

Health & Wellbeing Strategy

Consultation Report

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Table of Contents

Introduction	4
Background	4
Communications & Engagement Approach	4
Methodology	5
Response rate	5
Executive Summary	6
Overview of results	8
We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Improving Mental Health)	11
We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Social Connection)	34
We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Financial Security)	55
About you	78
Easy Read Survey	89
Secondary Insight	93
Appendix	95

Introduction

Hackney Council consulted on the new Health and Wellbeing Strategy for 2022-26, a plan showing the Council's approach to reduce health inequalities and improve the health and wellbeing of people who live and work in Hackney. The Strategy will set out the health and wellbeing priorities over the next four years.

Health inequalities are avoidable and unjust differences in health outcomes between groups of people and communities.

The Strategy does not reflect all the work Hackney Council and partners will do to improve health and reduce health inequalities in Hackney: many other actions and activities will continue or start.

It is proposed that the Strategy should focus on three priorities: improving mental health, increasing social connection and supporting greater financial security.

Feedback from this consultation will be used to help develop an action plan. Respondents and stakeholder's views on the three suggested priorities will be used to ensure the priorities make a real and sustainable difference to the health and wellbeing of Hackney's residents.

Background

The three priorities in the new Health and Wellbeing Strategy were developed through a three month engagement phase, with residents and wider stakeholders, where the Health and Wellbeing Board asked what areas the new Strategy should focus on.

During the engagement period, the Health and Wellbeing Board spoke to over 650 residents and organisations in a range of different ways - through interviews, workshops, completion of paper and online surveys, meetings with organisations, visiting community groups and focus groups. You can find more information in the [engagement report online](#).

Communications & Engagement Approach

A number of communication and engagement approaches were used to share the consultation survey and gather insight from residents and stakeholders:

- Newsletters via Council and stakeholder networks
- Social media campaign
- Posters in pharmacies, libraries and community centres

- Bus stop adverts
- Covid-19 testing sites
- Promotion of the survey through partnerships
- Peer researcher engagement with community members
- Engagement through community meetings, networks, forums and resident groups

Methodology

The consultation survey was hosted on Citizen Space, the Council's engagement platform.

(<https://consultation.hackney.gov.uk/health-and-wellbeing/health-and-wellbeing-strategy>)

The consultation ran from 25th November 2021 to 17th February 2022.

Paper copies of the survey were also made available.

An easy read version of the strategy and consultation survey was also made available. Easy read survey feedback has been included in the appendix.

Response rate

A total of 299 respondents took part in the consultation.

A total of 112 paper surveys were completed.

Executive Summary

- **Are you sharing your views as an individual or on behalf of an organisation? (Base 298)**
 - The majority of respondents, just under 87%, shared their views as an individual.

Individual

- **Do you live, work, or study in Hackney? (Base 339)**
 - The majority of respondents, just under 65%, live in Hackney.

On behalf of an organisation

- Are you part of... (base 42)
 - The highest percentage of respondents who shared their views on behalf of an organisation, just over 40%, are part of a Hackney Voluntary and Community Sector organisation.

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Improving Mental Health)

- **To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)? (Base 295)**
 - The majority of respondents, just over 85%, stated that they agree with the suggested actions for Priority 1 (Improving Mental Health).
- **Can you suggest other actions that we should include in our Strategy to improve mental health that will reduce health inequalities? (Base 292)**
 - The majority of respondents, just under 68%, stated that they could suggest other actions to include in the strategy to improve mental health that will reduce health inequalities.

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Increasing Social Connection)

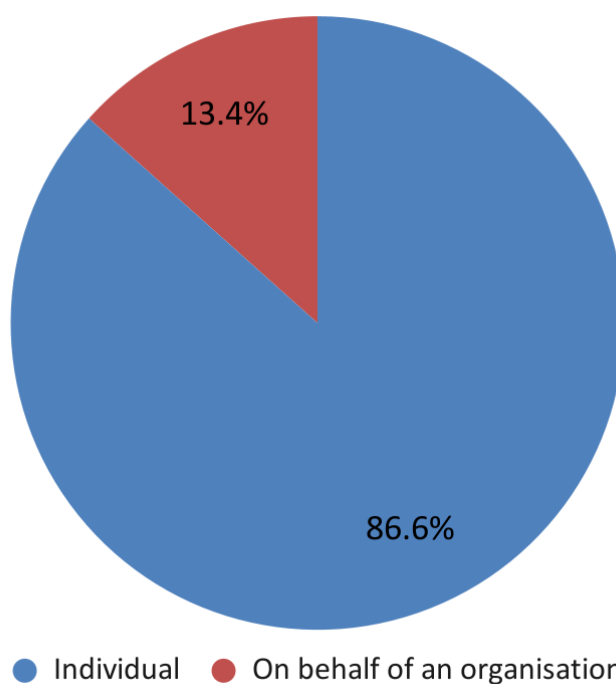
- **To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)? (Base 293)**
 - The majority of respondents, just under 82%, stated that they agree with the suggested actions for Priority 2 (Increasing Social Connection).
- **Can you suggest other actions that we should include in our Strategy to improve social connection that will reduce health inequalities? (Base 291)**
 - The majority of respondents, just under 57%, stated that they could suggest other actions to include in the strategy to improve social connection that will reduce health inequalities.

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Supporting Greater Financial Security)

- **To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)? (Base 293)**
 - The majority of respondents, just under 80%, stated that they agree with the suggested actions for Priority 3 (Supporting Greater Financial Security).
- **Can you suggest other actions that we should include in our Strategy to improve financial security that will reduce health inequalities? (Base 287)**
 - The majority of respondents, at 54%, stated that they could suggest other actions to include in the strategy to improve financial security that will reduce health inequalities.

