

HEALTHWATCH BARNET

JHWB REPORT



2020

healthwatch
Barnet

COMMUNITY ENGAGEMENT FINDINGS

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1. Background and Rationale

The Joint Health and Wellbeing Strategy (JHWS) is one of the Health and Wellbeing Board's (HWBB) 'key responsibilities' (LBB; 2015). The current JHWS is due to end in 2020, and the new strategy for 2021-2025 is currently in development.

As the London Borough of Barnet (LBB) and partners continue to plan for Covid-19 recovery, there is increasing recognition among HWBB representatives that recovery strategies also need to be integrated into the JHWS. The HWBB recognises that community engagement is a vital tool in ensuring that the strategic priorities in the JHWS, and LBB's and partner initiatives reflect the needs of the Barnet residents; and has commissioned Healthwatch Barnet to undertake this research in order to provide insight into Barnet residents' Health and Wellbeing priorities.

In addition to this, in recognition of the disproportionate impact of the Covid-19 pandemic on particular communities, we have also been asked to carry out a limited number of in-depth conversations with Barnet residents of Asian and Jewish backgrounds, in order to provide some qualitative information on how such communities are experiencing the pandemic, with a stand-alone piece of work happening with African-Caribbean residents separately in the new year.

2. Project Aims and Objectives

The purpose of this project is to provide Barnet's Health and Wellbeing Board with data that supports the development of their Joint Health and Wellbeing Strategy for 2021-2025 through community engagement. Specifically our aims were broken down into the following 4 key points:

1. To gather feedback about Barnet residents' views on the HWBB's Joint Health and Wellbeing Strategy
2. To understand how the pandemic has affected residents' health and ability to access services

3. To understand what Barnet residents' health and wellbeing priorities for 2021-2025 are, and how COVID-19 has shaped, changed, or influenced these
4. To speak with Barnet residents from Asian and Jewish communities, in order to gain an in-depth understanding of their experiences of the COVID-19 pandemic.

3. Methodology

We conducted this project in two stages.

Stage 1 – Surveys for the general population

We designed two surveys at the request of the HWBB team; both surveys were hosted on SurveyMonkey.

Survey 1

- Survey 1 was designed to gain insight into how Barnet residents were experiencing the pandemic, and how it might be impacting on their physical and mental health and their access to services. *We received 68 responses to this survey.*

Aims as agreed with LBB:

1. To gain an understanding of how COVID-19 has impacted residents health and wellbeing
2. To gain an understanding of how COVID-19 has impacted on residents' access to health and wellbeing services
3. To gain an understanding of what Barnet residents' priorities for health and wellbeing in the borough are, and how COVID-19 has shaped these.
4. To collect demographic data to provide insights into differences between certain population groups
5. To help identify participants for Focus Groups (which eventually were changed to interviews).

Summary of Questions¹:

1. How has the COVID-19 pandemic affected residents' physical and mental health and wellbeing and changed their needs?

¹ Full survey questions can be found in Appendix 1

2. How has the COVID-19 pandemic affected residents' access to mental and physical health and wellbeing services in LBB?
 - a. Which services have residents be unable to access?
 - b. Which services have residents be able to access?
 - c. How has access to certain services changed and have these changes been positive or negative for residents
 - d. Have changes to service provision affected certain groups or communities within LBB more than others (including people 65+, people from Black, Asian, and Minority Ethnic groups)

Survey 2

- Survey 2 was designed to ask about overall wellbeing and attitudes and priorities towards Health and Wellbeing, including HWBB's three strategic priorities for the borough. *We received 47 responses to this survey.*

Aims as agreed with LBB:

1. To understand what residents' priorities are for health and wellbeing in Barnet
2. To gain residents feedback on the following proposed priority areas:
 - Creating a healthier place and resilient communities
 - Improving the healthy life expectancy for all
 - Ensuring coordinated holistic care when we need it
3. To explore how residents, understand these priorities
4. To identify where residents' priorities align and diverge from the ones proposed in the draft JHWS

Research Questions:

1. What are LBB residents key priorities for health and wellbeing for 2021-2025
2. To what extent do residents' priorities align with or diverge from LBB's proposed priorities?
3. What are the reasons behind agreement/disagreement, and to what extent are these attitudes shaped by experiences during the COVID-19 pandemic?
4. To collect demographic data to help identify key priorities for certain areas or communities?

Recruitment / Sampling

Our surveys strategy was not designed to obtain a representative sample, instead it was agreed that this survey would take the shape of an online consultation. For this reason, we recruited via social media quite heavily. We used Healthwatch social media accounts to reach out to our strategic partners and partner organisations across Barnet to share news of the survey. We also recruited by posting on popular Facebook groups for Barnet residents. We used LBB's 'People Bank', as well as reaching out to informal residents associations and groups using local professionals' knowledge of such groups.

Data Analysis

The data was analysed by our researcher with the priority of presenting findings, and not drawing generalisable conclusions from the data, therefore much of what follows offers a descriptive analysis with some recommendations.

Stage 2 – Focus Groups

Focus Groups

One of the requirements of this project was to collate qualitative and descriptive accounts from key demographic groups about their experience of the pandemic, and health and wellbeing priorities. In response, we designed focus groups with people of Jewish and South Asian descent. Groups were designed to have up to 6 people in, and take place online.

Recruitment/Sampling

We recruited in much the same way for the focus groups, as we did for the survey, also asking survey respondents if they would like to be contacted in order to take part. Very few respondents left their details, and many people that we spoke to were not at all keen on taking part in online focus groups.

Informal Interviews

When offered informal interviews, people were much more keen to take part. The focus group question schedule was adapted for interviews, and we interviewed 5 people of Jewish descent, and 6 people of South Asian descent. Interviews lasted between 30-60 minutes and were typed up by the researcher.

Data Analysis

Much as with the surveys, data from the interviews was not used to provide a general view of life for people that belong to those communities, rather it has been used to add descriptive richness to the work that follows.

4. Summary of Key Findings

Health and Wellbeing throughout the Covid-19 pandemic

Socio-economic Impact

- The most common key factor which tended to impact on people's experience of the pandemic, as reported by respondents in our sample, were socio-economic factors and not ethnicity. Those who felt they had the resources – space, money, stable income reported that their experience throughout the pandemic had in some cases been positive, but were much less impacted than those who did not.

Physical Health

- A majority of respondents felt their physical health had declined since April 2020. The most commonly cited reason for this decline was the social impact of lockdown and restrictions.
- However, respondents reported a variety of negative impacts, often relating to access to health and social care services, financial strain, and difficulty exercising or maintaining healthy habits.

Mental Health and Wellbeing

- Most respondents experienced either no change or a decline in their mental wellbeing since April 2020.
- Restrictions on social life was the most commonly reported reason for a decline in mental wellbeing.
- However, when interviewees were asked to talk about this in more detail, those whose mental wellbeing had stayed the same, or had gotten better were either of comfortable financial circumstances or had had regular access to private psychotherapy. Those who did not, described struggling with motivation, fear, OCD related behaviours or fatigue.

Access to services

- Of the respondents who access services regularly to support their physical and mental health, most have experienced changes in their access to services.

- The impact experienced by respondents who regularly access services have been a mixture of positive and negative changes. Negative changes were reported as reduced access to services and support, particularly face-to-face consultations. These often had profound consequences, such as deteriorating physical and mental health.
- Positive changes were reported as access to phone consultations and needing less frequent prescriptions.
- Of those who had sought out services to help with a new issue, contacted their GP or had a hospital appointment, 71% of respondents felt they had received the care they needed.
- Interviewees almost universally reported frustration with not being able to access GP appointments unless feeling very sick.

Health Inequalities

Note: our demographic questions were answered by only half of our survey participants²

- A majority of respondents (56%) thought a demographic factor had affected their overall wellbeing through the pandemic.
- The most commonly cited reason was age (18%), followed by income (16%) and disabilities or health conditions (14%).
- When participants were asked to share more detail around how their identity, local community and family life had affected their wellbeing, 4 key themes emerged from qualitative analysis of the data: financial stability, health and accessibility, local facilities and community, family ties and responsibilities.
- Those who had greater financial stability reported that this had helped them to adjust to the changing demands of life since the pandemic. Others reported disruption to their employment and financial stability.
- Younger people in good health described how this had helped them feel safer during the pandemic, whereas older people and those with health conditions and disabilities described feeling vulnerable.
- Locality within Barnet also was reported to have impacted wellbeing: some respondents praised their local green spaces, whereas others

² Our demographic questions were mandatory, but were skipped by almost half of our survey respondents, we feel that this may have been a glitch in the survey monkey system, but cannot know for sure how people were able to carry on with the survey without answering them. This then, does not give a representative idea of the demographic breakdown of answers.

complained of limited or disrupted local services. Some respondents described feeling more engaged with the local community, whereas others were worried about compliance with Covid-19 safety guidance locally.

- Family life – or a lack of it – was described by several respondents as having impacted their wellbeing. Several respondents were feeling worried about family members or under pressure because of caring responsibilities. Some reported connecting more with their family. Others were feeling isolated or cut off from loved ones due to restrictions on socialising.

