'We will swallow our words back down'

Oxford's new and emerging communities - *views on wellbeing*

January 2021

Acknowledgements

With huge thanks to all the community volunteers, and for all members of all communities represented, who worked hard to develop this work with us, distribute questionnaires, and make sure people's voices are heard - especially at such a challenging time. Thanks also to City College Oxford for kindly hosting the focus groups.

Community champions involved included:

Taofik Shodunke	Nigeria committee
Amier Alagab	Sudan community chair
Khaled Al-qadi	Palestine community chair
Imade Edosomwan	African heritage
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Rosalia Costa	East Timor Community Association chair
Fernando	East Timorese Community
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Pastor Wyneford Mombeshora	Word Fountain
Elder Adebisi Adefila	Word Fountain
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Mujihad Hamid	Oxford Community Action
Hassan Sabrie	Oxford Community Action
Bashi	Olde Cowley Barbers shop

All Oxford Diversity football league/ East Oxford United players

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Who we are

Oxford Community Action formally formed in 2020, to support new and emerging Black, Asian and Minority Ethnic Communities (BAME) alongside more established BAME communities to tackle and overcome barriers created by structural inequalities (e.g. labour market and ethnic health inequalities) that prevent BAME individuals and communities from reaching their full potential and enjoying equal representation and participation as active citizens within UK institutions and wider civil society. https://www.oxfordcommunityaction.org

Healthwatch Oxfordshire listens to people about their experiences of health and social care and supports people's stories and voices to be heard to highlight areas of good practice or change https://www.healthwatchoxfordshire.co.uk

Community volunteers from Oxford's East Timorese, Pakistani, Sudanese, Syrian, Nigerian, Palestinian, East African communities and Word Fountain who worked to develop and drive the project. Members of East Oxford United Diversity Football league were also represented.

Executive Summary

Between November 2019 and September 2020, Oxford Community Action, along with community volunteers, worked collaboratively with Healthwatch Oxfordshire to understand what Oxford's new and emerging communities think about wellbeing. Previous joint work had highlighted that mental health and wellbeing was a concern.

Together we took time to collaboratively plan the project and develop a way of working that built trust, understanding and open dialogue. We ran three focus groups and designed a questionnaire to reach out to Oxford's new and emerging communities. 152 people responded to the questionnaire, along with many ongoing conversations. Respondents represented the diverse and multi-ethnic communities in Oxford. This report is the result of the work we did and what people told us.

This report shows that there is a huge appetite within the community to learn more about, gain skills and receive support to improve health and wellbeing. However, it also shows that there are significant barriers to getting the support that is needed.

The message is loud and clear- that to build access, trust and create culturally appropriate services- communities want to see support designed and delivered with their input, within community settings, and building on community networks.

Services need to actively engage and reach out to enable this to happen, in a *continuous ongoing dialogue*, and build relationships over time.

People told us

Wellbeing is supported by:

People described many different sources of support for their wellbeing- and showed resilience, creativity, and huge desire to support those around them. *Family*, *friends*, *faith* and *community* were central in this.

- **Family and friends** are a source of pride and support

- **Faith** is key-giving strength, refuge and support

- **Community** is central- value of being part of something, with huge energy towards giving, contributing, and improving community

- **Other factors**- including work, occupation, exercise, leisure all support sense of wellbeing- as well as having basic needs met including food, money, housing, and a sense of safety

When feeling stressed or worried, most people first turn to friends and family, faith, and exercise to support themselves.

Wellbeing is undermined by:

People told us about what undermines their ability to maintain wellbeing

> ➢ **Worries and stress**

Of 120 responses, 38 noted 'money and debt', 38 'jobs', and 32 'family pressures' as main issues causing them worries and stress.

> ➢ **Underlying determinants**

People told us that wellbeing is undermined by underlying issues that affect their lives. This included financial and job worries, cost of living and housing in Oxford, immigration, racism and discrimination, and safety concerns. Tackling wellbeing also involves tackling these underlying drivers.

> ➢ **Covid-19**

Covid-19 continues to put huge pressure and stress on families and community wellbeing- exacerbating already existing inequalities, including income and food poverty, insecure work and exposure in front-line work, job loss, housing pressures and differential health impacts.

Where do people turn when worries become too much?

People's answers clearly showed that they need trust and confidence in the place they turn to for support.

When worries become too much over 87% said they would turn for support to friends and family, 58% to a faith leader or spiritual guidance, 30% to a GP, and 24% towards cultural methods (131 responses).

Only 4% would turn to mental health support.

What support do people want?

136 people's answers showed that **communities have a huge interest in and desire for more information and support on a range of issues affecting their health, wellbeing and underlying structural stresses**. It perhaps also shows that there is unmet need- almost everything is important. However, they also told us that support should:

➢ Make a practical, tangible difference to people's lives

➢ Reflect the need for respect, relationship, better understanding of, and action on the needs and health issues facing Black and minority ethnic people using health services

➢ Health and care services to reflect the communities they serve, and work with communities to build trust, communication and develop culturally appropriate support

…they can't keep telling us to use services, if we can't see Black and minority ethnic people employed in the organisations...our voice will not be quiet, we need support and access- mental health is a big issue

Mental health

Interest in gaining skills and support to **manage mental wellbeing** was clear. Over 35% responses indicated desire for more support for mental health, as well as nearly 18% for managing spiritual crises, over 19% for suicide prevention, and nearly 60% help to 'manage stress' (p.30)

Despite this, as noted, only **4% of responses noted they would seek mental health support** if their worries became too much (p.26).

Number one is the services need to have staff representing the communities, and do simple outreach to talk to people and understand...

➢ There are barriers to talking about mental health including stigma, fear, diverse cultural and spiritual views about mental health

➢ Being able to support mental health requires a broad approach set within *wellbeing* as a whole, with practical community-based support, and involving communities in building skills and confidence to speak more openly

➢ There are significant barriers to members of the community accessing mental health support- these include issues of trust, language, fear of discrimination, perception of services, and lack of services reflecting cultural and spiritual needs

➢ People told us that mental health services needed to develop diverse, culturally appropriate support in dialogue with communities, and for services to mirror their needs in support, information and accessible staffing

Barriers to seeking advice and support

Of 116 respondents, lack of time, language barriers, worries about immigration, stigma around mental health, and racism and discrimination were all noted as barriers to seeking advice and support.

This included comments that there was a lack of understanding about cultural needs, and lack of culturally appropriate support.

> *If the supports being offered do not meet our needs or if there is a disconnect with persons offering support like differences in ethnicity or obvious lack of empathy*

The best place to have support and learn about wellbeing

Overwhelmingly, we heard that people's preferred place to have support for wellbeing and health was 'in the community'. **Support from places of trust was important.**

- having support through **friends and family** (62%),
- **faith** ('place of worship' 53%)
- different places in the **community** (76% 'in our community' and 51% 'community centre' and 31% 'events and clubs') were preferred.
- **Information-** via leaflets (30%), internet and phone (34%) '*Designated community co-ordinators' and libraries, local council website, buses*
- **GP (34%) and pharmacy (20%)**
- **Other venues- barbers' shops[1] (11%)**

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[1] Supporting barbers' shops to deliver information about NHS Health Checks was highlighted in our Men's Health film (2019). Oxfordshire County Council have commissioned Lions Barber Collective to deliver mental health awareness (Oct 2020). These results (11% chosen) indicate that a sensitive, culturally appropriate, community-based approach may be needed if barbers are to be seen as trusted sources of information and support.

Key comments

> **Developing responsive support - for all services**

Many health, health and care services acknowledge the need to 'reach out' to diverse communities to address inequality in access and use of their services.

If you really want to work with us, you need to mean it, sit with the communities and discuss, we will report back when you are serious about changes, we will invite you in…it really is a topic we want to talk about not just keep under the carpet..

This report highlights that to build responsive health and care services for diverse and multi-ethnic communities- with equity, trust, better access, and cultural appropriateness - there needs to be a process of *continuous ongoing dialogue* involving-

More appropriate and responsive services

Continuous ongoing dialogue

Improved information and access

Better community engagement

> **Better community engagement-** health and care providers to engage in an ongoing open dialogue and relationship with communities – working as equals, reaching out, building trust over time, to understand, address and acknowledge barriers and build solutions

➤ **More appropriate and responsive services**- this ongoing dialogue and community engagement will lead to deeper understanding of need and support development of services that reflect diversity. Services will be more appropriate and responsive, offered in a range of formats, approaches and in diverse settings, working in partnership with community networks. Diverse communities will build trust and confidence through seeing themselves and their concerns reflected in wellbeing, mental health, and wider health services as a result.

➤ **Improved information and access**- through this dialogue and seeing development of responsive services, there will be improved access to services by diverse communities. There will be engagement in service design, and development of communication, information and messaging that is culturally appropriate, using a variety of formats- including language translations, video and visual messaging, face to face contact, building on community and faith networks and links.

For all services

➤ To prioritize reaching out and actively engaging communities to provide **practical, solutions focused wellbeing workshops** and support, on a range of issues, working with and in communities to build culturally appropriate and informed approaches, in community settings

➤ Recognize **strengths of working with and through community networks**, faith leaders and faith settings

➤ Build capacity and confidence within staff teams to reach out

➤ Efforts to support wellbeing need to be set within focus on wider determinants of health, and explore ways of addressing these drivers through the system as a whole.

For mental health

➤ Services need to reflect diversity in all aspects of its work including culturally appropriate front-line staff, communication, approach and service provision

➤ Trust needs to be built recognising, understanding and tackling existing barriers to mental health services

➤ Diverse cultural and spiritual beliefs surrounding understanding of mental health and wellbeing need to be recognised when planning responsive support and services

> Continue to work with community volunteers, building dialogue to develop services, and including developing community capacity through extending mental health first aid training offer.

What will happen next?

> Healthwatch Oxfordshire will convene a 'round table' with Oxford Community Action and others to enable the voices from this report to be heard by health, mental health, and care providers and to move towards change

> Healthwatch Oxfordshire will continue to build relationship with Oxford's diverse and multi-ethnic communities and support their voices to be heard through ongoing dialogue with service providers

> Oxford Community Action will support dialogue with mental health, health, and care services to encourage practical community-based support and solutions for wellbeing, in the form of workshops, activities and informed approaches delivered in community settings.

What we did and why

In 2018, Healthwatch Oxfordshire worked together with East Oxford United Football Club (Diversity Football League), and community volunteers to hear about what was important to men from East Oxford's diverse multi-ethnic communities regarding health and wellbeing, support, information and access to NHS Checks.

