# healthwatch Lancashire

# healthwatch Blackpool









"Too stressed to be happy"



Young people have their say!

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# Acknowledgements

We would like to thank Healthwatch Blackburn with Darwen's team of young people, Amplify, for designing the questionnaire used within this project, and also Healthwatch Lancashire and Healthwatch Blackpool volunteers for supporting the delivery of our engagement activities. We would like to thank Preston's College, Cardinal Newman College, West Lancashire College, Blackpool and The Fylde College and Runshaw College for welcoming and supporting our visits. Most importantly, we would like to thank the young people across Lancashire and Blackpool who shared their personal experiences.

## **Your Local Healthwatch**

Healthwatch Lancashire and Healthwatch Blackpool (referred throughout as Local Healthwatch) are a public voice for health and social care in Lancashire and Blackpool, and exist to make services work for the people who use them. We believe that the best way to do this is by providing the people of Lancashire and Blackpool with opportunities to share their views and experiences.

Our focus is on understanding the needs, experiences and concerns of people and to speak out on their behalf. For more information, watch our film highlighting the work of Healthwatch and how your voice makes a difference to the way health and social care services are run: https://www.youtube.com/watch?v=5xT 7PcmZ9E

#### Why we undertook this project?

In the Marmot Review (Department of Health, 2010), the health and wellbeing of children and young people was highlighted as a top priority for reducing inequalities in health. Alongside 'giving every child the best start in life', Marmot set out the priority of 'enabling all children and young people to maximise their capabilities and have control over their lives'.

Lancashire County Council and Blackpool Council are amongst the many local authorities in England working to incorporate the priorities of the Marmot Review in their approaches to improving health, and reducing inequalities amongst their residents.

There are currently significant health challenges in Lancashire and Blackpool, including high levels of:

- poverty;
- young people not in education, employment or training;
- obesity:
- admission to hospital for mental health, self-harm and substance misuse.

Local Healthwatch wished to speak to young people in Lancashire and Blackpool about their health and wellbeing 5, to ensure they had the opportunity to voice their concerns. In addition, we were keen to enable young people to suggest changes for health and wellbeing services and professionals to consider.

<sup>1</sup> For example, see http://www.lancashire.gov.uk/media/901376/health-inequalities-in-lancashire-2014-final.pdf

<sup>2</sup> For example, see https://www.blackpool.gov.uk/Residents/Health-and-social- care/Documents/HWBStrategy-2016-19-final.pdf

https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/1/gid/1938133228/pat/6/par/E12000002/ati/102/are/E06000009

<sup>&</sup>lt;sup>4</sup> Blackpool is amongst the highest in the country.

This project was initially commissioned by East Lancashire Clinical Commissioning Group (CCG) with the aim of engaging with children and young people across Pennine Lancashire. A copy of this report can be found on the Healthwatch Lancashire website or using this link: https://healthwatchlancashire.co.uk/wp-content/uploads/2014/06/Theviews-experiencesofchildrenyoungpeopleinPennineLancashire.pdf

### The project had five objectives

- To identify key health and wellbeing issues for young people.
- To compare health and wellbeing issues for young people from the different areas of Lancashire and Blackpool.
- To compare health and wellbeing issues for young people from different socio- demographic groups.
- To ensure young people, that are often unheard within the health and wellbeing sector, are listened to, and their views captured.
- To gather young people's views and experiences of local health services.

# 3,614 young people engaged with us across Lancashire and Blackpool!









# **Project Summary**

The main objective of this project was to ensure that young people in Lancashire and Blackpool had the opportunity to voice their concerns on their health and wellbeing. We also wanted young people to share their views and experiences of local health services to provide insight into how prepared services are for supporting young people, and to identify improvements to be made going forward.

Using a questionnaire designed by young people and facilitating interactive focus groups, we engaged with 3,614 young people (the majority between the ages of 16-18 years) at more than 100 different locations across Lancashire and Blackpool. The project took place from August 2017 to December 2018.

#### Key findings of young people's health and wellbeing

- The most important health and wellbeing issues identified were mental health, self-harm, self-image/body image and taking drugs. The results varied significantly dependent on the demographic details of the individual.
- Over half of the people surveyed reported to have recently worried about their health and wellbeing. Mental health, stress, and concerns about the future were the most frequent worries raised.
- Friends and family were most frequently raised as helping people to stay happy, healthy and feeling good.

# Young people told us what they would like to see to help them thrive. The main findings were that young people would like:

- better access and provision of quality health services, particularly mental health services;
- being supported and listened to, particularly within health services and school or college;
- improving health information and advice, including how to find a therapist, support for young carers, and more support or addressing drug use, eating disorders and sexual health;
- improved access to work, finance and future prospects, including better access to quality, relevant work experience and paid employment;
- improving communities or environments, including feeling safe in their community, more
  access to physical activities in the community and more facilities for young people in smaller
  towns or villages.





#### Key findings of young people's experiences of health services

Young people said they did not feel listened to in their appointments and did not find information they received helpful. This is in contrast to the same questions being asked of Lancashire's adult population, which found that 83% of people surveyed felt listened to and found information helpful.

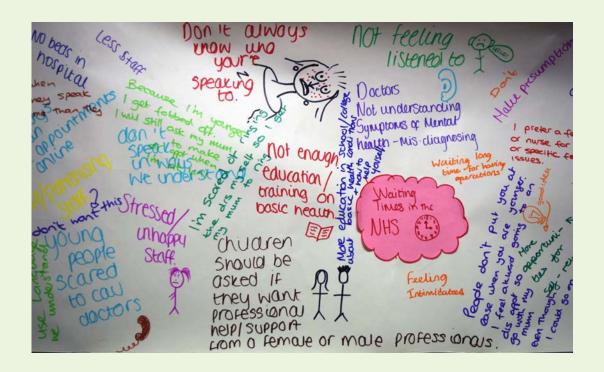
Young people gave some ideas on how they felt health services could be better.