Overview of results

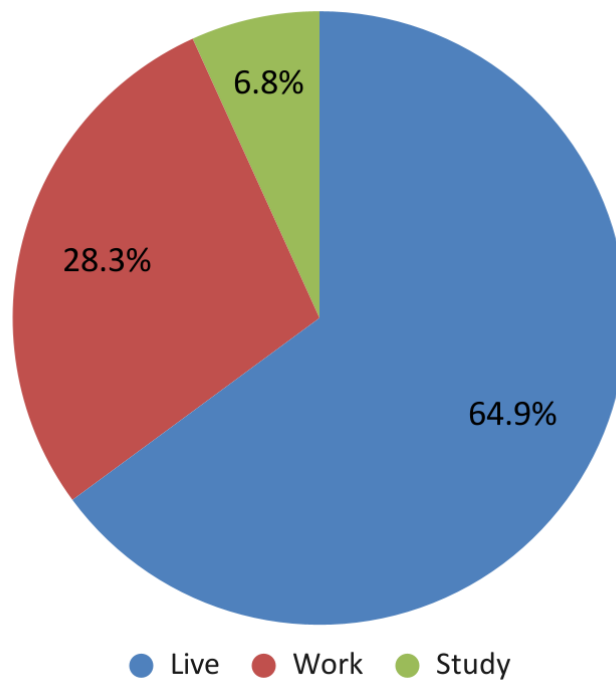
Are you sharing your views as an individual or on behalf of an organisation?
(Base 299)



The chart above shows the responses to the question “Are you sharing your views as an individual or on behalf of an organisation?”

The majority of respondents, just under 87% (259), shared their views as an individual.

Individual - Do you live, work, or study in Hackney? (Base 339)

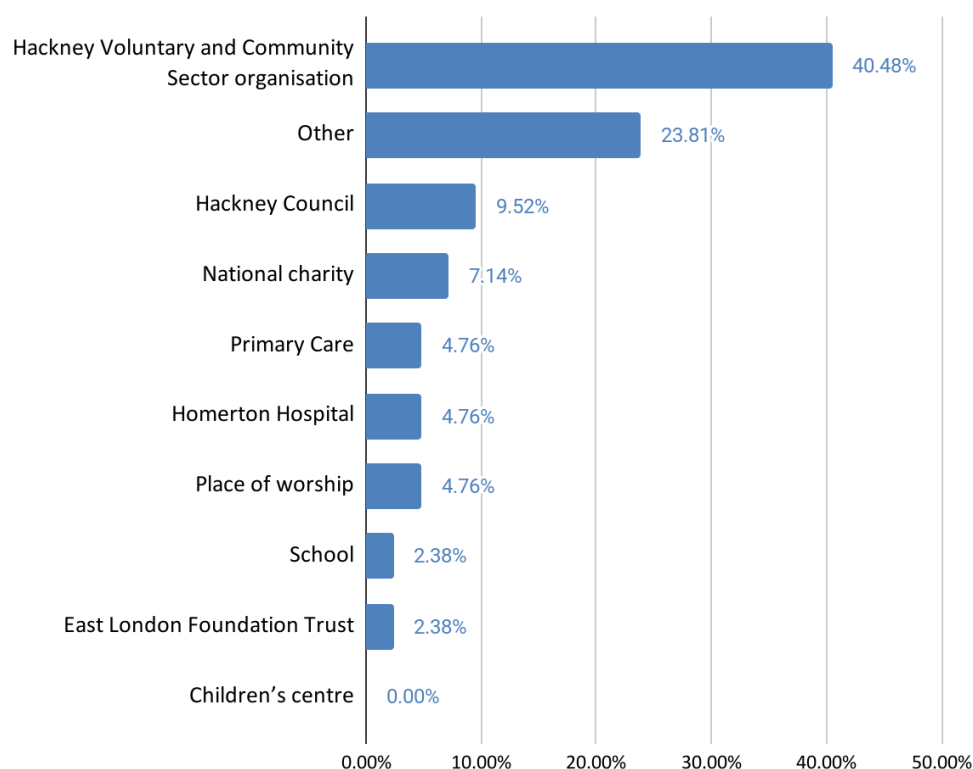


The chart above shows the responses to the question “Do you live, work, or study in Hackney?” Respondents who stated that they were sharing their views as an individual were directed to this question.

The majority of respondents, just under 65% (220), live in Hackney.

Just over 28% (96) of respondents work in Hackney. The lowest percentage of respondents stated that they study in Hackney, just under 7% (23).

On behalf of an organisation - Are you part of... (Base 42)



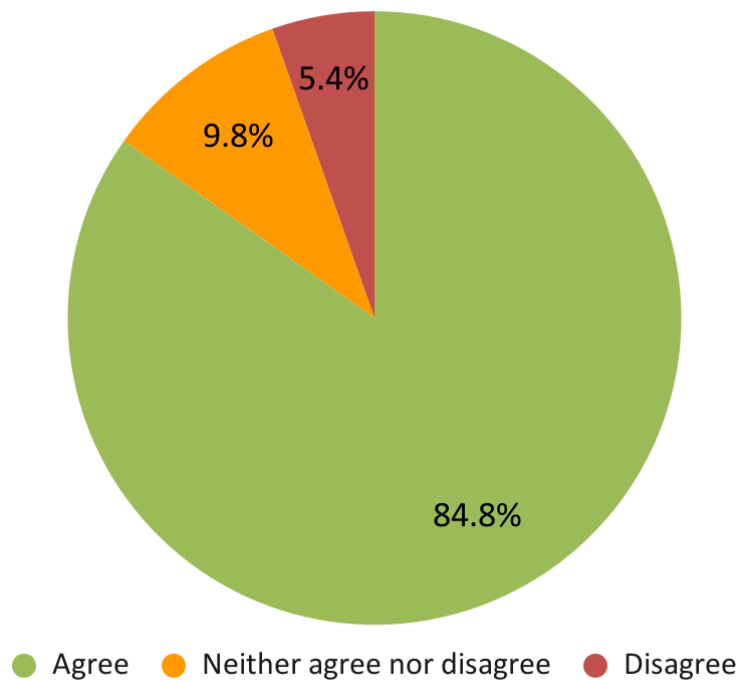
The graph above shows responses to the question “are you a part of...” which respondents who stated that they were sharing their views on behalf of an organisation were directed to. Respondents were given the option to select all that apply.

The highest percentage of respondents, just over 40% (17), stated that they are part of a Hackney Voluntary and Community Sector organisation.

This is followed by just under 24% (10) of respondents who described their organisation as other. Respondents who selected “other” were asked to expand. 10 respondents gave the name of their organisation.

