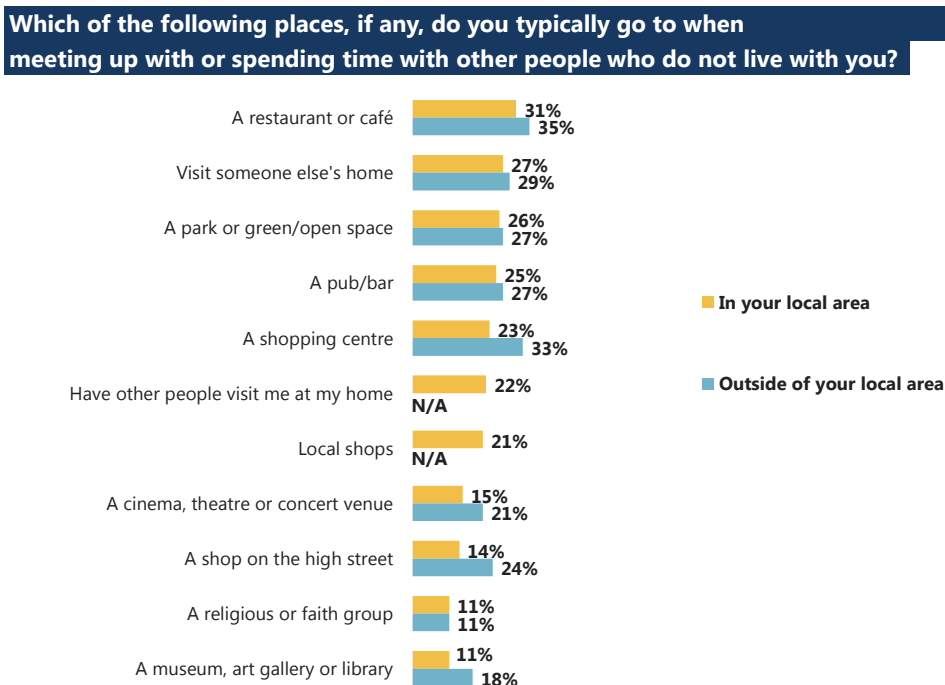
Those who had jobs outside the area also tended to remain around central London, focussing their social activities around their office.

¹² Report: Royal Society of Arts, University of Central Lancashire, and London School of Economics, ‘Community Capital – The Value of Connected Communities’, <https://www.thersa.org/discover/publications-and-articles/reports/community-capital-the-value-of-connected-communities>

"I have a gym membership near my work...I normally go out in central after work, or at the weekend. It is nice having these places close by, but in regards to bars and restaurants there isn't much where we live." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

Among residents of the Old Kent Road Opportunity Area, nearly four in ten participants (35%) are likely to visit a restaurant or Cafe outside of the local area. Only two in ten participants (21%) are likely to visit a cinema, theatre or concert venue outside of their area. This is only slightly higher than the proportion of participants who say that they visit these types of venues within their local area (15%). It is worth noting, therefore, that **having suitable facilities for meeting up with others in the immediate area may not be enough to help some groups engage with others.**

Figure 4.5: Places for meeting inside the local area and outside of the local area – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

White participants are significantly more likely than BME participants to go out of the local area to visit a restaurant/Cafe or pub/bar (47% and 43% compared to 24% and 13% respectively). BME participants are more likely than white participants to go out of the local area to visit a religious or faith group, including going to a place of worship (16% compared to 5%).

Residents who exhibit good health behaviours are those most likely to leave the local area. Participants who eat five portions of fruit/veg a day are significantly more likely to go out of the local area to visit a restaurant/Cafe than those who do not (47% compared to 32%). They are also more likely to leave the local area to go to a park or green space (42% compared to 23%), as are participants who walk more than three hours per day, compared to those who walk less than this (35% compared to 20%).

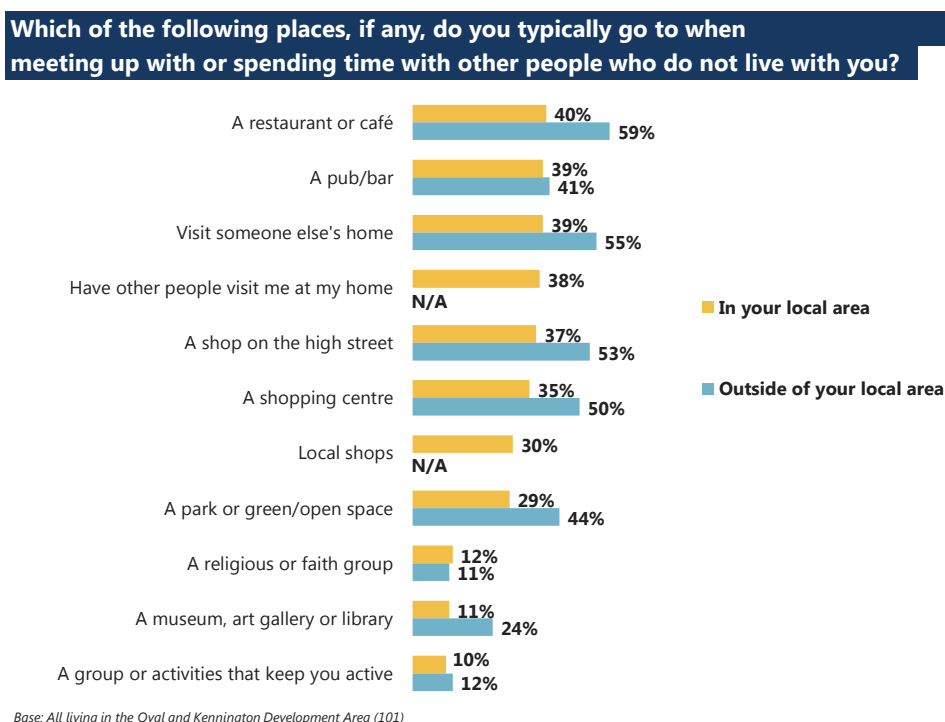
Whilst this might point towards an important planning consideration, in terms of the potential need to increase the provision of public recreational sites and the number of healthy food outlets, it is also important to consider that these

behaviours may be resultant from personal circumstances and education. As such, changes to the built environment may not have an effect on the health behaviours of some groups. As aforementioned, this is supported by findings from the 'Londoner's attitudes to health and health services' final report, which shows that nearly one third of adults (28%) say that nothing would encourage them to walk more.¹³

Residents of the Old Kent Road Opportunity Area who consider themselves to be financially comfortable are significantly more likely to leave the local area to visit a restaurant/Cafe than those who do not (40% compared to 30%). The same is also true of visiting pubs/bars (37% compared to 17%).

Among residents of the Oval and Kennington Development Area, six in ten residents (59%) are likely to visit a restaurant or Cafe outside their local area, compared to only one in four participants (41%) who are likely to visit a pub/bar outside of their local area. Residents are more likely to leave their local area to go to a park or green space than they are to visit one in their local area (44% compared to 29%).

Figure 4.6: Places for meeting inside the local area and outside of the local area – Oval and Kennington Development Area



4.3 Improvements to social interaction in the local area

Participants in the discussion groups identified a number of improvements that could be made to the local area. In particular, they wanted more of a community focus in the local area – with community groups and clubs bringing people together. They also wanted more of a high street feel, and better use of outside spaces. For residents of Oval in particular,

¹³ Report: Ipsos MORI, 'Londoners' attitudes to health and health services', <http://www.londonhealthcommission.org.uk/wp-content/uploads/Londoners-attitudes-to-health-and-health-services.pdf>

the gasworks site offered the opportunity to improve the area for residents and put some of these ideas in place. These themes are discussed in more detail below.

Community groups and socialising

Residents of Oval and the Old Kent Road wanted to see **changes to the area that are made with the local community in mind**, particularly using the regeneration in the two areas as an opportunity to set up community spaces or groups. For example, residents felt there was a lack of activities for younger people to take part in, and a youth group might be beneficial for this demographic.

"More youth community set ups – somewhere they can go other than the streets." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

Participants wanted somewhere that offered **activities for the whole family**, so that children can play together and adults can meet one another and build friendships. The parks in the local area sometimes offered this during the summer time, but parents felt they lacked a similar space when the weather was bad or it was dark outside. Positively, one resident in the Old Kent Road was actually part of a community group in Southwark that offered this to families. Furthermore, Mumspace, a community led group in Camberwell, offers mothers from a range of backgrounds the opportunity to meet others and share experiences. More detail on this group is provided in the case study below.

"We have actually started doing that in Pembroke House. What we've done is we've got all the parents and started taking our children there together...We do crafts, games and cooking. Whilst the kids are enjoying the activities, the mums and dads can chat for a couple of hours and everyone is sort of mixing in together." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

Residents agreed that **young people and teenagers were a group that were in particular need** of after school activities. Participants felt that youth clubs had disappeared because of a lack of funding or interest from the local community; they wanted to see these replaced with something new to ensure that young people had enough to keep them occupied, entertained and out of trouble. In particular, it was felt that any group needed to have an educational focus.

"Somewhere that they can go that's educational – somewhere that the kids could learn about mechanics – they won't steal motorbikes because they would see the value and worth of things." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

However, this was not just for young people. A strong theme from both groups was the suggestion for a place where all ages go to learn new skills, and share or receiving training would also be beneficial. This would also offer people the opportunity to meet new people. For example, a place where members of the community can transfer their skills to others; such as teaching digital skills, filming, computer coding, and other skills that can be transferrable to the workplace, as well as activities that can educate people about healthy eating and exercise.

"Making bread together – cooking activities; sharing resources such as ovens (for pizza, bread); accreditation for your skills and participate in training and sessions that gives people skills." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

"More community run projects and skills workshops – more socially-oriented, skills workshops, they would need to invest in that and communication." (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

The old gasworks in Oval was seen as an ideal place to base a new community hub, and there was strong support in the discussion group in Lambeth for using the space for a venue aimed specifically at bringing the local community together.

"Incentivise people to volunteer through schemes, weekly talks, somewhere people can go for free and discuss [what] they have learnt." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

Case study: Mumspace

Mumspace is a community-led group for mothers and their children. It has been set up by Citizens UK, based on the premise that bringing communities together can positively affect the social determinants of health. The group provides mothers with opportunities to learn new skills and meet others.

Mothers attending the Mumspace group were positive about the local area. They noted that there is a good range of free activities (e.g. parks), good transportation, and good shopping that is not too expensive. They also felt that the reputation of the area is improving, with fewer gangs and crime (e.g. following the demolition of the Aylesbury estate) and they felt safer in the area than they did a few years ago.

"There's lots of activities you can enjoy for free (Monday to Friday)... lots of parks and there is Burgess park, lots of people enjoying the parks and the sun I think it's great... I lived in north London first and it's not that great"

"Because of regeneration, they knocked down lots of areas where there were gangs. I used to live in Aylesbury, and that used to be bad, stabbings and stuff but now it's been knocked down and it's better."

However, they noted that community centres in the area are closing, and that it was rare to interact with other people in the community unless they were involved in community groups.

"They used to do a thing called 'Sure start' that was like trips and stuff for mums but that has stopped I think. It would be nice to have something like that for mums and kids to meet other mums."

Generally, there was the feeling that provision of services for mothers and children in the local area is generally lacking. They expressed the need for more child friendly meeting places and activities in the local area. For example, soft play areas, cinemas and more groups like Mumspace.

"[There is] nothing to do at the weekend. There's the park and the church."

"[I] would like to do more things at the weekends with other mums. There [are] not enough centres and things at the weekend."

"[We need] more things that are baby friendly... crèches, soft play"

"There's a mums' cinema [in Clapham] where you can take the baby with you so when it cries it's not a big deal and you can actually change the baby right there. It's amazing!"

All the mothers who attended the focus group spoke very positively about Mumspace. They specifically noted enjoying the opportunity to learn practical skills in a safe environment. The women spoke about learning skills to help them look after their children, but also skills to help them look after themselves.

"They bring people to come and train us on things or we teach ourselves."

"We've just finished a Healthy Eating course organised by this group. [It] was really good; about how to manage what we are eating to reduce fat and sugar."

"[We have learnt about] budgeting, time management, how to cope with the baby if you've got a busy day, everything falling backwards and how to cope with juggling everything...making lists, prioritising, what can wait and do later and what needs to be done now."

The mothers were notably enthusiastic about the power of the group in connecting mothers in the local area. They expressed their appreciation of Mumspace and to some extent, their reliance on the group as a means to make social connections and interact with others. For some of the women, Mumspace is the main opportunity they have to socialise with people who they do not live with.

"It is good for me to get out and good for the baby as well. I am still suffering from depression after my sister died. The baby had attachment to me so I was told to put the baby down and speak to other people."

"[It is good for me] to do things with the baby and to go out and meet the other mums – to not only be at home is a good thing."

"[Mumspace has] helped me to deal with stress. I attempted to commit suicide before, but when I came to this group, I felt someone [was there] to help me through my stress... now I am okay."

"I feel safe and accepted and I feel loved by everybody in the group... I make friends and I can tell them what's wrong with me and I feel really relieved."

However, the women spoke about wanting more access to courses, for example exercise classes, and increase the frequency of meeting hours. They also would like to use Mumspace as a means to organise group excursions for the children, which is something they have done in the past.

"[We] want it to be every day, and run even more courses than it does already."

"We used to do community trips where everyone would go to the beach or something in the summer."

"[Mumspace should] get someone to come and do workouts... like me and other mums I know want to go to the gym but have nowhere to keep the babies so either [Mumspace should] do something with the babies or have a crèche on the side."

It is clear that the mothers are convinced of the benefits gained from attending Mumspace. This case study evidences the potential impact that community groups, like Mumspace, can have by engaging with those in society who are typically socially isolated. The importance of this cannot be under-estimated,

particularly as two in ten women (20%) in England are affected by perinatal mental illness, such as Obsessive Compulsive Disorder (OCD), depression and anxiety¹⁴.

A high street with local amenities

Residents in both the Oval and the Old Kent Road groups wanted to have **more of a high street, or 'village feel' to the local area**. Residents in Oval felt that any regeneration of the Gasworks should focus on developing a shared space full of shops, cafes, restaurants and other amenities to encourage local people to spend time in the area.

Residents of both areas, felt that more banks, leisure centres, playgrounds, and small local businesses would bring a more 'village' feel to the local area. However, some residents did not want Oval to become an area that attracted too many others to the area, with the example of busy Brixton and Clapham nearby given as an example of what they did not want.

"They should upgrade shops/restaurants that already exist but don't change it too much, because it'll be too busy and we have high streets up the road – we have Clapham and Brixton." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

Residents also felt that they currently lacked things to do at night time with friends. They wanted to see more of a nightlife in their local area, including bars but also traditional pubs, to meet with friends. This largely came from younger participants, including those new to the area who were currently socialising outside their area of residence and around their place of work. However, as described above, older participants – particularly men – also strongly felt there needed to be more 'local' pubs.

"I would like there to be more nightlife, it would be nice to have bars, that stay open until 2 in the morning, I would like the option to stay local to my area and stay out and listen to some live music. It would be nice to have that as an option" (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

Residents in the Oval area also felt that they lacked a leisure centre within easy access of where they lived. Young mothers suggested that a leisure centre with a crèche area would also allow them to use the facilities, something they felt excluded from at the moment.

"This area [is] missing a leisure centre where I could go with my baby, daytime nursery, and at the same time go to yoga in one building. It would be good to separate for half hour, beneficial for both of us." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

Participants in Lambeth also mentioned that the free gym access that Southwark residents benefitted from would be a bonus for the area, and encourage more people to get out and do exercise.

"Southwark council offers free access to 6 of their leisure centres on Fridays and Saturdays – anything like that would be amazing, I am so jealous." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

¹⁴ www.england.nhs.uk/mental-health/perinatal

Making use of outdoor spaces

Residents were also keen to see more use made of outdoor spaces, particularly because many of their homes had no gardens. This was particularly a problem for residents of Oval who noted that their local area was heavily built up, and lacked open spaces. They suggested **an allotment or community garden where residents could go and grow flowers and vegetables**. A city farm was also suggested by one or two residents of Oval as an option for the gasworks space.

"I'm interested in the what they're going to do with the gasworks; this is very important; they could build flats, but personally I'd like to see extension of city farm." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

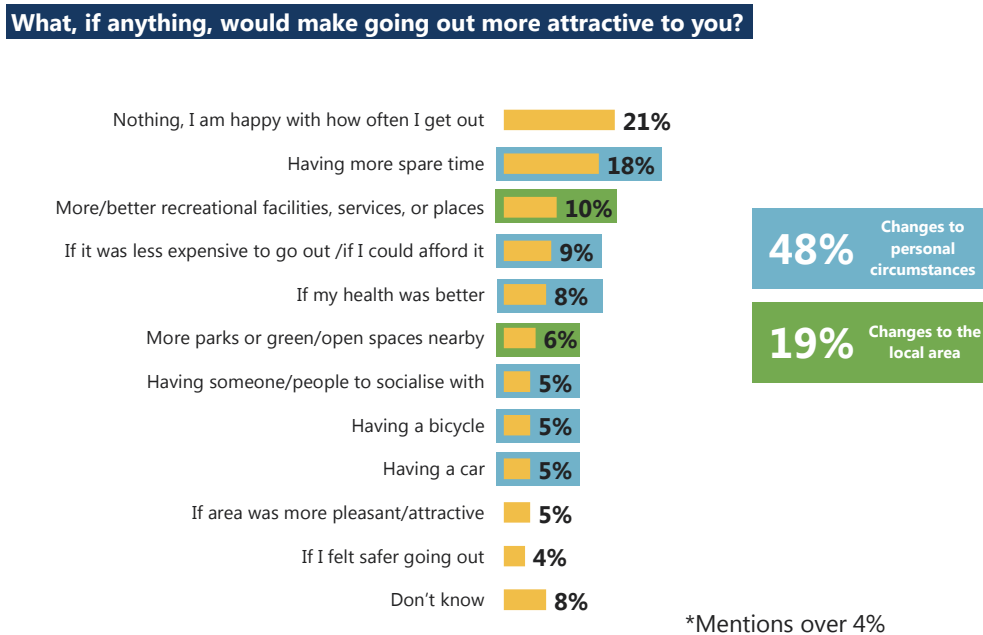
It was also suggested that more use could be made of the parks that they already had in the local area. For example, festivals, cinemas, and other events to bring the community together. They also wanted better play facilities in the parks as current ones could become busy and unusable.

"It would be nice if more stuff was going on, like Southwark park, I didn't even know it was there, until the other day. Would be nice if there were more things going on there" (Resident, Social Isolation workshop, Old Kent Road Opportunity Area)

Encouraging residents to get out more

Notably, in both areas, residents are more likely to feel that changes to their personal circumstances would make getting out more attractive, rather than changes to the local area. In the Old Kent Road, nearly five in ten people feel as though changes to personal circumstances, such as having more time or improved health, would make getting out more attractive to them (48%); less than one in five (19%) say changes to the local area would encourage them to get out more. Similarly, in Oval, nearly four in ten people (39%) feel as though changes to personal circumstances would make getting out more attractive to them and three in ten (29%) say changes to their local area would do this. Possible improvements to the local area that would make getting out more attractive to residents – Old Kent Road Opportunity Area

Figure 4.7: Possible improvements to the local area that would make getting out more attractive to residents – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

Residents of Old Kent Road Opportunity Area who are working are most likely to think that having more time would encourage them to go out more (26%). Given that only three in ten residents of London have a commute to work less than five kilometres,¹⁵ a reduction in the time spent travelling between home and work might encourage people to go out more. One way of doing this could be to develop more places for employment in the local area. Non-working people who are retired are most likely to think that they would be encouraged to go out more if their health was better (24%).

In this area, around a fifth of residents feel as though improvement to facilities/amenities would make getting out more attractive to them (19%). One in ten of these people think that they would be inclined to get out more if there were more or better recreational facilities, services or good places to go out in the local area (10%). Whilst this is a relatively small group of people, when taken together with the fact that one in ten (9%) participants feel that going out would be more attractive to them if it was less expensive or if they could afford it, there may be **significant benefits to reducing the cost of leisure facilities in terms of promoting healthy behaviours**. This is supported by findings from a report on Tackling Obesity, written by the Local Government Association, which shows that making leisure services free can have a significant impact on how often local residents engage in physical exercise.¹⁶ Furthermore, those who agree that they would like to go out more are more likely to suggest that a fitness centre be included in an integrated health facility if it were provided in the Old Kent Road area – this is discussed in more detail in the next chapter.

¹⁵ 2011 Census Snapshot: 'Distance Travelled to work in London', <https://files.datapress.com/london/dataset/2011-census-labour-and-qualifications/2011-census-distance-travelled-to-work.pdf>

¹⁶ Report: The Local Government Association, 'Tackling Obesity – Local government's new public health role', http://www.local.gov.uk/c/document_library/get_file?uuid=dc226049-df94-487e-be70-96bdcb4a9115&groupId=10180

A very small proportion of residents in the Old Kent Road area feel as though improved safety would encourage them to get out more (6%); four percent think that *feeling* safe in the local area would have a positive impact on how often they get out, and only one percent feel that more/better street lighting after dark would encourage them to get out more. **People who have lived in the Old Kent Road Opportunity Area for longer than five years are those most likely to say that they will go out more if safety in the area is improved (8%).** This may suggest that some residents have seen a change in the area during the time they have lived there. Alternatively, it may indicate that older residents, who are likely to have lived in the area for longer than five years, are those most likely to view the area as unsafe. This is evidenced in a compendium from the Office of National Statistics, which states that perceptions of crime levels rise in congruence with age.¹⁷

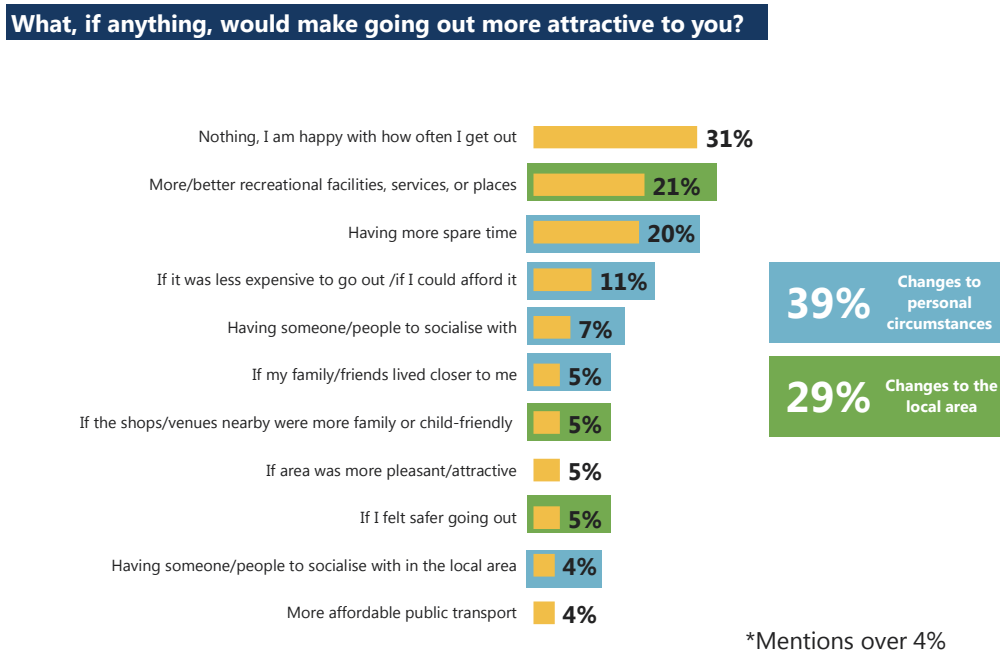
The safety of the local area is also very important to females, **who are more than twice as likely than men to think that they would go out more if safety in the area is improved (9% compared to 3%).** Women taking part in the qualitative discussions also pointed out that they might not go out late at night because of concerns about their safety – although it was noted that this was a common issue across London and not specific to Oval and the Old Kent Road.

“What about if you’re a woman? Because I kick box, yes I feel safe but I wouldn’t go out at night, not late, I feel ok walking around until about 11ish.” (Resident, Social Isolation workshop, Oval and Kennington Development Area)

In Oval, **one third of residents feel as though improvement to facilities/amenities would make getting out more attractive to them (29%).** Two in ten (21%) of these people think that they would be inclined to get out more if there were more or better recreational facilities, services or good places to go out in the local area.

¹⁷ Compendium: Office for National Statistics, ‘Crime Statistics, Focus on Public Perceptions of Crime and the Police, and the Personal Well-being of Victims: 2013 to 2014’, <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/compendium/crimestatisticsfocusonpublicperceptionsofcrimeandthepoliceandthepersonalwellbeingofvictims/2015-03-26>

Figure 4.8: Possible improvements to the local area that would make getting out more attractive to residents – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

Like the residents in Southwark, there is only a very small proportion of residents who feel as though improved safety would encourage them to get out more (6%). The majority of these residents think that *feeling* safe in the local area would have a positive impact on how often they get out (2%), compared to only one percent who feel that more/better street lighting after dark would encourage them to get out more. These findings are supported by data from the Lambeth 2015 Residents' Survey, which shows that 95% of residents feel safe in the local area during the day time, and 80% of residents feel safe during the evening time.

Health and health services



5 Personal health and health services

One of the three key themes or areas of interest for this research is health service provision. In order to shed light on views around the state of health service provision in both areas, this section looks at residents' perceptions of their own health as well as views around availability of and access to different health services.

Please note that the qualitative research was conducted with residents of Old Kent Road only, so Oval is not included in the discussion of qualitative findings.

The self-reported health of residents of both the Old Kent Road Opportunity Area and the Oval and Kennington Development Area is generally very good, with those who feel a sense of community to the local area tending to report better health.

Medical professionals in the Southwark area do however identify a range of health problems prevalent in the area, which may require more focus.

Residents of both areas feel well served by local primary care services, with the majority living in close proximity to their registered GP. Most don't feel that any specific improvements are necessary to the local primary care offer, although long waiting times are mentioned as one possible aspect of health services where there is room for improvement.

Residents of both areas feel that the benefits of an integrated health facility opening in the area would be far-reaching. In the Old Kent Road Opportunity Area, there was also particular appetite from health professionals for co-located services.

5.1 General health

In both the Old Kent Road Development Area and the Oval and Kennington Opportunity Area, **the majority of people consider themselves to be in good health.**

Among those living in the Oval and Kennington Development Area, almost all (97%) report being in good or fair health. One in ten (12%) say that they have a long-standing illness, disability or infirmity. This figure is significantly less than those reported by NHS England, which suggests that close to one third (28%) of the population of Lambeth CCG are living with a Long Term Condition (LTC)¹⁸.

In the Old Kent Road Opportunity Area, more than nine in ten (93%) say that, in general their health is fair or good. Around two in ten (21%) say that they have a long-standing illness, disability or infirmity. This figure is slightly lower than

¹⁸ Available from <http://ccgtools.england.nhs.uk/lctcdashboard/flash/atlas.htm>. Please note that these figures include only those listed as having one LTC – figures may therefore be higher if including those with multiple LTCs.

those reported by NHS England, which suggests that three in ten (29%) of the population of Southwark CCG are living with a LTC¹⁹. This figure is also below the London (28%) and England (30%) averages.

In the qualitative strand of this research, five depth interviews were conducted with health professionals in the Southwark area. This group identified a **range of health problems prevalent in the area** – connected to the diverse population that inhabit the surrounding area of the Old Kent Road. They also highlighted public health concerns related to diet and exercise and other lifestyle factors, such as a high prevalence of diabetes in the area.

“Mixed population - very ethnically diverse and relatively young. Lots of multiple health conditions - smoking/ overweight/ early onset of chronic lung disease and diabetes. Huge public health concerns. And lots of people with HIV.” Health professional depth interview

It was also suggested by one GP that community displacement is also a problem facing the community in the Old Kent Road due to the increasing house prices – a theme explored in chapter 3. It was suggested that a lack of support networks for some people was adversely affecting health outcomes in the area. This is also reflected in the quantitative survey; those who agree that they **feel a sense of belonging to the local area are more likely to report being in good or fair health** (94%, compared with 85% who disagree). From a planning perspective, one area of focus might be looking at how those in poorer health can be engaged with, and made to feel involved in the local community.

“The housing stock is getting better due to regeneration but families are being displaced, with children moving to Kent or deep Surrey. Community cohesion is threatened by expensive homes. Patients need support - they need family around them. There's social isolation - people feel depressed, and their mental state is being affected.” Health professional depth interview

5.2 Provision of health services

Availability of primary care services in the local area

Southwark is home to 41 GP practices²⁰ serving a registered population of around 316,000²¹, and those living in the Old Kent Road Opportunity Area generally feel well-served by these local health services. Looking at Primary Care services in particular, **over two in five (43%) of Old Kent Road residents say that they live less than a ten-minute walk away from their GP practice**. Just one in ten (11%) live more than a 30-minute walk away.

Furthermore, the majority of those living in the Old Kent Road Opportunity Area are **satisfied with the availability of Primary Care services in their area**. Around two thirds (68%) agree that there are enough Primary Care services in the local area that are conveniently located for people like them. A little over one in ten (14%) disagree.

¹⁹ Ibid.

²⁰ <http://www.southwarkccg.nhs.uk/about-us/who-we-are/Pages/Who.aspx>

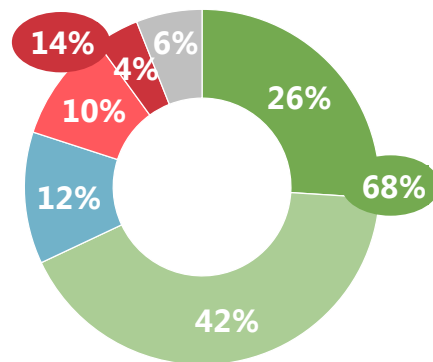
²¹ ‘General Medical Practices’, available from <https://digital.nhs.uk/organisation-data-service/data-downloads/gp-data>

Figure 5.1: Agreement with the statement 'There are enough Primary Care services in the local area that are conveniently located for people like me' – Old Kent Road Opportunity Area

Please tell me to what extent, if at all, you agree or disagree with the following statement:

There are enough primary care services in the local area that are conveniently located for people like me

■ Strongly agree ■ Tend to agree ■ Neither agree nor disagree
■ Tend to disagree ■ Strongly disagree ■ Don't know/not sure



Base: All living in the Old Kent Road Opportunity Area (352)

Having children in the household is likely to have a negative impact on perceptions of whether there are enough conveniently located primary care services in the area. Two in ten (20%) of those with children in their household say that there are not enough primary care services locally, compared to one in ten (11%) of those without children.

Positive perceptions about the availability of Primary Care services in the area also appear to link to positive perceptions about the local area more generally. People who feel a sense of belonging to the local community are significantly more likely to agree that there are enough Primary Care services in the area (74%, compared with 51% among those who do not feel a sense of belonging to the local community). Similarly, those who agree that there are enough places in the local area to meet are significantly more likely to say that there are also enough Primary Care services locally (76% among those who think that there are enough places to meet, compared with 57% among those who do not).

While representing only a small minority, some groups are more likely than others to say that they don't know or aren't sure about the availability of Primary Care services locally. Among those who are working, one in ten (10%) say that they aren't sure (compared with 6% overall). Those that have lived in the area for fewer than five years are also less sure (10%, compared with 4% who have lived in the area for five years or more).