#### These included:

- targeting information to a younger audience, such as using different or more simple language;
- communicating on different platforms, such as visiting schools and online or via social media;
- booking appointments quickly and more conveniently, such as at more convenient times and without having to phone the service e.g. filling out a form
- more quality appointments, including longer appointments with the same doctor and feeling listened to by friendly staff and doctors;
- service-user involvement from young people.

# The majority of young people did not use any digital health apps and most were uninterested in using them in the future.

80% of the young people surveyed said they had never provided feedback to health services about their experience of using health services. The majority of young people said they would not do anything if they were unhappy with a service. Many stated that making a complaint would not make any difference, that they would not have the confidence to complain, or were concerned about possible consequences of making a complaint.







## How we gathered feedback

Healthwatch Lancashire and Blackpool staff and volunteers gathered feedback from young people by using a questionnaire, which was also available online. This was further supplemented by facilitating interactive focus group sessions at a selection of forums.

#### We asked young people:

- what they felt the four main issues were affecting their health and wellbeing;
- what helps them to stay happy, healthy and feeling good; and what they would like to see that would help them to thrive.

We also asked if they had shared their views and experiences with other services.

#### The interactive sessions asked young people about:

- their experiences of health services, which included booking appointments, feeling listened to and the quality of information received;
- their views and experiences of health-related apps;
- how they felt information and communications in health services may be improved.

We also asked young people what they would do if they were not happy about a health service they had received.

#### Where we visited

We visited over 100 different places across Lancashire and Blackpool. These included attending colleges, young people's forums, and places we felt would have high numbers of young people, such as shopping centres and fast food outlets. We were also extremely keen to speak with people likely to be seldom heard and were successful in reaching young people in homeless accommodation, young people with learning disabilities and other young people's services such as Youth Zones and Barnardos.

The results of the sample size for this project can be found in Appendix 1. This details how many people we spoke to in the different areas of Lancashire and Blackpool and information we received on their demographic details.



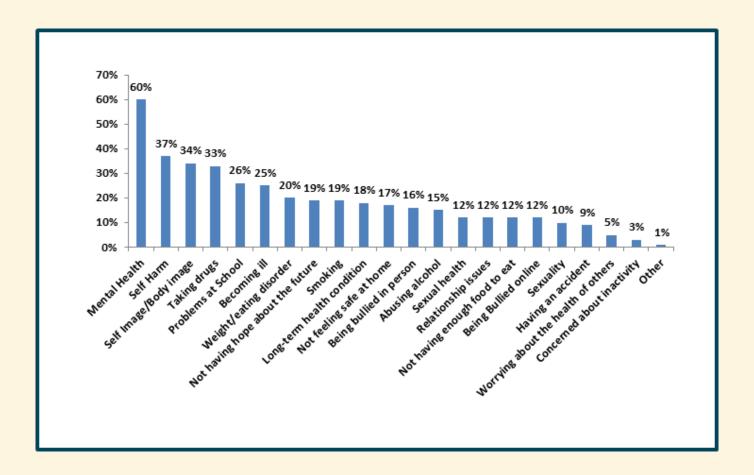


# Findings across Lancashire and Blackpool

We received **14,805** responses from **3,614** respondents about the main health and wellbeing issues for young people. For a breakdown of findings by Integrated Care Partnership (ICP) areas<sup>6</sup>or districts in Lancashire and Blackpool, please see Appendix 3 and 4.

The chart below details the health and wellbeing issues raised in order of prevalence. The most common health and wellbeing problems identified were:

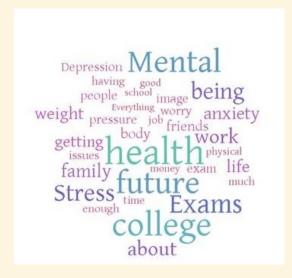
- experiencing a mental health condition at 60%;
- self-harming at 37%;
- concerned about self-image/body-image at 34%;
- taking drugs at 33%.



<sup>6</sup> There are five ICP areas or Integrated Care Partnership areas in Lancashire. The five ICPs operate as part of the Integrated Care System (ICS) called Healthier Lancashire and South Cumbria. The ICS is a group of commissioners, providers and regulators, including Local Healthwatch, who work together to improve health and care services in the region. For more information visit www.healthierlsc.co.uk.

# Out of 3,541 young people, 53% said they had worried about their health and wellbeing over the last two weeks.

The wordcloud below details the main themes that young people said they worried about, and things that make it difficult for them to stay happy. The majority related to mental health, stress and worries about the future, particularly in relation to school or college. For a breakdown of these results by ICP area or district, please see Appendix 5.



"Stress, I worry a lot about things and the way I look."

"The future, not feeling good enough for higher education, family disputes."

"Other young people do seem to experience depression and especially males who struggle to express their feelings."







# **Population comparisons**

As part of completing the questionnaire, respondents were asked to identify their gender, ethnicity, sexuality and if they considered themselves to have a disability or long-term condition. The results of sample size for each of these demographic identities can be found in Appendix 2.

This section details some of the key comparisons we have drawn out based on what people told us about their demographic identities. Appendix 6 details the full list of findings.

It is important to note that experiencing a mental health condition was raised significantly more than any other health issue in every demographic group. The remaining findings from the questionnaire were more varied; some of the more considerable differences are detailed below.

#### Gender

#### Female respondents were:

More likely to have said that mental health was an issue than the male respondents

"Mental health/depersonalisation/depression."

"No one helps me with my depression."

"My mental health has been an issue most my life. If there were people that were able to recognise it and be supportive, it probably would've helped me more growing up."

"Everyone is too stressed to be happy."

More likely to have said that self-image/body-image was an issue than the male respondents

"When someone picks out something about you and is negative towards you, it truly makes a person feel horrible about themselves."

"Social media, because everybody seems to have a perfect body and life there."

More likely to have said that having a weight/eating disorder was an issue than the male respondents

"I was never diagnosed with an eating disorder but had all the symptoms and had to go to the nurse/doctor about it but was never referred for counseling, which I feel would have helped."

#### Male respondents were:

#### More likely to have said that taking drugs was an issue than the female respondents

"I just wanna live my life before it's too late. MD and pills are extremely bad for mental health."

