

BOTESDALE &
RICKINGHALL

NEIGHBOURHOOD PLAN

2017-2036



BOTESDALE &
RICKINGHALL
NEIGHBOURHOOD
PLAN

PEOPLE AND POPULATION REPORT

November 2018

Prepared by Botesdale and Rickinghall Parish Councils



Botesdale, Rickinghall Inferior & Rickinghall Superior Neighbourhood Plan

People and Population Review

This report considers some key characteristics of the population of the Neighbourhood Plan area including current trends¹. An overview of key population data for the three Parishes can be found in the appendices²:

Appendix 1 – Botesdale Parish Data Sheet

Appendix 2 – Rickinghall Inferior Parish Data Sheet

Appendix 3 – Rickinghall Superior Parish Data Sheet

Acknowledgements

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- Natacha Bines, JSNA Programme Manager, Suffolk County Council
- Mark Cobbold, Headteacher, St Botolph's CEVC Primary
- Ian Poole, Places4People Planning Consultancy

Jo Broadbent

¹ NB - due to the small number of residents in the neighbourhood plan area, small differences in statistics from Suffolk or England averages may not be statistically significant (i.e. may be due to chance), but statistical significance has not been tested.

² Suffolk Observatory (2017) – downloaded from

https://www.suffolkobservatory.info/population/reports/?geography_id=497928c23d364450be8a312624bc7756&feature_id=E04009178

Summary of Key Points

- The population of Botesdale, Rickinghall Inferior & Rickinghall Superior (BRR) was estimated to be 2,119 in 2015.
- BRR has an older population than typical for England - BRR has far fewer 20-34 year olds than average for England (11.0% compared to 20.3%) and far more 55-89 year olds (39.5% compared to 27.3%).
- Future population projections indicate that by 2035 the population of Mid Suffolk is expected to increase by 15%. Applying the age-specific Mid-Suffolk projections to BRR suggests that the numbers of those aged under 25 and those of working age will fall slightly, whilst numbers over 65s will increase by 454 (from 525 in 2011; an increase of 86%).
- Ethnic diversity is low in BRR, with only 1.8% of residents of non-White ethnicities and only 3.2% of children attending St Botolph's CEVC Primary in 2015/6 not having English as a first language.
- There is variation in the socio-economic status of residents of the Neighbourhood Plan area. Whilst the area is in general relatively affluent, pockets of disadvantage do exist: data from St Botolph's CEVC Primary shows that around 22% of pupils are eligible for free school meals / Pupil Premium (proxy measures of childhood disadvantage).
- Whilst BRR scores relatively highly on most measures of relative affluence (covering income, education, employment and health), the area is most deprived in relation to i) Barriers to Housing and Services and ii) the Living Environment.
- Social trend data suggests that most BRR residents can be classified as either "Householders living in inexpensive homes in village communities" (58%) or "Well-off owners in rural locations enjoying the benefits of country life" (38%).
- The proportion of BRR residents in bad or very bad health is 4.8% (83), and 6.9% of residents (144) report that their health affects their day to day activities a lot. This is slightly lower than average for England, but the proportion of residents providing unpaid care is higher – 11.3% (235) in BRR compared to 10.3% across England as a whole.
- The most common occupations in BRR are professional, managerial and self-employed roles, and the proportion in these employment categories is higher in BRR than typical for England as a whole. Numbers of non-workers and long-term unemployment are low in BRR.
- Around one third (35%) of adults in BRR are educated to at least degree or higher NVQ level, and around one tenth have no qualifications. This is similar to the pattern across England.

Recommendations - Demographic Issues that the Neighbourhood Plan should consider

- Given the low proportion of 20-34 year olds resident in BRR, the Plan should consider how to make the village more accessible, affordable and attractive to young working age adults and young families. Population projections for Mid Suffolk suggest that the pattern of BRR having an older population than typical for England or Suffolk will persist, with the proportion over 65 increasing substantially. The Neighbourhood Plan should thus explicitly consider:
 - what population profile the community wishes to have in 20 years' time; and
 - how to encourage growth in that direction.
- Given the likely demographic growth in the number of older residents, the BRR community should expect the numbers of those in poorer health and those providing unpaid care to rise. The Plan should consider future access to:
 - housing suitable for older residents with health and mobility needs; and
 - care services.
- Based on the IMD 2015 finding that the Plan area is most deprived in relation to i) Barriers to Housing and Services and ii) the Living Environment, the Neighbourhood Plan should address:
 - the quality of current and new housing;
 - access to services for all in the Plan, area including transport; and
 - road safety.
- Suffolk County Council identifies the following health issues, affecting all age groups living in the community, that could be addressed in part through the Neighbourhood Plan:
 - promoting physical activity; and
 - promoting good mental health, including reducing social isolation.