In the qualitative interviews with GPs and other health professionals, there was agreement that the needs of the population are generally being met, although the quality varies down the Old Kent Road. They agreed that **regeneration will mean that the health services offered will need to significantly change over the next few years.**

"There is reasonable access in terms of the number of practices. The population of the areas is increasing and demand will go up in the next 4 - 5 years so we need a new facility." Health professional depth interview

However, residents participating in the focus group were more negative about the availability of services in the local area, complaining of long waits, services that have shut down, and having to travel long distances to meet all their families' health needs.

"A lot of services have been shut down – now you have to travel further – little health centres near Star Road in Bermondsey...all of them have been cut...now you do have to travel." (Resident, Health Services Focus Group, Old Kent Road Opportunity Area)

In the **Oval and Kennington Development Area**, there is a similar pattern with residents generally being satisfied with the **local services available**. The number of practices serving the population in Lambeth is roughly similar to that in Southwark – with 45²² practices serving a registered population of around 390,000 - and close to nine in ten (87%) of those living in the Oval and Kennington Development Area live within a 30-minute walk of their GP practice. Around one third (30%) live less than a ten-minute walk from their GP, while 3% live more than 30 minutes away.

Similar proportions as in the Old Kent Road Opportunity Area agree that there are enough Primary Care services in the Oval and Kennington Development Area. Seven in ten (70%) say that there are enough of these services, while a little over one in ten (13%) disagree.

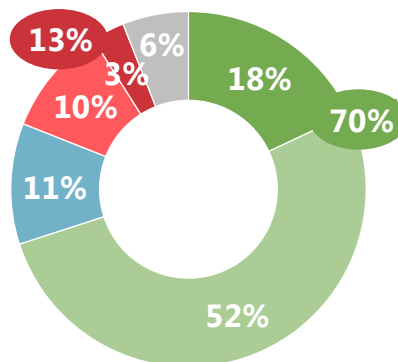
²² <http://www.lambethccg.nhs.uk/your-health/Pages/GP-Surgeries-in-Lambeth.aspx>

Figure 5.2: Agreement with the statement 'There are enough Primary Care services in the local area that are conveniently located for people like me' – Oval and Kennington Development Area

Please tell me to what extent, if at all, you agree or disagree with the following statement:

There are enough primary care services in the local area that are conveniently located for people like me

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree



Base: All living in the Oval and Kennington Development Area (101)

Improvements to experiences of Primary Care

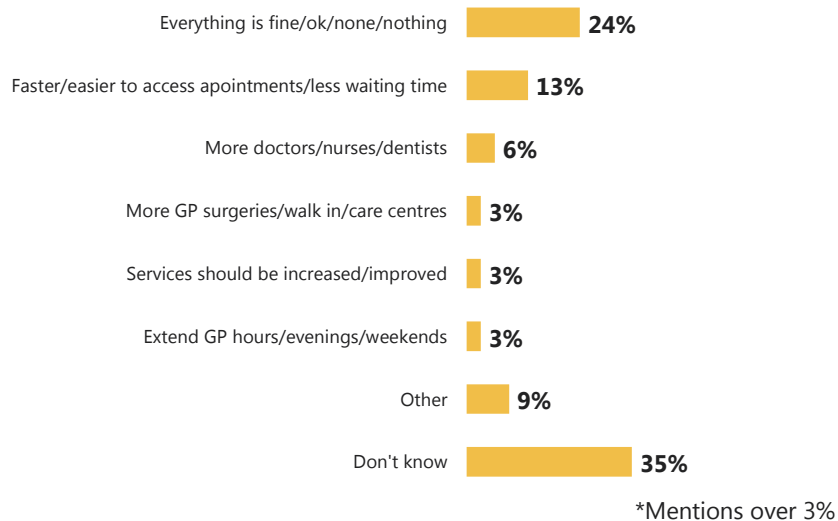
When asked what would help to improve experiences of Primary Care in the local area, around a quarter (24%) in the Old Kent Road Opportunity Area say that everything is fine and therefore no improvements are needed. However, some improvements to the availability of services were identified.

The most common improvement suggested by participants in the Old Kent Road Opportunity Area is faster or easier access to appointments, or less waiting time (13% mentioned this). Looking at data from the GP Patient Survey, one third (32%) of patients registered in Southwark think that they have to wait a bit too long for appointments at their surgery (compared to 25% across England as a whole)²³. A similar proportion (35%) say that they usually have to wait for more than 15 minutes for appointments (compared with 27% nationally).

²³ The GP Patient Survey July 2016 CCG report, available from <https://gp-patient.co.uk/surveys-and-reports>

Figure 5.3: Suggestions for improvements to experiences of Primary Care services in the local area – Old Kent Road Opportunity Area

Please tell me what, if anything, would improve your own experiences of primary care services in your local area?



Base: All living in the Old Kent Road Opportunity Area (352)

Women are more likely than men to suggest that their experiences of Primary Care could be improved by faster or easier access to appointments, or less waiting time (17% of women mention this, compared with 9% of men). Also more likely to suggest this as a possible improvement are those with children in the household (of whom 21% mentioned faster/easier access, compared with 9% among those who do not have children in the household). Women with children are likely to mean there is overlap between these two groups.

Those who have lived in the area for fewer than five years are more likely to say that everything is fine with their experiences of Primary Care services (33%, compared with 20% of those who have lived in the local area for five or more years).

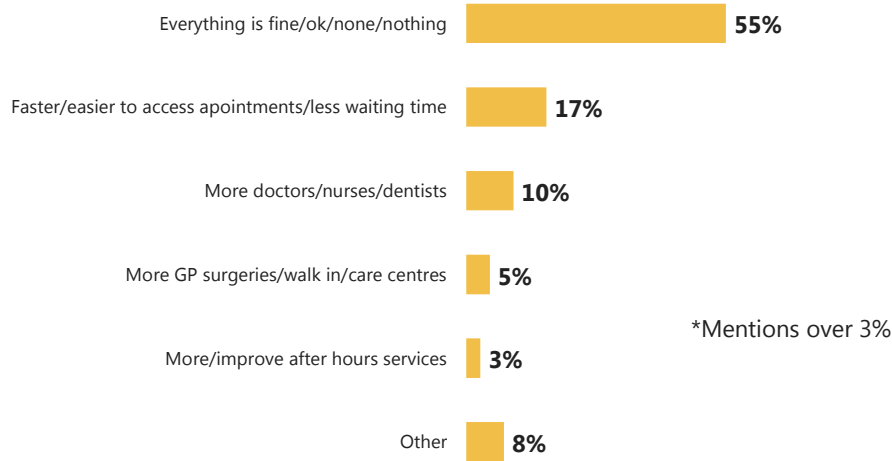
Among those participants living in the Oval and Kennington Development Area, more than half (55%) say that no improvements are needed to their local Primary Care Services. As in Southwark, the most common improvement suggested is faster or easier access to appointments, or less waiting time (mentioned by 17%). Also mirroring the picture in Southwark, data from the GP Patient Survey tells us that around three in ten (29%) of those in Lambeth usually have to wait 15 minutes or more for an appointment at their GP surgery (compared with 27% nationally). A similar proportion (30%) think that they have to wait too long to be seen (compared with 25% nationally).²⁴

The second most common suggestion for improving Primary Care in Lambeth is to have more doctors/nurses/dentists (mentioned by 10%).

²⁴ The GP Patient Survey July 2016 CCG report, available from <https://gp-patient.co.uk/surveys-and-reports>

Figure 5.4: Suggestions for improvements to experiences of Primary Care services in the local area – Oval and Kennington Development Area

Please tell me what, if anything, would improve your own experiences of primary care services in your local area?



Base: All living in the Oval and Kennington Development Area (101)

In the qualitative discussions, health services were not highlighted as a major issue for residents of the two areas. However, **the availability of leisure centres or gyms was raised as a potential issue** by both the residents of both areas and GPs in the area. Though the free gym and swim passes that Southwark have introduced was seen as hugely advantageous for residents in the area, some participants in the focus groups and workshops suggested that there was a lack of leisure facilities within easy walking access from where they live. This was a particular problem for residents in the Oval area where they felt that there were few leisure facilities on offer. This is also discussed in chapter 3.

“We need a gym like they’ve just made at Elephant and Castle ... that would help people who can’t really get out much” (Resident, Social Isolation Group, Oval and Kennington Development Area)

“There used to be little health centres, you were able to get out, meet other mothers, get out make friendships” (Resident, Health Services Focus Group, Old Kent Road Opportunity Area)

5.3 Integrated health facilities

Integrated health facilities can include a range of services in one location, such as primary care services, community health services or leisure centres. Residents of Oval and the Old Kent Road were asked about what benefits they thought an integrated health facility would bring, and which services they would like to see included within such a facility.

The benefits of an integrated health facility

The benefits of an integrated facility were felt to be far reaching. Participants mentioned the convenience of accessing the services, encouraging greater use of health and leisure services, and providing a community hub for people to meet others from the local area. There was also strong support for co-located services from health professionals in Southwark.

Significantly, participants **spontaneously discussed integrated health centres in the discussion groups conducted in both Oval and Old Kent Road**, and wanted to see more of them close by in their local areas. A health centre or community hub offering leisure, health, and wellbeing services was felt to be a solution to many of the problems they faced in the area such as access to gyms or meeting other people.

"We need doctors and dentists in Kennington – we need a multi-health centre, that would be optimal." (Resident, Social Isolation workshop, Oval and Kennington Development Area)

Participants in the survey were specifically asked about the benefits of a facility similar to the facility in West Norwood (described in more detail below). In the survey the facility was described as bringing together 'a gym, swimming pool and fitness centre as well as the local Council's customer care centre, GP and dental services and community health services such as health visiting and healthy living support. It also has a community space for hire'.

Among those in the Old Kent Road Opportunity Area, the most common benefit mentioned was **the convenience of bringing multiple services together in a single location**. This was mentioned by almost four in ten (37%). A slightly smaller proportion (30%) thought that an integrated health facility would be beneficial in allowing people to access multiple services in a single visit. Around two in ten (18%) thought that it would encourage people to use health services, while a similar proportion (17%) thought that it would encourage people to use the other services situated within the facility. Fewer than one in ten (8%) could not see any benefit to an integrated health facility being set up in their local area.

The convenience of an integrated service featured heavily in the qualitative discussions too. Participants discussed the challenges of taking their families to multiple services such as dentists, doctors, and some hospital services. They felt that being able to go to one venue would reduce the amount of travel they would need to do to visit these services.

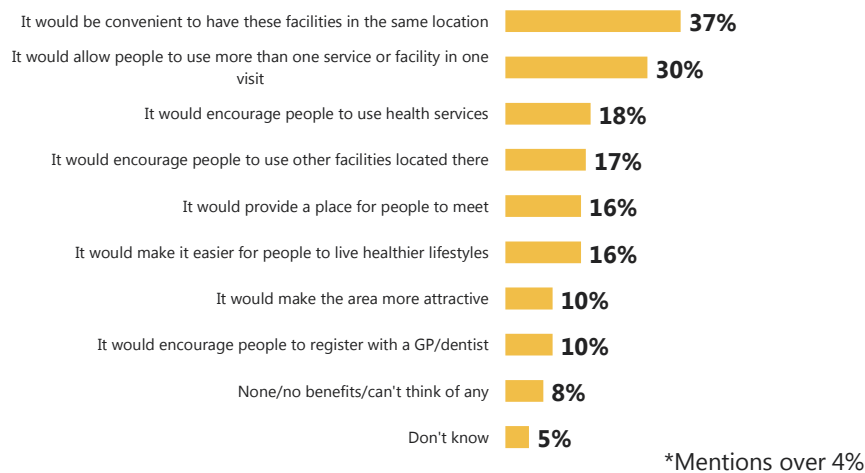
"Because then you don't have to go to the dentist, and then get the bus, and change areas to go to the doctor's appointment... It makes it a simple in and out job." (Resident, Health Services Focus Group, Old Kent Road Opportunity Area)

Residents taking part in the focus group, as well as GPs in the area, also felt that the co-location of these services might encourage more families – particularly children – to use the services because they are so visible and available to them. As one GP said, co-locating health and leisure services will 'plant the seed' in the minds of service users, and they might be encouraged to use the gym. Participants also felt that play areas could incentivise children to go the venue more often to use services like dentists that are not usually associated with leisure or enjoyment.

"It's a good idea – because if you have to take the children to the dentist, there is a play area or somewhere, you have something to entice them, nobody likes it but you have to go." Old Kent Road – Health Services Focus Group

Figure 5.5: Suggestions for what benefits might be brought by setting up an integrated health facility in the local area – Old Kent Road Opportunity Area

If a facility like this was set up in the local area, what benefits, if any, do you think that it would bring?



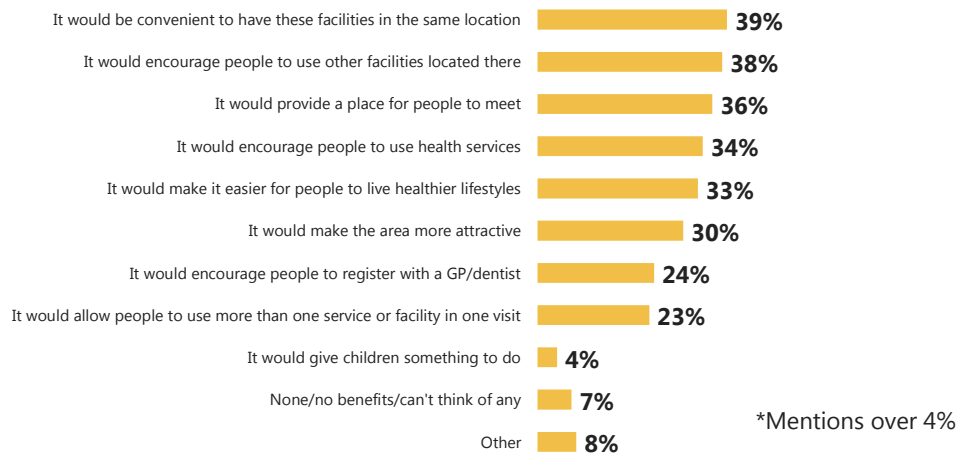
Base: All living in the Old Kent Road Opportunity Area (352)

People who would like to go out more are more likely to say that it would be convenient to have all of these facilities in a single location (43% mention this, compared with 26% who say that they do not wish to get out more). They are also more likely to say that such a facility would be beneficial in providing a place to meet (21% say this, compared with 15% among those who do not wish to get out more). A further group more likely to say that it would be beneficial in providing a place to meet is those who disagree that there are currently enough places to meet in the local area (25% suggest this benefit, compared with 12% among those who think there are already enough places to meet locally). A community hub with health and leisure services might therefore serve those in the population who currently struggle to meet up with people in the local area.

Similarly, among those in the Oval and Kennington Development Area, the most commonly suggested benefit of an integrated health facility is also convenience of having these facilities in the same location (mentioned by 39%). A similar proportion (38%) thought it would encourage people to use facilities there other than health services. Fewer than one in ten (7%) said that there would be no benefits or that they couldn't think of any.

Figure 5.6: Suggestions for what benefits might be brought by setting up an integrated health facility in the local area – Oval and Kennington Development Area

If a facility like this was set up in the local area, what benefits, if any, do you think that it would bring?



Base: All living in the Oval and Kennington Development Area (101)

Feedback on specific integrated services

In the focus groups with Old Kent Road residents, participants were presented with some examples of integrated health centres in the surrounding area. The West Norwood Health and Leisure Centre was one of these services, which provides a leisure centre including a swimming pool, GP and dental services, community health services, a Council customer care centre and a community space for hire. It offers diabetes management, exercise classes, NHS health checks, gym and exercise classes, dentists, physiotherapy among other services. The West Norwood Centre was also explored with five health professionals working in Southwark

The Bromley-by-Bow Centre, Brockwell Park Surgery, and the Dulwich Hospital Scheme were also presented to the residents of Old Kent Road. These services combine a range of services including a school and primary care services (Dulwich), a GP and allotment (Brockwell Park), and primary care services, advice services, money management and art classes (Bromley-by-Bow). More information about these services is provided in Appendix K.

Feedback on the West Norwood centre was very positive. Some participants were already aware of the facility and thought it was a bonus for the residents of West Norwood. Participants acknowledged that having the health and leisure services co-located might **encourage people to do more exercise**. They said that it would take away the excuse for people who might feel that they are able to go to a GP appointment but not get to a gym. GPs working at the facility had also received positive feedback from patients, and felt that they were frequenting the leisure facilities more because of the convenience of them being in the same place, and were able to plan their days more effectively.

"It takes away excuse who say they can't make it - If you can make it to the doctors, you can make it to the gym"
(Resident, Health Services Focus Group, Old Kent Road Opportunity Area)

GPs also suggested that the different facilities being in the same building also **encourages GPs themselves to recommend the services to patients**, bringing it to the forefront of their minds when speaking to patients.

"Because the services are co-located, people are more likely to access them - awareness of things going on so more likely to recommend something to a patient when you see it. Patients can see it for themselves and also we are more likely to recommend it." Health professional depth interview

However, some residents did not think that co-locating the two services was something that would necessarily benefit them. There were also **questions raised about the price of the services** and how this might impact usage. It was also suggested by health professionals and residents alike that locating leisure centres alongside health services would not necessarily encourage greater use of the leisure centres if people were too ill to use them.

"There is a theoretical logic behind it but you could also argue that the majority of people who go to a health centre are ill and the last thing they want to do is battle through a load of young men at the gym pumping iron. Therefore, I'm not convinced that we've got it clear yet." Health professional depth interview

The GPs working in the West Norwood Centre also suggested that while **the services are co-located, they are not necessarily integrated**. They described the links between the different services as 'informal'; they might make a recommendation for someone to go down to the leisure centre, but it has a separate membership. They also said that there was not a lot of interaction between the services, and suggested that socials between the staff might remedy this, or a main reception area would help to signpost, and sign-up users to the different things on offer.

"Gym is quite separate - not much communication between gym and GP, or GP and dentists but sometimes I suggest they pop in." Health professional depth interview

Services that stood out to participants from the other facilities discussed during the group discussion included the weight management classes and money advice services at Bromley-by-Bow. The use of outside space at the Brockwell Park Surgery was also felt to be a positive step in promoting healthy eating in the community.

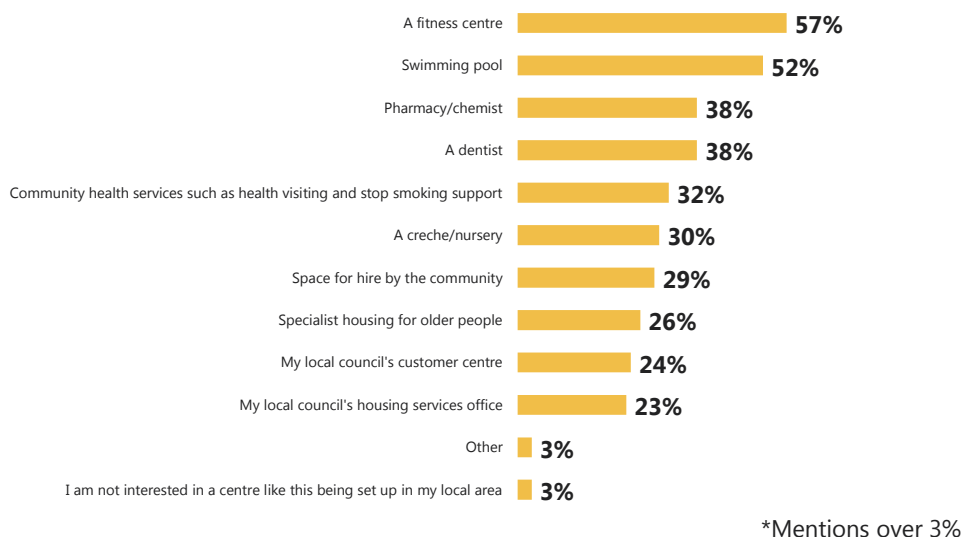
"Good idea because support a lot of common household issues, obviously lots of households worrying about money and how to get a job" (Resident, Health Services Focus Group, Old Kent Road Opportunity Area)

The services to include in an integrated health facility

When asked what services they would like an integrated health facility to feature, **the most common suggestion given by participants in the Old Kent Road Opportunity Area is a fitness centre** (mentioned by 57%), reflecting the qualitative discussions, in which participants said that there was a lack of leisure facilities in the area. A slightly smaller proportion (52%) suggest including a swimming pool, while nearly four in ten (38%) suggest a chemist or pharmacy. Fewer than one in 20 (3%) say that they would not be interested in an integrated health facility being set up in their area.

Figure 5.7: Suggestions for which services an integrated health facility should include – Old Kent Road Opportunity Area

If a centre like this was set up in the local area, what community facilities or public services other than a GP surgery would you like it to include?



Base: All living in the Old Kent Road Opportunity Area (352)

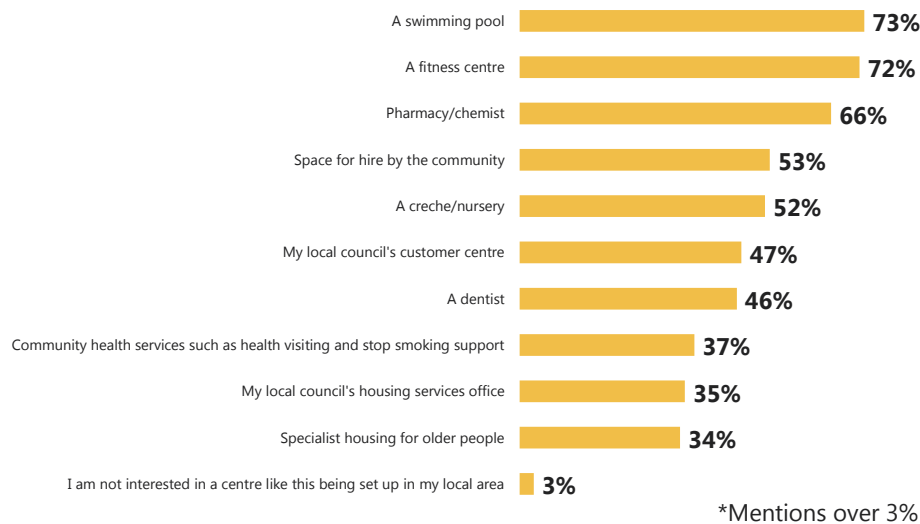
Those who have lived in the local area for fewer than five years are more likely to say that they would like a swimming pool included in an integrated health facility (62%, compared with 47% of those who have lived in the area for five years or more), and this is likely to be linked with age (54% of those aged 16-34 and 57% of those aged 35-54 mention a swimming pool, compared with 36% of those aged 55 and over). Those who have lived in the area for longer are more likely to suggest that they would like to see community health services included (37%, compared with 23% of those who have lived in the area for fewer than five years). This does not appear to be linked to age, with no statistically significant differences across the three age groups.

Those who agree that they would like to go out more are more likely to suggest that a fitness centre be included in an integrated health facility (64% suggest this, compared with 46% among those who don't want to go out more).

Among those in the Oval and Kennington Development Area, almost three quarters (73%) say that they would like to see a swimming pool included in an integrated health facility, while a similar proportion (72%) say that they would like to see a fitness centre included. Two thirds (66%) say that they would like to see a pharmacy or chemist, while more than half (53%) suggest including space for hire by the community.

Figure 5.8: Suggestions for which services an integrated health facility should include – Oval and Kennington Development Area

If a centre like this was set up in the local area, what community facilities or public services other than a GP surgery would you like it to include?



Base: All living in the Oval and Kennington Development Area (101)

In the qualitative discussions, participants discussed a range of services that they would like to see in a new health facility in the area. Participants liked the idea of having dietary advice services, cooking classes, and exercise classes. Primary care services were also important to residents, and they were also keen to see some hospital services like X-rays, bloods, and a minor injuries unit to take pressure off of hospitals.

They also wanted to see a facility that attracts the whole community, and has activities for people of different ages. In particular, they wanted **a community centre where young people can hang out with each other** instead of having to hang out on the streets. They also felt that families with young children should also be a target group, with crèche facilities and play centres provided so adults with young children can also access the services. They felt this would be particularly important if someone wanted to receive benefits or financial advice, but did not want their children present. Furthermore, they wanted the facility to be a place that provided the local community with the opportunity to meet and interact with others.

"Mothers and children / mental and physical health / play centres / crèches – where people could get out the house and meet other people – now we have nothing." (Resident, Health Services Focus Group, Old Kent Road Opportunity Area)

For some residents who had health problems, however, it was more important that this facility would provide **increased choice and access to health services**, rather than additional leisure facilities. They felt that on balance, health services were more important than an additional gym or swimming pool.

"If we had to choose, I think we would go for the hospital – health services are more acute than the leisure centre" (Resident, Health Services Focus Group, Old Kent Road Opportunity Area)

Health professionals in the area agreed that the kind of services provided in **a new facility would need to fit the demographics of the local area**, which are likely to change with the regeneration. Any new services therefore need to be built with the needs of the community in mind; for example, include a diabetes clinic because of the high prevalence of the condition in the area.

"As we have 32,000 people who don't live in the area at the moment it's very difficult to judge what services we'll need to be providing. Exactly what gets provided to them we'll have to wait and see. Is it going to be loads of mothers with young kids, or people retiring because its easy reach to the galleries in central London?" Health professional depth interview

It was also suggested that **stakeholders would need to be engaged early on and throughout the design process** to ensure there is buy-in from the local area. This would include co-designing the facility with the community and likely service users. The example of Sunshine House in Peckham was given as somewhere this had worked effectively in the past.

"Community engagement will need to come into it - a needs assessment and engagement. Local people will need to have ownership so that can identify it as their service. Sunshine house in Peckham - a paediatric service engaging children in design and naming of the building - that got lots of buy in from families. That really pays dividends." Health professional depth interview

Diet and exercise



6 Diet and exercise

Another key theme for the research was to explore attitudes and behaviours around eating and exercise. This section looks at the eating habits of residents of the Old Kent Road Opportunity Area and the Oval and Kennington Development Area, including the availability of healthy food in the areas. It then explores residents' exercise habits, their attitudes to walking in the area, before looking at what would encourage them to lead a healthier lifestyle.

On the whole, residents of both areas show positive attitudes towards healthy eating. Residents in both areas report feeling informed about healthy eating in the survey, which is supported by qualitative research with school children who show a good awareness of the difference between healthy and unhealthy food. Similarly, in both areas, people appear to be interested in cooking for themselves and tend to say that they try to shop, cook and eat healthily. Whilst informed about healthy eating, there were Old Kent Road Opportunity Area residents, however, who displayed a lack of knowledge around how to put healthy foods together in cooking, suggesting a possible need for local education.

Residents in both the Old Kent Road Opportunity Area and the Oval and Kennington Development Area suggest fresh food is easy to buy in their local area, however the qualitative research reveals that there are residents who travel to surrounding areas to buy fresh, healthy food. The fresh food that is available in the two areas is not always affordable, and the qualitative research in the Oval and Kennington Development Area in particular supports this.

A substantial minority of Old Kent Road Opportunity Area residents suggest take-away food is more easily available than fresh food, but notably fewer Oval and Kennington Development Area residents say the same. The qualitative research in both areas suggests that residents (including children) in these areas feel that there are too many fast food and take-away eateries and that healthy alternatives are seriously lacking.

Whilst residents in both the Old Kent Road Opportunity Area and Oval and Kennington Development Areas feel informed about, and have positive attitudes towards, healthy eating, their actual dietary habits and behaviour suggest that although they have good intentions, they do not always follow through. For example, although a good proportion of people in both areas report eating home cooked meals daily, fewer residents in the Old Kent Road Opportunity Area are eating the recommended daily portions of fruit and vegetables than the average in England. The equivalent numbers in the Oval and Kennington Development Area, however, are slightly above the average in England. Additionally, take-away and ready meal foods make up a large part of some people's diets with school children in the qualitative research reporting that they too frequently eat junk food and take-away.

Residents in both areas on the whole consider themselves to be at a good weight for their height: however, considering the high proportions of overweight and obese people across London, they may well be underestimating this. There are young people who are currently healthy, but have potentially

problematic eating habits, meaning that as they age these continued unhealthy habits could result in them becoming overweight in the future.

Residents in both areas are not highly active, with most doing 30 minutes of moderate exercise less than five times a week. Many people believe that nothing would convince them to do more exercise, with minorities suggesting they are already active enough. However, residents suggest that they would be more likely to lead a healthier lifestyle if it was easier financially (for example, lower prices for gyms) or if they had more time available.

Good numbers of residents in both areas regularly walk, with walking being a popular means for getting to and from work too. School children also enjoy walking to and from school in both areas, reporting that it is nicer and quicker than using local buses, as well as proving the opportunity to socialise with friends. The residents and school children in both areas suggested factors that would encourage them to walk more, including more time, better health, cleaner and safer pavements and fewer and less dangerous crossings.

6.1 Attitudes towards healthy eating

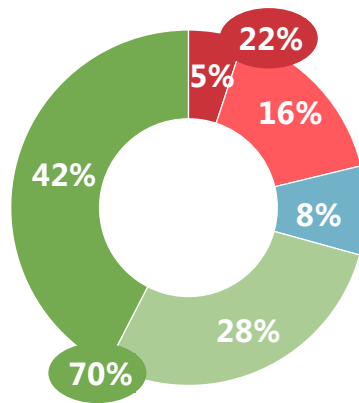
Generally speaking, most residents in both the Old Kent Road Opportunity Area (Old Kent Road Opportunity Area) and the Oval and Kennington Development Area (Oval and Kennington Development Area) show positive attitudes towards healthy eating. The qualitative research with children supports this, and suggest that young people in the two areas have a good understanding of the difference between healthy and unhealthy food.

Feeling informed about how to eat healthy

Among people living in the Old Kent Road Opportunity Area, only two in ten (22%) say that they need more information on how to eat healthily, while seven in ten (70%) think that they have enough information already, which suggests that a good proportion of people feel informed about healthy eating. This is in line with the results of the Health Survey for England 2007, which suggest that the majority of adults are aware of public health campaigns relating to healthy eating, such as eating five portions of fruit and vegetables per day or reducing salt intake.²⁵

²⁵ Knowledge and attitudes towards healthy eating and physical activity: what the data tell us available at www.noo.org.uk (last access 3rd May 2017)

Figure 6.1: Agreement with the statement: ‘I need more information on how to eat healthily’ - Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

The qualitative research supports this as school aged children in the Old Kent Road Opportunity Area appeared well informed about healthy eating. For example, they were able to list foods (Weetabix, bagels, salad, vegetables, fruit, salmon, chicken and potatoes), as well as some meals (homemade chicken rice and peas, lasagne, spaghetti and meatballs) that they considered to be healthy. They were equally well informed about unhealthy foods (chips, burgers, crisps, fried chicken, biscuits, chocolate bars), whilst also reporting a number of fast food or take away options which they considered to be unhealthy including McDonalds, KFC, Morley’s chicken, or burger, and chips.

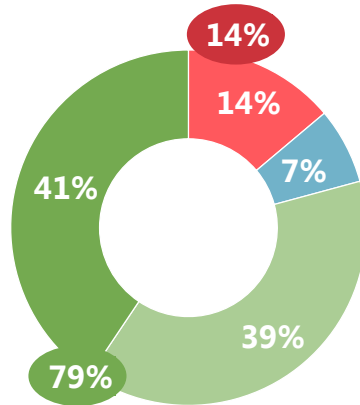
Among people living in the Oval and Kennington Development Area, around one in six (14%) agree they need more information on how to eat healthily, compared to eight in ten (79%) who think they have enough information already. These figures too suggest that people living in the area feel that they are informed about how to eat healthily.

