

Greater Essex Community Needs Index Report 2025

Research &
Citizen Insight
January 2025

Sponsored by:



Essex County Council

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Disclaimer: The Greater Essex Community Needs Index 2025 is based on data from the 2023 Community Needs Index, supplied by Oxford Consultants for Social Inclusion (OCSI). In the Further Analysis section, tables include indicators labelled as CNI Connect, CNI Civic, and CNI Active, which identify the specific domain of the Community Needs Index used to describe different aspects of community life.

While every effort has been made to ensure the accuracy and reliability of the data, the findings and conclusions presented reflect the information available at the time of analysis. This report is intended to serve as a guide to understanding community needs and should not be regarded as a comprehensive measure of all dimensions of community well-being.

Key findings

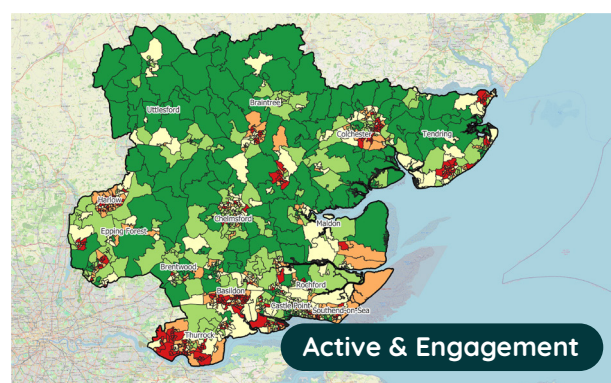
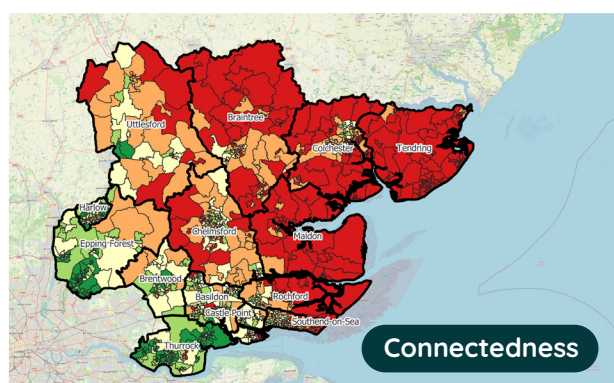
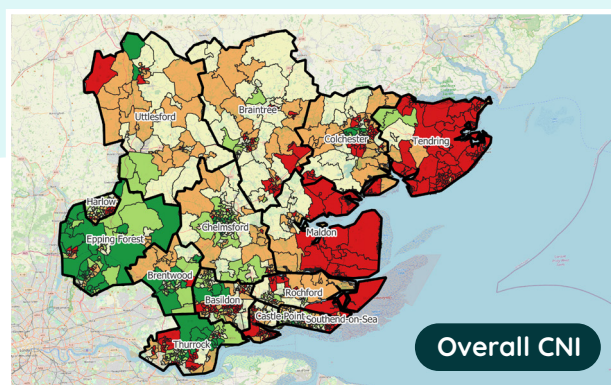
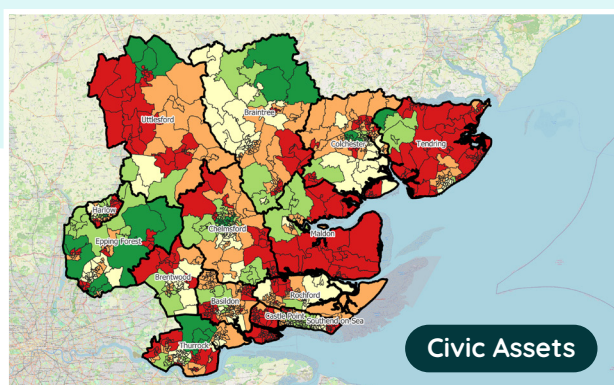
Overall Community Needs: Essex shows greater community needs compared to England.

Greatest needs are mainly clustered around coastal towns and rural areas.

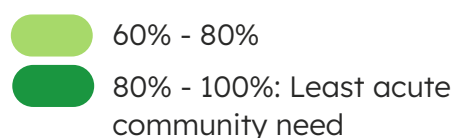
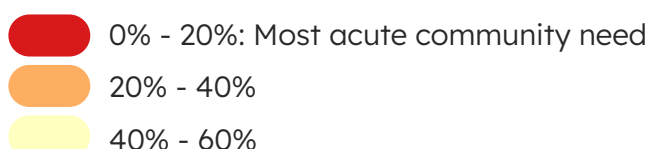
The Community Needs Index 2023 has been formed by standardising 28 indicators under three domains:

- Civic Assets,
- Connectedness,
- Active and Engaged Community.

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all LSOAs in England). Maps should be interpreted with caution due to varying LSOA sizes. For clearer comparisons refer to proportions of LSOAs falling into each quintile.



Acute needs (Percentage)



Key findings



Community Needs Index 2023

Overall, Essex exhibits greater community need compared to the national average.

- Only Norfolk and Suffolk have greater needs than Essex, among neighbouring counties.
- Among Essex districts, **Tendring** has the most acute needs.



Civic Assets Domain

Presence of key community, civic educational and cultural assets in and in close proximity to the area.

- Essex has more acute needs for civic assets compared to the national average.
- Among neighbouring counties, only Norfolk has greater need.
- Within Essex, **Castle Point** has the most acute need for civic assets.



Connectedness Domain

Connectivity to key services, digital infrastructure, isolation and strength of the local jobs market.

- Essex has greater needs for connectedness compared to the national average.
- Among neighbouring counties, Norfolk, Suffolk, East Sussex, and Cambridgeshire demonstrate greater needs than Essex.
- Within Essex, **Tendring** has the most acute connectedness needs.



Active and Engaged Communities Domain

Levels of third sector civic and community activity and barriers to participation and engagement.

- Essex has similar level of active and engaged communities compared to the national average.
- Among neighbouring counties, Essex performs less well.
- Within Essex, **Harlow** has the most acute need for an active and engaged community.



Healthy Communities

Communities that promote physical, mental and social wellbeing by providing access to resources such as healthcare services, recreational facilities and healthy food options.

- A number of measures indicates that **Tendring** has the greatest need for improving healthy communities (lowest density of sport and leisure assets, highest proportion of residents reporting bad health).



Connected Communities

Communities with strong social networks and accessible services.

- **Tendring** has the greatest need for improved digital connectivity.
- **Maldon and Uttlesford** have longer travel times to accessible services.

Key findings



Inclusive Communities

Communities that embrace diversity, promote social equity, reduce discrimination and ensure equal opportunity for all members.

- **Harlow** has the lowest proportion of residents who feel that they belong to their area.



Empowered Communities

Communities where members are encouraged to actively participate and have a voice in decision making and control over local resources.

- **Harlow and Thurrock** have the lowest voting and volunteering participation rates.



Purpose

The Research and Citizen Insight Team at Essex County Council (ECC) partnered with the Oxford Consultants for Social Inclusion (OCSI) to deepen our understanding of communities across Essex. This project uses a national “Community Needs Index” to assess and compare the wellbeing and resilience of Essex communities.

By applying this index, we can benchmark Essex communities against national standards, explore factors contributing to community needs, and monitor changes over time. This analysis builds on the 2020 version, incorporating updated methodologies and data.

ECC has established the Caring Communities Commission (CCC)—an independent body of experts and elected members—to improve health and social care outcomes by promoting community-based approaches to benefit residents and ease demand on public services. This analysis will inform the CCC’s work by identifying which areas in Essex have the greatest needs and by highlighting the specific factors and indicators that most impact community resilience. The previous CNI assessment indicated that some communities in Essex are among the least resilient in the country, reinforcing the importance of the CCC’s mission to support and strengthen these areas.

The scope of this paper is to:

1. Refresh our understanding of community need and resilience in Essex by undertaking analysis of the CNI 2023, including;
 - A benchmarking analysis of Greater Essex, Essex County, and specific districts, cities, boroughs, and urban areas against national CNI metrics, sub-domains, and key indicators.
2. Explore the impact of indicators on the CCC’s key focus areas:



**Healthy
Communities**



**Connected
Communities**



**Inclusive
Communities**



**Empowered
Communities**

Introduction to the Community Needs Index

The CNI is a quantitative measure designed to assess social infrastructure challenges at the small area level. It is composed of separate indicators grouped into three distinct domains.

Each of the three domains has its own score, with equal weighting applied. A higher score (and ranking closer to 1) signifies greater community need.

The CNI 2023 features methodological changes, and therefore it is not directly comparable with the previous publication, however this paper will provide indication to where the need is highest¹.

¹ [Community-Needs-Index-2023-Technical-Methodology-Paper.pdf](#)



Community Needs Index 2023 domains and descriptions



Civic assets: Presence of key community, civic educational and cultural assets in and in close proximity to the area.



Connectedness: Connectivity to key services, digital infrastructure, isolation and strength of the local jobs market.



Active and engaged community: Levels of third sector civic and community activity and barriers to participation and engagement.

Changes to the Community Needs Index 2023

The Community Needs Index 2023 is the second edition in a series designed to measure social infrastructure challenges at a granular spatial level.

This release follows extensive engagement with key stakeholders, consultations with a broader user base, and a significant research effort. While the 2023 Index maintains the same domain structures and thematic scope as its predecessor, it incorporates a review of the underlying indicators, weighting methodology, and geographical units used in its construction¹.

All methodological changes are detailed in the Methodology document published by OCSI and some of the key improvements include:

- **Geographical Units:** CNI 2023 uses 2021 Lower-layer Super Output Areas (LSOAs) instead of 2017 Wards. LSOAs are more stable, changing only every 10 years, and are more uniform in size, making them better suited for identifying needs, especially in rural geographies. LSOAs have an average population of 1,500 people, or 650 households. As of Census 2021, there are 33,755 LSOAs in England².
- **Indicator Review and Updates:** The underlying indicators were reviewed and updated to the most recent data points.

- **New indicators added:**

- **Civic Assets:** Density of sport and leisure assets, green assets, retail assets, community-owned assets.
- **Connectedness:** Access to green/blue space, job access score, digital exclusion risk, self-reported loneliness, and GP access score.
- **Active and Engaged Community:** Civic participation, neighbourhood cohesion, estimates of social trust, residential mobility index, short-term population turnover, and the presence of third sector organisations.
- **Weighting Methodology:** CNI 2023 uses Maximum Likelihood Factor Analysis to determine the weights of indicators within each domain. This method helps uncover the hidden factors influencing indicators and better understand their relationships.
- **Domain Structure:** The Connectedness domain was split into two sub-domains (physical connectivity and wider connectivity), and the Active and Engaged Community domain was divided into civic participation and civic activity to provide more detailed insights³.

¹ [Community-Needs-Index-2023-Technical-Methodology-Paper.pdf](#)

² [Census 2021 geographies - Office for National Statistics](#)

³ [Understanding the Community Needs Index 2023 update - Local Insight](#)

Introduction to the Caring Communities Commission

The Caring Communities Commission (CCC) has four focus areas including.

- Healthy Communities
- Connected Communities
- Inclusive Communities
- Empowered Communities

We will analyze how the CNI domains and indicators relate to the CCC focus areas. Additional indicators will also be explored.

Through this we will gain actionable insights into where the CCC can strategically concentrate its efforts to maximize positive outcomes in these areas.

Caring Community Commission Focus Area Definitions



Healthy Communities: Communities that promote physical, mental and social well-being by providing access to resources such as healthcare services, recreational facilities, and healthy food options.



Connected Communities: Communities with strong social networks and accessible services.



Inclusive Communities: Communities that embrace diversity, promote social equity, reduce discrimination, and ensure equal opportunity for all members.



Empowered Communities: Communities where members are encouraged to actively participate and have a voice in decision-making and control over local resources.

Section 1:

What does the Community Needs Index tell us?

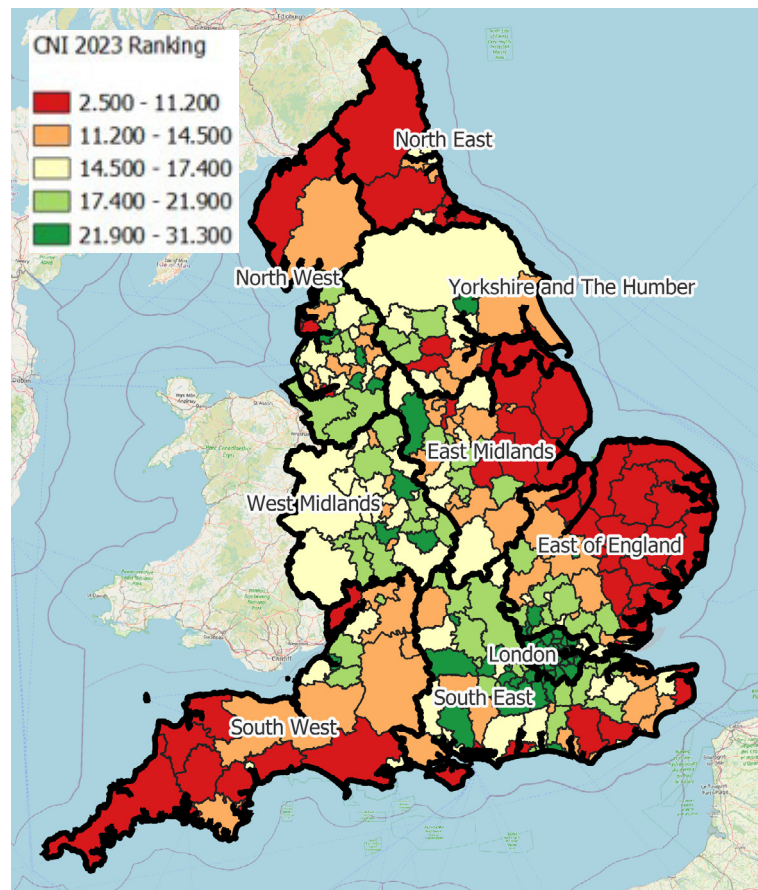


CNI 2023 regional rankings in each domain

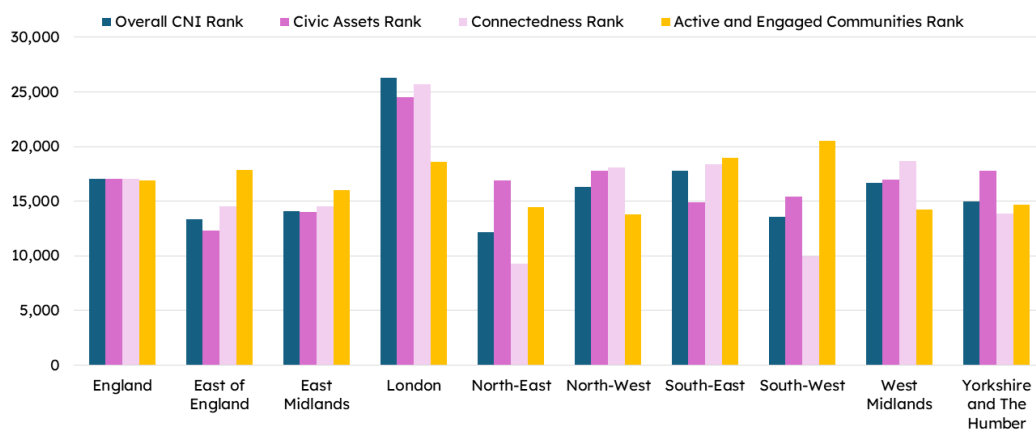
Overall, the CNI 2023 is showing that the greatest community needs are in the **North-East, East of England**, and **South-West**. In contrast, the lowest community needs are in **London** area. There are variations between regions in each domain:

- **Civic Assets:** The greatest needs in this domain are in the East of England region.
- **Connectedness:** The greatest needs are in the North-East region.
- **Active and Engaged Community:** The greatest needs are in the North-West region.

CNI 2023: Ranking by district.
Lower rank = higher need (Red colour).



CNI 2023: Ranking by domain and region. Lower rank = higher need



How Essex compares with neighbouring counties in each domain?

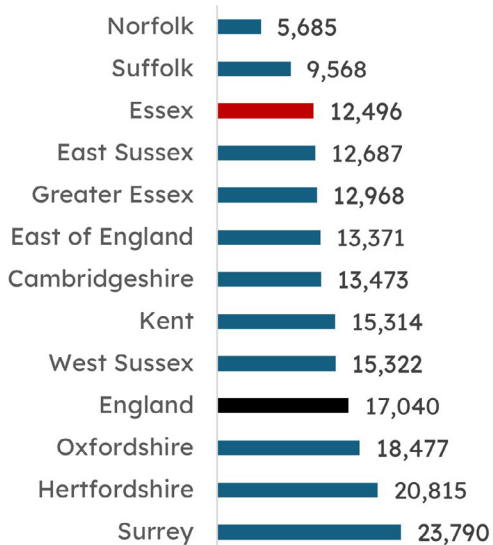
1. Overall CNI:

Overall, Essex has a higher level of community need compared to England and the East of England overall. Among neighbouring counties, only Norfolk and Suffolk exhibit more acute community needs than Essex.

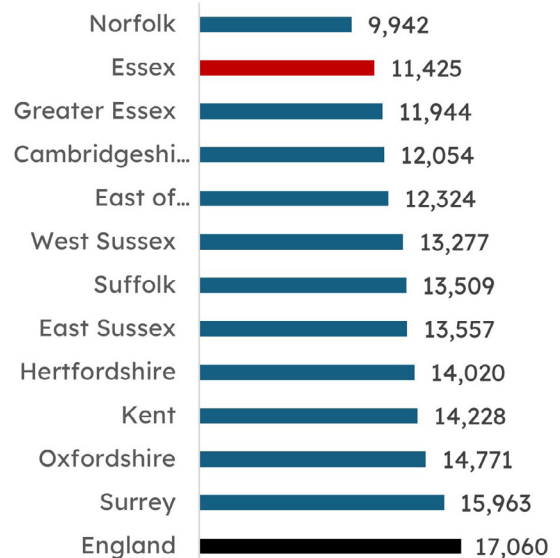
2. Civic Assets domain:

Despite all neighbouring counties showing higher needs on this domain compared to the national average, Essex shows higher need for civic assets, ranking just below Norfolk.

1. Overall CNI



2. Civic Assets



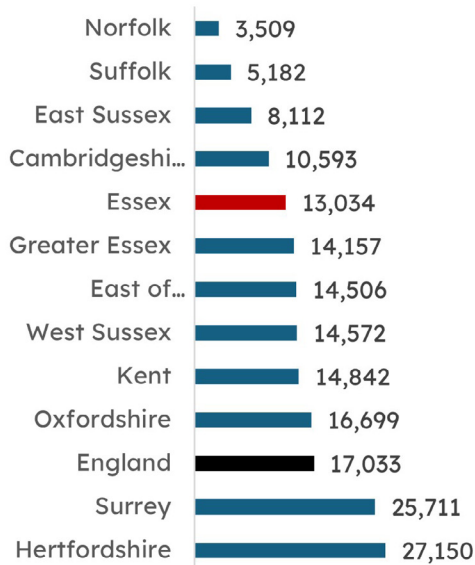
3. Connectedness domain:

Essex has a higher rank than Norfolk, Suffolk, East Sussex and Cambridgeshire on this domain, indicating slightly better connectedness than neighbouring counties, but still demonstrating greater need compared to the national and the regional averages.

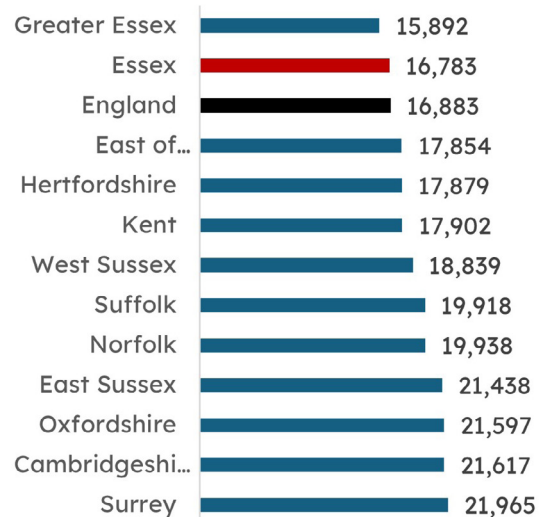
4. Active and Engaged Community domain:

Essex ranks similar to the national average on this domain. However, all comparator counties have higher ranks than Essex, indicating higher needs for fostering an active and engaged community in Essex.

3. Connectedness



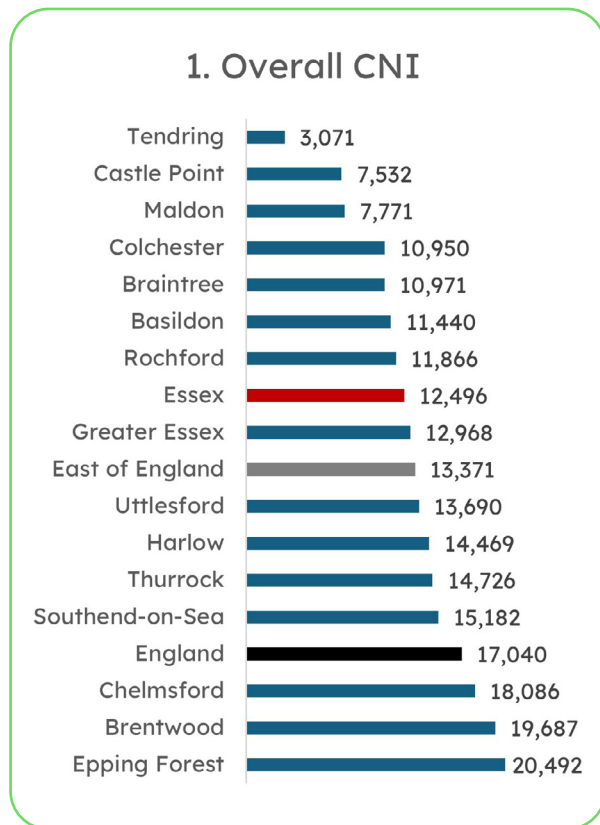
4. Active & Engaged Community



How Essex (including Greater Essex) districts compares in each domain?

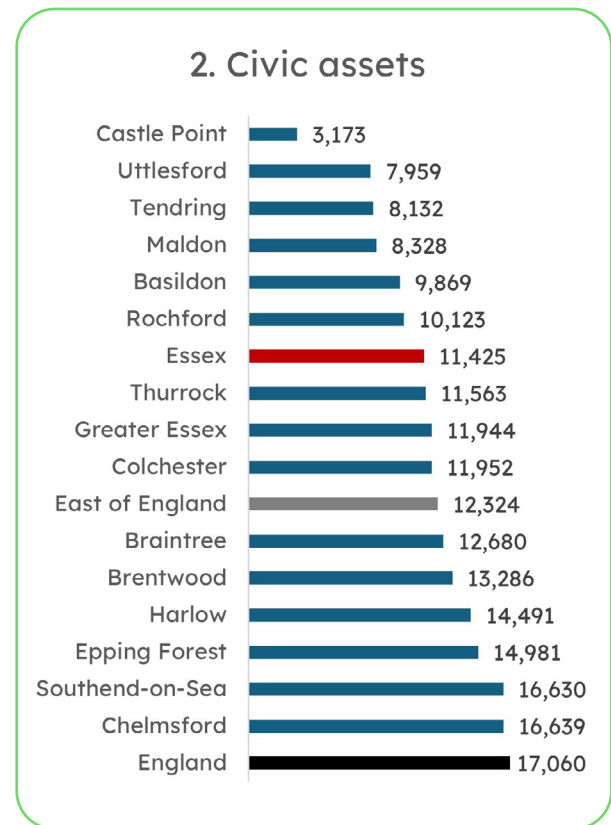
1. Overall CNI:

Tendring has the greatest need overall among all districts in Greater Essex.



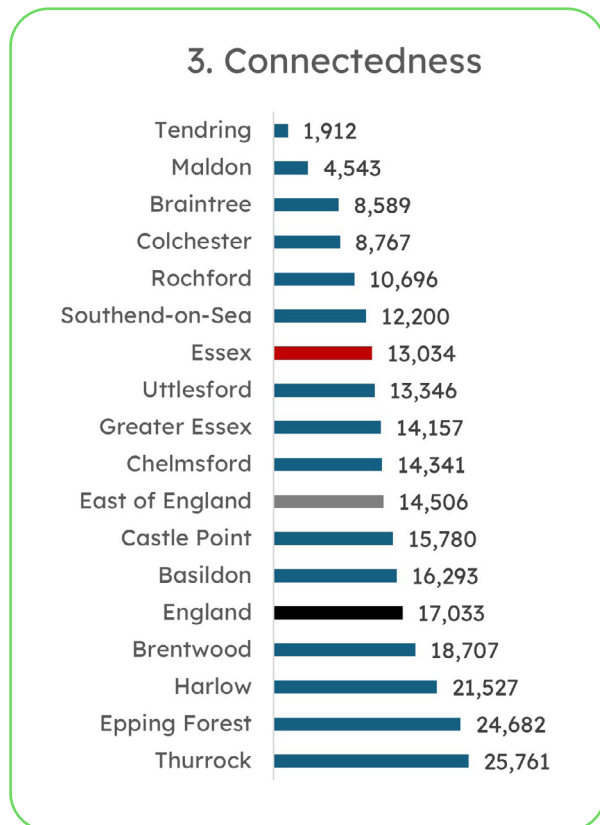
2. Civic Assets domain:

Castle Point has the greatest need for civic assets among all districts in Greater Essex.