Useable open space can promote both physical activity and mental wellbeing. Identifying a "special need" for open space in the Neighbourhood Plan may be important if the draft Local Plan preference for on-site open space – residential developments (option OS2) - is adopted. This states that such provision would be required (on sites of at least 1 hectare) "only where this would meet an identified need that can be addressed through on-site provision."

Population of Botesdale, Rickingham Inferior & Rickingham Superior

The 2011 Census³ established that the population of Botesdale, Rickingham Inferior & Rickingham Superior (BRR) was 2,073 people. This was an increase from the 2001 Census⁴, which recorded 1,817 residents within the same defined boundary - an increase of 12% (256 people) in the 10 year period.

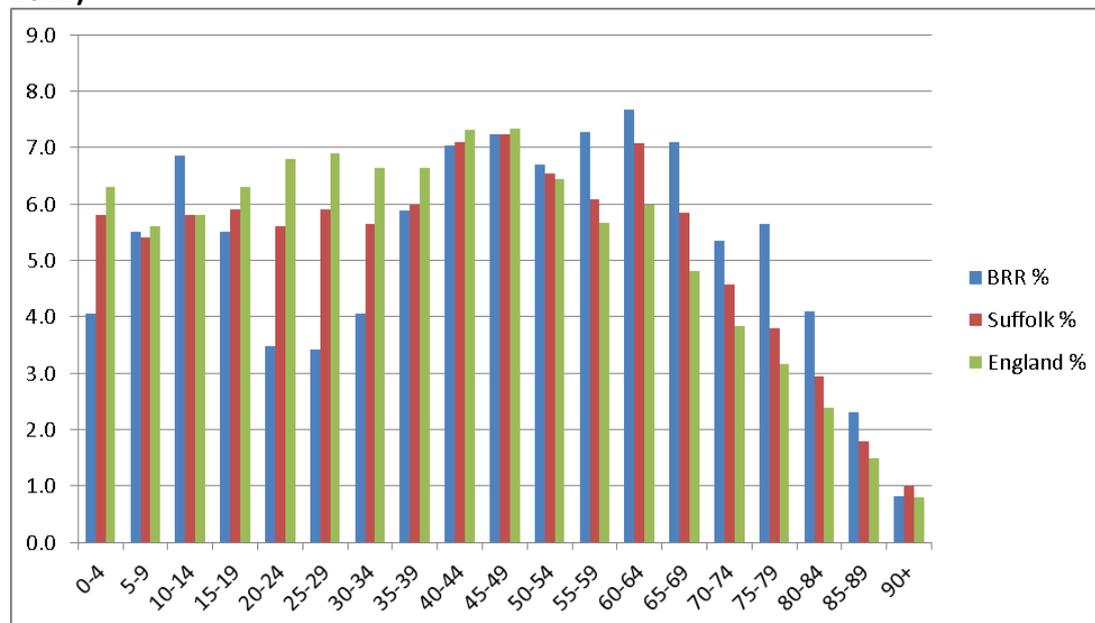
Estimates⁵ suggest that by 2015, the population of the three parishes had increased further to 2,119, a slightly slower rate of increase than in the previous 10 years.

Demographics

The age profile of BRR, based on the 2011 Census (Figure 1), shows that the largest proportion of residents are aged 40 to 69 (43.0%) which is slightly higher than typical for England (37.5%). In general, BRR has an older population than the England average - BRR has far fewer 20-34 year olds (11.0% compared to 20.3%) and far more 55-89 year olds (39.5% compared to 27.3%) than typical for England.

As shown in Figure 1, the number of residents per 5 year age band gradually increases between ages 0 to 14 and ages 25 to 44. This could reflect young families moving into the area. This trend is broadly reflected in anecdotal advice from St Botolph's CVEC Primary, which serves BRR. The Headteacher has advised that, although numbers entering the school in Reception fluctuate (in 2016/17 there were 30 children in the Reception class, but in 2015/16 there were only 15), in general numbers steadily rise during years 1, 2 and 3, so that by year 4 upwards (age 8-9) classes are at or very close to capacity.