"Where I live there aren't many things for young people so they all take drugs to do something and keep them occupied."

#### More likely to have said that smoking was an issue than the female respondents

"My lungs, I smoke too much."

"Too many kids are getting hold of e-cigs, tobacco or even weed. They are able to get it easily."

"More young people are vaping rather than smoking."

"Stress is making things worse. Everybody at college smokes "something".

# More likely to have said that having an accident or becoming injuredwas an issue than the female respondents

"I have damaged knee ligaments.... [I worry about] being injured and not being able to train."

The 52 respondents who said they identified as a gender other than male or female (for example transgender), were more likely than any other cohort to say they were concerned about sexuality.

Gender dysphoria and the fact that not only are the NHS waiting times for gender clinics over several years, on the most part there are no private northern clinics that I have access to.





#### **Sexuality**

Respondents who identified as lesbian, gay, bisexual or other<sup>7</sup>(referred throughout as LGB+) were more likely than any other cohort to say they felt mental health was an issue. They were also the second highest to say they were concerned about sexuality.

"Family / the remarks they can sometimes make about my orientation."

"Dying alone, no one liking me, my friends abandoning me, failing college."

#### **Ethnicity**

Respondents who identified as being from a minority ethnic group were most likely to say that having hope about the future was an issue. They were also the most likely to say taking drugs was an issue.

"Stress and anxiety, worrying about getting a job and paying for university, being confident and other people's judgement and opinions of who I am as a person."

"How my life will turn out. In my family I've been expected to do great things and I'm worried I cannot live up to these high expectations."

## **Disability or long-term condition**

Respondents who considered themselves to have a disability or long-term condition were the most likely to say they were worried about experiencing a long-term health condition.

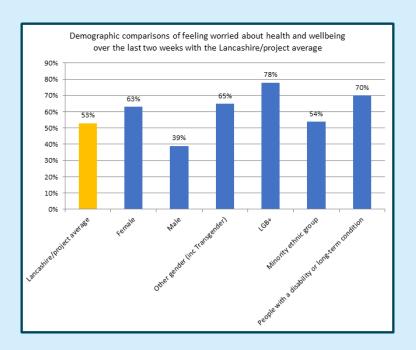
"In case my medical condition progresses and stops me doing my dream job in the future."

"Worried about weight and medical illness."

"Disability, self-harming - counselling not helping."

In this report, we refer to sexuality other than heterosexual as LGB+. People who identified as transgender or a gender other than male or female were discussed in the gender categories rather than sexuality.

There were significant differences between demographic groups in the likelihood of young people worrying about their health and wellbeing over the last two weeks.



The chart shows that 53% of young people we spoke to said they had worried about their health and wellbeing over the last two weeks (the project average). Below are the comparisons between population groups or the project average.

More female than male respondents said they worried about their health and wellbeing over the last two weeks, with a difference of **24**%. There was a **26**% difference from people that identified as 'other gender' from the male respondents.

Respondents that identified as LGB+ were the most likely demographic group to say they had worried about their health and wellbeing over the last two weeks, with a difference of 25% from the project average.

Respondents that identified as belonging to a minority ethnic group had a similar result to the project average, at 54%.

Respondents that said they had a disability or long-term conditions were 17% more likely than the project average to say they had worried about their health and wellbeing over the last two weeks.





We received over 3000 comments about what makes people stay happy, healthy and feeling good. The vast majority of young people said spending time with friends and family.



"My lovely family and friends."

"Tve got more friends and go to more clubs so it's not bad anymore."

"Friends, family and doing things I love."

"Talking to someone who isn't patronising and judging. Friends."

"Friends are most important for helping with depression and anxiety."

"Having friends and family around you."



# We received almost 2,000 comments from young people detailing what they would like to see that would help them to thrive

#### Below details some of the suggestions

 Improved provision and quality of health services, particularly mental health services.



2. Being listened to, particularly within health services and school or college.



3. More support and care at school or college, particularly in relation to exam pressure, bullying and sexuality.



4. Improving health information and advice, including how to find a therapist, support for young carers, support or addressing drug use, eating disorders and sexual health.



 Improved access to work, finance and future prospects, including better access to quality, relevant work experience and paid employment.



- 6. Support for people with disabilities or long-term conditions.
- 7. Improving communities or environments, including feeling safe in their community, more access to physical activities in their community and more facilities for young people in smaller towns or villages.



(See Appendix 7 for example comments)

# "I just asked you to listen"

"My condition - slowly but surely it's getting worse. My hand has recently started shaking and they don't know why, so I need to make an appointment with my doctor.

I also struggle with my reading and writing so I worry about the next step and the future, I'm finishing Further Education soon so I'm looking at going to college, I worry about what courses to do though and whether there will be any jobs if I go to study my passion in computers and design.

I get a lot of anxiety in general, and I feel like I always need to know what's going on because that's important to me and makes me feel less anxious. Knowing what's going on and being given notice of when things are going to happen helps. Volunteering is good too, I like working with other people.



Travel is really difficult - being in a wheelchair I rely on my mum for a lift almost everywhere. Blackpool transport is really bad, especially now access to NOW passes have been cut, it is very hard for people with autism to get one.

Wheelchair access on the buses is terrible, there's only one wheelchair space and if there's a pram in it the bus driver can only ask the pram user to move it, they can't make them, so if the pram doesn't move then I can't get on the bus. The trams are very similar, loads of people are allowed to stand when there's no seats but I'm not allowed on in my wheelchair. I believe there's hardly any wheelchair user friendly buses now, so I can't go on them.

I guess we just need someone to listen and occasionally help. There's a poem about that and it ends with I just asked you to listen', people should read that poem.

There needs to be more mental health services. When I was younger I struggled with it and I know others who do now - there especially needs to be awareness that it's not just a girl's issue! The one thing that makes me go WHAT?! is when people say girls are more vulnerable.