We produced a report and short film about what we heard
https://healthwatchoxfordshire.co.uk/the-project-fund-reports/

https://www.youtube.com/watch?v=GcDG7wKMZ40&feature=emb_logo

From the Men's Health questionnaire and conversations with over 200 men, **30% of respondents said they felt mental health and wellbeing was a concern.** We heard that men would like to have more information about this, but as with all health messages, information and support- how, where, when and who gives that support- was important.
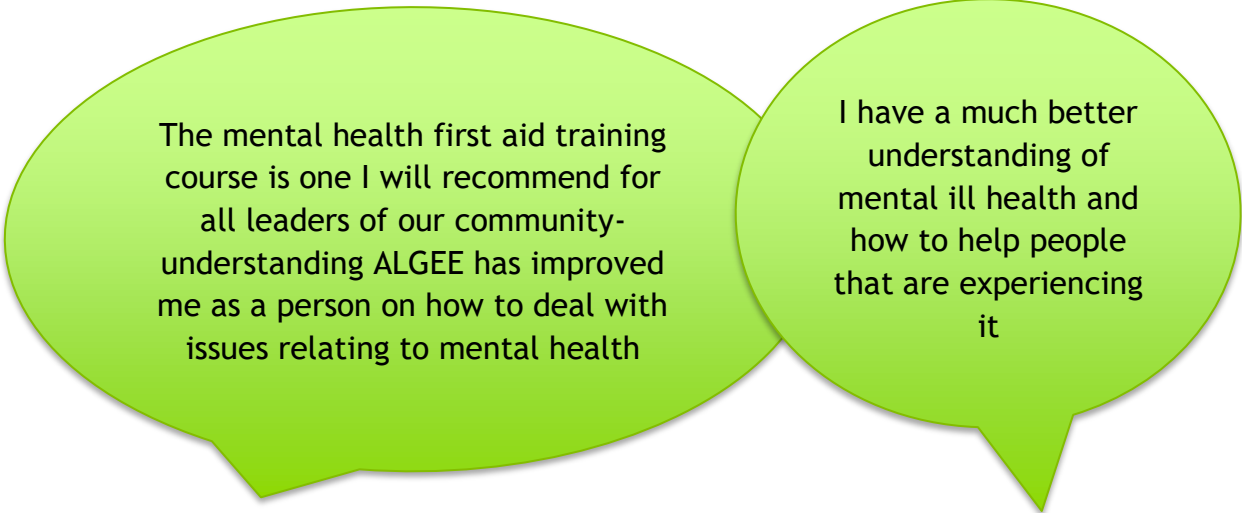
Men told us about significant barriers to access to health and care support. Whilst the GP was important, they also told us they favoured community-based

approaches to health grounded in understanding of lived experience, and where people had a say in how services were developed to meet their needs.

As a result of what we heard, Oxford Community Action, community volunteers from Oxford's 'new and emerging' communities, and Healthwatch Oxfordshire embarked on a journey together to explore more about this topic.

We were aware of longstanding barriers faced by people from Black and minority ethnic backgrounds in accessing and using mental health support. We were also aware of the underrepresentation of these communities in Oxfordshire's mental health support services[2]. We also understood that the underlying reasons were complex and underpinned by all aspects of social determinants of health and inequality highlighting issues of trust, stigma, rights and responsibilities.

In October 2020, as a direct result of the Men's Health report 2018 (www.healthwatchoxfordshire.co.uk), 12 community volunteers trained in Mental Health First Aid, in October 2020, under Restore's newly established 'Ripple Effect' project, demonstrating the value of a community-based approach, as some participant told us:

The mental health first aid training course is one I will recommend for all leaders of our community-understanding ALGEE has improved me as a person on how to deal with issues relating to mental health

I have a much better understanding of mental ill health and how to help people that are experiencing it

Conversations about mental health

'We will swallow our words back down'

From November 2019, initial meetings between Healthwatch Oxfordshire and Oxford Community Action explored how we might hear more about people's

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[2] Personal communication and See Healthwatch Oxfordshire report 'Let's talk about mental health', (2020) and organisational responses. www.healthwatchoxfordshire.co.uk

experiences of mental health, knowledge and use of mental health support services. However, in early conversations with community members, we quickly realized there were huge barriers to talking about this issue directly.

They told us we needed to *take a step back*, start at the beginning and listen to people's views on *wellbeing and the drivers of wellbeing*. They wanted the work we did together to be *solutions and action focused,* bringing practical improvements to the lives of individuals, families and their communities. They also wanted the *communities to be central* in starting a *dialogue* with support services to bring about better understanding and change.

> *Lots of people were involved, the focus groups everyone contributed and agreed mental health is a big issue in the communities, and people don't want to talk about it, it's difficult to talk about, and that's why we changed the name to 'wellbeing' it came from discussions in the group….the community feeling this way*

> *Among our community we have many people who are suffering, from stress, some people even have mental disease…we are not just here to do the questionnaire and say 'oh ok' … we can do that tomorrow, but I think we have to find the root cause of that…we need to discuss family wise, or make workshops for communities, or have someone come in and talk about these things…we need to see a difference*

> *The questions and questionnaire is just a door, a first stage in getting to a point where you are able to sit down with groups, so if people are less comfortable about discussing mental health because of the stigma, but are more comfortable to discuss wellbeing, then let's do that*

> *How can we in our communities, come up with telling people, there is nothing wrong with it? if you have a mental health issue, its ok, you have somewhere to go to, because a doctor can help you, because I don't want to hide it under the carpet, because definitely there is a place there, to treat people*

Focus groups and conversations

Together we held three focus groups between January and March 2020, at Oxford City College to explore views of wellbeing further with 11 volunteers from across the different communities. Conversations here and ongoing with others highlighted some of the sensitive issues behind talking about mental health directly, and some of the underlying reasons.

Sharing conversation over food at the focus groups at Oxford City College

About mental health and wellbeing

Talking about mental health

> *People will speak when they find the right people to talk to...need the right space and the right mindset to talk...fear that people will label you if you talk about this topic, don't want to talk to authority*

> *If you really want to work with us, you need to mean it, sit with the communities and discuss, we will report back when you are serious about changes, we will invite you in...it really is a topic we want to talk about not just keep under the carpet..*

> *Those who are born in this country and understand the culture it may be fine, but what about people with no understanding of it...people from these communities don't want to talk*

> *...when he went to Talking Space, he asked 'why are you sending me there?' and when he went there and he found out about why he was there 'why have you asked me here?' and when it came to them arranging to see him*

again, he said 'no, I am in good health, I don't need anything'...because of the taboo, this is the problem within the community, when you mention about their mentality, they don't want to talk about it, or they will say 'ok, they are mad' and they walk away

In our community, its taboo, so if we talk about mental issue, straight away they are like 'crazy' or 'you are not normal' so we still have that, so I need to see the questionnaire, so people don't feel like 'it's about me in particular' and this is something big for us...

Members of our community, the word mental mentioned there, most people will be scared from the word, that's why we suggested to change that

First issue is they might not want family to know they have spoken to someone...and does the person want to bring up that they are suffering or feel able to go and talk to someone?....but it goes wider in the family, there is so much pressure, and it could break things down if someone just tries to manage on their own

People are asking where can I go? What is going to help me? Trying to reduce stress...talking about mental health is a huge stigma in the community...people will feel you are singling them out

People keep things to their self. Mental health is a stigma. Why would people say things about mental health? It takes a long time for someone to speak...and to trust

Acknowledging diverse perspectives of mental health

If people have spiritual issues, which can be equated to mental health, they will not go to a GP because they know they will not understand their issue, will not even recognise it, so they will only go to someone who does understand them to work with them...

A lot of people coming to see me who say 'It's not a mental health issue, I have not got a mental health issue, I have a problem with djinn, spirits'

Church is a place of refuge for people- and you become aware of the different things people are facing....and how we support people with drugs, alcohol, homelessness, stress. As a pastor you can keep an eye on people at Church, pick up and identify when people need help and support.

We need to start by training leaders. Need someone to come and talk to the community about all different things, including mental wellbeing, as part of other activities that we are doing, just part of it, and not the main focus, not frightening people away

A lot of people have spiritual problems, issues, they say they are possessed or affected by certain spirits...the discussions we have 'have you ever sought medical help?' and their initial reaction is 'They don't understand, they will

just give us pills and put us in a mental hospital' because they don't understand ...that certain group would dismiss it saying 'you don't clearly understand what we are going through...

Access to support

Most of the people are really having the language barrier in the country and might not understand...if you speak to them, they will say 'ok, everything fine', but not...the main thing is you have to think about the family, to think about the language, we have to think about how to reach people and to resolve and recognize...

It's about awareness, awareness of this problem, a lot of people deny having this problem, mental health and anything like that, so to make people aware of it and say 'look there is help out there'

A lot of our community are not going to go to mental health organisations because it is 'mental health'. They are not going to go to Restore because it is 'Restore- mental Health' they are not going to go to Oxfordshire Mind, because it is 'Oxfordshire Mind-mental health'

We have to find a way that we get the information to people so that they are happy to talk about it

Seeing ourselves reflected in the system

...they can't keep telling us to use services, if we can't see Black and minority ethnic people employed in the organisations...our voice will not be quiet, we need support and access- mental health is a big issue

Number one is the services need to have staff representing the communities, and do simple outreach to talk to people and understand...it's not easy to change the system

They do know that these services are available and they know about them but they will not go there because they do not have trust in the NHS, and the system....a lot of people prefer to see someone who looks like them, or acts like them, for example if you are a Muslim you might only want to see someone who is a Muslim, or for an Islamic kind of treatment

Because we don't trust them, because we don't have a similar minority admin person in the reception who can welcome me and say 'hello' and hide confidentially what is my problem, the whole community is thinking 'I don't want to go there ....I am sorry I am not going there, the reason is because I don't even know if I am welcome because of what I see'

We have to make those providers aware...look you have to provide the information and resources to people in a way that you don't stigmatize people, you find a way of addressing the stigma that prevent the people going to get support from your organisation because of stigma or the

perception ...you are not able to work with them in the way that you are familiar, and you are not providing the service in a way that is culturally appropriate…

Where do people go who are in spiritual crisis?… are providers even aware of the issue ….people who have a particular faith or background and might have a spiritual crisis as they see it; how are you developing your organisation that does work with people, on that basis?

…is there something they need to do- to talk about what culturally appropriate resources could be provided for people from a particular faith background- that may want to address something as a spiritual crisis rather than a mental health crisis…?

You don't have to come and name mental health, as they will run away and say 'it's that crazy stuff you are talking to me' but talk to them in a way that they will understand, like I have a problem with spirit

Using mental health support

When your service always attracts the same people you need to ask what is stopping people using it and why are they not attracting those people? Need to look at that and make an effort to change these things, everywhere I look…it's been over many years…it's the same, and it's not easy for Black people to go

Muslim community- hide it under the carpet- do not want the family to know. They need to form trust before they go to find help. If they want to go for help, I need to see someone I can trust and can relate to. Not an English person, if they are the ones there it will close the conversation down soon…we will swallow our words back down.

How many Black and minority ethnic people knock on your door and come and speak to you about simple health issues?- no they don't come to you

Trust of mental health services

We know exactly everything here, the services here, we know about it, most of us know and are aware, but there is a lack of trust, 'not open to everybody', or we have this mentality which will try to frighten everyone, 'be careful if you go there, it might get known', and I have spoken to people, and in my judgement from speaking with people, there is no trust in the system about the mental health, so this situation alone tells us a lot

It's also expectation, when people start to use the support, they worry that it is something that will affect their benefits, the benefits system…money affairs, or immigration, and other things, so they worry it will affect these things, so they spend all this time, feeling uncomfortable, and feeling worrying about 'something could happen with me at any time'

But if they didn't know about who to go to they wouldn't see anyone, and the problems would become worse and worse over the years, they don't turn to people for help because they don't have trust, and this is another big hidden issue…

People have fears of talking about these topics, and fears of the authority. Someone who had been in Barton for 5 years, Swahili speaker, 'do you know where the community centre is?' …didn't know, as no reaching out…activities are free, but many people won't go there as it's where the community police officers are and some communities would never go there…

Being heard by the system

We can't change the system and no one will listen to our expertise …I feel our new generation won't have a voice of change, all decision makers never understand grassroots communities or never felt how they live day by day

There is need for a collective and collaborative voice across the different communities across Oxfordshire as the power dynamics that create inclusion or exclusion- to get any kind of change… are stacked in favour of people in organisations, people find it difficult to navigate, and they are designed to exclude not include…

Can't keep going without support of the system… You can't just push on if you know the system is not working. It's too much for volunteers alone…

Need to work with communities

Many have lack of understanding about ways to look after their health, we need people to work with the communities, to design projects with us around mental health, more workshops and training, wellbeing, mental health, diabetes….and links to other services