Figure 1 – Age Structure of BRR compared to Suffolk and England (5 Year Age bands; ONS, 2011)



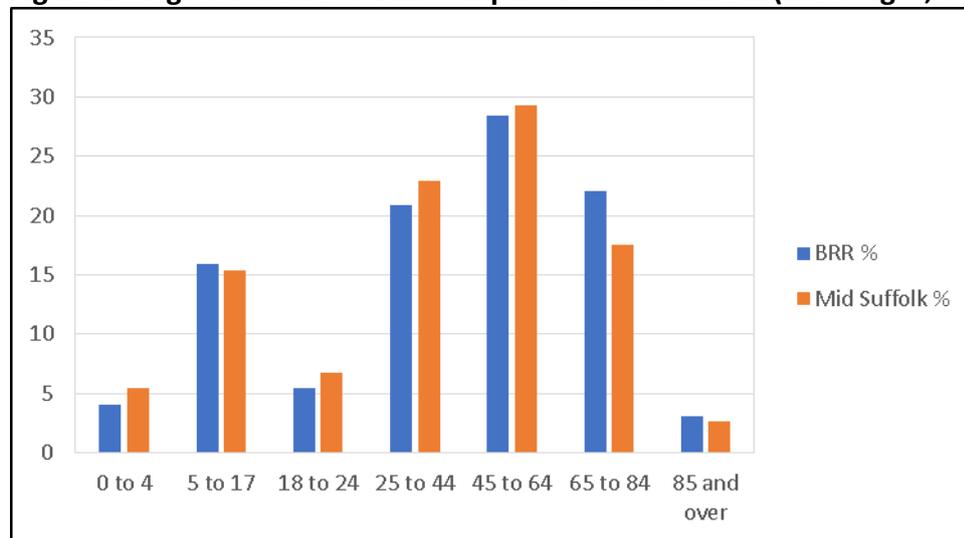
³ ONS Statistics, National Census (2011)

⁴ ONS Statistics, National Census (2001)

⁵ Mid-2015 Population Estimates, ONS (2015) – sourced from Suffolk Observatory
<https://www.suffolkobservatory.info/>

BRR has comparable populations to Mid Suffolk District across most age groups, although with a slightly greater aging population (65+) and a slightly smaller working age population (Figure 2).

Figure 2 – Age Structure of BRR compared to Mid Suffolk (Life Stages; ONS, 2011)



The most notable demographic change between 2001 and 2011 was a 6% decrease in the proportion of 25-44 year olds and a 6% increase in 45-84 year olds. Causes of this are likely to be multi-factorial, including a lack of local starter / affordable homes (identified as a strong need by 57% of local survey respondents), inability to afford a mortgage (identified as a barrier to moving by 20% of respondents who want to move home) or moving away for study or work (7% of respondents who wish to move).

Population Projections

Future population projections by the Office for National Statistics (ONS)⁶ indicate that between 2011 and 2025 the total population of Mid Suffolk is expected to increase by 10% (9,585 residents) and by 2035 by 15% (14,986).

The forecasts also predict the following trends for Mid Suffolk:

- The number of under 25s is likely to stay fairly static until 2025, and fall slightly by 2035
- The number of working-age adults is expected to stay fairly static until 2025, and fall by over 2,000 (4%) by 2035
- The number of over 65s is expected to increase slightly by 2025 and by over 17,000 (90%) by 2035

Applying these age-specific forecasts to the population of BRR, as recorded in 2011, suggests that the population of BRR would increase by 205 (10%) by 2025 and by 321 (15%)

⁶ <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections>

by 2035. Numbers of those aged under 25 and those of working age are predicted to fall, whilst numbers over 65s will increase by 454 from 525 in 2011; an increase of 86% (see Table 1 for age-specific projected changes).