Figure 6.2: Agreement with the statement: ‘I need more information on how to eat healthily’ - Oval and Kennington Development Area

I’m going to read out a list of things that some people have said. Please can you tell me the extent to which you agree or disagree with each?

I need more information on how to eat healthily

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don’t know/not sure



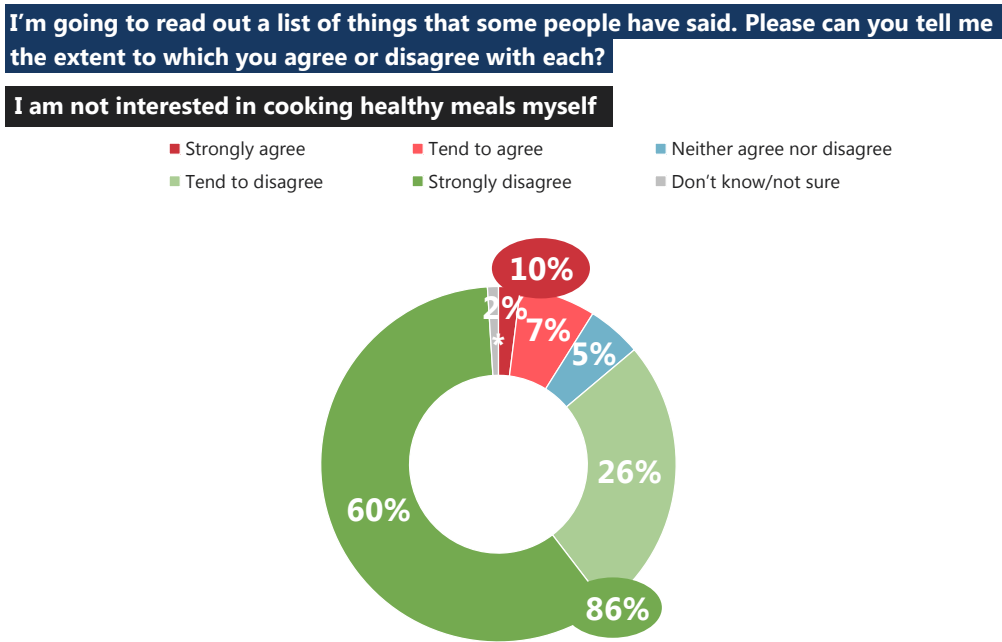
Base: All living in the Oval and Kennington Development Area (101)

In the qualitative research, school aged children in the Oval and Kennington Development Area were able to easily demonstrate that they were informed about what is regarded as healthy and unhealthy food. As in the qualitative research in the Old Kent Road Opportunity Area, children in the Oval and Kennington Development Area were able to distinguish between healthy foods, (fruit, bagels, cereals, toast, vegetables, sandwiches, nuts) and unhealthy foods (pizza, McDonalds, fried chicken and chips, cakes and donuts).

Interest in cooking healthy meals

A high proportion of residents of the Old Kent Road Opportunity Area reported in the survey that they believe that they know how to cook healthy meals and have an interest in doing so. Eight in ten (81%) Oval and Kennington Opportunity Area residents disagree with the statement ‘I do not know how to cook healthy meals myself’, and 86% of residents disagree that they are not interested in cooking healthy meals themselves.

Figure 6.3: Agreement with the statement: ‘I am not interested in cooking healthy meals myself’ – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

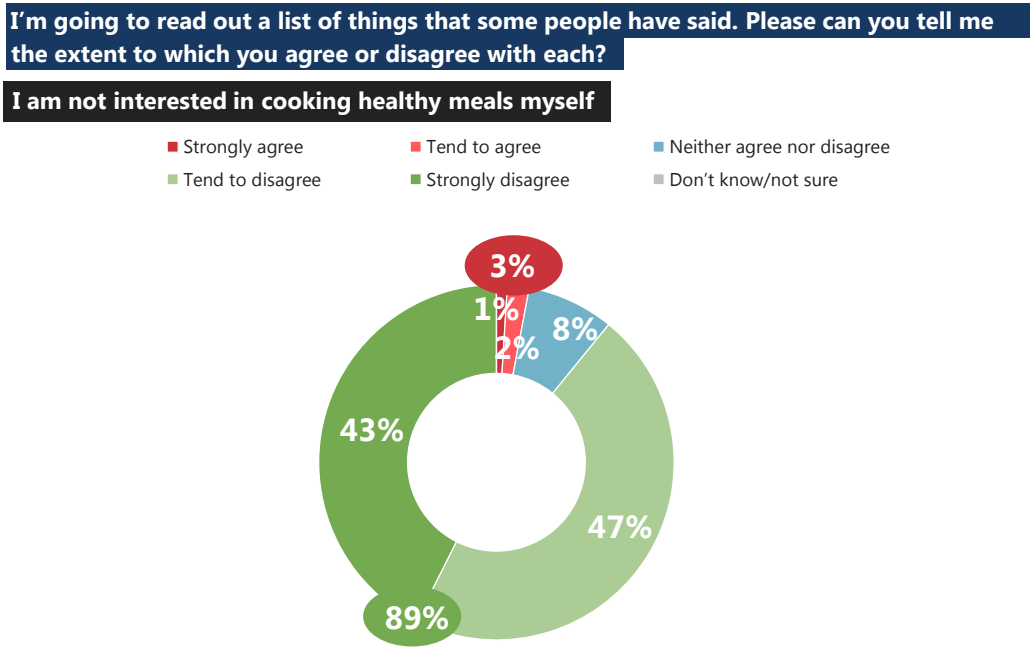
From the qualitative research, however, despite feeling informed about healthy food, there were Old Kent Road Opportunity Area residents who talked about a lack of knowledge about how to put healthy foods together suggesting that parts of the population would benefit from education around how to cook healthily:

“People don’t know how to cook though, they’re not going to go out and buy a broccoli because they don’t know what to do with it” (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

“Know how to cook but not healthy stuff really – I know what is healthy, but don’t know how to put them together” (Resident, Social Isolation Workshop, Old Kent Road Opportunity Area)

Nearly all (96%) residents of the Oval and Kennington Development Area disagree with the statement ‘I do not know how to cook healthy meals myself’ in the survey, suggesting too people feel very well informed about how to cook healthy food at home. Similarly, a high proportion (89%) of Oval and Kennington Development Area residents disagree that they are not interesting in cooking healthy meals themselves.

Figure 6.4: Agreement with the statement: ‘I am not interested in cooking healthy meals myself’ – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

Shopping, cooking and eating healthily

The majority of residents in the Old Kent Road Opportunity Area say they try to shop, cook and eat healthily, with nine in ten (89%) agreeing with this. This finding is broadly in line with the British Social Attitudes Survey, which found that 83% of people believe it matters a great deal or quite a lot that the food they buy is healthy²⁶.

Data from PHE shows that in Southwark as a whole, there is a lower prevalence of overweight adults compared to the rest of England (56.7% vs. 64.8% in England), although there is a lower proportion of healthy eating adults (45.6% vs. 52.3% in England)²⁷. There are also fewer binge drinking adults (14.9% vs. 20% in England)²⁸.

²⁶ <http://www.bsa.natcen.ac.uk/media/39118/bsa33-food-supply-chain-report.pdf>

²⁷ <http://www.phoutcomes.info/search/obesity#page/0/gid/1/pat/6/par/E12000007/ati/102/are/E09000028/iid/90640/age/164/sex/4>

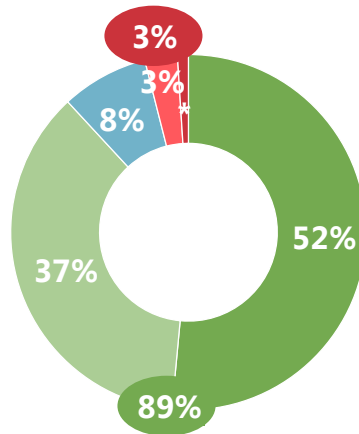
²⁸ http://localhealth.org.uk/GC_preport.php?lang=en&s=174&view=map11&id_rep=r03&selId0=475&nivgeo=ward_2015

Figure 6.5: Agreement with the statement: ‘I try to shop, cook and eat healthily’ – Old Kent Road Opportunity Area

I’m going to read out a list of things that some people have said. Please can you tell me the extent to which you agree or disagree with each?

I try to shop, cook and eat healthily

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don't know/not sure



Base: All living in the Old Kent Road Opportunity Area (352)

As is to be expected, residents in the Old Kent Road Opportunity Area who already report healthy eating habits are more likely to show positive attitudes towards healthy eating. Those who already report healthy eating are – unsurprisingly – less likely to think they need more information on how to eat healthily, with more than eight in ten (81%) who eat five or more portions of fruit and vegetables a day disagreeing with the statement (compared to 67% of those who do not eat the full five portions). In addition, nearly all (93%) Old Kent Road Opportunity Area residents who eat the recommended five portions of fruits and vegetables a day are interested in cooking healthy meals themselves (compared to 84% who do not eat the recommended fruit and vegetable portions). Those who eat the recommended amount of fruit and vegetables, say that they try to shop, cook and eat healthily (99% compared to 87% among those who eat fewer than five portions a day).

Similarly, those Old Kent Road Opportunity Area residents who lead a more active lifestyle are more likely to report positive attitudes towards healthy eating. Those who walk for more than three hours per week are more confident in their ability to cook healthily (86% disagree that they do not know how to cook healthy meals themselves, compared to 76% of those who walk less than three hours a week), and are more likely to disagree that they are not interested in cooking healthy meals (92%, compared to 80% of those who walk for less). Those who walk for three or more hours per week are also more likely to try to cook, shop and eat healthily, with more than nine in ten (93%) of this group saying that they do this (compared with 85% of those who walk for fewer than three hours in a typical week).

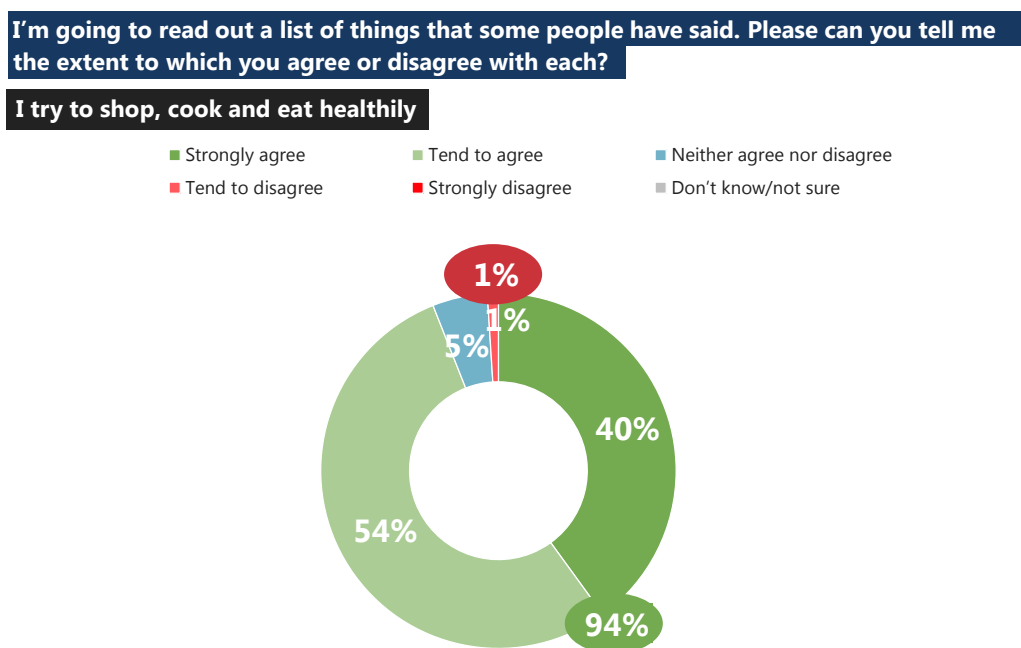
Women are also more likely than men to have a more positive attitude towards eating healthily. They are more likely than men to feel strongly that they already have enough information on healthy eating (47% strongly disagree that they need more information on how to eat healthily, compared with 36% of men), and are more likely to feel interested in cooking healthy meals for themselves (with 93% of women disagreeing that they are not interested in cooking healthy meals

compared to 78% of men). Women are also more likely than men to say that they try to shop, cook and eat healthily (94% of women say that they do this, compared with 84% of men). Similar attitudes are reflected in the British Social Attitudes Survey (which found that 86% of women feel buying healthy food mattered a great deal or quite a lot, while only 79% of men think likewise²⁹) and the Health Survey for England, where 80% of women agree that ‘Healthy foods are enjoyable’ compared to 66% of men, and 74% of women agree ‘I really care about what I eat’ compared to 64% of men³⁰.

More than nine in ten (94%) people in the Oval and Kennington Development Area agree that they try to shop, cook and eat healthily. Almost no one (1%) disagrees with this. In comparison to national level data from the British Social Attitudes Survey, it appears that Oval and Kennington Development Area residents are more concerned with healthy eating than the national average (83% of British people believe buying healthy food matters a great deal or quite a lot)³¹.

Similarly, data from PHE shows that adults in Oval are more likely to be healthy eating compared to the rest of England (38.2% compared to 28.7% in England), although these differences are not significant. Additionally, there is a lower prevalence of obese adults (19.6% v. 24.1% in England) – though again not significant. There are similar levels of binge drinking in this area compared to the rest of England (20.4% in Oval compared to 10% in England).³²

Figure 6.6: Agreement with the statement: ‘I try to shop, cook and eat healthily’ – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

²⁹ Ibid

³⁰ http://www.noo.org.uk/uploads/doc/vid_17669_AdultDietFactsheet_Dec2012.pdf

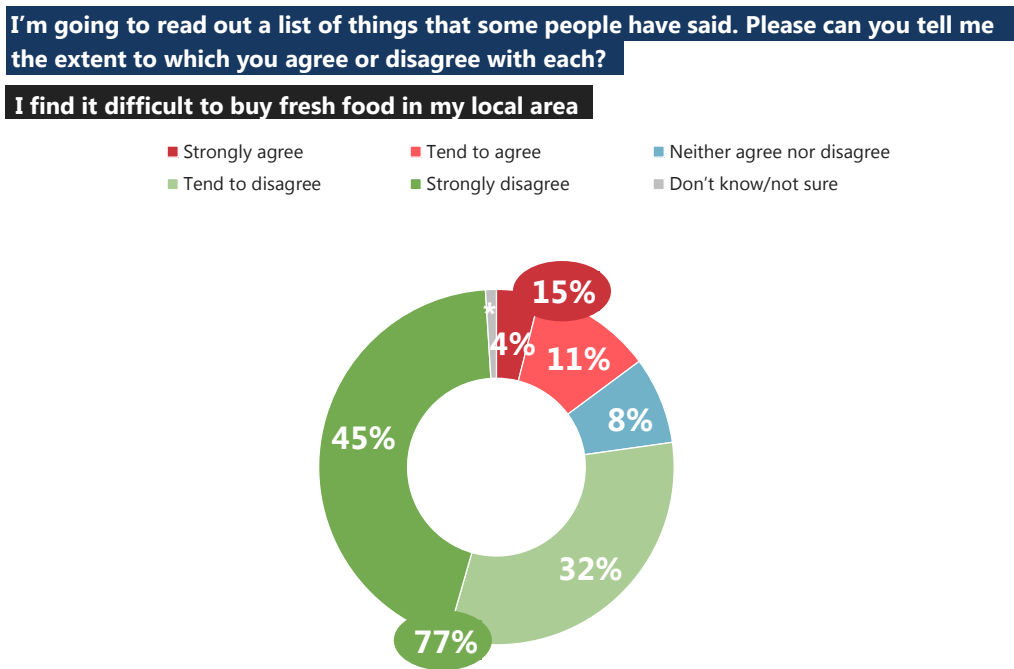
³¹ Ibid

³² http://localhealth.org.uk/GC_preport.php?lang=en&s=158&view=map11&id_rep=r03&selld0=363&nivgeo=ward_2015

6.2 Availability of healthy food

Residents in the Old Kent Road Opportunity Area tend to suggest that fresh food is easy to buy in their local area with 77% of residents disagreeing that they find it difficult to buy fresh food in their local area. This figure is broadly in line with overall figures for London: the London Health Commission found 17% of Londoners agreed that buying fresh and healthy food locally was difficult, while 80% disagreed³³.

Figure 6.7: Agreement with the statement: ‘I find it difficult to buy fresh food in my local area’ – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

In the qualitative research, Old Kent Road Opportunity Area residents were generally quite positive about access to healthy foods, reporting that they were able to buy these from the many supermarkets along (and off) the Old Kent Road, as well as from local shops and markets that sell fresh fruit and vegetables. School children in the Old Kent Road Opportunity Area were less positive about local access to healthy food, however it was clear that they were thinking more so about local eateries, rather than shops and supermarkets (as to be expected since they would not have responsibility for buying food to be consumed at home):

“Like some healthy restaurants in the area, you have to travel quite far to find somewhere that is healthy” (Pupil, Year 8, Old Kent Road Opportunity Area).

Old Kent Road residents spoke of local off licences and markets (at Vauxhall on a Sunday for example), where they could buy healthy food. However, others talked about having to go further afield to buy fresh food, for example to Brixton or to East Street Market, off the Walworth Road.

³³ <https://www.ipsos.com/ipsos-mori/en-uk/london-health-commission-researching-lives-londoners>

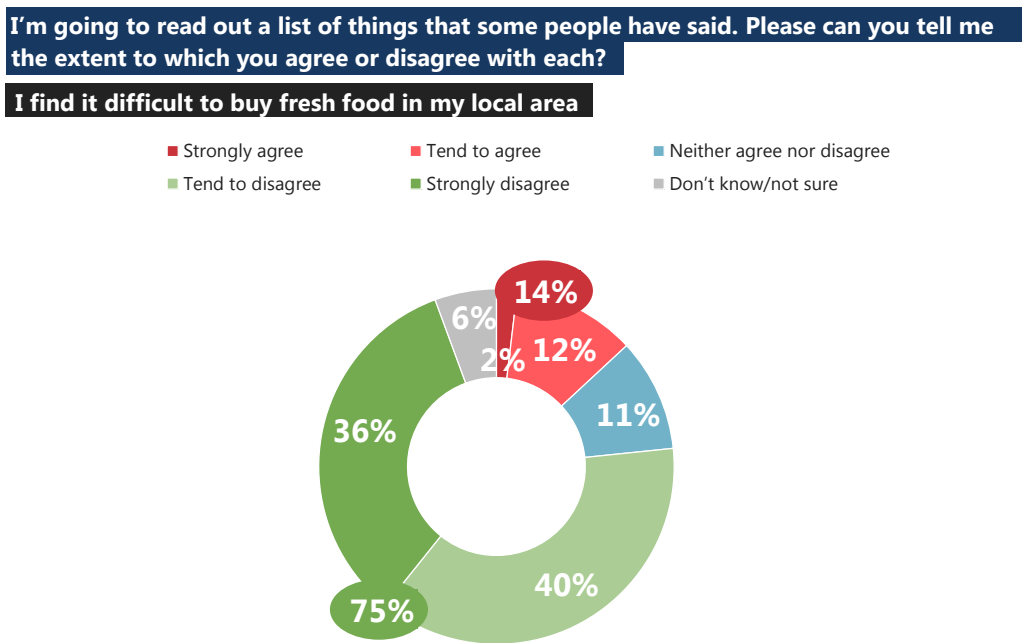
“If there were fruit and veg shops on my commute, I would probably subconsciously want to eat them more instead of it being a conscious effort to eat healthily... at the moment there are only unhealthy food shops and things” (Resident, Social Isolation Workshop, Oval and Kennington Development Area).

Similarly, some of the Oval and Kennington Development Area school children raised the point that other than the supermarkets, there is nowhere to buy healthy food, meaning that they and their families have to travel to surrounding areas for this:

“If I was to buy healthy food – once in a while me and mum will go to Brixton market and get fish and fruit and eat at home” (Pupil, Year 9, Oval and Kennington Development Area)

In the quantitative survey, three quarters (75%) of residents in the Oval and Kennington Development Area disagree that fresh food is difficult to buy in their local area suggesting that access to healthy food is not a big problem for people who live in the area.

Figure 6.8: Agreement with the statement: ‘I find it difficult to buy fresh food in my local area’ – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

Affordability of local healthy food

When it comes to affordability of food in the Old Kent Road Opportunity Area, one third (36%) of Old Kent Road Opportunity Area residents think that fresh food is too expensive. This proportion is smaller than suggested by the

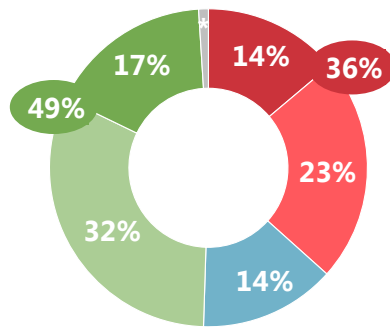
London Health Commission, who found that 46% of people think healthy food is too expensive, but still represents a reasonable proportions of residents who may find affordability a barrier to eating healthily³⁴.

Figure 6.9: Agreement with the statement: ‘Fresh food is too expensive’ – Old Kent Road Opportunity Area

I’m going to read out a list of things that some people have said. Please can you tell me the extent to which you agree or disagree with each?

Fresh food is too expensive

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don’t know/not sure

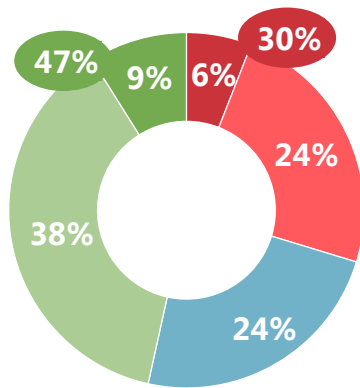
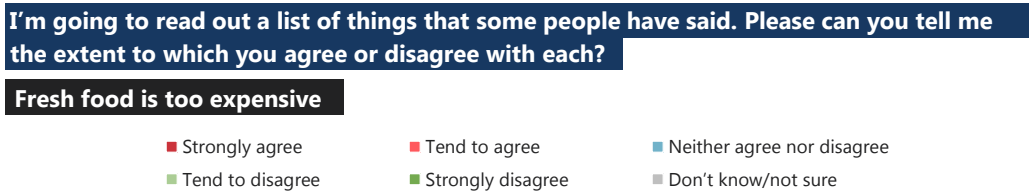


Base: All living in the Old Kent Road Opportunity Area (352)

Just under one third (30%) of the Oval and Kennington Development Area residents agree that they think that fresh food is too expensive, while just under half (47%) disagree.

³⁴ <https://www.ipsos.com/ipsos-mori/en-uk/london-health-commission-researching-lives-londoners>

Figure 6.10: Agreement with the statement: ‘Fresh food is too expensive’ – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

However, in the qualitative research, Oval and Kennington Development Area residents talked about the need for more affordable access to healthy food. It was noted that the healthy food which is available, from the Farmers market for example, is too expensive:

There is the farmers market on the Saturday, but it's very expensive (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

I want more healthy options, more independent grocers, more affordable independent shops (Resident, Social Isolation Workshop, Oval and Kennington Development Area)

Ease of accessing healthy food, in comparison to buying take-away food

Four in ten people (42%) living in the Old Kent Road Opportunity Area agree that, in their local area, it is easier to buy food from a take-away than it is to buy fresh, healthy food. Data from Public Health England shows that Southwark has between 112- 128 fast food and take-away outlets per 100,000 people³⁵. In the opportunity area specifically there are 42 hot food take-away outlets; the number of take-away outlets might be acting as a barrier to fresh and healthy food access.

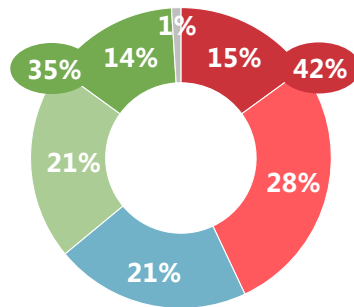
³⁵ <http://www.feat-tool.org.uk/map/>

Figure 6.11: Agreement with the statement: ‘In my local area it is easier to buy food from a take-away than it is to buy fresh, healthy food’ – Old Kent Road Opportunity Area

I'm going to read out a list of things that some people have said. Please can you tell me the extent to which you agree or disagree with each?

In my local area it is easier to buy from a take-away than it is to buy fresh, healthy food

■ Strongly agree ■ Tend to agree ■ Neither agree nor disagree
■ Tend to disagree ■ Strongly disagree ■ Don't know/not sure



Base: All living in the Old Kent Road Opportunity Area (352)

Women are more likely than men to suggest it is easier to buy fresh and healthy food than it is to buy food from a takeaway, with 40% of women in the Old Kent Road Opportunity Area disagreeing with the statement ‘In my local area it is easier to buy from a take-away than it is to buy fresh, healthy food’, compared to 30% of men. Given that women are more likely to have positive attitudes towards healthy eating, this difference may actually represent differing motivations – women may be more committed to buying fresh food, while those men with less positive attitudes may find it easier to buy take-away food.

The qualitative research with residents and school children suggests that **the large number of fast food and take-away eateries in the Old Kent Road Opportunity Area could be acting as a barrier to healthy eating**. Notably, the two schools taking part in the research are in close proximity to fast food takeaways; there are ten within 400m of one school, and five within 400m of the other:

“Lots of unhealthy food shops – too many chicken shops” (Resident, Southwark Social Isolation Workshop).

“Too many chicken shops” (Resident, Southwark Social Isolation Workshop).

“5 chicken shops around a school means you will have fat people.” (Resident, Southwark Social Isolation Workshop).

“Small ones that have cropped up – you’ve got to ask yourself, is that good food when it’s £1 for chicken and chips”
(Resident, Southwark Social Isolation Workshop).

School children too, in the qualitative research, were very familiar with the fast food and take-away food outlets in the area (McDonalds, Morley’s, Nandos and KFC), and often mentioned these when discussing where they most enjoy eating food. The large numbers of these were mentioned, as was the frequent use by local school children:

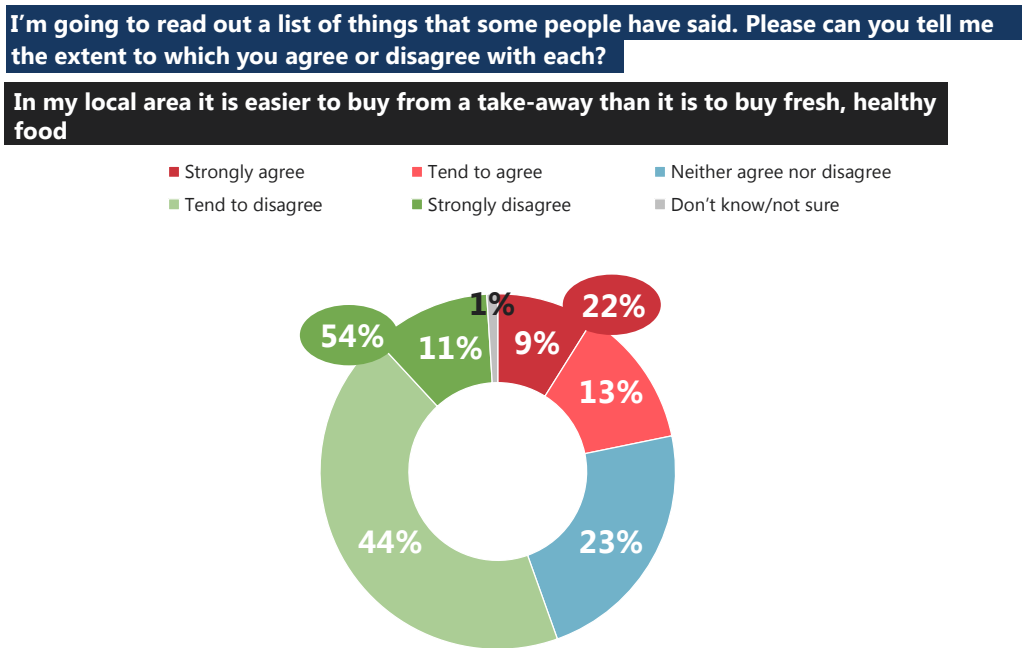
"If I know I have to wait a while before getting home I'll get myself some chicken and chips" (Pupil, Year 8, Old Kent Road Opportunity Area)

"McDonalds. We went passed it the other day and it was literally over pouring with students" (Pupil, Year 8, Old Kent Road Opportunity Area)

[When discussing what would encourage them to eat healthier] "More healthy restaurants, a lot of chicken and chip shops" (Pupil, Year 8, Old Kent Road Opportunity Area).

Among the Oval and Kennington Development Area residents surveyed, over half (54%) disagree that it is easier to buy food from a take-away than it is to buy fresh, healthy food whilst 22% agree. Although the notably smaller sample size in the Oval and Kennington Development Area means this difference should be considered carefully, data from Public Health England suggests that Lambeth has around 98 fast food and take-away outlets per 100,000 people³⁶, data from Lambeth council shows there are 12 hot food take-aways in the Oval, Kennington, Stockwell area, although this is data from four years ago so it is likely to have changed.³⁷This suggests that although there are a large number of these type of eateries, they are not necessarily acting as a barrier to access to healthy food.

Figure 6.12: Agreement with the statement: 'In my local area it is easier to buy food from a take-away than it is to buy fresh, healthy food' – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

Oval and Kennington Development Area school children in the qualitative research, however, mentioned the abundance of junk food and take-away options in the local area:

³⁶ <https://www.noo.org.uk/visualisation>

³⁷ Data from 2013. https://www.lambeth.gov.uk/sites/default/files/EB05_13_Location_of_Takeaway_Food_Near_Schools_April2013.pdf

“Unhealthy area to eat food – lots of chicken and chips shops – sometimes one next to another next to another – it’s nice but unhealthy” (Pupil, Year 9, Oval and Kennington Development Area).

“Tennessee (chicken shop) keep raising their prices, but nearly everyone from school goes there, they take advantage – we tell them it’s too much but we buy it anyway” (Pupil, Year 9, Oval and Kennington Development Area).

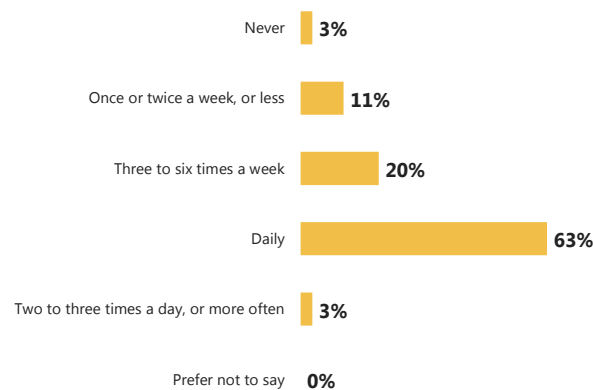
6.3 Dietary behaviour

Home cooked meals

Just under two thirds of residents (63%) living in the Old Kent Road Opportunity Area say they eat home-cooked meals that they have either made themselves or that have been cooked by someone else in their household every day. A minority eat home-cooked meal regularly but not daily, with 20% of people eating these meals three to six times a week.

Figure 6.13: Frequency of eating home-cooked meals – Old Kent Road Opportunity Area

Thinking about things that you eat and drink, how often, if it all, do you eat home-cooked meals made by you or a member of your household?