Health and Wellbeing Priorities and Strategy Feedback

Overview

- All of LBB's proposed priority areas have strong support from participants
- The most popular priority area was 'improving the healthy life expectancy for all' (94% support), with agreement on 'creating a healthier place and resilient communities' (84% support), and 'ensuring holistic care when we need it' (75% support) coming third and fourth.

Health and Wellbeing Priorities – General Feedback

- In general, the most important factors for participants in maintaining their wellbeing had not changed drastically from before the pandemic until now. In both cases, the biggest priorities for respondents were access to green spaces, breathing clean air, access to good health services, and spending time with family and friends. The change that participants said would most improve their lives was if health services were improved. Most participants expect their health and wellbeing priorities to stay the same if Covid-19 restrictions were lifted.
- When asked whether they felt other factors were important, the most common response was that family, friends, and having a support network was important. Access to health and social care services and feeling safe in their local areas were also mentioned by several respondents.
- The health and social care provision specifically highlighted by respondents to question 7 were, specifically: support for unpaid carers,

access to GP appointments, hospital appointments and operations, access to audiology services, and better training for healthcare workers.

- When asked which change would improve their life the most from a list from examples related to those already discussed, the most common responses were 'better access to quality health services' (18%) and 'better support with my mental health.' (13%)
- When participants were asked to explain why they had chosen these priorities, many described how lack of access to good physical and mental health services had been detrimental to their wellbeing. Some described how they themselves had been affected whereas others described concern for others, including the burden of taking on caring responsibilities.

5. Data Deep-Dive by Theme

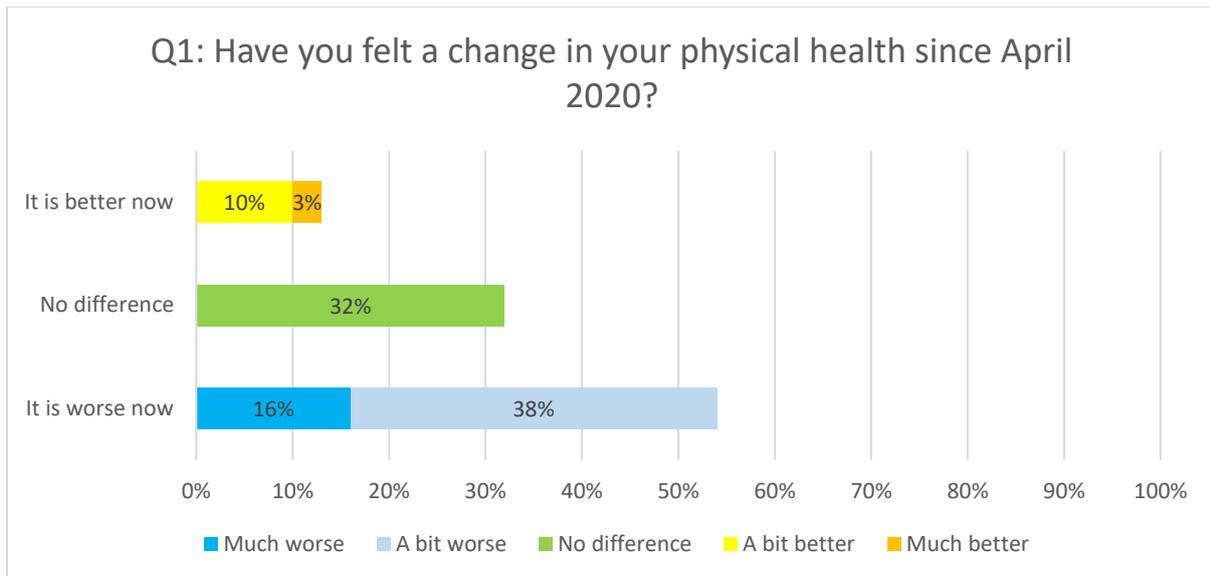
Physical health

Summary of key findings:

- A majority of respondents felt their physical health had declined since April 2020. The most commonly cited reason for this decline was the social impact of lockdown and restrictions.
- However, respondents reported a variety of negative impacts, often relating to access to health and social care services, financial strain, and difficulty exercising or maintaining healthy habits.

Key findings:

- A majority of respondents (54%) had experienced a decline in their physical health since April 2020. Of the respondents who felt their physical health had declined, 38% reported that it had become 'a bit worse' and 16% reported that it had become 'much worse.'
- Although a fair proportion of respondents have felt no difference in their physical health, (32%) many have experienced a decline, and relatively few (13%) have experienced improvements.
- The most important factor felt by respondents to have impacted their physical health was the impact of lockdown and restrictions on their social life, which made up 21% of respondents' top 3' reasons cited.
- The second most important factor affecting physical health was lack of access to NHS services, which made up 15% of respondents' top 3 reasons cited. Respondents described not being seen in person, and not having issues attended to quickly.
- Respondents also felt lack of access to their preferred forms of exercise to be important (14% of top 3 responses). Some respondents described how pre-existing health conditions had either prevented them from exercising or been worsened due to lack of exercise. Others described how lack of access to community or group-based exercise classes, or lack of access to a gym, had affected their ability to exercise.
- 23% of respondents (6 people) listed having been ill with Covid-19 as the most important reason for a decline in their physical health. 2 of these respondents went on to describe suffering with 'long Covid' symptoms.



Sample responses to questions 3³ and 6⁴, selected for detail and representative spread:

‘Long covid, and a lack of understanding among healthcare professionals about how real it is. It is frustrating, mad-making, and so hard to live with.’

‘As my husband's carer my responsibilities and anxieties about his health have impacted on my own well-being.’

‘Mentally I feel like I am in a prison and I have done nothing wrong.’

‘Living alone with no social interaction’

‘Very stressful work environment’

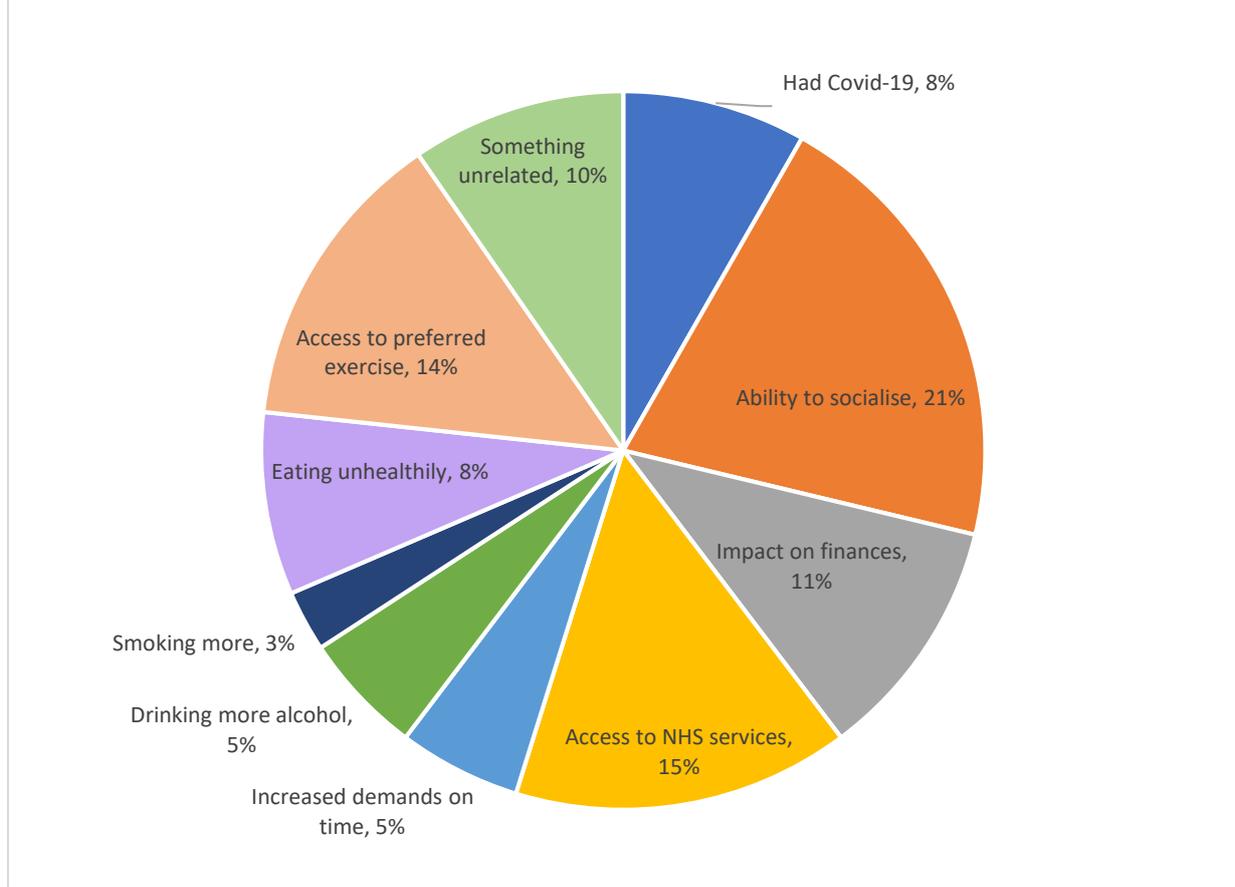
‘Anxiety about the pandemic and sleeping poorly’

‘It's also hard not knowing what is irresponsible to do, it's hard to make your own choices anymore for fear of putting others in danger - it's a pickle.’