That's school's perception anyway, it doesn't help anyone. Getting diagnosed with a mental health issue at the GP is an issue too, they avoid it like the plague because it means they have to send you to a specialist and that costs money. There's a lot of pressure in this society that no one has an outlet for."





# "Our issues are just as important as the older generations"

"I feel that my body and mind are unfit in contrast to what society wants me to be. Me and a lot of people around me find it hard to accept ourselves. Hanging out with my sister and friends and listening to my favorite band helps. My weight, all the work I have to do, the ability to balance my pleasures and my family life and my work bothers me.

More people should be aware of mental issues, people don't understand what others are going through and react in the wrong way. In general, most young people have some sort of mental health issue, some are worse than others, but the majority of the people hide it. Society might be trying to be accepting but no-one's attitudes are really changing.

I'm worried about love, weight, freedom, body image, sadness, happiness etc. People think young people don't have serious issues, but our issues are just as important as the older generations."

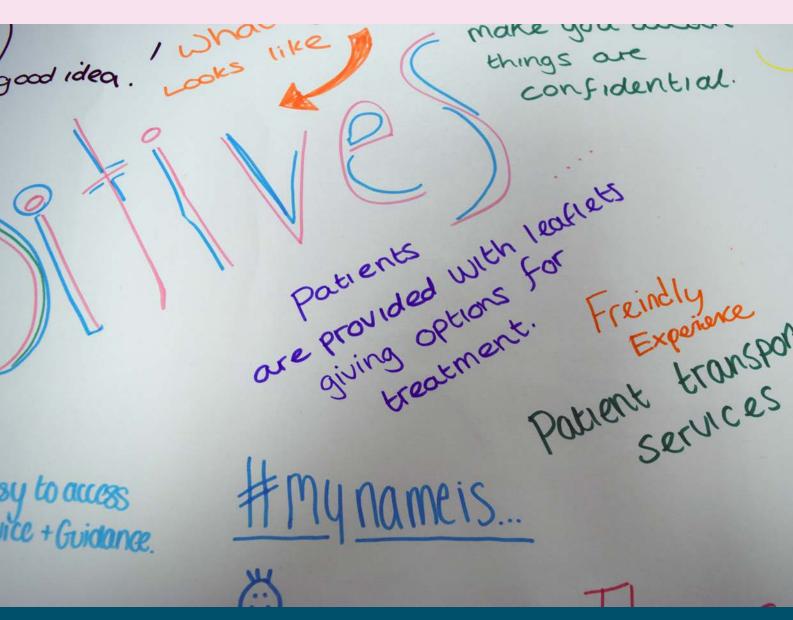


# Young people's perspectives of health services

One of the objectives of this project was to gather young people's views and experiences of health services. We wanted to gain insight on this, so that we could see how well young people feel health services meet their needs and prevent ill health. We also felt this was an opportunity for health services to address the needs of young people and consider their suggestions.

We designed an interactive session which was facilitated at a selection of community groups, schools and college settings.

The feedback collected here represents 28 sessions in which we heard the views of over 260 young people.







# **Findings**

## **Booking appointments**

The majority of young people said they do not book their own appointments. They said that a family member (usually a parent or guardian) books on their behalf.

Of those who made further comments, the majority said they had negative experiences with the majority commenting on challenges such as ringing early, difficulty getting through on the phone and long waiting times for an appointment.



A small number of comments related to the way some young people felt nervous or not confident enough to use the phone, and that some did not know how to book their own appointment or use alternative services such as walk-in centres or NHS 111.

Some young people said they used an app to contact their GP service to book appointments or order repeat prescriptions although many said they would be uninterested.



"Patient Access for appointments would use data and it's too much messing about rather just phone them or go down."

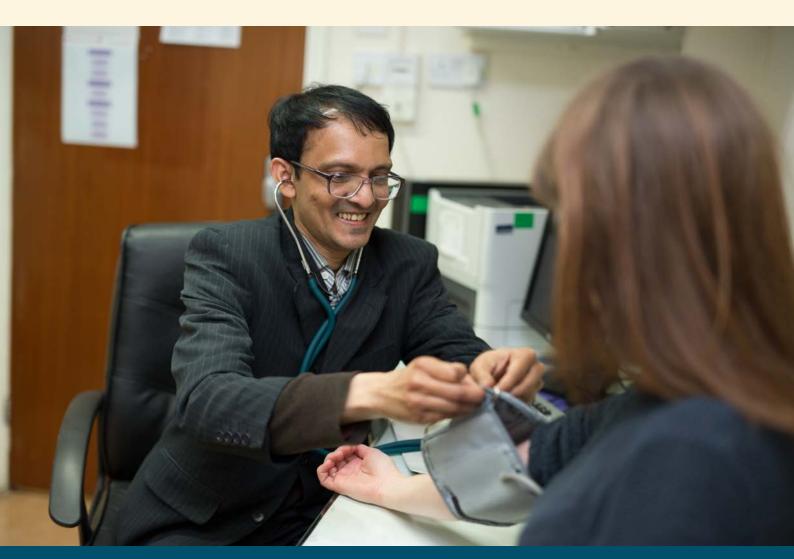
## **Quality appointments**

57% of young people said they did not feel listened to during their appointments or did not always feel listened to (16%). 65% of the young people we spoke to indicated that the information they get from their GP is unhelpful or sometimes unhelpful (14%).

This is in contrast to the same questions being asked of Lancashire's adult population, which found that 83% of people surveyed felt listened to and found information helpful.

#### Young people made comments about:

- health professionals not talking to them and only talking to their parent;
- feeling rushed;
- medical professionals talking too quickly;
- difficulty understanding the terminology and language used;
- how they did not feel there was enough explanation or information from their GP about their condition;
- feeling patronised and 'talked down to';
- doctors too quick to prescribe medication;
- appointments being too formal and that having someone to chat to about their condition or medication would be better;
- the gender of the practitioner having an impact on the appointment.







#### **Using technology for health**

77% of young people said they did not use any digital health apps and most were uninterested in using them in the future. Those that did use health apps primarily used apps for exercise, calorie consumption or wellbeing.