These figures should be viewed as indicative only, as they are dependent on a large number of factors, including housing development permissions. An assessment of the population impact of each of the four settlement distribution options outlined in the Mid Suffolk Local Plan (Consultation version, September 2017⁷) has not been possible as the District has not published the combined population totals for each of the settlement categories outlined in the Plan. Botesdale and Rickingham Superior are defined as “Core Villages” – all Core Villages are proposed to collectively provide housing growth of between 15-30% of the total required, depending on the option. Rickingham Inferior is designated as a “Hinterland Village” – all Hinterland Villages are proposed to provide a combined 5-15% of overall growth, depending on the option chosen.

Table 1 – Projected change in BRR Resident Population (ONS, 2011) applying Mid Suffolk Population Projections (ONS, 2014)

Age	2011	Projection			
	Pop. No.	2025		2035	
	Pop. No.	Pop. No.	% Increase	Pop. No.	% Increase
0-4	84	80	-5	78	-7
5-9	183	185	1	186	2
10-14	23	23	1	23	1
15-19	163	164	1	161	-2
20-24	72	63	-13	70	-3
25-29	71	72	2	77	8
30-34	84	77	-8	68	-19
35-39	122	117	-4	112	-8
40-44	146	144	-1	154	6
45-49	150	125	-17	139	-7
50-54	139	139	0	130	-6
55-59	151	177	17	140	-7
60-64	159	175	10	163	2
65-69	147	205	39	245	67
70-74	111	140	26	175	58
75-79	117	252	116	253	116
80-84	85	119	40	147	73
85-89	48	81	69	142	196
90+	17	17	0	17	0
All Ages	2072	2277	10	2393	15

⁷ Available at - <http://www.midsuffolk.gov.uk/planning/planning-policy/new-joint-local-plan/joint-local-plan-consultation-document/>

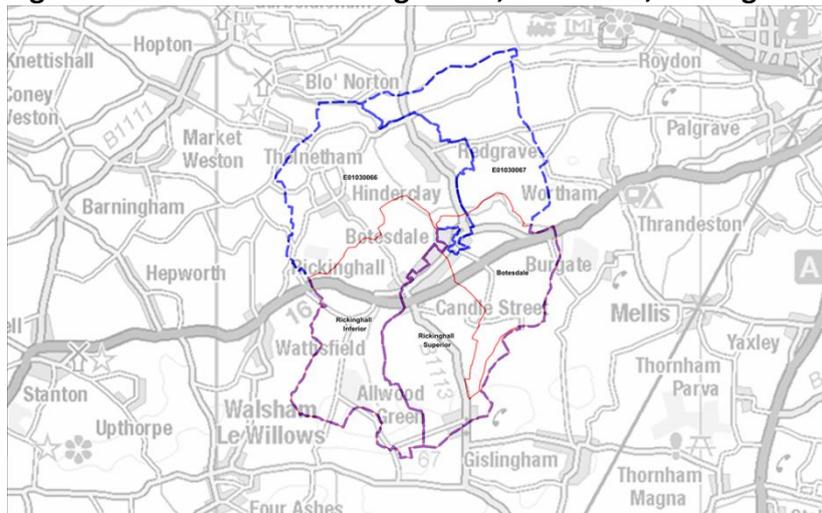
Population Diversity

There is a slightly higher proportion of women in BRR (51.3%) compared to men (48.7%) and the population is almost entirely White at 98.2%, with only 1.8% of other ethnicities as recorded in the 2011 Census. The villages include small numbers of people with Black Caribbean and Asian backgrounds, and people of mixed ethnicities, as detailed in the Appendices. Of the White population, over 98% are White British, with small numbers of people with other white backgrounds including Gypsies and Travellers. BRR's White population is 3% higher than Suffolk's (95.2%) and 13% higher than England's (85.4%). Only 3.2% of children attending St Botolph's CEVC Primary in 2015-16 did not have English as a first language, compared to 20% across England⁸.

Deprivation

Relative affluence / deprivation between local areas is measured by the Index of Multiple Deprivation (IMD, 2015)⁹, which is based on 37 separate indicators, grouped into 7 domains. It is measured by Lower Super Output Areas (LSOAs; blue and purple lines), which do not match BRR parish boundaries (red lines; see Figure 3).

Figure 3 - Parish and LSOA alignment, Botesdale, Rickingham Inferior and Superior¹⁰



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Most of the area to the south east of The Street is in one LSOA (MS002E) and the area north west of The Street is another LSOA (MS002D; Figure 4):

- LSOA MS002D is ranked 15,161 (out of 32,844 LSOAs, with 1 being the most deprived). This indicates that overall, this area is mid-way between the most deprived and the most affluent small areas in England.
- LSOA MS002E is ranked 27,850 (out of 32,844 LSOAs), indicating that this area falls within the 20% most affluent small areas in England.