We see the same pattern, they go to organisations, have already done the plan, decided what they are doing, and just want to sell their plans to the community…they are not really listening, it's like being a teacher and student…I am the student, and you just want to tell me the subject

Mental health first aid…community champions would then be able to signpost people to the right place, as people trust them, and that in itself would be really powerful, could share on social media, and people will know where to go…

Underlying drivers of wellbeing

Speaking from lived experience

Wellbeing of the person is about having a home where food is there…why are you talking about being active…we hear all the time about how Covid-19 has got people doing all this activity…but it's a way away from these communities

People on benefits, £70ish, the council thinks 'no problems' but by the middle of the week, people don't have enough food to eat

A lot of the men in the community are working 7 days and nights, so my point, I start looking at what issue they experience in the workplace, what stress they face, they are working all the time, working in three places, and then they have less time for themselves. Overcrowding is a problem as well

Some suffer from the problem of gambling, where they are short on their rent and try and make money that way

Yes, they work hard for the rent, for their labour and that has negative impact on them and their health

Parents and children are not talking at all, I know many people, they don't know about their children, if there is something wrong… if I have not seen even my mum and dad for a week- they are out at work, long hours- who do I speak to? I have to speak to other people outside…if nobody is sitting at home asking me what I did today, 'how are your friends, how was your class?', then, I have to find someone else to speak to

Language, loneliness, not being able to contribute, work…finding life here very hard, all worries and struggles to survive, housing, money…when will it ever get better?....some are saying it is so hard here

People from Africa face a tough challenge – living in Oxford, it is so expensive, work, housing, need to put food on the table – have job, not enough money for home and to send back home, gives financial stress and this pressure sometimes leads to breakdown

Worrying about their life, their future, everything expensive, how to get money, whether they can get married, have children, find a job, find a house- all these things….how are they going to do these things….why is that happening..?

People work Saturday and Sunday double shift, just to earn more money for the weekend...so they don't go (to the GP) then! If you are talking weekday evenings they would understand (to see GP), but Saturday and Sunday you are talking £15 ….everyone would like to earn this extra money….and until now they (GP's) were thinking 'we tried to open Saturday but no-one is

coming in', and I said 'yes, well most of the factory pays double on the weekend….'

People are waiting for a long time to get visa and paper from Home Office, they run here and there, and they are thinking about their future, not allowed to work, not allowed to do anything, don't know anything, thinking about their future, thinking, sleeping, eating, waiting for the finalised papers, and just waiting inside not going out, 16-17 years olds, some waiting for 4 or 5 years…

Every month, I get information from the council in the post, I open, I read, I put away, this sounds interesting, I have no time to go, to look for, to go for it, and be involved, so loads of information can be sent, but it is not practical…

Covid-19 exposes underlying inequalities

Why are you now talking about why Black people are dying? But they have been dying for many years, from other things- please don't just tell us it is Covid19…

What is the answer from public health? How are they going to tackle it or are they just going to sit in the office?…We have to find out the facts…and stop ignoring real communities…want to work with people who are really engaging community leaders or in the end what is the result?

Many are scared to go outside, Black people more at risk and what assurances are you giving that you are keeping me safe? We have to go to work and earn money to bring food back to the family, what insurance do we have when listening on tv saying BAME are more affected…there has been lack of support for many years.. Are you in their shoes? Do you understand Covid19?

Many people are going into the JR cleaning, scared to go out, because the person sitting next to them might have Covid and not know…but they have to go to work as 3 kids to feed, and have to go to work

The questionnaire - views on wellbeing

Following the focus group and planning discussions, we designed a questionnaire[3] together, developing the questions and referring to mental health within the wider context of individual and community wellbeing. The group felt that understanding the issues and concerns of community members would be the first step in a

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[3] See appendix for questionnaire

journey. What we heard could be used to reach out to the health and care system, and to begin a dialogue to find practical community led solutions.

Just as we launched the questionnaire, in March 2020, the Covid-19 lockdown happened, and the community was thrown into crisis as the impact of this on families and individuals became clear. Oxford Community Action saw at first-hand how many in the community were facing job loss, financial and housing problems, food poverty, lack of accessible information, family stress, illness and often front line or unsafe work conditions.
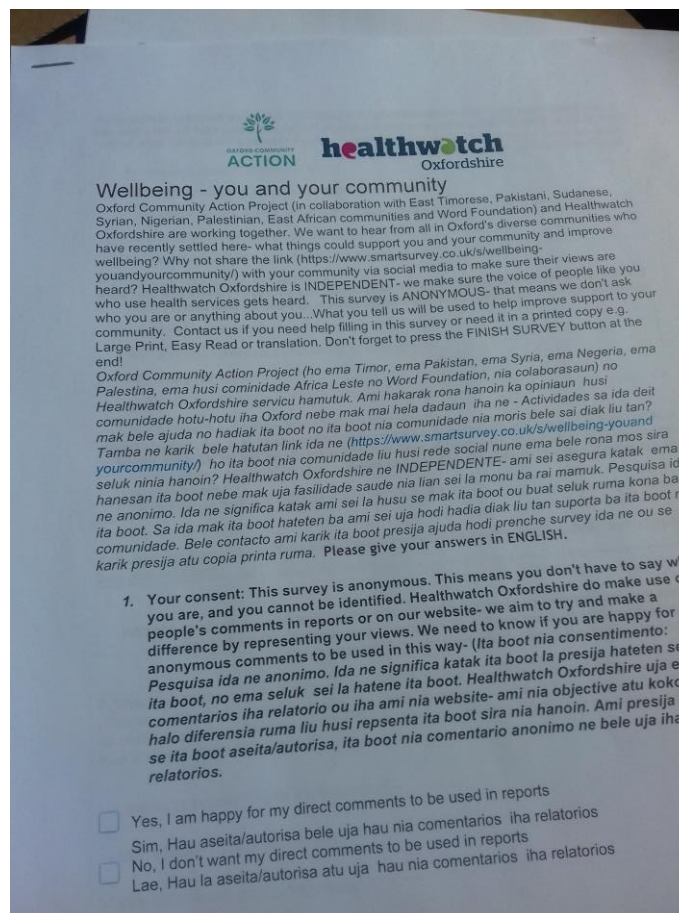
Attention turned towards the community coming together to support members to access food in confidence, with Oxford Community Action setting up emergency food distribution and other support (for over 400 families). Healthwatch Oxfordshire and Oxford Community Action shifted joint focus to develop, translate and deliver much needed information leaflets on *local and national* Covid support in Somali, Arabic, Tetum, Swahili, Amharic. We also worked together, with Replenish, to produce translated leaflets on how to understand food labels, for the emergency food parcels. https://healthwatchoxfordshire.co.uk/information-and-advice/translated-materials/

The disproportionate impact on people from Black and ethnic minority backgrounds, not only of Covid but of longstanding underlying inequalities in health is clear (Institute of Health Equity, 2020; Runneymede Trust, 2020; Public Health England, 2020). This was set against the death of George Floyd in U.S. in May and growing Black Lives Matter movement focus on structural racism.

We knew that people didn't want 'yet another questionnaire' to 'tell us what we already know', but also agreed that it was even more important that Oxford's 'system' heard the voice of these communities at this critical time, as we had planned. We decided to continue.

In July, we added questions on Covid, and sent out the questionnaire again online via community 'WhatsApp' groups and social media links. We also gave paper copies to households via community volunteers, and through the emergency food distribution, led by Oxford Community Action. Questionnaires were translated into Tetum only for the East Timorese Community, and some were translated verbally into Arabic. We had 152 questionnaire responses- a tribute to all the hard work that community members put in, and commitment from the community themselves to give their views during a very stressful time.
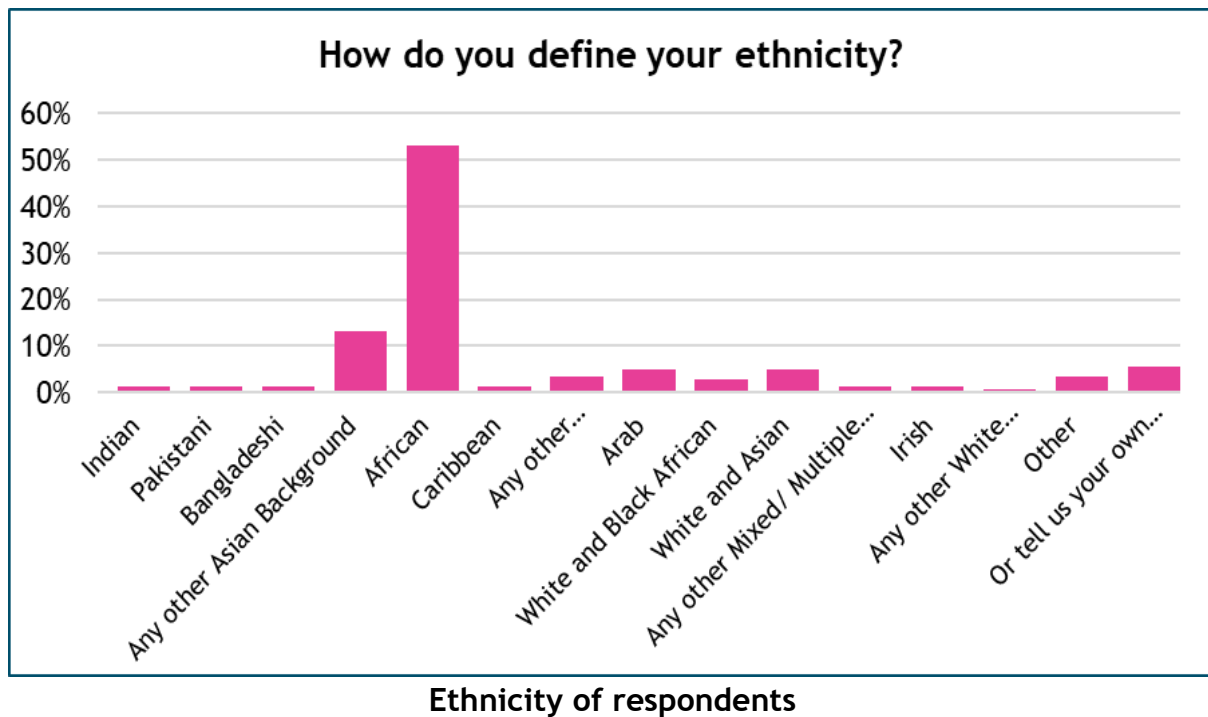

Questionnaire in Tetum

Who we heard from:

We heard from 152 people, and of those who told us, 52 were female, 72 male, 2 non-binary. Post codes mainly represented residents of East Oxford- OX4[4] (73 responses) and OX3 (28 people) with some individual responses across OX11, OX18, OX28, OX33 (Oxfordshire JSNA, 2020).

People defined their ethnicity using National Census categories- noting African as the largest response rate. We know that we heard from a wide cross section of Oxford's diverse and multi-ethnic communities- linked in and reached by community volunteers- representing East Timorese, Palestinian, Nigerian, Sudanese, Syrian, Somali, East African, Pakistani, and Caribbean community members, among others.

Ethnicity of respondents

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[4] Among Oxfordshire's 10 most deprived wards (Oxfordshire JSNA, 2020 and Blackbird Leys JSNA Nov 2020)

Respondents by age

A bar chart titled "Respondents by age" with the y-axis ranging from 0 to 50 in increments of 5. The bars represent age ranges:
- 18-24: approximately 1
- 25-34: approximately 16
- 35-44: approximately 45
- 45-54: approximately 41
- 55-64: approximately 14
- 65-74: approximately 1

Legend: ■ 18-24 ■ 25-34 ■ 35-44 ■ 45-54 ■ 55-64 ■ 65-74

Age range (117 responded)

The questionnaire results were examined by the planning group, and we agreed on themes- highlighting what people told us about wellbeing. We heard about what supports wellbeing, what challenges people face, and their views on what could be improved. We also heard about experience of Covid lockdown.