Some young people chose to comment about why they did not use an app. Of those who chose to comment the majority said this was because:

- they did not have the technology to use apps, such as not having a smart phone or tablet;
- they did not have enough storage on their smartphone or tablet;
- they did not have enough mobile data or access to WIFI to use the apps;
- they found health related apps to be 'boring' or hard work to use;
- the apps they have used did not work;
- they often had adverts or required frequent updating;
- they would have to pay to use it.



I wouldn't want to Skype my GP; I would rather see them at the doctor's face to face.

The connection in my house is dodgy. If their server is down would you still be able to use it?

Sometimes it's better talking to someone in person as you might not be able to get your point across.

The apps are free to start with but then you'll have to pay when you're using it.





#### Service user involvement

80% of the young people surveyed said they had never provided feedback to health services about their experience of using health services.

The majority of young people surveyed said they would not do anything if they were unhappy with a service. Many stated that making a complaint would not make any difference, that they would not have the confidence to complain, or were concerned about possible consequences of making a complaint.

"I don't know where I'd share but also there's no point because no one listens to young people."

"I feel like if I complain I won't get any support."

"It's not accounted for. Services claim to listen but no action is ever taken to change."



This drawing is from a respondent who preferred to draw his feedback as opposed to communicate verbally



### Recommendations

Young people gave some ideas on changes they would like to see to improve health services. These included:

1. Targeting information to a younger audience, such as professionals using clearer language in appointments and also more information on health issues which young people may be more likely to struggle with, such as sexual health and mental health.



2. Communicating on different platforms, such as online, apps and social media and for these platforms to be better quality, particularly self-diagnosis tools as many felt they always gave the worst case scenario.



3. Visiting schools to disseminate information and using speakers that young people relate to.



4. Booking appointments quickly and more conveniently, such as at more convenient times and without having to phone the service.





5. More quality appointments including longer appointments if needed, seeing the same doctor for consistency and familiarity, feeling listened to in appointments and staff being friendly and approachable.



6. More service-user involvement from young people.



## **Evaluation**

Below provides a brief evaluation of the five objectives this project set out to achieve

# To ensure young people, that are often unheard within health settings, are listened to, and their views collated

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#### To identify key health and wellbeing issues for young people

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# To compare health and wellbeing issues for young people from different areas of Lancashire and Blackpool

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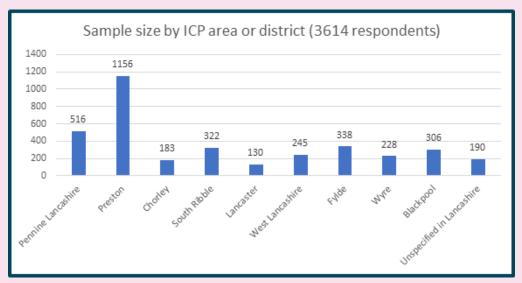
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20% of our respondents said they were from a minority ethnic group, however, the majority selected Asian or Asian British. Further engagement with people from other minority ethnic groups may be required.

# **Appendices**

#### Appendix 1: Sample of respondents by ICP area or district

The chart shows the number or sample size of young people we spoke to across Lancashire and Blackpool or Integrated Care Partnership (ICP) areas.<sup>8</sup>



To demonstrate the representation of young people in each district or ICP area, The table below shows our sample size within each area as a percentage of the population size, based on estimates from the Office for National Statistics, 2016.9

Lancashire and Blackpool											
District or ICP area	Project percentage (3614 respondents)	Lancashire and Black- pool percentage of children and young people aged 13-25 (Office for Natonal Statistics, 2016)									
Blackpool	8%	10%									
Fylde	9%	4%									
Wyre	6%	7%									
Preston	32%	14%									
Chorley	5%	7%									
South Ribble	9%	7%									
Lancaster	4%	14%									
West Lancashire	7%	10%									
Pennine Lancashire (excluding Blackburn with Darwen)	14%	27%									
Unspecified in Lancashire	5%										

The table shows that although we were able to reach a representative sample size in some districts, other areas were over-represented, such as Preston, or under represented such as Lancaster and Pennine Lancashire.

<sup>8</sup> There are five ICP areas or Integrated Care Partnership areas in Lancashire. The five ICPs operate as part of the Integrated Care System (ICS) called Healthier Lancashire and South Cumbria. The ICS is a group of commissioners, providers and regulators, including Local Healthwatch, who work together to improve health and care services in the region. For more information visit www.healthierlsc.co.uk.

<sup>9</sup> The latest figures as of 18th January 2019 are for mid-2016 https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesanalysistool





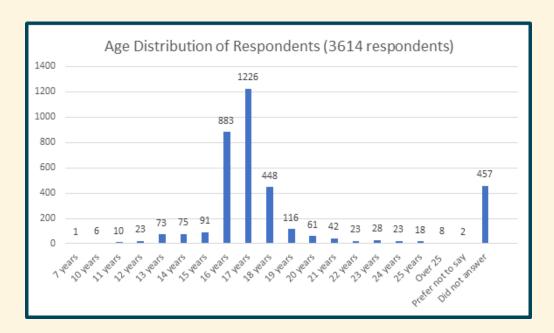
#### Appendix 2: Sample of respondents by population group

#### Age

The majority of young people that we spoke to were aged 16 to 18 years old. In percentage terms these are as follows:

- 24% were 16 years old
- 34% were 17 years old
- 12% were 18 years old

13% of respondents did not specify their age. Further project work may be required targeting young people below the age of 16 and above the age of 18.



#### Gender

The gender of young people that we spoke to were as follows:

53% said female

39% said male

7% did not provide gender details

1% said 'other gender'

0.3% said they would prefer not to say

We also asked respondents if their gender was as per their original birth certificate. 51% said that it was the same and 1% (or 17 respondents) said that their gender was different to that on their original birth certificate. 48% did not answer the question.