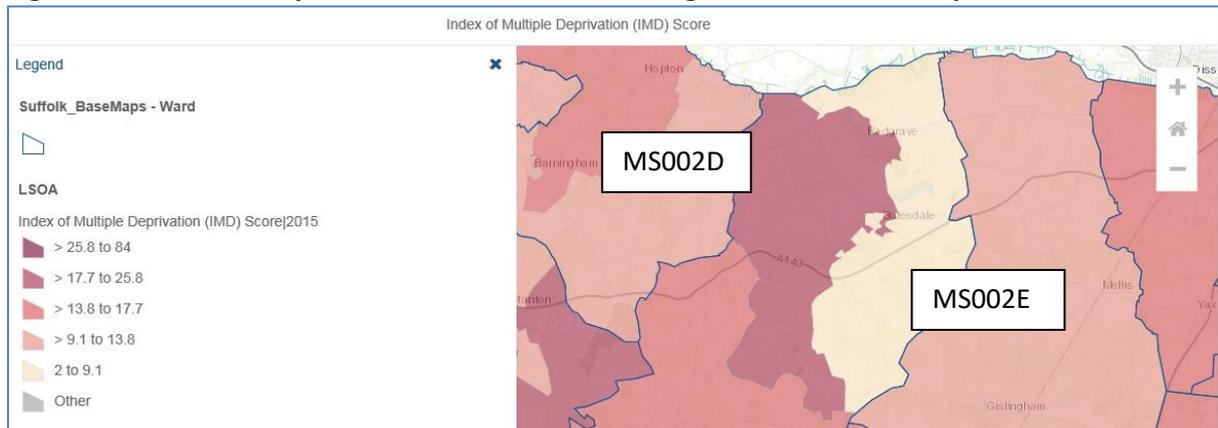
⁸ Source - [Find and compare schools in England - GOV.UK](https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015)

⁹ <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015>

¹⁰ Source: Suffolk County Council Health Informatics Team, 2017

There is variation in the socio-economic status of residents of the Neighbourhood Plan area (see Social Trends section below) and variation in the aspects of deprivation underlying the overall IMD score. It should be noted that considerable areas of both the LSOAs fall outside of the Neighbourhood Plan area, and problems with access to services for instance are likely to be less of an issue within the villages themselves.

Figure 4 – Relative Deprivation in Botesdale, Rickinghall Inferior and Superior¹¹



The LSOAs including BRR score relatively highly on most IMD domains, covering income, education, employment and health, but are most deprived and score quite low in relation to the following two domains –

Barriers to Housing and Services - measures the physical and financial accessibility of housing and local services. The indicators fall into two sub-domains: ‘geographical barriers’, which relate to the physical proximity of local services, and ‘wider barriers’ which includes issues relating to access to housing such as affordability.

Living Environment Deprivation - measures the quality of the local environment. The indicators fall into two sub-domains. The ‘indoors’ living environment measures the quality of housing; while the ‘outdoors’ living environment contains measures of air quality and road traffic accidents.

The Babergh & Mid Suffolk Joint Local Plan (Consultation Draft) identifies that “for the population living in a rural setting the [Suffolk] 2016 Hidden Needs Report states that it costs approximately 25% more to reach the same living standards as someone in an urban setting.”¹² Taken together, this suggests that the Neighbourhood Plan should address the quality of current and new housing, access to services for all in the Plan area including transport, and road safety.

¹¹ Downloaded from: <https://www.suffolkobservatory.info/deprivation/map/>

¹² Page 69, accessible at <http://www.midsuffolk.gov.uk/planning/planning-policy/new-joint-local-plan/joint-local-plan-consultation-document/>

Childhood Deprivation

Other measures of relative deprivation indicate that the Neighbourhood Plan area is in general relatively affluent, but pockets of disadvantage do exist:

- Most primary-age children living in BRR attend St Botolph's CEVC Primary. 22% of children at this school were eligible for free school meals in 2016/17, up from 14% in 2015/6 and compared to a 2015/16 England average of 25.4%¹³.
- The last OFSTED report for St Botolph's (2012), notes that "Fewer pupils than average are known to be eligible for additional government funding through the Pupil Premium."¹⁴ More recent data from the school suggests that the proportion of children eligible for the Pupil Premium has increased from around 9% to 22% over the past 5 years.
- Over the past 5 years, St Botolph's has had 4 Looked After Children. This is around 2% of the school roll¹⁵.