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Improving Mental Health)

In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)? (Base 295)

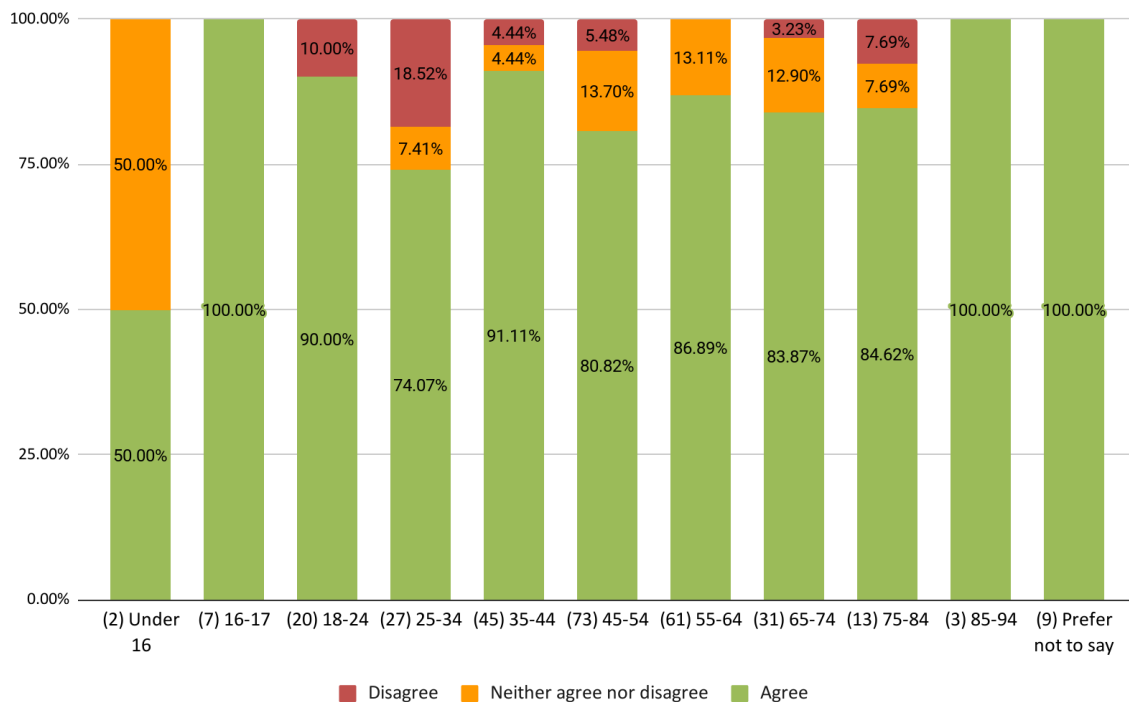


The chart above shows the responses to the question "To what extent do you agree or disagree with the suggested actions for Priority 1 (Improving Mental Health)?"

The majority of respondents, just over 85% (251), stated that they agree with the suggested actions for Priority 1 (Improving Mental Health).

Just over 5% (16) of respondents stated that they disagree with the suggested actions for Priority 1. Just under 10% (29) stated that they neither agree nor disagree.

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by Age Group (Base 275)



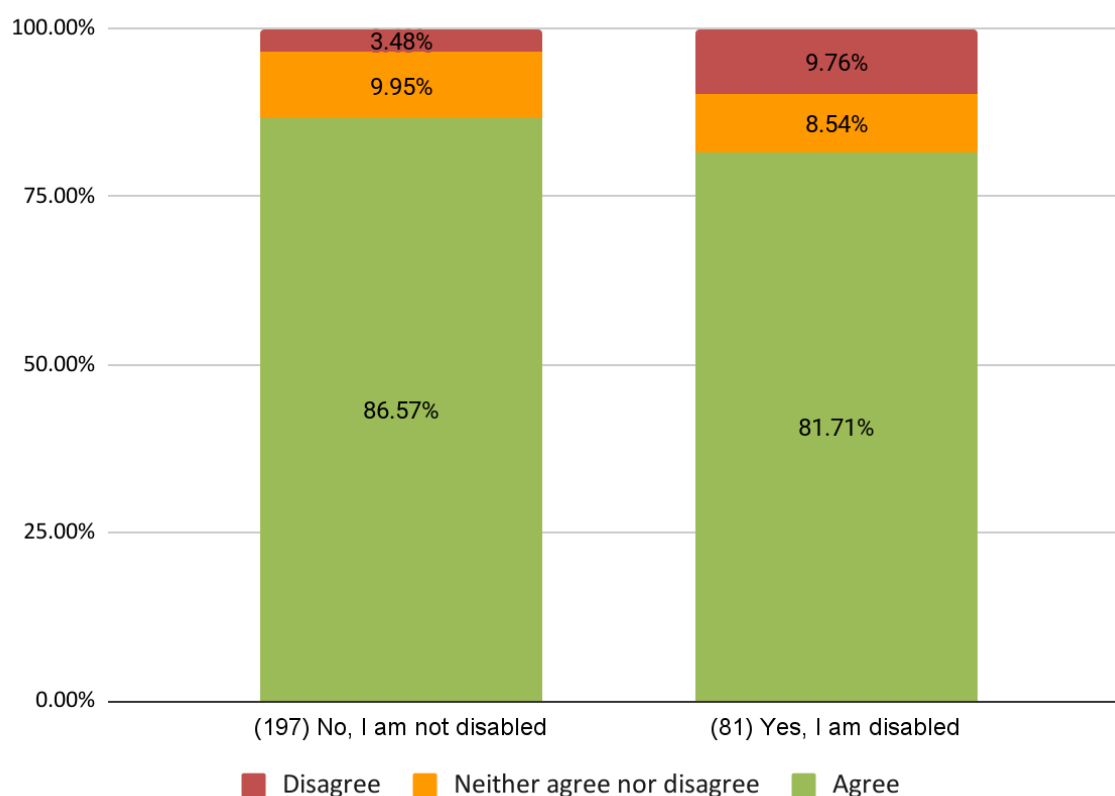
The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by age group.

Across the age groups, the majority of respondents agreed with the suggested actions, with the exception of respondents under 16. However, this age group had a very low base number of two.