#### **Sexuality**

The sexuality of young people that we spoke to were as follows:

50% said heterosexual

1% said lesbian

1% said gay

4% said bisexual

1% said other sexuality

43% did not answer

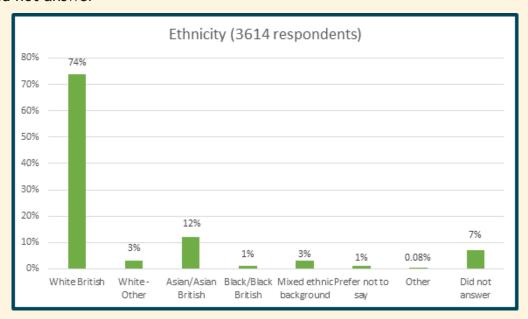
#### **Ethnicity**

The ethnicity of young people that we spoke to were as follows:

74% said white British

20% selected a minority ethnic group

7% did not answer



#### **Disability**

We asked young people if they considered themselves to have a disability or long-term condition:

74% said they did not consider themselves to have a disability

11% said they did consider themselves to have a disability

14% did not answer

# Appendix 3: Findings by ICP area

Health and wellbeing Issue  Respondents were asked to choose their top four	respondents, 190 unknown location)		Fylde Coast: Blackpool, Fylde and Wyre (872)		West Lancashire: Ormskirk, Skelmersdale (245)		Bay Health & Care: Lancaster, Morecambe (130)		Central: Preston, Chorley, South Ribble (1661)		Pennine Lancashire: Burnley, Pendle, Rossendale, Hyndburn, Ribble Valley (516)	
issues	Value	%	Value	%	Value	%	Value	%	Value	%	Value	%
Experiencing a mental health condition	2160	60%	500	57%	147	60%	74	57%	1062	64%	263	51%
Self-harming	1301	36%	323	37%	102	42%	58	45%	552	33%	194	38%
Concerned about self- image/body image	1221	34%	266	31%	81	33%	41	32%	592	36%	171	33%
Taking drugs	1183	33%	280	32%	73	30%	36	28%	557	34%	168	33%
Having problems at school/ exams pressure	920	25%	176	20%	48	20%	21	16%	495	30%	118	23%
Becoming III/having a life limiting condition	894	25%	223	26%	73	30%	32	25%	411	25%	118	23%
Concerned about weight/eating disorder	704	19%	156	18%	69	28%	32	25%	311	19%	95	18%
Not having hope about the future	689	19%	153	18%	36	15%	22	17%	332	20%	103	20%
Smoking	676	19%	174	20%	43	18%	22	17%	298	18%	95	18%
Experiencing a long- term health condition	645	18%	172	20%	49	20%	19	15%	285	17%	87	17%

Not Technique start of the community   16%   12%   15%   36   15%   24   18%   26   16%   10%   154   18%   47   20%   23   18%   243   15%   75   15%   1														
Person	11		589	16%	129	15%	36	15%	24	18%	267	16%	101	20%
14 Concerned about sexual health	12		564	16%	154	18%	49	20%	23	18%	243	15%	75	15%
Sexual health   Sexual healt	13	Abusing alcohol	530	15%	130	15%	44	18%	23	18%	224	13%	70	14%
relationship issues (family and friends)  16 Not having access to enough food to eat  17 Being bullied online 418 12% 108 12% 26 11% 11 8% 127 11% 61 12%  18 Concerned about sexuality 355 10% 87 10% 20 8% 12 9% 166 10% 53 10% 53 10% 53 10% 54 12 9% 166 10% 53 10% 53 10% 55 1	14		435	12%	127	15%	27	11%	16	12%	184	11%	61	12%
enough food to eat    17   Being bullied online   418   12%   108   12%   26   11%   11   8%   187   11%   61   12%	15	relationship issues	425	12%	88	10%	23	9%	12	9%	209	13%	72	14%
18	16		420	12%	119	14%	29	12%	23	18%	174	10%	58	11%
Sexuality	17	Being bullied online	418	12%	108	12%	26	11%	11	8%	187	11%	61	12%
accident/becoming injured         second of the control of the c	18		355	10%	87	10%	20	8%	12	9%	166	10%	53	10%
health of others (e.g. friends, parents)  Concerned about inactivity  101  3%  23  3%  5  2%  6  5%  40  2%  18  3%  22  Other  46  1%  16  2%  2  18  5  4%  12  19  8  2%	19	accident/becoming	335	9%	86	10%	33	13%	9	7%	139	8%	53	10%
Inactivity	20	health of others (e.g.	194	5%	34	4%	12	5%	9	7%	98	6%	33	6%
	21		101	3%	23	3%	5	2%	6	5%	40	2%	18	3%
Totals 14805 411% 3524 404% 1027 420% 530 408% 6838 412% 2075 402%	22	Other	46	1%	16	2%	2	1%	5	4%	12	1%	8	2%
	Totals		14805	411%	3524	404%	1027	420%	530	408%	6838	412%	2075	402%