What people told us

What supports wellbeing?

We started by asking people to tell us about what supported wellbeing.

This included questions about what made people feel good about and appreciate themselves (Q2). We also asked people to tell us what the first things they would do to support themselves when feeling worried or stressed (Q5).

Across all the responses people gave, strong overarching themes became clear:

Family is a source of pride and support

Family was also central to how people felt about themselves and was key in supporting individual sense of wellbeing. 19 comments focused on how family, and role in the family could 'make you feel good in yourself and appreciate yourself'.

> *Being a father, providing for your family*

> *I feel good when I am with my family appreciate have my family here with me*

I appreciate life with my family at the moment everything is going well

Happy family and settle home

52 respondents also said that family and friends were the first place they would turn when feeling worried or stressed. Here, they noted trust, closeness, relationship was key in enabling them to share worries and talk problems through- even if families were abroad.

Talk to family or close friends. By sharing what I felt with others will help me feel more calm and less stressed. Also I can get support from family/ friends could control my fear

First thing that we do when we feel worried or stressed is say prayers, then call family if they are far away from you, and after that find your friend who is close to you to share what you had or feel

The first thing I would do is, trying to contact my friend and family, and share what problem that I had

Faith gives strength

Faith also was significant in many people's lives- giving sense of both individual and community wellbeing, as well as resilience to get through hard times and challenges. 8 comments said that their faith and being part of a faith community was important in helping them to feel good and appreciate themselves.

By prayers and having faith in God makes me feel fulfilled

My religious / spiritual family / association

More importantly, turning to faith was a significant support, when people were feeling their worries had become too much for them. 32 respondents said this was the first place they would turn for strength and help- and something to rely on in helping them find a solution. A number noted they would spend time reading the Quran or Bible, finding support there, or in quiet prayer and reflection on their problem, or speaking to a faith leader. Faith had also given support during Covid-19.

Pray & read the Bible or quotes.
Stop & rest! Speak peace over myself

my faith- I usually pray and also talk to my very close friends or to my leader at church

I look to God to help me to put things in their rightful perspective so I can be proactive

First thing that we do when we feel worried or stressed is say prayers, then

call family if they are far away from you, and after that find your friend who is close to you to share what you had or feel

Community is central

'Word cloud' all responses top 200

People placed huge value on being part of and feeling embraced within the wider community- seeing this as central to building a sense of wellbeing- for themselves, their families and community groups. (29 comments) This came forward strongly- as did the sense of energy and enthusiasm for giving, helping, building community, supporting others in need, and contributing positively to life in Oxford. People used words like '*co-operation*', '*working together*', '*tolerance*' '*giving*' and spoke about the value of building connection, shared activities, events, and mutual support.

> *A sense of belonging and to be contributing to the local economy.*
> *Showcasing what I can do to bring diversity to my neighbourhood.*
>
> *Working with a large group of people and making friends*
>
> *Community!*
> *Living in and giving back to my community - Young, old, rich, poor…*
>
> *When I help and support the others*
>
> *the wellbeing of me and the community is very well- very supportive*

Good community support, and access to social amenities and network systems

While only 3 people noted that they would turn to their community or community leaders for support if feeling worried or stressed, 52 had said they would turn to friends and family (above), perhaps seen as community, and showing that trust, closeness and confidence was important in seeking support.

Get advices from the community and from the leaders in the community specially the most educated people

Sense of personal worth builds resilience

29 comments showed how a sense of self-worth was important to people in feeling good and appreciating themselves. Work, feeling useful, doing meaningful tasks, and having a valued role all were important to self-worth.

When I do something and succeed in it. Like doing a job well

I feel good in myself if I have a job, money and I can enjoy with my friends

My profession and my commitment towards my career

Opportunity to express my talents

Taking care of yourself was also important, through taking time to relax, being positive, dressing well, or taking pride in culture.

Love myself

Dressing nicely and looking nice and achieving to have a beautiful family who I adore everyday

Dress in my traditional clothes

- be proud and love myself
-develop confidence
-ignore negative thinking people

Trust myself surround myself with friends that always support me, motivate me and with those that give good impact in life- love myself

People also noted other things supported their wellbeing, including ability to eat healthy food, take exercise, and getting out for fresh air.

This type of care was also noted as the **first thing someone would do to support themselves** if feeling stressed or worried (Q5). Here of 23 comments, 10 noted they would take exercise, go to a park or natural place, and 13 said they would go for a walk. Others noted doing positive activities, like watching comedy or a movie, playing with kids (12). 12 people also said they would relax and take time off, and 6 turned to hobbies, occupation or keeping busy.

> *When I feel stressed, I always do things related to my hobbies such as watching football at the pub, play pool table and going out to drink coffee*

Wellbeing is impacted by wider determinants

11 comments showed that a sense of wellbeing, feeling good and appreciating yourself is closely related to wider life circumstances- and whether your basic needs are met. Food, sense of security and safety, having a job, house, and enough money to live on, as well as respect and access to supportive infrastructure and services were all mentioned.

> *Basic needs fulfilled- can think about future*

> *When I feel equally treated, respected and appreciated*

> *Being free, food on the table and work to do, which puts money in my pocket*

> *Safety where I live, good pharmacists shops, good doctors and all the community services*

> *Feeling good is depending on each person and how person dealt with issues through daily routine and the surrounding*

> *When I have balanced life 😂, job, business, good health and no worries about bills as there's means to sort it out without struggle. Unlike now that you have to pay for everything including TV License*

> *When I have most of the things I need or just knowing that if there is a problem help is not far away I can call someone and I can be helped*

> *Poor or lack of access to basic legal aid and services, which sharpens feelings of anxiety and vulnerability.*
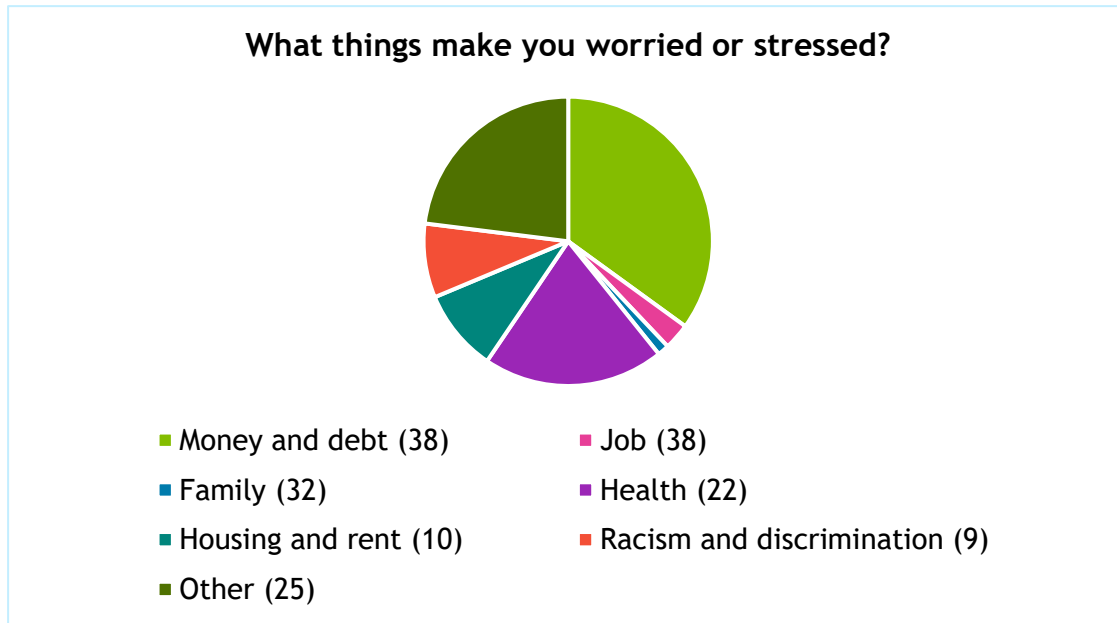
Trying to find solutions to immediate problems, such as money worries, was also seen as a way people would support themselves if worried or stressed (3 comments)

> *Look for extra shift to get money*

> *Having assurance of solving immediate problem like money worry and high rent rate*

What makes people feel worried or stressed?

People told us what things in their lives made them worried or stressed. 120 people commented.

What things make you worried or stressed?

- Money and debt (38)
- Job (38)
- Family (32)
- Health (22)
- Housing and rent (10)
- Racism and discrimination (9)
- Other (25)

Of comments made, worries about **money and debt** were mentioned most (38 times). Comments about money included not having enough money to pay bills, or to meet basic needs, such as food and rent, and lack of money and debt.

> *Definitely money and meeting up with bill payments*

> *Pay rent and many bills to pay*

> *Not having basic needs complete- bed, food, clothes, money worries*

10 comments specifically focused on housing, and rent.

> *Housing in oxford area*

38 comments also related to **jobs and employment**. People mentioned fear of or actual job loss, being unable to find work or get a good job, as well as the stresses of working, pressure, and poor work life balance.

> *Inability to get a good job*

> *Lack of job opportunities due to lack of experience*

> *Poor work-life balance*

> *Job, house, rent and stress at work due to be a minority in the community*

Family concerns were also a big source of stress. Of 32 comments on this, people mentioned 'family pressure', stress of parenting, family relationships,

> *family pressure when there is no food to eat*

> *Too many things to do - work, kids, housework, everything, keeping everyone going and keeping them all happy*

'Health' was noted in 22 comments, including inequalities in health, fear of Covid, and disproportionate impact of ill health on Black and minority ethnic communities.

Racism and discrimination was noted as causing stress in 9 comments.

> *Black life matters where-ever I find myself, discrimination in workplace, denial of rights, and security*

> *Racial discrimination at work or in the community, systematic racism*

> *My children being treated racist by teachers, football coaches or other children*

'**Other**' comments (25) covered school pressure and exams (4), fear for children's future (5), inequalities (4), politics (2), isolation (2), immigration worries (1). Safety and lack of security and protection was also noted by 3,

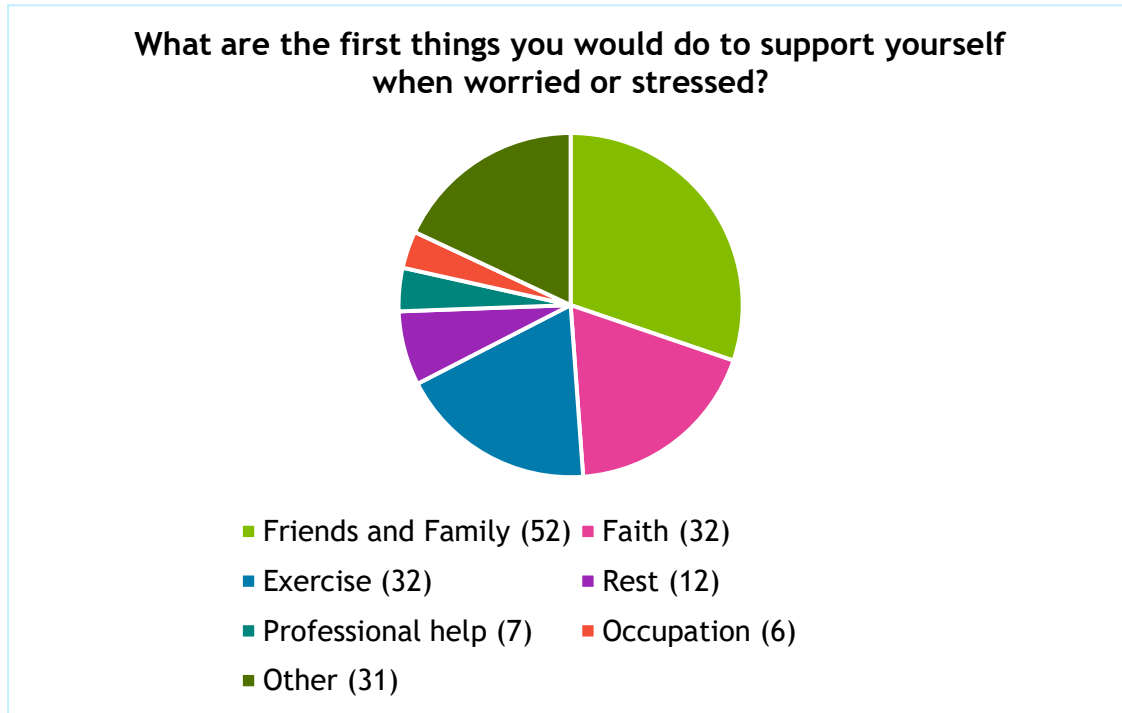> *The unsafe society and everyday struggle for survival in the UK*

> *The safety of ethnic minority, lack of adequate support from the police service and inequality*

And 2 comments on interaction with support systems

> *Social services attitude towards my community*

> *To be let down by social infrastructures like the NHS, schools, police*

What are the first things people would do to support themselves if worried or stressed?