All respondents in the age groups 16-17, 85-94 and respondents who preferred not to say their age agreed with the suggested actions.

The age group 45-64 had the highest number of respondents who disagreed (4 respondents) with the suggested Priority 1 (Improving Mental Health) actions.

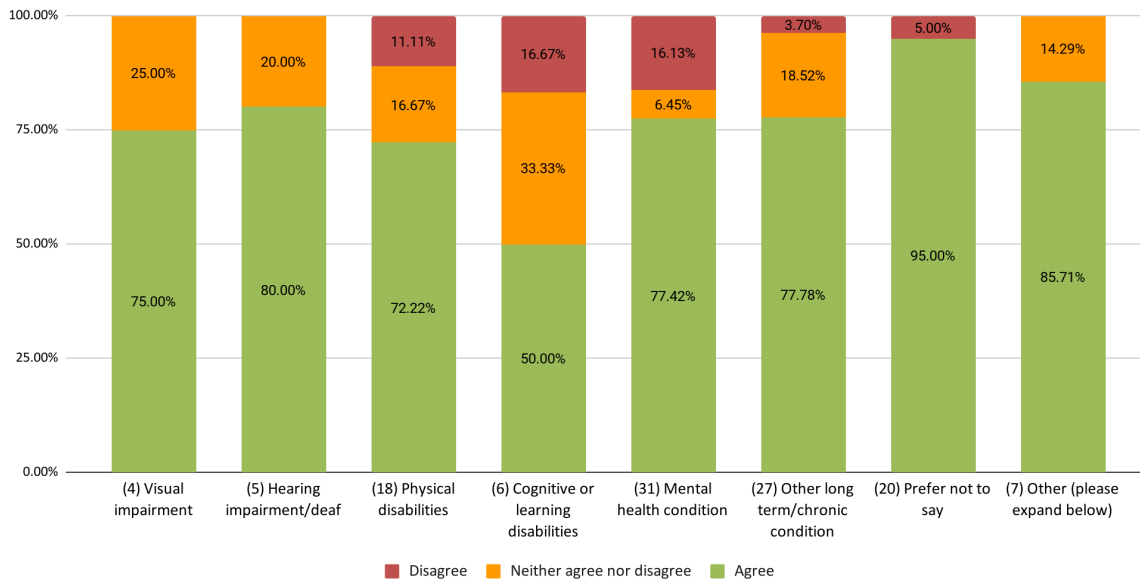
Cross-analysis: “In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by Disability (Base 268)



The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by disability.

While the majority of respondents who consider themselves to be disabled, just under 82% (66), agree with the suggested actions for Priority 1, respondents with a disability were more likely to disagree with the suggested actions for Priority 1. Just under 10% of respondents (8) with a disability disagree with the suggested actions.

Cross-analysis: “In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by Nature of Disability (Base 107)

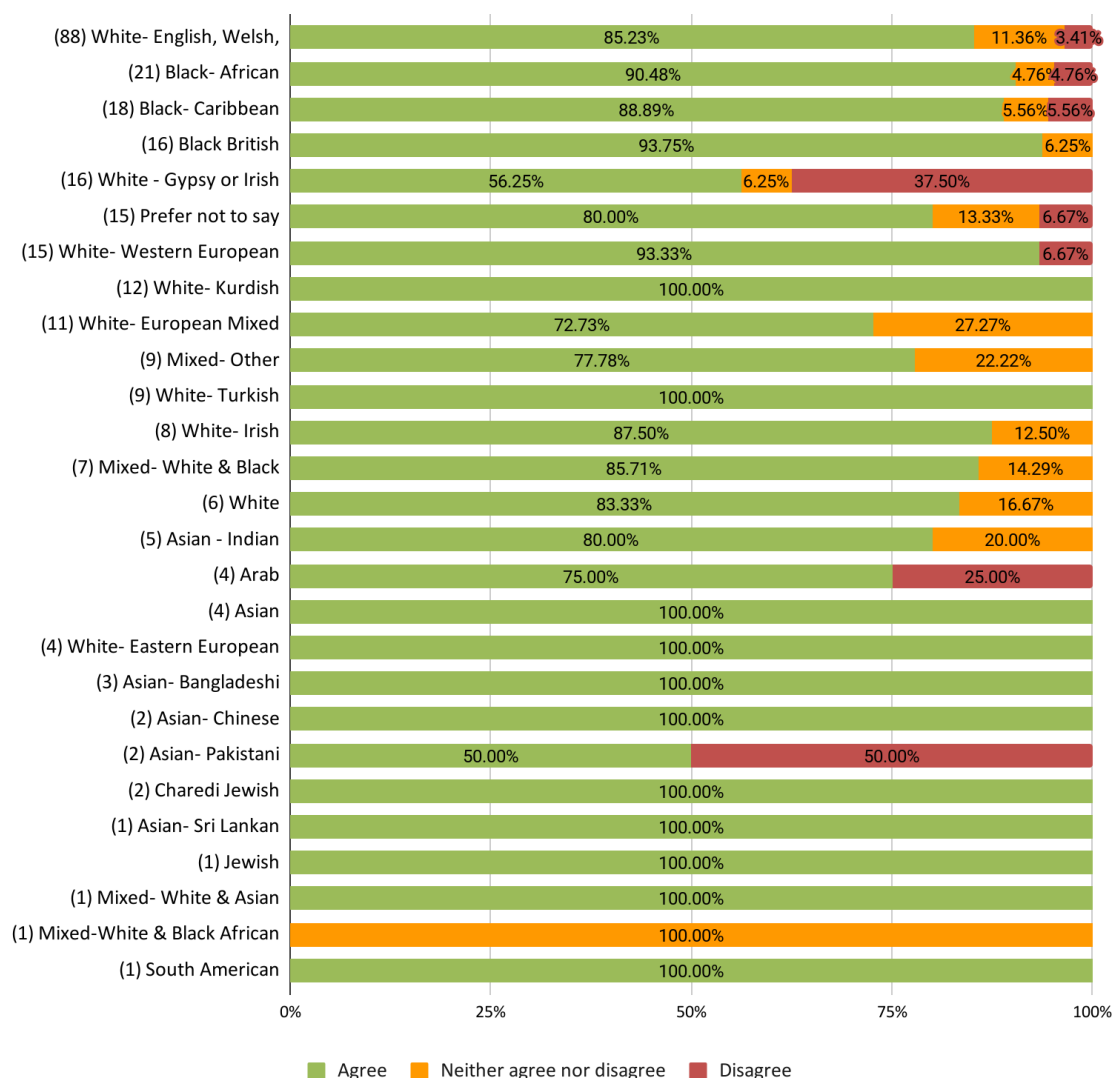


The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by nature of disability.