Base: All living in the Old Kent Road Opportunity Area (352)

The qualitative research with school children in the Old Kent Road Opportunity Area broadly supports the quantitative survey findings, since children in the Old Kent Road Opportunity Area often reported that the place where they eat most healthily is home, when compared with at school or when they eat out:

“[Eat the most healthily] With mum because she makes homemade stuff” (Pupil, Year 5, Old Kent Road Opportunity Area)

This, however, was not always the case, as there were school children who blamed home for the lack of home cooked and healthy food:

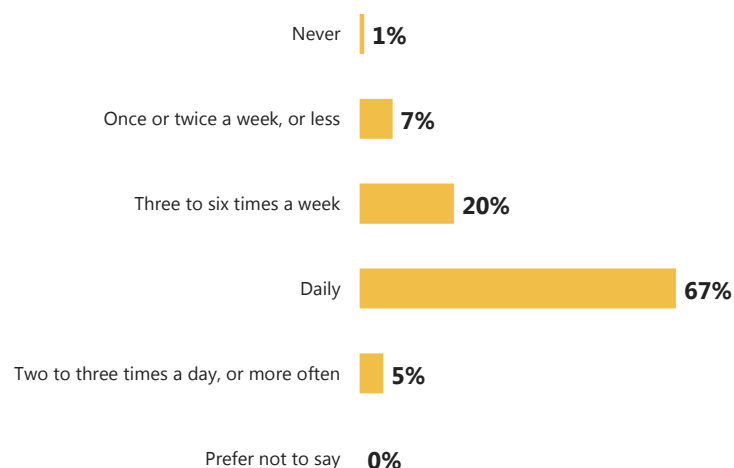
“Sometimes we have some fruit at home, but everything else is not good” (Pupil, Year 8, Old Kent Road Opportunity Area)

Healthy eating habits in the Old Kent Road Opportunity Area are associated with healthy exercise habits, with those who walk for three or more hours in a typical week more likely to eat home-cooked meals on a daily basis (69%, compared with 58% of those who walk for fewer than three hours a week). There is also a positive relationship between eating home-cooked meals and mental wellbeing score: those who eat home-cooked meals two to three times a day have a mean score of 26.73, compared to 22.59 among those who eat home-cooked food once or twice a week, and 20.86 among those who never eat a home-cooked meal.

Around two thirds of Oval and Kennington Development Area residents (67%) say they eat home-cooked meals that they have either made themselves or that have been cooked by someone else in their household every day. A minority eat home-cooked meal regularly but not daily, with 20% of people eating home-cooked meals three to six times a week.

Figure 6.14: Frequency of eating home-cooked meals – Oval and Kennington Development Area

Thinking about things that you eat and drink, how often, if it all, do you eat home-cooked meals made by you or a member of your household?



Base: All living in the Oval and Kennington Development Area (101)

Similarly, from the qualitative research school children in the Oval and Kennington Development Area reported that they eat most healthily at home because their parents used ingredients and cooked from scratch.

Five or more portions of fruit and vegetables

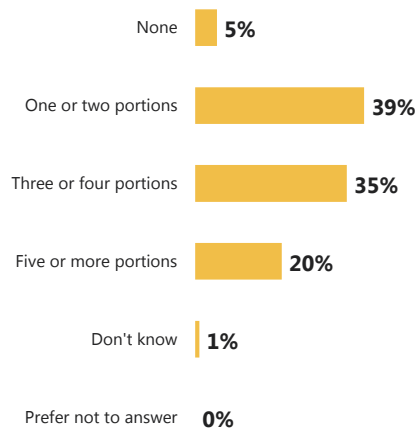
While the majority of residents from both areas say that they eat home-cooked meals daily, the proportion of people eating the recommended five or more portions of fruit and vegetables in a typical day is notably smaller.

Only two in ten (20%) people living in the Old Kent Road Opportunity Area eat the recommended amount, with 79% eating fewer than five portions per day and 5% overall who report eating none. This number of Old Kent Road Opportunity Area residents reporting eating the recommended daily amount of fruit and vegetables is slightly below the national average in England. The latest figures from the Health Survey for England (data collected in 2015) show that 26%

of adults aged 16 and over consume five or more portions of fruit and vegetables per day³⁸. However, what the data collected in the Old Kent Road Opportunity Area does suggest is that, despite earlier indications that most residents intend to eat healthily or believe they do so, this does not necessarily translate into actual healthy eating habits.

Figure 6.15: Fruit and vegetable consumption in a typical day – Old Kent Road Opportunity Area

How many portions of fruit or vegetables do you eat in a typical day? Please include all fruit and veg, including fish, frozen, dried, stewed or tinned. A portion could be for example one apple or banana or three heaped tablespoons of vegetables, beans, or pulses



Base: All living in the Old Kent Road Opportunity Area (352)

Among Old Kent Road Opportunity Area residents, those who eat healthily in one way are more likely to eat healthily in other ways, with those who eat the recommended portions of fruit and vegetables more likely to eat home-cooked meals (with 80% eating them daily, compared to 59% of people who eat fewer than the recommended portions).

Linked to their previously established positive attitudes towards eating healthily, women are more likely than men to eat well. They are more likely to eat home-cooked meals on a daily basis (with more than seven in ten (71%) saying that they do this compared with 54% of men), and are also more likely than men to eat the recommended portions of fruit and vegetables (with 25% eating the five portions, compared to 14% of men). This difference reflects the Health Survey for England, which found that in 2015, 27% of women consumed five or more portions of fruit and vegetables a day, compared to 24% of men³⁹.

Age also plays a role in healthy eating habits in the quantitative survey. **Older people aged 55 and over are more likely than the average to eat no fruit or vegetables in a typical day** (11%, compared to 5% overall): however, they are more likely than younger people to eat a home-cooked meal daily (69% of those aged 55+ compared to 53% of 16-34 year olds). **Younger people are more likely than others to eat home-cooked meals a few times a week** (with 27% saying they eat home cooked meals between three and six times a week, compared with 20% overall).

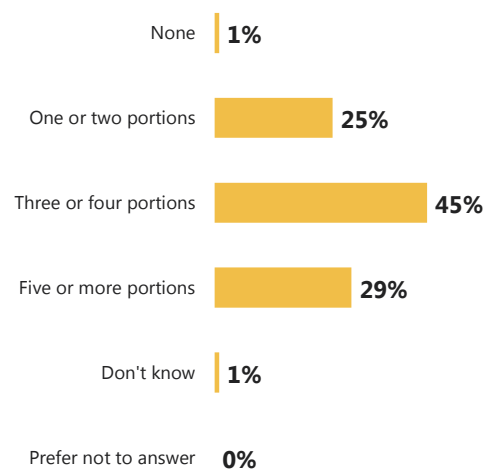
³⁸ <http://www.content.digital.nhs.uk/catalogue/PUB22616>

³⁹ http://www.noo.org.uk/uploads/doc/vid_17669_AdultDietFactsheet_Dec2012.pdf

Just under one third of Oval and Kennington Development Area residents report eating the recommended five or more portions of fruit and vegetables in a typical day, which is slightly above the national average in England (according to the Health Survey for England - data collected in 2015 - 26% of adults aged 16 and over consume five or more portions of fruit and vegetables per day).

Figure 6.16: Fruit and vegetable consumption in a typical day – Oval and Kennington Development Area

How many portions of fruit or vegetables do you eat in a typical day? Please include all fruit and veg, including fish, frozen, dried, stewed or tinned. A portion could be for example one apple or banana or three heaped tablespoons of vegetables, beans, or pulses



Base: All living in the Oval and Kennington Development Area (101)

Take-away and ready meal consumption

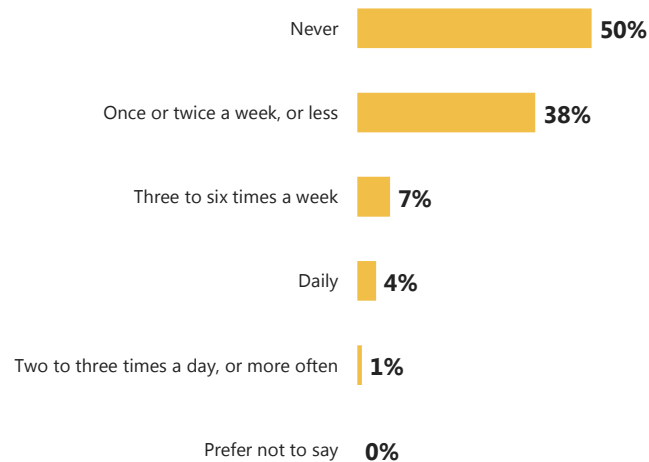
The majority (63%) of people in the Old Kent Road Opportunity Area eat take-away foods (such as a kebab, pizza, fried fish, chicken and chips or a burger) less frequently than once or twice a week. Only a minority of residents in Old Kent Road Opportunity Area eat take-away food daily (3%). To put this in context, research for the London Health Commission in 2014 found that 80% of Londoners ate take-away food at least once a week⁴⁰.

Turning to ready-meals (by which is meant ready-meals or packaged meals that participants or a member of their household have purchased from a supermarket or shop and cooked at home), 38% of residents in the Old Kent Road Opportunity Area report eating ready meals less than twice a week. Half (50%) of people in the Old Kent Road Opportunity Area, however, say that they never eat ready-meals.

⁴⁰ <https://www.ipsos.com/ipsos-mori/en-uk/london-health-commission-researching-lives-londoners>

Figure 6.17: Frequency of eating ready-meals – Old Kent Road Opportunity Area

Thinking about things that you eat and drink, how often, if it all, do you eat ready-meals that you or a member of your household have purchased from a supermarket or shop and cooked at home?



Base: All living in the Old Kent Road Opportunity Area (352)

As expected, among Old Kent Road Opportunity Area residents those who eat healthily and exercise are less likely to eat take-away or ready-meals. One third (36%) of those who eat five or more portions of fruit or vegetables a day say they never eat take-away food (compared to 22% among those who eat fewer than the recommended portions), while around six in ten (58%) people who walk for three or more hours a week say they never eat ready-meals, compare to 43% among those who walk less.

Age also plays a role. Younger people are particularly likely to eat take-away food frequently, with more than one in ten (13%) of those aged 16-34 saying they eat take-away food between three and six times a week (compared with less than one in ten (8%) overall). In comparison, only one in twenty (5%) 35-54 year olds and no (*%) people aged 55 or older eat take-away food this frequently. Indeed, older people aged 55 or older are more likely than average to say that they never eat take-away food – 44% say this, compared to 25% overall. Older people are also more likely to say that they never eat ready-meals or packaged meals (63% compared with 50% overall), suggesting that older people living in the Old Kent Road Opportunity Area rely more on fresh cooking than on convenience foods like take-away and ready-meals. However, as many of them do not eat the recommended portions of fruit and vegetables, this does not mean that eschewing convenience foods necessarily means they lead healthy lifestyles.

From the qualitative research, whilst informed about healthy eating on the whole, the actual behaviour of the school children involved suggests that **young people in the Old Kent Road Opportunity Area could be consuming too much junk and take-away food**. School children were asked to complete a food diary for the seven days prior to the focus group; an example has been provided in the appendices. An analysis of these reveals that whilst some (but not all) are eating **relatively healthy breakfasts**, for example cherries, shreddies, bagels, toast, Weetabix and scrambled egg, over the rest of the day a **majority of the children we spoke to reported eating fast food** (McDonalds, chips, burger and chips, chicken burger and chips, fried chicken and chips) at least once in the past week either for lunch, dinner or as snacks. Some had

eaten these kinds of foods more than once over the last seven days. Surrey Square canteen, Morley's, Nandos, the Pavilion, Rustlers, Dixies, Flavours and Casper's (ice cream parlour near East Street) and Cosmos were all mentioned as places where children had purchased food from.

In the Old Kent Road Opportunity Area, there were also **children who reported skipping meals**. In some instances, children skipped meals multiple times a week, for example reporting that they do not eat lunch on weekdays. In a small number of cases, children reported eating snacks in replace of proper meals, such as crackers for lunch or cereal for dinner. Whilst some snacks consumed would be considered healthy (fruit for example), the majority of those listed included foods such as crisps, sausage rolls, donuts, biscuits, fizzy drinks. Where they did report where these foods were from, children reported Tesco, Asda and other supermarkets, corner shops or that it was from home. Children varied in terms of the amount of choice they said that they have in the food that they eat. Parents often define what foods young people eat, when they are at home anyway, however there were young people who talked about being given a choice over what they eat on Fridays (after school) and on the weekend. There was a strong sense in the groups that **unhealthy food is more desirable when given the choice, even though the children knew it was not good for them** (although this was not universal).

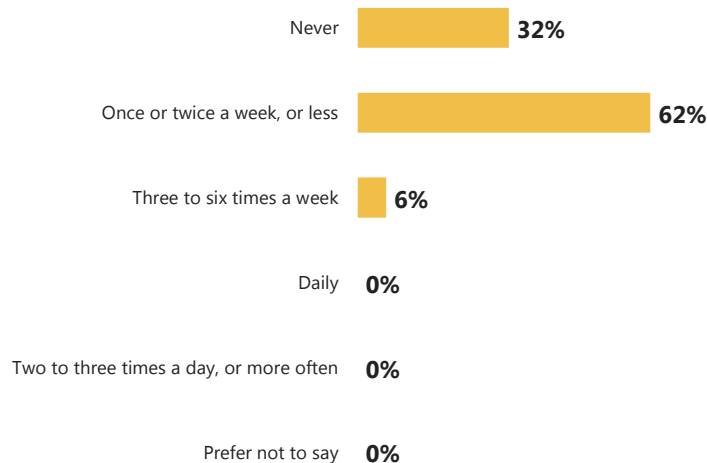
A high proportion (74%) of people in the **Oval and Kennington Development Area** report eating take-away foods (such as a kebab, pizza, fried fish, chicken and chips or a burger) once or twice a week or less, though a minority (4%) eat take-away food daily. As noted above, research for the London Health Commission in 2014 found that 80% of Londoners ate take-away food at least once a week, suggesting that Oval and Kennington Development Area residents are close to the average for London⁴¹.

Close to two thirds (62%) of Oval and Kennington Development Area residents are eating ready-meals (by which is meant ready-meals or packaged meals that participants or a member of their household have purchased from a supermarket or shop and cooked at home) at least once a week and one third – 32% - say they never eat ready-meals.

⁴¹ <https://www.ipsos.com/ipsos-mori/en-uk/london-health-commission-researching-lives-londoners>

Figure 6.18: Frequency of eating ready-meals – Oval and Kennington Development Area

Thinking about things that you eat and drink, how often, if it all, do you eat ready-meals that you or a member of your household have purchased from a supermarket or shop and cooked at home?



Base: All living in the Oval and Kennington Development Area (101)

Similarly, the qualitative research with school children revealed that **young people in the Oval and Kennington Development Area are eating a lot of junk food and take-away**. The analysis of the children's food diaries (completed for the seven days prior to the research group) suggests that fast food is being consumed at least once a week, and for some multiple times over a week. There was also **evidence of skipping meals**:

"I don't have breakfast that much – I know I should have it but I'm not normally hungry in [the] morning so have water or orange juice, don't eat lunch or school dinners, either bring something in from home or wait till after school and after school my mum makes jolof rice and wings and things...and takeaway on Fridays maybe Chinese..." ... "I could be eating more healthy, like I should be eating breakfast so I'm not tired in class – I should eat when I am hungry" (Pupil, Year 9, Oval and Kennington Development Area)

Although, as noted earlier, the school children in the Oval and Kennington Development Area were informed about healthy food, as with children in the Old Kent Road Opportunity Area, **Oval and Kennington Development Area school children often admitted preferring unhealthy options even though they knew they were not good for them**:

[thinks it's quite unhealthy] "It's not the best thing to eat chicken all the time – I eat it because it's nice" (Pupil, Year 9, Oval and Kennington Development Area)

6.4 Self-reported weight

Nearly three in five (57%) Old Kent Road Opportunity Area residents think they are about the right weight for their height. Around two in five (37%) residents think they are overweight, with around one third (32%) thinking they are slightly overweight and a further 5% believing themselves to be very overweight. Comparing the Old Kent Road Opportunity Area results against data from the boroughs as a whole suggests there may be a potentially broader issue around residents'

health. Public Health England self-reported height and weight data suggests that the proportions of people with overweight BMIs in Southwark is 55% (compared to 32% among Old Kent Road Opportunity Area residents in this survey)⁴². This suggests that people are underestimating their own weight and believe they are at a healthier weight than they actually are – as such, the proportions of overweight people in the area may be significantly higher than this survey has found.

Within the Old Kent Road Opportunity Area, as is to be expected, a significant proportion of people who think they are about the right weight for their height also report that their health is good or fair (60%, compared to 21% of those who report bad or very bad health), although there are no significant differences in self-reported weight between those who walk for more than three hours a day and those who do not.

Old Kent Road Opportunity Area residents who describe themselves as slightly overweight or very overweight are more likely to be white, with 43% of white residents describing themselves thus compared to 37% overall. They are also more likely to be worse off financially, with nearly one in ten (9%) people who are not 'living comfortably or doing alright' reporting being very overweight, compared to 3% of those whose financial situation is better.

Earlier sections of this chapter have established that younger people are somewhat less likely to display healthy eating habits (for example, eating takeaway food frequently). Although there are no statistically significant differences between age groups, 68% of Old Kent Road Opportunity Area residents aged between 16 and 34 say they are either underweight or the right weight for their height (in contrast, 56% of those aged 35-54 and 58% of those aged 55+ say likewise). Bearing in mind the earlier examination of dietary habits, what this appears to suggest is that **some young people are currently a healthy weight despite potentially having unhealthy eating habits. As these residents age, continuing unhealthy eating habits over time could result in them becoming overweight in the future.** Considering the known relationship between excess weight and health problems like diabetes and cancer, these young people may be affected by their unhealthy eating behaviour later in life.

In the Oval and Kennington Development Area nearly three in five (58%) people believe themselves to be about the right weight. Two in five (39%) believe they are overweight, of which 36% believe themselves to be slightly overweight and 3% to be very overweight.

Comparing these results from Oval and Kennington Development Area against data from the boroughs as a whole, as with the Old Kent Road Opportunity Area, there may be a potentially broader issue around residents' health. Looking at self-reported height and weight data, Public Health England reports that the proportions of people with overweight BMIs in Lambeth is at 51% (compared to 39% among Oval and Kennington Development Area residents)⁴³, suggesting that people in Oval and Kennington Development Area are underestimating their own weight and believe they are at a healthier weight than they actually are – as such, the proportions of overweight people in the development area may be significantly higher than our survey has found.

⁴² <http://fingertips.phe.org.uk/profile/health-profiles/data#page/0/gid/1938132694/pat/6/par/E12000007/ati/102/are/E09000022/iid/90640/age/164/sex/4>

⁴³ <http://fingertips.phe.org.uk/profile/health-profiles/data#page/0/gid/1938132694/pat/6/par/E12000007/ati/102/are/E09000022/iid/90640/age/164/sex/4>

6.5 Daily physical activity

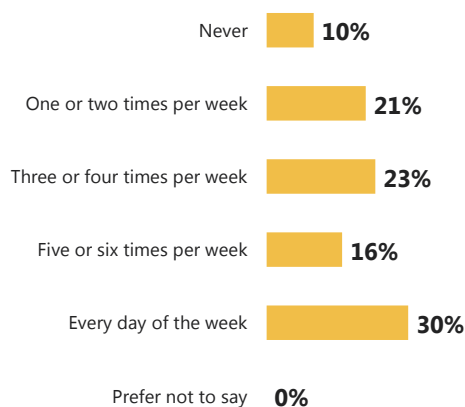
Residents in Southwark's Old Kent Road Opportunity Area (Old Kent Road Opportunity Area) and Lambeth's Oval and Kennington Development Area (Oval and Kennington Development Area) are not, in the main, highly active. The majority of residents of both areas do 30 minutes of moderate exercise less than five times a week, and a slight majority of residents do not walk more than three hours a week. In the Old Kent Road Opportunity Area, exercise is associated with mental wellbeing, with those who exercise more reporting better mental wellbeing.

Over half (54%) of Old Kent Road Opportunity Area residents say they do 30 minutes of moderate exercise less than five times a week, and one in ten (10%) say they never do 30 minutes of exercise a day. Nearly half (46%) say they exercise five times a week or more, with 30% exercising every day.

Public Health England tells a more positive story for Southwark as a whole, suggesting that three in five (60%) Southwark residents exercise for over 150 minutes a week (the equivalent of five sessions of 30 minutes each), while 13% do between 30 and 149 minutes of physical activity a week⁴⁴. Under one third (27%) of Southwark residents achieve less than 30 minutes of exercise per week, notably more than found in this research.

Figure 6.19: In an average week, how often do you do 30 minutes or more of moderate physical activity per day? – Old Kent Road Opportunity Area

In an average week, how often do you do 30 minutes or more of moderate physical activity per day? The thirty minutes could be in one go or spread out across the day for example three lots of ten minutes. Moderate activity includes brisk walking, dancing, cycling, bowling, golf, swimming, household tasks involving considerable effort and making you feel breathless. Would you say you do this...



Base: All living in the Old Kent Road Opportunity Area (352)

Healthy eating is associated with physical activity in the Old Kent Road Opportunity Area. Three fifths (60%) of those who eat the recommended five portions of fruit and vegetables a day also exercise five times a week or more, while just over two fifths (43%) of those who do not eat the recommended amount do likewise.

⁴⁴ <http://fingertips.phe.org.uk/profile/physical-activity/data#page/0>

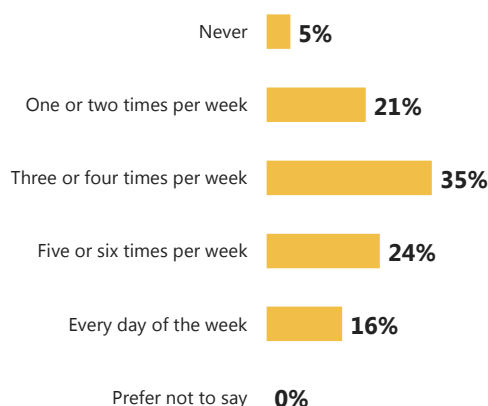
Those who walk more than three hours a week are more likely to say they exercise five or more times a week, with 66% saying this compared to only 28% among those who do not walk as much. This may be because those who walk frequently are including this in their total of how many times they exercise a week, but may also be indicative of greater physical activity.

Exercise is also associated with mental wellbeing in the Old Kent Road Opportunity Area. Those who say they exercise five or more times a week have a mental wellbeing score of 25.07, while those who do not have a score of 23.50. This is to be expected as there is a well-established body of literature indicating a link between exercise and mental wellbeing (for example, see Weyerer, 1992⁴⁵).

Three fifths (60%) of those who live in the Oval and Kennington Development Area exercise less than five times a week, with one in twenty (5%) saying they never exercise. Two fifths (40%) exercise five times a week or more, with 16% exercising every day of the week. Public Health England found two thirds (66%) of Lambeth residents exercised for more than 150 minutes per week, notably more than those who said they exercised for thirty minutes a day five times a week⁴⁶. This disparity is likely due to the difference between measuring minutes of exercise a week compared to periods of exercise a week: some Oval and Kennington Development Area residents may have exercised fewer times over a week, but exercised for longer than 30 minutes each time, or is possibly a product of the fact that the population of the Oval and Kennington Development Area may differ from that of the borough average.

Figure 6.20: In an average week, how often do you do 30 minutes or more of moderate physical activity per day? – Oval and Kennington Development Area

In an average week, how often do you do 30 minutes or more of moderate physical activity per day? The thirty minutes could be in one go or spread out across the day for example three lots of ten minutes. Moderate activity includes brisk walking, dancing, cycling, bowling, golf, swimming, household tasks involving considerable effort and making you feel breathless. Would you say you do this...



Base: All living in the Oval and Kennington Development Area (101)

⁴⁵ <https://www.ncbi.nlm.nih.gov/pubmed/1428382>

⁴⁶ <http://fingertips.phe.org.uk/profile/physical-activity/data#page/0>

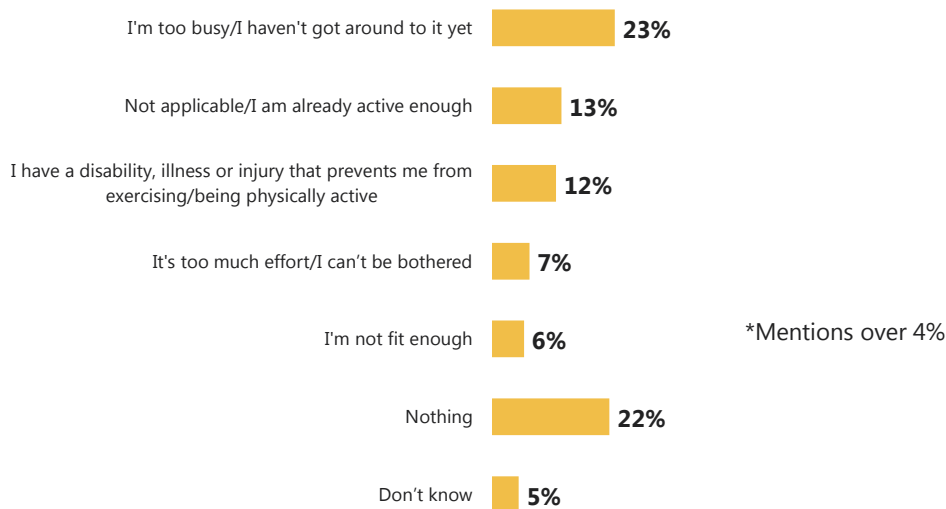
Barriers to physical activity

Residents of both areas have a variety of reasons for not being more physically active, among them being that they are too busy (time poor). Residents suggest they would be more likely to lead a healthier lifestyle if it was easier financially (for example, lower prices for gyms, or lower prices for healthy foods), or if they had more time available. In the Old Kent Road Opportunity Area, younger people and those who work are more likely to think they would be healthier if they had more time available.

Just over two in ten (22%) residents of Old Kent Road Opportunity Area say that nothing stops them from being active and 13% say that they believe they are already active enough, suggesting that around a third of Old Kent Road Opportunity Area residents do not face any real barriers when it comes to physical activity. Where there are barriers to doing more exercise or being more physically active, these appear to relate to limiting health problems (12% report this as a factor), and time constraints (23% report this).

Figure 6.21: What, if anything, stops you from doing more exercise or being more physically active? – Old Kent Road Opportunity Area

What, if anything, stops you from doing more exercise or being more physically active?



Base: All living in the Old Kent Road Opportunity Area (352)

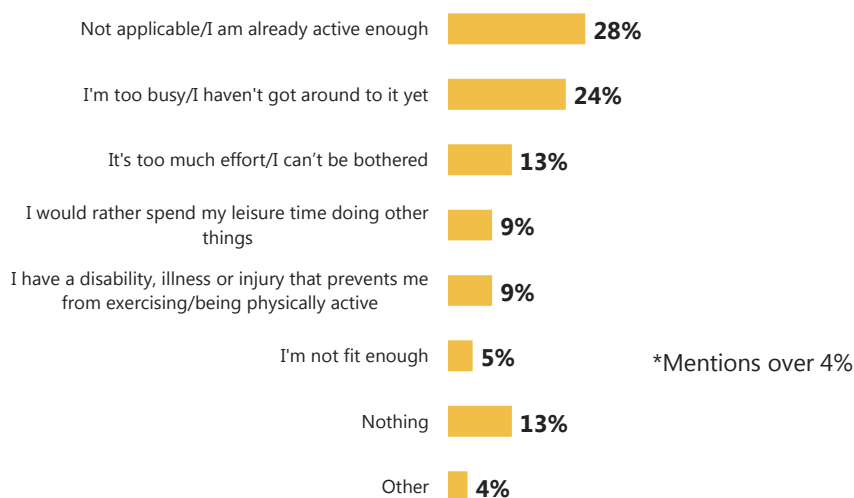
There is a relationship between existing physical activity and perceived obstacles to increasing activity. Under one third (29%) of those who walk less than three hours in a week believe their ability or prohibiting factors prevent them from doing more exercise (compared to 23% overall). However, they are also less likely to be interested in increasing their exercise, with over one in ten (12%) saying they have a lack of interest or inclination in increasing their activity, compared to 6% of those who walk more than three hours a week.

Figure 6.21 shows the key reasons given by Oval and Kennington Development Area residents as to what stops them from doing more exercise or being more physically active. Looking specifically at net scores, just under half (45%) of Oval and Kennington Development Area residents say that nothing stops them from doing more exercise, with 28% feeling they are

already active enough. Around one quarter (24%) say they do not do more exercise because of time constraints, with a further 19% saying they have a lack of interest or inclination in exercising more. Just under one in six (13%) say their own ability prevents them from exercising more, or they have prohibiting factors, with one in ten (9%) saying they have a disability, illness or injury that prevents them from doing more exercise. Over one in ten (11%) residents say cost or lack of opportunity are barriers.

Figure 6.22: What, if anything, stops you from doing more exercise or being more physically active? – Oval and Kennington Development Area

What, if anything, stops you from doing more exercise or being more physically active?



Base: All living in the Oval and Kennington Development Area (101)

6.6 Walking in the local area

Public Health England data suggests that, in general, Southwark residents walk more than the London and England average. According to this data, nearly all (89%) of adults in Southwark walk at least once per week (compared to 84% across London and 81% in England overall), while 68% of Southwark residents walk at least five times a week (compared to 57% across London and 51% in England overall)⁴⁷.

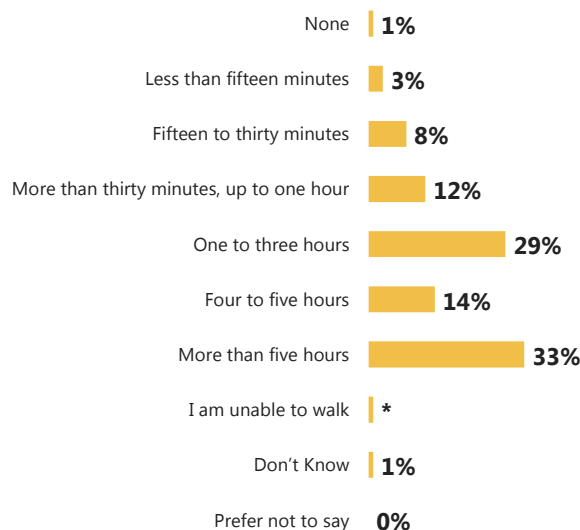
Among residents surveyed in the Old Kent Road Opportunity Area, half (52%) report spending less than three hours walking a week, with only 1% spending no time at all walking. Just under one half (47%) of people walk for more than three hours a week. According to a report from Transport for London, the average Londoner walks for 24 minutes per day (2.8 hours a week), which seems to align with the findings here.⁴⁸

⁴⁷ <http://fingertips.phe.org.uk/profile/physical-activity/data#page/0>

⁴⁸ Travel in London Report 7 (2015), Transport for London, available at <http://content.tfl.gov.uk/travel-in-london-report-7.pdf> - higher rates of walking in inner city boroughs (last accessed 3rd May 2015)

Figure 6.23: And in an average week, how much time in total do you normally spend walking – Old Kent Road Opportunity Area

And in an average week, how much time in total do you normally spend walking?



Base: All living in the Old Kent Road Opportunity Area (352)

Women in the Old Kent Road Opportunity Area are more likely to walk for more than three hours a day each week (52%, compared to 41% of men). Similar to the previous measure, here exercise is associated with mental wellbeing, with those who walk three hours or more a week having a mean mental wellbeing score of 25.16, compared to 23.50 among those who do not walk as much. This relationship between exercise and wellbeing is established in wider literature.⁴⁹

The qualitative research with school children explored the theme of walking – including asking them to keep a diary of their walking for the week preceding the focus group, and example of which is provided in the appendices. Most of the school children included in the research from the Old Kent Road Opportunity Area frequently walk, including to and from school, and often prefer this as a means for getting around, and from A to B. Reasons for this preference included it being more pleasant to walk than to take the bus (which can be packed), it's often quicker to walk than it is to get the bus (because of the traffic) and because walking means that children can catch up with and socialise with their friends at the same time:

"I've recently started walking more places, because I realised that is actually takes longer taking bus I can actually take a lot of short routes" (Pupil, Year 10, Old Kent Road Opportunity Area).