³ You told us that your physical health was worse. Please tell us more about why

⁴ Q6: We are keen to understand more about the changes in your physical health. Please tell us more about these changes and how they are affecting your life.

Q2: Breakdown of most frequently reported factors to have negatively affected physical health



Only 9 participants had stated in question 1⁵ that their physical health had improved; the higher number of responses to question 4⁶ therefore suggests that at least some people may have experienced a mixture of positive and negative health impacts. For example, one respondent stated: **“During the spring my exercise was slightly better however my diet went the opposite.”**

Of those who reported positive changes to their physical health, the most frequently occurring ‘top 3’ choice was improvements to finances (24% of top 3 overall). However, the frequency with which this was reported (6 times) was less than that of the frequency of respondents stating that their finances were a top 3 negative impact on their physical health in question 2 (8 times). This is

⁵ Q1: Please tell us about your physical health. Have you felt a change in your physical health since April 2020?

⁶ Q4: You told us that your physical health is better. Please rate the factors that may be affecting your physical health below, in order of importance, with 1 being the most important.

likely due to the fact that far fewer respondents reported positive changes to their physical health in question 1.

The next most frequently cited top 3 reason for positive health impacts was 'because of how lockdown and restrictions have made social contact with friends more accessible to me, or easier for me': this made up 20% of top 3 positive impact responses. Again, the frequency with which this was reported (5 times) is less than the amount of times respondents cited the effects of lockdown and restrictions on their social lives as a negative health impact in question 2 (15 times).

Other reasons cited by respondents as top 3 reasons were: better access to NHS services (16%), walking/cycling more (16%), fewer demands on their time (12%), drinking less alcohol (4%), exercising online (4%), and eating more healthily (4%). In response to questions 5⁷, 6⁸, and 7⁹, several respondents listed other reasons why their physical health had improved or remained good, including:

'Family visited and helped more often'

'I started taking food supplements that have dramatically improved my physical health in the past 4 months'

'I can work from home, in an environment tailored to my sensory needs, and don't have to commute'

'I've been more active at home and gardening, eating more healthily, mostly home cooked meals.'

'We got a dog at the start of lockdown, so now have a regular routine of outdoor & playtime.'

'Doing yoga, joining in prayers everyday online which motivates my mind. Keep thinking positive.'

⁷ Q5: *If it was something else, please describe here.*

⁸ Q6: *We are keen to understand more about the changes in your physical health. Please tell us more about these changes and how they are affecting your life.*

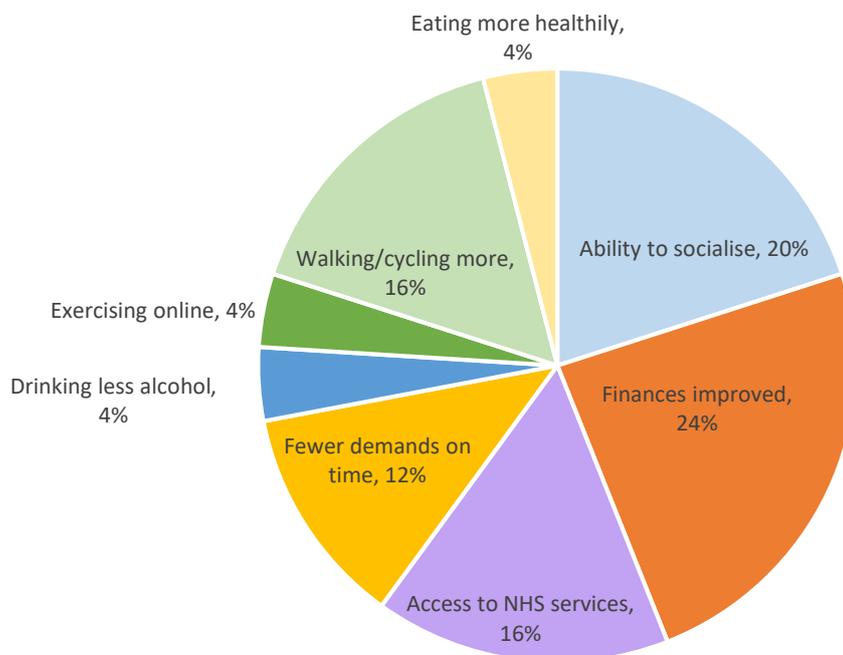
⁹ Q7: *If you feel your physical health has stayed the same since April 2020 - please tell us more about how you are keeping fit and healthy?*

'I was running a lot during the first lockdown but got out of the habit. I do YouTube workout videos and weights with my partner once or twice a week. I have also had the energy to cook from scratch a lot more.'

'I'm walking daily, doing an on line aerobics class and do line dancing when we are allowed.'

Considering these responses to questions 4, 5, 6 and 7 in relation to questions 1, 2, and 3 reveals a complex picture: while the general trend is towards a decline in physical health, many respondents have been able to maintain their health and a minority of respondents have experienced positive changes, often due to having experienced an inverse effect resulting from the same restrictions.

Q4: Breakdown of most frequently reported factors to have positively affected physical health



Mental Health and Wellbeing

Summary of key findings:

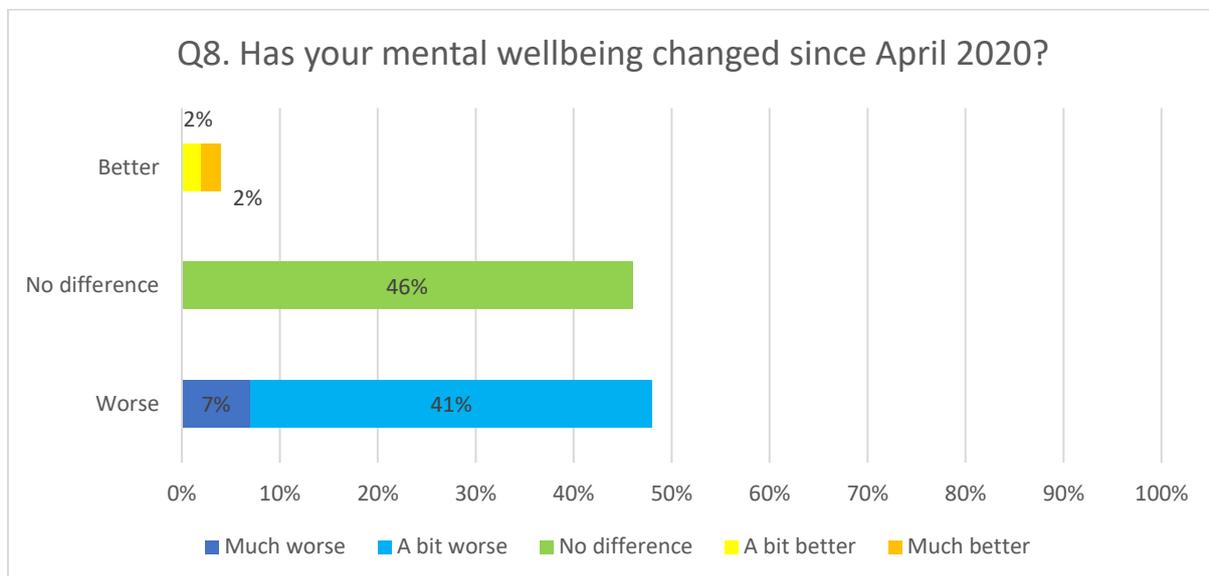
- Most respondents experienced either no change or a decline in their mental wellbeing since April 2020.
- Restrictions on social life was the most commonly reported reason for a decline in mental wellbeing.

Changes in Mental Health and Wellbeing

Key findings:

- Most respondents reported that their mental wellbeing had either not changed (46%) or declined (48%) during the pandemic. Only 4% of respondents reported that their mental wellbeing had improved.
- Of the respondents who reported that their mental wellbeing had declined, the vast majority (41%) reported that it had become 'a bit worse' and only 3 respondents (7% of total) reported that it had become much worse.
- Overall, then, most respondents found that their mental wellbeing had either become a bit worse or not changed, whereas only a few respondents experienced a significant decline or any improvement.
- The social impact of lockdown and restrictions was by far the most commonly cited factor in respondents top 3 reasons for their mental wellbeing declining, constituting 29% of top 3 responses. This was followed by impact on finances (15%), access to NHS services (12%), access to preferred exercise (10%), having had Covid-19 (10%), drinking more alcohol (8%), eating unhealthily (8%), increased demands on time (6%) and smoking more (4%).
- When asked for more detail about how their mental health had changed since the pandemic, a few respondents described positive experiences with socialising online. Many respondents, however, described feeling isolated or cut off from loved ones. Others reported feeling worried about family members. Several respondents reported feeling more stressed and anxious while others described feeling foggy or experiencing a blurring of activities into each other.
- Respondents who had stated that their mental health and wellbeing had remained the same described doing exercise or getting outdoors,

engaging in voluntary work, meditation and/or faith, socialising, and engaging in hobbies.