# Appendix 4: Findings by district

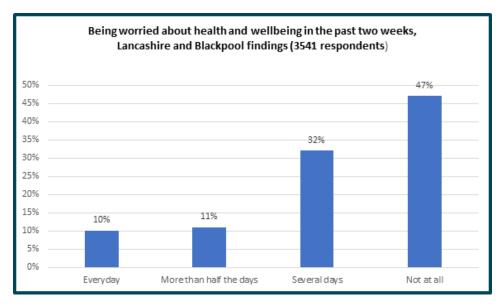
	Health and wellbeing Issue Respondents	All Lancashire (3614 respondents, 190 unknown location)		Blackpool (306)		Fylde (338)		Wyre (228)	(228)		ancashire	Lancas (130)	ter	Preston (1156)		6) Chorley (183)		South (322)	Ribble
	were asked to choose their top four issues	Value	%	Value	%	Value	%	Value	%	Value	%	Value	%	Value	%	Value	%	Value	%
1	Experiencing a mental health condition	2160	60%	170	56%	212	63%	118	52%	147	60%	74	57%	728	63%	130	71%	204	63%
2	Self-harming	1301	36%	127	42%	112	33%	84	37%	102	42%	58	45%	365	32%	62	34%	125	39%
3	Concerned about self-image/body image	1221	34%	89	29%	109	32%	68	30%	81	33%	41	32%	422	37%	70	38%	100	31%
4	Taking drugs	1183	33%	109	36%	107	32%	64	28%	73	30%	36	28%	393	34%	58	32%	106	33%
5	Having problems at school/ exams pressure	920	25%	36	12%	89	26%	51	22%	48	20%	21	16%	356	31%	62	34%	77	24%
6	Becoming III/having a life limiting condition	894	25%	69	23%	83	25%	71	31%	73	30%	32	25%	279	24%	41	22%	91	28%
7	Concerned about weight/eating disorder	704	19%	54	18%	63	19%	39	17%	69	28%	32	25%	203	18%	45	25%	63	20%
8	Not having hope about the future	689	19%	52	17%	70	21%	31	14%	36	15%	22	17%	251	22%	31	17%	50	16%
9	Smoking	676	19%	63	21%	58	17%	53	23%	43	18%	22	17%	221	19%	22	12%	55	17%
10	Experiencing a long-term health condition	645	18%	63	21%	57	17%	52	23%	49	20%	19	15%	212	18%	28	15%	45	14%
11	Not feeling safe (at home, at school or in community)	589	16%	52	17%	50	15%	27	12%	36	15%	24	18%	187	16%	21	11%	59	18%

Total	5	14805	411%	1293	425%	1333	398%	898	394%	1027	421%	530	410%	4792	415%	736	401%	1309	407%
22	Other	46	1%	11	4%	2	1%	3	1%	2	1%	5	4%	10	1%	0	0%	2	1%
21	Concerned about inactivity	101	3%	7	2%	10	3%	6	3%	5	2%	6	5%	24	2%	9	5%	7	2%
20	Worrying about the health of others (e.g. friends, parents)	194	5%	13	4%	14	4%	7	3%	12	5%	9	7%	71	6%	5	3%	22	7%
19	Having an accident/becoming injured	335	9%	39	13%	22	7%	25	11%	33	13%	9	7%	100	9%	15	8%	23	7%
18	Concerned about sexuality (e.g. identify as LGBTQ, coming out)	355	10%	37	12%	29	9%	21	9%	20	8%	12	9%	108	9%	19	10%	39	12%
17	Being Bullied online	418	12%	45	15%	36	11%	27	12%	26	11%	11	8%	136	12%	20	11%	31	10%
16	Not having access to enough food to eat	420	12%	53	17%	33	10%	33	14%	29	12%	23	18%	119	10%	11	6%	44	14%
15	Experiencing relationship issues (family and friends)	425	12%	37	12%	36	11%	15	7%	23	9%	12	9%	151	13%	27	15%	31	10%
14	Concerned about sexual health	435	12%	58	19%	39	12%	30	13%	27	11%	16	12%	128	11%	17	9%	39	12%
13	Abusing alcohol	530	15%	50	16%	50	15%	30	13%	44	18%	23	18%	166	14%	15	8%	43	13%
12	Being bullied in person	564	16%	59	19%	52	15%	43	19%	49	20%	23	18%	162	14%	28	15%	53	16%





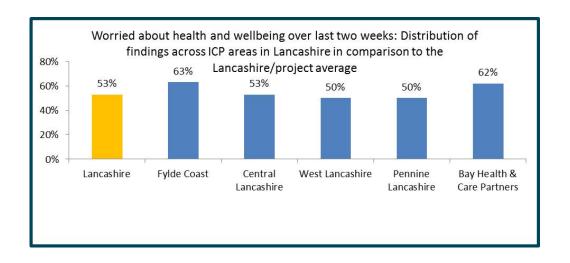
# Appendix 5: Feeling worried about health and wellbeing and ICP comparisons



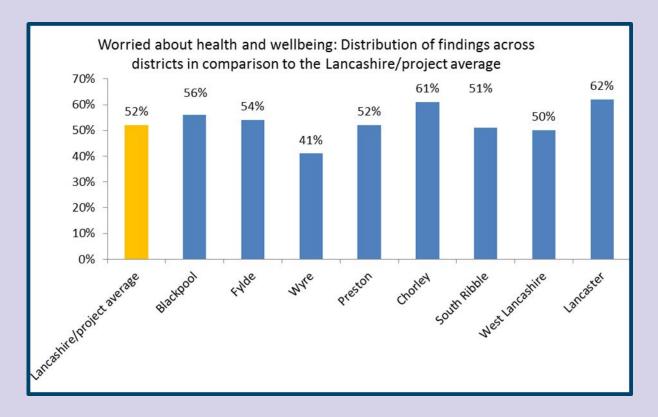
The chart shows that overall, 53% of young people had worried about their health and wellbeing over the last two weeks.

#### **ICP** comparisons

There were some significant differences when comparing this question across ICP areas in Lancashire and Blackpool. The table below shows that West Lancashire and Pennine Lancashire ICP areas had slightly lower percentages of young people stating that they had worried about their health and wellbeing over the last two weeks. Fylde Coast (63%) and Bay Health & Care Partners (62%) had the highest percentages.



In all ICP areas except for Pennine Lancashire, we were able to show the differences by district. The findings in Blackpool, Chorley and Lancaster were higher than the project average, with Lancaster the highest at 62%. Wyre had the lowest percentage at 41%.