Question 5 asked about what the first things people would do to support themselves if worried or stressed. 121 comments were made. In summary, as already noted in comments above, support from friends and family (52), and faith (32) was key as a first place to go for support when feeling worried or stressed. (Three noted support from community, although friends and family could also be seen as community)

Walking, seeking exercise or being in natural surroundings was also important (32).

Of only 7 who said they would seek professional help, 6 noted this would be with the GP.

'Other' comments (31) included doing enjoyable activities (movies, food etc), and action to sort out underlying problems (rent, money), as well as information.

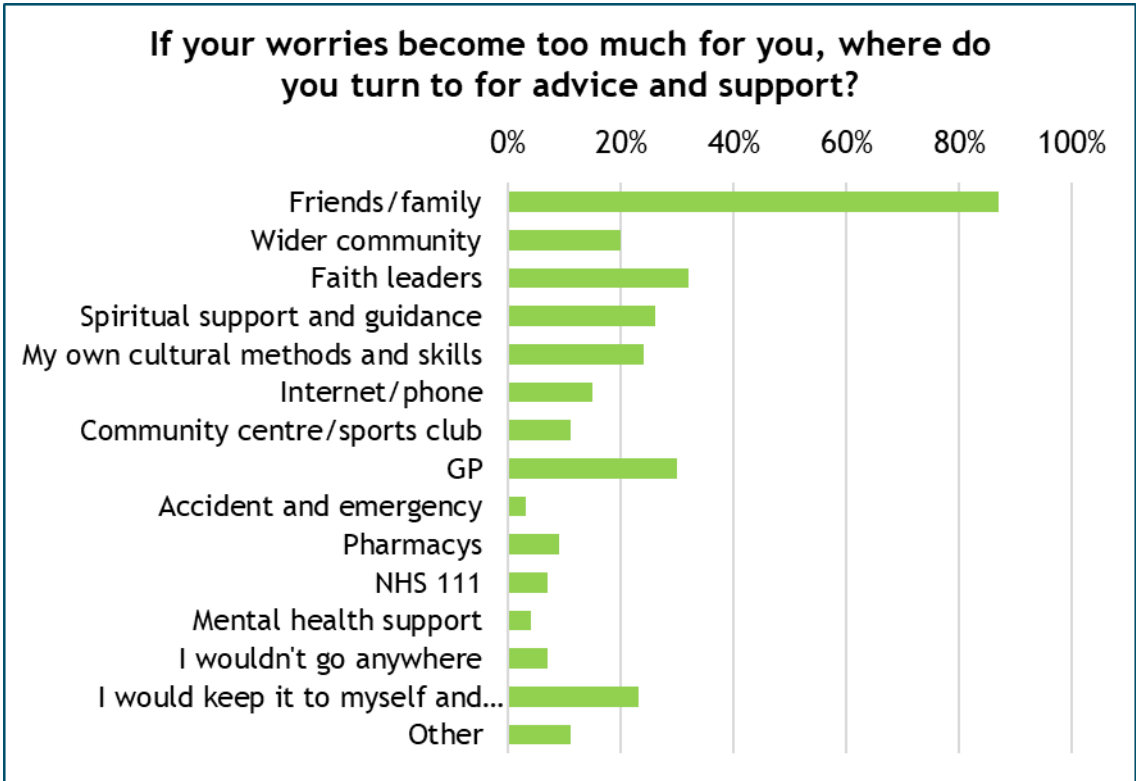**Where do people turn for support if their worries become too much?**

Question 6 asked people where they would turn for support and advice if their worries became too much. Again, support from friends and family, and from faith sources stood out as the place people would turn to for support.

Of 131 responses, over 87% said they would turn to friends and family- and trust and confidence was important. 32% said they would turn to a faith leader for support, and 26% for spiritual support and guidance (total 58% support from faith links). 24% would find help from their own cultural methods and skills. 20% would turn to 'wider community' and '11% to community centre or sports club.

30% said they would turn to their GP but fewer would seek support from other health sources such as mental health support (only 4%), NHS 111, A&E and pharmacy.

23% would 'keep it to myself', and some indicated they would not go anywhere. Only 15% said they would use the internet.

Additional comments further emphasised the role of faith.

(Respondents:131)

What stops people seeking advice and support?

Question 9 asked people to tell us about the **barriers to finding support**. What would make it difficult or stop them and community members from seeking advice and support? 116 people responded, with 156 comments over a range of themes- in order of concern:

> ➢ Lack of time

42 comments were made about lack of time, mainly due to work schedule, but also family commitments and childcare.

> *lack of time with my family is difficult for me to communicate between us all- lack of communication*

> *working and not having enough free time*

> ➢ Language barriers

31 comments were made about language barriers acting to stop people seeking support.

> *The things that make it difficult or stop you and members of your community seeking advice and support is time and language. Why I say like that because sometimes someone need your help but we don't have time to help them, or you really want to help them but you have problem with the language*

> *Language barrier and cultural stigmata of issues or basic understanding of issues as English not first language*

> ➢ Immigration worries

28 comments said that worries about immigration and immigration status were a barrier to seeking support. People spoke of the fear of telling someone how they lived for fear of immigration being involved.

> *Immigration worries and also fear of disappointment of not getting the help we needed*

> ➢ *Lack of appropriate support*

16 comments spoke about **lack of appropriate support** acting as a barrier.

This included comments that there was a lack of understanding about cultural needs, and lack of culturally appropriate support. It was also important to have someone who reflected their background and experience.

> *There is hardly anyone that looks like me among the agencies officers and many solutions offered is not relevant to our needs*

> *Lack of understanding of my cultural background*

> *If the supports being offered do not meet our needs or if there is a disconnect with persons offering support like differences in ethnicity or obvious lack of empathy*

> *Trust-Lack of community involvement or a top down approach*

Comments also focused on **need to be taken seriously, and to experience trust**, empathy and confidentiality in support.

> *Language barriers, stigma attached with mental illness and lack of appropriate services available for ethnic minority communities*

> *If the supports being offered do not meet our needs or if there is a disconnect with persons offering support like differences*

> *Seriousness and the feelings of the advisor*

> *Also being afraid of what people will think about you and if they are mature enough to keep confidential information confidential*

> *Fear I may not be taken seriously as they may say everyone is going through the same thing*

> *They feel like they won't get help as they haven't in other areas*

➤ Stigma

13 comments focused on stigma as barriers surrounding seeking advice and support. This was around fears of what others might think of you, and especially with mental health support.

> *The stigma of needing that type of support*

> *Social stigma or being judged*

> *Stigma and apprehension about perception of others*

> *Culturally, its seen as weak- a big stigma*

> *People think if they admit to mental health problems people will think they're crazy or not ok to be around. There's a real stigma. Women often end up on antidepressants but men wouldn't say they're feeling down as that's seen as weak. They laugh about it like it's silly.*

➤ *Access and information*

10 comments noted lack of access, or lack of information about support was a barrier.

> *Lack of awareness of facilities around me*

> *Lack of proper messaging*

➢ *Racism and discrimination*

As well as previous comments about lack of culturally appropriate support, 7 comments focused on racism and systemic racism.

Racial and ethnic profiling

Black life matters, if u express it, no action will be carried out

The reason why it's difficult to seek advice is because of race, certain people just don't understand it as they feel its ok to be racial abusive to us Black people

Immigration worries, absence of confidentiality, feeling of guilt or shame, absence of empathy, racism and other discriminatory forms of conduct.
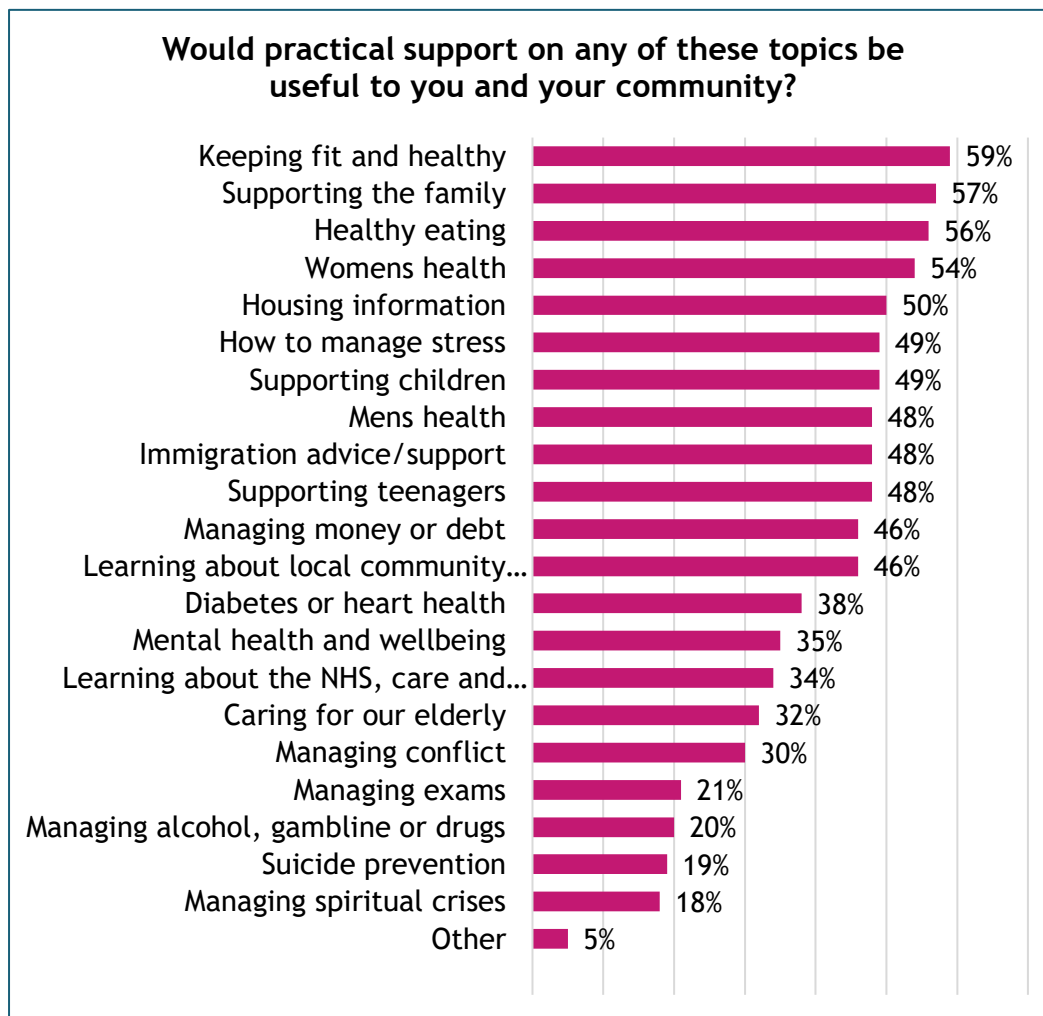
➢ *Other* comments focused on lack of internet access, low self-esteem making it hard to speak out, drugs and crime and safety, lack of childcare, and family attitudes as barriers to seeking support.