For all disability categories, at least half of respondents agree with the suggested actions.

The highest number of respondents who disagreed with the suggested actions for priority one had a mental health condition (5 respondents). Other long term/chronic condition was the disability category with the highest number of respondents who neither agree nor disagree with the priority 1 actions (5). It should be noted that both of these categories had a very low count.

Cross-analysis: “In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by Ethnicity (Base 267)



The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by ethnicity.

Other than Asian - Pakistani and Mixed - White & Asian, the majority of respondents in all ethnic groups agreed with the suggested priority 1 actions. The count for each of these groups was very low: Asian - Pakistani (2), mixed - white & Asian (1).

White British accounted for the ethnicity with the highest percentage of respondents and the highest number of respondents who disagree with the actions for priority 1 (3.)

Cross-analysis: “In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by Gender (Base 274)

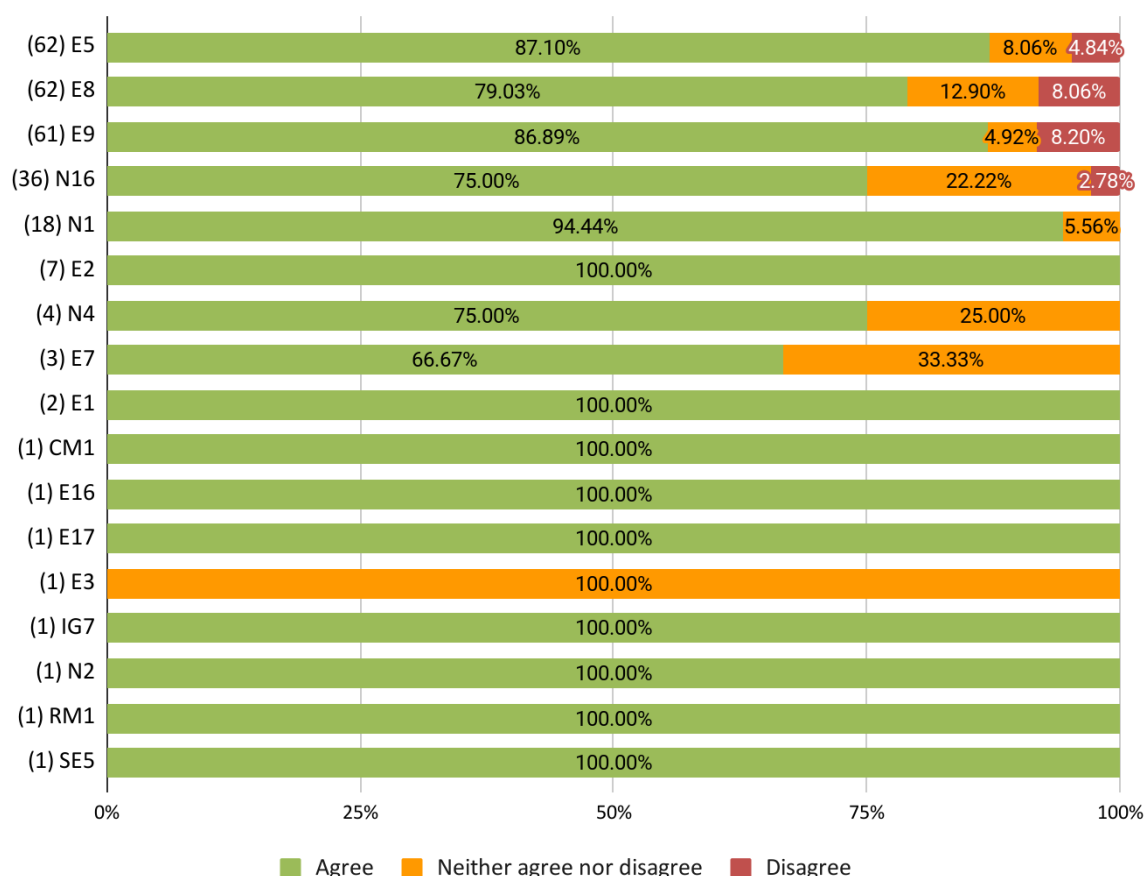


The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by gender.

Across all gender categories, the majority of respondents agreed with the suggested actions for Priority 1.

Women accounted for the gender category with the highest number of respondents and the highest number of respondents who disagreed with the strategy actions (8).

Cross-analysis: “In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by Postcode (Base 247)



The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?” by postcode.

Other than E3, across all other postcodes the majority of respondents agreed with the suggested actions for priority 1.

E8 and E9 each had the highest number of respondents who disagreed with the suggested actions (5). E8 is the Dalston ward and E9 is the Victoria ward.

Please explain your response above: (Base 244)

Respondents were asked to explain why they agree or disagree with priority 1 (improving mental health) and their responses were analysed into the following key themes. Please note, responses could be coded into multiple themes.

Theme	Meaning	Count
SUPPORTS STRATEGY ACTIONS	Support for the focus on mental health & the priority actions.	109
PRIORITY GROUPS	Suggested priority groups to focus on through mental health actions.	52
MENTAL HEALTH SERVICES	The need to improve access to services, reports of negative experiences in Hackney, and knowing where to access services.	42
EXPERIENCE OF MENTAL HEALTH	The impact of mental health in Hackney, lived-experience accounts, and the need to reduce stigma.	39
STRATEGY CRITICISM & QUERIES	Criticisms and queries about the strategy & actions.	34
OVERLAP OF BENEFITS	The interconnected impact of mental health, wellbeing, financial security and physical health.	30
SUGGESTIONS FOR ADDITIONAL ACTIONS	Including content related to housing, access to healthy & sustainable spaces, drugs & alcohol support, mental health services, cultural competence, employment, education & social connection, and stakeholder engagement.	28
COVID-19	The impact of the pandemic on mental health.	26
ADDITIONAL COMMENTS	The impact of rising cost of living & need to understand causes of mental health.	5

Supports strategy actions

Respondents shared support for the focus on improving mental health, the priority actions and the wider strategy:

"I agree that focussing on Mental Health is important. Having information available is helpful but people may need additional support in order to access this or make use of the opportunities." [sic]

"Mental health is clearly a priority and high on the agenda. It is evident that there are actions in place to identify mental health issues in the community."