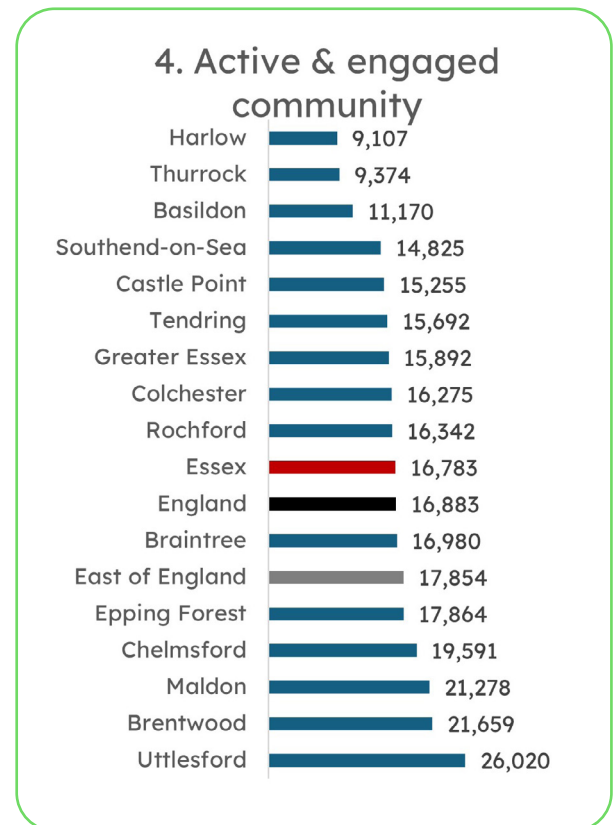
3. Connectedness domain:

Tendring has the greatest need for connectedness among all districts in Greater Essex.



4. Active and Engaged Community domain:

Harlow has the greatest need for active and engaging communities among all districts in Greater Essex.



Where is the most acute need?

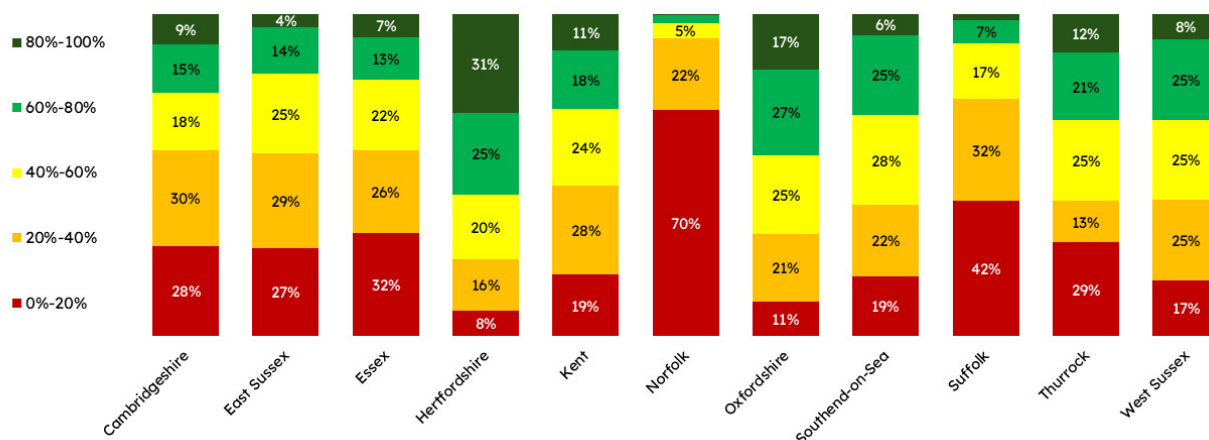


Acute community needs comparison with neighbouring counties

In Essex, 32% of the Lower-layer Super Output Areas (LSOAs) are among the 20% nationally with the most acute needs (0% - 20% quintile). Only Norfolk (70%) and Suffolk (42%) have a higher percentage of LSOAs with most acute needs in the

bottom 20% of LSOAs in England on the Community Needs Index. In contrast, Hertfordshire (31%) and Oxfordshire (17%) have the highest percentage of LSOAs with the least acute needs in the top 80% - 100% quintile.

CNI 2023: Percentage of LSOAs in each quintile¹ according to the need.
Red indicates LSOAs in the high need quintile 0% - 20%.



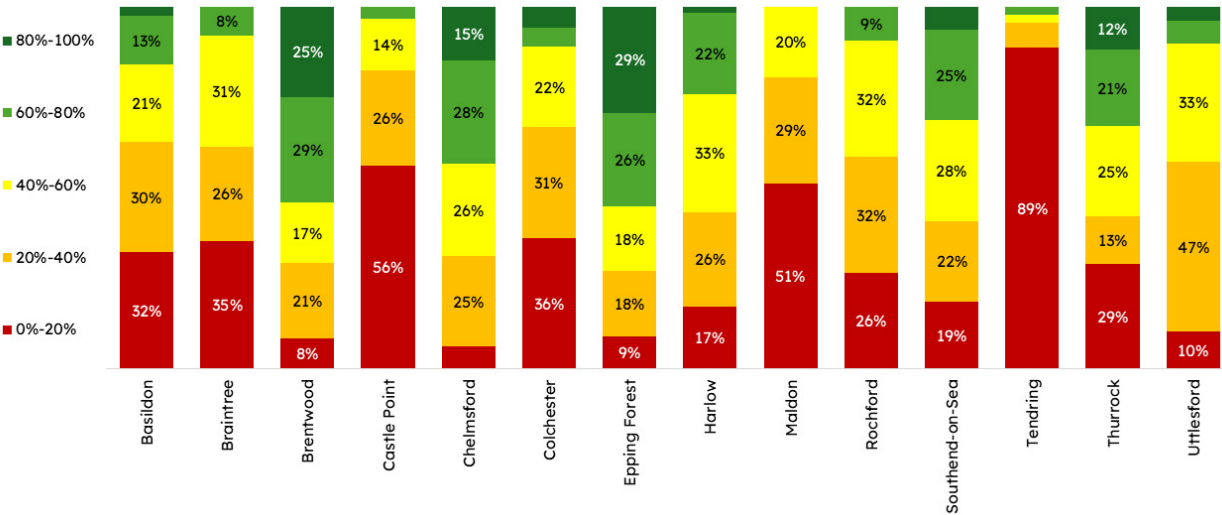
¹ Quintiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all LSOAs in England)

Acute community needs comparison within Greater Essex districts

Within Essex districts (including Greater Essex), Tendring (89%), Castle Point (56%), and Maldon (51%) have the highest proportions of LSOAs that are among the 20% nationally with the most acute needs

(0% - 20% quintile). In contrast, Epping Forest (29%) and Brentwood (25%) have the highest proportion of LSOAs with the least acute needs (80% - 100% quintile).

CNI 2023: Percentage of LSOAs in each quintile¹ according to the need. Red indicates high need.



1 Quintiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all LSOAs in England)

How many LSOAs in Greater Essex are within the most challenged 10% nationally?

Among Greater Essex districts, there are stark differences in the number of LSOAs that fall into the 10% with the most acute need nationally.

- In Essex, approximately 19% of the LSOAs fall into this category, meaning that around 20% (about 290,000 people) of the Essex population exhibit greater needs. For Greater Essex, this percentage reduces slightly to 18% (about 307,000 people).
- The most notable difference is seen in **Tendring** where 70% (around 105,000 people) of the population fall into the greatest needs category within the top 10% nationally. In contrast, there are no LSOAs in **Uttlesford** that fall into this category.
- Besides Tendring, other districts in Essex (including Greater Essex) with high proportions of residents with acute community needs include **Castle point** (38%), and **Maldon** (31%).



Number and percentage of LSOAs and population within the most acute 10% nationally

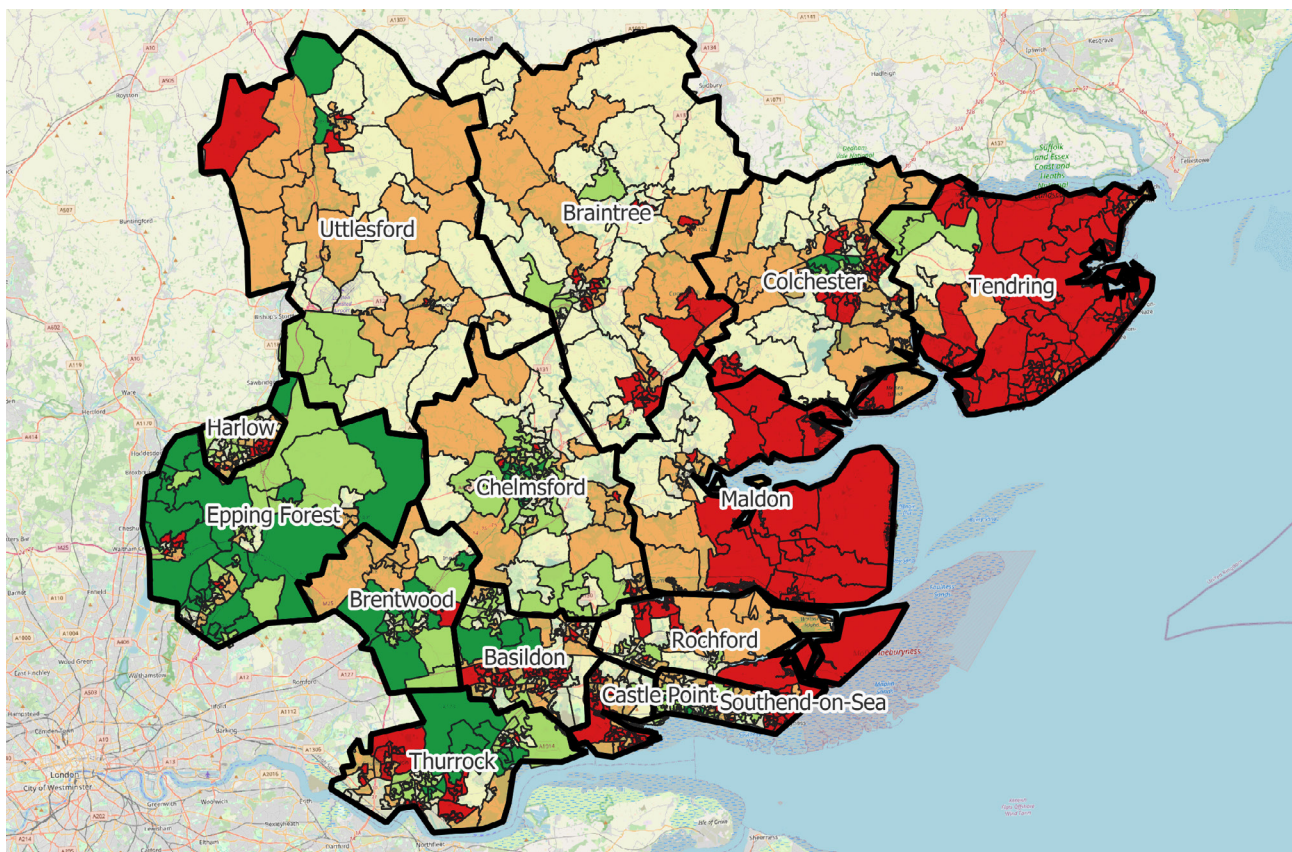
Area	Number of LSOAs with the most acute 10% needs	Number of people with the most 10% acute needs	% LSOAs	% of the Population
England	3375	5,476,554	10%	10%
East of England	648	1,078,472	17%	17%
Essex	178	290,577	19%	20%
Greater Essex	187	307,030	19%	18%
Basildon	19	32,746	17%	17%
Braintree	17	27,516	19%	17%
Brentwood	1	1,559	2%	2%
Castle Point	22	33,718	39%	38%
Chelmsford	1	1,110	1%	1%
Colchester	28	44,242	24%	23%
Epping Forest	4	6,415	5%	5%
Harlow	3	5,006	5%	5%
Maldon	13	21,108	32%	31%
Rochford	7	11,342	13%	13%
Tendring	63	105,815	71%	70%
Southend-on-Sea	13	21,497	12%	12%
Thurrock	9	16453	9%	9%
Uttlesford	0	0	0%	0%

How districts compare within Greater Essex?

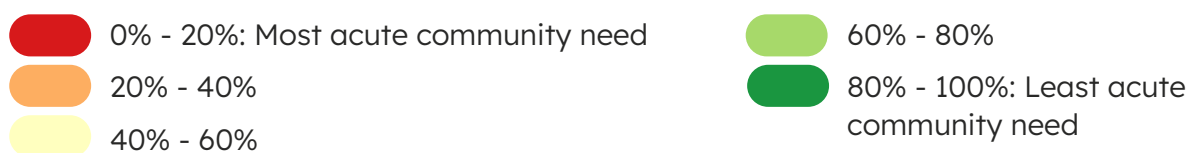
The Community Needs Index ranking at Lower-layer Super Output Area (LSOA) in Greater Essex level is showing that the greatest needs are clustered around coastal areas of Tendring, Maldon and Castle Point.

In contrast, the areas with the lowest community needs are Epping Forest, Brentwood and Chelmsford.

CNI 2023: LSOAs with varying levels of community need, Greater Essex



Acute needs (Percentage)



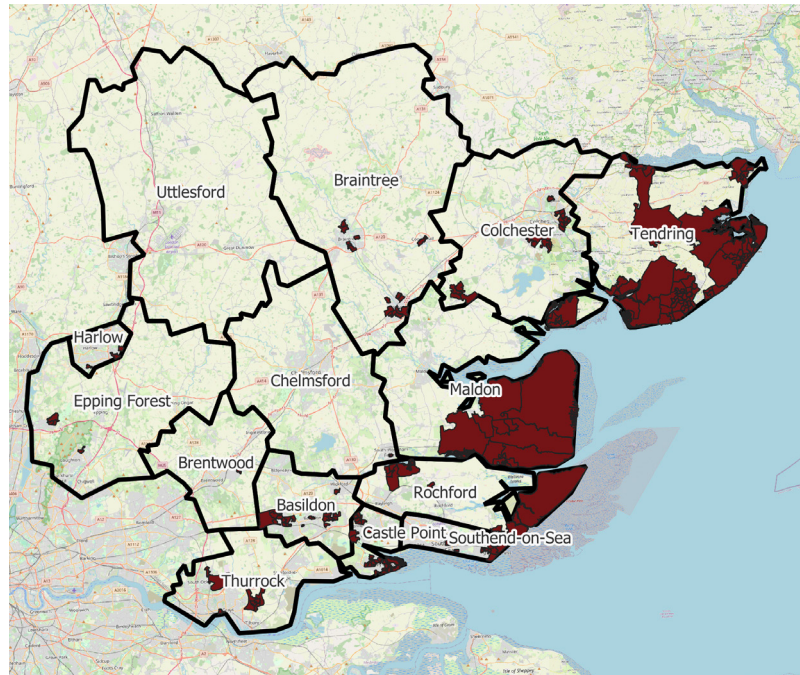
Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Where are the hotspots with the most acute community needs?

Community needs rankings at the LSOA level reveal that the greatest need (10% decile*) is concentrated in coastal areas, with additional pockets of acute need in inland districts.

- Among the MSOAs in Essex, Frinton West & Kirby in Tendring is ranked as having the highest levels of community need.
- Among the MSOAs in Greater Essex, Shoeburyness is ranked as having the highest levels of community need.

CNI 2023: LSOAs with the greatest need hotspots, Greater Essex



LSOA	MSOA	District	CNI ranking
Tendring 008H	Frinton West & Kirby	Tendring	28
Southend-on-Sea 013E	Shoeburyness	Southend-on-Sea	38
Castle Point 009C	Canvey Island Newlands	Castle Point	47
Tendring 012A	Holland-on-Sea	Tendring	60
Tendring 011E	Brightlingsea & Point Clear	Tendring	62
Southend-on-Sea 013D	Shoeburyness	Southend-on-Sea	65
Tendring 012B	Holland-on-Sea	Tendring	99
Tendring 006D	Walton & Frinton Coastal	Tendring	113
Thurrock 012F	Chadwell St Mary	Thurrock	120
Tendring 015B	Clacton Rush Green	Tendring	127
Colchester 008D	Greenstead	Colchester	129

***Deciles** are defined relative to national benchmarks (i.e. Bottom 10% is Bottom 10% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Community need across Greater Essex towns

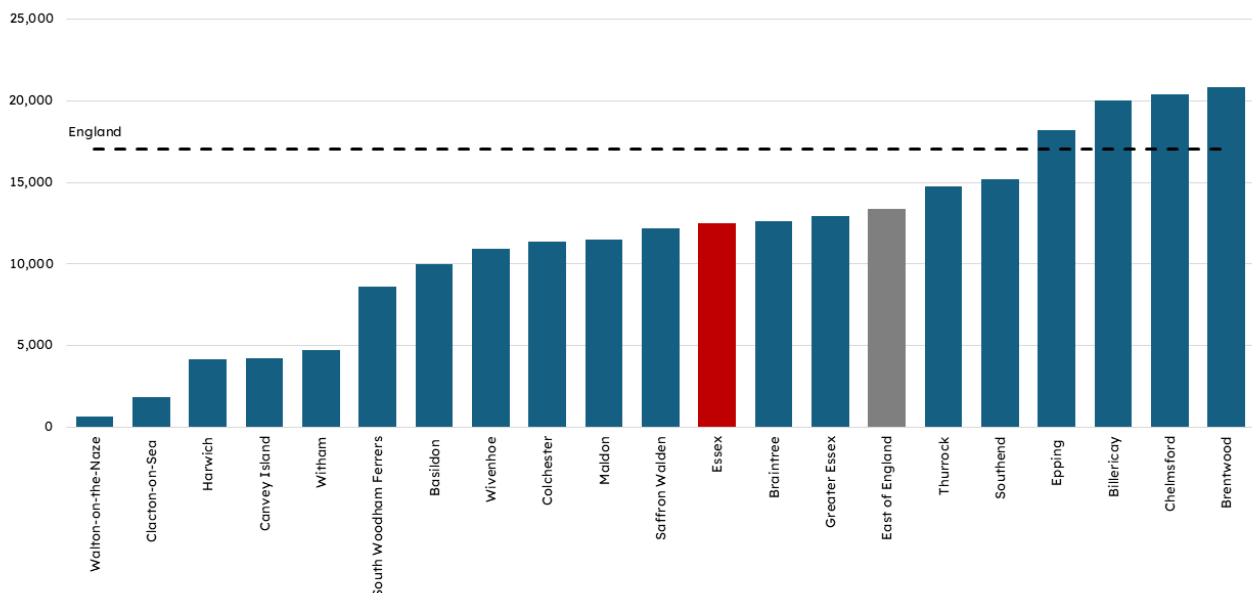
Most of the towns in Essex have more acute levels of community need compared to the national average. Only Brentwood, Chelmsford, Billericay, and Epping have less acute needs.

The greatest needs are clustered around coastal towns – Walton, Clacton, Harwich, Canvey Island¹.

¹ Rankings are based on LSOAs. A ranking of 1 indicates the LSOA with the greatest needs. There are 33,755 LSOAs in England.



CNI 2023: Ranking in Essex (including Greater Essex) towns. Lower rank (closer to 1) = greater need



Double disadvantaged communities

Among the districts in Greater Essex, there are communities experiencing what is known as the “Double Disadvantage.” This term refers to communities that rank very low (indicating acute needs) on the Communities Needs Index, as well as very low (indicating high deprivation) on the Index of Multiple Deprivation (IMD). IMD is made up of 7 domains of deprivation (Income, Employment, Education, Health, Crime, Barriers to Housing & Services, Living environment)¹.

The figure on the right indicates which LSOAs within Essex (including Greater Essex) exhibit highest levels of deprivation and acute community needs.

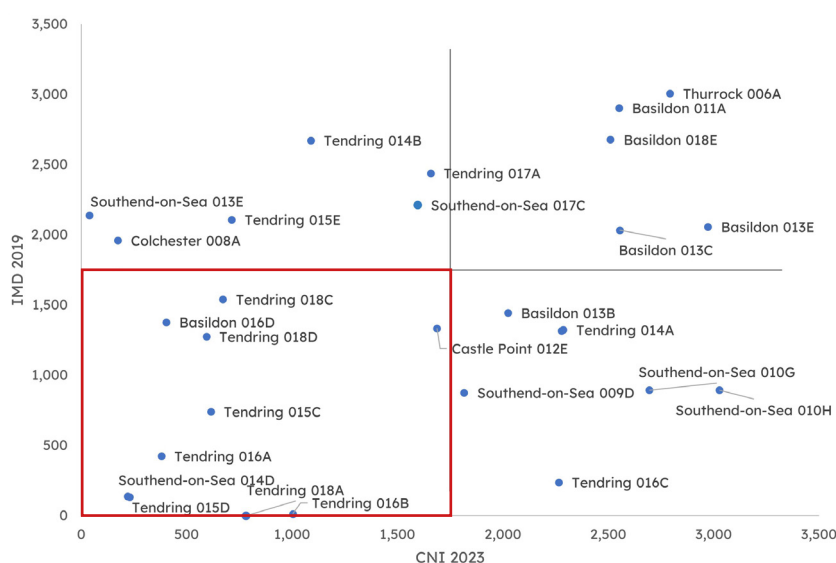
Double Disadvantaged communities face both high material deprivation and a shortage of social capital and social infrastructure².

LSOA	MSOA	District
Tendring 015D	Clacton Rush Green	Tendring
Southend-on-Sea 014D	Kursaal	Southend
Tendring 018A	Jaywick & St Osyth	Tendring
Tendring 016B	Clacton Central	Tendring
Tendring 016A	Clacton Central	Tendring
Tendring 015C	Clacton Rush Green	Tendring
Tendring 018D	Jaywick & St Osyth	Tendring
Basildon 016D	Laindon Central	Basildon
Tendring 018C	Jaywick & St Osyth	Tendring

¹ [The English Indices of Deprivation 2019](#)

² [Breaking-the-cycle-report.pdf](#)

CNI 2023: “Double Disadvantaged” communities, CNI 2023 and IMD 2019 rankings, Greater Essex



Civic Assets

Capturing the presence of key community, civic, educational and cultural assets in and near the area.



Civic Assets Domain

The Civic Assets Domain captures the presence of key community, civic, educational, and cultural assets in and near the area. Below is the description of each asset composition.

Density of community space assets:

Village Hall/Other Community Facility, Youth Recreational/Social Club, Church Hall/Religious Meeting Place/Hall, Community Service Centre/Office, Place Of Worship.

Density of educational assets: College, Further Education, Higher Education, Children's Nursery/Crèche, First School, Infant School, Junior School, Middle School, Primary School, Secondary School, University, Special Needs Establishment, Other Educational Establishment.

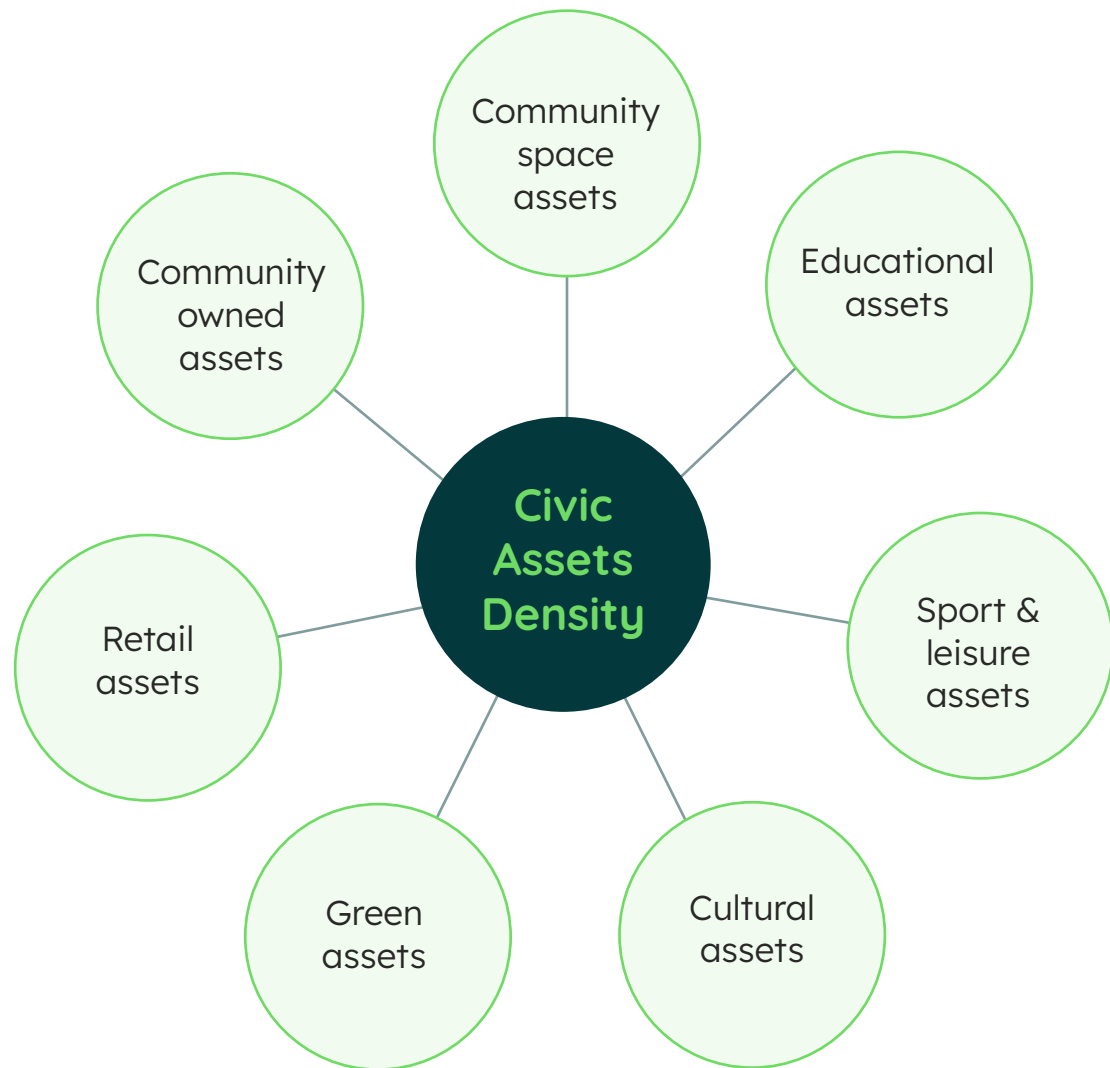
Density of sport and leisure assets:

Public House/Bar/Nightclub, Activity/Leisure/Sports Centre, Skateboarding Facility, Recreational/Social Club (Bingo), Leisure Pier, Swimming facility, Public tennis court, Bandstand, Restaurant/Cafeteria.