Practical suggestions and ideas for improvements to wellbeing

Questions 2, 7, and 10 focused on suggestions for practical improvements to support wellbeing in individuals and community.

Question 7 focused on *what topics would be useful to people for practical support for the community-* giving a tick box of choices.

136 people's answers echoed discussions from the focus groups- that **communities have a huge interest in and desire for more information and support on a range of issues affecting their health, wellbeing and underlying structural stresses**. It perhaps also shows that there is unmet need- almost everything is important- again supporting the focus group suggestion that mental health support needs to be part of a solutions based, practical approach embedded within wider health and wellbeing support.

Would practical support on any of these topics be useful to you and your community?

Topic	Percentage
Keeping fit and healthy	59%
Supporting the family	57%
Healthy eating	56%
Womens health	54%
Housing information	50%
How to manage stress	49%
Supporting children	49%
Mens health	48%
Immigration advice/support	48%
Supporting teenagers	48%
Managing money or debt	46%
Learning about local community...	46%
Diabetes or heart health	38%
Mental health and wellbeing	35%
Learning about the NHS, care and...	34%
Caring for our elderly	32%
Managing conflict	30%
Managing exams	21%
Managing alcohol, gambline or drugs	20%
Suicide prevention	19%
Managing spiritual crises	18%
Other	5%

Answers highlighted important themes also reflected previous comments- (people could select any topic that interested them, so could select multiple boxes- percentages show how many chose these options)

- o Practical **support for family** including children, teenagers was important (56% and 48%, 48%, chose these), with things like managing exam pressure included. 32% noted they would like support for the elderly.

Very little for the elderly in the community

- Interest in broad skills and support to **manage mental wellbeing** was clear. Over 35% said they would like more support for mental health, as well as nearly 18% for managing spiritual crises, over 19% for suicide prevention, and nearly 60% help to 'manage stress'.

Raising educational awareness of mental health services

- Other **health issues and lifestyle advice** also were of interest, including awareness and preventive approaches for men and women's health (48% and 53%), healthy eating and keeping fit and healthy (56% and 59% chose this) and 40% chose managing diabetes or heart health.

- Need for **information, signposting and support about wider services** was also clear, including housing (50%), managing money or debt (46%), immigration information and support (48%), learning about the NHS and local health and care support (34%) and learning about local community activities (46%).
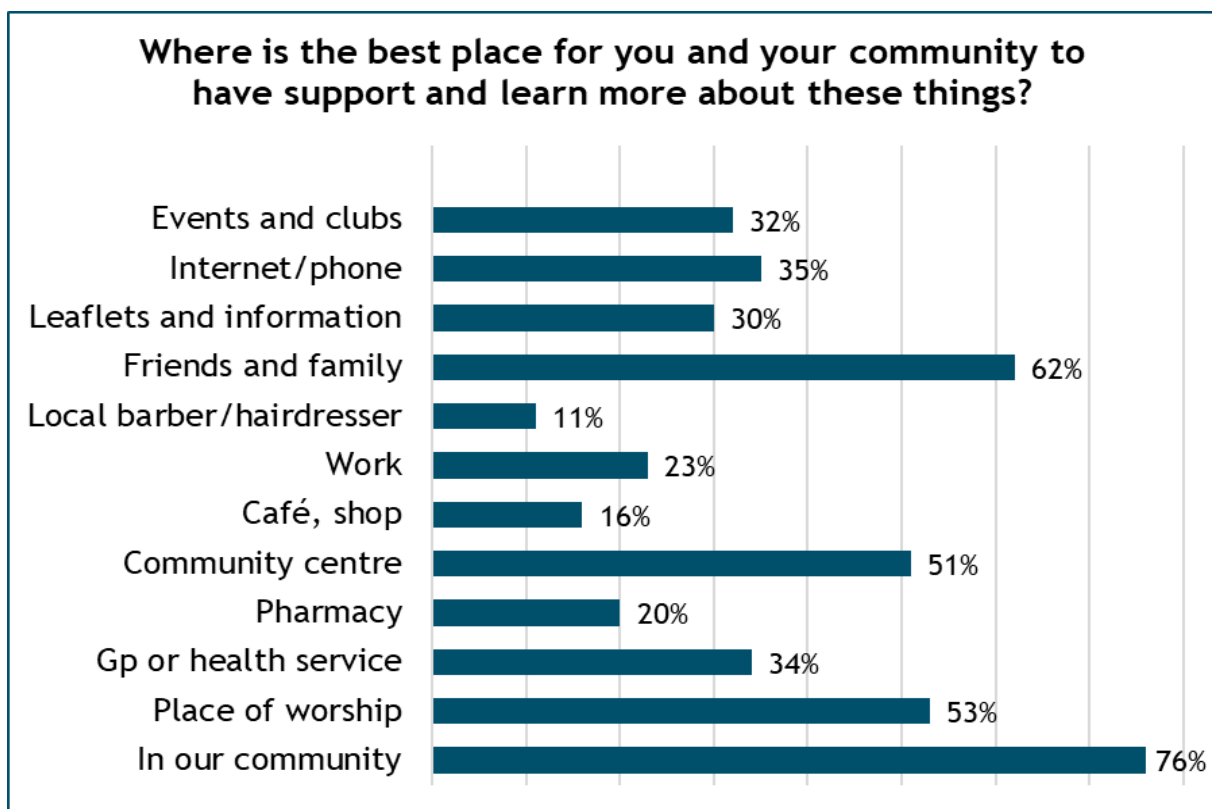
For me personally I need help to find a home with a low rent, for us to relieve/ reduce our spending

Help with **managing alcohol, gambling or drugs** (20%) and managing **conflict** (29%) was also of interest.

Learning about safety

Where is the best place for you and your community to have support and learn about these things?

Question 8 asked people to tell us where the best place was to receive support and learn about the things they had said would be useful to them. Again, a check list gave options, and people could tick all options they felt were important. 136 answered these questions.

Where is the best place for you and your community to have support and learn more about these things?

Category	Percentage
Events and clubs	32%
Internet/phone	35%
Leaflets and information	30%
Friends and family	62%
Local barber/hairdresser	11%
Work	23%
Café, shop	16%
Community centre	51%
Pharmacy	20%
Gp or health service	34%
Place of worship	53%
In our community	76%

(136 respondents)

Answers supported views from previous questions- that **support from places of trust was important.**

- having support through **friends and family** 62%)
- **faith** ('place of worship' 53%)
- different places in the **community** (76% 'in our community' and 51% 'community centre' and 31% 'events and clubs') were preferred
- **information-** via leaflets (30%), internet and phone (34%) *'Designated community co-ordinator' and Libraries, Local Council website, buses*
- **GP (34%) and pharmacy (20%)**
- **Other venues- barbers' shops[5] (11%)**

Other people said they would like home visits.

> *Home visits (one to one)*

What ideas and improvements would people like to see to support community and personal wellbeing?

Questions 2 (107 comments) and 10 (55 comments) asked people to tell us about what improvements and further suggestions they would like to see to support their community with wellbeing. People had lots of ideas and comments, grouped as follows;

➢ **Health service and mental health support**

GP and frontline health service support

Comments on GP and healthcare support focused on issues of access and communication.

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[5] Supporting barbers' shops to deliver information about NHS Health Checks was highlighted in our Men's Health film (2019). Oxfordshire County Council have commissioned Lions Barber Collective to deliver mental health awareness (Oct 2020). These results (11% chosen) indicate that a sensitive, culturally appropriate, community-informed approach may be needed if barbers are to be seen as trusted sources of information and support. This needs to be developed in conjunction with both barbers themselves from and with diverse communities.

Often GP and specialist made similar comment, "Sorry can't do anything else to find out or help what illness patient has" Could be better if both GP and the specialist find other alternatives to cure patient and be transparent

Easy access to health facility...GP, Dental facilities.

Booking appointment for weekend and evening times will be appreciated.

GP to have more time to attend to patients and do more routine blood tests for patients

Help registering with a GP- where they can get access to health service

Bringing the health care facilities closer to the people in the community, this will minimise the long queue in waiting for appointments and more staff and funding in the sector

I just have to deal with my own stress but if our local medical centres and pharmacies and the community have all they need we will just have things done in our local community without thinking I'm on my own

Comments on the need for respect, relationship, better understanding of, and action on the needs and health issues facing Black and minority ethnic people using health services were made.

Closer engagement and collaboration of GPs and other frontline healthcare staff with BAME community groups. There appears to be an aloofness that impairs their understanding of BAME socio-cultural and economic dynamics that affect health and wellbeing

If the health system can be more familiar proactive with conditions affecting BNEM people rather than waiting until it's too late before doing something

And comments about perceived discrimination or underlying assumptions

Good treatment at the hospitals without segregation

Professionals to treat me as an individual and not just make assumptions based on general issues migrants face - ask me any question you want to know

Mental health support

Better mental health support

The wait list for users of the NHS CAMHS (new referrals and existing users) in Oxfordshire at the moment is appalling. It is up to 24months currently. The service is presently not fit for purpose. It needs urgent and rapid turnaround The NHS psychological services in the county is just as bad as the CAMHS for exactly the same reason

More help in the community would be great. There may people who are suffering with depression and housing issue and autism, children with autism and their parents cannot get help

Some comments focused on the need for safe, culturally appropriate trusted spaces and information to enable people to begin to speak about and find support for mental health and wellbeing

Our community is not very open to the idea of discussing mental health issues, especially the men. It's still seen as a weakness so people try not to reveal that they're, for example, feeling depressed. Encouraging people to share their feelings and to let them see its quite normal would be helpful. Also maybe leaflets etc in Arabic.

Have some anonymous talking space with some advices when needed (without being on a waiting list)

I would like to see available and accessible culturally appropriate therapy, counselling and coaching for ethnic minority communities in Oxfordshire

Pre crisis support- privilege community centres for more people LIFE

Mental Health First Aid course for members of the community

More help for these who are not well-liked mental health because there are lots of them that need help

- ➢ **Accessible information**
  People also spoke about needing clear information about health and wellbeing, particularly in language translations, and using more accessible, user friendly formats

  Better information on key areas which impact people of colour more e.g. sickle cell and prostate cancer

  Symposia and Educational materials in indigenous languages

  Investment In production of video clips that address BAME issues by BAME Health professionals should be made. Such resources can easily be shared

  That more information should be given to the community through appropriate authorities about their wellbeing

  Information about how to support each other in by video or audio in different languages

  Health promotion seminar or conference

  Create online workshop where community can also access to it

More online forum to discuss issues germane to the development and cohesion of the local community

Coming to our meetings to advise us in some of things we can do or get from government as a community or individual & helping us in every way possible

Transparent means of engagement with different stakeholders in the community, either via newsletter or community newspaper

➢ **Equity and bringing people into the forefront of leading solutions**

More people from different backgrounds being trained within our community to represent the communities they live in and they will be able to understand issues quickly as they can relate to what the people go through

Get more people from my community the Black community involved key decision-making functions they can speak to my community better

In addition to its current laudable efforts, the Local Council should consider setting up a dedicated unit on direct community engagement, promotion of civic and communal solidarity, and better relations with the police, who very few ethnic minority people, if any, trust because they are perceived as institutionally racist and hostile, rather than firm but just or fair law enforcers.