"Good focus and current climate Priority 1 is fitting and needs attention."

Priority groups

Respondents identified priority groups to focus on through mental health actions including children & young people, the traveller community, vulnerable people, women, men, Black and Global Majority residents, carers, disabled people, healthcare staff and the LGBTQIA+ population.¹

“Must have volunteer centres; early interventions in schools regarding mental health problems e.g. children, teenagers, social services to increase their response to mental health.”

“I'm aware that lots of Travellers suffer from poor mental health but they don't like talking about it. Many of my family members are taking antidepressants. The community needs help with understanding and looking after their mental health problems.”

“... Many carers using our service have experienced trauma in their past; either through fleeing conflict in other countries or through childhood or domestic abuse. A large proportion of unpaid carers using the service are caring for someone with a diagnosed mental health condition. These carers really need support and their own mental health would improve if there were better services for the person they care for...”

Mental health services

Respondents commented on the need to improve access to services and communication with service users, reported negative experiences of City & Hackney mental health services, and commented on inadequate provision of mental health services.

“Mental health issues are very common amongst my peers and the issue is that the lack of knowledge on how to approach these issues is due to lack of conversation, education and services available - especially for youth - although CAHMS exists - long waits and advice is generic.”²

“I have suffered with mental health and found it challenging to get support through Hackney Mental Health.”

¹ Black and Global majority refers to those who identify as Black, Asian, mixed background and from other ethnic groups. LGBTQIA+ stands for lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual and other sexual identities.

² CAHMS stands for Children and Adolescent Mental Health Services

“Mental health treatment needs improvement similar [sic] issues with physical health delays, long waits for appointments. talking therapy was good but only for short term - long term help that is affordable needs to happen”

Experience of mental health

Respondents commented on the impact of mental health in Hackney, shared their lived-experience and addressed the need to reduce stigma.

“I have suffered with mental health and found it challenging to get support through Hackney Mental Health.”

“Mental health is a serious issue for people in Hackney, including stress through income insecurity, loneliness and post-Covid recovery. There are currently far too few resources devoted to this aspect of health.”

“Many of the families I work with suffer with mental ill health and have had difficulties accessing long term appropriate support.”

Strategy criticism & queries

Respondents raised criticism and queries about the strategy & actions, including comments on the presentation of the strategy, the focus on performance, concerns about implementation of the priority actions, and criticism of the prioritisation of mental health.

“There's a danger that Hackney Council focuses too much attention on low-level mental health outcomes. For example, encouraging people to talk about their changes in mood. Tackling the real mental health crisis involves greater funding for research into psychiatric illnesses such as depression to understand their causes and develop cures not treatments. Another area of concern is suicide prevention. Suicide is the biggest killer of men in the UK between the ages of 20-45. However, suicide is preventable...”

“There is no emphasis on the importance of it and how to enhance / take care of it.”

“I think all the points are achievable yet generalised which calls into question how they will be implemented eg ‘making mental health everyone’s responsibility’. I think it’s great and would be even better if social differences were taken into account for example in the promotion of increased physical health, making sure there are sufficient women’s only classes taking place, as well as opportunities for parents and children to engage in exercise together.”

Overlap of benefits

Respondents commented on the interconnected impact of mental health, wellbeing, financial security and physical health.

"I agree that mental health is highly important. However I'd urge more recognition of how physical and mental health overlap especially with regards to supporting people with physical activity, culture and arts events etc."

"Increasing loneliness, financial problems and miscommunication are important for mental health."

"Financial security is primary in mental health."

Suggestions for additional actions

Respondents made suggestions for additional content in the strategy, including actions related to housing, access to healthy & sustainable spaces, drugs & alcohol, mental health services, cultural competence, employment, education & social connection, stakeholder engagement.

"In agreement with the listed actions for priority one however there could be an action that relates to Housing given that having affordable, safe and good quality housing is detrimental to good mental health."

"Agree with the proposed actions set out for helping to tackle mental health. It is noted that a more detailed action plan will be developed at a later stage. When putting together this action plan, we would like to see more content and actions set out with regards to the role that healthy and sustainable places play in contributing to good mental health. It is known that exercise and access to green open space can have mental health benefits. Many of the issues are interlinked and we would like to see this really coming through in the more detailed action plan so that it is clear that a more pleasant environment is more likely to encourage active travel and by engaging in active travel, connections with the community can improve. All this helps to improve people's mental health as well as having co-benefits of reducing air pollution which, in turn, makes for a more pleasant environment and so on."

COVID-19

Respondents commented on the impact of the pandemic on mental health.

"Lots of people I know have problems with their mental health now because of Covid_19. Also suffering from addictions is a big problem here in Hackney."

"Mental health issues have hugely increased since the start of the pandemic and don't seem to be reducing in either intensity or prevalence, while mental health service provision seems to be severely limited, potentially exacerbated by staff leaving the profession and the massive backlog of cases."

"Mental health has been exacerbated by covid 19 pandemic and working from home has greatly reduced the social connection we once had via work and other community contact."