Density of cultural assets: Library, Reading Room, Museum/Gallery, Historical Site/Object, Historic Structure/Object, Monument Obelisk/Milestone/Standing, Stone Statue, Castle/Historic Ruin, Permanent Art Display/Sculpture.

Density of green assets: Public Park/Garden, Public Open Space/Nature Reserve, Playground, Play Area, Paddling Pool, Picnic/Barbeque Site, Allotment, Playing Field, Recreation Ground, Woodland, Lake/Reservoir, Forest/Pinetum.

Retail assets: Post Office, Market, Shop/Showroom and Garden Centre.

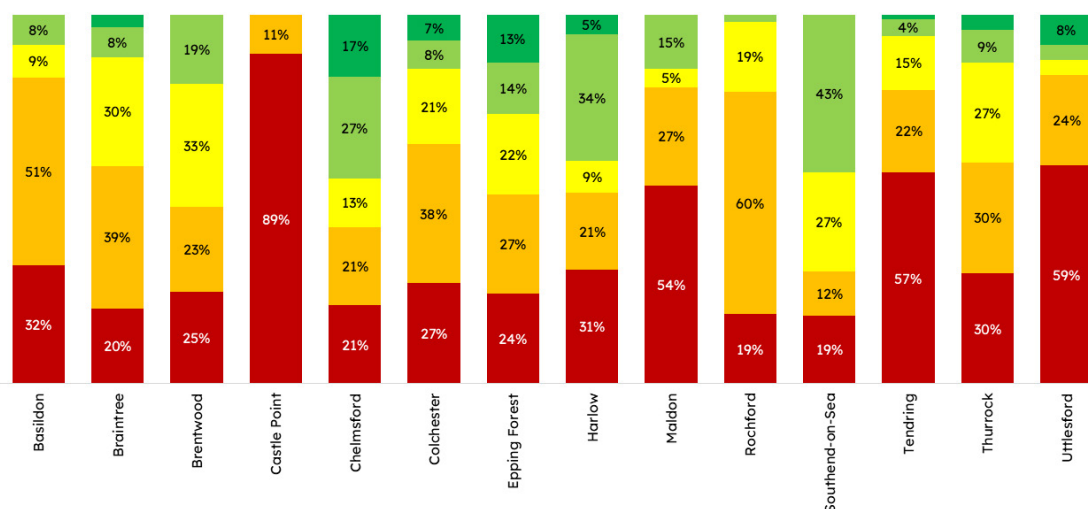
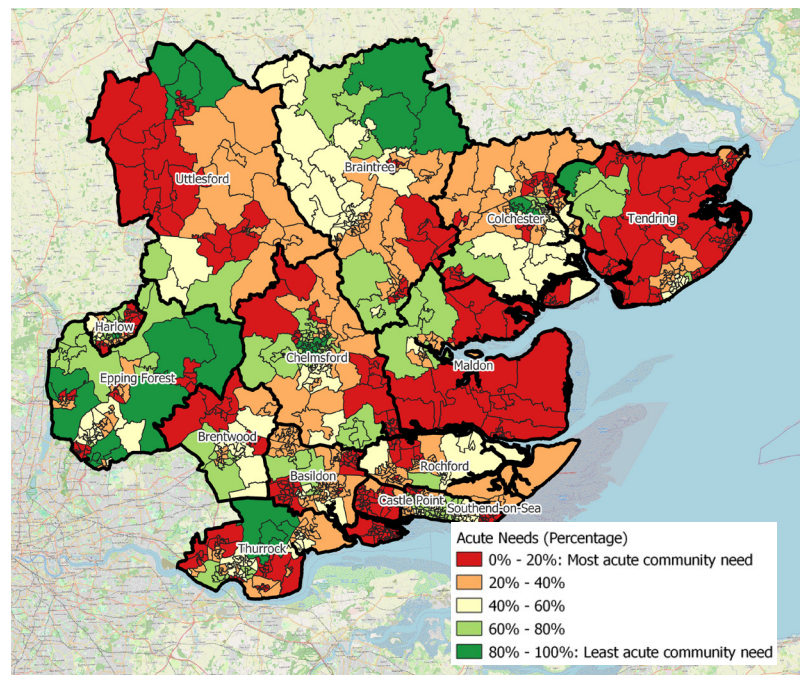


How districts compare within Greater Essex for Civic Assets?

The Lower-layer Super Output Area (LSOA) rankings in Greater Essex reveal varying levels of need for civic assets across districts.

- Castle Point (89%), Uttlesford (59%), Tendring (57%), and Maldon (54%) have the highest proportions of LSOAs with acute needs for civic assets placing them within the bottom 20% nationally*.
- Overall, 33% of LSOAs in Greater Essex fall into the 0-20% bottom quintile nationally in Civic Assets domain. For more details, refer to **Appendix 1A**.

CNI 2023: LSOAs with varying levels of community need for Civic Assets, Greater Essex

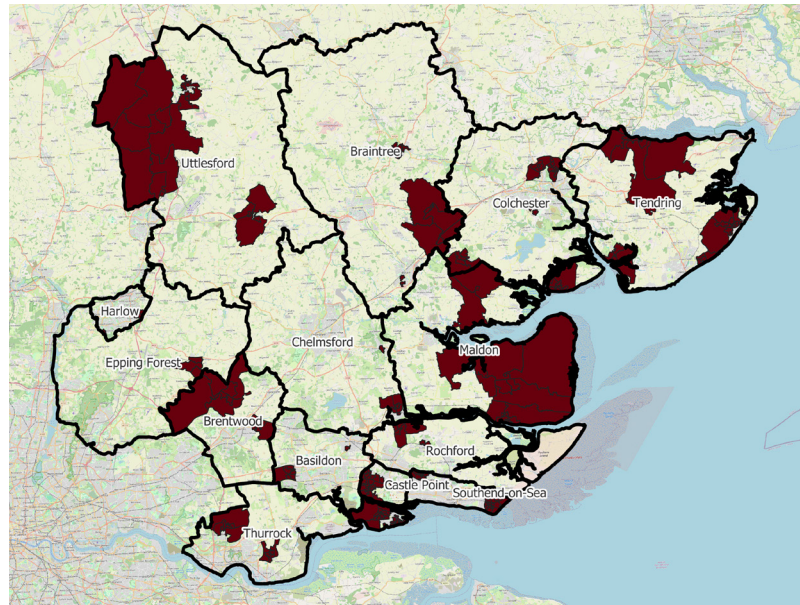


***Quantiles** are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Where are the hotspots with the most acute community need for Civic Assets?

- Castle Point and Maldon have the highest proportion of LSOAs that rank among the top 10% LSOAs nationally with the most acute needs for civic assets.
- There are 33,755 LSOAs in England. Ranking of 1 indicates the area with the greatest need.

CNI 2023: LSOAs with the greatest need for Civic Assets hotspots, Greater Essex



LSOA	MSOA	District	Civic Assets Needs Ranking
Castle Point 001B	Benfleet North	Castle Point	94
Castle Point 001C	Benfleet North	Castle Point	97
Castle Point 001E	Benfleet North	Castle Point	100
Maldon 006C	Southminster, Bradwell & Dengie Peninsula	Maldon	105
Castle Point 001D	Benfleet North	Castle Point	108
Castle Point 001A	Benfleet North	Castle Point	110
Maldon 006A	Southminster, Bradwell & Dengie Peninsula	Maldon	145
Maldon 006B	Southminster, Bradwell & Dengie Peninsula	Maldon	154
Maldon 006D	Southminster, Bradwell & Dengie Peninsula	Maldon	167
Maldon 008F	Burnham-on-Crouch	Maldon	196
Maldon 008D	Burnham-on-Crouch	Maldon	202

Deciles are defined relative to national benchmarks (i.e. Bottom 10% is Bottom 10% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Connectedness

Capturing connectivity to key services, digital infrastructure, isolation and strength of the local jobs market.



Connectedness, shared spaces, and accessibility

The Connectedness domain evaluates the accessibility of essential services, digital infrastructure, levels of isolation, and the robustness of the local job market.

It encompasses elements such as proximity to primary schools, employment hubs, higher education institutions, GP services, hospitals, secondary schools, town centres, and green spaces.

Accessibility to Essential Services:

Proximity to primary schools, GP services, hospitals, and secondary schools ensures that residents can easily access education and healthcare, which are fundamental for a healthy and educated community.

Digital Infrastructure: Good digital infrastructure is vital in today's world for communication, remote work, and access to information and services. It helps bridge the digital divide and supports economic growth.

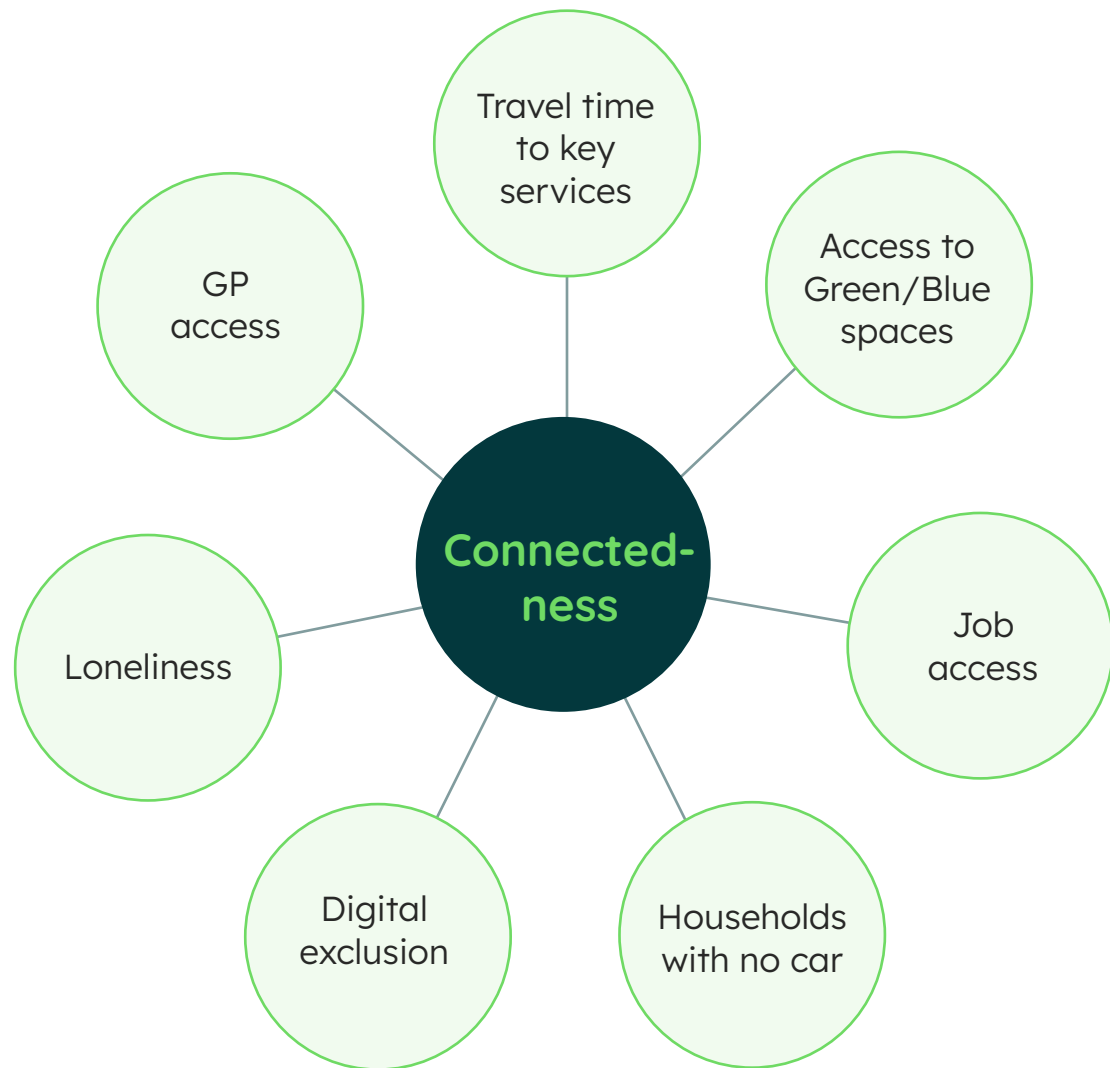
Levels of Isolation: Reducing isolation by ensuring connectivity and access to community hubs can improve mental health and social well-being. It fosters a sense of community and belonging.

Robustness of the Local Job Market:

Proximity to employment hubs and higher education institutions supports economic stability and growth. It provides residents with job opportunities and pathways for career advancement.

Proximity to Town Centres and Green Spaces:

Access to town centres offers convenience for shopping, socializing, and accessing various services. Green spaces are essential for recreation, relaxation, and overall well-being, contributing to a higher quality of life.

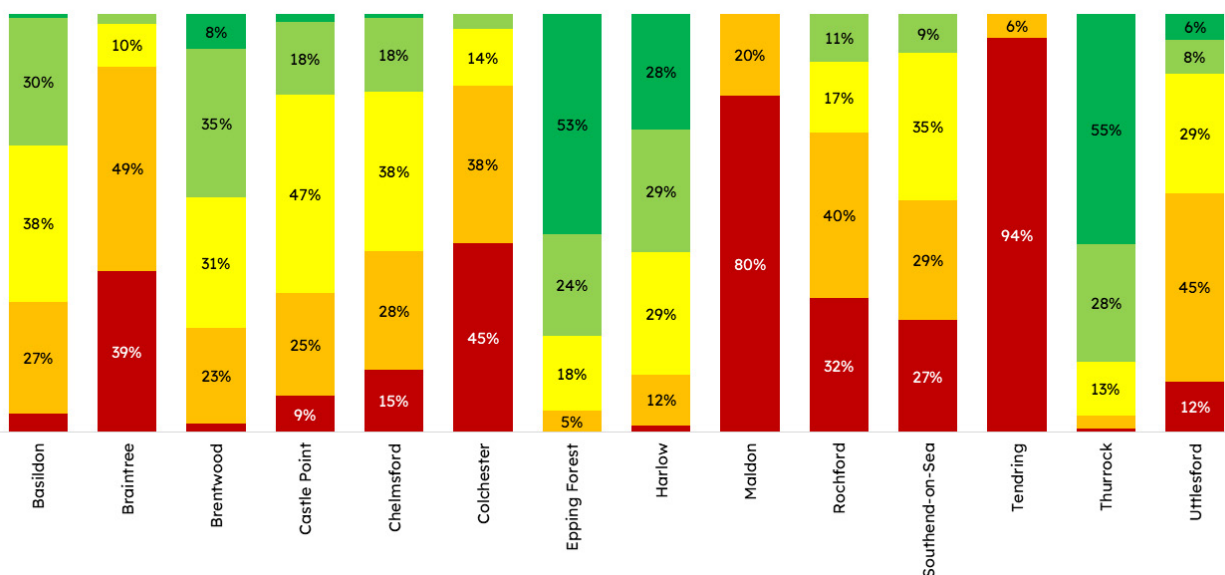
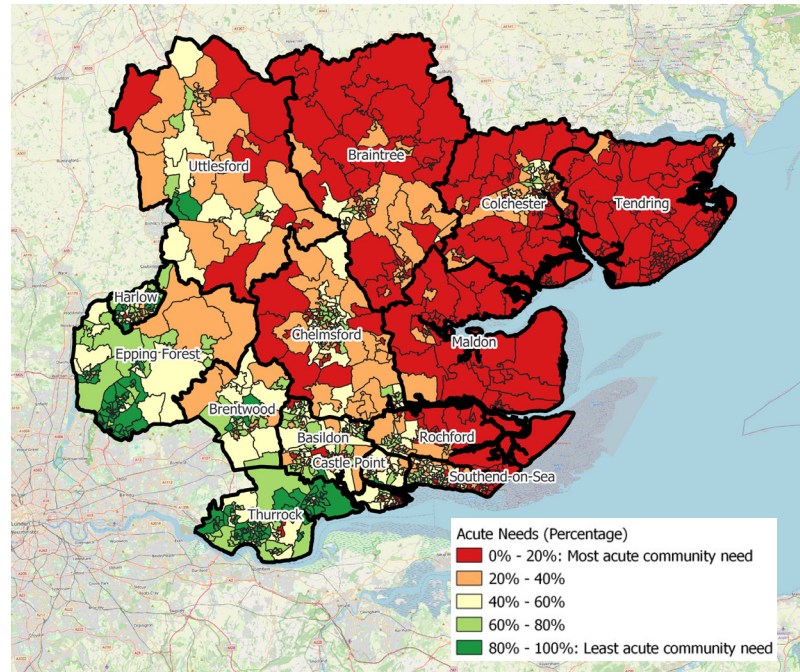


How districts compare within Greater Essex in Connectedness domain?

Connectedness Domain Ranking: The Lower-layer Super Output Area (LSOA) rankings in Greater Essex reveal varying levels of need on connectedness across districts.

- Tendring (94%), Maldon (80%), and Colchester (45%) have the highest proportions of LSOAs with acute needs on connectedness placing them within the 20% LSOAs nationally*.
- Overall, 26% of LSOAs in Greater Essex fall into the 0-20% bottom quintile nationally in Civic Assets domain. For more details, refer to **Appendix 1B**.

CNI 2023: LSOAs with varying levels of Connectedness, Greater Essex

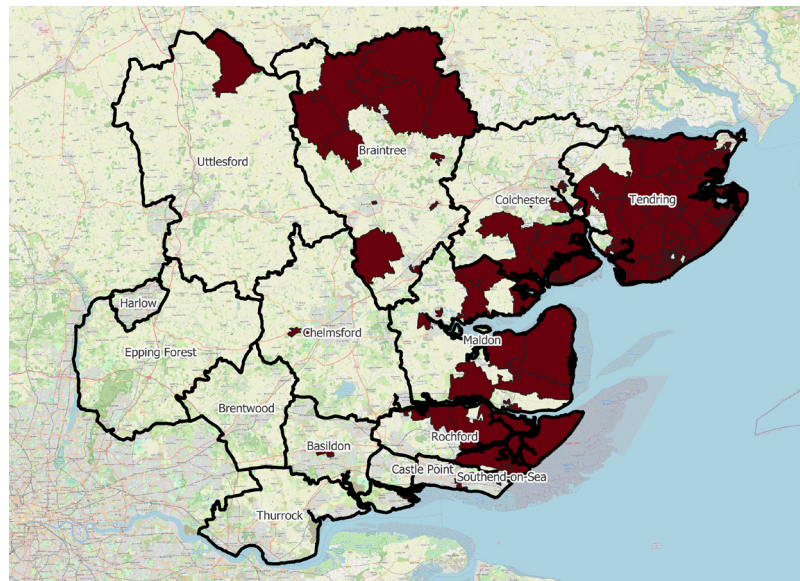


***Quantiles** are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Where are the hotspots in Greater Essex with the most acute community needs on the Connectedness domain?

- Tendring has the highest proportion of LSOAs that rank among the top 10% LSOAs nationally with the most acute connectedness need*.
- There are 33,755 LSOAs in England. Ranking of 1 indicates the area with the greatest need.

CNI 2023: LSOAs with the greatest Connectedness need hotspots, Greater Essex



LSOA	MSOA	District	Connectedness Needs Ranking
Tendring 018A	Jaywick & St Osyth	Tendring	1
Tendring 018D	Jaywick & St Osyth	Tendring	4
Tendring 006D	Walton & Frinton Coastal	Tendring	5
Tendring 018B	Jaywick & St Osyth	Tendring	6
Tendring 015C	Clacton Rush Green	Tendring	9
Tendring 015D	Clacton Rush Green	Tendring	12
Tendring 018C	Jaywick & St Osyth	Tendring	15
Tendring 016B	Clacton Central	Tendring	22
Tendring 008H	Frinton West & Kirby	Tendring	23
Tendring 008D	Frinton West & Kirby	Tendring	27
Tendring 006B	Walton & Frinton Coastal	Tendring	33

***Deciles** are defined relative to national benchmarks (i.e. Bottom 10% is Bottom 10% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Active and Engaged Community

Concerning the levels of third sector activity and volunteering and civic participation, social fabric and barriers to participation and engagement.



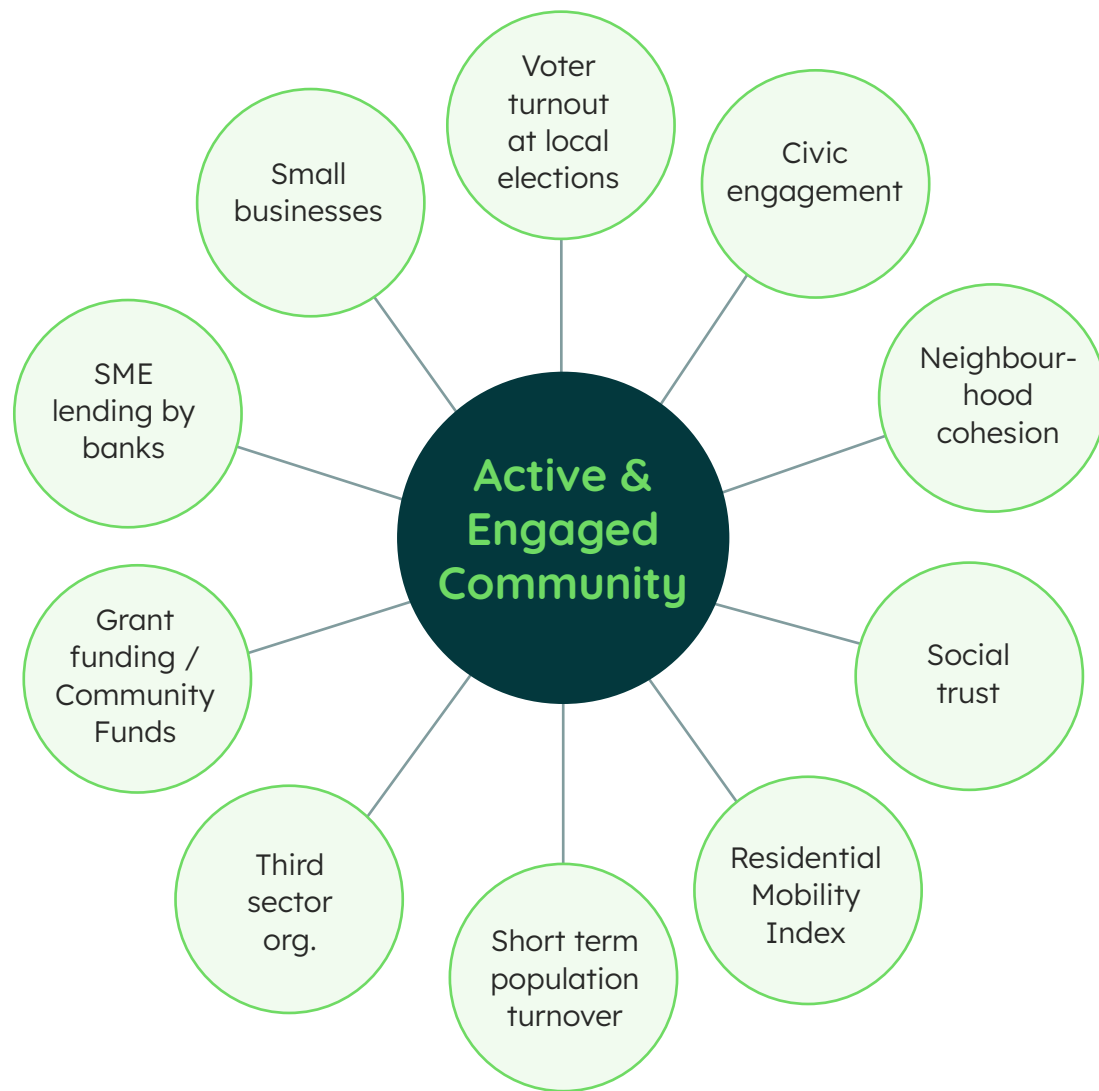
Active and Engaged Community

Active and engaged communities are crucial part of society and this domain reflects the vitality and inclusiveness of a community. High levels of civic involvement and volunteering foster a sense of belonging and mutual support among community members.

Resilience: Communities with strong third-sector activities and civic participation are better equipped to handle challenges and crises

Well-being: Engagement in community activities can improve mental health and overall well-being by reducing isolation and promoting social connections.

Inclusive growth: Addressing barriers to participation ensures that all community members have the opportunity to contribute and benefit, leading to more equitable development.