Although St Botolph's catchment extends beyond BRR, this suggests that there is a sizeable minority of children in BRR living in disadvantaged circumstances, but that this proportion is smaller than average for England.

Social Trends

Mosaic is a consumer classification scheme, built by Experian¹⁶. Using data and analytical methods, it classifies households in relation to lifestyles and behaviour. It is primarily intended as a marketing resource, but does provide some insight into local social trends. Mosaic classifies BRR as comprising mostly of two categories of household: Rural Reality (58%) and Country Living (38%). Around 2% of households are classified as Aspiring Homemakers and Vintage Value.

Rural Reality (58%) - "Householders living in inexpensive homes in village communities"

Key features of this social group are: village and outlying houses; affordable value homes; most are homeowners; agricultural employment; slow Internet speeds; annual household income typically £20-39k.

Country Living (38%) - "Well-off owners in rural locations enjoying the benefits of country life"

Key features of this social group are: well-off homeowners; attractive detached homes; high car ownership; higher self-employment; high use of internet; annual household income can be £100k+.

¹³ 2016/17 data supplied by St Botolph's Headteacher; 2015/16 data from [Find and compare schools in England - GOV.UK](#)

¹⁴ The pupil premium is additional funding for publicly funded schools in England to raise the attainment of disadvantaged pupils, and is thus a marker of the proportion of children in a school that are living in disadvantaged circumstances. See <https://www.gov.uk/guidance/pupil-premium-information-for-schools-and-alternative-provision-settings>

¹⁵ Information supplied by St Botolph's Headteacher

¹⁶ http://www.experian.co.uk/assets/marketing-services/brochures/mosaic_uk_brochure.pdf

Aspiring Homemakers (2%) - “Younger households settling down in housing priced within their means”

Key features of this social group are: young families; full-time employment; starter salaries; affordable housing costs; private suburbs.

Vintage Value (2%) - “Elderly people reliant on support to meet financial or practical needs”

Key features of this social group are: living alone; low income; small houses and flats; need support.

Health and Wellbeing

The Babergh & Mid Suffolk Joint Local Plan (Consultation Draft) identifies that “factors that influence health include the social and economic environment and the physical environment as well as a person’s individual characteristics and behaviours.”¹⁷

Life expectancy at birth for males in Mid Suffolk (2013 – 15) is 81.3 years and for females it is 84.6 years¹⁸. However *healthy* life expectancy¹⁹ for Suffolk (data not available at smaller geographies) is 65.1 years for males and 66.7 years for females²⁰. This means that residents can expect to live in poorer health in later life for on average up to 16-18 years.

The Census 2011²¹ indicates that the majority of BRR residents consider themselves to be in good or very good health (41.6% and 37.7% respectively), which is very slightly higher than Suffolk and England (by 1.2% and 1.6% overall). The proportion of BRR residents in bad or very bad health is 4.8% (83), slightly lower than Suffolk and England (by 0.9% and 1.8% overall). The Census also indicates that 6.9% of residents (144) consider their health problems to limit their day to day activities a lot (compared to 7.9% and 8.3% in Suffolk and England respectively).

Whilst those reporting poorer health are lower than might be expected, those providing unpaid care to family members, friends, neighbours or others (because of long-term physical or mental ill health or disability, or problems related to old age) is higher than expected – 11.3% of BRR residents (235) compared to 10.7% and 10.2% in Suffolk and England respectively. This suggests that self-reported poor health may be an underestimate of the true level of need. The number of people providing unpaid care is expected to rise by 57% by 2030²².

This data shows that a sizeable minority of residents are struggling with their health conditions, but suggests that overall, despite BRR’s higher percentage of older residents compared to Suffolk and England, they are in many cases living in comparatively good health. A large proportion of those in

¹⁷ Page 69, accessible at <http://www.midsuffolk.gov.uk/planning/planning-policy/new-joint-local-plan/joint-local-plan-consultation-document/>

¹⁸ ONS data, obtained from Suffolk Observatory https://www.suffolkobservatory.info/health-and-social-care/reports/?geography_id=5b577a22f42d40c2a328cb299df2cdd6&feature_id=E07000203

¹⁹ An estimate of expected years of life spent in self-reported good health.