# Appendix 6: Findings by population group

	Health & wellbeing Issue	Female (1908)	Male (1398)	Other e.g. transgender (52)	LGB+ (232)	Minority Ethnic Group (659)	Disability or long term condition (408)
1	Experiencing a mental health condition	67%	52%	54%	75%	56%	58%
2	Self-harming	37%	34%	38%	39%	36%	38%
3	Concerned about self-image/body image	42%	25%	33%	36%	34%	26%
4	Taking drugs	29%	37%	33%	22%	37%	23%
5	Having problems at school/ exams pressure	28%	23%	29%	25%	26%	22%
6	Becoming III/having a life limiting condition	24%	27%	25%	19%	25%	21%
7	Concerned about weight/eating disorder	25%	12%	25%	22%	16%	18%
8	Not having hope about the future	19%	20%	19%	19%	25%	19%
9	Smoking	13%	24%	29%	14%	21%	20%
10	Experiencing a long- term health condition	16%	21%	17%	19%	22%	27%
11	Not feeling safe (at home, at school or in community)	18%	14%	8%	13%	16%	13%

12	Being bullied in person	12%	20%	19%	10%	15%	19%
13	Abusing alcohol	11%	17%	21%	13%	18%	11%
14	Concerned about sexual health	13%	11%	15%	10%	10%	12%
15	Experiencing relationship issues (family and friends)	12%	11%	17%	10%	13%	14%
16	Not having access to enough food to eat	11%	12%	12%	9%	13%	10%
17	Being bullied online	11%	11%	15%	8%	12%	13%
18	Concerned about sexuality	12%	6%	37%	32%	7%	12%
19	Having an accident/becoming injured	5%	14%	13%	6%	10%	9%
20	Worrying about the health of others (e.g. friends, parents)	5%	6%	4%	5%	5%	6%
21	Concerned about inactivity	2%	4%	6%	4%	3%	3%
22	Other	1%	1%	0%	2%	1%	3%

# Appendix 7: Example comments received: what young people would like to see to help them thrive



Wordcloud from over 2000 comments we received on what would help young people to thrive

# Below provides some of the comments received to demonstrate our key findings

#### Improved provision and quality of health services, particularly mental health services

- "More confidential gender identity services."
- "I think the waiting list for services like CAMHS (Child and Adolescent Mental Health Services) is very long and waiting for all that time can make more problems for people rather than helping them."
- "CAMHS needs improvement, I feel like I was just dropped and left on my own when I turned 16, struggled to get it in the first place. Can't seem to find help."
- "Mental health workers that don't just sit you in a room and bombard you with questions you feel you have answered to 100's of other doctors."
- "The large majority of my friendship group has dealt with or is dealing with mental health problems and are finding that they don't have anywhere else to turn to but their friends."
- "Don't just hand out pills for mental health issues, JUST TALK TOUS."

#### Beinglistened to, particularly inhealthservices or school/college

- "I have been in a hospital before at midnight with no one to see me because my history of anxiety made them assume it was just a panic attack and not take me seriously."
- "There should be young people working at doctors. Some doctors talk to me like I'm nothing."
- "As I have autism they ignored my depression and it was hard to get treatment. Doctors ignored it for two years and then I finally got referred to a counsellor."
- "Doctors don't want to listen, they don't hear you."
- "I feel as though teenagers spend their time trying to find ways of getting help for their issues but are constantly finding themselves not being believed. I think that the professionals who are there to help those with mental and physical issues are mocking teenagers and making us feel "bullied" and like we do not deserve help."
- "Health to be taken seriously in schools/college. I opened up about my mental health and my school didn't do much to help."
- "An actual understanding adult that listens to teenagers, helps and takes them seriously."
- "More of us having a voice, being listened to."
- "Adults often don't believe children who are concerned about their mental health."
- "I find that a lot of young people get dismissed by their parents, peers or college when it comes to mental health and people assume we can just 'grow up' or 'snap out of it' or 'get our priorities straight' when sometimes people do need time out to focus on themselves and to take a break"

# More support and care at school or college, particularly in relation to exampressure, bullying and sexuality

- "More support for exam pressure and advice about uni and mental health."
- "Teachers that are more concerned about mental health than exam results."
- "Easier access to asking teachers questions regarding classwork/homework."
- "Bullying is still occurring a lot in schools. Lots of people I know suffer from it; I personally did too in high school. Something has to be done about it. Children who go through bullying need to know that there will be someone to support them in or outside of school."
- "I'm being badly bullied, and no one sorts it out or stops it."
- "College taking on more of a role to check up on our mental health and wellbeing."

- "Some kind of student council or other for teenagers to talk about issues and how to overcome them."
- "Personally, I think students need to be taught about LGBT+ rights."
- "Sexuality and LGBT+ should be openly talked about and part of the education plan."

# Improving health information and advice, including how to find a therapist, support for young carers and people with learning disabilities/long-term conditions, taking drugs, eating disorders and sexual health

- "My doctor never helps me as a young carer. They didn't tell me what help was there for me."
- "I'm not sure what support is actually available."
- "More awareness on how taking a drug occasionally develops into an addiction, and smoking socially."
- "The services are available, I think, but I do not know how to contact them or arrange a meeting with someone, for example, a mental health organisation."
- "My mental health has been an issue most my life. If there were people that were able to recognise it and be supportive it probably would've helped me more growing up."
- "Support for young people with life-long conditions".
- "My health condition has greatly affected my confidence and wellbeing."
- "There is not enough support for those that need it. Disabled children are stigmatised and have a lack of support."

# Improved access to work, finance and future prospects, including better access to quality, relevant work experience and paid employment

- "Bigger and more accessible opportunities."
- "It's hard to get a job especially when you have a disability likeme."
- "Access to work experience in law for working class pupils. The ones already available aren't useful and are there just for show. Causing me to stress myself into illness."
- "A platform to allow 16-year olds and other individuals of a similar age to get jobs, which would allow for experience in the employment sector."
- "More employment opportunities that aren't minimum-wage."
- "Workshops on leaving home and money."

Improving communities or environments, including feeling safe in their community, more access to physical activities in their community and more facilities for young people in smaller towns or villages

- "Everyone should feel safe where they go and not being scared to go out."
- "Helping family get food when they can't feed themselves."
- "More facilities for younger people to get them off the streets."
- "Blackpool is prone to poverty, gambling and addiction abuse, leads to all problems."
- "I feel that getting public transport on my own has made me feel unsafe and I feel that I have slight anxiety now about feeling safe in my own environment."
- "More youth clubs, meeting new people."
- "More sports clubs or cheap leisure centres including in rural communities, for low level players who are just starting out or maybe better advertisement of what is actually already on offer."



# YOUNG PEOPLE HAVE THEIR SAY!



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