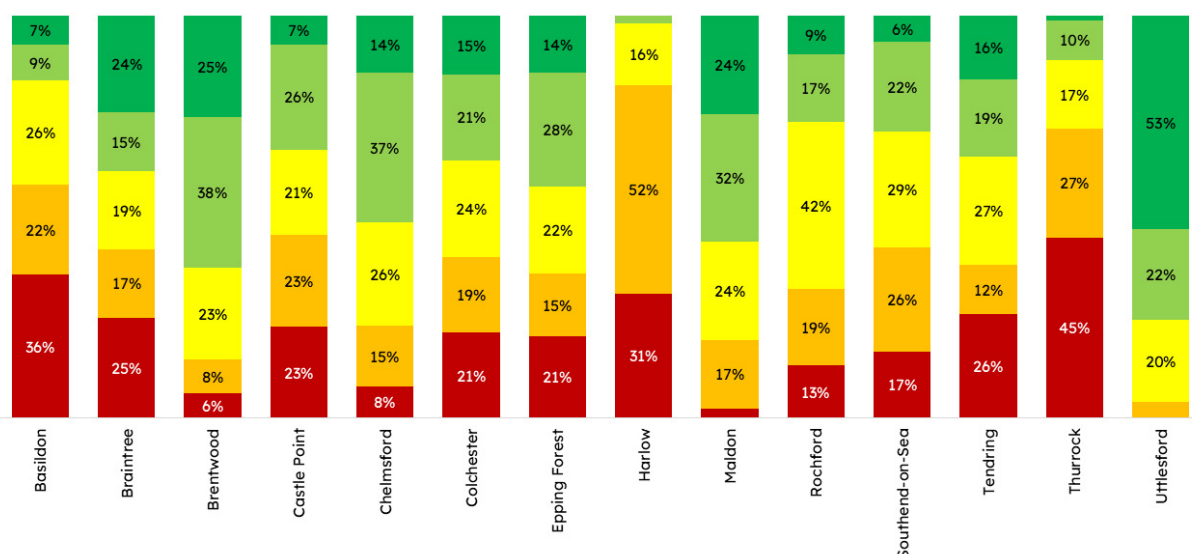
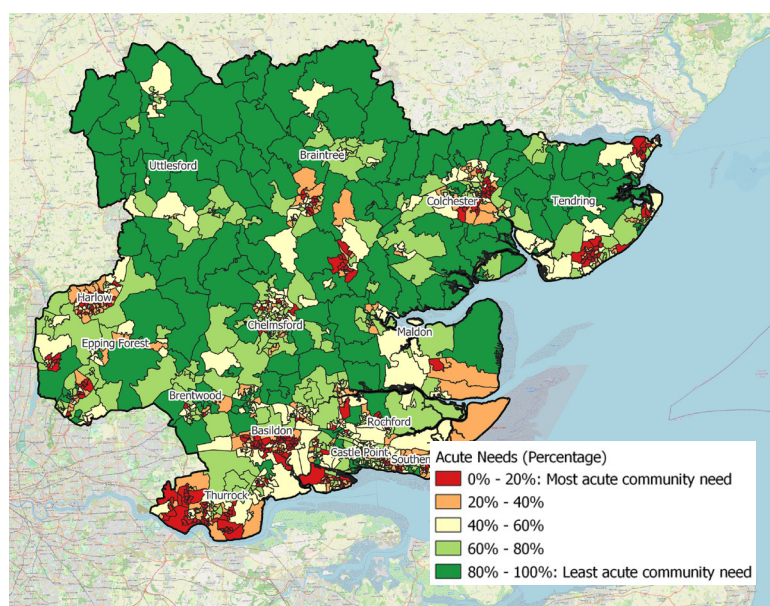


How districts compare within Greater Essex in Active and Engaged Communities domain?

The Lower-layer Super Output Area (LSOA) rankings in Greater Essex reveal varying levels of need for active and engaging community needs across districts.

- Thurrock (45%), Basildon (36%), and Harlow (31%) have the highest proportions of LSOAs with acute levels of need for active and engaging communities placing them within the 20% nationally*.
- Overall, 22% of LSOAs in Greater Essex fall into the 0-20% bottom quintile nationally in Civic Assets domain. For more details, refer to **Appendix 1C**.

CNI 2023: LSOAs with varying levels of active and engaged community need, Greater Essex

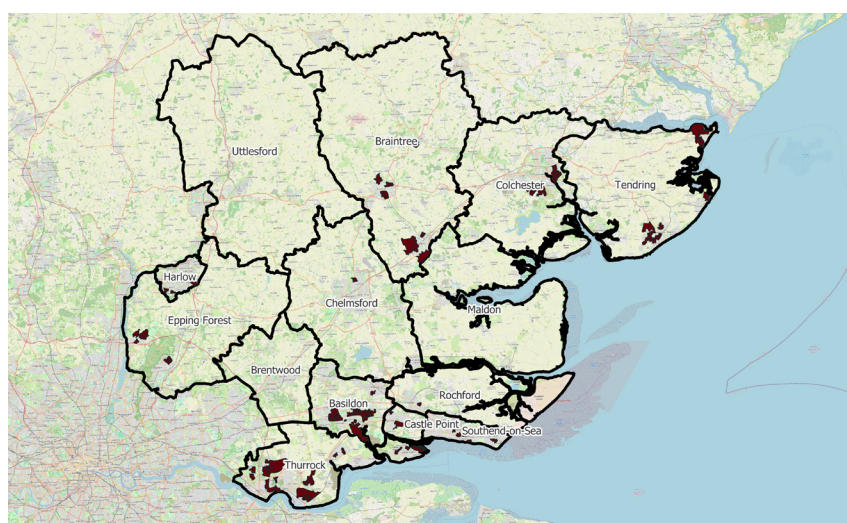


***Quantiles** are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Where are the hotspots with the most acute community needs for Active and Engaged community?

- Among the districts in Essex, Basildon, Colchester, and Epping Forest have the most acute need for active and engaged communities. The table below shows LSOAs in these districts that are within the top 10% nationally for community need*.
- There are 33,755 LSOAs in England. Ranking of 1 indicates the area with the greatest need.

CNI 2023: LSOAs with the greatest Active and Engaged Community need hotspots, Greater Essex



LSOA	MSOA	District	Active and Engaged Community Need Ranking
Basildon 016D	Laindon Central	Basildon	23
Colchester 008E	Greenstead	Colchester	52
Colchester 008C	Greenstead	Colchester	56
Colchester 008D	Greenstead	Colchester	77
Epping Forest 007D	Waltham Abbey North	Epping Forest	153
Basildon 015A	Basildon Central & Pipp's Hill	Basildon	210
Epping Forest 011F	Loughton East	Epping Forest	246
Basildon 016B	Laindon Central	Basildon	262
Basildon 016E	Laindon Central	Basildon	271
Braintree 011F	Braintree South	Braintree	306
Colchester 008B	Greenstead	Colchester	354

***Deciles** are defined relative to national benchmarks (i.e. Bottom 10% is Bottom 10% of all LSOAs in England). Maps should be interpreted with caution due to varying sizes of LSOAs.

Section 2:

Further Analysis

Focus areas of the
Caring Communities
Commission



Healthy
Communities

What is a “healthy community”?

A healthy community can be defined as one that systematically addresses the social determinants of health, ensuring that all residents have access to resources such as safe housing, nutritious food, quality education, and accessible healthcare.

A healthy community is one in which local groups from all parts of the community work together to prevent disease and make healthy living options accessible¹²³.

In this section we will explore metrics that associate with healthy communities, including:

- Healthy Communities
- Access to health services (GPs, Hospitals, Dentists)
- Access to recreational areas (Blue/ Green spaces, sports and leisure assets)
- Access to Fast-Food, Gambling outlets, Supermarkets

1 [Health matters: community-centred approaches for health and wellbeing - GOV.UK](#)

2 [Communities And Health | The King's Fund](#)

3 [A Healthy Community is a Prepared Community | Blogs | CDC](#)



Healthy communities

- Disability Living Allowance (DLA):** Essex has a slightly higher rate of residents receiving DLA (2.2%) compared to the national average (2.1%). Within Essex districts the highest rate is found in Tendring (3.5%). It is important to note that since 2013 DLA is replaced by Personal Independence Payment (PIP), therefore, DLA no longer represents the total count of disability benefit claimants for those aged 16-64.
- Personal Independence Payment (PIP):** Essex has a lower rate of residents receiving PIP (7.8%) compared to the national average (8.9%). However, within Essex districts, the highest rate is found in Tendring (14.4%).
- Older People Social Care Benefit:** Essex has a slightly higher rate of older people social care benefit recipients (13.2%) compared to national average (12.7%). Within Essex districts, the highest rates are found in Tendring (16.6%) and Castle Point (15.8%). It is also important to consider the population distribution, which may affect these figures (refer to [Appendix 2](#) for Greater Essex population distribution).
- Disabled under the Equality Act (Day-to-day Activities Limited a Lot):** Essex has a slightly lower rate (6.8%) of residents whose disabilities significantly limit their day-to-day activities compared to the national average (7.3%). However, within Essex districts, Tendring has a considerably higher proportion of residents with significant limitations in their day-to-day activities (11.1%).
- Disabled Under the Equality Act (Day-to-day Activities Limited a Little):** Essex has a similar rate of residents whose disability is limiting their day-to-day activities a little (9.9%) compared to the national average (10%). However, within Essex districts, the highest rate is found in Tendring (13%).
- Bad Health:** Overall, Essex has a slightly lower rate of residents reporting bad health (3.6%) compared to the national average (4%). However, within Essex districts, the highest rate is found in Tendring (6%).
- Very bad Health:** Essex also has similar rates of residents reporting very bad health (1.1%) compared to the national average (1.2%). However, within Essex districts, Tendring has a slightly higher rate (1.8%).
- Male Life Expectancy:** In Essex, males have a slightly longer life expectancy of 80.2 years compared to the national average of 79.5 years. However, within Essex, the districts of Tendring and Harlow have the shortest life expectancies, at 78 years and 78.4 years respectively.
- Female Life Expectancy:** Essex females have a marginally longer life expectancy of 83.5 years compared to the national average 83.2 years. However, within Essex districts, the shortest life expectancy among females can be found in Tendring (81.9 years).
- Small Area Mental Health Index (SAMHI):** Overall, Essex has a slightly lower SAMHI score (0.44) compared to the national average (0.68) (lower is better). However, within Essex districts, the highest rate is found in Tendring (1.36).
- Deaths (All Causes):** Essex has a slightly lower deaths rate (all cause) (97.96) compared to the national average (100). However, with Essex districts (including Greater Essex), higher rates are found in Thurrock, Tendring, Southend, and Harlow.

Healthy community measures, Greater Essex

Area Name	Disability Benefit (DLA) (2024)	Personal Independence Payment (PIP) (2024)	Older people social care benefit (Attendance Allowance) (2024)	Disabled under the Equality Act: Day-to-day activities limited a lot (2021)	Disabled under the Equality Act: Day-to-day activities limited a little (2021)
	Rate	Rate	Rate	Rate	Rate
England	2.1%	8.9%	12.7%	7.3%	10.0%
East of England	1.9%	7.7%	12.3%	6.6%	10.0%
Essex	2.2%	7.8%	13.2%	6.8%	9.9%
Greater Essex	2.2%	7.9%	13.4%	6.8%	9.8%
Basildon	2.6%	8.8%	13.6%	7.2%	9.6%
Braintree	2.3%	7.5%	11.0%	6.7%	10.3%
Brentwood	1.5%	5.5%	12.0%	5.7%	8.4%
Castle Point	2.3%	8.5%	15.8%	7.5%	10.2%
Chelmsford	1.8%	6.1%	10.4%	5.4%	9.0%
Colchester	2.4%	7.6%	14.2%	6.5%	10.4%
Epping Forest	1.5%	6.5%	12.9%	5.9%	8.2%
Harlow	2.2%	8.8%	14.2%	6.7%	9.6%
Maldon	2.1%	7.4%	10.7%	6.8%	10.5%
Rochford	1.9%	6.4%	13.9%	6.2%	9.8%
Tendring	3.5%	14.4%	16.6%	11.1%	13.0%
Uttlesford	1.3%	4.7%	11.2%	4.7%	8.7%
Southend-on-Sea	2.3%	9.3%	14.8%	7.8%	10.5%
Thurrock	2.2%	7.5%	14.5%	6.1%	8.4%

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Healthy community measures, Greater Essex

Area Name	Bad health (2021)	Very bad health (2021)	Male life expectancy at birth (2016-2021)	Female life expectancy at birth (2016-2021)	Small Area Mental Health Index (2019)	Deaths (all causes) (2016-2020)
	Rate	Rate	Average	Average	Score	Rate
England	4.0%	1.2%	79.5	83.2	0.7	100
East of England	3.6%	1.0%	80.2	83.7	0.5	95.7
Essex	3.6%	1.1%	80.2	83.5	0.4	98
Greater Essex	3.7%	1.1%	79.9	83.3	0.5	100
Basildon	3.9%	1.2%	79.2	82.8	0.8	102.3
Braintree	3.5%	0.9%	80.1	83.2	0.5	101
Brentwood	2.9%	0.9%	81	84.6	-0.3	91.2
Castle Point	4.3%	1.2%	79.7	83.1	0.5	103.1
Chelmsford	2.8%	0.8%	81.3	84.3	0	89.8
Colchester	3.3%	0.9%	80.2	83.4	0.8	98.7
Epping Forest	3.1%	1.0%	80.7	83.9	-0.1	96.8
Harlow	3.9%	1.2%	78.4	82.6	0.6	107.1
Maldon	3.8%	1.0%	80.7	83.7	0	93.4
Rochford	3.3%	0.9%	81.2	84.3	0	90.4
Tendring	6.0%	1.8%	78	81.9	1.4	108.1
Uttlesford	2.5%	0.7%	82.5	85.3	0	82.7
Southend-on-Sea	4.3%	1.3%	78.7	82.5	0.9	107.6
Thurrock	3.4%	1.0%	78.6	82.4	0.1	111

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Access to Health Services

Access and quality are two crucial aspects of health service delivery. Access ensures that individuals can easily obtain the healthcare services they need, irrespective of their location, financial situation, or social/cultural background. Quality, on the other hand, pertains to the standards of healthcare services, including their effectiveness, safety, and user experience. Low quality health services offer minimal benefit, while high quality services are of little use if they are inaccessible¹.

Timely access to care is considered one of the most important promises of the National Health Service (NHS). However, according to the latest Lord Darzi report, this promise is currently failing².

Access to General Practice: For most people, their GP practice is the primary point of contact with the NHS. However,

increasing demand is adding significant pressure on GP practices (See **Appendix 3** for Greater Essex GP surgeries with lower CQC ratings). This is also reflecting in decreasing patients' satisfaction with their GP services (see graph below)³. Similarly, the latest annual CQC report on the state of health care and adult social care (2023/24), indicates that timely access to good care continues to be a struggle for many, and inequalities in care persist⁴. In a CQCs survey conducted in 2024 with 1,600 participants, the two services that people had the most difficulty accessing were GP services (59%) and dental services (23%)⁵. The primary causes of these difficulties were appointments availability (58%) and challenges in booking appointments, such as being put on hold (39%).

1 [Assessing access and quality - Assessing health system performance - NCBI Bookshelf](#)

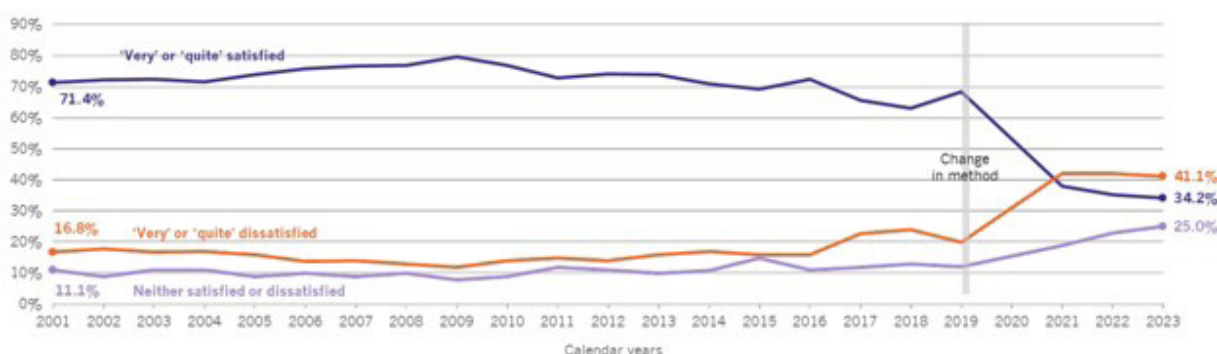
2 [Independent investigation of the NHS in England - GOV.UK](#)

3 [Independent investigation of the NHS in England - GOV.UK](#)

4 [Foreword - Care Quality Commission](#)

5 [Foreword - Care Quality Commission](#)

Patient-reported GP access and GP satisfaction: England, 2001 to 2023¹



1 [Assessing access and quality - Assessing health system performance - NCBI Bookshelf](#)

Access to Dental Services

Following the lockdown, many individuals switched to private dental care, primarily because NHS dental practices were not accepting new adult patients. A survey conducted by the General Dental Council revealed that the lack of access to NHS dentists is a significant concern for participants. Additionally, the cost of private dental care, especially for major procedures, is considered unaffordable by many¹². However, for those who are still eligible and able to access NHS dentist, traveling times can be a barrier, especially for those living in rural areas, the elderly and those who suffer with mobility difficulties³⁴.

1 [Almost all new patients unable to access NHS dental care - Dentistry](#)

2 [Views and experiences of dentistry](#)

3 [New research finds two million Brits travel more than 40 miles to access dental care | Oral Health Foundation](#)

4 [Barriers and facilitators to accessing oral healthcare for older people in the UK: a scoping review | British Dental Journal](#)



What is the accessibility to some of the key health services in Greater Essex like?

- GP Appointments:** This measure reflects the GP-to-patient ratio, where a higher ratio suggests potential difficulties in accessing GP services due to each GP managing more patients. The rate per 1,000 population in Essex (502.6) is slightly lower compared to England (513.1). However, within Essex, the rate is considerably higher in Tendring (681.2), Maldon (575.7) and Brentwood (538.9).
- GP Appointments After 21 or More Days:** A higher proportion of Essex residents (12.8%) have to wait 21 days or more to see a GP compared to the national average in England (10.6%). Within Essex, the districts with the highest proportions of residents facing such long waits are Brentwood (18.1%), Braintree (15.7%), and Tendring (15.1%)
- Same Day GP Appointments:** A similar proportion of Essex residents (37.6%) are able to see a GP on the same day compared to the national average in England (37.9%). However, within Essex, Chelmsford has the lowest percentage (33.4%).
- Travel Time to a Nearest GP Surgery:** Overall, Essex residents have slightly longer travel times (walking or using public transport) to reach their nearest GP surgery (14 minutes) compared to the national average (13 minutes). However, within Essex, residents of Uttlesford have the longest travel times to their nearest GP services averaging 21 minutes.
- Travel Time to a Nearest Hospital:** Essex residents spend more time traveling (walking or using public transport) to reach the nearest hospital (48 minutes) compared to the national average (41 minutes). Among Essex districts, Maldon residents have the longest travel times, averaging 82 minutes to reach their nearest hospital.
- Travel Time to a Nearest Dentist:** Essex residents spend more time traveling to their nearest dentist (4 minutes) compared to the national average (3.2 minutes). Among Essex districts, the longest travel times are found in Maldon (7.6 minutes) and Uttlesford (7.2 minutes).

Accessibility to health services, Greater Essex

Area	CNI Connect					
	GP appointments (2022)	GP appointments 21 or more days after appointment (2022)	Same day GP appointments (2022)	Travel time to a nearest GP surgery (2019)	Travel time to a nearest Hospital (2019)	Travel time to nearest Dentist (2019)
	Rate per 1,000	%	%	Minutes	Minutes	Minutes
England	513.1	10.6	37.9	13	41	3.2
East of England	519	12.3	37.8	15	50	4.4
Essex	502.6	12.8	37.6	14	48	4
Greater Essex	489.1	11.7	37.8	13	46	3.8
Basildon	493.7	13.5	39.5	11	35	2.3
Braintree	512.3	15.7	34.6	16	61	5.6
Brentwood	538.9	18.1	34.9	15	49	3.9
Castle Point	418.1	12.5	36.7	12	46	2.3
Chelmsford	445.8	14.9	33.4	13	43	3.9
Colchester	452.3	10.6	38.8	15	37	3
Epping Forest	504.3	7.6	48.4	15	52	3.6
Harlow	485	10.7	38.5	11	24	2.3
Maldon	575.7	13.8	34.8	17	82	7.6
Rochford	459.4	10.1	36.3	11	40	5.1
Tendring	681.2	15.1	36	14	62	4.5
Uttlesford	487.6	10.8	38.1	21	66	7.2
Southend-on-Sea	392.6	8.2	36.5	10	28	1.8
Thurrock	473.4	6.2	40.3	11	51	3.3

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

What is sport and leisure environment in Greater Essex like?

Built environments play a crucial role in providing opportunities for Physical Activity (PA), and higher PA opportunities are associated with more active and healthier communities¹.

- **Density of Sport and Leisure Assets:** Essex has a lower rate of sport and leisure assets (749 per 100,000 population) compared to the national average (827). Among the districts of Essex (including Greater Essex) the lowest rates of sport and leisure assets are found in Tendring (475), Maldon (500), and Uttlesford (587), which also fall into the bottom 20% nationally.

Exposure to green spaces is linked to better health outcomes, including reduced blood pressure, heart rate, cortisol, and a lower incidence of type 2 diabetes, among other health benefits²³.

- **Access to Green Spaces:** Essex has a green spaces score of 0.46, which

is higher than the national average of 0.42 (higher is better). However, within Greater Essex, Southend (0.37) and Thurrock (0.38) have the lowest accessibility scores for passive green spaces, which measures the availability of green space within 80 meters of the postcode centroid.

Similarly, exposure to blue spaces has shown a positive association with mental health and general wellbeing⁴.

- **Travel Time to Blue Spaces (Beaches, Lakes, Rivers):** The average time to drive to a blue space in Essex is 5 minutes, which is slightly longer than the national average of 4 minutes. Within Essex (including Greater Essex), the longest drive times to blue spaces are found in Harlow (8.3 minutes), Uttlesford (7.7 minutes), Brentwood (6.8 minutes) and Rochford (6.6 minutes), which also fall into the bottom 20% nationally.

1 [The interplay between social environment and opportunities for physical activity within the built environment: a scoping review | BMC Public Health](#)

2 [Improving access to greenspace: 2020 review](#)

3 [The health benefits of the great outdoors: A systematic review and meta-analysis of greenspace exposure and health outcomes – ScienceDirect](#)

4 [Blue space, health and well-being: A narrative overview and synthesis of potential benefits - ScienceDirect](#)

CNI 2023: Physical environment (sport and leisure), Greater Essex

Area	CNI Civic	CNI Connect	CNI Connect
	Density of Sport and Leisure Assets (2023)	Accessibility Score to Green Spaces (2024)	Travel Time to Blue Spaces (2024)
	Rate per 100,000 population	Score	Average time (minutes)
England	827	0.42	4
East of England	765	0.46	4.6
Essex	749	0.46	4.5
Greater Essex	737	0.45	4.3
Basildon	685	0.44	3.3
Braintree	672	0.48	5
Brentwood	835	0.52	6.8
Castle Point	799	0.4	3
Chelmsford	968	0.47	3.7
Colchester	797	0.45	3.2
Epping Forest	878	0.5	5.1
Harlow	885	0.45	8.3
Maldon	500	0.49	2.9
Rochford	820	0.44	6.6
Tendring	475	0.41	2.8
Uttlesford	587	0.54	7.7
Southend-on-Sea	719	0.37	3.2
Thurrock	648	0.38	3.5

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

How physically inactive are Greater Essex residents?

Physical activity is a cornerstone of healthy communities. Regular physical activity helps prevent and manage chronic disease, diabetes, and obesity¹. Additionally, exercising is known to reduce symptoms of depression, and anxiety, improve mood, and enhance overall mental well-being. Community-based physical activities, such as walking clubs, provide opportunities for social interaction, fostering sense of community and belonging. Active communities can see economic benefits through reduced healthcare costs and increased productivity. By integrating and promoting physical activity within community life, we can create healthier, more resilient and vibrant communities.

- The latest Active Lives Survey data indicates that the highest proportions of physically inactive residents in Greater Essex are found in Thurrock (31%), Southend (29%), Tendring (27%), and Harlow (26%)².
- The insights from the Essex residents survey report (2023) suggests that females, residents aged 75 and older, individuals living with Limiting Long-Term Illness (LLTI) or health conditions are significantly less active than the overall Essex population³.
- Additionally, the Essex residents survey also indicates that residents living in deprived or urban areas are more likely to be inactive, engaging in less than 30 minutes of physical activity per week⁴.

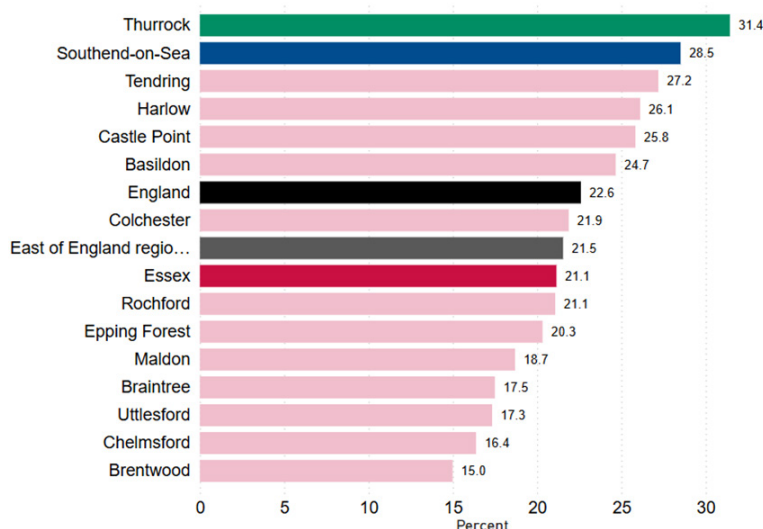
1 [Exercise/physical activity and health outcomes: an overview of Cochrane systematic reviews - PMC](#)

2 [Active Lives survey data via JSNA Health Behaviours - Diet and exercise dashboard | Essex Open Data](#)

3 [Essex Resident Survey 2023 Dashboard & Reports | Essex Open Data](#)

4 [Essex Resident Survey 2023 Dashboard & Reports | Essex Open Data](#)

Adults who are Physically Inactive¹, Greater Essex 2022/23².



1 Physically Inactive refers to individuals aged 19 and over who engaged in less than 30 minutes moderate-intensity physical activity per week, in bouts of 10 minutes or more in the previous 28 days

2 [Active Lives survey data via JSNA Health Behaviours - Diet and exercise dashboard | Essex Open Data](#)

What can be considered as less “healthy” environment?