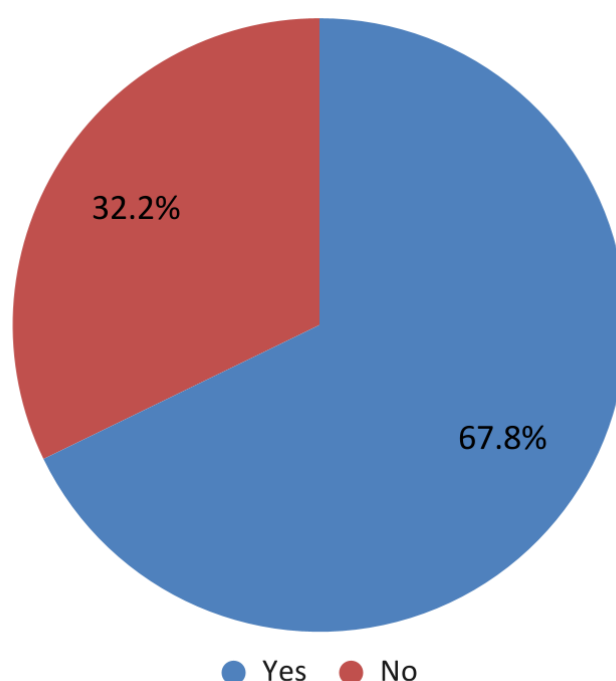
Additional comments

Respondents made additional comments relating to the impact of rising cost of living and the need to understand causes of mental health issues.

"It's a long standing problem in Hackney. We have over the national average of mental ill health - especially long and enduring and child and young people. All have suffered during the pandemic too - increased levels of anxiety. It can affect anyone at anytime too. We are looking at severe rise in cost of living - this will have an even more detrimental affect on mental wellbeing."

"Need to tackle root causes. What causes mental health difficulties?"

Can you suggest other actions that we should include in our Strategy to improve mental health that will reduce health inequalities? (Base 292)



The chart above shows the responses to the question “Can you suggest other actions that we should include in our Strategy to improve mental health that will reduce health inequalities?”

The majority of respondents, just under 68%, stated that they could suggest other actions to include in the strategy to improve mental health that will reduce health inequalities.

If yes, please specify: (Base 202)

Respondents who answered “yes” were asked to specify which other actions they thought should be included in the Strategy to improve mental health that will reduce health inequalities. Responses were analysed into the following key themes.

Theme	Meaning	Count
MENTAL HEALTH SERVICES	Actions relating to mental health services. Including greater availability, improved services, training for health professionals, community-level access to mental health services.	71

PRIORITY GROUPS	Suggested priority groups to focus on through mental health actions.	49
SOCIAL & ACTIVITY ACTIONS	Including social spaces, green spaces, and physical and social activities.	48
EDUCATION	Mental health education in schools and more widely.	30
ENGAGEMENT	Engagement with community groups, local businesses, places of worship, and other local authorities.	23
PARTNERSHIPS	Suggested partnerships with employers, Hackney Council, and legal and justice services.	17
COMMUNITY SUPPORT	Fostering community-based mental health support, funding for community organisations and volunteer schemes.	16
OVERLAP OF PRIORITIES	Interconnection of financial security, poverty and mental health.	14
IMPACT OF INEQUALITIES & MULTIPLE DISADVANTAGES	Impact of multiple inequalities and disadvantages on physical and mental health.	14
HOUSING	Suggested actions related to housing.	14
PARENTS & FAMILIES	Suggested actions relating to parents, families and relationships.	10
COMMUNICATION	More information for residents about services and the strategy to deliver on priorities.	4
STRATEGY ACTIONS & REFERENCE	Suggestions for the strategy.	3

Mental health services

Respondents suggested actions including greater availability of mental health services, improved mental health services, training for health professionals, and community-level access to mental health services.

“More accessible counselling with less waiting time.”

“The development of more primary care plus clinicians linked/ funded to/by GP surgeries where mental health issues can be picked up more quickly and treatment responses delivered more promptly. Where triage can happen more effectively and service users can be signposted to the necessary services faster. This will cut waiting times and catch a persons illness earlier, improve recovery outcomes and save the nhs money.” [sic]

“Using courses and allowing easy access to therapy. Offering options to access and encouraging support groups in the community.”

Priority groups

Respondents suggested priority groups to focus on through improving mental health actions including Black and Global Majority residents, children & young people, non-English speakers, the elderly, traveller community, migrants & refugees, disabled people, boaters, homeless people & the Orthodox Jewish community.

“More services to support the BAME community as well as activities. Also rethink inclusion for people with disabilities.”

“Finding ways around language barriers, which can be dissemination of information in many languages or provision of translators or healthcare workers who are able to practice [sic] in many languages? I think having a sensitivity to social differences can be expressed via accommodating to the language needs of the residents. It’s a barrier in healthcare in general but many may not be able to access the mental help they need either for lack of understanding or an inability to communicate their feelings and circumstances.”

“Create more community support for seniors & those living alone.”

Social & activity actions

Respondents suggested actions including more social spaces, green spaces, and physical and social activities.

“While healthy and sustainable places are mentioned, the actions that can contribute to this can be broad and include ensuring increased access to green space and promoting active travel.”

“local coffee mornings in children centres - for parents to openly talk about these things and start a conversation.”

“More programme activities which are accessible to all.”

Education

Respondents suggested more mental health education in schools and more public education on mental health.

“teach children and young people mental health basics eg what are common mental health problems - causes and symptoms counselling in school needs to be improved.”

“Perhaps there can be sessions (and it can either be one-to-one or a group session) on teaching others of what mental health is and how to reduce chances of getting a mental health problem.”

Engagement

Respondents suggested engagement with community groups, local businesses, places of worship, and other local authorities.

“I'm sure it's all part of the strategy but outreach is really important, forums in local community centres, Drs surgeries should be the hub for outreach and funded accordingly with good communication with community based initiatives.”

“more groups/activities organised by community groups as they know best what their community needs.”

“Working with local community groups, especially Ethnic Minorities and religious organizations [sic].”

Partnerships

Respondents suggested partnerships with employers, Hackney Council, and legal and justice services to address this priority area within the Strategy.

“mental health training for HR in the workplace; better support in the workplace to get rid of stigmas; offer more training to workplaces”

“Although Hackney is 2nd most deprived borough in London, there is a big gap between rich and poor. it is a diverse community. The big businesses and other organisations should help young people and school leavers to get employment opportunities and Hackney council should help local business to help young people to get into apprenticeship and help their families to improve financial stability of the family and give teenagers some sense of purpose and not to go into crime and knife and gang violence.” [sic]

Community support

Respondents suggested actions such as fostering community-based mental health support, taking a holistic approach to mental health support, funding for community organisations and volunteer schemes.