The key themes that emerged in response how people’s wellbeing may have changed are summarised below, with responses selected based on the level of detail and to provide a representative spread:

Navigating social life

‘Less social interaction so more isolation, decreased physical activity and lack of fresh air/sunlight, being in a small flat leading to more bickering etc.’

‘My husband has had two medical procedures and we were shielding for 3 weeks and then 10 days. I am desperate to hold or at least touch my grandchildren but can’t. This makes me very sad and I feel as if I can cry at the drop of a hat and sleeping at night is very difficult.’

‘Voluntary work (counselling etc) cancelled, adding to isolation of Covid-19 reality.’

‘I have found it helpful to keep in touch with people by Zoom. Also to take part in exercise classes by Zoom and then in person after lockdown.’

Navigating Social Life Continued

'I'm usually housebound so actually everything ended up online, so it's probably helped me massively to cope with huge stressful issues in my life, so I don't feel any different because of this.'

'Being worried about being irresponsible by going out has been very hard. Trying to do the right thing and balancing the rest of life with this is a struggle.'

'I feel much more anxiety about keeping myself and my family safe as well as a responsibility to public health. I have been unable to see family members, including my own disabled son during the periods of lockdown.'

'The main impact on my mental health has been worry about my family - their physical health, loss of work, safety at uni and potential exposure to the virus.'

Anxiety and blurry days

'Very worried and anxious.'

'Increased anxiety, as with everyone'

'Had anxiety attacks and my confidence is lower. Have to force myself to go to work and to join in with online projects. I do it but later than everyone else!'

'It has gotten a bit worse, as it gets increasingly difficult to "compartmentalise" my life, i.e. prioritise between work related, social and household activities. I work less efficiently and less overall, but feel guilty for not getting as much done as I need to. Days also feel very much same-y and there's little difference between weekdays, making it feel like I'm treading water.'

'Work life balance all blends into one.'

'More time feeling a little depressed. A foggy brain.'

Access to services

Summary of key findings:

- Of the respondents who access services regularly to support their physical and mental health, most have experienced changes in their access to services.
- The impacts experienced by respondents who regularly access services have been a mixture of positive and negative changes. Negative changes were reported as reduced access to services and support, particularly face-to-face consultations. These often had profound consequences, such as deteriorating physical and mental health. Positive changes were reported as access to phone consultations and needing less frequent prescriptions.
- Of those who had sought out services to help with a new issue, contacted their GP or had a hospital appointment, 71% of respondents felt they had received the care they needed.

Of those people who regularly access services, key findings were:

- The most frequently cited ways of accessing support for mental health and wellbeing during the pandemic were from family and/or friends (66%) and using personal coping mechanisms (50%).
- Of those who accessed organised support, more participants had accessed support from a community or voluntary organisation (25%) than from a GP (22%) or mental healthcare provider (16%).
- 2 participants (6%) had tried to access support from services but could not.
- 16 respondents (50%) said that they regularly access health and wellbeing services. These included: GP services, hospitals, pharmacy and prescriptions, opticians, hearing support, NHS psychiatry, dental services, Barnet Mencap, neurology, blood tests and diabetes check-ups.
- A significant majority of these respondents (69%) reported that they had experienced changes to their access to the services.
- Experiences were mixed but, where detail was given, more participants described negative experiences than positive: 6 were negative, 4 were positive, and 2 were neutral.

- Positive changes included receiving longer-lasting quantities of prescription medication, not having to travel to appointments, and being satisfied with phone consultations with GPs.
- The positive experiences respondents had regarding access to appointments or medications suggest that, if such changes are adopted as longer-term policies, some residents will benefit from these changes.
- The negative impacts reported were often profound. For example, one respondent reported delayed access to services that supported their children with accessibility requirements and health conditions, and consequently, their conditions had worsened. Another respondent reported having missed tests due to not wanting to attend NHS services in person and had consequently become seriously ill with a kidney infection for 6 weeks. The same respondent described how, pre-pandemic, they had declined to use private medical services for ethical reasons but had since accessed a private physiotherapist to avoid attending an NHS hospital.

Of those people who needed to access services for a new issue since March:

Summary of key findings

- 71% of respondents who had contacted NHS services about a new issue, had got in touch with their GP, or had a hospital appointment since April 2020 received the help they needed.

Key findings:

- 12% of respondents described ways in which demographic factors had affected their ability to access services for their physical health since the pandemic.
- The reasons for this were varied: some stated that this was because of a disability of health condition, some stated that age was a factor, others stated that this was due to their locality within Barnet, 1 stated that religion was a factor, 1 stated that their income was a factor and 1 stated that having dependents or caring responsibilities was a factor.
- When asked whether demographic factors had affected their ability to access services for their mental health since the pandemic, 7 (23% of 31 respondents) reported that they had, however, little further detail was given.

Sample of experiences reported in question 21¹⁰ and 23¹¹, selected for detail to provide a representative spread:

'Had 3 bouts of diverticulitis and only got a face to face on the 3rd bout. I can't feel and diagnose my own stomach! Had some cream given for sun damage/pre cancer skin problems diagnosed with photos over the phone. Used cream as prescribed. Called in to report after 4 weeks, no-one has called back to check so I've stopped treatment'

'At UCLH saw a doctor who didn't believe I had pain.'

'I had a GP phone appointment then an examination for a breast lump. Referred to hospital quickly and everything was done on the same day and I was discharged.'

'Fantastic support all the way from the 119 call handler, through to the GP and care provided at Barnet Hospital. Just phenomenal.'

'Would have liked to have been seen/examined by my GP.'

'I've been reluctant to go to hospitals due to being immunocompromised.'

'More difficult to attend appointments with the children at home.'

'I live in West Hendon which is poorly serviced with health and care services, this is why I decided to register with GP at hand.'

'I mean, the fact that mental health services don't exist has limited me from contacting them. There's so little good access to mental health care - there's social prescribing or nothing unless you're seen as a danger to yourself or others. It's so poor.'

'I was not able to access NHS mental health services before pandemic and that has not changed.'

¹⁰ Q21: Did you get the help you needed when needing to contact services about a new issue?

¹¹ Do you feel that any of the following [demographic] factors have affected your ability to access any services for your physical health since April 2020

Demographic factors

The response rate was low for questions designed to collect demographic data. Our demographic questions were mandatory, but were skipped by all but 27 of 67 survey respondents. We think that this may have been a glitch in the survey monkey system, but cannot know for sure how people were able to carry on with the survey without answering them. **All demographic answers and breakdowns are available to view in the section below.**

Key findings¹²:

- A majority of respondents (56%) thought a demographic factor had affected their overall wellbeing through the pandemic.
- The most commonly cited reason was age (18%), followed by income (16%) and disabilities or health conditions (14%).
- A number of respondents reported that more than one demographic factor had made a difference in how the pandemic had affected their overall wellbeing.
- When participants were asked to share more detail around how their identity, local community and family life had affected their wellbeing, 4 key themes emerged from qualitative analysis of the data: financial stability, health and accessibility, local facilities and community, family ties and responsibilities.
- Those who had greater financial stability reported that this had helped them to adjust to the changing demands of life since the pandemic. Others reported disruption to their employment and financial stability.
- Younger people in good health described how this had helped them feel safer during the pandemic, whereas older people and those with health conditions and disabilities described feeling vulnerable.
- Locality within Barnet also was reported to have impacted wellbeing: some respondents praised their local green spaces, whereas others complained of limited or disrupted local services. Some respondents described feeling more engaged with the local community, whereas others were worried about compliance with Covid-19 safety guidance locally.

¹² The following response rates and figures have been adjusted to remove non-disclosure responses and account for non-completion.

- Family life – or a lack of it – was described by several respondents as having impacted their wellbeing. Several respondents were feeling worried about family members or under pressure because of caring responsibilities. Some reported connecting more with their family. Others were feeling isolated or cut off from loved ones due to restrictions on socialising.

A representative spread of the most relevant responses to questions 27¹³ and 28¹⁴ is shown below:

Financial stability

‘I am incredibly grateful that I can afford to have had a garden and ongoing employment at this time

Most of my anxiety has come from feeling the need to protect my children, one of whom is vulnerable.’

‘Being financially comfortable has helped us buy anything that we needed to adjust to working from home, like buy new equipment, get better broadband.’

‘As a person of colour - seeing the inequity of the world that I live in has been soul-crushing, but years of austerity and government hate have made life as a person of colour feel very unstable, you never know what is going to happen next. While I wasn't earning, it was having a big impact on my life, now I have a job, it again has impacted my life but in a good way.’