➢ **Wellbeing support**

People suggested practical, accessible, affordable, and targeted community-based sessions and information to support with wellbeing-planned with their input.

Understanding wellbeing

I'm not sure my community know what well-being really is and to look after it they need to know why and how

The idea of self-care and wellbeing isn't really understood. It's seen as indulgent and selfish.

It needs to be communicated that it's good to look after your wellbeing.

Healthy lifestyle support

People suggested improvements that could help people and their communities with healthier lifestyles. This included ideas for community sports events, exercise classes for all ages, health walks and hiking trips, and support with healthier eating and weight loss, as well as events targeted at diverse communities.

More education on healthy food/cooking with cooking practicals using ethnic meals; food tasting sessions

Education on harmful consumptions towards attitude & lifestyle changes

More wellbeing classes and conferences especially for BME

More Educations for my people on health and well-being

Provision of public gyms which are free to use. This is cheaper than cost of medicines. Also, encouraging group basic exercising e.g. Mother & Child Exercise Sessions; Fathers and Sons Practice Sessions

We need community based activity such as tennis, volleyball, basketball games etc. for all age groups for leisure which could help people, especially younger ones to be more engaged with the community which could help build a safer and better community

Health club- whereby people meet with other people of positive mindset to discuss their worries. And informed feedback to be provided

To different communities to do things in fresh air when they want. To have the air and health and kids when they going to parks to don't be so boring

> **Tackling underlying drivers of poor health and wellbeing**

People also raised concerns about drivers of poor health, poor access, barriers, and equity- wanting to find solutions to these underlying issues. This included high cost and availability of housing, immigration worries, addressing neighbourhood issues, communication with the police, and discrimination.

Finding a way to stop drug dealers, stop knife criminal, community coming together to celebrate life and peace, building good relationships with the police and the people in authority

We must help police stop the gangs and drug dealers in the community Building a good relationships with the police and the people in authority.

Help community to get support for example support from city council, citizen advice and others benefit agency

The callous financial burden placed on immigrants for the renewal of their documents

Also many who their immigration status won't permit them to get help as they are scared of deportation should be able to get help when needed

-increase salary
-reduce house rent
More support to the family e.g. housing issues and immigration worries

Review for people who have been on a very long waiting list for affordable housing. Why do we have to keep on his when we know that we won't get anywhere anyway? Contact people and update them on housing situations so we know what's going on

Support for families to ensure children to come out of poverty

More equal/equity opportunities for Black and ethnic minority professionals

More acceptance of the minority

90 percent of British Nigerian were denied the government self-employments grant even when is obvious we weren't working

➢ **Community and social support**

An African Community Centre, A safe space for both men and women to meet and discuss common issue safely. Also where they can learning Sewing, cooking various African delicacies and other African acts

Provide leisure and community centre for BAME people

It would be nice if there's a forum for integrated social events that will enhance more unity in the neighbourhood

The community need places for entertainments. Youth Club to keep teenager off street

Community summer Sports Day for kids, teens, young adults and adults

Enhance social trust and supporting members living harmoniously together by fostering civic engagement. Empowering members to participate in community and democracy

Sharing parenting skills that works for the Africans

➢ **Employment, support, and skills**

Provide help free class to support people in community that speak very well English

Our youth need to be encouraged of learning basic life skills which is letting them down incredibly. We need more apprenticeship for them and hands on activities rather the exploring only on computer games

I need my community to be more integrated and involved in the society. Learn more about our rights and how to approach for support and help. Plus, how to look after ourselves and our families

Help community to get support…from city council, citizen advice and others benefit agency

Make it easier for minority businesses to be set up. To help give a leg up out of dependence.

A wider range of educational and training opportunities/facilities

I would like the community to have more businesses run by Black people as we aren't seeing that in our community and that needs to change as soon as possible

Managing during Covid

We asked people to tell us about the challenges faced during Covid lockdown, and about any support they had received.

Impact of Covid lockdown on wellbeing

49 comments focused on the emotional and other impacts of Covid lockdown- people told us about increased anxiety, stress, and about their challenges of isolation, and changes of routine, not being able to see community, friends, and family.

Very tough. Communal breakdown, isolation, mental stress, other health issues, and anxiety about the future.

Stressful/ worried. Taking care of mental wellbeing is important while staying at home during the covid lockdown, - unable to go out and see friends/ family is frustrated, but I have to stay calm and think positive that this current situation is temporary for fight the virus

Not being able to attend funerals or go to a sick friend. Saying your last goodbye before death

The environment became seriously unsafe because of some crime practices due to boredom

Many commented on the sense of isolation, and loss of normal activities- going to the gym, cafes, and shopping- routines, community events and networks so important to wellbeing,

It has felt isolating and social norms in Ramadan and Eid especially have made it hard because we would normally have lots of fun and that was

really missing, even with a big effort to do zooms and things.

Being unable to meet family and community or even attend place of worship as everyone indoors and have to be in lockdown plus I and many in community having to shield themselves

Some spoke of challenge of living in multiple occupancy homes, and added pressures from being unable to go out

Like everyone else this has been a challenging time. Most of our community were furlough and the self-employed were hardest hit. We have large number of people living together in same accommodation who were unable to go to work or schools due to lockdown and this poises a huge challenge. It increases the friction among family members and brought out lot of social and health challenges.

For families, there were extra concerns around children and young people, including impact on schoolwork, and on parent's ability to work and earn income, and lack of space

Having to cope with being stuck in the home and not being able to do anything fun with the children

It has been very difficult since the lockdown especially when you have had a condition and you have two kids to look after and there's no space for them to play

The challenge is the childcare, this has hindered our ability to work the way we want and at the same time reduce our income

Massively hard with school and work (at home) and housework and keeping the kids mentally ok and my husband supported

My major challenge has been parenting

The disproportionate effect of Covid on people from Black and Minority Ethnic communities was also of concern.

Lack of attention to underlying issues affecting ethnic minorities. For example, I called my surgery and asked for Vitamin D test. The receptionist wanted to know why I have a need for the test. Despite my explanation that I am ethnic minority adversely impacted by Covid, it's essential that my Vit-D is not compromised. She was not understanding. Such attitude is discouraging.

Finance, business, and work

28 comments focused on worries about work and finance.

A number of people commented that they had worked throughout Covid as front-line NHS work, key workers or in businesses.

I worked through it all and I am feeling tired

It has been extremely difficult as I work as a bank staff and has been ill almost 6 months plus and have no public fund...I ran into so much debt with my rent, gas, electricity and other debts. At the moment God is my strength if not sometimes it feels like I am suffocating in my problem and I can catch my breath I tend to get very angry most of the time as I feel very frustrated with no help at all.

Working too hard as a first-liner

I just been working and helping the NHS

Falling through the cracks

Whilst some were able to gain government support or furlough funds, others were not able to access any support, 'falling through the cracks'- particularly if on casual, informal or self-employed work, or after job loss

It's very tough situation because we have no access to my common help from government because we are foreigners

It has been hard, jobs loss

During the lockdown many of the difficulties we experienced because we lost jobs, so did the government give 80% but it was not enough because we had to pay for the rent, bills, sometimes we did not have the money to buy our needs

Lack of funds from Government for majority of the self-employed and no work to feed the family

My business was greatly affected and so are other businesses

The community has had a lot of people struggling a lot because they work casually …and therefore have had no support. It has been very, very hard for many people.

I had to have the community larder for a while and it was great but I fell through the cracks of financial support from the government so things have been really difficult

We did not receive any assistance, only universal credit, but it was a little and that was not enough for us who have children

Universal credit (UC) very helpful but business support wasn't applicable for most people I know who applied

Food poverty

Food poverty is huge…it's not just going to go away, it's been hidden, but we see it more and more, it's not just because of Covid

We heard about food poverty both within the questionnaire, and from wider conversations. Food poverty and the fragility of household incomes came to the fore in the lockdown, exposing underlying issues of low income and lack of affordable access. Oxford Community Action established a food distribution point early on, responding to the fact that many in the communities were not accessing mainstream emergency food sources, due to stigma, and wanting privacy and confidentiality. By October the group, via trusted community volunteers was providing food to over 450 households[6]. 50 comments were made about food access in the responses, and 41 noted they had received food support via various sources.

Food parcels received every Wednesday were very useful and helped a lot

During this time we receive help from our community in Oxford- which delivered food- we feel thankful for our community attention to us

The food that delivered and organised by the diversity community has helped family reduced and safe some expenses on weekly food shopping

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[6] Food was supplied initially by volunteers sourcing food from local supermarkets, but OCA later gained support of Oxford Hub, Oxford Mutual Aid, Oxford City Council and Sofea for food supplies, PPE and other supplies and Oxford City College and ARK-T for space. By October OCA explored new models for this to continue once emergency support comes to an end. Demand continues to increase- and as of January 2021 supplying over 480 households weekly.

Very tough as people find it difficult to feed but we the support of council we were able to manage some

For myself it's hard to buy food because we have to queue and we not allowed to buy much quantities (specially I live far from the food shop)

One single mum had just had a baby, come home from hospital and her cupboards were bare, she had nothing at home

Some supermarkets increased the prices before the lockdown which is not good because it's made live harder for the community

Whilst several comments noted that some of the food received was not appropriate or familiar culturally, most acknowledged how important the support had been.

Great appreciation goes to Oxford Community Action for their weekly food distribution to our home. This save us from embarrassment of going to food banks and collection centre

I have had to use the community larder and it has been truly amazing. Sometimes the food has been very different to what I'm used to, but it has shown care and community support

Racism and discrimination

4 commented on experiences of racism or discrimination, during Covid.

Being predominantly frontline workers, ethnic minorities were mostly affected by the Covid-19 virus. This then made some Black people face some discrimination in public. For example, when I go for evening walks, non-black (mostly white) people would try to avoid me as much as possible to the extent of almost putting their lives in danger by stepping into a moving car's way.

A lot of negative reports about black people

Support during Covid

People noted the support they had received from their communities, faith groups, Oxford Community Action, Oxford City Council, pharmacies, and others including food (41), medicines, online links and in other ways.

food bank, Oxford City Council calling me for help with anything like shopping and medicine pick-ups but also biggest help was school voucher scheme which help greatly

I was having a Covid pass 2 months ago and I was happy to get support as food bank and also advice from Oxford City Council from covid line. I feels it's really helpful when I was thinking about my illness and I get call everyday from Oxford City Council just to ask for my condition which is really touch for me. My opinion is please keep in touch with people who

suffer from Covid because your care is our strength

All support was from within my community group, and our church. Weekly zoom prayers, Weekly community group to share important news and support. Our community Facebook page hosted variety of activities for family, children music

Accessible information

Early on Oxford Community Action informed Healthwatch Oxfordshire about community need and lack of accessible, clear Covid information in community languages. In April 2020, we worked together, with community translators to produce Covid information about local and national support, in five languages (Swahili, Arabic, Somali, Tetum, Amharic). These were distributed to 700 households, and again in October.

Responding to the questionnaire, commenting on what could be better in managing Covid, people supported the need for reliable trustworthy local information, and language translations

Need lockdown rules translate into our local language. And distribute via email. Facebook or other social media so that we all know and follow the rules

We received support during Covid like food donation, leaflets and information about Covid prevention

There were loads of Public Health messages sent as leaflets to my workplace (Community Pharmacy) and I also received personal Gov.Uk messages about safety precautions which was very helpful to share with patients and customers. But I'm not sure if everyone within my community obtained enough and appropriate information to remain informed.