Living in an area with high density of fast-food outlets increases exposure to unhealthy food products, which can encourage higher consumption of these items¹. This can lead to poor dietary habits and increased risk of obesity, diabetes, and cardiovascular diseases².

- **Travel Time to Fast-Food Outlets:** Essex has longer travel times to fast-food outlets (3.9 minutes) compared to the national average (2.8 minutes), however, within Greater Essex districts, Southend and Castle Point have the shortest travel times (1.3 and 1.5 minutes respectively).
- **Fast-Food Outlets Density:** Overall, Essex has a lower density of fast-food outlets (0.85 per 1,000 population) compared to the national average (1.05). However, within Greater Essex, higher densities are found in Tendring (1.19) and Southend (1.12) ([See Appendix 4A](#) for details).

Proximity to supermarkets, fresh fruit, and vegetable stores is linked to lower risk of obesity and healthier food consumption³.

- **Distance to General Store or Supermarket:** Essex residents have a slightly longer distance to travel to a general store or supermarket (0.8 kilometres) compared to the national average (0.7 kilometres). Among Essex districts, residents of Uttlesford (1.6 kilometres) and Maldon (1.3 kilometres) have to travel the furthest.
- **Supermarkets Density:** Essex has a slightly higher supermarkets density (0.21 per 1,000 population) compared to England (0.20). Within #Greater Essex, the highest densities are found in Chelmsford (0.28) and Tendring (0.26) ([See Appendix 4B](#) for details).

Higher gambling outlets density is often associated with higher prevalence in health issues, such as anxiety, depression, and stress⁴⁵.

- **Gambling Outlets:** Overall, Essex has longer travel times to the nearest gambling outlet (5.5 minutes) compared to the national average (4.3 minutes). However, within Greater Essex, the shortest travel time is found in Southend (2.1 minutes).

1 [The association between the presence of fast-food outlets and BMI: the role of neighbourhood socio-economic status, healthy food outlets, and dietary factors | BMC Public Health](#)

2 [Inequalities in concentration of fast food outlets | The Health Foundation](#)

3 [Food environment and obesity: a systematic review and meta-analysis | BMJ Nutrition, Prevention & Health](#)

4 [Using geospatial mapping to predict and compare gambling harm hotspots in urban, rural and coastal areas of a large county in England | Journal of Public Health | Oxford Academic](#)

5 [Gambling-related harms evidence review: summary - GOV.UK](#)

Environmental factors, Greater Essex

Area Name	Travel Time to Fast Food Outlets (2024)	Distance to General Store or Supermarket (2018)	Gambling Outlets (2024)
	Average travel time (minutes)	Average distance (kilometres)	Average travel time (minutes)
England	2.8	0.7	4.3
East of England	4.1	0.9	5.9
Essex	3.9	0.8	5.5
Greater Essex	3.5	0.8	5
Basildon	2.4	0.7	3
Braintree	5.1	1	6.7
Brentwood	3.8	0.6	3.9
Castle Point	1.5	0.6	2.5
Chelmsford	3.9	0.9	4.5
Colchester	3.7	0.8	6.1
Epping Forest	3.6	0.8	4.5
Harlow	2.8	0.6	2.8
Maldon	7.8	1.3	15.9
Rochford	4.7	0.6	5.3
Tendring	3.1	0.7	6.3
Uttlesford	7.6	1.6	9.7
Southend-on-Sea	1.3	0.4	2.1
Thurrock	2.5	0.6	3.8

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Obesity prevalence in Greater Essex?

The latest National Child Measurement Program (NCMP) data reveals that:

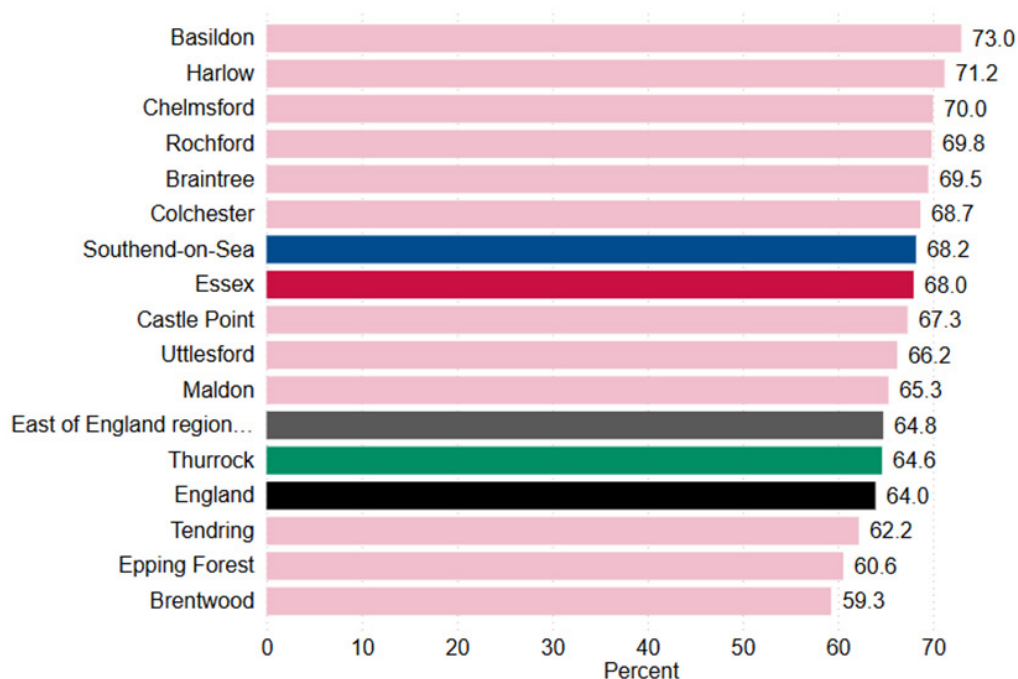
Children and young people:

- Tendring (26.1%) and Harlow (24.4%) have the highest proportions of **Reception** age children who are considered as overweight (including very overweight) compared to the national average (22.1%).
- Harlow (38.9%), Thurrock (37.7%) and Tendring (36.1%) also have the highest proportion of **Year 6** children who are considered as overweight (including very overweight) compared to the national average (35.8%).

Adults:

- Greater proportion of **adult population** in Essex are overweight or living with obesity (68%) compared to the national average (64%) (see figure below).
- The highest proportions of adults living with excess weight (BMI greater or equal to 25kg/m²) are found in Basildon (73%) and Harlow (71.2%).
- The highest proportions of adults living with obesity (BMI greater or equal to 39kg/m²) are found in Basildon (34.4%) and Maldon (33.7%).

Overweight and obesity prevalence in adult population¹, Greater Essex 2022/23²



¹ Percentage of adults aged 18 and over classified as overweight or obese (BMI greater than or equal to 25kg/m²)

² JSNA Health Behaviours - Obesity dashboard | Essex Open Data

Further note on Healthy Communities

Creating healthier communities involves a combination of strategies that promote physical, mental and social well-being. Some of the approaches include:

Encourage Physical Activity: Providing free or low-cost fitness activities is crucial for reducing health disparities within communities. Making fitness programs accessible ensures that everyone has the opportunity to participate. Additionally, it's important to actively promote these events, as many community members might not be aware of the available initiatives. By raising awareness and offering a variety of activities, such as dance, martial arts, and strength training, communities can foster a more inclusive and healthier environment.

Promote Mental Health: Facilitate mental health support groups and provide resources for mental health care. These groups can be supplemented with workshops that include mindfulness, stress management, and coping strategies. Creating safe spaces where individuals can openly discuss their mental health challenges helps to destigmatize these issues.

Nutritional Education: Provide cooking classes which would teach communities how to prepare healthy and affordable meals. Collaborating with local nutritionists to provide personalized guidance could be beneficial. Incorporate fun and engaging initiatives which would include all age groups.

Foster Social Connections: Creating opportunities for community members to connect through events, volunteering opportunities, and local groups. Social connections are important for mental and emotional health.

Access to Health Services: Ensuring that communities have access to healthcare services, such as health screenings, vaccinations, and other essential health services (see case study: Improving MH services in NHS trusts).

Green and Blue Spaces: These areas provide a place for recreation and relaxation, which is important for overall well-being. Developing and maintaining these spaces is essential.

Case study: Improving Mental Health Services In NHS Trusts

Background: 7 NHS mental health trusts in England undertook significant initiatives to improve their services and achieve higher ratings from the Care Quality Commission (CQC). Emphasis was placed on:

Leadership and Culture: Trusts focused on creating environment where staff felt valued and supported, which in turn improved patient care.

Patient-Centred Care: Patients involved in their care plans and decision- making process.

Staff Training and Development:

Continuous professional development and training for staff were prioritized, including training on new treatment methods and improving communication skills.

Community Engagement: Trusts worked closely with local communities and other healthcare providers to create a more integrated approach to mental health care, which helped in addressing broader social determinants of mental health.

Outcomes:

The trusts saw **significant improvements in their CQC ratings**, with some moving from “requiring improvement” to good or even “outstanding”.

Additionally, **patient’s satisfaction ratings also improved** as services became more responsive and personalized.

Source: [20180320_drivingimprovementmh_report.pdf](#)



Connected
Communities

What is a “connected community”?

A connected community can be defined as one that fosters strong social networks and connections within community to enhance social, economic, and overall well-being.

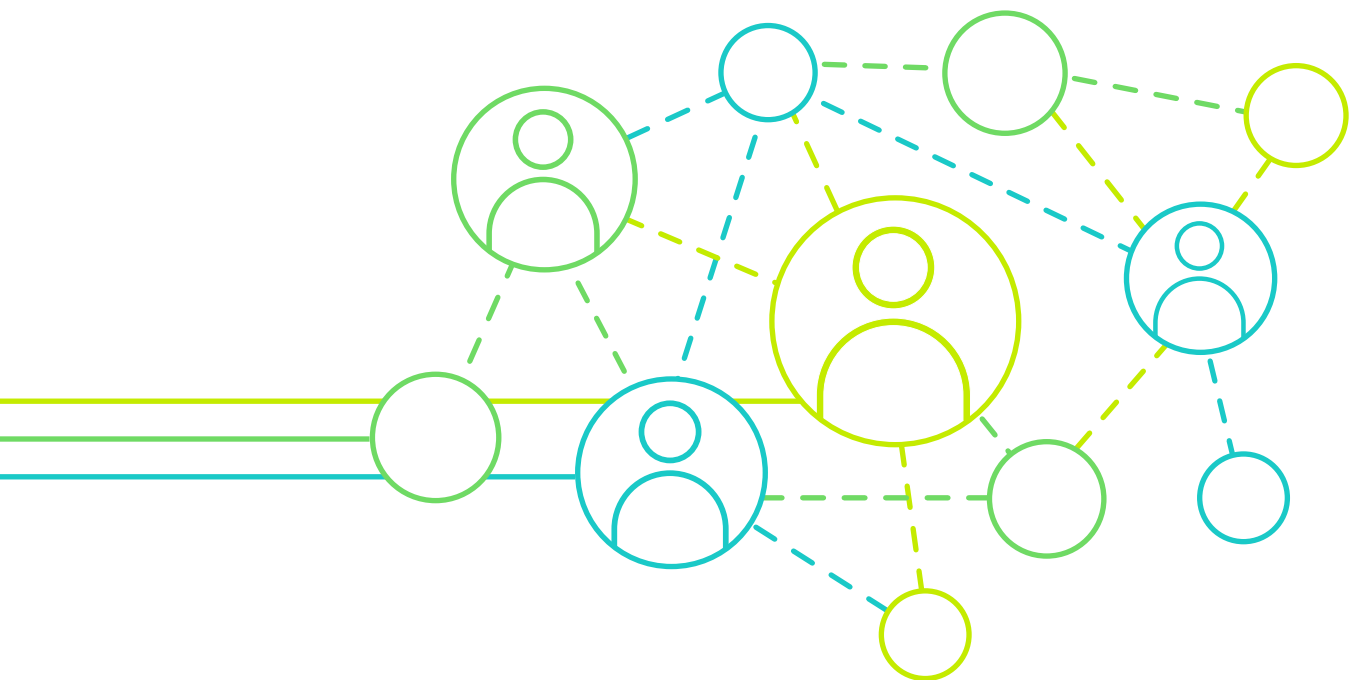
By enhancing connectedness, communities can reduce social isolation, which is particularly beneficial for vulnerable groups¹².

In this section we will explore metrics that associate with connected communities, including:

- Physical Connectedness
- Digital Connectedness
- Social Connectedness

1 [C3-CCA-Overview-October2016.indd](#)

2 [C3-CCA-TheoreticalFramework-180420.indd](#)



Education accessibility in Greater Essex

Access to Education involves ensuring that all individuals have equal opportunities for learning and development. This principle includes removing barriers that prevent participation in educational activities, such as economic challenges, discrimination, geographical isolation, or physical disabilities. Ensuring access to education is essential for breaking the cycle of poverty, promoting social mobility, and fostering a diverse society¹.

- **Households with no car:** In Essex, nearly 16% of households do not have a car, which is lower than the national average of 23.5%. Among the districts of Essex (including Greater Essex), Southend has the highest proportion of households without a car at 24.6%. Without a car, residents may need to rely on active travel methods or public transport.
- **Primary School:** Overall, the average travel time by walking or using public transport to get to a primary school in Essex is 10 minutes, which is similar to the national average of 9 minutes. However, within Essex, the districts

of Maldon and Uttlesford have longer average travel times of 14 minutes and 12 minutes, respectively. Additionally, both Maldon and Uttlesford have longer travel distances to primary schools at 1.4 km and 1.3 km, respectively.

- **Secondary School:** The average travel time by walking or using public transport to get to a secondary school in Essex is 19 minutes, which is close to the national average of 18 minutes. However, within Essex, Uttlesford, Maldon, and Braintree have the longest travel times, averaging 29 minutes, 24 minutes, and 23 minutes, respectively.
- **Further Education:** The average travel time by walking or using public transport to reach a further education institution in Essex is 22 minutes, matching the national average. However, within Essex, the districts of Uttlesford, Braintree, and Colchester have the longest travel times, averaging 30 minutes, 28 minutes, and 26 minutes, respectively.

1 [Access to Education - Definition and Explanation](#)

CNI 2023: Connectedness: Physical Connectedness

Area	CNI Connect Households with no car (2021)	CNI Connect Primary School (2019)	CNI Connect Secondary School (2019)	CNI Connect Further Education Institution (2019)	Distance to Primary School (2018)
	%	Travel time by walking or using public transport (minutes)			Kilometres
England	23.5	9	18	22	0.9
East of England	16.8	10	20	24	1
Essex	15.9	10	19	22	1
Greater Essex	16.9	10	18	22	0.9
Basildon	18.7	9	16	20	0.9
Braintree	13.7	11	23	28	1
Brentwood	13.7	12	18	18	1
Castle Point	15	9	15	23	0.8
Chelmsford	14.9	10	18	18	0.9
Colchester	18.2	9	20	26	0.9
Epping Forest	14	11	21	24	1.1
Harlow	21.7	6	13	18	0.6
Maldon	11.3	14	24	24	1.4
Rochford	13	10	18	18	1
Tendring	20.1	10	19	22	1
Uttlesford	8.8	12	29	30	1.3
Southend-on-Sea	24.6	9	14	15	0.8
Thurrock	17.3	9	15	22	0.8

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Employment accessibility in Greater Essex

Shorter travel times enhance access to job opportunities, which is particularly crucial for individuals without a vehicle. Conversely, inadequate public transport or limited car accessibility can pose significant barriers to economic inclusion¹².

- **Travel Time to the Nearest Employment Centre:** The average travel time to the nearest employment centre in Essex by walking or using public transport is 10 minutes, which is close to the national average of 9 minutes. However, residents of Maldon face the longest travel time within Essex, averaging 14 minutes.
- **Travel Time to the Nearest Town Centre:** Employment centres are often located within town or city centres because these areas offer good access to public transport, a larger pool of potential employees, and opportunities for businesses to share resources and ideas. The average travel time by walking or using public transport to the nearest town centre in Essex is 22 minutes, which is slightly higher than the national average of 21 minutes.

Among Essex districts, the longest travel times are found in Maldon (34 minutes), Uttlesford (28 minutes), and Colchester (25 minutes).

- **Jobs Density (number of jobs divided by the resident population aged 16-64):** Essex has a considerably lower jobs density (67.7%) compared to the national average (77.9%) for the working-age population. Among Essex districts, only Chelmsford and Uttlesford have higher jobs densities. The lowest densities are found in Castle Point (42.7%) and Rochford (46.6%).
- **Job Access:** This measure of connectivity includes the number of jobs accessible by car and public transport from every local area within 15, 30, 60, and 90 minutes³. Essex has a considerably lower job access score (401,000) compared to the national average (698,000). Among Essex districts, the lowest accessibility is found in Tendring, Colchester, Maldon, and Southend.

¹ [Network Effects - Shocking Transport Gap – Onward](#)

² [How local transport infrastructure influences economic inclusion | Local Government Association](#)

³ [Network Effects - Shocking Transport Gap – Onward](#)

CNI 2023: Connected communities

Area	CNI Connect Travel time to nearest employment centre (2019)	CNI Connect Travel time to nearest town centre (2019)	Jobs density (jobs as a percentage of the working age population) (2022)	CNI Connect Job Access (higher score better) (2021)
	Minutes	Minutes		Score
England	9	21	77.9	698,519
East of England	10	24	74.5	516,099
Essex	10	22	67.7	401,570
Greater Essex	10	21	66.6	434,156
Basildon	9	17	77.7	485,233
Braintree	10	23	58.4	238,986
Brentwood	9	18	70.1	787,833
Castle Point	9	16	42.7	296,984
Chelmsford	9	23	80.3	331,680
Colchester	10	25	70.3	118,843
Epping Forest	10	20	67.5	1,065,206
Harlow	9	19	70.2	986,574
Maldon	14	34	55.8	125,976
Rochford	12	19	46.6	183,073
Tendring	11	23	61.7	55,518
Uttlesford	12	28	84.6	440,266
Southend-on-Sea	8	17	59.2	132,915
Thurrock	9	20	66.6	1,004,208

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Connectedness: Wider connectivity

Digital inclusion is vital for connected communities as it ensures that people can access essential services online, such as healthcare, education, and government services¹. Additionally, digital inclusion enables people to stay connected with family and friends, reducing isolation and improving mental health. Digital inclusion is crucial for elderly, disabled individuals, and marginalised communities².

- **Digital Exclusion Risk Index (DERI):** This measure indicates the risk of digital exclusion by combining components such as age, broadband access and deprivation. Essex has a slightly lower DERI score (2.98) compared to the national average (3). However, with Essex, Tendring has the highest score (3.9), indicating highest exclusion risk. Additionally, Tendring has the lowest broadband speed.

Evidence indicates a strong relationship between social connection and mental and physical health³. Loneliness is a serious and growing issue in the UK, underscoring the need for initiatives to foster social connectedness and address isolation⁴. In response, the UK government launched the world's first loneliness strategy in 2018⁵.

- **People Living Alone:** Essex has a lower proportion (14.5%) of people who live alone compared to the national average (17.3%). Among the districts of Essex (including Greater Essex), Southend has the highest proportion of individuals living alone (19.4%).
- **People Feeling Lonely:** Essex has a slightly lower proportion of residents who feel lonely (22.3%) compared with the national average (23.3%). Among the districts of Essex (Including Greater Essex), higher proportions are found in Harlow, Thurrock, Basildon, Southend.

1 [Why digital inclusion matters to health and social care - NHS England Digital](#)

2 [Ensuring digital inclusion - ScienceDirect](#)

3 [Social connection as a critical factor for mental and physical health: evidence, trends, challenges, and future implications - Holt-Lunstad - 2024 - World Psychiatry - Wiley Online Library](#)

4 [Community Life Survey 2023/24: Loneliness and support networks - GOV.UK](#)

5 [DDCMS Loneliness Strategy](#)

CNI 2023: Connectedness: Wider measures of Connectedness

Area	CNI Connect Digital Exclusion Risk Index (2021)	Broadband Download Speed (2023)	Broadband Upload Speed (2023)	CNI Connect People living alone (2021)	CNI Connect People feeling lonely (2021)
	Score	Mb/s	Mb/s	%	%
England	3	152.1	26.7	17.3	23.3
East of England	2.91	145.6	22.9	15.7	22.7
Essex	2.98	139.9	30	14.5	22.3
Greater Essex	2.97	145.6	28.2	15	22.8
Basildon	3.03	181.5	21.4	15.8	24.2
Braintree	2.95	109.5	48.8	14.1	22.3
Brentwood	2.74	118.8	23.9	15.4	21.5
Castle Point	3.18	117.3	15.8	10.9	20.2
Chelmsford	2.68	158.1	22.6	15.4	22.2
Colchester	2.77	146.4	35.3	16.6	22.6
Epping Forest	2.87	183.4	42.7	13.7	22.8
Harlow	2.94	199.8	19.7	17.2	26.6
Maldon	3.08	128.2	28.3	11.5	20.2
Rochford	2.86	99.9	18.5	11	20.4
Tendring	3.9	78.1	20.1	15	21.4
Uttlesford	2.69	137.4	60.4	12.3	20.7
Southend-on-Sea	3.01	138.6	16.7	19.4	23.9
Thurrock	2.9	191.4	23.4	14.1	25.3

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Further note on connected communities

In order to improve the outcomes in this domain we need to ensure that, connected communities have:

Physical Connectedness:

- Good access to public transport which is also safe, clean, and runs on time
- Raise awareness of public transport as well as active travel and its benefits¹

Digital Connectedness:

- Ensure that there is good and affordable access to broadband

- Ensure that communities have access to digital education
- Ensure that these opportunities are promoted where possible, so communities are aware of these opportunities²

Social Connectedness:

- Promote civic assets and events where communities can get together and socialize

¹ [Top Advantages, Benefits and Importance of Public Transportation | Planning Tank](#)

² [Digital development strategy 2024 to 2030 - GOV.UK](#)



Case study: Using infrastructure to tackle digital exclusion

Overview: Deeplish Community Centre, a registered charity, provides a safe and welcoming environment for educational, social, and learning activities in one of the most deprived areas in the country. Situated in Rochdale, where over 90 different languages are spoken, the centre faces significant challenges related to digital exclusion.

Challenge: The Digital Exclusion Risk Index indicates a higher-than-average likelihood of digital exclusion in the area. The centre's existing connectivity was poor, exacerbated by the post-pandemic cost of living crisis, making it difficult to support the community's digital needs.

Solution: As part of the Local Full Fibre Network rollout across Greater Manchester, Virgin Media O2 Business provided Deeplish Community Centre with free connectivity for five years starting in summer 2021. This upgrade allowed the centre to enhance its digital offerings and support the community's needs.

Implementation: The centre began hosting digital skills sessions, covering topics such as cyber security, online banking, and financial management. These sessions, supported by Talk English and Good Things Foundation, also helped local children with their homework and addressed language barriers. The initiative ensured that residents could continue their digital journey at home with donated devices and data.

Outcomes:

- **Increased Digital Skills:** Over 500 residents have been supported, improving their digital skills and overall well-being.
- **Enhanced Community Engagement:** The centre now serves as a hub for digital learning and community activities, fostering greater social cohesion.
- **Sustained Impact:** The free connectivity has provided stability, allowing the centre to offer consistent digital support and address generational gaps in digital literacy.

Source: [CASE STUDY: Using infrastructure to tackle digital exclusion - Greater Manchester Combined Authority](#)



Inclusive Communities

What is an “inclusive community”?

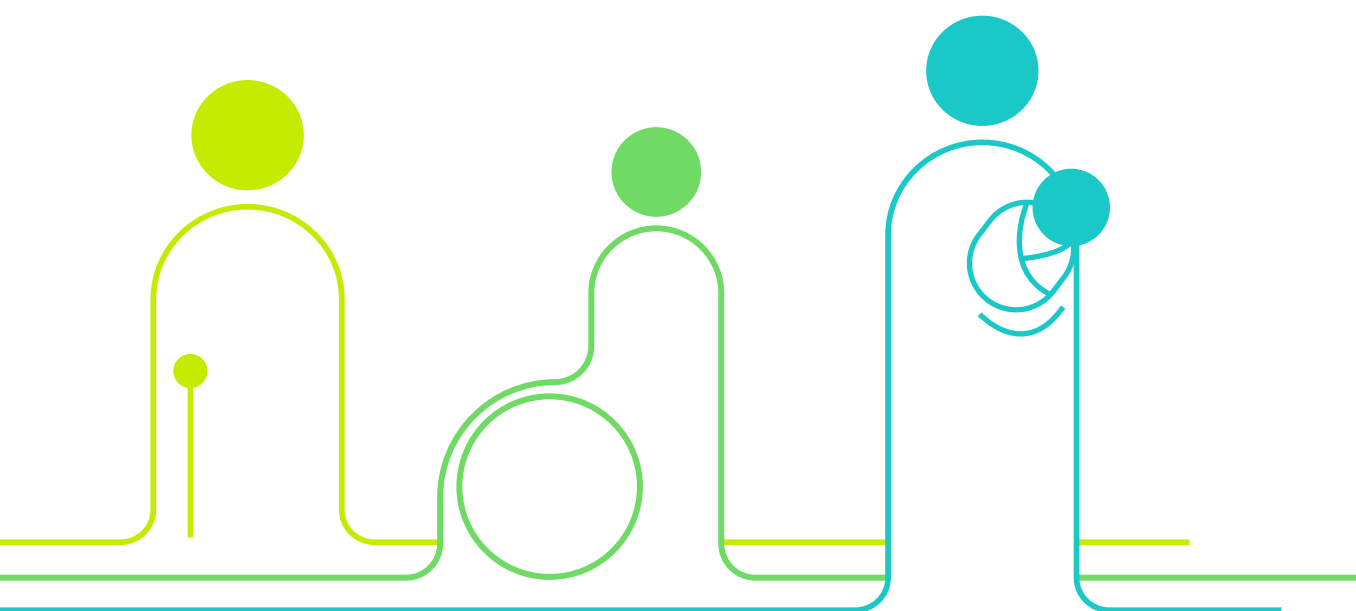
An inclusive community values and embraces diversity, ensuring that all members, regardless of their racial, ethnic, socioeconomic, religious, or other backgrounds, are fully involved, engaged, and feel a sense of belonging.