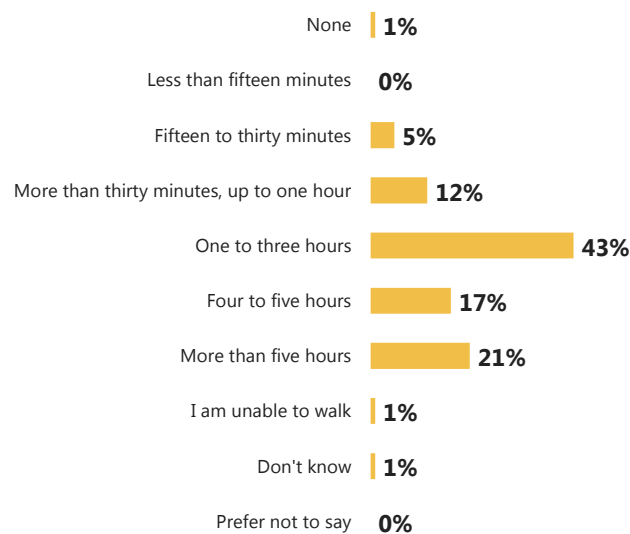
"You can talk about things whilst you're walking that you can't talk about on the bus" (Pupil, Year 10, Old Kent Road Opportunity Area).

⁴⁹ Panedo, and Dahn, Exercise and well-being: a review of mental and physical health benefits associated with physical activity (2005), available at http://journals.lww.com/co-psychiatry/Abstract/2005/03000/Exercise_and_well_being_a_review_of_mental_and.13.aspx (last accessed 3rd May 2017)

Among residents in the Oval and Kennington Development Area, three fifths (60%) spend less than three hours walking a week, with 1% spending no time at all walking. 1% say they are unable to walk at all. Just under two fifths (38%) of people walk for more than three hours.

Figure 6.24: And in an average week, how much time in total do you normally spend walking – Oval and Kennington Development Area

And in an average week, how much time do you normally spend walking?



Base: All living in the Oval and Kennington Development Area (101)

A similar story to that in the Old Kent Road Opportunity Area emerged through the qualitative research with school children. Most Oval and Kennington Development Area school children walk for at least some of their journey to school and those who walked less were from surrounding areas, thus too far to walk. They too reported quicker journeys when walking (because of the traffic) and a chance to catch up with each other and socialise with friends during a walk:

"I like walking better than bus, because it's less traffic and it takes faster because bus has to stop at every traffic light, and walking means you don't have to stop." (Pupil, Year 6, Oval and Kennington Development Area).

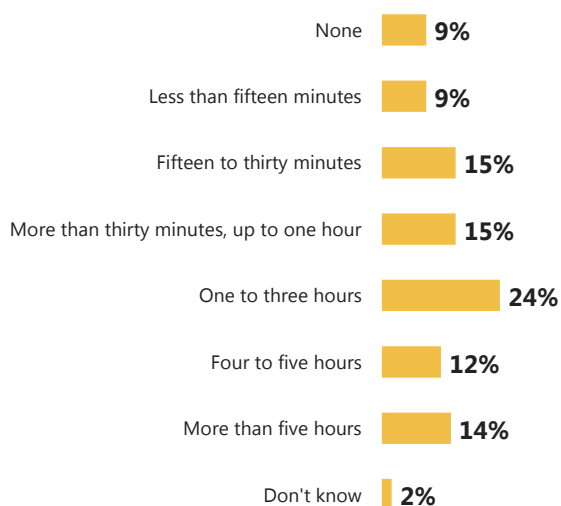
Walking to work

The majority of residents in both areas walk during at least part of their journey to work, with significant minorities walking between one and three hours to and from work each week (particularly so in the Oval and Kennington Development Area). Of those who do not walk to work, a majority suggest that nothing would encourage them to start walking to work.

Among Old Kent Road Opportunity Area residents, around one quarter (24%) spend between one and three hours walking to work each week, with 12% walking four to five hours and a further 14% walking more than five hours a week. Around one in six (15%) people walk for fifteen to thirty minutes and for between thirty minutes and an hour. Less than one in ten (9%) walk to work for less than fifteen minutes.

Figure 6.25: Can you please tell me the total length of time, in minutes, that you spend walking when travelling to and from work in a typical week? – Old Kent Road Opportunity Area

Can you please tell me the total length of time, in minutes, that you spend travelling to and from work in a typical week? If you walk some or all of the way both to and from work, please add together the time you spend walking during both of these journeys



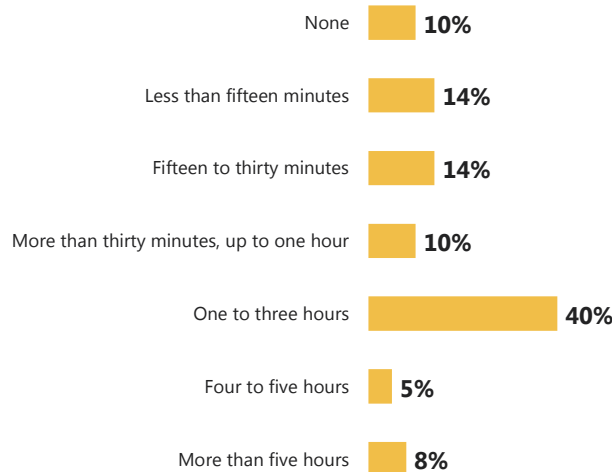
Base: All living in the Old Kent Road Opportunity Area (352)

In the Old Kent Road Opportunity Area men are more likely than women to say they do not walk at all to work each week (13%, compared to 4% of women). Unsurprisingly, there is also a relationship between the length of time Old Kent Road Opportunity Area residents spend walking to work and the proportions of people who walk for three hours or more a week, with those who walk more than three hours more likely to walk for four to five hours a week (23%, compared to 12% overall) and to walk for more than five hours a week (26%, compared to 14% overall).

A substantial minority (40%) of Oval and Kennington Development Area residents walk for one to three hours per day to and from work, with small proportions walking four to five hours (5%) and more than five hours (8%). On the other end of the spectrum, around one in six people (14%) walk for less than fifteen minutes and for fifteen minutes to half an hour respectively.

Figure 6.26: Can you please tell me the total length of time, in minutes, that you spend walking when travelling to and from work in a typical week? – Oval and Kennington Development Area

Can you please tell me the total length of time, in minutes, that you spend travelling to and from work in a typical week? If you walk some or all of the way both to and from work, please add together the time you spend walking during both of these journeys



Base: All living in the Oval and Kennington Development Area (101)

Factors that would encourage or facilitate more walking

Residents who do not currently walk to work, or who work but who do not walk in a typical week, were asked what would encourage them to walk more when travelling to and from work.

Among residents of the Old Kent Road Opportunity Area, around one in five (17%) say they would walk more often when making short journeys if they had more time, while under one in ten say they would walk more if they lived closer to the destination (8%) or if they were in better health (7%). Just over one in ten (11%) say they already walk often, while one quarter (25%) say that nothing would encourage them to walk more often when making short journeys.

Figure 6.27: What would encourage you to walk more often when making short journeys? – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

Similar to the previous question, younger people in the Old Kent Road Opportunity Area are more likely to suggest they would walk more often when making short journeys if they had more time (21%, compared to 8% of those aged 55 or over). Older people aged 55 or over are more likely to say they would walk more if their health was better (18%, compared to 7% overall). As before, a higher proportion of those who are retired also say they would walk more if their health was better (20%, compared to 7% overall) as would those who have lived in the area for five or more years (10%, compared to 7% overall), both groups with a high proportion of older people. Those who have lived in the area for five or more years are also more likely to say that nothing could encourage them to walk on shorter journeys (30%, compared to 25% overall).

As discussed in other chapters, in relation to leading a healthier lifestyle, working people say they would be more likely to walk more often for short journeys if they had more time (23%, compared to 17% overall). They are also more likely to say they would walk more if they lived closer to the destination (11%, compared to 8%).

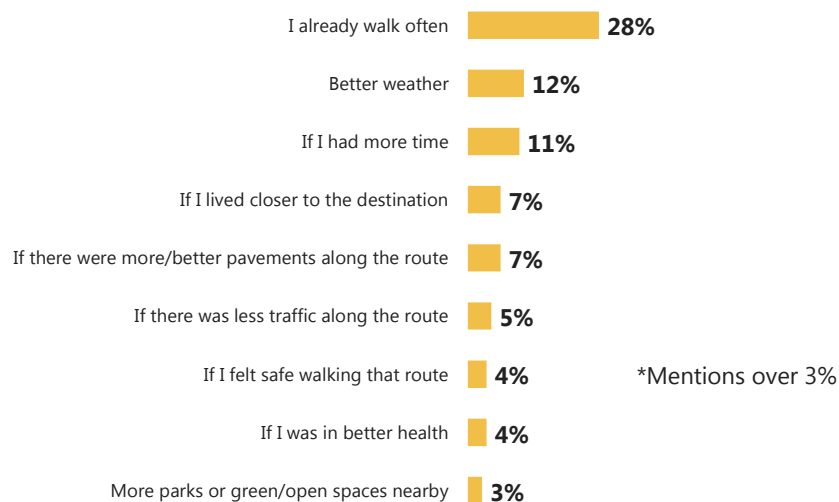
There is a clear relationship between healthy eating and exercise. Just under one fifth (18%) of those who eat five portions of fruit and vegetables a day say they already walk often, compared to 9% of those who do not eat the recommended portions. Unsurprisingly, those who walk more than three hours in a week are more likely to say they already walk often (16%, compared to 6% of those who walk less).

Several of the more popular suggestions for what would encourage Oval and Kennington Development Area residents to walk more are difficult to resolve through public health interventions or indeed planning, including better weather (suggested by 12%), having more time (11%) or living closer to the destination (7%). A further 7% of Oval and Kennington Development Area residents suggest they would walk more often if there were more or better pavements on the route,

and 5% who suggest they would walk more if there was less traffic along the route. Under one third (28%) say they already walk often, and under one in five (19%) say that nothing would encourage them to walk more often when making short journeys.

Figure 6.28: What would encourage you to walk more often when making short journeys? – Oval and Kennington Development Area

What would encourage you to walk more often when making short journeys?



Base: All living in the Oval and Kennington Development Area (101)

During the qualitative research, school children were also asked about what might encourage them to walk more. A number of factors were listed by children in the Old Kent Road Opportunity Area including:

- **Fewer and less dangerous road crossings** (*"You constantly have to wait for cars to go past to cross the road"* – Pupil, Year 10, Old Kent Road Opportunity Area).
- **Less busy roads** (*"Don't like walking on the main road"* – Pupil, Year 10, Old Kent Road Opportunity Area).
- **To improve fitness** (*"Socialising and getting fit"* – Pupil, Year 10, Old Kent Road Opportunity Area).
- **Better lit public spaces**, for example the parks (*"No lights in burgess park, it's pitch black, it's okay if there's more than one person"* – Pupil, Year 10, Old Kent Road Opportunity Area).
- **Cleaner pavements** (less rubbish and mess) (*"Yeah, dirty areas and busy roads"* – Pupil, Year 10, Old Kent Road Opportunity Area).
- **Increased awareness of the local shortcuts** (*"Better shortcuts"* – Pupil, Year 10, Old Kent Road Opportunity Area).

During the qualitative research, school children in the Oval and Kennington Development Area mentioned a number of factors that they thought would encourage them to walk more (some of which were also mentioned by children in the Old Kent Road Opportunity Area) including:

- Cleaner streets
- To become fitter
- A chance to socialise with friends
- Fewer street gangs.

As noted earlier in this chapter, during the qualitative research residents and school children in the Oval and Kennington Development Area mentioned bad pavements and heavy traffic (including from cyclists) when discussing their personal safety in the local area which supports these survey findings.

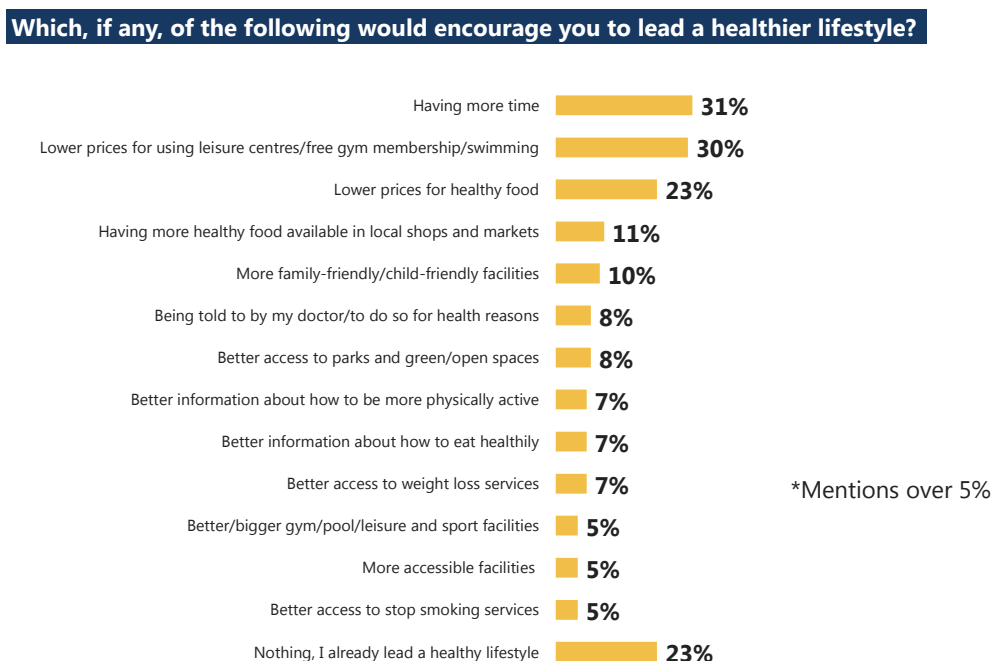
6.7 Facilitating a healthier lifestyle

Just under one third of Old Kent Road Opportunity Area residents believe that having more time (31%) or lower prices for using leisure centres, free gym membership or swimming (30%) would encourage them to lead a healthier lifestyle. It is possible that increasing the convenience or the proximity of facilities could help to overcome this issue. Around one in ten suggest that having healthier food available in local shops and markets (11%) or more family or child-friendly facilities (10%) would help. Smaller proportions suggest being told to be healthier by their doctor (8%), better access to parks and green, open spaces (8%), better information about how to be more physically active (7%), better access to weight loss services (7%) and better information about how to eat healthily (7%) would encourage them to lead a healthier lifestyle. Just over two fifths (23%) of Old Kent Road Opportunity Area residents believe that nothing could encourage them to improve because they already lead a healthy lifestyle.

Research across the London boroughs of Barking & Dagenham, Havering and Redbridge found similar results, with over seven in ten suggesting they would lead a healthier lifestyle if leisure centre prices were cheaper, and nearly two thirds (63%) suggesting better sports and leisure facilities would help. Under seven in ten (69%) residents suggesting having more time would be helpful⁵⁰.

⁵⁰ BHR Accountable Care Organisation: residents' research

Figure 6.29: What, if any, of the following would encourage you to lead a healthier lifestyle? – Old Kent Road Opportunity Area



Base: All living in the Old Kent Road Opportunity Area (352)

Younger people are more likely to suggest they would lead a healthier lifestyle if they had more time, with 44% saying this compared to 31% overall. Similarly, they are more likely to say they would be healthier if there were lower prices for using leisure centres, free gym memberships, or free swimming (40%, compared to 30% overall). In contrast, **those aged 55 or older are most likely to think they already lead a healthy lifestyle**. Nearly half (47%) of those aged 55 say this, compared to 19% of those aged 35-54, and 15% of those aged 16-34. Likely as a function of this, over half (52%) of those who are retired agree, compared to 20% of those in work and 18% who are not working. Similarly, 27% of those who have lived in the area for five years or more think they already lead a healthy lifestyle (compared to 17%), and as discussed in the previous chapter there are a high proportion of older people in this group.

Working people are, unsurprisingly, more likely to think they would be healthier if they had more time, with 41% of working people agreeing with this compared to 26% of those who do not work and 4% of those who are retired. Those who have lived in the area less than five years are also more likely to think they would be healthier if they had more time (39%, compared to 26% of those who have lived in the area for more than five years).

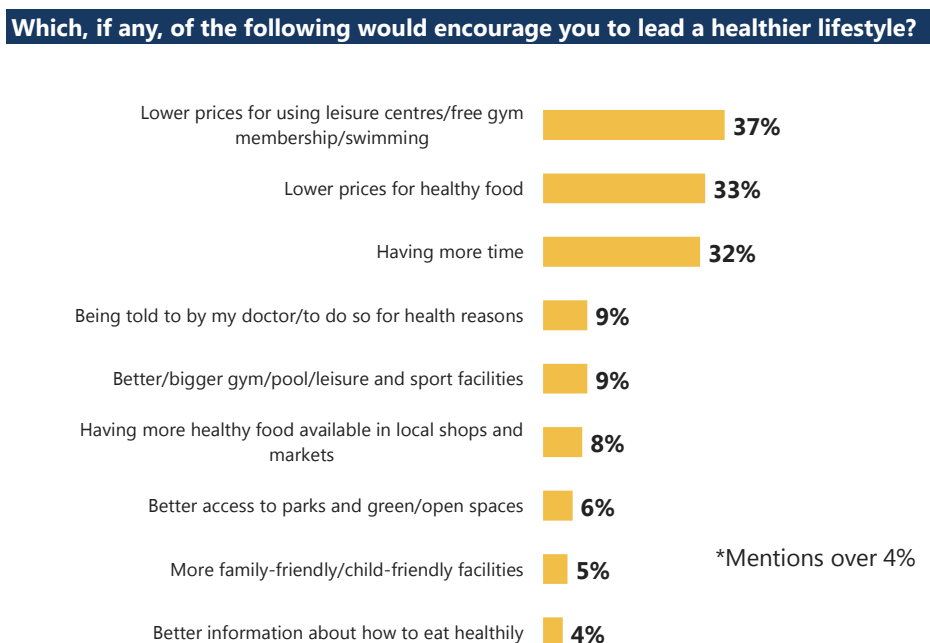
From the qualitative research, school children were asked to think about what might encourage them to eat healthier. The school children in the Old Kent Road Opportunity Area collectively mentioned the following:

- Parents refraining from eating junk food, so they too stopped eating this;
- Being able to make smoothies (mixing different vegetables and fruits together); and,
- Drinking water and exercising;

“you can lose weight and won’t gain more weight like when you eat junk food” (Pupil, Year 5, Old Kent Road Opportunity Area)

Nearly two fifths (37%) of Oval and Kennington Development Area residents say that they would be encouraged to lead a healthier lifestyle if leisure centres were cheaper or they had access to free gym memberships or swimming. As mentioned, these were important reasons given by residents of Barking & Dagenham, Havering and Redbridge⁵¹. Around one third say lower prices for healthy food (33%) or having more time (32%) would encourage them, while just under one in ten say being told by their doctor to be healthier (9%), better or bigger gym, pool, leisure and sports facilities (9%) or having healthier food available in local shops and markets (8%) would do likewise. Under one in five (18%) believe there is nothing that would encourage them to improve because they already lead a healthy lifestyle.

Figure 6.30: What, if any, of the following would encourage you to lead a healthier lifestyle? – Oval and Kennington Development Area



Base: All living in the Oval and Kennington Development Area (101)

During the qualitative research with school children in the Oval and Kennington Development Area, when asked to think about what might encourage them to be healthier, a number of common factors were mentioned including:

- Eating breakfast
- Self-control
- Making more time to eat healthy food
- Avoiding fast food shops
- Healthier shops in the area.

⁵¹ Ibid

Designing a healthy food shop, café or restaurant for the area

School children in both areas were asked to design a shop, food or restaurant that sells food in their local area. They were asked to think about the layout, the food on sale and why such a place would be good for their area. Children were encouraged to draw up their designs if they wanted to.

Old Kent Road Opportunity Area school children mentioned the following when describing their imaginary food outlets:

- A place which sells both healthy and unhealthy food
- A place where children could go to with their whole family, to sit down and eat together
- A place which sells food to sit in as well as food which can be taken away.

The food on sale in the imaginary eateries included smoothies and milkshakes, noodles, Caribbean food, Sandwiches and soup, homemade chicken and chips and homemade burgers and chips. It was felt that having the mix of healthy and unhealthy foods together in one place might encourage healthy eating.

Oval and Kennington Development Area school children mentioned very similar requirements to those listed by the Old Kent Road Opportunity Area children:

- A social place with family sized tables
- A place where you can eat in or take the food away
- A place which offers both healthy and unhealthy food options, as well as multinational foods so it is for everyone.

Similarly, the food on sale in the Oval and Kennington Development Area children's imaginary eateries included a mix of healthy and unhealthy foods, from grilled meat and vegetables, vegetarian options, salad

Profiles of Residents



7 Profiles of Residents

Across the research a number of different types or profiles of residents emerged that Southwark and Lambeth councils may want to focus on in any planning policies and regeneration plans. These can be summarised as long term residents, new-comers, social housing renters, mothers, and school aged children. These residents have been summarised below.

Please note that because of small base sizes for data pertaining to the Oval and Kennington Development Area, all quantitative data relates to the Old Kent Road area only. The qualitative data relates to both areas.

Profile 1: Long term residents

People aged 55 and over, some of whom are retired, and have lived in the area a long time. They feel a sense of belonging to the area but have seen it change over time.

This group of residents are aged 55 and over, and 83% have lived in the area for more than ten years. Eight in ten (78%) **feel a sense of belonging to the local area** and generally feel safe both during the day (93% agree) and at night (62% agree).

Those aged 55 and over **interact with others on a regular basis**, with 78% saying that they speak with people who they do not live with at least once a week, and a similar proportion (75%) saying that they see or spend time with people who they do not live with at least once a week. This group seem to be satisfied with this amount of social interaction given that four in ten (35%) neither agree or disagree that they would like to go out to meet people more often.

Generally, older residents are **positive about the health services** in the local area: seven in ten (73%) agree that there are enough primary care services locally situated and four in ten (41%) say that they don't know what could improve these services.

Residents aged 55 and over are self-reportedly healthy. Nine in ten (90%) agree that they try to shop, cook and eat healthily. Eight in ten (80%) eat five portions of fruit and vegetables per day and four in ten (44%) say they never eat takeaways.

"We have one pub, that is quite close, we tend to meet there. Used to be a pub, now it's more of a wine bar. It's completely different but its friendly and it's a nice place to go."

Resident – Social Isolation workshop, Old Kent Road Opportunity Area

All quantitative data relates to the Old Kent Road Opportunity Area only. However, the qualitative data relates to both the Old Kent Road Opportunity Area and the Oval and Kennington Development area.

Majority lived in the area over 5 years



They feel a sense of belonging



Satisfied with their level of social interaction



75% speak with others at least once a week

Positive about health services



73% think that there are enough primary care services locally



16% say no improvements are needed

Manage to stay healthy



80% eat five portions of fruit and vegetables per day



44% never eat takeaways

Profile 2: New-comers

Younger people who are working and are more recent to the area. They are time poor, financially comfortable and relatively healthy.

This group of residents are aged between 16 and 34, and the majority (57%) have lived in the area for less than five years. Just over half (58%) **feel a sense of belonging to the local area** and the vast majority say that they feel safe both during the day (94% agree) and at night (71% agree). Around half (54%) of these residents say that they are living comfortably, which is higher than average.

These residents **interact with others on a regular basis**, with seven in ten (72%) saying that they see others who they do not live with at least once a week. Around the same proportion (65%), say report that they speak to others over the phone, by email or on social media at least once a day.

When spending time with others, **this group tend to meet in pubs, bars, restaurants or cafes**. The majority (53%) agree that there are enough places to meet in the local area but still six in ten (59%) report that **they would like to go out to meet people more often**. The number one factor that would enable them to do this is having more time.

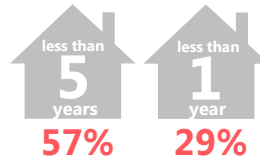
These residents self-report as being generally quite healthy. Around nine in ten (87%) agree that they try to shop, cook and eat healthily. However, two thirds (66%) have takeaway meals one to two times per week and the vast majority (84%) eat less than the recommended daily five portions of fruit and vegetables. Four in ten (42%) of this group do exercise five or more times a week, whilst three in ten (29%) report that time constraints prohibit them from being more active.

"I think the place is isolating if you don't know many people in the area, but well connected if you're working"

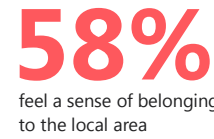
Resident – Social Isolation workshop, Old Kent Road Opportunity Area

All quantitative data relates to the Old Kent Road Opportunity Area only. However, the qualitative data relates to both the Old Kent Road Opportunity Area and the Oval and Kennington Development area.

Majority are new to the area



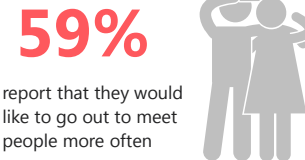
Over half feel a sense of belonging



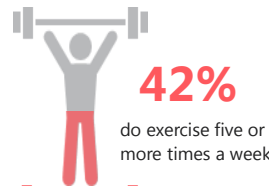
Interact with others regularly



But would like to meet up with others more often



Manage to stay healthy, but could be doing more



Profile 3: Social housing renters

Middle aged people who are working and renting from the local authority. They are time poor, socially isolated and do not exhibit very good health behaviours.

This group of residents are aged between 34 and 54, of which around half (53%) have lived in the local area for more than ten years. However, **one in five (20%) of these residents do not feel a sense of belonging to the local area**. They expressed feelings that the area has lost its sense of community and tightness.

Just over a quarter (27%) of this group see others who they do not live with less than once a week. They report that having more time would encourage them to get out more, which may be expected given that around half of this group (45%) are in full time work.

The majority (68%) of this group rent from the local authority or a housing association and **less than half (42%) feel as though they are financially comfortable/doing okay**.

These residents do not exhibit particularly good health behaviours. Seven in ten (73%) eat less than five portions of fruit and veg a day and one in ten (8%) self-report that they have bad or very bad health. The number one thing (27%) that prohibits them from being more physically active is time constraints.

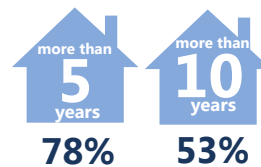
This age group has the lowest mental wellbeing score in comparison to 16-34 year olds and those who are 55+.

"I go to the pub, I'll talk to someone, it's just I don't have a huge amount in common with them, the age range is younger than me... I wouldn't want to go to pub to get drunk but just to see people and spend time with people. Pubs have changed completely, only gastro pubs [now]."

Resident – Social Isolation workshop, Oval and Kennington Development Area

All quantitative data relates to the Old Kent Road Opportunity Area only. However, the qualitative data relates to both the Old Kent Road Opportunity Area and the Oval and Kennington Development area.

Majority lived in the area more than five years



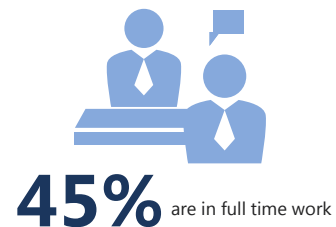
One in five do not feel a sense of belonging



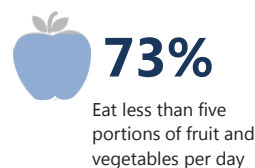
Majority rent from the local authority



Nearly half are in full time work



Find it hard to stay healthy



Profile 4: Families with children

Families with children in the household. Majority feel positive about the local area and are relatively healthy, but do not interact with others as much as they'd like to.

There are many families with children in the local area, many of whom have lived in the area for more than ten years and feel a sense of belonging. **Around half (48%) of this group agree that the local area is a place where people get on.**

Only one third (29%) of these residents see others who they do not live with once a week, however almost **two thirds (63%) speak with others at least once a day.** Many of these residents report finding it difficult to socialise with others, in part due to time constraints and in part due to a lack of mother-child facilities in the local area.

Six in ten (60%) strongly agree that they try to shop, cook and eat healthily. This may be in part due to the availability of fresh food in the local area, with five in ten (46%) disagreeing that they find it hard to buy fresh food locally. **Around half (53%) of these residents report that their health is good** but they are most likely (18%) to say that having more time would encourage them to lead a healthier life.

"This time of year I tend to get the children form school and go home because it's cold in the park, but in the summer I tend to go to parks, [mostly] out of the area. It would be nice to have a space where the kids can hang out together and the adults can go and talk to each other."

Resident – Social Isolation workshop, Old Kent Road Opportunity Area

All quantitative data relates to the Old Kent Road Opportunity Area only. However, the qualitative data relates to both the Old Kent Road Opportunity Area and the Oval and Kennington Development area.

Nearly half have lived in the area over 10 years



Nearly half feel that people get on in the area

48%

tend to agree that the local area is a place where people get on

Interact with others regularly, but would like more opportunities to meet others

29%

see others once a week

63%

speak with others at least once a day

"This area [is] missing a leisure centre where I could go with my baby, daytime nursery, and at the same time go to yoga in one building! It would be good to separate for half hour, beneficial for both of us."

Resident – Social Isolation workshop, Oval and Kennington Development Area

Majority report good health and try to shop, cook and eat healthily



60%

strongly agree that they try to shop, cook, and eat healthily



53%

say their health is good



46%

disagree that they find it difficult to buy fresh food in the local area

Profile 5: School aged children

School children who generally enjoy walking to school and show a good awareness of the difference between healthy and unhealthy food. But more could be done to get them walking, and they could be choosing healthy options more often.

School children in the local area **generally enjoy walking**, particularly to and from school. This is in part because the time walking allows them to socialise with others. However, dangerous crossings, busy roads and lack of adequate street lighting discourage them from walking around the local area.

Generally, **they show good awareness of the difference between healthy and unhealthy food**, the majority believing that home cooked meals are the healthiest. Having said this, they enjoy eating junk food and takeaways on a regular basis, particularly on Friday's or at the weekend. **They often have healthy breakfasts but skip meals during the day** and eat chicken and chips on the way home from school.

These children are **not very positive about access to healthy food in the local area**, which is supported by the fact that they often go outside of the local area with their families to buy fresh produce, such as to Brixton or Peckham food markets.

"I'd say I have a bit [of a] healthy diet – for breakfast I have toast or cereal with fruit, and for lunch I get anything served, for dinner I eat anything my mum makes...I eat fruit and vegetables, sometimes I eat things like cakes and donuts."

Pupil, Year 9, Oval and Kennington Development Area

All quantitative data relates to the Old Kent Road Opportunity Area only. However, the qualitative data relates to both the Old Kent Road Opportunity Area and the Oval and Kennington Development area.