‘We had savings, but I changed jobs at the start of May, which means I was in probation throughout lockdown.’

¹³ *Do you feel that any of the following [demographic] factors have affected your ability to access any services for your physical health since April 2020*

Health and accessibility

‘I was less worried about my own health than being a carrier.’

‘Asthma and age worry me about my ability to fight COVID if I got it.’

‘I’m young and healthy so that’s been easy for me.’

‘I have a disability which means I cannot walk very far. I find that many shops have removed chairs and make customers stand in a queue which I cannot do.’

Local facilities and community

‘We live next to the Welsh Harp, West Hendon playing fields, which was a godsent even during the 1hr exercise/day.’

‘We don't have many services or businesses within walking distance. The only park nearby is always full of people on sunny days so there is nowhere to go if you want to avoid people. I live in a block of flats so noise has also been a factor especially summer nights trying to sleep with the window open. To get anywhere I need to take public transport so that has limited my ability to go out as I am trying to avoid crowded buses and trains.’

‘My local bus route has been re-routed farther away (384 bus) meaning I sometimes have to use cabs for short trips.’

‘We live in a beautiful green area that we all enjoyed.’

‘Have been affected by lack of Long Covid clinic.’

‘We met a lot of our neighbours we otherwise wouldn't have interacted with.’

‘Get stressed about people in the community who do not follow the rules.’

Family ties and responsibilities

'I am anxious about the well-being of my adult children and older relatives.'

'I feel my mental health has suffered due to not being able to visit family members (including my own son) for long periods and feeling anxious about protecting him and my other children from infection.'

'I live with a partner and no dependants, so my home life has been easier than most. However, I have another partner who lives on the opposite side of London and I thus didn't see for a number of months. As a queer person my friends are my chosen family for the most part, and as a Londoner they're spread out across the city. Many also have anxiety and have been reluctant to video chat, so I have been somewhat more socially isolated. Even post-lockdown I have only been able to see my mum twice, as she works in a school and refuses to see me due to potential Covid-19 exposure. The worst part, for me, is that one of my best friends was due to come over from America to stay with me for a month in April. She couldn't due to the pandemic, and so she died suddenly without me getting to see her one last time. That was heartbreaking.'

'As a family we became much closer and benefited from the increased connection.'

'Homeschooling and lack of childcare has been an additional load of work.'
'Just missing my children and grandchildren and as they live in a different tier we are not able to meet up.'

Demographic data – Survey 1

Response rate was low for questions designed to collect demographic data. The following response rates and figures have been adjusted to remove non-disclosure responses and account for non-completion.

Q29: Age category		
Responses (27 of 68 participants)		
	Frequency	Percentage of responses given
25 – 34 years	5	19%
35 – 44 years	4	15%
45 – 54 years	4	15%
55 – 64 years	4	15%
65 – 74 years	7	26%
75+ years	3	11%

Q30: Gender		
Responses (27 of 68 participants)		
	Frequency	Percentage of responses given
Woman	16	59%
Man	10	37%
Gender non-conforming (e.g Gender queer, non-binary...)	1	4%

Q31: Is your gender different to the sex that was assigned to you at birth?		
Responses (28 of 68 participants)		
	Frequency	Percentage of responses given
Yes	1	4%
No	27	96%

Q33: Sexual orientation		
Responses (25 of 68 participants)		
	Frequency	Percentage of responses given

Asexual	1	4%
Bisexual	3	12%
Heterosexual / Straight	21	84%
Gay or lesbian	0	0%
Other	0	0%

Q34: Do you consider yourself to be a carer, have a disability or a long-term health condition? (Please select all that apply):		
28 responses given by 28 of 68 participants		
	Frequency	Percent
Yes - I am a carer	4	5.9
Yes - I have a disability	5	7.4
Yes - I have a long term condition	8	11.8
None of the above	11	16.2

Q34: Please tell us about your religion or beliefs:		
Responses (25 of 68 participants)		
	Frequency	Percentage of responses given
Buddhist	1	4%
Christian	8	32%
Jewish	6	24%
Hindu	0	0%
Muslim	0	0%
Sikh	0	0%
No religion	9	36%
Other	1	4%

Q35: Ethnic background		
Responses (28 of 68 participants)		
	Frequency	Percentage of responses given
White British	20	71%
Other white background	2	7%
Mixed: White and Asian	1	4%

Asian/Asian British: Indian	2	7%
Asian/Asian British: Chinese	1	4%
Any other Asian background	1	4%
Black African/Caribbean	0	0%
Mixed: White and Black African/Caribbean	0	0%
Arab	0	0%
White gypsy or Irish traveller	0	0%
Other (specified by respondent as British/Jewish)	1	4%

Q36: Please tell us which area of Barnet you live in		
Responses (28 of 68 participants)		
	Frequency	Percentage of responses given
Totteridge	4	14%
West Hendon	4	14%
Colindale	3	11%
East Barnet	2	7%
Edgware	2	7%
High Barnet	2	7%
Mill Hill	2	7%
Oakleigh	2	7%
Burnt oak	1	4%
East Finchley	1	4%
Finchley Church	1	4%
Garden Suburb	1	4%
Woodhouse	1	4%
Brunswick park	0	0%
Childs Hill	0	0%
Coppetts	0	0%
Finchley Church End	0	0%
Golders Green	0	0%
Hale	0	0%
Hendon	0	0%
Underhill	0	0%

West Finchley	0	0%
Somewhere else in Barnet	2	7%

Q37: Please indicate your annual household income		
Responses (24 of 68 participants)		
	Frequency	Percentage of responses given
Less than £15,000	1	4%
£15,000 – £19,999	1	4%
£20,000 – £29,000	2	8%
£30,000 – £39,000	3	13%
£40,000 – 49,000	0	0%
£50,000 - £59,999	0	0%
£60,000 - £69,000	0	0%
£70,000 – £99,000	13	54%
£100,000 - £149,000	3	13%
£150,000 +	1	4%

Barnet Residents Health and Wellbeing Priorities

Health and wellbeing priorities

Question series

Q4: Thinking back to before the Covid-19 pandemic, which factors would you have said were the most important to your overall health and wellbeing? Please rate the following options in order of importance.

Q5: Are there any other factors you feel were important? Please give details.

Q6: Which factors do you feel are the most important to maintaining your overall health and wellbeing now? Please rate the following options in order of importance, with 1 being the most important.

Q7: Are there any other factors you feel are important? Please give details.

Q8: Which of the following changes do you feel would make the biggest difference to your overall health and wellbeing?

Q9: Please tell us more about why you picked these.

Key findings:

- When asked to think back to what their biggest health and wellbeing priorities were before the Covid-19 pandemic, the examples that occurred most frequently in respondents' top 3 choices were 'breathing clean and safe air,' 'access to good health services,' and 'access to parks and green spaces.'
- When asked whether they felt other factors were important, the most common response was that family, friends, and having a support network was important. Access to health and social care services and feeling safe in their local areas were also mentioned by several respondents.
- Since the Covid-19 pandemic, these priorities have remained broadly similar for respondents: 'breathing clean and safe air,' 'access to good health services,' and 'access to parks and green spaces' were again most frequently cited as top 3 most important, but the proportion of respondents who listed these as top 3 factors rose slightly from 40% to 43%.

- The largest percentage increase was for ‘access to parks and green spaces,’ which made up 3% more top 3 responses compared to pre-pandemic.
- When asked whether other factors were important, the responses were broadly similar to those given with reference to before the pandemic. However, some respondents raised specific concerns around family and community, such as their loved ones staying healthy and accessing appropriate support. One respondent mentioned that their family relationships have been put under strain because of the lockdown. Another mentioned concerns around Covid-19 safety in their community, wishing others would ‘take the pandemic seriously and follow the guidelines.’
- The health and social care provision specifically highlighted by respondents to question 7 were, specifically: support for unpaid carers, access to GP appointments, hospital appointments and operations, access to audiology services, and better training for healthcare workers.
- When asked which change would improve their life the most from a list from examples related to those already discussed, the most common responses were ‘better access to quality health services’ (18%) and ‘better support with my mental health.’ (13%)
- This suggests that although participants regard quality physical and mental health support as highly important, they are not currently receiving (either now or pre-pandemic) the level of support they feel they *could* be getting if those services were improved.
- When participants were asked to explain why they had chosen these priorities, many described how lack of access to good physical and mental health services had been detrimental to their wellbeing. Some described how they themselves had been affected whereas others described concern for others, including the burden of taking on caring responsibilities.
- Many participants also highlighted how important healthy food and better environments in which to live and exercise are to maintaining a basic sense of wellbeing. With regard to access to this in the local area, several respondents described a lack of quality amenities locally, such as cafes, activities and shops.
- Several respondents described how their financial security had made maintaining other aspects of their wellbeing easier.

'Other' responses to question 8:

'Safer pavements. I have osteoporosis and worry about tripping on uneven pavements.'

'Seeing family. Seeing friends. Access to outside activities not by zoom!'