WHO regular advisory guidance, which were practical and easy to understand and devoid of any political coloration or sound bites that tended to put people off.

There has been too many fake information flying around

Up to now I haven't received any help from community because no information

Better community-wide information about who needs help, what we can do for others in the area. Most information has been coordinated within micro communities, which separates better off groups from those who need more support

Easily digestible professional health advice on dealing with the pandemic through various means, as well as advice and available support for individuals and small businesses/ self-employed that are facing difficulties.

Wider context

- Community engagement: improving health and wellbeing and reducing health inequalities. NICE Guideline NG44. 2016. https://www.nice.org.uk/guidance/ng44/chapter/recommendations
- The commitments being taken forward by national organisations in response to the Five Year Forward View for Mental Health (FYFVMH) are underpinned by a need to achieve equality in mental health, particularly for BAME groups.
- Murray, K (2020) *Mapping of BAME Mental Health Services*. BAME Stream. July 2020. Noted -increased demand for BAME mental health services but lack of BAME mental health provision. -Mainstream providers acknowledge lack of cultural competencies and perspectives in their work.
- Commissioners aware of equality issues but do not factor it into the decisions they make when commissioning services. http://www.bamestream.org.uk/wp-content/pdf/National-Mapping-of-BAME-Mental-Health-Services.pdf
- From Healthwatch Oxfordshire report '*Let's Talk about Mental Health*' (August 2020:18). 'Inequalities and discrimination can influence mental health and wellbeing, help-seeking practices, and recovery from illness. Research shows that people from BAME communities are at higher risk of experiencing mental health problems due to prejudice and discrimination as well as vulnerability to racism-related crime, violence, and abuse[7]. At the same time, they are also far less likely to receive or access mental health care than white British people[8]. Research has identified several factors that make it difficult for BAME groups to access mainstream mental health services. Besides distance to services and long waiting times, obstacles include lack of knowledge and trust around mental health care, language barriers, cultural beliefs, stigma, and the expectation in some BAME communities that people should not disclose their emotional difficulties and, rather than seek help, are expected to manage them themselves. There is also some evidence that institutional attitudes towards minority groups mean that health services often fail to fully consider the impact that racial inequality and broader social determinants have on mental health and

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[7] Mental Health Foundation. (2020). Tackling social inequalities to reduce mental health problems: How everyone can flourish equally. Mental Health Foundation: London

[8] Mental Health Foundation. (2016). Fundamental Facts About Mental Health 2016. Mental Health Foundation: London

wellbeing among BAME groups[9] These findings highlight the need for mental health policy makers and providers to proactively understand and address the barriers to accessing services among BAME groups. In addition, mental health services must be accommodating to people with diverse languages, cultural beliefs and practices, and committed to reducing experiences of racism and discrimination[10]'.

- https://committees.parliament.uk/publications/3438/documents/32865/default/ *A critical juncture for public services: lessons from Covid-19.* House of Lords Public Services Committee. 1st report session 2019-21. HL Paper 167. 13 November 2020. P.25. 'Designers and providers of services have paid insufficient attention to the specific needs of minority groups' and accentuates importance of involving people with lived experience in development of services.

- *Commission for equality in mental health. Mental health for all?* The final report of the commission for Equality in mental health. Centre for Mental Health November 2020. https://www.centreformentalhealth.org.uk Some communities face a 'triple barrier' in mental health, reflecting social disadvantage, poor access, and poor experience and outcomes of support. Mental health services should be accountable to local communities about the steps being taken to close the gaps. Efforts should be made to tackle the underlying drivers of ill health- poverty and inequality and tackling racism and discrimination. Communities can lead the way in pursuing mental health equality.

- *Advancing Mental Health Equalities Strategy.* NHS. September 2020. https://www.england.nhs.uk/publication/advancing-mental-health-equalities-strategy/

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[9] Bignall, T. Jeraj, S., Helsby, E. and Butt, J. (2019). Racial disparities in mental health: Literature and evidence review. Race Equality Foundation: London

[10] https://www.mentalhealth.org.uk/a-to-z/b/black-asian-and-minority-ethnic-bame-communities

Appendices

Appendix 1 - Questionnaire

Wellbeing - you and your community

Oxford Community Action Project (in collaboration with East Timorese, Pakistani, Sudanese, Syrian, Nigerian, Palestinian, East African communities, Word Fountain) and Healthwatch Oxfordshire are working together. We want to hear from all in Oxford's diverse communities who have recently settled here- what things could support you and your community and improve wellbeing?

Why not share the link (https://www.smartquestionnaire.co.uk/s/wellbeing-youandyourcommunity/) with your community via social media to make sure their views are heard?

Healthwatch Oxfordshire is INDEPENDENT- we make sure the voice of people like you who use health services gets heard. This questionnaire is ANONYMOUS- that means we don't ask who you are or anything about you...What you tell us will be used to help improve support to your community. Contact us if you need help filling in this questionnaire or need it in a printed copy e.g. Large Print, Easy Read or translation.

1. Your consent: This questionnaire is anonymous. This means you don't have to say who you are, and you cannot be identified. Healthwatch Oxfordshire do make use of people's comments in reports or on our website- we aim to try and make a difference by representing your views. We need to know if you are happy for your anonymous comments to be used in this way-

2. What improvements would you like to see for your community -to help support people with their wellbeing? What ideas can you suggest?

3. What helps you to feel good in yourself AND appreciate yourself?

4. What things in your life can make you feel worried or stressed? (e.g. job, money, family pressure)

5. When you feel worried or stressed what are the first things you would do to support yourself?

6. If your worries become too much for you, where do you turn for advice or support? (Tick as many that apply to you)

☐ Friends and family

☐ My wider community

☐ Faith leader- Imam, Pastor, other

☐ Spiritual support and guidance

☐ My own cultural methods and skills

☐ Internet/ phone

☐ Community Centre/ Sports club

☐ My GP

☐ Accident and Emergency

☐ Pharmacy

☐ NHS 111

☐ Mental health support

☐ I wouldn't go anywhere

☐ I would keep it to myself- and manage on my own

☐ Other (please specify):

Add anything else you would like to say about this

7. Would practical support on any of these topics be useful to you and your community? (Tick as many that you think apply)

☐ Language support

☐ Men's health

☐ Women's health

☐ Healthy eating

☐ Diabetes or heart health

☐ Housing information

☐ How to manage stress

☐ Managing money or debt

☐ Immigration information and support

- [ ] Managing spiritual crises

- [ ] Mental health and wellbeing

- [ ] Managing exams

- [ ] Suicide prevention

- [ ] Managing alcohol, gambling or drugs

- [ ] Managing conflict

- [ ] Supporting the Family

- [ ] Supporting Children

- [ ] Supporting teenagers

- [ ] Caring for our elderly

- [ ] Keeping fit and healthy

- [ ] Learning about the NHS, local health and care support

- [ ] Learning about local community activities and support

- [ ] Other - please tell us your ideas and suggestions

8. **Where is the best place for you or your community to have support and learn more about these things? (Tick as many as you think would be the best places)**

- [ ] In our community

- [ ] Place of worship- e.g. mosque or church

- [ ] GP or health service

- [ ] Pharmacy

- [ ] Community centre

- [ ] Café/ shop

- [ ] At work

- [ ] Local barbers / hairdressers

- [ ] Friends and family

☐ Leaflets and information

☐ Internet/phone

☐ Events and clubs

☐ Other - please tell us where

9. Tell us what would make it difficult or stop you and members of your community - seeking advice and support? (e.g. time, language, working, immigration worries, family...other things)

10. Is there anything else you would like to tell us about you and your community wellbeing? Tell us your ideas, suggestions or views you have on this.

11. How has it been for you in the Coronavirus lockdown? What have been the challenges for you and your community?.

12. If you received any support during coronavirus, tell us what this was. What worked well and what could be better?

13. Can you suggest anything that would improve the support to you or your community during coronavirus?

14. Tell us the first part of your postcode e.g. OX4

15. What is your age?

16. Are you?

☐ Male

☐ Female

☐ Non-binary

17. How do you define your ethnicity? (As taken from National Census)

☐ Indian

☐ Pakistani

☐ Bangladeshi

☐ Chinese

☐ Any other Asian Background

☐ African

☐ Caribbean

☐ Any other Black/African/Caribbean background

☐ Arab

☐ White and Black Caribbean

☐ White and Black African

☐ White and Asian

☐ Any other Mixed/ Multiple ethnic background

☐ English/Welsh/Scottish/Northern Irish/British

☐ Irish

☐ Gypsy/ Irish Traveller

☐ Any other White Background

☐ Other

☐ Or tell us your own definition

Thank you for your comments!

References

Department of Health (2005) *Delivering Race Equality in Mental Health Care*.

Marmot, M. Fair society, Healthy lives: *The Marmot Review: strategic review of health inequalities in England post-2010.* (2010)

Healthwatch Oxfordshire (2020) 'You do not choose to be unwell' Executive Summary- Mental Health report and main report. https://cdn-hwoxfordshire.pressidium.com/wp-content/uploads/2020/09/Lets-Talk-About-Mental-Health-Executive-Summary.pdf

Healthwatch Oxfordshire and East Oxford United (2018) Men's Health https://healthwatchoxfordshire.co.uk/the-project-fund-reports/

Independent Mental Health Taskforce (2019) *The Five Year Forward View for Mental Health*. Independent Mental Health Taskforce to the NHS in England. February 2019.

Institute of Health Equity (2020) *Health Equity in England. The Marmot Review 10 years on*.

Oxfordshire Joint Strategic Needs Assessment. Oxfordshire's 10 most deprived wards. September 2020. https://insight.oxfordshire.gov.uk/cms/system/files/documents/202009_Bitesize_Oxfordshire%27s_10_most_deprived_wards_1.pdf

Oxfordshire Joint Strategic Needs Assessment. New Settlement Profile- Blackbird Leys. Nov 2020. https://insight.oxfordshire.gov.uk/cms/joint-strategic-needs-assessment c

Public Health England (2020) *Disparities in the risk and outcomes of COVID-19*

Runnymede Trust and ICM (2020). *Over-exposed and under-protected. The Devastating Impact of Covid-19 on Black and Minority Ethnic Communities in Great Britain*. Haque, Z., Becares, L., Treolar, N. Runnymede Trust.

Healthwatch Oxfordshire our friendly staff are here for you to help answer questions or give you information on health and care services in Oxfordshire. If you need more information or advice call us on **01865 520 520** from 9-4 p.m. Monday to Friday

Visit our website www.healthwatchoxfordshire.co.uk (with translation facility)

email us on hello@healthwatchoxfordshire.co.uk

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Vizita ami-nia sítiu www.healthwatchoxfordshire.co.uk (ho fasilidade tradusaun) haruka email mai ami iha hello@healthwatchoxfordshire.co.uk

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Healthwatch Oxfordshire wafanyakazi wetu wenye urafiki, wako hapa kwa ajili yako ili kusaidia kujibu maswali au kukupa habari juu ya huduma za afya na huduma zilizoko Oxfordshire. Ik iwa unahitaji habari zaidi au ushauri piga simu kwa 01865 520 520 kutoka saa 3 asubuhi hadi saa 10 jioni, Jumatatu hadi Ijumaa. Tembelea tovuti yetu www.healthwatchoxfordshire.co.uk (pamoja na huduma ya kutafsiri) tutumie barua pepe kwa hello@healthwatchoxfordshire.co.uk .

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Oxford Community Action

www.oxfordcommunityaction.org - local action by Oxford's diverse communities

عمل محلي من مجتمعات أكسفورد المتنوعة

Qeynta Talo bixinta

Ba comunidade hotu hotu ina Oxford laran

hatua ya Jumuiya ya Oxford

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