Generally enjoy walking



"I like to walk to school... because if I was to take the bus, I'd see the same people over and over and over again but like in the morning you see different people from different schools if you walk." (Pupil, Year 10, Old Kent Road Opportunity Area)

Dislike dangerous roads



"[The] main road is dangerous and there is a lack of street lights... [we] want to walk to Elephant and Castle because it's close to central but busses are packed and [the] roads are confusing." (Pupil, Year 10, Old Kent Road Opportunity Area)

Good awareness of healthy and unhealthy food



"[We should] stop eating junk food – it's bad when [we're] not eating protein and vegetables – stop eating burger and chips and chicken" (Pupil, Year 5, Old Kent Road Opportunity Area)

Eat chicken and chips on the way home from school



"If I know I have to wait a while before getting home I'll get myself some chicken and chips." (Pupil, Year 8, Old Kent Road Opportunity Area)

Enjoy junk food and leave the area for fresh produce



"[I most enjoy eating at] Morley's chicken and chip shop. It sells slushies like ice drinks, [and] they also sell burgers and chips." (Pupil, Year 5, Old Kent Road Opportunity Area)



"If I was to buy healthy food – once in a while me and mum will go to Brixton market and get fish and fruit and eat at home" (Pupil, Year 9, Oval and Kennington Development Area)

Conclusions and recommendations



8 Conclusions and recommendations

The research identified a number of key themes for planning policy and regeneration in Southwark and Lambeth. These are summarised below.

8.1 Key themes from the research

Social interaction in the local area

Though levels of social interaction in the two areas are reasonably high, residents identified a number of issues including a **lack of affordable places to go, not enough time to get out as much as they would like, and not knowing many people in the local area** – or a declining sense of community cohesion. Residents in both Oval and the Old Kent Road wanted an inclusive place for people to congregate, and meet new people. For example, residents in both areas felt that they currently lacked a high street with access to shops, cafes and restaurants all in one place. Residents in Oval mentioned that shops and cafes were quite dispersed rather than concentrated in an easily accessible area; in Old Kent Road residents noted that the shops were typically bigger stores like *mothercare* or *poundland*, and a lot of supermarkets. In particular, residents felt there were a lack of places to go in the local area to meet with friends.

The research also identified a small group of people who do not see or speak to anyone on a local basis. While this group is quite diverse they have typically lived in the area for a long time and suffer from a long-term illness, disability or infirmity. More needs to be done to investigate the needs of this group.

Health facilities in the area

Though residents are relatively satisfied with health services, there was **strong support for the integrated health facility models** presented in the research from both the health professionals and residents alike. In fact, the benefits of bringing together a range of services under one roof was discussed spontaneously in some of the discussion groups. Moreover, as discussed above residents wanted a place for the community to get together, and a community hub was therefore appealing to residents.

Residents and health professionals felt that having the services **co-located would make using them more convenient**, and might promote users to use some of the services more. Furthermore, respondents to the quantitative survey noted that they might struggle to get out as much as they would like because they are time poor; therefore, easier access to these services might assist this group of people.

Encouraging a better diet and more exercise

Residents agreed that there is a **high prevalence of fast food shops**, and easy access to unhealthy food in the two areas. This was a particular concern around schools, and the groups with school children suggest that many are accessing unhealthy takeaways easily in the local area. This is despite many of the children being aware of the risks involved with eating unhealthy food.

Residents in both areas but particularly in Oval, felt **access to health and leisure centres could be improved**. In Oval particularly, residents do not benefit from free gym and swim passes, and also did not feel they had a choice of leisure options within easy reach.

Improvements with the local community in mind

Finally, many of the residents were very positive about the local area, and only wanted to **see small improvements, rather than a complete overhaul** of the Old Kent Road and Oval. Specifically, a strong theme running through the qualitative research was concerns about gentrification, and long-residing communities being displaced. Residents who had lived in the area for a long time wanted the regeneration to stay true to the 'soul' of the local area. For example, fruit and vegetable markets like East Street market to continue selling necessities to local residents rather than becoming a trendy 'pop up'; social housing rather than expensive privately rented accommodation. Furthermore, residents did not want to see old, traditional buildings replaced with tall sky scrapers, and they did not want to see new shops and restaurants that were prohibitively expensive for the existing residents.

"It's on the monopoly board for goodness sake...people want to hear these accents, they want to hear the cockney, the slang, these boys' accents...don't take away the spirit – it's a special place." Old Kent Road – Social Isolation Workshop

"Make it for the community, for people who are here already, not just for the influx of new people. Don't just want loads of new expensive stuff once there's a spare piece of land." Oval – Social Isolation Workshop

8.2 Recommendations for Southwark and Lambeth councils

This piece of research has generated several recommendations, which the two councils may consider in future policy planning and commissioning decisions. The recommendations below derive from our interpretation of the quantitative and qualitative data.

- Key to any new plans for the two areas should be ensuring that there are a **range of affordable restaurants and cafes**, offering healthy food and drink options. It was also suggested that pubs and social clubs that attract a range of social grades would be beneficial – for example, older men were particularly keen to see pubs reintroduced into the areas.
- Where this is not possible, other venues for social interaction might be considered. At the action planning workshop, with members of both Southwark and Lambeth councils, it was suggested that social spaces could be included in planning for new developments such as leisure facilities and outside spaces, so that they offer somewhere for people to meet, as well as meeting physical exercise needs in the community. Community cafes, which could potentially be housed within existing churches/other places of worship, were also suggested as offering more affordable place for people to meet.
- It is clear from the research that one of the key reasons why some residents are not getting out and about as often as they would like to is that they are time poor. Planning for new spaces for social interaction in the area should take account of this and be co-located, or located near major hubs such as train stations, tube stations, bus interchanges or supermarkets as this will likely to help residents save time. For example people could use them on the way to and from work, therefore making such spaces more accessible and more likely to be used and thus benefiting those they will be designed for.

- It was suggested that **community groups would be beneficial** in providing young people with activities to take them away from the home or playing on the streets, and get them interacting with each other productively.
- While it was recognised that parent and child groups were currently on offer in parks in both areas – providing a space where parents can meet and socialise while children play – it was thought that a greater variety in the activities on offer to parents and their young children would help parents to get out and about and meet other parents more frequently, particularly if children were of a preschool age.
- Residents of both areas also wanted a specific place to go where adults can socialise and children can play; in particular, they hoped that the regeneration of the area around the gasworks in Oval would provide the opportunity to build a **facility that would allow communities to get together**, share skills, participate in activities – for example exercise classes or cooking classes. Rather than just developing the places to meet other people, it will also be important to ensure opportunities are scheduled in. A **calendar of events** targeting everyone in the community such as discussion groups, book groups, workshops and classes might give people the opportunity to meet and interact with other people more than they do now. Suggestions included a monthly cinema or skills workshops. There also needs to be **better advertising of events and schemes** as residents said they currently struggled to find out about what was going on in their locale. Participants also want **better use of green spaces**. The parks around Oval and the Old Kent Road are seen to be assets of the local area, but residents acknowledged that the living conditions can be cramped and heavily built up so open spaces including gardens can be hard to come by. They would like to see **more allotments and community gardens to bring the community together** and promote healthy living.
- Appetite for an integrated health facility was seen in both areas. If such a facility were to be built in the Old Kent Road, residents would like to see more health services that would relieve pressure from existing services, and a focus on prevention, with services that are designed to promote healthy eating and exercise.
- Any new co-located service needs to ensure that the different facilities are integrated. Health professionals working in the West Norwood Centre suggested that **a central reception area would be helpful to visually link the services together**. Anecdotal evidence suggests that facilities like this that already exist are often co-located rather than fully integrated. Health professionals also wanted any facility to be designed closely with the community on board from the start, and with the needs of the local population in mind. At the action planning workshop, with members of both Southwark and Lambeth councils, the importance of establishing an integrated health centre in which services are truly integrated was recognised.
- **More of a range of healthy takeaway restaurants and cafes might encourage people to have more diverse, and healthier eating habits**. This could include both planning policy that encourages new establishments to sell healthy food, as well as encouraging existing businesses to have healthy options. Crucially, school children said themselves that unhealthy food takeaways are too easily accessible after school and they would like to see better access to cheap healthy food in the area. While consumption of takeaway food by school children seemed to stem primarily from hunger rather than a desire to socialise with others, it might also be possible to combat this habit by providing children with various places to go immediately after school, including activities or spaces that do not involve food. Encouraging schools to provide healthy, affordable meal and snack options on site would also be important.

- Residents in both areas also described a need to have more leisure facilities in the area, although this was a particular desire among residents in Oval. Residents want leisure centres to be affordable – and importantly have crèches or soft play areas to allow mothers with children to access the facilities too.
- Some small **changes might encourage residents to walk more often**. This includes better street lighting and better lit parks, better crossings and safer junctions for pedestrians, helping pedestrians feel safer from cyclists, and helping them navigate roadworks on the pavement, and reducing the amount of uneven pavements and litter.
- One insight from the action planning workshop was that improvements to the aesthetics of the area might also encourage people to walk more frequently. It might be possible to encourage residents to walk as an activity in itself, rather than as a way of getting about, if the environment was pleasant enough.
- In Lambeth in particular, residents noted that they often felt intimidated by cyclists in the area. Better separation of cyclists and pedestrians may help to encourage residents to walk more often.
- Residents in both areas should be given a voice in local regeneration plans, so that they feel engaged and empowered, and can contribute to the creation of strong and cohesive communities.

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About Ipsos MORI's Social Research Institute

The Social Research Institute works closely with national governments, local public services and the not-for-profit sector. Its c.200 research staff focus on public service and policy issues. Each has expertise in a particular part of the public sector, ensuring we have a detailed understanding of specific sectors and policy challenges. This, combined with our methods and communications expertise, helps ensure that our research makes a difference for decision makers and communities.



May 2017

The Impact of Planning Policy on Health Outcomes and Health Inequalities in Southwark and Lambeth

Appendices

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Appendix A: Methodological detail of quantitative survey

The methodology for the quantitative element of this research comprised of a face-to-face, in-home, survey of 352 residents aged 16+ of the Old Kent Road Opportunity Area and 101 residents ages 16+ of the Oval and Kennington Development Area. Fieldwork was undertaken between 19th October and 12th December 2016, and the average interview length across the two areas was 21 minutes. Interviews were conducted using CAPI (computer-assisted personal interviewing).

- The Old Kent Road Opportunity Area comprises c.13,700 residential addresses so a sample of areas/addresses were selected using a stratified approach. Twenty-two output areas (OAs) were selected by ranking all OAs in the area by discriminator (social graded %ABs) and then using a 1 in n approach to select the 22 areas.
- The Oval and Kennington Development Area comprises far fewer addresses. Therefore, all addresses in the area were selected and divided them into six sample points.^[1]

Interviewers were then assigned sampling points in which to achieve a particular number of interviews. Within each sampling point, interviewers were instructed to leave at least 1 residence between a successful interview and the next residence they approach for an interview. They were also asked to try and spread out the interviews they achieve over different roads (and different blocks of flats if applicable) within the list of addresses they have been given.

In order to ensure the sample of those interviewed was as representative of the local population as possible, quotas were set on key demographics within each point, based on data from the 2011 Census regarding age, sex, and working status.

At the analysis stage, data from the Old Kent Road Opportunity Area were weighted to the population profile of Southwark in terms of age, sex and working status, to counteract any non-response bias. Due to the small size of the sample, data from the Oval and Kennington Development Area were not weighted as there is no known population profile for this very small area and applying Local Authority level weights may have distorted the figures.

^[1] Due to the small size of the Old Kent Road Opportunity Area the sampling area also included those streets immediately adjoining, but not actually forming part of, the OKRDA. A map of both areas is included in Appendix A of this report.

Appendix B: Note on use of the shortened Warwick-Edinburgh Mental Wellbeing Score (SWEMWBS)

WEMWBS uses responses to a series of questions about people's recent state of mind to form a measure of mental wellbeing. Instead of the full list of 14 questions, this survey uses a recognised shorter form (SWEMWBS) of seven questions. In this survey, residents have been asked how often they have been:

- feeling optimistic about the future
- feeling relaxed
- feeling useful
- dealing with problems well
- thinking clearly
- feeling close to other people, and
- been able to make up my own mind about things,

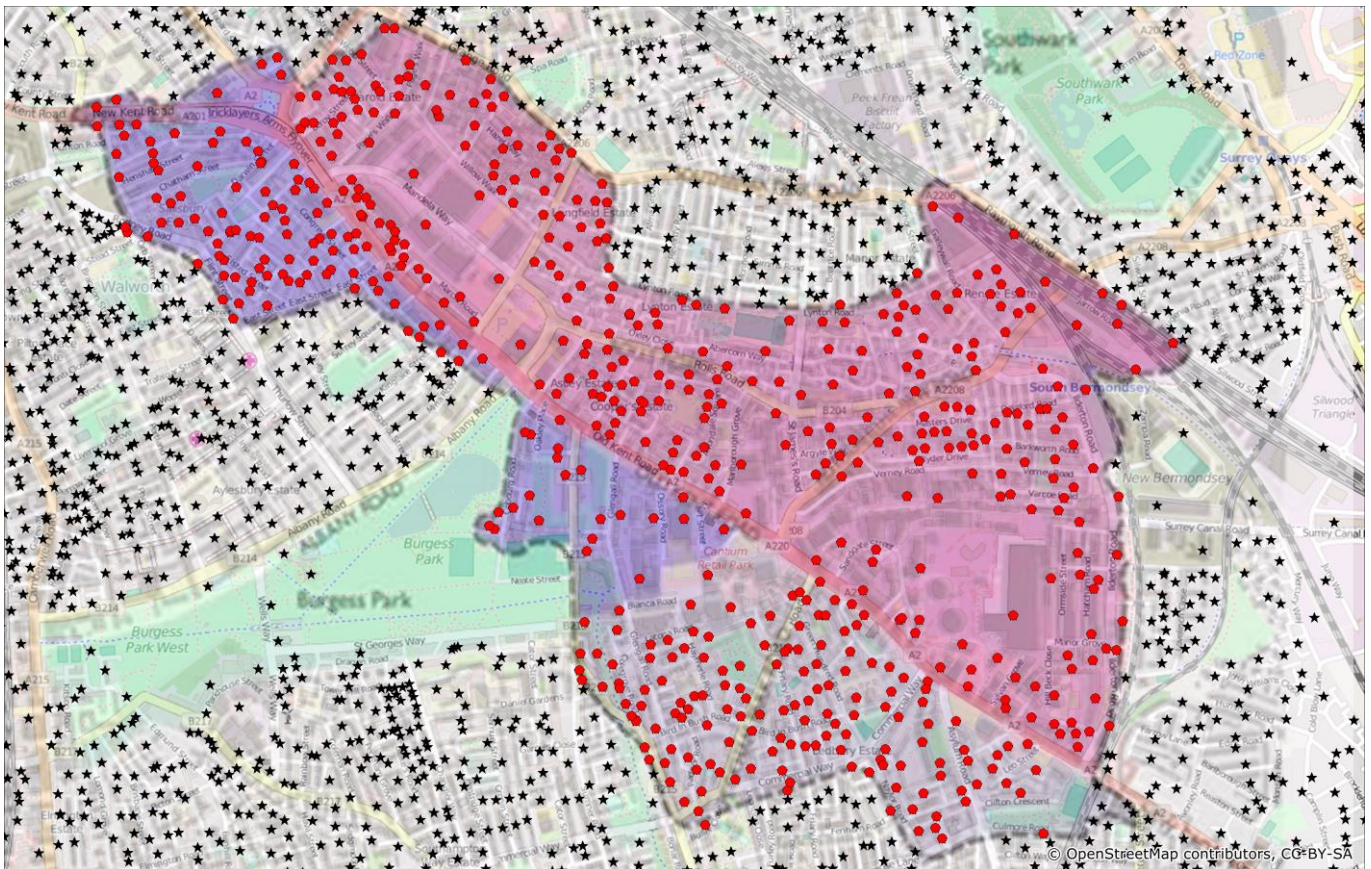
Using the value assigned to each 5-point answer scale, participants who give an answer to each of these seven questions are assigned a score of between 7 (the lowest level of mental wellbeing) and 35 (the highest). Summed scores are then transformed to metric scores using the SWEMWBS conversion table.

Appendix C: Note on the survey area and profile

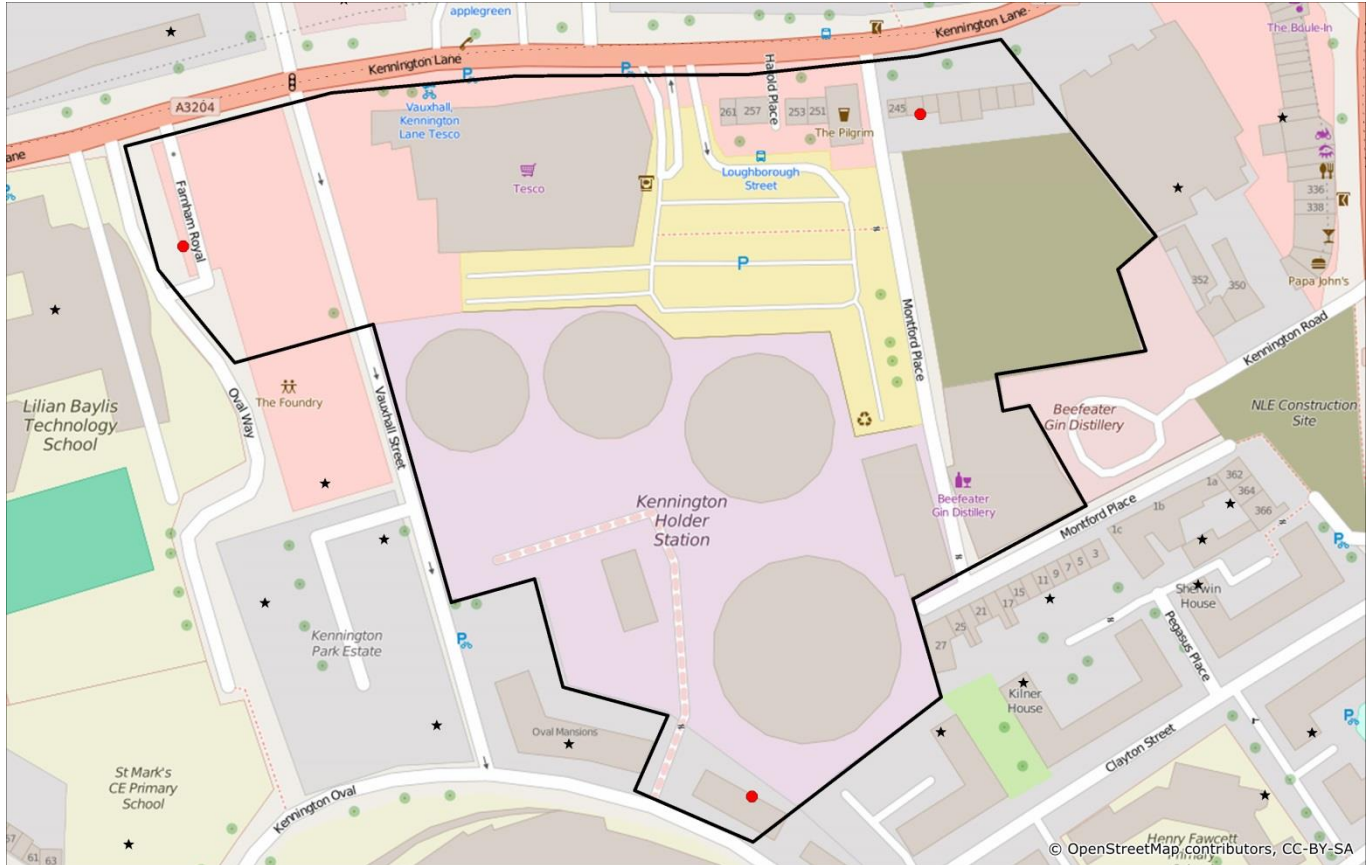
1.1 The survey area

As outlined in section 2.2 of this report, sample for the quantitative element of this research was drawn from two specific areas, one in the London Borough of Southwark (the Old Kent Road Opportunity Area) and the other in the London Borough of Lambeth (the Oval and Kennington Development Area).

The Old Kent Road Opportunity Area comprises c.13,700 addresses, and so sample for the quantitative study of residents of this area was drawn entirely from within the bounds of the map below. For the majority of the qualitative elements of the research, sample for Southwark was achieved through asking a re-contact question on the quantitative survey. The schools included in the healthy eating element of the research were also drawn from within the specific area in the map below.



The Oval and Kennington Development Area, on the other hand, comprises far fewer residential addresses. In order to achieve sufficient sample for the quantitative study, sample was drawn from both within the area and from the immediately surrounding roads. A map of the extended area for sampling purposes is included below.



As in the Old Kent Road Opportunity Area, sample for the qualitative elements within the Oval and Kennington Development Area was achieved through contacting those who had taken part in the qualitative survey and who had agreed to be re-contacted. The schools included in the healthy eating element of the research were drawn from the area immediately surrounding that outlined in the map above.

1.2 The survey profile

Throughout this report we refer to a number of demographic sub groups. These groupings are based on demographic information collected as part of the quantitative survey, which is not discussed in its own right within this report. The table below gives a breakdown of the number of respondents falling into each of these demographic groupings, for both survey areas. Please note that, due to small base sizes, sub groups from within the Oval and Kennington Development Area are not discussed within this report.

Table 1.1: Demographic breakdown of the two survey areas

Demographic	Sub-group	Unweighted base size (Old Kent Road)	Unweighted base size (Oval and Kennington)
Gender	Male	162	48
	Female	190	53
Age	16 to 34 year olds	149	49
	35 to 54 year olds	128	52 (35+)
	55 and over	75	
Working status	Working	188	64
	Not working – retired	46	9
	Not working - other	118	28
Length of time lived in area	Less than 5 years	118	50
	5 years or more	234	51
Ethnicity	White	167	72
	BME	181	29

Health	Good/fair	328	98
	Bad/very bad	24	2
Financial situation	Living comfortably/doing alright	192	71
	Other	154	29
Children in household	Yes	130	29
	No	222	72
Housing situation	Rent from local authority or housing association	214	45
	Council leaseholder	21	0
	Other	112	56

1.3 Profile of participants in the qualitative research

Table 1.2: Breakdown of qualitative elements

Element/theme	Borough	Participants
Two workshops on social isolation (social isolation)	One in Lambeth, one in Southwark	20 participants in each workshop, recruited from those who had agreed (Southwark) or agreed/neither agreed nor disagreed (Lambeth) with the statement 'I would like to out to meet people more often'. A range of demographic quotas were set to ensure a good mix across age, gender, working status, ethnicity and length of time living in the area.

Focus group with Mothers (social isolation)	Southwark	10 participants, recruited through the Camberwell-based community group Mumspace. No demographic quotas were set.
Focus groups with school children on walking (obesity and inactivity)	One in Southwark, two in Lambeth	10 participants per group, recruited through the research team contacting specific schools in the area. In Southwark, the participants were Year 11 students. In Lambeth, one group was with Year 6 students, while the other was with those from Year 10.
Focus groups with school children on diet (obesity and inactivity)	Two in Southwark, one in Lambeth	10 participants per group, recruited through the research team contacting specific schools in the area. In Lambeth, the participants were Year 9 students. In Southwark, one group was with Year 5 students, while the other was with those from Year 8.
Focus group on local health services (health service provision)	Southwark	10 participants, recruited from a mix of those who agreed or disagreed that there are enough primary care services in the local area. A range of demographic quotas were set to ensure a good mix across age, gender, working status, ethnicity, state of health and whether or not respondents suffered from a long-term condition.
5 in-depth interviews with health professionals	Southwark	Five local health professionals, recruited by the core research team. Interviews were conducted with one clinical lead and four GPs.

Appendix D: Note on statistical reliability

When reading this report, it should be remembered that all results of the quantitative research are subject to sampling tolerances, which means that not all differences between results are statistically significant at the 95% confidence level. Indications of approximate sampling tolerances for this survey and for surveys of larger groups of participants are provided in the table below. As shown, sampling tolerances vary with the size of the sample and the size of the percentage results. This survey used a quota sampling approach. Strictly speaking the tolerances applied here apply only to random samples with an equivalent design effect. In practice, good quality quota sampling has been found to be almost as accurate.¹

Approximate sampling tolerances applicable to percentages at or near these levels at the 95% confidence level			
	10% or 90%	30% or 70%	50%
Size of sample on which survey result is based	±	±	±
101 interviews	6	9	10
352 interviews	3	5	5
400 interviews	3	5	5
500 interviews	3	4	4
600 interviews	2	4	4
700 interviews	2	3	4
800 interviews	2	3	4

¹ Orton, S. (1994), Evidence of the Efficiency of Quota Samples. Survey Methods Newsletter, vol. 15, no. 1; Stephenson, C. B. (1979), Probability Sampling with Quotas: Wan Experiment. POQ, vol. 43, no. 4.

900 interviews	2	3	3
1,000 interviews	2	3	3

Comparing the views of different groups within the sample surveyed

Different groups within a sample (e.g. men and women) may have different results for the same question. A difference has to be of a certain size in order to be statistically significant. To test if a difference in results between two sub-groups within a sample is statistically significant, at the 95% confidence level, the differences between the two results must be greater than the values provided in the table below. Again, strictly speaking the sampling tolerances shown here apply only to random samples with an equivalent design effect. In practice, good quality quota sampling has been found to be almost as accurate.²

Differences required for significance at or near these percentages at the 95% confidence level			
	10% or 90%	30% or 70%	50%
Size of sample on which survey result is based	±	±	±
50 and 50	12	13	14
50 and 100	10	16	17
100 and 100	8	13	14
100 and 150	8	12	13
100 and 200	7	11	12

² Ibid.

150 and 150	7	10	11
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Due to the small sample size in the Oval and Kennington Development Area, subgroups among respondents in this area have not been. When considering the results of sub groups among the Old Kent Road respondents, it is worth bearing in mind that findings for groups with 100 respondents can be subject to confidence intervals of +/- 10% - smaller groups will be subject to even larger confidence intervals. A full breakdown of the various sub groups discussed in this report can be found in appendix A (sample profile).

Appendix E: Quantitative survey questionnaire

Introduction

Good morning / afternoon / evening. My name is from Ipsos MORI, the independent research organisation. We are carrying out a survey among people in this area on behalf of Southwark and Lambeth Councils. The research is funded by Guy's and St Thomas' charity, and aims to understand what residents think about their local area, local services and their health and wellbeing. The research findings will be used to help inform the councils' future work.

The interview will take about 18 minutes.

I would like to assure you that all the information we collect will be kept in the strictest confidence, and used for research purposes only. It will not be possible to identify any individual person in the survey results.

Section A – Demographics for quotas and screening

I would like to start off by asking you a few questions about yourself.

Q1.

SINGLE CODE

[INTERVIEWER TO CODE GENDER]

Male

Female

ASK ALL

Q2.

SINGLE CODE

Can I ask how old you are?

[INTERVIEWER WRITE IN EXACT AGE – IF REFUSED, PROMPT FOR AGE BAND]

1. 16 – 17

2. 18 – 24

3. 25 – 34

4. 35 – 44

5. 45 – 54

6. 55 – 64

7. 65 – 74

8. 75+

9. Prefer not to answer

ASK ALL

Q3.

SINGLE CODE. SHOWCARD AA

Which of the following best applies to you? Are you....

1. In full-time work (30 hrs/wk+)
2. In part-time work (8-29 hrs/wk)
3. Registered unemployed (job seeker's allowance)
4. Unemployed, not registered, but seeking work
5. Not working but not seeking work
6. Retired
7. At home looking after family
8. Sick/disabled or a full time carer of a sick/disabled person
9. Full-time student
10. Other

Section B - The area you live in

I would now like to ask you some questions about the area you live in.

ASK ALL

Q4.

SINGLE CODE. SHOWCARD BB.

How long have you lived in this area? By this area I mean within a 15-20 minutes' walk from this address.

1. Less than 6 months
2. 6 months to one year
3. Over one and up to two years
4. Over two and up to 5 years
5. Over 5 and up to 10 years
6. More than 10 years

7. Don't know [NOT ON SHOWCARD]

ASK ALL

Q5 – Q8.

SINGLE CODE PER QUESTION. ROTATE ORDER OF Q5-Q8. SHOWCARD A. REVERSE ORDER.

I am now going to read out some statements about the local area. For each one, please tell me to what extent you agree or disagree.

- Q5. The local area is a place where people get on well together
- Q6. I feel a sense of belonging to my local community
- Q7. I feel safe in the local area when outside in the daytime
- Q8. I feel safe in the local area when outside after dark

[SHOWCARD]

1. Strongly agree
2. Tend to agree
3. Neither agree nor disagree
4. Tend to disagree
5. Strongly disagree
6. Don't know/not sure [NOT ON SHOWCARD]

ASK ALL

Q9.

SINGLE CODE.

Have you given unpaid help to a local group, club or organisation in the last 12 months?

1. Yes
2. No
3. Don't know

Section C - Social integration

I am now going to ask a few more questions about your local area and community, and the things you like to do and the places you like to go.

ASK ALL

Q10.

SINGLE CODE. SHOWCARD B. REVERSE ORDER

In your free time, how often do you see or spend time with other people who do not live with you? Please look at this card and tell me the number next to the answer that applies.

1. At least once a day
2. 6 or more times a week
3. 4 to 5 times a week
4. 2 to 3 times a week
5. Once a week
6. 2-3 times a month
7. Once a month
8. Once every couple of months
9. Once or twice a year
10. Less often than once or twice a year
11. Don't know [NOT ON SHOWCARD]

ASK ALL

Q11.

SINGLE CODE. SHOWCARD B. REVERSE ORDER

Not counting the people you live with, how often in your free time do you generally speak with other people over the phone, by text or email or over the internet for example using social media sites such as Facebook? Please look at this card and tell me the number next to the answer that applies.

1. At least once a day
2. 6 or more times a week
3. 4 to 5 times a week
4. 2 to 3 times a week
5. Once a week
6. 2-3 times a month
7. Once a month

8. Once every couple of months
9. Once or twice a year
10. Less often than once or twice a year
11. Don't know [NOT ON SHOWCARD]

ASK ALL

Q12.

MULTICODE. SHOWCARD C. REVERSE ORDER

Which of the following places in your local area, if any, do you typically go to when meeting up with or spending time with other people who do not live with you? Please tell me which of these places you socialise at. By local area I mean within a 15-20-minute walk from your home.

1. A hobby or social club
2. A group with activities that keep you active (including taking part, coaching or going to watch)
3. A local community centre or neighbourhood group
4. A group for children or young people
5. A college, university or adult education group
6. A group for older people
7. An environmental group
8. A health, disability or welfare group
9. A religious or faith group, including going to a place of worship
10. A pub/bar
11. A museum, art gallery or library
12. A park or green/open space
13. A communal garden/allotment/food growing space
14. A cinema, theatre or concert venue
15. A restaurant or cafe
16. A shop on the high street
17. A shopping centre

18. Local shops
19. Have other people visit me at my home
20. Visit someone else's home
21. None of these places

ASK ALL

Q13.

MULTICODE. SHOWCARD D. REVERSE ORDER

And which of these places do you typically go to outside of your local area?

1. A hobby or social club
2. A group with activities that keep you active (including taking part, coaching or going to watch)
3. A local community centre or neighbourhood group
4. A group for children or young people
5. A college, university or adult education group
6. A group for older people
7. An environmental group
8. A health, disability or welfare group
9. A religious or faith group, including going to a place of worship
10. A pub/bar
11. A museum, art gallery or library
12. A park or green/open space
13. A communal garden/allotment/food growing space
14. A cinema, theatre or concert venue
15. A restaurant or cafe
16. A shop on the high street
17. A shopping centre
18. Visit someone else's home

19. None of these places

ASK ALL

Q14.

SINGLE CODE PER STATEMENT. ROTATE ORDER OF STATEMENTS. SHOWCARD E. REVERSE ORDER

I will now read out some statements about going out, in particular going out to meet people or socialise with friends or family. Please tell me how far you agree or disagree with each statement.