Inclusivity involves not only recognizing differences but also implementing strategies to eliminate discrimination and promote equal opportunities for everyone. Such communities tend to be stronger, more resilient, and more innovative. Additionally, fostering a sense of belonging and acceptance brings significant social and psychological benefits, contributing to the overall mental well-being of community members¹.

In this section we will explore metrics that associate with connected communities, including:

- Ethnic Breakdown of Essex Residents
- Languages that are Spoken in Essex
- Sexual Orientation of Essex Residents
- Sense of Belonging

¹ [9 Ways to Build an Inclusive Community - Instant Input](#)



Inclusive communities - ethnicity

Ethnic background plays an important role in fostering inclusive communities. Ethnic diversity brings a variety of perspectives and experiences, enriching community discussions. Different ethnic backgrounds contribute to a richness of cultural aspects, enhancing cultural life through festivals, food, art, and traditions. By valuing and integrating diverse ethnic backgrounds, communities can become more inclusive, vibrant, and resilient¹²³.

- According to the latest Research & Citizen Insight report, which uses the Census 2021 data, Essex has a lower ethnic diversity (14.9%) compared to England as a whole (26.5%)⁴.
- Among the districts in Essex (including Greater Essex), the highest ethnic diversity is found in Thurrock (33.8%), Harlow (27.1%), and Epping Forest (24.4%).
- In contrast, the districts with the lowest ethnic diversity are in Maldon (6%), Rochford (6.2%), and Tendring (6.5%).

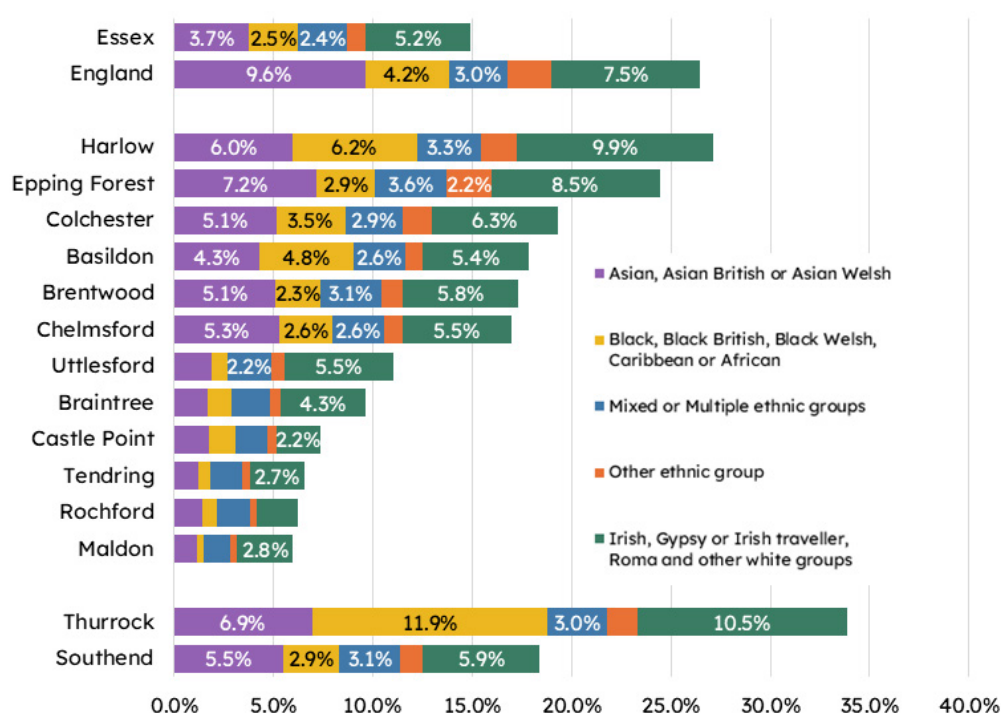
1 [The Importance of Inclusive Communities: Supporting Youth from Diverse Backgrounds - New Pathways for Youth](#)

2 [NHS England » NHS equality, diversity, and inclusion improvement plan](#)

3 [1235-Evidence-on-outcomes-of-an-inclusive-societies-approach.pdf](#)

4 [Census 2021 - Ethnicity, Language, and Religion | Essex Open Data](#)

Ethnicity breakdown, Greater Essex, Census 2021¹



1 [Census 2021 - Ethnicity, Language, and Religion | Essex Open Data](#)

Inclusive communities - language

In addition to the ethnicity breakdown, it is also important to understand what languages are spoken across Greater Essex. By recognizing and supporting multiple languages, communities can preserve and celebrate their diverse cultural heritage. Multilingual communities can also ensure that more people has access to information and services, which is essential in areas with higher proportions of immigrant populations.

- According to the latest Research & Citizen Insight report, which uses the Census 2021 data, Essex has a lower language diversity (4.4%) compared to England as a whole (9.2%)¹.
- Among the districts in Essex (including Greater Essex), the highest language diversity is found in Thurrock (11.3%) and Harlow (10.4%).
- In contrast, the districts with the lowest language diversity are Rochford (1.1%), Maldon (1.2%) and Tendring (1.6%)².
- “Other European languages” are the most common languages spoken in

Essex as a whole. The top 10 include Romanian, Polish, Lithuanian, Turkish, Portuguese, Spanish, Malayalam, Bulgarian, Italian, Tamil³.

In addition to considering the different languages spoken, it is crucial to examine English language proficiency. Lower proficiency is associated with lower engagement with services⁴.

- While Essex has a higher overall English proficiency compared to the national average (14.3% vs. 20.2% respectively), certain areas within Essex have higher proportions of residents with low English proficiency. Specifically, Castle Point (19.5%), Tendring (19.4%), and Maldon (19.4%) have notable percentages of residents whose main language is not English and who have low proficiency levels.
- Areas with the highest number of residents with low English proficiency are found in Thurrock (3,144), Southend (1,646), and Harlow (1,551)⁵.

1 [Census 2021 - Ethnicity, Language, and Religion | Essex Open Data](#)

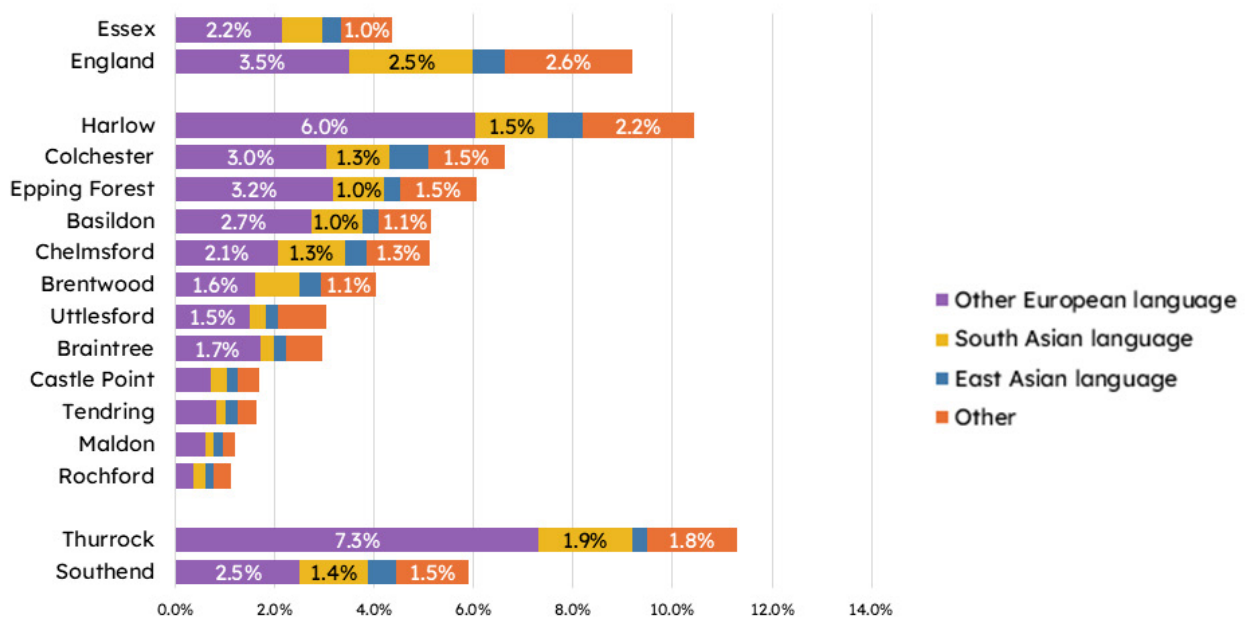
2 [Census 2021 - Ethnicity, Language, and Religion | Essex Open Data](#)

3 [Census 2021 - Ethnicity, Language, and Religion | Essex Open Data](#)

4 [How Should Clinicians Respond to Language Barriers That Exacerbate Health Inequity? | Journal of Ethics | American Medical Association](#)

5 [Census 2021 - Ethnicity, Language, and Religion | Essex Open Data](#)

Language breakdown, Greater Essex, Census 2021¹



¹ Census 2021 - Ethnicity, Language, and Religion | Essex Open Data



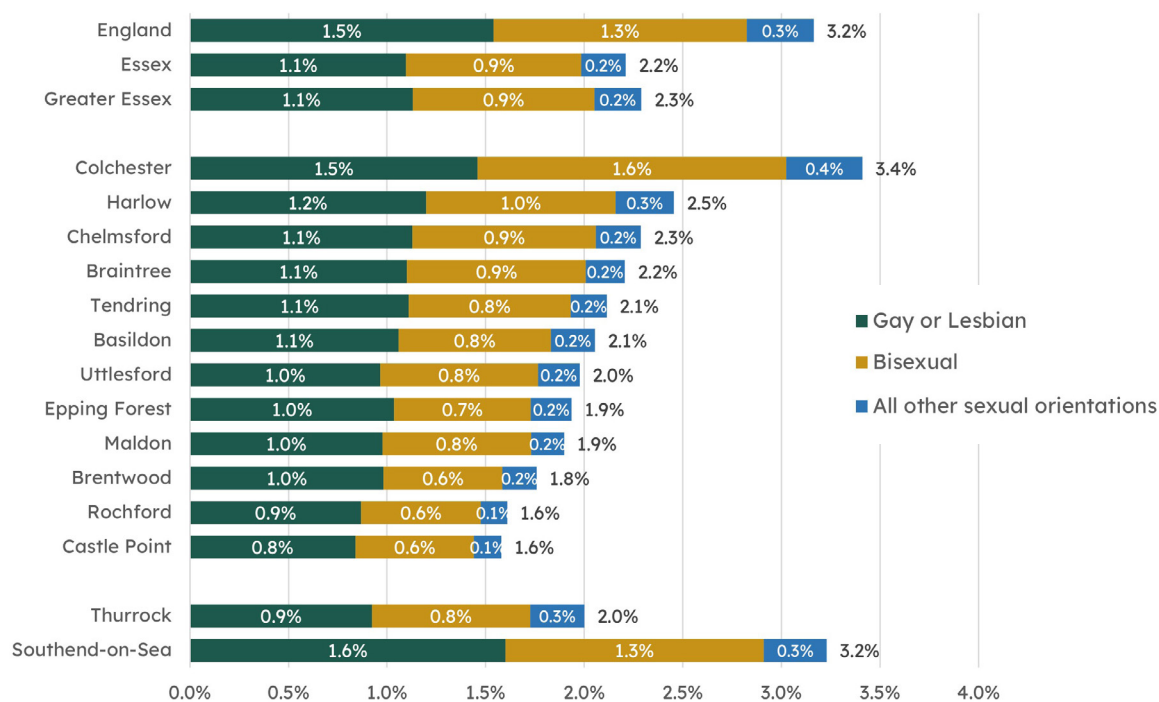
Inclusive communities – sexual orientation

Research studies indicate that globally, people who identify as LGBTQ+ (Lesbian, Gay, Bisexual, and anyone else who consider themselves to have a minoritized sexual orientations) experience poorer health outcomes compared to heterosexual populations. This disparity is largely due to discrimination, stigma, violence, discriminatory policies, and other structural forces¹. By recognizing and respecting diverse sexual orientations, we can create an environment where all individuals feel valued and accepted. This, in turn, helps reduce discrimination and promotes equality.

- According to the latest Research & Citizen Insight report, which uses the Census 2021 data, Greater Essex has a lower proportion of residents who identify as LGBTQ+ (2.3%) compared to England as a whole (3.2%).
- Within the districts of Essex (including Greater Essex), the highest proportions of residents identifying as LGBTQ+ are found in Colchester (3.4%) and Southend (3.2%).

¹ [LGBTQIA+ inclusion in the global health policy agenda: A critical discourse analysis of the Lancet Commission report archive | PLOS ONE](#)

Sexual orientation, Greater Essex, Census 2021¹



¹ [Census 2021 - Sexual Orientation & Gender Identity | Essex Open Data](#)

Where do people in Greater Essex feel disconnected?

The data on sense of belonging measures reveals a clear pattern.

- **Belonging to local neighbourhood:** Overall, there is a slightly higher sense of belonging to the local neighbourhood in Essex (64.7%) compared to the national average (62.9%). However, within Essex districts (including Greater Essex), the lowest sense of belonging are found in Harlow and Thurrock.
- **Exchanging things or favours with neighbours:** Essex residents are slightly more likely to borrow things or exchange favours with their neighbours compared to the national average (37.1% vs 36.1% respectively). However, within Essex (including Greater Essex), lowest proportions are found in Harlow and Thurrock.
- **Leaving home keys to a neighbour:** Essex residents are slightly more comfortable asking their neighbours to keep a key to their home for emergencies compared to the national average (66.7% vs. 62.8%). However, within Essex districts (including Greater Essex), residents in Harlow and Thurrock are the least comfortable with this request.

- **People pull together to improve things in a local neighbourhood:** Essex residents are slightly more likely to pull together to improve things in their local neighbourhood compared to the national average (62.8% vs 60.2% respectively). However, within Essex districts (including Greater Essex), Harlow and Thurrock residents are the least likely to pull together.
- **Never chat with neighbours:** Essex residents are less likely to never chat with their neighbours compared to the national average (24.8% vs 27.2% respectively). However, within Essex districts (including Greater Essex), residents in Harlow and Thurrock are slightly more likely to never chat with their neighbours.



CNI 2023: Active and Engaging Community, Greater Essex

Area	CNI Active					
	Feel that they belong strongly to neighbourhood (2021)	Agree that they can borrow things or exchange favours with neighbours (2021)	Feel very or fairly comfortable with asking a neighbour to keep a set of keys to their home for emergencies (2021)	Feel very or fairly comfortable with asking a neighbour to collect a few shopping essentials if they were ill and at home on their own (2021)	Agree that people in this neighbourhood pull together to improve the neighbourhood (2021)	Never chat to neighbours (2021)
	%	%	%	%	%	%
England	62.9	36.1	62.8	53.6	60.2	27.2
East of England	63.8	37.2	65.3	55.6	62.2	25.7
Essex	64.7	37.1	66.7	56.5	62.8	24.8
Greater Essex	64	36.5	65.4	55.5	61.6	25.4
Basildon	62.2	34.9	62	53.6	57.7	26
Braintree	65.1	37.7	67.2	57.1	63.1	23.8
Brentwood	65.6	37.4	68.4	57.4	64.6	24.8
Castle Point	68.6	38.2	71.7	59.4	66.6	22.6
Chelmsford	64.3	36.7	66.5	55.9	63	25.5
Colchester	63.3	36.4	65.1	54.9	62	26.9
Epping Forest	63.4	36.3	65	55.1	61.3	25.8
Harlow	58	32.9	55.8	49.2	52.1	28.9
Maldon	68.6	40	72.3	61	68.3	21.8
Rochford	68.7	38.7	72.1	60	67.4	22.1
Tendring	67.3	39	70.2	59.6	66.3	22.6
Uttlesford	66.8	39.9	71.1	60	68.1	22.8
Southend-on-Sea	61.6	34.9	62.4	52.8	59.2	27.7
Thurrock	59.7	33.6	58.1	50.2	54	28.4

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Local neighbourhoods in Essex

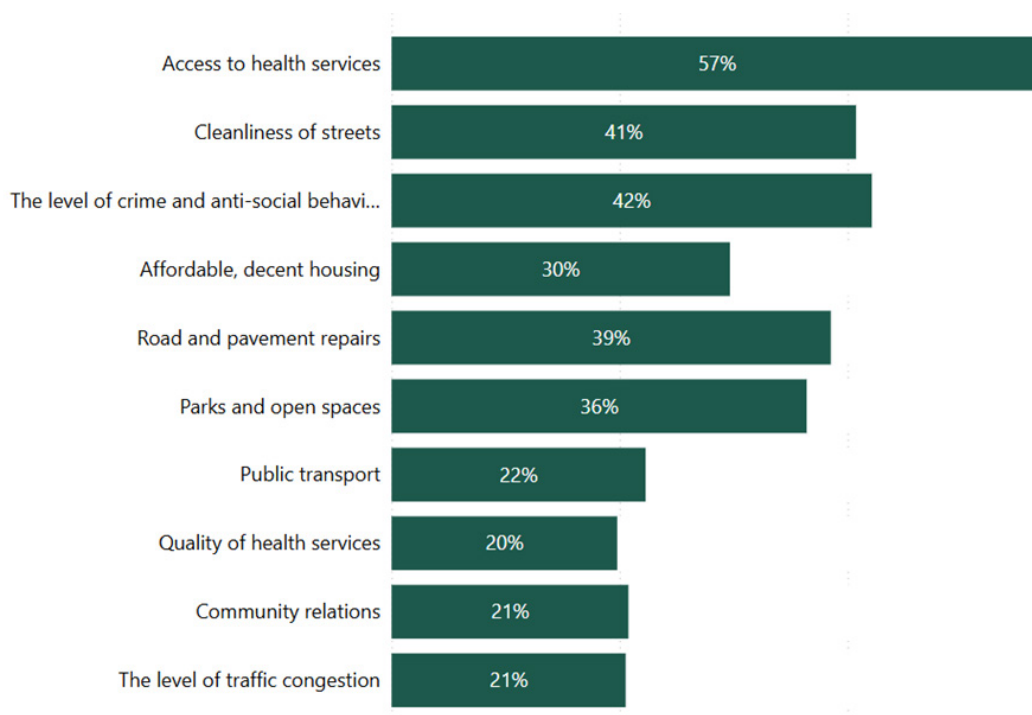
In addition to the previously mentioned sense of belonging measures, the Essex residents survey (2023) reveals similar results. The findings suggest that:

- The highest proportion of dissatisfied residents with their local area are found in Basildon (28%) and Harlow (25%).
- The highest proportion of residents who disagree that their neighbourhood pulls together to improve things are found in Harlow (32%) and Basildon (26%).
- The highest proportion of residents who do not chat with their neighbours at least once a month are found in Harlow (19%), Basildon (17%), and Chelmsford (17%).
- The highest proportion of residents who disagree that there is a sense of belonging in their local area are found in Basildon (35%) and Harlow (34%).
- The highest proportion of residents who do not feel close to people in the area they live are found in Harlow (41%), Basildon (36%), and Colchester (35%).
- A higher proportion of residents lacking trust in people in their local neighbourhood are found in Basildon (22%) and Harlow (21%).

Additionally, as illustrated in the chart on the right, Essex residents suggest that better access to health services, lower crime levels, and cleanliness would make places better to live¹.

¹ Essex Resident Survey 2023 Dashboard & Reports | Essex Open Data

What would make a good place to live? Essex Residents Survey 2023



Where in Greater Essex residents are more likely to move?

The residential mobility¹ is important to inclusive communities as it provides insights into the “churn” of the residential population, which can impact community cohesion and inclusivity. High residential mobility can disrupt social networks, making it harder for residents to form lasting connections and a sense of belonging. Understanding these patterns can help in developing strategies to foster inclusivity despite frequent population changes.

- **Residential Mobility Index:** The Residential Mobility Index (RMI) measures the annual movement of households in and out of areas across the UK². The data reveals that Essex has a higher rate of residential mobility compared to the national average (69.7% vs 66.1% respectively). Within Essex, Braintree has the highest proportion of residents moving annually (87.6%), while Rochford has the lowest (62.7%).

- **People Who Moved Address in the Last Year (Census 2021):** The latest Census data indicates that the proportion of Essex residents who moved address in the last year (9.3%) was slightly lower compared to the national average (10.5%). Among Essex districts, the highest proportion was in Colchester (12.1%) and the lowest in Castle Point (7.4%).

The RMI provides a continuous, detailed, and timely view of residential mobility, helping to track annual changes in population movement, whilst census data provides a decadal snapshot of residential mobility capturing where people lived one year before Census Day. It offers a broad overview of mobility patterns over a longer period.

1 Residential mobility (“Population Churn”) is estimated at the household level. Households’ start and end dates are extracted from individual level data by combining individuals that at any point in time have shared time together in the same property or have a shared surname in the same property. First household member determines the ‘start’ date (household identified as moving in), last household member determines the ‘end’ date (household identified as moving out).

2 [CDRC Residential Mobility Index | CDRC Data](#)

CNI 2023: Residents Mobility Index and Census 2021 data, Greater Essex

Area	CNI Active Residential Mobility Index (Population churn) 2000 and 2023	CNI Active People who have moved address in the last year (Census 2021)
	Score	%
England	66.1%	10.5%
East of England	69.6%	10.0%
Essex	69.7%	9.3%
Greater Essex	69.4%	9.2%
Basildon	63.7%	8.0%
Braintree	87.6%	9.2%
Brentwood	67.2%	9.4%
Castle Point	66.6%	7.4%
Chelmsford	67.2%	10.0%
Colchester	69.1%	12.1%
Epping Forest	76.2%	8.6%
Harlow	66.9%	9.3%
Maldon	63.3%	9.1%
Rochford	62.7%	7.7%
Tendring	68.7%	9.4%
Uttlesford	69.3%	9.3%
Southend-on-Sea	66.5%	9.4%
Thurrock	69.2%	8.4%

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Further note on inclusive communities

To foster inclusive communities, there a number of things that can be done to promote inclusivity, including;

- Raise awareness about diversity, equity and inclusion
- Celebrate diversity
- Ensure public spaces are accessible and welcoming to all
- Ensure that all community services and opportunities are accessible to everyone, regardless of their background
- Involve diverse voices in decision-making process to ensure that all perspectives are considered
- Allocate resources to initiatives that specifically address the needs of marginalized communities
- Implement systems for regular feedback and use that information to improve inclusivity efforts
- Track the progress of inclusivity initiatives¹²³

1 9 Ways to Build an Inclusive Community - Instant Input

2 Strategies for Creating Inclusive Communities: A Guide

3 Main Section | Community Tool Box



Case study: Out of the Blue: Unheard Voices, Different Stories

Overview: This case study, produced by Historic England, is based on the ‘Out of the Blue: Unheard Voices, Different Stories’ project by Blue Bermondsey BID. The project aimed to unearth and celebrate the previously unheard histories of The Blue marketplace in Bermondsey, fostering a greater sense of belonging and social cohesion. Supported by Historic England’s Everyday Heritage Grants, the project engaged diverse groups and highlighted the importance of this work.

Project Aims:

- Illuminate the heritage and history of The Blue during a time of change.
- Develop an honest understanding of local working-class history, respecting all contributions.

- Build bridges and relationships based on empathy across communities.
- Equip people with the skills to understand and present their history.

Responding to Community Needs:

A community consultation group of migrant and local minority groups was formed to respond to survey data through community programming. Blue Bermondsey BID supported planning but encouraged participants to formulate their own ideas. One-to-one meetings proved more productive, fostering openness and collaboration. The project evolved organically, with a visible presence in community spaces helping to build relationships and recruit collaborators.

Outcomes:

- **15 Culturally Diverse Events:** Including dance, cookery, Japanese culture, and Biscuit Day.
- **5 New Community Initiatives:** Such as Spice Race and Life in Dub.
- **3 Videos:** Documenting the project, including a film about a local resident’s journey from China to London.
- **Strengthened Marketplace:** The marketplace became a shared public space, emphasizing its role as an ‘outdoor community centre’.
- **Ongoing Monthly Events:** A legacy of the project, ensuring continued community engagement and recognition.

Source: [Case Study: Responding to Local Needs Through Heritage to Increase a Sense of Belonging and Cohesion | Historic England](#)



Empowered Communities

What is an “Empowered Community”?

Community empowerment involves enabling communities to gain control over their lives by increasing their assets, attributes, and capacities.