'Park trails that are usable during winter months for walking and running.'

'Political stability. Reliable/effective government. Better coping strategies (mine to sort out/work on.)'

'Having less pressure from the voluntary organisations I support as they have required a lot of time and energy due to the pandemic. More ability to see family members and friends. Less anxiety about other people's behaviour.'

'Having more living space, being able to live closer to my loved ones, reduced patient administrative burden.'

Sample of responses to question 9, chosen for detail and a representative spread:

Services and support

'Better access to health services is important because people need to be able to have good and equal care during a pandemic. Better mental health support is also important due to the uncertainty and anxiety and all the new issues the pandemic has created.'

'Our NHS service needs to support the people other than COVID getting their appointments and operations carried out.'

'The things that have caused my most anxiety are supporting others (family members and my voluntary work).'

'Have felt unsupported by NHS psychiatry services, and worsening depression has caused me to lose interest in my job.'

Services and support continued

‘Being able to pay for good therapy for myself transforms my life - for me, it is the single most important aspect in maintaining my wellbeing, and contributes to the economy as it keeps me in a job, and keeps me away from the doctor. It is the most important and so, for people who can't afford this - I would say better mental health care is key. The pandemic has shown me just how important relationships with my neighbours are - we have been lucky enough to have a dog that facilitates those relationships, but for people who don't, feeling lonely must be very real!’

Healthy spaces and living

‘Noticed how much cleaner the air was during the first lockdown.’

‘Cleaner air, being continuously let down, charges extortionate amounts to drive and constantly being blamed for poor air quality as a person who drives an awful lot for a living in London.... would be nice if it was transparent as to what percentage of income for Low emissions and congestion charges were actually spent on improving air quality!’

‘Better places for exercises, better environments, will improve physical and mental health.’

‘Healthy food is what helps to keep you strong before anything goes wrong and green spaces keep you sane when you're stuck in the house all day. Shelter is a key human right and is the biggest issue for a lot of people but personally i'm lucky enough to not have to worry about that.’

‘It's difficult to get enough space in London to keep your stuff in and also be able to both live and work. Getting around the city can be difficult, even pre-pandemic.’

Amenities and leisure

‘There isn’t anywhere locally to go and enjoy the company of others unless it’s a pub. I don’t drink alcohol and would love some nice restaurants and local activities that are affordable so I can socialise a little more in a safe environment.’

‘As a young person, one of the biggest determinants of mental health is socialising and eating out. I feel Barnet has poor offerings for cafes and restaurants etc, and that west Hendon and the new development would benefit from a couple of cafes/shops/restaurants.’

‘Access to food - we obviously have Sainsbury's but access to better quality cafe's and a better high street where we are would make such a big difference to life.’

‘Local services: You read a lot of creative uses of facilities/restaurants, none of which seem to have happened here.’

‘Having extra income makes other things such as free time, family time and time for friends more possible, not having to do 70 hour working weeks due to low rates of pay.’

Effect of pandemic on Health and Wellbeing Priorities

Question series

Q10 Has the pandemic affected your priorities when it comes to your health and wellbeing? If yes, please explain.

Q11: If Covid-19 restrictions are completely lifted, do you expect your priorities to stay the same?

Q14: Please tell us more about this.

Key findings:

- 63% of respondents said that the pandemic had affected their health and wellbeing priorities.
- When asked to explain why, reasons given for this fell into three key areas: the impact of limited access to health and social care services during the pandemic; changing responsibilities and priorities with regard to family and the local community; and changing approaches to self-care and leisure.
- 63% of respondents said that their priorities would remain the same if Covid-19 restrictions are completely lifted. Where more detail was given about why their priorities would *not* remain the same, respondents often described how being able to socialise more and travel more would lessen their focus on their stated priorities.

Key themes of explanations given in question 10, selected for detail, relevance and a representative spread:

Health and social care

'As a pensioner just feel service from local GP not as good as it was pre Covid and it worries me to hear from friends how different all the surgeries are doing things.'

'I had no access to audiology services for over 7 months. Was not able to hear anything as my hearing aids failed. Couldn't get any help. Totally isolated until I was told about a local charity that helped me. Not the NHS, a charity. Thats shameful.'

Health and social care continued.

'I am unable to go to my mental health appts with psychiatrist. I have to rely on telephone calls and longer waiting times. I'm suffering with anxiety and stress, I am having to think of ways of keeping myself busy to combat my mental health problems. I'm unable to see friends and family so I'm having to go out on to the streets for some interaction with other humans.'

Family and community

'I have always placed health and well being first, but neighbours have played a major part in helping during Covid.'

'Little more appreciative of the need for social support and low-cost local things to do.'

'I have prioritised my children's needs but also realised the value of my situation - I feel I am privileged to be financially secure and living in an area with green spaces and in a secure housing situation with my family.'

'Relationships with my neighbours and a stronger local community is also one thing that I wasn't so bothered about when it was easier to move around.'

'My wife has MS no social groups to attend unable to go to church every Sunday unable to attend my men's group unable to socialise generally, unable to get my operation that I need on my hip replacement, my mental health has suffered and I feel low most days.'

'Talking and interacting with people having a conversation laughing at the same things together rather me alone feeling their touch having a hug a cuddle some sort of jester going for coffee lunch or just chatting. How I miss those things seeing the expression on people's faces.'

Healthy living, self-care and leisure

'I am exercising more as a preventative measure. I'm more aware of infection risks - not just for Covid. I suspect I will continue to be socially isolating beyond the restrictions for safety reasons.'

'It is now more important to me to take rest when I am unwell, and to prioritise my health and well-being and that of my loved ones over work or studies, which I am privileged enough to not have to rely on too heavily for a safe and stable income at the moment.'

'I have realised when i'm alone a lot more i have to focus on my own mental health more than anything as there are less distractions.'

'Access to local green spaces has become much more important. We live close to the welsch harp so we're very lucky.'

'Our local high-street is so much more important. Before we'd spend no time here because there was nothing to do - now we really miss not having something.'

Sample of responses to question 11, asking whether priorities would remain the same if Covid-19 restrictions are completely lifted:

'I'll go back to what I was doing before!'

'Have more time for the people I have missed life is precious we need to enjoy it more.'

'I'm not confident in community compliance or with government directives. So I will continue to limit social contact and exercise to maintain my physical health.'
'As an elderly disabled person I require these priorities at all times.'

'My current priorities, which were changed by the pandemic, will not change once restrictions are lifted. Just because there are no restrictions does not mean that my health and well-being is any less important.'

'I will focus more on traveling and visiting other countries.'

'I would have more distractions and would not have to spend as much time by myself focusing on my own brain.'

'Will see more friends and socialise more.'

'I will return to doing sport and group activities outdoors.'

'My priorities will still be my family and a healthy environment there will just be more freedom to enjoy these without anxiety.'

Joint Health and Wellbeing Strategy – Resident Feedback

Summary of key findings:

- All of LBB's proposed priority areas have strong support from participants
- The most popular priority area was 'improving the healthy life expectancy for all' (94% support), 'creating a healthier place and resilient communities' (84% support), and 'ensuring holistic care when we need it' (75% support).

Priority Area 1: 'Creating a healthier place and resilient communities'

Question series:

Q12: If these changes are put into place, what difference would it make in your life?

Q13: Do you agree that this should be one of the borough's top 3 priorities for improving the health and wellbeing of its residents?

Q15: Thinking back to before the Covid-19 pandemic, would you have agreed that 'creating a healthier place and resilient communities' should be one of the borough's top 3 priorities?

Q16: Please tell us more about this.

Key findings:

- The vast majority of respondents (85%) agreed that 'creating a healthier place and resilient communities' should be one of the borough's top 3 health and wellbeing priorities.
- When asked to think back to whether this would still have been the case before the Covid-19 pandemic, slightly fewer (81%) respondents said they would have agreed. The proportion of respondents who said they strongly agreed was 34% pre-pandemic and 41% now.
- In summary, priority area 1 has strong support in principle and Covid-19 has positively impacted this support.

Priority Area 2: 'Improving Life Expectancy for All'

Question series:

Q17: If these changes are put into place, what difference would it make in your life?

Q18: Do you agree that this should be one of the borough's top 3 priorities for improving the health and wellbeing of its residents?

Q19: Please tell us more about this.

Q20: Thinking back to before the Covid-19 pandemic, would you have agreed that 'improving the healthy life expectancy for all' should be one of the borough's top 3 priorities?

Q21: Please tell us more about this.

Key findings:

- A very strong majority (94%) of participants agreed that 'improving the healthy life expectancy for all' should be one of the borough's top 3 health and wellbeing priorities.

- Compared to what participants said they would have answered before the pandemic, this is a notable increase: the total proportion of those who agreed rose from 87% to 94%, and the proportion of those who strongly agreed rose from 53% to 63%.

Priority Area 3: 'Ensuring holistic care when we need it'

Question series:

Q22: If these changes are put into place, what difference would it make in your life?

Q23: Do you agree that this should be one of the borough's top 3 priorities for improving the health and wellbeing of its residents?