[READ OUT]

- There are enough places in the local area suitable for meeting with friends, relatives or work colleagues
- I would like to go out to meet people more often

1. Strongly agree
2. Tend to agree
3. Neither agree nor disagree
4. Tend to disagree
5. Strongly disagree
6. Don't know [NOT ON SHOWCARD]

ASK ALL

Q15.

MULTICODE. DO NOT READ OUT

What, if anything would make getting out more attractive to you?

Personal reasons/circumstances

1. If my health was better
2. Having a car
3. Having a bicycle
4. Having more spare time
5. Having someone/people to socialise with
6. Having someone/people to socialise with in the local area
7. If it was less expensive to go out/if I could afford it
8. If I could arrange childcare/a babysitter
9. If I could afford childcare/a babysitter

10. If my family/friends lived closer to me

Improvements to facilities/amenities

11. More/better recreational facilities, services or good places to go out in the local area
12. More/better quality pavements and footpaths
13. More/better quality cycle paths/routes/facilities for storing bicycles securely
14. If the shops/venues nearby were more accessible or inclusive (e.g. spoke my language, was disability friendly etc.)
15. If the shops/venues nearby were more family or child-friendly
16. More parks or green/open spaces nearby
17. More toilets/more accessible toilets
18. More seats/places to rest
19. More places/facilities for crossing roads safely
20. More bins/rubbish/litter collection

Safety

21. If I felt safer going out
22. If I felt safer going out in the local area
23. More/better street lighting after dark

Transport

24. More/better public transport
25. More/better public transport which is accessible for disabled people, or people with limited mobility
26. More affordable public transport
27. Less traffic congestion

Other/General

28. Less pollution in the environment
29. If the area was a more pleasant or attractive environment generally
30. Other (Please specify)

- 31. Nothing – I am happy with how often I get out [ALLOW MULTICODE WITH CODES 32 & 33 ONLY]
- 32. Nothing – I prefer to have contact/speak with others over the phone [ALLOW MULTICODE WITH CODES 31 & 33 ONLY]
- 33. Nothing – I prefer to have contact/speak with others online/on the internet [ALLOW MULTICODE WITH CODES 31 & 32 ONLY]
- 34. Don't know [SINGLE CODE]
- 35. Prefer not to say [SINGLE CODE]

Section D - Health services

Next I would like to ask you some questions about health services.

ASK ALL

Q16.

SINGLE CODE. SHOWCARD F

How long does/would it take to walk from your home to the GP practice where you are registered as a patient? Please tell me the length of time, in minutes, it would take to walk there. If you are unsure, please give your best estimate.

- 1. Less than 10 minutes' walk
- 2. Between 10 and 20 minutes' walk
- 3. Between 20 and 30 minutes' walk
- 4. Between 30 minutes and an hour's walk
- 5. More than an hour's walk
- 6. I am not registered with a GP
- 7. Don't know [NOT ON SHOWCARD]

I am now going to ask you some more questions about GP and primary care services in the local area. As well as GP practices, 'primary care' covers dental practices, community pharmacies and high street opticians/optometrists.

ASK ALL

Q17.

SINGLE CODE. SHOWCARD G. REVERSE ORDER

Please tell me to what extent, if at all, you agree or disagree with the following statement:

[READ OUT]

- There are enough primary care services in the local area that are conveniently located for people like me

- 1. Strongly agree

2. Tend to agree
3. Neither agree nor disagree
4. Tend to disagree
5. Strongly disagree
6. Don't know/not sure [NOT ON SHOWCARD]

ASK ALL

Q18.

OPEN. PROBE FULLY AND RECORD ALL ANSWERS GIVEN

Please tell me what, if anything, would improve your own experiences of primary care services in your local area? Please give me as much detail as possible in your answer.

ASK ALL

Q19.

MULTICODE. DO NOT READ OUT

I am now going to read a short description of a Health and Leisure Centre that exists in London; I would like to get your thoughts on this facility.

The facility brings together under one roof a gym, swimming pool and fitness centre as well as the local Council's customer centre, GP and dental services and community health services such as health visiting and healthy living support. It also has a community space for hire.

If a facility like this was set up in the local area, what benefits, if any, do you think that it would bring?

1. It would allow people to use more than one service or facility in one visit
2. It would be convenient to have these facilities in the same location
3. It would encourage people to use health services
4. It would encourage people to use other facilities located there
5. It would encourage people to register with a GP/dentist
6. It would make it easier for people to live healthier lifestyles
7. It would make the area more attractive
8. It would provide a place for people to meet
9. Other (Please specify)
10. None/no benefits/can't think of any [SINGLE CODE]
11. Don't know [SINGLE CODE]

ASK ALL EXCEPT THOSE WHO CODE 10 AT Q19
Q20.

MULTICODE. SHOWCARD H. REVERSE ORDER

If a centre like this was set up in the local area, what community facilities or public services other than a GP surgery would you like it to include? Please look at this card and tell me all answers that apply.

1. A dentist
2. Pharmacy/chemist
3. Community health services such as health visiting and stop smoking support
4. A swimming pool
5. A fitness centre
6. My local council's customer centre
7. Specialist housing for older people
8. My local council's housing services office
9. A crèche/nursery
10. Space for hire by the community
11. Other (Please specify)
12. I am not interested in a centre like this being set up in my local area [SINGLE CODE]
13. Don't know [SINGLE CODE. NOT ON SHOWCARD]

Section E - Physical activity & diet

Next I would like to ask you some questions about your lifestyle. Please remember that there are no right or wrong answers here and I would like you to be as honest as possible in answering the questions. All your answers will be kept in strict confidence.

ASK ALL

Q21.

SINGLE CODE. SHOWCARD I. REVERSE ORDER

How many portions of fruit or vegetables do you eat in a typical day? Please include all fruit and veg, including fresh, frozen, dried, stewed or tinned.

'A portion' could be for example 1 apple or banana or 3 heaped tablespoons of vegetables, beans or pulses. Please look at this card and tell me the number next to the answer that applies.

1. None
2. 1 or 2 portions
3. 3 or 4 portions
4. 5 or more portions
5. Don't know [NOT ON SHOWCARD]
6. Prefer not to answer [NOT ON SHOWCARD]

ASK ALL

Q22-Q24.

SINGLE CODE FOR EACH QUESTION. ROTATE ORDER OF QUESTIONS (Q26-Q28). SHOWCARD J: REVERSE ORDER

Thinking about the things that you eat and drink. How often, if at all, do you ...?

- Q22. eat food from a take-away such as a kebab, pizza, fried fish, chicken or chips or a burger?
- Q23. eat home-cooked meals made by you or a member of your household?
- Q24. eat ready-meals or packaged meals that you or a member of your household have purchased from a supermarket or shop and cooked at home?

1. Never
2. 1-2 times a week or less
3. 3-6 times a week
4. Daily
5. 2-3 times a day, or more often
6. Don't know [NOT ON SHOWCARD]
7. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q25.

SINGLE CODE FOR EACH STATEMENT. ROTATE ORDER OF STATEMENTS. READ OUT. SHOWCARD K: REVERSE ORDER

I'm going to read out a list of things that some people have said. Please can you tell me the extent to which you agree or disagree with each?

- I find it difficult to buy fresh food in my local area
- Fresh food is too expensive

- In my local area it is easier to buy food from a take-away than it is to buy fresh, healthy food
- I need more information on how to eat healthily
- I try to shop, cook and eat healthily
- I do not know how to cook healthy meals myself
- I am not interested in cooking healthy meals myself

1. Strongly agree
2. Tend to agree
3. Neither agree nor disagree
4. Tend to disagree
5. Strongly disagree
6. Don't know [NOT ON SHOWCARD]
7. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q26.

SINGLE CODE. SHOWCARD L. REVERSE ORDER

In an average week, how often do you do 30 minutes or more of moderate physical activity per day? The 30 minutes could be in one go or spread out across the day for example 3 lots of 10 minutes. Moderate activity includes brisk walking, dancing, cycling, bowling, golf, swimming, household tasks involving considerable effort and making you feel breathless. Would you say you do this...

1. Never
2. 1 or 2 times a week
3. 3 or 4 times a week
4. 5 or 6 times a week
5. Every day of the week
6. Don't know [NOT ON SHOWCARD]
7. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q27.

SINGLE CODE. SHOWCARD M. REVERSE ORDER

And in an average week, how much time in total do you normally spend walking?

1. None
2. Less than 15 minutes
3. 15-30 minutes
4. More than 30 minutes, up to 1 hour
5. 1-3 hours
6. 4-5 hours
7. More than 5 hours
8. I am unable to walk
9. Don't know [NOT ON SHOWCARD]
10. 10. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q28.

MULTICODE. DO NOT READ OUT

What, if anything, stops you from doing more exercise or being more physically active?

Ability/ prohibiting factors

1. I'm not fit enough
2. I'm too old
3. I don't know how to exercise or be physically active
4. I have a disability, illness or injury that prevents me from exercising/being physically active
5. I feel embarrassed when I exercise or am physically active/I'm not confident enough
6. I have no one to exercise/go to clubs/classes with
7. I've never been asked or encouraged to take part

Cost/ lack of opportunity

8. It costs too much

9. There is a lack of free gym classes/swimming in the area
10. There is a lack of facilities or clubs in the local area/ I don't know where to go (and learn)
11. It is too far / too difficult to travel to clubs / facilities
12. There is a lack of parks and green/open spaces in the area
13. I don't feel safe when walking, running or cycling in the local area
14. I don't have the right equipment/ clothing/ footwear
15. Lack of available childcare
16. Lack of affordable childcare

Time constraints

17. I'm too busy/ I haven't got around to it yet

Lack of interest/ inclination

18. It's too much effort / I can't be bothered
19. I would rather spend my leisure time doing other things
20. I don't like/ I'm just not interested in any form of exercise/physical activity
21. I don't see any benefits in taking part in exercise/physical activity

Other/None:

22. Nothing [SINGLE CODE]
23. Not applicable / I am already active enough [SINGLE CODE]
24. Other (specify)
25. Don't know [SINGLE CODE]
26. Prefer not to say [SINGLE CODE]

ASK ALL

Q29.

MULTICODE. SHOWCARD N. REVERSE ORDER

Which, if any, of the following would encourage you to lead a healthier lifestyle?

1. Lower prices for using leisure centres/free gym membership/swimming
2. Lower prices for healthy food
3. Better sports and leisure facilities in the local area (Please specify)
4. Having more time
5. Being told to by my doctor to do so for health reasons
6. Having more healthy food available in local shops and markets
7. Better access to weight loss services
8. Better access to parks and green/open spaces
9. Better information about how to eat healthily
10. Better information about how to be more physically active
11. Having help with my caring responsibilities
12. Better access to stop smoking services
13. Advice and support to stop/cut down drinking alcohol
14. More family-friendly/child-friendly facilities
15. More accessible facilities (e.g. spoke my language, was disability friendly etc.)
16. Something else (PLEASE SPECIFY)
17. Nothing, I already lead a healthy lifestyle [NOT ON SHOWCARD] [SINGLE CODE]
18. Don't know (NOT ON SHOWCARD) [SINGLE CODE]

ASK IF RESPONDENT IS WORKING (CODE 1 OR 2 AT Q3) AND WALKS IN A TYPICAL WEEK (Q27 = CODE2-7).

SHOWCARD O. REVERSE ORDER

Q30.

Can you please tell me the total length of time, in minutes, that you spend walking when travelling to and from work in a typical week? If you walk some or all of the way both to and from work, please add together the time you spend walking during both of these journeys.

1. None
2. Less than 15 minutes

3. 15-30 minutes
4. More than 30 minutes, up to 1 hour
5. 1-3 hours
6. 4-5 hours
7. More than 5 hours
8. Don't know [NOT ON SHOWCARD]
9. Prefer not to say [NOT ON SHOWCARD]

ASK IF DON'T CURRENTLY WALK WHEN TRAVELLING TO WORK (Q30 = CODE 1) AND ALL WHO WORK BUT DO NOT WALK AT ALL IN A TYPICAL WEEK (CODE 1 OR 2 AT Q3 AND CODE 1 AT Q27)

Q31.

MULTICODE

Some people complete all or part of their journey to work by walking. What would encourage you to walk more when travelling to and from work?

DO NOT READ OUT, PROBE FULLY

1. If I lived closer to work
2. If I had more time
3. If I felt safe walking that route
4. If there were more/better pavements along the route
5. If there was more/better lighting along the route after dark
6. If there was less traffic along the route
7. If there was less pollution along the route
8. More parks or green/open spaces nearby
9. More toilets/more accessible toilets
10. More seats/places to rest
11. Better/more/more accessible road crossings
12. If I had the right clothing/shoes for walking

13. If there was somewhere to shower/get changed at work
14. If I was in better health/if I was fitter
15. If I had someone to walk with
16. Other (PLEASE SPECIFY)
17. Nothing – I would not walk to work [SINGLE CODE]
18. Nothing – I cycle to work [SINGLE CODE]
19. Don't know [SINGLE CODE]

ASK ALL EXCEPT THOSE WHO CODE 8 AT Q27

Q32.

MULTICODE

What would encourage you to walk more often when making short journeys? (IF WORKING [CODE 1 OR 2 at Q3] INSERT <Please think about the other journeys you make besides getting to or from work>).

DO NOT READ OUT, PROBE FULLY

1. If I lived closer to the destination
2. If I had more time
3. If I felt safe walking that route
4. If there were more/better pavements along the route
5. If there was more/better lighting along the route after dark
6. If there was less traffic along the route
7. If there was less pollution along the route
8. More parks or green/open spaces nearby
9. More toilets/more accessible toilets
10. More seats/places to rest
11. Better/more accessible road crossings
12. More places/facilities for crossing roads safely
13. If I had the right clothing/shoes for walking
14. If I was in better health

15. If I was younger
16. If I was fitter
17. If I had someone to walk with
18. If there were more places within walking distance that I would want to walk to
19. Other (PLEASE SPECIFY)
20. Nothing – I would not walk for these journeys [SINGLE CODE]
21. Nothing – I cycle for these journeys [SINGLE CODE]
22. Don't know [SINGLE CODE]

Section F - General health

I would now like to ask you some questions about your health. I would like to remind you that all your answers will be kept strictly confidential

ASK ALL

Q33.

SINGLE CODE. SHOWCARD P

How is your health in general? Would you say it is...?

1. Very good
2. Good
3. Fair
4. Bad
5. Very bad
6. Don't know/not sure [NOT ON SHOWCARD]
7. Prefer not to answer [NOT ON SHOWCARD]

ASK ALL

Q34.

SINGLE CODE. SHOWCARD Q. REVERSE ORDER

Would you say that for your height you are...

1. about the right weight
2. underweight
3. slightly overweight
4. very overweight
5. Don't know [NOT ON SHOWCARD]
6. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q35.

SINGLE CODE PER STATEMENT. SHOWCARD R. RANDOMISE ORDER OF STATEMENTS. READ OUT STATEMENTS.

REVERSE SCALE

I'm going to read out some statements about feelings and thoughts. For each one, please tell me how often, if at all, you have felt this way over the last two weeks? Please look at this card and read out the number that applies.

- I've been feeling optimistic about the future
- I've been feeling relaxed
- I've been feeling useful
- I've been dealing with problems well
- I've been thinking clearly
- I've been feeling close to other people
- I've been able to make up my own mind about things

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know [NOT ON SHOWCARD]

7. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q36.

MULTICODE ALLOWED FOR CODES 1 & 2.

Do you, or anyone else in your household have any long-standing illness, disability or infirmity? IF YES: Is that you or someone else in your household?

1. Yes – myself
2. Yes - another person in my household
3. No (SINGLE CODE)
4. Don't know [SINGLE CODE]
5. Prefer not to answer [SINGLE CODE]

ASK IF 'YES - MYSELF' (CODE 1) at Q36

Q37.

MULTICODE. SHOWCARD S

Which of the following are affected by this health problem or disability?

1. Hearing
2. Vision
3. Mobility
4. Mental health
5. Memory
6. Or is this linked to learning difficulties?
7. Or is there some other form of health problem or disability? (PLEASE SPECIFY)
8. Don't know [NOT ON SHOWCARD] [SINGLE CODE]
9. Prefer not to answer [NOT ON SHOWCARD] [SINGLE CODE]

Section G - Additional demographic questions

We are almost at the end of the survey but I would like to ask a few more questions about you and your family situation. Again, I'd like to reassure you that your answers will be kept in the strictest confidence.

ASK ALL

Q38.

SINGLE CODE. SHOWCARD T

Which of the following best describes your current situation?

1. Married
2. In a civil partnership
3. Living with a partner
4. Single
5. Widowed
6. Divorced
7. Separated
8. Don't know [NOT ON SHOWCARD]
9. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q39.

What is the total number of people living in your household including yourself and any children?

[INTERVIEWER WRITE IN]

ASK IF Q39>1

Q40.

How many children aged fifteen or under are there in your household?

[INTERVIEWER WRITE IN]

ASK IF CHILDREN IN HOUSEHOLD (CODE 1 OR ABOVE AT Q40)

Q41.

Are you the parent or legal guardian of any of the children in the household?

1. Yes
2. No

ASK ALL

Q42

SINGLE CODE

Do you look after, or give any regular help or support to family members, friends or neighbours because of long-term physical or mental ill-health, a disability or problems related to old age?

1. Yes
2. No
3. Don't know
4. Prefer not to answer

ASK ALL

Q43.

SINGLE CODE. READ OUT

Which of the following best describes the type of home you live in?

1. Detached house
2. Semi-detached house
3. Terraced house
4. Apartment or flat
5. Other
6. Don't know [DO NOT READ OUT]

ASK ALL

Q44.

How many bedrooms are there in the home you live in?

[INTERVIEWER WRITE IN]

ASK ALL

Q45.

SINGLE CODE. SHOWCARD U

Which of the following best describes your housing situation?

1. Council leaseholder
2. Owner occupier - private
3. Rent it from a private landlord
4. Rent it from the local authority/council
5. Rent it from a housing association
6. Shared ownership

7. Renting a room in a house or flat share with family member(s)
8. Renting a room in a house or flat share with non-family member(s)
9. Live with parents/grandparents/other family members
10. Other
11. Don't know [NOT ON SHOWCARD]
12. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q46.

MULTICODE ALLOWED CODES 1 & 2

Do you or any members of your household own a car?

1. Yes – myself
2. Yes – someone else in my household
3. No (SINGLE CODE)

ASK ALL

Q47.

SINGLE CODE. SHOWCARD V

How well would you say you yourself are managing financially these days? Please look at this card and read out the number of the answer which best applies to you.

1. Living comfortably,
2. Doing alright,
3. Just about getting by,
4. Finding it quite difficult,
5. Or finding it very difficult?
6. Don't know [NOT ON SHOWCARD]
7. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q48.

SINGLE CODE. SHOWCARD

Which ethnic group do you consider you belong to? Please choose one option that best describes your ethnic group or background.

WHITE

- 8. British
- 9. Irish
- 10. Any other white background

MIXED

- 11. White and Black Caribbean
- 12. White and Black African
- 13. White and Asian
- 14. Any other mixed background

ASIAN OR ASIAN BRITISH

- 15. Indian
- 16. Pakistani
- 17. Bangladeshi
- 18. Any other Asian background

BLACK OR BLACK BRITISH

- 19. Caribbean
- 20. African
- 21. Any other black background

CHINESE OR OTHER ETHNIC GROUP

- 22. Chinese
- 23. Any other background [NOT ON SHOWCARD]
- 24. Prefer not to say [NOT ON SHOWCARD]

ASK ALL

Q49.

SINGLE CODE. SHOWCARD X

Which of these best describes your religion?

1. Atheist
2. Buddhist
3. Christian
4. Hindu
5. Jewish
6. Muslim
7. Sikh
8. Other – please specify
9. No religion
10. Don't know
11. Prefer not to answer

ASK ALL

Q50.

SINGLE CODE. SHOWCARD Y

Looking at this list, can you please read out the letter next to the line which best describes you?

1. I am heterosexual/straight
2. I am gay or lesbian (homosexual)
3. I am bisexual
4. Other
5. I prefer not to answer this question
6. Don't know [NOT ON SHOWCARD]

ASK ALL.

Q51.

Could I please take your telephone number?

[ALL TELEPHONE NUMBERS SHOULD HAVE 11 DIGITS.]

ENTER MOBILE NUMBER

Don't know

No mobile number

Refused

[ALL TELEPHONE NUMBERS SHOULD HAVE 11 DIGITS.]

ENTER LANDLINE NUMBER

Don't know

No landline

Refused

ASK ALL.

Q52.

And could I please also record your address?

[INTERVIEWER RECORD: RESPONDENT'S HOME ADDRESS (STREET, TOWN, COUNTY, POSTCODE). PLEASE PUT FORWARD SLASH TO SEPARATE EACH LINE OF THE ADDRESS.FOR EXAMPLE: 10 PRACTICE ROAD/PRACTICE TOWN/PRACTICE COUNTY/PR1 AC2]

ENTER TEXT

Don't know the address

Refused

[Permission to re-contact](#)

ASK ALL

Q53.

SINGLE CODE

In the future Ipsos MORI and Southwark and Lambeth Councils or associated partners may want to re-contact some people we've talked to in this survey, for other research we might be doing about similar topics over the next few months.

Your contact details and some of your answers to this survey would be used to invite you to take part in these further studies. Your details would be kept in strict confidence by the research teams at Ipsos MORI and Southwark and Lambeth Councils. Participation in any further research is entirely voluntary and you will still be free to refuse to take part when we get back in touch.

Would you be willing to be re-contacted for this type of further research?

1. Yes
2. No

ASK IF YES - CODE 1 AT Q53

Q54.

Thank you very much. So that we can contact you to ask if you'd like to take part again, I'd like to record your email address. Are you happy for me to do this?

1. Yes
2. No

IF YES (CODE 1):

Please tell me the first part of the address before the @ sign?

[INTERVIEWER PLEASE CHECK WITH RESPONDENT WHICH LETTERS ARE UPPER OR LOWER CASE.]

Don't know

No answer

Refused

Thank you. Now please tell me the second part of the address after the @ sign.

1. Aol.com
2. Beeb.net
3. Blueyonder.co.uk
4. Btinternet.com
5. Btopenworld.com
6. Fsmail.com
7. Gmail.com
8. Hotmail.net
9. Hotmail.com

10. msn.com
11. ntlworld.com
12. supanet.com
13. tesco.net
14. tiscali.co.uk
15. virgin.net
16. yahoo.co.uk
17. yahoo.com
18. OTHER (PLEASE SPECIFY)

The email address you gave is [email address]. Is this correct?

1. Yes, correct
2. No, incorrect

IF INCORRECT (CODE 2) RE-RECORD EMAIL ADDRESS

THANK & CLOSE:

That is the end of the survey. Thank you very much for taking part.

Appendix F: Schools taking part in the qualitative discussions

Schools in Old Kent Road:

- City of London Academy Secondary school: <http://www.cityacademy.co.uk/page/default.asp?title=Home&pid=1>
- Surrey Square Primary school: <http://surreysquareprimary.co.uk/>

Schools in Oval:

- Archbishop Tenison Secondary school: <http://www.tenisons.com/custom/1/homepage/default.aspx>
- Henry Fawcett Primary school: <http://henryfawcett.org.uk/>

Appendix G: Schools strand discussion guides

'Healthy Eating'

First lesson (1 hour): lead by the teacher

Today we're going to be talking about being healthy or unhealthy.

TEACHER TO RECORD ALL RESPONSES ON AN ELECTRONIC WHITEBOARD.

When I say 'being healthy' what words, images or questions pop into your head first?

PROBE ON WORDS, IMAGES AND QUESTIONS THAT COME TO MIND E.G. EATING FRUIT / VEG, EXERCISE, HEALTHY WEIGHT, NOT SMOKING ETC.

And when I say 'being unhealthy' what do you think of?

PROBE ON WORDS, IMAGES AND QUESTIONS THAT COME TO MIND E.G. EATING FRUIT / VEG, EXERCISE, HEALTHY WEIGHT, NOT SMOKING ETC.

How important is it to you to be healthy?

- If it's important: Why?
- If it's not so important: Why not?

How healthy do you feel? Why?

- What things make you healthy and what not?
- Would your parents say that you lead a healthy lifestyle or not? Why?
- Do you think that your friends lead healthy lifestyles?
- What about your parents? Brothers / sisters?
- Do you think it matters if you try to be healthy or not? Why / why not?

What about healthy eating – what is it?

- What foods are healthy? Why?
- What foods are unhealthy? Why?

SHOW PICTURES OF GROUPS OF FOODS.

What foods in each of these do you think of as healthy?

- And which foods are unhealthy? What made you choose that as unhealthy?
- Which basket do you think is the healthiest choice? And which the least?
- How did you decide?

What foods do you mostly enjoy eating?

- Is it healthy/unhealthy food? Why?

ACTIVITY 1 – YEAR 9

- In groups plan the meals for breakfast, lunch and dinner for a family. Half the class produces a healthy version and half produces an unhealthy version.
- Groups to present and explain why they are healthy/unhealthy.
- Then do voting exercise on favourite daily meals to create a final meal plan.

Pre-task/homework (1 week to complete)

Keep a food diary to record daily food consumption over a week – including snacks. Detail to include:

- What was eaten
- Where food was consumed
- Who prepared food/where it was purchased / how much it cost (if the young person

purchased it themselves)

Template of the food diary to be provided by Ipsos MORI.

'Walking'

Introduction to pre-task: lead by the teacher
Ipsos MORI researchers want to talk to you about how you get around: to and from school and also to and from other places that you go. Before they do so, they would like you to complete a homework exercise.
Pre-task/homework (1 week to complete)
Activity diary: note down the day-to-day routes you take to and from school, and after-school or weekend activities over the course of a week. <ul style="list-style-type: none"> - Include significant locations: school, home, where their good friends live, youth clubs or libraries etc. - Include mode of transport (walking, car, bus, scooting, skating etc)
Introduction (5 mins)
<p>Introduce self and Ipsos MORI</p> <p>Briefly explain Southwark and Lambeth Council and why they want to do this work:</p> <ul style="list-style-type: none"> - They are interested in what young people think, and in particular understand how you feel about walking. - We're talking to people who live, work, or go to school around (Old Kent Road/Oval) about what they think about walking. - Your views are really important which is why we've asked you here today. <p>Confirm happy to record, MRS and anonymity. Reassure that no information will be passed on to teachers or parents.</p> <p>Reassure no right or wrong answers, their opinions matter, okay to disagree, important to let each other speak / listen to each other</p> <p>Ice-breaker – introduce their friend:</p> <ul style="list-style-type: none"> - Favourite things to do in leisure time? - Favourite foods and drinks? - Somebody they admire?
Getting around the local area (10 mins)
<p>Today we're going to be talking about walking and how you get around your local area.</p> <p>What are the different ways of getting around the local area?</p> <p>Year 10: What different transport links are there in the local area?</p> <ul style="list-style-type: none"> - Which ones do you use regularly?

How do you get to and from school?

- PROBE: car, bus, tube, train, walk, cycle
- ASK THOSE WHO DO NOT WALK OR CYCLE Have you ever walked to school?
- IF YES, how easy or difficult was this? Would you think about doing it regularly or not? Why?
- IF NOT PROBE: Why not? PROBE: too far, traffic, pollution, too dangerous, not allowed.

Think about the last time you walked somewhere...

- Where was it?
- Who do you walk with?
- Did you walk anywhere today? Why/why not?

How much do you enjoy walking?

- What's good and bad about walking? Why do they say that?
- How often do you walk? Where do you walk?

Deciding whether or not to walk

- In which situations do you decide to walk instead of getting a lift with someone or getting the bus/tube/train?
- What, if anything, stops you from walking when you do consider it as a means for getting from one place to another?

Walking routes (20 mins)**ACTIVITY 1 – Review activity diaries**

Choose 2 routes you take regularly: e.g. going to school/ a friends' house/ family member. One where you walk, and one where you don't walk:

- Draw a map (year 10) of how you carry out these routes: where do you go? What do you see?
- Describe to a partner:
 - How did you get from A to B?
 - What is a good thing/bad thing about this route?

FEEDBACK TO THE CLASS:

Describe partner's journeys

- One good thing and one bad thing about each of their journeys

PROBE:

- What routes do you use?
- How long do they take?
- How did you choose this way? PROBE: easiest way/ quickest way/ cheapest way/ weather
- In winter/ at night time – would that change?
- NON WALKING ROUTE: Why didn't you walk? How easy or difficult would it be to walk more as part of this journey?

Which places do you enjoy walking to?

- Why?
- In the local area, which places do you enjoy walking around? Why? Which places don't you enjoy walking around? Why?

How much choice do you have about how you get to different places?

- Do you think you have enough choice / too much or not enough?

What do you think would encourage you to walk more?

- What would encourage you to walk to school/ walk home?

- Is there anywhere you would like to walk to, but can't?
- What stops you walking in the local area? PROBE: busy roads/ street lighting/ other people

Barriers to walking and wrap up (10 mins)ACTIVITY 2:

IN PAIRS: BARRIER TO WALKING/DETTERRANTS TO WALKING

- What about where you live/your local area might stop you walking?
- What about yourself might encourage you to walk more?
- What about where you live/your local area might encourage you to walk more?

FEEDBACK TO THE GROUP:

What two things would encourage you to be healthier?

- What would you change about yourself?
- What would you change about where you live/local area?

Appendix H: Social Isolation strand residents discussion guide

Pre-task:

Diaries: participants asked to complete a diary over the course of a week giving us a fuller understanding of their lives in the local area including any social networks they have, the key spaces and places they go to, or would like to go to, for social interaction.

We will also ask participants to take photographs of elements of the built environment that they think positively or negatively impacts upon their experience.

Introduction (5 mins)

LEAD MODERATOR TO INTRODUCE THE SESSION:

Introduce self and Ipsos MORI

Briefly explain Southwark and Lambeth Council and why they want to do this work:

- They are interested how communities in or near the (Old Kent Road/Oval) live and what they need to live happy, healthy lives.
- We're talking to people who live, work, or go to school in this area about what they think about the area, what's good about it and ways it can be improved.
- Your views are really important which is why we've asked you here today.

Confirm happy to record, MRS and anonymity. Reassure that no information will be passed on to teachers or parents.

Reassure no right or wrong answers, their opinions matter, okay to disagree, important to let each other speak / listen to each other

TABLE DISCUSSIONS:

Ice-breaker – in twos:

- How long have you lived in the area?
- What would you be doing today if you weren't at this workshop?

Warm up: Living in the local area and (dis)likes about the built environment. (10 mins)

How would you describe your local area to someone who doesn't live here?

- Would you encourage other people to live in this area? Why?

What do you like/dislike about the local area?

- What's good about the (Old Kent Road/Oval)? What's bad about it?
PROBE: transport links/ friends or family living nearby/ shops/ community or social groups/ church/ pubs and bars/ libraries/ restaurants/ schools/ parks?
- Where are your favourite places?
- Are there any places you usually avoid? Why?

How the area has changed in the past five years?

- Would you say it has got better/worse/stayed the same? Why do you say that?
- Do you like how its changed? Why/ why not?

Current social interaction: (30 mins)

We now want to talk to you about the facilities you use in the local area and places you go to...