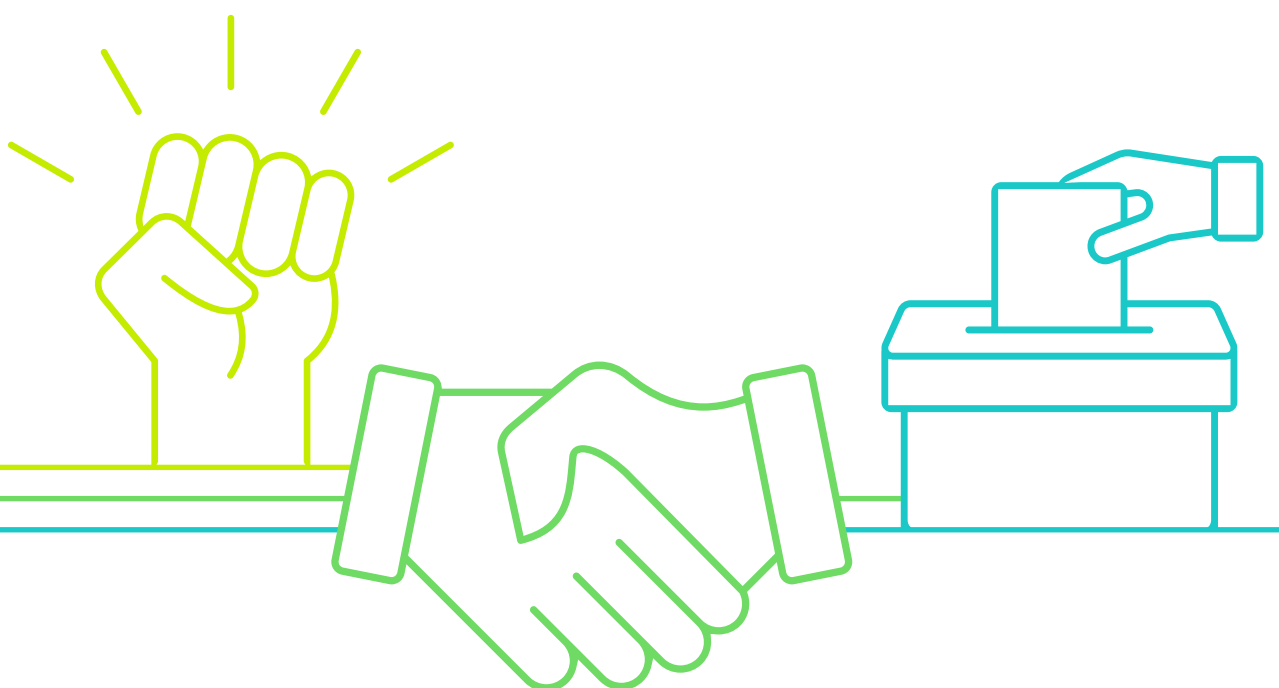
This process is more than just participation; it requires community ownership and action aimed at social and political change. Empowerment involves re-negotiating power dynamics, addressing social, cultural, political, and economic determinants, and building partnerships across sectors. Effective communication and critical thinking are essential for fostering empowerment, allowing communities to understand and influence the forces affecting their lives.

This approach ensures that power is shared both locally and globally, promoting inclusive and resilient communities¹.

In this section we will explore metrics that associate with empowered communities, including:

- Community Owned Assets Density
- Active and Engaged Communities
- Third Sector

¹ World Health Organisation: [Health Promotion](#)



Where are highest densities of community owned assets?

Community-owned assets are resources collectively owned and managed by a community rather than by individual or private entities. These assets are controlled and utilized for the benefit of the entire community, promoting shared responsibility. Examples of community-owned assets include community centres, parks, libraries, and community gardens.

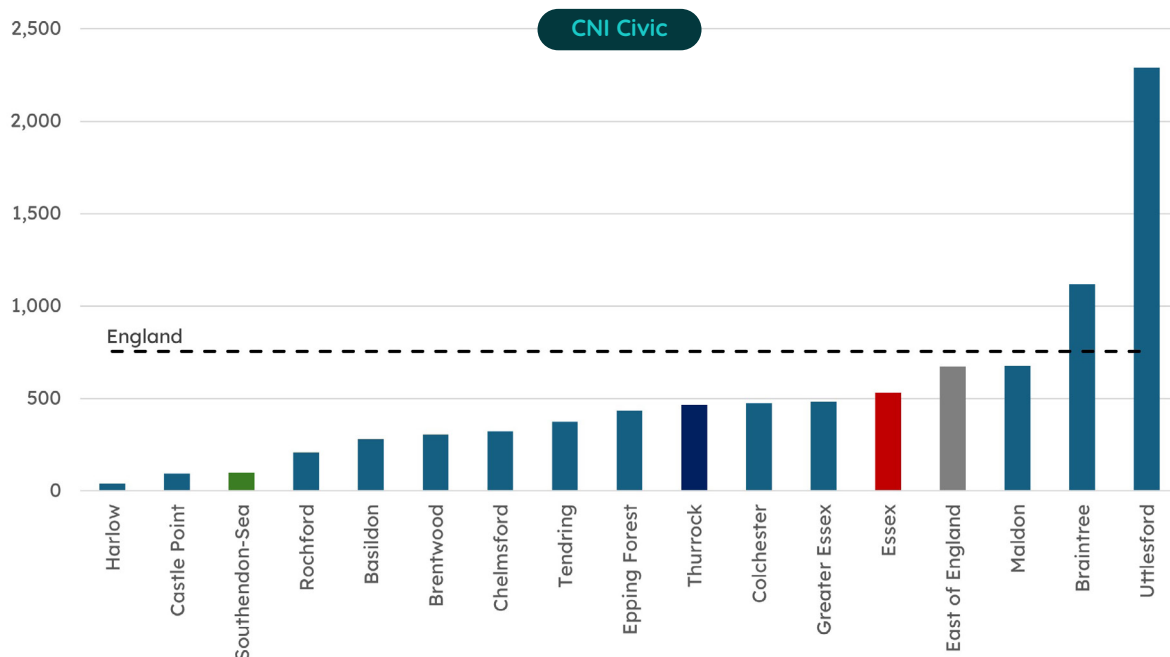
Community Owned Asset Rate¹: Overall, Essex has a lower density of community-owned assets (531.7 assets per 100,000

population) compared to the national average (755.9). Among Essex districts (including Greater Essex), there are significant disparities in availability of these assets, ranging from 40.3 to 2291.2 per 100,000 population.

Only **Uttlesford** (2291.2) and **Braintree** (1119.0) have higher rates of community-owned assets, surpassing the national average. In contrast, the lowest rates are found in **Harlow** (40.3), **Castle Point** (92.9), and **Southend** (97.65).

¹ Community owned assets divided by the number of people living inside or within 1km of the local area boundary. The rate is expressed per 100,000 population. Figures are compiled using data from Power to Change, the Community Land Trust Network, Co-operatives UK, Plunkett Foundation and Locality and Keep it in the Community.

CNI 2023. Community owned assets rate per 100,000 population (2023), Greater Essex



Where are active and engaged communities found?

Voter Turnout at Local Elections: In Essex, the voter turnout rate at local elections (43.5%) is slightly lower than the national average (46.7%). Among the districts of Essex (including Greater Essex), the lowest turnout rates are found in Thurrock (35.2%), Basildon (36.6%), Harlow (38.7%), and Epping Forest (38.9%).

Have Taken Part in Consultations About Local Services or Issues: The rate of residents taking part in consultations about local services or issues in Essex (19.3%) is similar to the national average (19.2%). However, among Essex districts (including Greater Essex) the lowest rates are found in Harlow (16.9%), Thurrock (16.9%), and Basildon (17.4%).

Have Taken Part in Community Groups, Clubs or Organisations: The rate of residents in Essex taking part in community groups (65.2%) is slightly higher compared to the national average

(64.1%). However, among the Essex districts (including Greater Essex), the lowest rates are found in Harlow (57.1%), Thurrock (59.3%) and Basildon (60.6%).

Have Taken Part in any Civic Engagement: Essex residents are equally likely taking part in any civic engagement compared to the national average (both at 45.2%). However, among Essex districts, the lowest rates are found in Harlow (40.7%), Thurrock (41.5%), and Basildon (42.5%).

Engaged in Formal or Informal Volunteering in the Last Month: The rate of Essex residents who engaged in volunteering in the last month is (64%) is slightly higher than the national average (63%). However, Harlow (58.3%), Thurrock (59.4%), and Basildon (60.8%) has the lowest rates of residents engaging in volunteering among Essex districts (including Greater Essex).



CNI 2023: Active and Engaging Community, Greater Essex

Area	CNI Active Voter Turnout at Local Elections (2022)	CNI Active Have taken part in a consultation about local services or issues in your local area (2021)	CNI Active Have taken part in community groups clubs or organisations (2021)	CNI Active Taken part in any civic engagement (2021)	CNI Active Engaged in formal or informal volunteering in the last month (2021)
	%	%	%	%	%
England	46.7	19.2	64.1	45.2	63
East of England	45.4	19.5	65	45.3	63.9
Essex	43.5	19.3	65.2	45.2	64
Greater Essex	42.6	19	64.6	44.9	63.5
Basildon	36.6	17.4	60.6	42.5	60.8
Braintree	43.4	19.2	64.5	44.7	63.9
Brentwood	43.8	20.1	67.5	46.7	65.4
Castle Point	42.3	19.7	68.3	46.2	65.5
Chelmsford	47.3	19.7	66.4	46.2	64.7
Colchester	43.4	19.8	66.3	46.3	64.5
Epping Forest	38.9	19	64.5	44.9	63.4
Harlow	38.7	16.4	57.1	40.7	58.3
Maldon	45.5	20.4	67.9	46.3	66.1
Rochford	42.9	20	68.3	46.4	65.8
Tendring	45	19.9	66.4	45.8	65.2
Uttlesford	61.4	21.1	68.3	47.4	66.8
Southend-on-Sea	42	19.1	64.6	45.4	63.1
Thurrock	35.2	16.9	59.3	41.5	59.4

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

The importance of the third sector organisations

Third sector organisations, which includes nonprofits, charities, and community groups, play an important role in empowering communities¹.

Service provision: Essential services such as health, education, social care. These services help address gaps that may not be fully covered by the public or private sectors².

Community engagement: Third sector organisations actively engage with community members, encouraging participation and fostering a sense of ownership and responsibility. Additionally, this engagement helps communities to identify their needs and work collectively towards solutions.

Funding: Funding for third sector organisations can come from various sources, including government grants,

private donations, and other financial contributions³. This funding is crucial for the sector, enabling it to provide essential services and support to communities. Without consistent financial support, these organisations may struggle to sustain their activities, which can negatively impact the communities they serve⁴.

Volunteering: By promoting volunteering, third sector organisations help build social capital. Additionally, volunteers gain skills, confidence, and sense of purpose, which can lead to greater community empowerment^{5,6}.

Advocacy and Representation: Third sector organisations often advocate for the rights and needs of their communities, giving a voice to those who might otherwise be unheard⁷.

1 [Empowering communities: References | OpenLearn - Open University](#)

2 The third sector delivering public services: an evidence review (2010) via [working-paper-20.pdf](#)

3 [Finding funding for charities and voluntary organisations](#)

4 [Vital third sector counselling services need reset of funding relationships](#)

5 [The Importance of Volunteering | Coalition for Personalised Care](#)

6 [Third Sector Training - Why Volunteer?](#)

7 The Values and value of the third sector (2024) via [ENG_Value-and-Value-of-the-Third-Sector.pdf](#)

Strength of the third sector

According to the Voluntary and Community Sector Contribution to society report, the sector has a significant impact on the economy. The voluntary sector contributed £17.8bn in 2020/21 to the UK economy, which equated to 0.8% of total gross domestic product (GDP)¹. The UK Civil Society Almanac (2024) indicates that the voluntary sector employed almost 1 million people, representing 3% of the UK workforce².

Third Sector Organisations: Overall, Essex has a lower rate of third sector organisations (381 per 100,000 population) compared to the national average (445). Among Essex districts (including Greater Essex) this is particularly evident in Basildon (237), Castle point (244), and Thurrock (313).

National Lottery Community Fund Grant Funding: Essex has a considerably higher success rate in securing this funding (£56k per 1,000 population) compared to the national average (£38k). However, within Essex districts, Rochford has a considerably lower success rate (£18k).

Major Grant Funders: Essex has a much lower award success rate from major grant funders (£1.7k per person) compared to the national average (£3.1k). Within Essex districts, the lowest rates are found in Maldon (£424), Epping Forest (£525), and Rochford (£751).

Third sector trends:

Many third sector organisations are experiencing a decline in traditional funding sources such as government grants and donations, leading to increasing competition for available funds³. Funders are prioritizing organisations that can demonstrate clear, measurable impacts, which is pushing third sector organisations to adopt more rigorous monitoring and evaluation practices⁴.

¹ [Voluntary and community sector contribution to society - House of Lords Library](#)

² [UK Civil Society Almanac 2024 | NCVO](#)

³ [Voluntary Third-Sector Trends | Community Foundation](#)

⁴ [The Road Ahead 2024: Opportunities and challenges for the voluntary sector | NCVO](#)

CNI 2023: Strength of the third sector

Area	CNI Active Third Sector organisations (2023)	CNI Active The National Lottery Community Fund grant funding 2004-2021	CNI Active Total amount awarded from major grant funders per head (2024)
	Rate per 100,000 population	Rate per 1,000 population (£)	Rate per person (£)
England	445.53	£37,984.08	£3,101.07
East of England	435.49	£62,975.87	£2,267.47
Essex	381.31	£56,141.88	£1,750.37
Greater Essex	377.14	£58,028.71	£1,667.91
Basildon	237.76	£61,003.70	£886.49
Braintree	358.32	£31,025.36	£852.01
Brentwood	456.47	£45,890.12	£971.15
Castle Point	244.06	£39,344.65	£636.93
Chelmsford	414.02	£69,382.05	£5,951.88
Colchester	410.51	£84,501.92	£3,253.99
Epping Forest	423.74	£30,572.03	£525.55
Harlow	494.66	£87,023.84	£1,004.58
Maldon	402.64	£57,497.88	£424.06
Rochford	286.64	£18,556.34	£751.84
Tendring	359.19	£71,552.27	£990.82
Uttlesford	589.77	£43,656.47	£992.99
Southend-on-Sea	404.61	£76,582.28	£1,384.50
Thurrock	313.21	£55,137.41	£1,249.47

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Small businesses and local communities

Small business are the lifeblood of local economies as described by the National Business Association. They operate with agility and adaptability and possess a deeper understanding of community needs compared to their corporate counterparts. Additionally, they often serve as gathering places for residents, fostering a greater sense of belonging and community¹.

Access to financial resources for Small and Medium-sized Enterprises (SME) is crucial. It enables SMEs to grow, innovate, and create jobs, which in turn can boost the local economy. Higher lending per person, means that SMEs have better access to the capital they need to grow. Higher lending can also stimulate local economies by enabling business to expand, hire more employees and contribute to economic development².

- **Small and Medium-sized Enterprises (SME) Lending:** The SME lending debt rate is slightly higher in Essex (£2,132 per person) compared to the national average (£2,066). However, within Essex districts (including Greater Essex), the lowest rates are found in Castle Point (£1,255), Rochford (£1,524), Tendring (£1,546), Thurrock (£1,711), and Southend (£1,769). In contrast, Epping Forest has the highest lending rate per person (£4,026).
- **Small Businesses:** (Local Business Units with 0-4 Employees): Overall, Essex has a higher proportion of small businesses employing up to 4 people (73.4%) compared to the national average (71.8%). However, within Essex districts, Tendring (69.1%) and Basildon (69.6%) have the lowest rates.

¹ [The Important Role of Small Businesses in Local Communities](#)

² [FSB | Barriers to small firms' access to finance could hold back UK economic recovery, new report warns](#)

SME lending and small businesses, Greater Essex

Area	CNI Active SME lending debt per person aged 18+ (2021)	CNI Active VAT based local units employing 0 to 4 people (2023)
	Rate per person (£)	%
England	£2,066	71.80%
East of England	£2,056	72.70%
Essex	£2,132	73.40%
Greater Essex	£2,058	73.60%
Basildon	£2,185	69.60%
Braintree	£1,866	72.00%
Brentwood	£2,441	75.40%
Castle Point	£1,255	77.60%
Chelmsford	£1,949	73.10%
Colchester	£1,819	70.80%
Epping Forest	£4,026	77.60%
Harlow	£1,904	71.60%
Maldon	£2,475	75.10%
Rochford	£1,524	76.60%
Tendring	£1,546	69.10%
Uttlesford	£2,857	76.50%
Southend-on-Sea	£1,711	74.20%
Thurrock	£1,769	74.80%

Quantiles are defined relative to national benchmarks (i.e. Bottom 20% is Bottom 20% of all local authorities in England).

0% - 20%

20% - 40%

40% - 60%

60% - 80%

80% - 100%

Which indicators impact empowered communities most in Essex?

Volunteering: In addition to the volunteering engagement activity, Essex Residents Survey (2023) provides further insights into residents who have given unpaid help to any group, club or organisation in the last 12 months. The latest data suggests that overall, out of 6,166 Essex residents, 34% said that they provided such help. Among the districts of Essex, the highest proportion of residents who provided such help were in Brentwood (45%), Chelmsford (41%) and Uttlesford (40%). The lowest proportions were in Harlow (25%) and Basildon (28%)¹.

Furthermore, the Essex Residents Survey 2023 provide valuable insights into the demographics of those more likely to volunteer. According to the survey, **males, retired residents, parents of dependant and school age children**, and individuals from **higher income households** are more likely to have volunteered in the last 12 months².

Volunteering trends

Volunteering trends indicate notable shifts in participation. The Community Life Survey reports a **decline in both formal and informal volunteering** in the UK³. The most significant barriers cited are work commitments and a preference for other leisure activities during spare time⁴.

However, the British Heart Foundation (BHF) highlights an **increasing trend in micro-volunteering**. This form of volunteering is ad hoc, allowing individuals to fit it around other commitments. It is flexible and doesn't require regular shifts, making it more accessible for those with busy schedules. Additionally, BHF notes a shift in the average age of volunteers, which has decreased from 50 years to 30 since the pandemic⁵.

1 [Essex Resident Survey 2023 Dashboard & Reports | Essex Open Data](#)

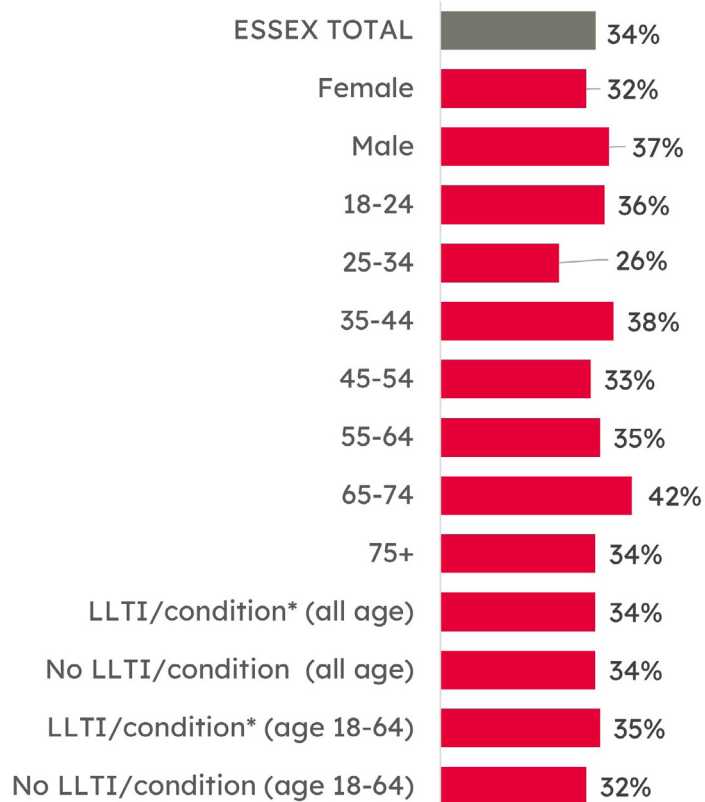
2 [Essex Resident Survey 2023 Dashboard & Reports | Essex Open Data](#)

3 [Essex Resident Survey 2023 Dashboard & Reports | Essex Open Data](#)

4 [Community Life Survey 2021/22: Volunteering and charitable giving - GOV.UK](#)

5 [Is 'micro-volunteering' the next Gen Z trend? - BHF](#)

Overall, about how often over the last 12 months have you given unpaid help to any group(s), club(s) or organisation(s)?



Further note on Community Engagement

According to the World Health Organization (WHO), community engagement is both an art and a science, essential for developing relationships and collective actions toward common goals.

It is guided by principles such as trust, accessibility, contextualization, equity, transparency, and autonomy. Successful community engagement depends on enabling factors like governance, leadership, decision-making,

communication, collaboration and partnership, and resources¹.

Understanding the level of people's participation is an essential consideration in developing engagement strategies, and empowerment comes with the highest degree of participation. The WHO recommends four approaches to community engagement, which are summarized in the accompanying figure below².

1 Community engagement via World Health Organisation (2020). [9789240010529-eng.pdf](#)

2 Community engagement via World Health Organisation (2020). [9789240010529-eng.pdf](#)

The World Health Organisation recommend four approaches to community engagement¹

Level 1. Community-oriented: the community is **informed** and mobilized to participate in addressing immediate short-term concerns with strong external support.

Level 2. Community-based: the community is **consulted and involved** to improve access to health services and programmes by locating interventions inside the community with some external support.

Level 3. Community-managed: there is **collaboration** with leaders

of the community to enable priority settings and decisions from the people themselves with or without external support of partners.

Level 4. Community-owned: community assets are fully mobilized and the community is **empowered** to develop systems for self-governance, establish and set priorities, implement interventions and develop sustainable mechanisms for health promotion with partners and external support groups as part of a network.

1 Community engagement via World Health Organisation (2020). [9789240010529-eng.pdf](#)

Case study: Community Empowerment in NW England

Background: Community empowerment is a central theme in global and national policies aimed at increasing social and health equity. This case study examines an initiative in nine disadvantaged neighbourhoods in NW England, focusing on the Community Research and Engagement Network (COREN) and its efforts to address social inequalities.

Objectives:

- Enhance collective capabilities to act on social inequalities driving health disparities.
- Shift local power dynamics to enable residents to operate as equals alongside professionals and academics.

- Value the experiential knowledge of residents as equal to that of professionals.

Implementation: The COREN model was implemented as part of the Neighbourhood Resilience Programme (NRP) from 2014 to 2019. The initiative involved residents, public agency staff, businesses, and civil society organizations working together to tackle local adversities. The nine neighbourhoods selected were among the most deprived in the country, with poor health indicators and limited experience with major place-based initiatives

Outcomes:

The evaluation of the COREN initiative highlighted several positive impacts:

- **Perceived Influence:** Residents felt they had more influence over local decisions.
- **Social Connections:** Increased social connectedness and cohesion among community members.
- **Feeling Valued:** Residents felt their contributions and knowledge were valued.
- **Cultural, Economic, Environmental, and Governance Impacts:** The initiative led to improvements in various aspects of community life.

Source: [Strengthening community empowerment initiatives as a route to greater equity: an English case study | Community Development Journal | Oxford Academic](#)

Section 3:

Annex

1A. CNI 2023: number of LSOAs in each quintile by Greater Essex district

Civic Assets domain	0-20%	20-40%	40-60%	60-80%	80-100%	Grand Total
Basildon	36	57	10	9	0	112
Braintree	18	34	26	7	3	88
Brentwood	12	11	16	9	0	48
Castle Point	51	6	0	0	0	57
Chelmsford	24	24	15	31	19	113
Colchester	32	44	24	9	8	117
Epping Forest	19	21	17	11	10	78
Harlow	18	12	5	20	3	58
Maldon	22	11	2	6	0	41
Rochford	10	32	10	1	0	53
Southend-on-Sea	20	13	29	46	0	108
Tendring	51	20	13	4	1	89
Thurrock	30	30	27	9	4	100
Uttlesford	29	12	2	2	4	49
Grand Total	372	327	196	164	52	1111

1A. CNI 2023: percentage of LSOAs in each quintile by Greater Essex district

Civic Assets domain	0-20%	20-40%	40-60%	60-80%	80-100%
Basildon	32%	51%	9%	8%	0%
Braintree	20%	39%	30%	8%	3%
Brentwood	25%	23%	33%	19%	0%
Castle Point	89%	11%	0%	0%	0%
Chelmsford	21%	21%	13%	27%	17%
Colchester	27%	38%	21%	8%	7%
Epping Forest	24%	27%	22%	14%	13%
Harlow	31%	21%	9%	34%	5%
Maldon	54%	27%	5%	15%	0%
Rochford	19%	60%	19%	2%	0%
Southend-on-Sea	19%	12%	27%	43%	0%
Tendring	57%	22%	15%	4%	1%
Thurrock	30%	30%	27%	9%	4%
Uttlesford	59%	24%	4%	4%	8%
Grand Total	33%	29%	18%	15%	5%

1B. CNI 2023: number of LSOAs in each quintile by Greater Essex district

Connectedness domain	0-20%	20-40%	40-60%	60-80%	80-100%	Grand Total
Basildon	5	30	42	34	1	112
Braintree	34	43	9	2	0	88
Brentwood	1	11	15	17	4	48
Castle Point	5	14	27	10	1	57
Chelmsford	17	32	43	20	1	113
Colchester	53	44	16	4	0	117
Epping Forest	0	4	14	19	41	78
Harlow	1	7	17	17	16	58
Maldon	33	8	0	0	0	41
Rochford	17	21	9	6	0	53
Southend-on-Sea	29	31	38	10	0	108
Tendring	84	5	0	0	0	89
Thurrock	1	3	13	28	55	100
Uttlesford	6	22	14	4	3	49
Grand Total	286	275	257	171	122	1111

1B. CNI 2023: percentage of LSOAs in each quintile by Greater Essex district

Connectedness domain	0-20%	20-40%	40-60%	60-80%	80-100%
Basildon	4%	27%	38%	30%	1%
Braintree	39%	49%	10%	2%	0%
Brentwood	2%	23%	31%	35%	8%
Castle Point	9%	25%	47%	18%	2%
Chelmsford	15%	28%	38%	18%	1%
Colchester	45%	38%	14%	3%	0%
Epping Forest	0%	5%	18%	24%	53%
Harlow	2%	12%	29%	29%	28%
Maldon	80%	20%	0%	0%	0%
Rochford	32%	40%	17%	11%	0%
Southend-on-Sea	27%	29%	35%	9%	0%
Tendring	94%	6%	0%	0%	0%
Thurrock	1%	3%	13%	28%	55%
Uttlesford	12%	45%	29%	8%	6%
Grand Total	26%	25%	23%	15%	11%