Q24: Please tell us more about this.

Q25: Thinking back to before the Covid-19 pandemic, would you have agreed that 'creating a healthier place and resilient communities' should be one of the borough's top 3 priorities?

Q26: Please tell us more about this.

Key findings:

- Priority area 3, 'ensuring holistic care when we need it' has strong support from participants, with 75% agreeing it should be a priority, 50% of whom 'strongly agree' and 25% of whom 'agree.'

6. Interview Snapshots

Interview data has been integrated into the analysis so far, however, some key findings, recurring themes and significant quotes will be outlined in this section.

As stated in earlier there are two key points to note about this data:

- There was not a significant difference in the interview data collated by ethnicity, generally, both Jewish and South Asian respondents mirrored the views presented above.
- This was a relatively small sample of people and is not representative of the population diversity of these communities.

Key Findings

- The most common key factor which tended to impact on people's experience of the pandemic, as reported by respondents in our sample, were socio-economic factors and not ethnicity. Those who felt they had the resources – space, money, stable income reported that their experience throughout the pandemic had in some cases been positive, but were much less impacted than those who did not.
- When describing what helps to maintain Health and Wellbeing, most participants answered with non-service related priorities; social factors and freedom to live by ones choices was commonly cited.
- The most common theme which emerged from these interviews was the need for preventative healthcare. For those who were generally well, the key priority was better preventative healthcare; access to GP appointments to discuss issues before issues become serious and regular access to blood sample analysis and overall physicals.
- Paying for therapy was quite common among interview respondents with 3 out of 5 Jewish respondents doing so, and 4/6 south Asian respondents doing so. Those who could not afford it, expressed a desire to have access to therapy, and those who could pay for their own stating how fundamental it was to their overall wellbeing.
- Poor access to GP appointments was a common frustration, both before and during the pandemic.

- Many respondents reported feeling anxious about family responsibilities, caring for elderly relatives but also expressed this was something that was an unquestionable responsibility.
- In general, participants were happy with the proposed priorities, but were clear that the way those priorities were designed would really determine success of them. For example, participants spoke of the importance of ensuring services were accessible, or were designed with everyone in mind, including minority communities.
- It was felt among interviewees, especially of South Asian descent that any help within the community was coming from community-led initiatives and not LBB or statutory services.

South Asian Interviewees – Quotes and Themes

Experience of the Pandemic:

“With the pandemic, the main thing is the freedom taken away from you. You feel, isolated and restricted, having that feeling of isolation with no social contact and worried about the, how it’s affecting the older generation and communities and seeing them in pain through the media. It’s very isolated and worrying situation, and it’s dragging on, it’s like, when are things going to get better? Will life ever get back to normal? It’s quite unpredictable and you can’t see it, so it’s invisible too. It’s funny, even though nobody has seen anyone, we’re all in our own bubble and being so busy, all the fun is gone, but all that’s left is work ,work, work. There’s no social factor, no fun anymore, just all intense work, either cooking, kitchen, your job, you can’t switch off, the same space – working in the same bedroom as you’re sleeping and so the vibes are all work vibes, and you just can’t switch off. It’s not anyone’s fault, but you’re just not switching off. No fun, all work”

“We live in a household of 5 people, there just isn’t space for exercise equipment. Work is also an issue, before with the gym I could go after work, but now it’s a bit less secure. It’s darker too.”

“It’s kind of switched me off more from the outside world, it’s like, as I was saying, it’s like you’re in prison, and after a while you don’t like it, but after a while you get used to it, so, even outside, there’s nowhere to go, in that case you just give up hope to go out, and yeah, you detach from the outside world. The pandemic has caused me to become detached, from people, and of course

mentally, it has taken a toll also, which is why my skin is not too good so the loss of freedom, yeah, and has switched me off.”

“Lockdown is getting in the way of my diagnosis, I felt I was finally making progress and getting things moving and then, they said there was a long waiting list, at the time it was ok but it must be so much longer now, I feel like, you know, when you need the help and you don’t get it at that time, the damage that happens to you, it doesn’t necessarily help because things might be worse, or it might feel like it’s too late.”

Views of Health and Wellbeing

Staying well throughout your entire life means...I mean....(struggles) the main thing that comes in my head is peace and quiet. For me, to have peace and quiet, that would mean a lot. To be able to do stuff, even basic stuff, and first of all, because for me, it’s very important to have quiet, maybe because when you don’t have this, when it’s always loud, my dad talks a lot and so, I’m the opposite, because of that, even if I’m doing something I’m on my laptop, he is talking it’s like sometimes you just want quietness. It’s good not to do anything and enjoy the silence, because what comes out of that, that’s really very productive energy. Being well, is...it’s hard even to think about it applying to me, because it’s been so hard since childhood. So it doesn’t hold any value. When all you know is being not well, and all you’ve seen is not well, then it’s really hard to hope for something you’ve never seen, felt, experienced or touched.

Health means to me being able to do what you want to do, being healthy enough to move, and achieve the goals that you want, your heart and mind is in alignment. Being resilient and flexible in life, so that if the issues come up, you’re able to resolve them so that you can lead a balanced life

Most things it just depends, there is always, I’ve never reached the stage of healthiness, there’s always some part of my body which is uneasy from eczema, healthy means being full of energy. Having energy, that’s healthy, because I feel like I’m drained of energy at the moment. Obviously, having issues with mental health drains you, and so physically and mentally feel drained, but still have to find some energy to fight, to do the basics

I think just like everyone, being able to do what you want to do without any problems, at every age the definition changes, but being able to do what your routine activities are and makes you happy, meet, being able to move around,

spend time with your family, sleep well, perform well in your office. It's an overall holistic view.

Preventative Healthcare

Honestly, I've lived all over the place and I get so frustrated with the Barnet healthcare system. I can't get an appointment, GPs have a terrible attitude. I belong to a community with lots of healthcare issues, and I'm relatively healthy, but there is no access to any preventative work. Surely it saves money to make sure people don't get sick, rather than treating them once they are sick.

For one, we need to really start spending money on preventative healthcare, that's where we're really struggling, we need to avoid giving people diabetes and obesity, we need to start when people are younger rather than having the weight when they develop these diseases. If you look at our healthcare and see people to 50-70, there's a very limited amount who really are at risk or have been unfortunate to be in one of the terminal illnesses – most are struggling with lifestyle diseases, so if we're able to focus on preventative healthcare now, when we get to our 60s, that will reduce the stress on the NHS, so for me, again, it would be about how to make that happen, we need more preventative healthcare, more accessible gyms, more accessible routine check-ups, those are the kind of things, GPs have to be better and waiting times need to be reduced significantly. Specifically in our area, we are registered with Hendon way, what they have is a weird concept of not giving appointments, You only get one if there's an emergency, so window of 2 mins for an appointment, or you can't ask them to book an appointment for 2 weeks from now, but if the appointments were earlier we could plan the appointments around our schedule. It works and you can talk to GPs about things other than your emergency health. We're not having the chance to talk to GPs about anything other than If you're ill, so maybe they're overwhelmed, or their process is rubbish. That's one of the major improvements that I'd want to see in the process that my GP follows, or maybe we need more GPs here.

Holistic healthcare

I think receiving excellent healthcare would look like someone who is able to, having a physiologist, emotional, someone, the ones which help to challenge your thinking and I think it would be, this is what you suffer, and what's the impact of this, looking at those needs, at my life as a whole. Sometimes I think they just don't care if I'm in pain, as long as it isn't the worst version of my illness that's fine, but its not a nice way to live.

Access to Therapy

I'm really lucky that I'm able to pay for my own therapy. The pandemic is legitimately bringing up lots of triggering feelings for people who have experienced trauma. Feelings like being locked away, lack of freedom – if you've ever been abused or suffered anything like that, this pandemic is awful. There are a lot of people out there who are also struggling and they don't know it. I honestly think making therapy accessible for everyone, I mean real therapy, not CBT, would make an incredible difference to people's physical and mental health. It has changed everything about how I live my life.

During this pandemic, it has been hard to see all the racism, all belonging to communities that suffer from racism; it's a public health issue. I feel like people laugh when I say this, but the amount of trauma I have from racism; of feeling different, weird, unsafe – that slowly grates on your soul, your confidence. I've only been able to work through that with therapy, I honestly see my friends and people at support groups that I go to, without therapy or somewhere to work on that stuff, life becomes a mess.

Making services/information accessible

One thing I really see in this, a lot of people who are used to navigating services sort of know how to get help they need, if they do need help. But if you've never had to fight for any healthcare in your life and you're told no, for an appointment or whatever, you just listen. That's what I'm noticing. We have to make our system accessible for people who don't know what you need to do to get help.

One thing I've noticed about work as a pharmacist, or from work, certain kinds of scenarios, where I found that people might not be as resilient is they're not really asking for help. They have the help available, but they haven't been asking. One person said she was struggling, I couldn't help her, but many people haven't been asking for help. As much as having organisations there to help people, it's also the willingness of people to ask for help. I think that's kind of what also builds more resilience, once you've asked once, it builds courage.