ACTIVITY – PAIRS

Review of pre-task in pairs:

- *Discuss pre-task in pairs (diary and photographs)*
- *LARGER MAP: Mapping of social networks: plot significant places (where people they know/are in contact with live, where the services they use are located and so on) on a map of the local area.*
- *Using photographs show which elements they like/dislike.*

Feedback to the table:

- What are the top 3 destinations/facilities you use in your local area? *Moderator to plot on an overall map*
- PROBE: transport hubs/ shops/ community or social groups/ church/ pubs and bars/ libraries/ restaurants/ schools/ parks?
- Where do people you know/have contact with live? Where do you walk?

Where would you go in the area to: meet friends/ shop/ buy food/ exercise/ go for a walk?

- How often do you do this?

How often do you leave the local area?

- Where do you go? Why?
PROBE: work/ visit people you know/ medical appointments/ exercise and sport/ shops and restaurants
- How do you get there?

Do you have contact with other people more/ less than you would like? Why?

- How does that make you feel?
- What things would allow you to see other people more? PROBE: better transport/ better health/ more spare time/ childcare/ safety/ knowing more people in the local area?
- What things would you like to do more of?

Is there anything in the local area you would like to get involved in? e.g. social group/ exercise class/ club or society?

- What stops you doing these things?
- How does that make you feel?

Do you think there are enough places in the area to meet up with other people? Why/ why not?

- How would you improve that?

ACTIVITY - PAIRS*In pairs complete task:*

- *Thinking about shops/restaurants, places, parks, and things to do in the area, discuss the following statements and fill in the blanks:*

There are too many XX in my local area**There aren't enough XX in my local area***Feedback to the group:*

- Why do you say that?
- If there were more XX how would you feel about the area?
- If there were less XX how would you feel?

PLENARY: MODERATOR AT EACH TABLE TO FEED BACK ON WHAT THE LOCAL AREA NEEDS MORE/LESS OF AND WHY

5 MINUTE COMFORT BREAK

Barriers in the local area (20 mins)

How would you describe the local community to someone who doesn't live here?

- What are the people like who live in this area? PROBE: Young or old/ friendly or unfriendly
- Is the community cohesive?
- Do you know the people in your local area? E.g. your neighbours? Why/ why not?
- How does that make you feel?
- Would you like to know more people in your local area? Why/Why not?

How safe would you say the local area is during the day time? How about at night? Why do you say that?

- PROBE: crime/ street lighting/ traffic
- How does that make you feel?

ACTIVITY – PAIRS

In pairs: look at maps again

- What are the key barriers to walking around the local area?
- In what areas do you not feel safe? Why?
- Where are there busy roads?
- Are there any places that are hard to get to? Why?

Feedback to the group and plot on master map:

- What are the key barriers? Why?
- How does that make you feel?

Accessing healthy foods (15 mins)

We're now going to talk specifically about buying food in the local area...

What shops/restaurants sell food in the local area?

- What food do they sell?
- Which ones sell healthy food? Which ones sell unhealthy food?

Where do you normally buy food?

- How often do you eat out? Where?
- What sorts of cafes/ restaurants do you like?
- Would you like eat out more? Why?
- How often do you eat at home? Do you cook for yourself?
- What sorts of foods do you eat at home?
- Where do you normally buy the ingredients?
- How often do you go out and buy ingredients to cook?

Where would you buy healthy food, e.g. fresh fruit and vegetables?

- Where would you want to buy this? PROBE ON: shops/ restaurants/ markets?
- What would encourage you to buy more healthy food? PROBE ON: Friends and family/ affordability/ availability?

PLENERAY: FEEDBACK ON THE KEY BARRIERS TO MOVING AROUND THE LOCAL AREA AND ACCESSING HEALTHY FOODS

Looking to the future (25 mins)

We're now going to think about this area in the future, and how you would like it to change...

Do you see yourself living here long-term? Why?

- What things would make you want to move to another area?
- What things would make you want to stay?

How would you like the area to change in the next five years?

- What things would make the area better? PROBE: transport links/ shops/ community or social groups/ church/ pubs and bars/ libraries/ restaurants/ schools/ parks?
- What things would allow you to get out more?
- What area might make the area worse? What things might stop you going out as much as you do now?

ACTIVITY – PAIRS

SMALLER MAPS: this area is being regenerated. What should the public space look and feel like in 2021?

- What key changes would you make to the area?
- What things would help you live a healthier life? Why?
- What changes would make you happier? Why?

Feedback to group:

- What changes would you make to built environment in your local area?
- What impact would this have on you?

Wrap up (10 mins)

Thinking about all these things we've discussed what would you want more of in the local area? What would you want less of?

What key changes would you make the local area? What would allow you to go out more?

PLENERARY: KEY CHANGES TO THE LOCAL AREA

End on a positive note: reiterate the potential positive impact that the workshop may have on planning policy in the area, confirming the benefits of the community coming together in this way to share ideas, discuss problems and help to improve the area. Note that as a result of these discussions, participants may have been made aware of new places/clubs in the area that they could go to for social interaction.

Hand out leaflets with contacts for activities, clubs, and helplines.

Appendix I: Social Isolation strand – ‘Mumspace’ discussion guide

Introduction (5 mins)

LEAD MODERATOR TO INTRODUCE THE SESSION:

Introduce self and Ipsos MORI

Briefly explain Southwark and Lambeth Council and why they want to do this work:

- They are interested how communities in or near the Old Kent Road live and what they need to live happy, healthy lives.
- We’re talking to people who live, work, or go to school in this area about what they think about the area, what’s good about it and ways it can be improved.
- Your views are really important which is why we’ve asked you here today.

Confirm happy to record, MRS and anonymity. Reassure that no information will be passed on to teachers or parents.

Reassure no right or wrong answers, their opinions matter, okay to disagree, important to let each other speak / listen to each other

TABLE DISCUSSIONS:

Ice-breaker – in twos:

- How long have you lived in the area?
- Why do you come to this mothers group?

Warm up: Living in the local area and (dis)likes about the built environment. (30 mins)

How would you describe your local area to someone who doesn’t live here?

- Would you encourage other people to live in this area? Why?

What do you like/dislike about the local area?

- What’s good about the Old Kent Road? What’s bad about it?
PROBE: transport links/ friends or family living nearby/ shops/ community or social groups/ church/ pubs and bars/ libraries/ restaurants/ schools/ parks?
- Where are your favourite places?
- Are there any places you usually avoid? Why?

How would you describe the local community to someone who doesn’t live here?

- What are the people like who live in this area? PROBE: Young or old/ friendly or unfriendly
- Is the community cohesive?
- Do you know the people in your local area? E.g. your neighbours? Why/ why not?
- How does that make you feel?
- Would you like to know more people in your local area? Why/Why not?

How safe would you say the local area is during the day time? How about at night? Why do you say that?

- PROBE: crime/ street lighting/ traffic
- How does that make you feel?

Current social interaction: (30 mins)

We now want to talk to you about the facilities you use in the local area and places you go to...

Where would you go in the area to: meet friends/ shop/ buy food/ exercise/ go for a walk?

- How often do you do this?

How often do you leave the local area?

- Where do you go? Why?
PROBE: work/ visit people you know/ medical appointments/ exercise and sport/ shops and restaurants
- How do you get there?

How did you find out about this group?

- How often do you attend this group?
- What do you like/ dislike about this group?
- Does anything stop you coming to this group as much as you'd like? Why?

Do you have contact with other people more/ less that you would like? Why?

- How does that make you feel?
- What things would allow you to see other people more? PROBE: better transport/ better health/ more spare time/ childcare/ safety/ knowing more people in the local area?
- What things would you like to do more of?

Is there anything in the local area you would like to get involved in? e.g. social group/ exercise class/ club or society/ specialist service?

- What stops you doing these things?
- How does that make you feel?
- What things would allow to get involved in these things?

Do you think there are enough places in the area to meet up with other people? Why/ why not?

- How would you improve that?

ACTIVITY - PAIRS

In pairs complete task:

- *Thinking about shops/restaurants, places, parks, and things to do in the area, discuss the following statements and fill in the blanks:*

There are too many XX in my local area

There aren't enough XX in my local area

Feedback to the group:

- Why do you say that?
- If there were more XX how would you feel about the area?
- If there were less XX how would you feel?

Looking to the future (15 mins)

We're now going to think about this area in the future, and how you would like it to change...

Do you see yourself living here long-term? Why?

- What things would make you want to move to another area?
- What things would make you want to stay?

How would you like the area to change in the next five years?

- What things would make the area better? PROBE: transport links/ shops/ community or social groups/ church/ pubs and bars/ libraries/ restaurants/ schools/ parks?
- What things would allow you to get out more?

- What area might make the area worse? What things might stop you going out as much as you do now?

Wrap up (5 mins)

Thinking about all these things we've discussed what would you want more of in the local area? What would you want less of?

What key changes would you make the local area? What would allow you to go out more?

PLENERARY: KEY CHANGES TO THE LOCAL AREA

Appendix J: Health Services strand residents discussion guide

Pre-task
Leaflet introducing new integrated health service in the local area. What would you think if you received this leaflet?
Introduction (5 mins)
<p>Introduce self and Ipsos MORI</p> <p>Briefly explain Southwark Council and why they want to do this work:</p> <ul style="list-style-type: none"> - They are interested how communities in or near the Old Kent Road live and what they need to live happy, healthy lives. - We're talking to people who live here about what they think about the health services in this area, what's good about them and ways they can be improved. - Your views are really important which is why we've asked you here today. <p>Confirm happy to record, MRS and anonymity. Reassure that no information will be passed on to teachers or parents.</p> <p>Reassure no right or wrong answers, their opinions matter, okay to disagree, important to let each other speak / listen to each other</p> <p>Ice-breaker – in twos:</p> <ul style="list-style-type: none"> - How long have you lived in the area? - What would you be doing today if you weren't at this focus group?
Current habits and service use (25 mins)
<p>How do you know what is 'healthy' and 'unhealthy'?</p> <ul style="list-style-type: none"> - What words or phrases come to mind when you think of being healthy/unhealthy? - How healthy do you think you are? Why? <p>How do you stay healthy? What have you done to be more healthy recently?</p> <p>FLIPCHART: What different types of services are available that help people stay healthy?</p> <ul style="list-style-type: none"> - PROBE: health services (e.g. GP practices, pharmacies, hospitals, walk in centres); fitness centres (e.g. leisure centres, gyms, sport centres); community centres, dental practices, opticians etc. <p>ACTIVITY – PAIRS</p> <p>Using maps: Which of these health and wellbeing services are available in the local area? Include: GP practices, pharmacies, leisure centres, dental practices, opticians etc.</p> <p>Feedback to group and plot on master map</p> <p>When was the last time you used one of these services?</p> <ul style="list-style-type: none"> - Was it in the local area? Was it elsewhere? - What do you like about these different services? What's good about them? - What don't you like about these different services? How could they be improved? - How easy is it to access these different services? What challenges did you face? - How could it be easier? - What other services would you like in your local area?
Case studies (45 mins)

Review pre-task:

- What would you think if a service was being introduced like this in your local area?
- What services would you like it to include? Why?
- Where would you like it to be located? Why?

We're going to look at a few different types of health and wellbeing services to get your feedback on them.

Hand out each case study between 2/3: (West Norwood/ Bromley by Bow/ Dulwich Hospital)

- What's good about this service?
- What are the health benefits of this service?
- Is there anything that could be improved about this service?

Pairs present their service

What do you think about the service in this example? What do you like/dislike?

- Is it helpful to have everything in the same place? Why?
- What do you think about having leisure services and health services in one place? What's good about this? What's bad about it?

Who would use a service like this?

- Do you think it would work for you? Why/why not?
- What services would you use? How would you like to access these different services?
- IF RELEVANT:
 - o How likely are you to use the leisure facilities when visiting the GP? Why/ why not?
 - o Would you use these leisure facilities at the same time as visiting the GP? Why/ why not?
 - o What might stop you using the leisure facilities? Would you still like to visit them?
- Do you think other people would want to use this facility? Who? Why?
- What other services could this facility include? PROBE: other health services/ other leisure facilities/ crèche or soft play area
- ASK IF ANY PARENTS IN THE ROOM: Would the addition of a crèche make you more likely to use the facilities, rather than going elsewhere to use similar facilities?
- What would encourage you to use this service?

What are the main benefits of this service?

- Do you think this service would help you to live healthier lives? Why?
- What else, if anything, would enhance the facility further?

Introduce patient case studies to the table:

- How might this person benefit from a service like this?
- What else would they need?

FLIPCHART – PROS AND CONS: Overall, what are the good things about these different services? What don't you like about these services?

Wrap up (15 mins)

FLIPCHART: Imagine there was a new health and wellbeing service in your local area. What would you like it to look like?

- Where is it located?
- What services does it include? e.g. GP practices, pharmacies, hospitals, walk in centres); fitness

centres (e.g. leisure centres, gyms, sport centres); community centres, dental practices, opticians etc. Why these services?

- What kinds of residents/patients would use this service?

Appendix K: Health services strand - case studies on integrated health facilities

The West Norwood centre



Ipsos MORI

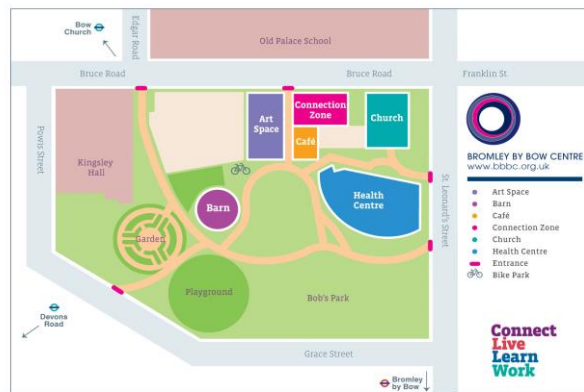
The West Norwood centre hosts both health and leisure facilities, including:

- GP services
- Dental services
- A gym and swimming pool
- A Council customer centre
- Community health services
- Community space for hire

The centre is situated in a green area, next to local housing estate, a children's playground and a school, as well as being only five minutes from West Norwood over ground station.

The idea is that parents will be able to attend a dental appointment whilst their children are having a swimming lesson, or that people will be able to seek advice about welfare from the council customer centre before using the gym.

The Bromley by Bow Health Partnership



'The Bromley by Bow Health Partnership' (BBBHP) consists of 110 people – a great team of varied health professionals – who provide healthcare service to over 26,000 patients, operating from 3 surgeries across Tower Hamlets.

Services:

- Health and wellbeing services including:
 - A Health Centre with GP services
 - Weight management support
 - Physical activities for older residents
- Advice services on benefits, housing, and debt
- Employment Advisor Team
- Money management support
- Art classes and exhibitions
- Volunteering opportunities

BBBHP have developed a method of "social prescribing". This recognises that when people come to us they may arrive with symptoms such as headache or low mood and that the cause of these ailments may be related to issues of debt, housing, immigration status or employment. So we "prescribe" a visit to the welfare advice worker, or to the employment team or to volunteering opportunities.

The Dulwich Hospital Scheme



Southwark Council's Planning Committee is making plans for a **new healthcare centre** and **community secondary school** to be built on the Dulwich Community Hospital site.

The new health centre will provide a range of services including:

- GP services
- A pharmacy
- Some diagnostics (such as X-ray and blood tests)
- A physiotherapy unit
- Community mental health services
- Services for patients with long term conditions.

The new centre and school will replace the hospital that is currently situated on the site.

Brockwell Park Surgery



- At the back of the surgery there is a large garden and allotment.

- The garden is available to sit in and to be enjoyed at anytime, for instance when waiting for an appointment or picking up a prescription.
- 2 gardening sessions a week, to which anybody is welcome to join.
- Vegetables grown in the garden is sold at reception on Tuesdays, Wednesdays and Thursday.
- The surgery also offers community walking groups, each aimed at patients with different health problems. For example, those with cancer, anxiety or depression.

Appendix L: Health Services strand clinician discussion guide

Interviews with Southwark GPs/clinical lead (3 interviews)

Introduction (5 mins)

Introduce self and Ipsos MORI

Explain purpose of interview: Southwark Council is interested how communities in or near the Old Kent Road live and what they need to live happy, healthy lives. Specifically, today we want to discuss the current provision of health services in this area, what's good about them and ways they can be improved.

Interview should last 30 minutes.

Confirm happy to record, MRS and anonymity.

Can you tell me about your role?

- What are your key responsibilities?

How long have you been working in Southwark?

Health and health services in Southwark (5 mins)

How would you describe the local population?

- PROBE: age/ ethnicity/ affluence/ health

How would you describe the health service provision in the area?

- PROBE: GP services, social care services, hospital services, other healthcare services
- Do the services meet the needs of the local population? Why/ why not?

How well do GP services work with other local health and care services in the area? What makes you say that?

- Can you provide any examples where this works well?

What key improvements to the health services in Southwark would you like to see?

- Are there any new services/facilities you would like to introduce?
- What do you think the local population needs/wants?

Integrated health facilities (10 mins)

I want to talk to you about a new integrated health facility in West Norwood. Do you know anything about this service? *MODERATOR NOTE: CCGs may have been involved in the design of these services and therefore will be aware of integrated health facilities.*

The West Norwood centre hosts both health and leisure facilities on one site. It has GP and dental services, a gym and swimming pool, a council customer centre, community health services, and a community space for hire.

The idea is that parents will be able to attend a dental appointment whilst their children are having a swimming lesson, or that people will be able to seek advice about welfare from the council customer centre before using the gym.

What do you like/dislike about this service?

- What are the advantages of having a service like this? Are there any disadvantages?

What are the benefits of having these services co-located?

- What are the benefits to you/ clinicians? PROBE: signpost or refer patients/ visibility of services
- What are the benefits to patients? E.g. higher use of services/ better health and wellbeing.
- Do you think they would use the different services more, e.g. leisure services?

Do you think residents in Southwark would benefit from a service like this?

- Why/ why not?
- What benefits would this have in the area?
- Do you think local residents would use a service like this? Which ones?
- What would you change about this service so that it meets the needs of Southwark residents?
- Is there anything missing?

What challenges might a service like this face?

- Peckham pulse – why didn't this service work? How can you make these kinds of services work well for patients?

Wrap up (10 mins)

If you were overseeing the design of a new integrated health facility in the area....

- What services would you include? PROBE: health, care, leisure services
- Where would you build it?
- Which patients would you target?
- Which patients would you target for the leisure facilities? Do you think they would use them? What support would they need?

Overall, thinking about the health services in Southwark, what's the most important message we can bring back to Southwark council?

Have you got anything else to add?

Interviews with GPs in the West Norwood Health and Leisure Centre (WNHLC)

Introduction (5 mins)

Introduce self and Ipsos MORI

Explain purpose of interview: Southwark Council is interested how communities in or near the Old Kent Road live and what they need to live happy, healthy lives. Specifically, today we want to discuss the West Norwood Health and Leisure Centre (WNHLC) and your experiences working there.

Interview should last 30 minutes.

Confirm happy to record, MRS and anonymity.

Can you tell me about your role?

- What are your key responsibilities?

How long have you been working in the WNHLC?

The WNHLC (15 mins)

How would you describe the WNHLC to someone who has never seen it?

- What services does it provide?
- Hi

- What's different about this facility, compared to other local health services?

Can you tell me a bit more about how the service works...

- How do you work with the other services in the building? How joined-up are the different services?
- PROBE: GP service/ leisure facilities/ dentist/ community services
- Do patients use the different services on offer?
-

What do you like/dislike about this service?

- What are the advantages of having a facility like this? Are there any disadvantages?
- PROBE: for healthcare professionals/ for patients/ for residents
- What feedback do you get from patients?
-

What are the benefits of having these services co-located?

- What are the benefits to you/ clinicians? PROBE: signpost or refer patients/ visibility of services
- What are the benefits to patients? E.g. higher use of services/ better health and wellbeing.
- Do you think they patients use the different services more, e.g. leisure services?

What improvements would you make to the WNHLC?

- How could it work better for patients/residents of West Norwood/ Bromley by Bow?

Setting up similar services elsewhere (5 mins)

Do you know of other similar facilities elsewhere?

- How do they compare to the WNHLC?

Southwark Council are thinking about different ways of delivering health services in the Old Kent Road area. Do you think residents in Southwark would benefit from an integrated service like this?

- Why/ why not?
- What benefits would this have for Southwark?
- What would you change about this service so that it meets the needs of Southwark residents?
- Do you think local residents would use a service like this? Which ones?
- Is there anything missing?

Wrap up (5 mins)

If you could share one learning from your time working at the WNHLC, what would that be?

If you were overseeing the design of a new integrated health facility....

- What services would you include? PROBE: health, care, leisure services
- Where would you build it?
- Which patients would you target?
- Which patients would you target for the leisure facilities? Do you think they would use them? What support would they need?

Overall, thinking about setting up similar health facilities in Southwark, what's the most important message we can bring back to Southwark council?

Have you got anything else to add?

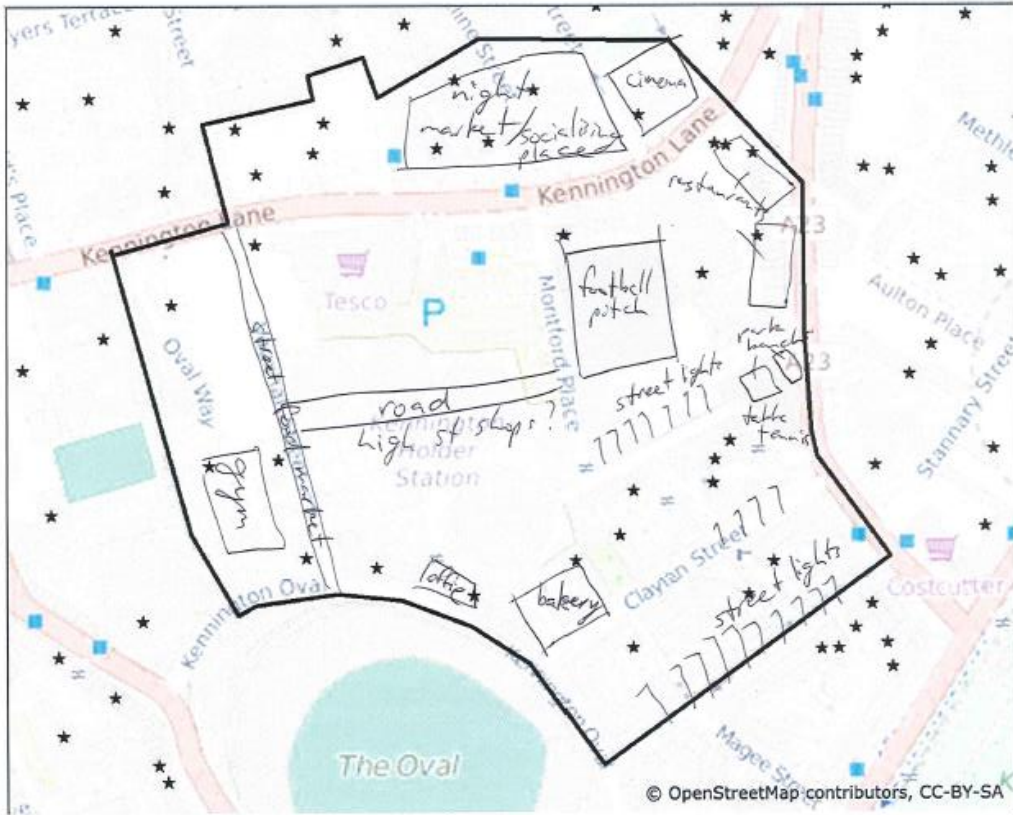
Appendix M: Example outputs from discussion groups

Activity diary: pre-task for Social Isolation workshops:

Ipsos MORI

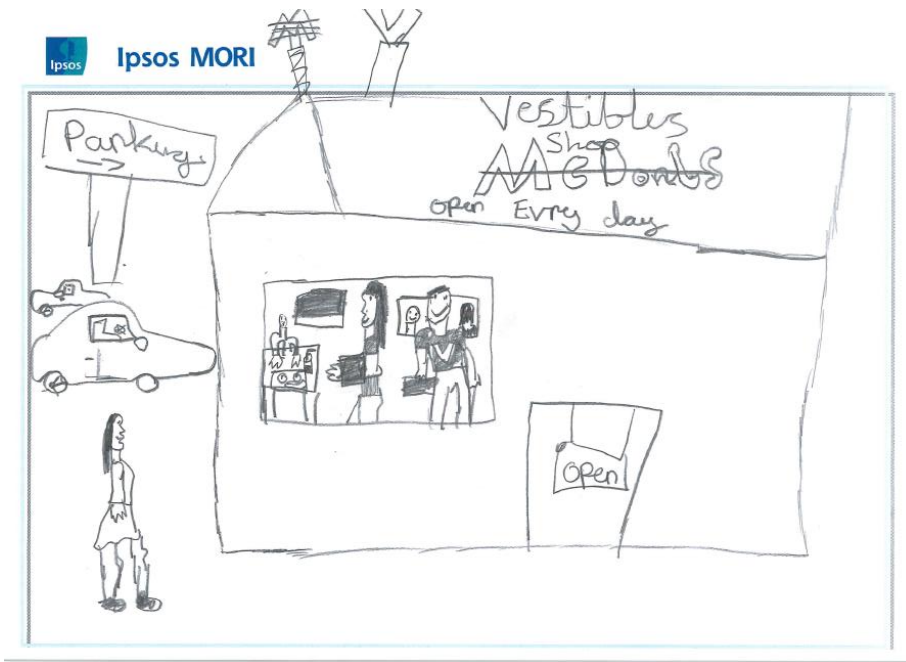
Monday	<ul style="list-style-type: none"> • I would like to go to more mother & baby places.
Tuesday	<ul style="list-style-type: none"> • I go to the library at 10:30 - 12:00 to the baby & toddler sing a long play group
Wednesday	<ul style="list-style-type: none"> • I take my children to soft play at peckham pulse
Thursday	<ul style="list-style-type: none"> • I take my youngest to a park in leyton square (the only place close that has baby swings)
Friday	<ul style="list-style-type: none"> • I go to peckham pulse for the free gym/swim
Saturday	<ul style="list-style-type: none"> • I would love to attend maybe a club for adults or maybe a drama course
Sunday	<ul style="list-style-type: none"> • I go to peckham pulse for the free gym/swim

Map exercise for Social Isolation workshops:

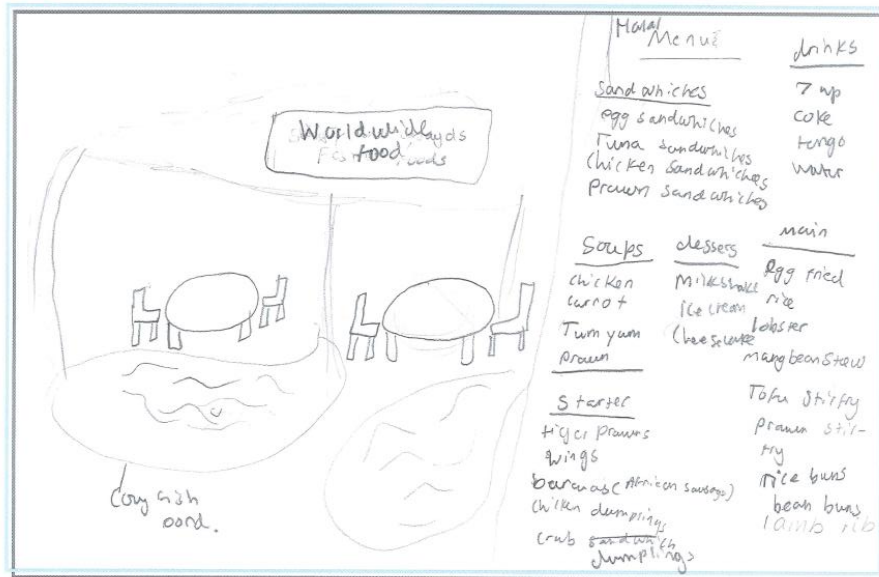


- Brighter lights
- Trees
- Clean streets
- Needs fresh Paint.
- Upgrade the children take-away Shops.
- Upgrade the Parks in the center of estates.

Designs for a new café from focus groups with school children:



Ipsos MORI Sahra Wajid



Walking diary from focus groups with school children:

	Routes Include routes to the main places and the types of transport that you used or how you got there.
Monday	Start = Black prince Road Unussule things I see = lots of road works transport taken = walked = 10 mins walk Finish = Henry jawcett Primary school
Tuesday	Start = Black prince Road unussule things I see = same as monday Transport taken = car = 4mins Finish = Henry jawcett Primary school
Wednesday	<div style="border: 2px solid red; padding: 5px; display: inline-block;">Same as tuesday</div>
Thursday	School same as Friday Transport taken = Bus (59) (5min)
Friday	Start = Black prince Road unussule things I see = some traffic because of the platform work and the station these buildings. Transport taken = walked to school Finish = Henry jawcett Primary school
Saturday	Start = Black prince Road Unneccessery things I see = Rubbish on the floor, transport taken = car = dad drives Finish = Billiey quays lots of road work not going to Not enough space for pedestrian pavement
Sunday	Start = Black prince Road Unneccessery things I see = Broken fence for Transport taken = Car = dad drives Finish = Teeco = In Ken-old Kent Road names Next to our house they are building a house that is a step away from us and it's really tall and my family feels uncomfortable because they could see us So I think that's not the right space to put it.

Walking diary from focus groups with school children:

	Breakfast What/where/who/how much?	Lunch What/where/who/how much?	Dinner What/where/who/how much?	Snacks/drinks What/where/who/how much?
Monday	<ul style="list-style-type: none"> Cereal/toast Home Mum or me Medium portion 	<ul style="list-style-type: none"> Nothing 	<ul style="list-style-type: none"> Cereal Home me Medium portion 	<ul style="list-style-type: none"> Chips/Crisp/biscuits After school Shop Medium
Tuesday	<ul style="list-style-type: none"> Cereal/Toast Home Mum or me Medium portion 	<ul style="list-style-type: none"> Sandwich/Baguette School Dinner lady Small portion 	<ul style="list-style-type: none"> cereal Home me Medium portion 	<ul style="list-style-type: none"> Nothing
Wednesday	<ul style="list-style-type: none"> Cereal/Toast Home Mum or me Medium portion 	<ul style="list-style-type: none"> Nothing 	<ul style="list-style-type: none"> cereal Home me Medium portion 	<ul style="list-style-type: none"> Fruits Home Shops Small portion
Thursday	<ul style="list-style-type: none"> Cereal/toast Home Mum or me Medium portion 	<ul style="list-style-type: none"> Sandwich/Baguette School Dinner lady Small portion 	<ul style="list-style-type: none"> Cereal with fruit Home me Medium portion 	<ul style="list-style-type: none"> Nothing
Friday	<ul style="list-style-type: none"> French toast Home Mum Medium portion 	<ul style="list-style-type: none"> Nothing 	<ul style="list-style-type: none"> Chicken nuggets and chips/garlic bread with vegetables Home Mum Medium portion 	<ul style="list-style-type: none"> Chicken & chips Fruits After School Shops Small portion
Saturday	<ul style="list-style-type: none"> Scrambled Egg and toast Home Mum Medium portion 	<ul style="list-style-type: none"> Chicken & rice/pasta Home Mum Large portion 	<ul style="list-style-type: none"> Fast Food Home Mum or me Medium portion 	<ul style="list-style-type: none"> Fruit/yoghurt Home Mum Medium portion
Sunday	<ul style="list-style-type: none"> Egg, baked bean, sausages, hash, mushrooms. Home Mum Large portion 	<ul style="list-style-type: none"> Chicken & rice/pasta Home Mum Large portion 	<ul style="list-style-type: none"> Fast food Home Mum or me Large portion 	<ul style="list-style-type: none"> Fruit/yoghurt Home Mum Medium portion