1C. CNI 2023: number of LSOAs in each quintile by Greater Essex district

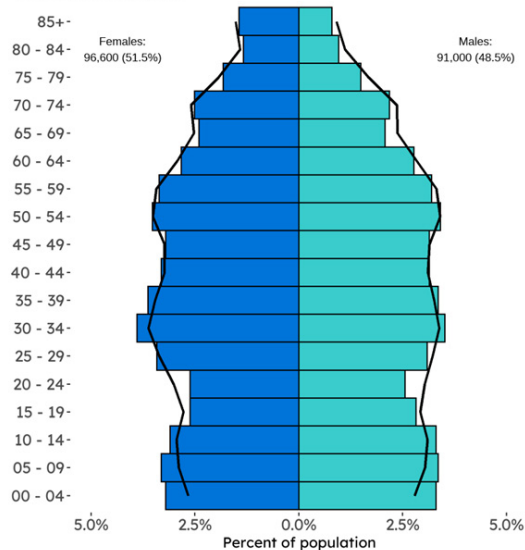
Active and Engaged Community domain	0-20%	20-40%	40-60%	60-80%	80-100%	Grand Total
Basildon	40	25	29	10	8	112
Braintree	22	15	17	13	21	88
Brentwood	3	4	11	18	12	48
Castle Point	13	13	12	15	4	57
Chelmsford	9	17	29	42	16	113
Colchester	25	22	28	25	17	117
Epping Forest	16	12	17	22	11	78
Harlow	18	30	9	1	0	58
Maldon	1	7	10	13	10	41
Rochford	7	10	22	9	5	53
Southend-on-Sea	18	28	31	24	7	108
Tendring	23	11	24	17	14	89
Thurrock	45	27	17	10	1	100
Uttlesford	0	2	10	11	26	49
Grand Total	240	223	266	230	152	1111

1C. CNI 2023: percentage of LSOAs in each quintile by Greater Essex district

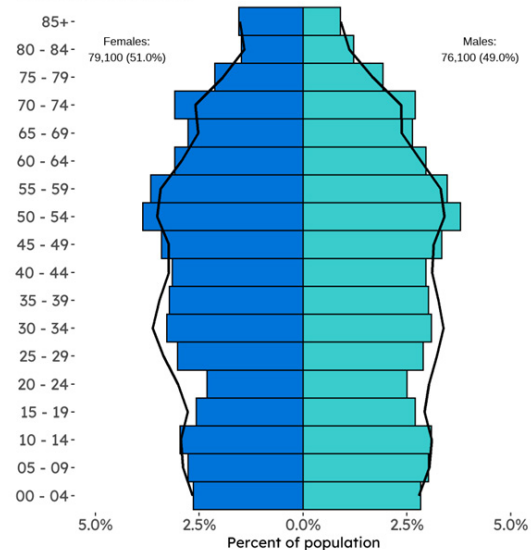
Active and Engaged Community domain	0-20%	20-40%	40-60%	60-80%	80-100%
Basildon	36%	22%	26%	9%	7%
Braintree	25%	17%	19%	15%	24%
Brentwood	6%	8%	23%	38%	25%
Castle Point	23%	23%	21%	26%	7%
Chelmsford	8%	15%	26%	37%	14%
Colchester	21%	19%	24%	21%	15%
Epping Forest	21%	15%	22%	28%	14%
Harlow	31%	52%	16%	2%	0%
Maldon	2%	17%	24%	32%	24%
Rochford	13%	19%	42%	17%	9%
Southend-on-Sea	17%	26%	29%	22%	6%
Tendring	26%	12%	27%	19%	16%
Thurrock	45%	27%	17%	10%	1%
Uttlesford	0%	4%	20%	22%	53%
Grand Total	22%	20%	24%	21%	14%

2. Greater Essex population distribution

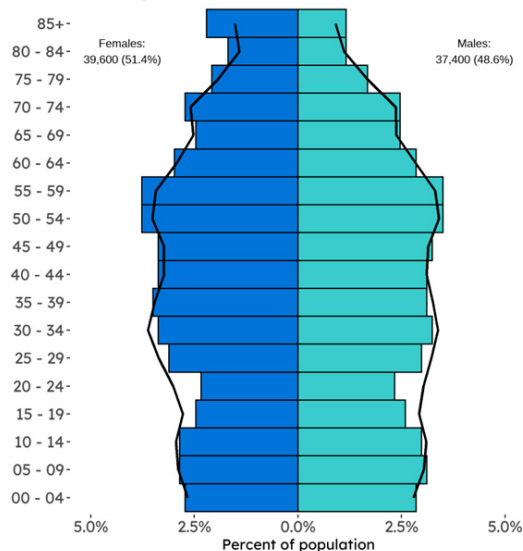
Basildon population demographics - 2021 census
Black line is England



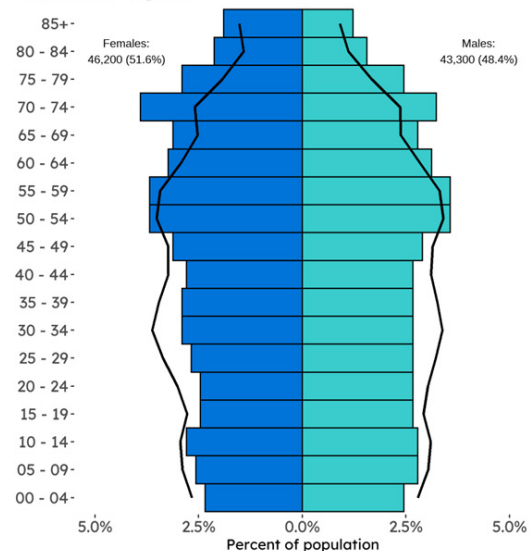
Braintree population demographics - 2021 census
Black line is England



Brentwood population demographics - 2021 census
Black line is England

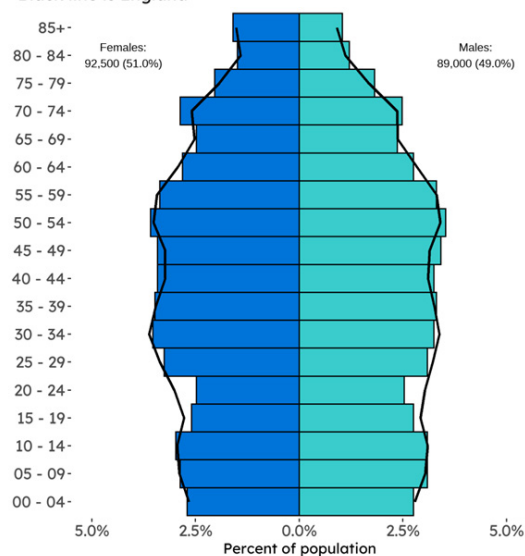


Castle Point population demographics - 2021 census
Black line is England



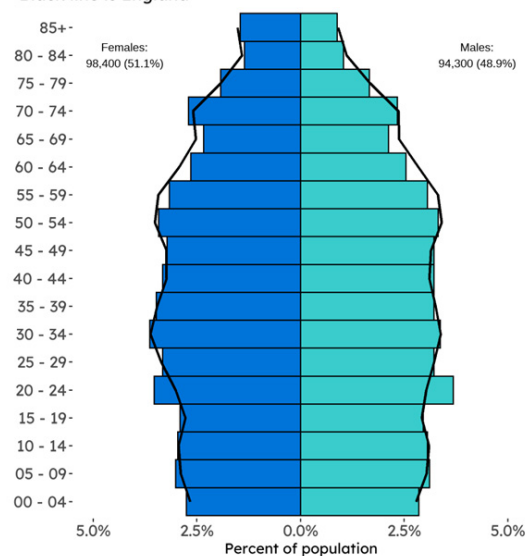
Chelmsford population demographics - 2021 census

Black line is England



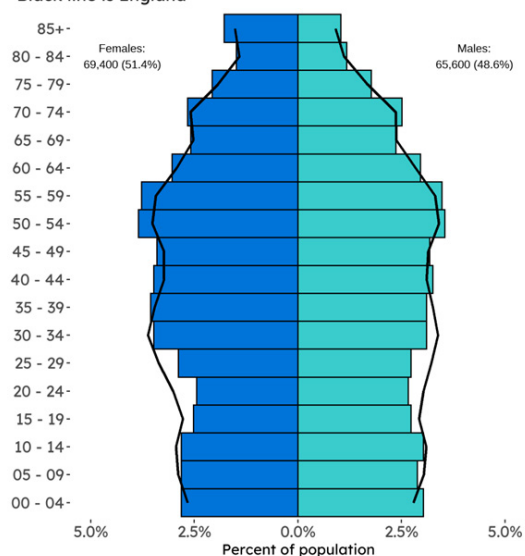
Colchester population demographics - 2021 census

Black line is England



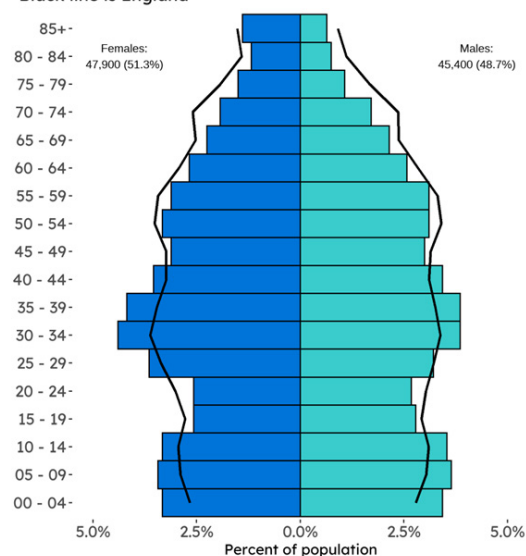
Epping Forest population demographics - 2021 census

Black line is England



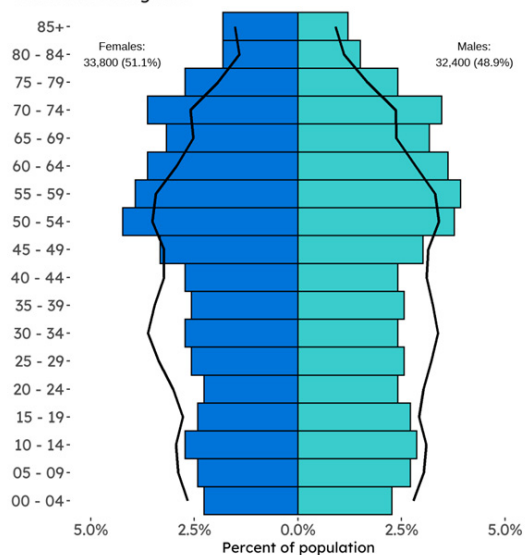
Harlow population demographics - 2021 census

Black line is England



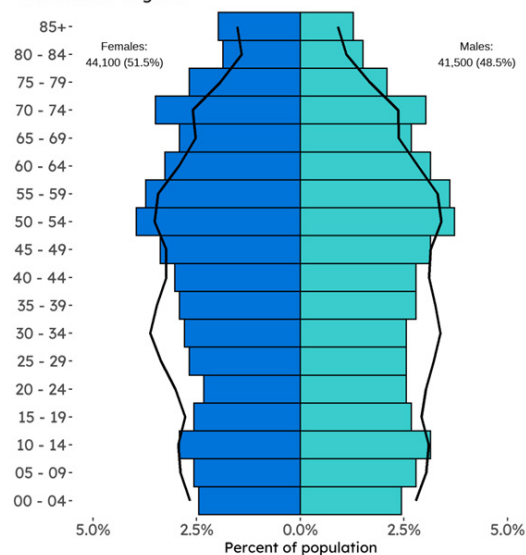
Maldon population demographics - 2021 census

Black line is England

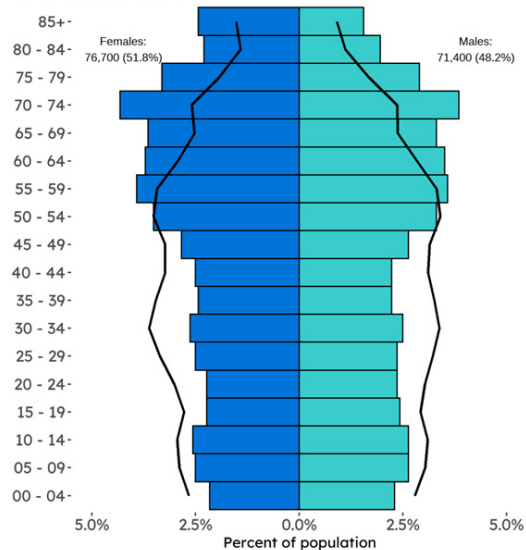


Rochford population demographics - 2021 census

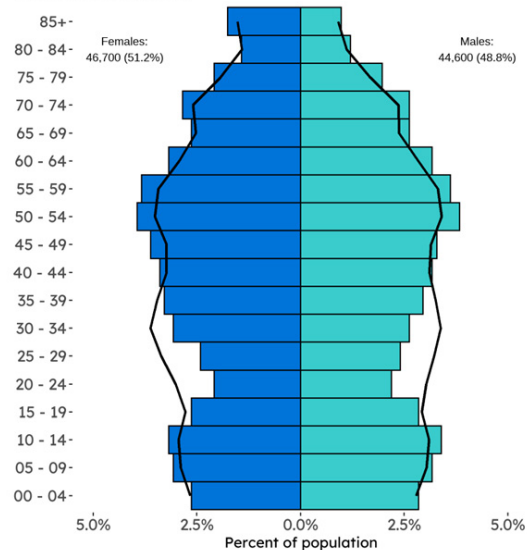
Black line is England



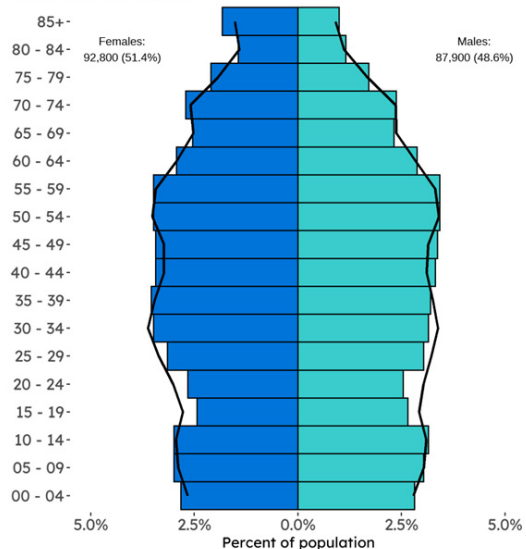
Tendring population demographics - 2021 census
Black line is England



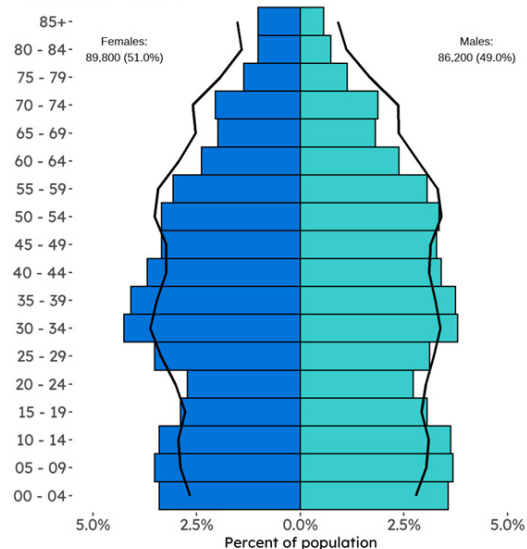
Uttlesford population demographics - 2021 census
Black line is England



Southend population demographics - 2021 census
Black line is England



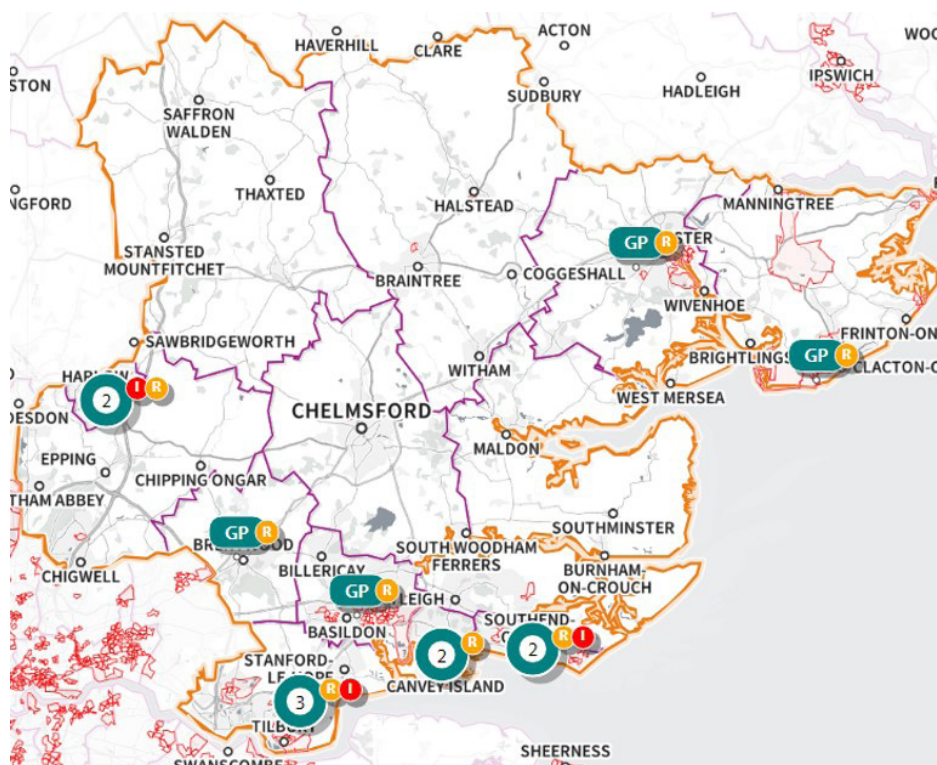
Thurrock population demographics - 2021 census
Black line is England



3. Healthy communities – GP surgeries

Town	Postcode	CQC overall rating
Basildon	SS14 2ER	Requires improvement
Benfleet	SS7 2NA	Requires improvement
Brentwood	CM15 9DY	Requires improvement
Canvey Island	SS8 0JH	Requires improvement
Colchester	CO3 4LN	Requires improvement
East Tilbury	RM18 8SD	Requires improvement
Grays	RM17 5NS	Inadequate
Harlow	CM17 9TG	Inadequate
Harlow	CM18 6YJ	Requires improvement
Horndon-on-The-Hill	SS17 8LB	Requires improvement
Jaywick	CO15 2NB	Requires improvement
Southend-on-Sea	SS2 4UB	Requires improvement
Westcliff-on-Sea	SS0 7HN	Inadequate

GP surgeries CQC ratings – Requires Improvement & Inadequate, Greater Essex, 2024¹



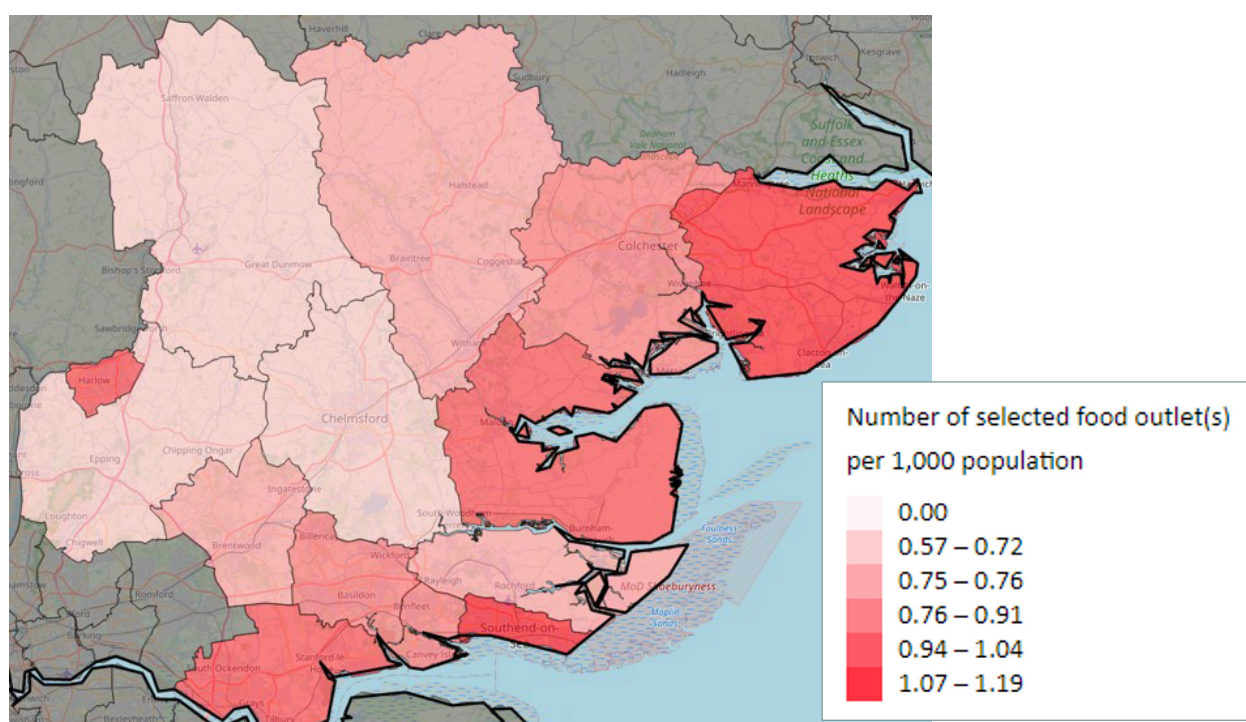
¹ CQC reports via Shape [SHAPE Place](#)

4A. Healthy communities – healthy food environment (Fast-food outlets)

Area	Number of Takeaways	Rate per 1,000 population
England	59,120	1.05
East of England	4,563	0.89
Essex	1,275	0.85
Greater Essex	1,665	0.89
Basildon	176	0.94
Braintree	115	0.75
Brentwood	59	0.76
Castle Point	82	0.91
Chelmsford	130	0.72

Area	Number of Takeaways	Rate per 1,000 population
Colchester	168	0.85
Epping Forest	89	0.67
Harlow	93	1.07
Maldon	68	1.04
Rochford	67	0.76
Tendring	175	1.19
Uttlesford	53	0.57
Thurrock	186	1.06
Southend	204	1.12

Fast-food outlets density rate per 1,000 population, Greater Essex 04/2024¹



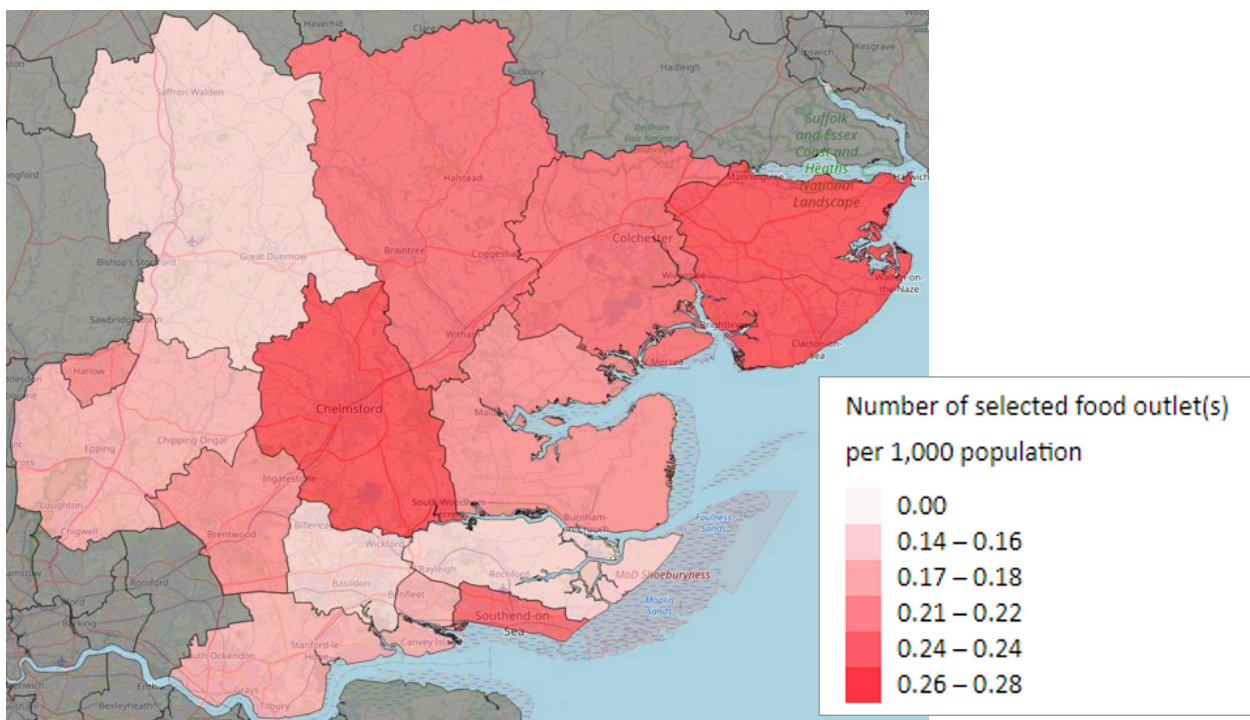
¹ Food Environment Assessment Tool (FEAT). Data as at 04/2024

4B. Healthy communities – healthy food environment (Supermarkets)

Area	Number of Supermarkets	Rate per 1,000 population
England	111,68	0.20
East of England	1,241	0.20
Essex	318	0.21
Greater Essex	392	0.21
Basildon	30	0.16
Braintree	36	0.24
Brentwood	17	0.22
Castle Point	16	0.18
Chelmsford	50	0.28

Area	Number of Supermarkets	Rate per 1,000 population
Colchester	48	0.24
Epping Forest	23	0.17
Harlow	19	0.22
Maldon	14	0.21
Rochford	13	0.15
Tendring	39	0.26
Uttlesford	13	0.14
Thurrock	31	0.18
Southend	43	0.24

Supermarkets density rate per 1,000 population, Greater Essex 04/2024¹








¹ Food Environment Assessment Tool (FEAT). Data as at 04/2024

This information is issued by:
Essex County Council

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