²⁰ ONS data, obtained from http://lginform.local.gov.uk/reports/lgastandard?mod-metric=3155&mod-period=1&mod-area=E10000029&mod-group=AllCountiesInCountry_England&mod-type=namedComparisonGroup

²¹ Census 2011 (ONS), data obtained from <https://www.nomisweb.co.uk>

²² “The State of Suffolk” (Suffolk County Council, 2015), downloaded from <https://www.healthysuffolk.org.uk/uploads/18611-The-State-of-Suffolk-Final.pdf>

poorer health are aged 65 and over. Given the predicted increase in this population group over future years (see Table 1), the BRR community should expect the numbers of those in poorer health and those providing unpaid care to rise.

Health and Wellbeing of Children and Young People

The last OFSTED report for St Botolph's CEVC Primary (2012) notes that "The percentage of disabled pupils and those who have special educational needs supported at school action level is much smaller than average, as is the proportion at school action plus or with a statement of special educational needs."

Suffolk County Council has reported that "Suffolk has seen a significant rise in the proportion of overweight or obese children, both in absolute terms and relative to national benchmarks. Suffolk's children show low levels of physical activity, high levels of sedentary behaviour, and low concordance with national guidelines on fruit and vegetable consumption."²³

A recent survey of the emotional, social, and physical health and wellbeing of young people across Suffolk²⁴, aged 12-25, highlighted the following health-related issues facing young people -

- More must be done to target the 20% of young people who only occasionally or never participate in physical activities;
- Support is needed for specific vulnerable groups' needs in Suffolk communities, including Transgender young people and those for whom English is not their first language;
- Support for poor emotional health needs to be offered in a timely manner to prevent issues getting worse, especially for anxiety and stress;
- Raise awareness of self-harm - especially among younger age groups - and work to combat stigma and encourage young people to talk about the issue and know where they can access support.

Health and Wellbeing of Older People

Suffolk County Council has identified that the most common long term health conditions experienced by the Suffolk population are high blood pressure, depression, asthma, diabetes, and coronary heart disease, but that social isolation and life style risks such as smoking, alcohol consumption and physical activity also play a part in health and wellbeing²⁵. To improve the health of older residents, they have made the following recommendations relevant to the Neighbourhood Plan:

- Continue to improve homes for older residents in Suffolk; well-designed living spaces can help prevent falls, and increase the overall quality of an individual's life.

²³ https://www.healthysuffolk.org.uk/uploads/The_State_of_Children_in_Suffolk_full_draft_1.6.pdf

²⁴ Health and Wellbeing of Young People in Suffolk, 2016-17 (4YP, 2017 – available at: <http://www.4yp.org.uk/assets/Surveys/Healthwatch-Survey-Report/2017-04-24-4YP-FINAL-REPORT-HWS-w-Cover.pdf>

²⁵ "The State of Suffolk" (Suffolk County Council, 2015), downloaded from <https://www.healthysuffolk.org.uk/uploads/18611-The-State-of-Suffolk-Final.pdf>

- There are opportunities to prevent social isolation and loneliness through volunteering, improved access to transport solutions and community engagement.
- Encourage older people to remain as physically active and independent as possible.
- Nearly 50% of older people in Suffolk are currently not 'online', which presents implications for the continued development of digitalised services, including healthcare provision.