I think that clarify of information is for everyone, but for Indians, having audio in their languages, or video with pictures would be better. Definitely audio or video in their language is important. Because that's a lot of how they access information, if we want to give them that information if they can hear and see it, then it makes it easier to understand it.

Mental wellbeing throughout the pandemic

Well, in my case, it has been better, (mental health). We are getting more and more time with the family, previously, I was spending a lot of time travelling and working, staying in hotels, all of that disruption is gone. For me this period has been much better, although it also meant that you were taking a load at home, no external help, cleaners etc. I can't imagine what it's like if you don't have any of that.

Usually, people don't see a pandemic as a good thing, but for some people who have stable financial health, for us, it's been a lovely time. After the pandemic I'd want to retain the work from home ability and all of those aspects of this period.

Community

The idea of community is very complex, what we're talking about is – what springs to me is more collaboration and more opportunities for families to support one another in making the community healthy, you can't have one segment of the community healthy, and one unhealthy, and expect collaboration healthy at the same level, so how do we make sure everyone has the same access. In our area, that is lacking

Local Facilities

In our area, that is lacking, for example, the community we live in right now, let's look at a 1km radius, we have no facilities for kids, in terms of open playgrounds, nothing like swimming pools, no gyms for them, whatever is available is a 10-15 minute drive away, so when this community was being built, there were talks of cycle friendly and everything would be in reach, so I had to buy a car because my kids were missing out on everything. The nearest swimming pool was 45 min bus ride away, which is in Wembley. In that perspective, those who can't afford a car, it's a nightmare to do physical activities.

Before the pandemic we spent all our recreational time in Central London, obviously with the pandemic we've basically been here since February. Our high-street is pretty terrible, but we are slowly getting to know our neighbours and our area. One thing that I have definitely thought about a lot lately, is how important it is for all of the new development residents (like us) to know more

about the services in our area and what is here for us. It's like a whole new world when you first get here, and it's tough to get info.

Jewish Interviewees – Themes and Responses

More Investment in Prevention

"I hate blood tests, but actually one of the trips 2-3 years ago, in Israel, we paid for it privately in Israel, there's a hospital in the North, we turn up, I had an eye test, weight, a heart stress test, they took bloods, they did a skin test over every freckle and mark, I met with a dietician and what I should and shouldn't eat, a dentist. You name it, from top to bottom, then you get a report. Some people do it every 2,3,4,5 years. They can see what has changed, they do ancestry, and who has died and what from, and they talk about potentials and risks. There's nothing like that here, maybe it's my paranoia, maybe it's because of my history, I know it's a different country and there's a bigger population per doctor, but to have a 5-year check-up that would be helpful"

"Thinking about excellent healthcare is tricky, I think that can be a better way to optimise certain things, so blood tests. I think it doesn't make any sense to jump through so many hoops to get a blood test, I want to pre-emptively not get diabetes. I was a medic in the army, I was a medic, and one of the things that has been, when you're a medical professional you have to get lots of periodic tests so that you're not putting people in danger, in theory, all of the tests are available to everyone. As such, it has highlighted to me, that knowing where you are in terms of your health is key to being healthy long-term, having assessments, health-checks. I'm not talking about more serious, like, MRIs or scans, but literally just blood tests, I don't see why it should be any issue to get an appointment or anything like that. Just small things, being able to access basic answers. Because right now, I don't feel like I have that. I have to get through at least three or four hurdles before I can even get there"

"I've become a quasi-doctor helping myself, there's a mess out there. The biggest mess is GP surgeries, overlooking people with asthma, or diabetes and doctors' surgeries aren't educated enough on diabetes."

Welfare and Benefits

“The direct payments issues, I was so depressed and so miserable, and knew I’d be going further downhill if I couldn’t do anything about it, if I was telling somebody else what to do, what would I do?”

“It often used to scare me to think about the amount of money people had to live on with their benefits. It’s crazy. I lost my job at the start of the pandemic, and wasn’t even entitled to universal credit because my partner earned 35K. We went from 70k to 35k overnight and I wasn’t even entitled to a little money to help make ends meet. I got a job very quickly afterwards but it was a joke. It still makes me angry and upset, honestly”

Experience of the pandemic

“I am very lucky, I’m blessed with good health and quite resilient and have a good marriage, I have nice friends and things, all helps. I think religious faith helps, I think the fact that I believe in god and if we keep behaving as we should it will pass too.”

“If I take it as where we are at the moment then yes, it affected me a lot more at the beginning, the uncertainty and unknown was much more significant, and severe in march and April. And then, I definitely acknowledge that I’m very lucky and there are a lot of people who have struggled financially and emotionally, I have been able to continue working from home”

“Interestingly, when things were hard, I have panic attacks, and I had a really bad panic attack, about 8 years ago when I was in Israel, when I came back to England, I decided to see someone about it. I still see someone once every 2 weeks, and I’ve been with them for 5 years, there’s always something. So just having the ability to speak with him has been amazing”

Health and Wellbeing Priorities

Hm, look, we’re in a very fortunate position that we have our own private gym, before that we did use that, if our gym was bigger or had more equipment or a swimming pool. I’m not much of a swimmer, I do enjoy badminton and I know where’s badminton courts next to the Tesco express, probably for where we are, within a 5 min drive we’ve got a swimming pool, private gym, Middlesex gym, I’m not sure what else, even urban massage come here too. So I think that I dunno what else I would want or need, or think would be helpful.

I think, [building community resilience] is an important priority. I think that it's a good plan for a council to have, I think it's very difficult. We talk about the word community.., I think the word community is a difficult word, one thing about Barnet, as opposed to York which is also metropolitan. In London we mix and we're much more integrated, but the word community is difficult. The word community doesn't include everyone.

"Let me give it a thought, first of all, I guess in a very general abstract way, the way the spaces are designed could allow more for people to space themselves apart, but be more together. I think that as a general rule, what Barnet can do, or what they can do for us is just I think, that's really it, it's um, this might sound really specific, but the lighting situation, when it gets dark, if you want to be outside, we want to be outside more, the lighting in a lot of places is insufficient, as someone who struggles to see in the dark, I find that sometimes I kind of...there aren't very smart, consideration of lighting outside in the evening so that people can still be close, but not too close, which is by all accounts the healthiest way to socialise anyway. I feel lighting can be a lot better, especially in this country. All the energy consideration too, but that speaks to me. I want to be around people in a safe way, being able to do that later in the day, which also means having sheltered spots too. Spaces that are not for smokers, but people can be outside and safe"

Holistic Healthcare

"I guess it means a, finding out what um, what kind of like works for me. That's a very general thing to say, but reading about and talking about health, and finding out, based on what sounds interesting to me, what I can do. Sometimes it's not straightforward, then when you grow up if you're lucky you switch on to the fact that certain things don't work for you. Finding out what feels best and works for you.

I'm certain that, because my parents are in a different place to me healthwise, it's also about attitude to food, and being able to access different schools of thought. I find it chocking that I go to the doctor and they say to me I need to eat grains, not too much fat and food with no cholesterol, for medical history of diabetes, doing a KETO diet is good for me, an open mind and different approaches for people's health, I think my GP is just bizarre. They're telling me that I am doing things wrong, but I feel better than I ever have, having an acceptance of looking into the validity of other people's experience. I guess it's not to say it's very bad, but I'd like to see it get better

7. Appendices

Appendix 1 – Survey 1

Appendix 2 – Survey 2

Appendix 3 – Interview Schedule

Conversation Schedule

Introduction

- Welcome, and thanks so much for being here, I really appreciate your time.
- Today we will be talking about your health and wellbeing – what it means to you, what is important to you in relation to your health and wellbeing.
- Remember, you may withdraw at any time, and don't have to answer any questions that you don't want to.
- I will be typing some notes, hope this won't disturb you too much.
- Do you have any questions?

Introduction Questions

- Can you tell me a bit about what being healthy means to you?
- What does good mental wellbeing, or mental health mean to you?

Covid-19

- How would you say your health and wellbeing has been affected by the pandemic?
- Has it made you think differently about what is important to you about your own health?
- How about your mental wellbeing?
- Can you tell me a little about what you feel has been keeping you healthy?

Before the pandemic

- Did you experience any barriers to your overall wellbeing, can you tell me a little about them?
- What might have helped you at that point?

Priorities

- What are the most important factors in keeping you healthy?

Priority 1

1. What does '**Creating a healthier place and resilient communities**' mean to you?
 - Does this feel like an important priority?

(Promoting health and wellbeing through the built environment, Improving air quality, Promote healthier food options, Making communities safer)

Priority 2

- What does '**staying well throughout your entire life**' mean to you?
- Does this feel like an important priority?

(Promoting sports and physical activity, Engaging in digital innovation, Improving children's life chances, Supporting a healthier workforce).

Priority 3

- What does '**receiving excellent healthcare**' mean to you?
- Does this feel like an important priority?

Gaps?

- Is there anything missing?

Close

- **Thankyou**
- **Any questions?**