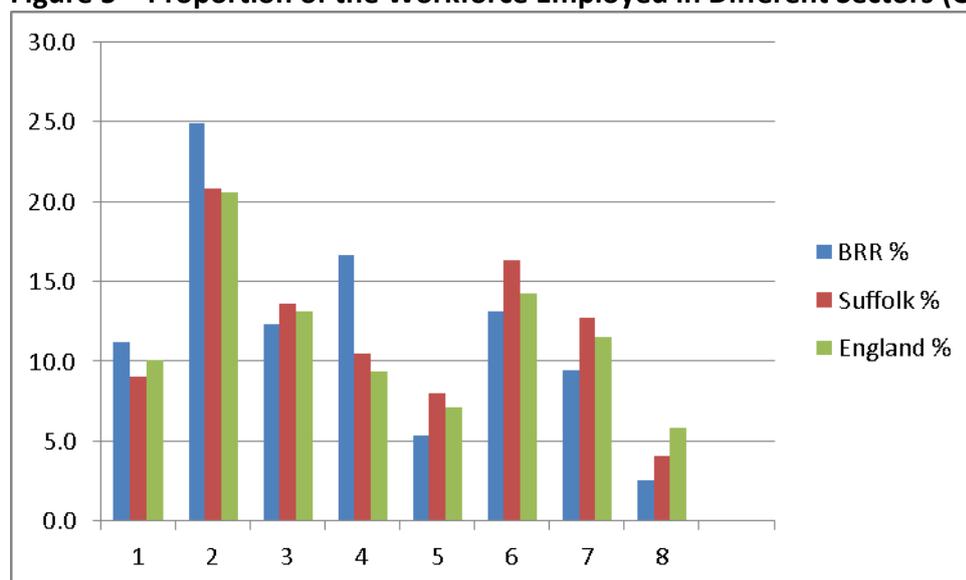
Health issues identified by Suffolk County Council that could thus be in part addressed through the Neighbourhood Plan include promoting physical activity and promoting good mental health, including reducing social isolation, across all age groups living in the community.

Useable open space can promote both physical activity and mental wellbeing. Identifying a “special need” for open space in the Neighbourhood Plan may be important if the draft Local Plan preference for on-site open space – residential developments (option OS2²⁶) - is adopted. This states that such provision would be required (on sites of at least 1 hectare) “only where this would meet an identified need that can be addressed through on-site provision.”

Employment

The Census 2011 identifies almost 1,600 employed residents aged 16 and over across BRR. The most common occupation groups were Lower managerial, administrative and professional occupations (24.9% of the workforce) and Small employers and own account workers (16.6%). The proportion of workers employed in these roles and in higher managerial, administrative and professional occupations is higher than typical for both Suffolk as a whole and England (Figure 5). Non-workers and long-term unemployment is low in BRR (2.5%).

Figure 5 – Proportion of the Workforce Employed in Different Sectors (ONS, 2011)



Key -

1. Higher managerial, administrative and professional occupations

2. Lower managerial, administrative and professional occupations

3. Intermediate occupations

²⁶ Page 71, Babergh & Mid Suffolk Joint Local Plan (Consultation Draft)

- | | |
|--|--|
| 4. Small employers and own account workers | 7. Routine occupations |
| 5. Lower supervisory and technical occupations | 8. Never worked and long-term unemployed |
| 6. Semi-routine occupations | |

Education, Qualifications and Skills

The three parishes of Botesdale, Rickingham Inferior & Rickingham Superior fall within the catchment areas of St Botolph's CEVC Primary and Hartismere High School. The majority of children educated in the state sector attend these two schools; although some children are educated in the private sector (home schooling numbers are not known). Young people in post-16 education attended a variety of institutes in Suffolk and Norfolk.

Key Stage 2 Results

Department for Education national statistics (2017) show that Suffolk is one of the poorest performing areas in the England for Key Stage 2 (KS2) results at the end of primary school. The average percentage of pupils reaching the expected standard in all of reading, writing and maths in 2016 was 40-58% across Suffolk. St Botolph's achieved 77%, which would place it in one of the highest performing areas in England, and within Suffolk in the top 15% of highest performing schools.

National KS2 results, based on new assessments and curriculum -

2016: Across England, 53% of children achieved the expected standard in reading, writing and maths, compared to 63% at St Botolph's.

2017: Across England, 61% of children achieved expected standard in reading, writing and maths, compared to 77% at St Botolph's.

The national increase from 2016 to 2017 was 8% and at Botolph's the increase was 14%.²⁷

Qualification Levels

Based on the 2011 Census, residents in BRR have generally higher levels of qualifications compared to Suffolk, but slightly lower than England as a whole. This includes 11.1% of individuals with no qualifications (compared to 10.3% in England). BRR also has similar levels of level 4 and above qualifications (degree, NVQ 4-5 and equivalent) to England (35%), but higher than in Suffolk (28.5%).

²⁷ Data supplied by St Botolph's CEVCP