“A holistic approach to health care (considering the mental and physical health of people), educating people so that they understand mental health issues (reducing the stigma attached to these conditions), engaging people with mental health conditions in their community (through employment, services, allowing them to show that they have limitations, but skills and knowledge that makes them as valuable as any other individual), and community events that bring people together in a safe, pleasant environment.”

“Volunteering roles for locals and community events.”

“Buddy schemes and peer support.”

Overlap of priorities

Respondents commented on the impact of financial insecurity and poverty on mental health.

“In my experience working in mental health, the main exacerbating factors were poverty and housing issues. Both need addressing at a national level as well as locally.”

“Fix the root causes & peoples mental health will improve. Poverty is enough to drive anyone to poor MH, never mind all the other factors to consider.”

“...Cost of living also needs to be addressed. I am a working class Hackney resident who would find it impossible financially to live and work here independently and this is probably the biggest contribution to my own mental health struggle and has been for the last 15 years...”

Impact of inequalities & multiple disadvantages

Respondents suggested actions and commented on the impact of multiple inequalities and disadvantages on physical and mental health.

“Drugs and drink dependency reduction, good social housing providing good accommodation, reduced overcrowding, making it easier to move from overcrowded flats to suitable flats and to down size to sheltered accommodation or ground floor units or places with lifts when older. Social clubs and community gardens. Gentrification and planning application fees for new blocks of flats to bring visible projects and improvements for the local communities, who suffer from endless noise during construction. Some gains towards youth organisations. London Fields football teaching being open to all young people and not just to those who can afford the coach fees.”

"I work in a school in Hackney and much of my work now involves supporting families with housing issues in particular. I note that in some of your responses 'stress and sleep' are recorded under mental health. This corresponds with some of the families I have supported - overcrowding, sub-standard living conditions contribute to a sense of worthlessness, exhaustion (both with sharing rooms and with the relentless chasing up of housing problems) and seeing no light at the end of the tunnel. These problems are compounded if the parents/family have English as a second language. I have observed that this really impacts on mental health as the inability to communicate and be understood leads to more stress and anger."

Housing

Respondents suggested actions related to housing.

"As above, there should be a link to affordable, good quality and safe housing as poor housing can have a detrimental affect [sic] on mental health. This includes not only social/affordable housing but also housing in the private sector."

"Integrate with housing and justice teams to ensure that those experiencing multiple disadvantage don't risk homelessness or incarceration due to mental ill health. Lankelly Chase Charitable Foundation fund helpful work in this area."

Parents & families

Respondents suggested actions relating to parents, families and relationships.

"more family support for children and parents to help to be a better family better support for children in school to deal with stress. offer more support groups/activities for families to have fun together."

"local coffee mornings in children centres - for parents to openly talk about these things and start a conversation"

Communication

Respondents asked for more information for residents about services and the strategy to deliver on priorities.

"to advertise the services that are available to all - improve them - what the service entails -- should be of long term benefit -- many services don't last long - 6 sessions of counselling in school."

"more support groups and better signposting to groups."

Strategy actions & reference

Respondents made suggestions for the strategy.

"It should have clear outcomes, this feels more like a statement. Perhaps keep the statement, but factor in a model, such as ONS Wellbeing etc."

"Having mental health as a priority is all well and good but having alongside it the impact of substance misuse would be prudent. Mental health can be affected by substance misuse and individuals can be also [sic] use substance misuse in order to cope with their possible pre-existing mental health. Not only that the possible impact upon a young person's development if their primary carer misuses drugs and or alcohol. Recent Dame Carol Black report should have also been considered regarding the strategy. Supporting individual choices to access appropriate treatment and care."

Who should the Health and Wellbeing Board work with on this action/these actions? (Base 222)

Responses were analysed into the following key themes.

Theme	Meaning	Count
COMMUNITY ORGANISATIONS, VOLUNTARY SECTOR & CHARITIES	Respondents suggested organisations to work with.	128
MENTAL HEALTH, HEALTH SERVICES & SOCIAL CARE	NHS and public health services, social workers and social prescribers.	94
ENGAGEMENT WITH PRIORITY GROUPS	Suggested priority groups to engage with through mental health actions.	64
EDUCATION	Schools, colleges, and universities.	43
THE COUNCIL	The Council & councillors.	27
HOUSING	Social housing, housing groups, and shelter charities and support for homeless people.	21
GOVERNMENT & POLICY	The government and policy actions, including comments related to universal credit.	19
SOCIAL OUTREACH, ACTIVITIES & ORGANISATIONS	Outreach via local businesses, leisure centres and libraries, and activities such as exercise groups.	16
EMPLOYMENT	Employers and workplace actions and the job centre.	16
LEGAL SECTOR, COURTS & POLICE	The police, legal sector, prison and courts services.	9
OTHER	Working with IT providers and sharing IT skills to reduce digital exclusion	2

Community organisations, voluntary sector & charities

Respondents suggested organisations including mental health charities & organisations, substance misuse, addiction & recovery organisations, faith groups & places of worship, environmental & sustainability groups, hospice care, libraries, health & wellbeing organisations, economic organisations, food banks & financial advice organisations should be working together to take forward mental health actions within the Strategy.

“Hackney Refugee & Migrant Forum, HCVS and Hackney Migrant Centre.”

“Residents groups and champions from a range of cohorts in the community; VCS organisations, GP practices (neighbourhoods); partner agencies”

“Healthcare professionals, BeyondBlue, Samaritans, people that have overcome mental health issues from diverse backgrounds.”

Mental health, health services & social care

Respondents suggested working with the NHS and public health services, social workers and social prescribers.

“NHS, GP surgeries.”

“We need a health worker for Travellers. Who can support us and offer training to other health professionals.”

“GPS, pharmacists, social workers, housing maintenance team, community physiotherapists, social prescribers, advise [sic] team.”

Engagement with priority groups

Respondents suggested priority groups to engage with through mental health actions including Black and Global Majority residents, children & young people, the elderly, traveller community, migrants & refugees, disabled people, boaters, people with mental health conditions, the Orthodox Jewish community and low income groups.

“They should work with young people and other individuals this greatly impacts on.”

“with the elderly- those responsible for running elderly homes and lunch groups and infant school teachers”

“community members and representatives of marginalised groups to ensure their needs are met.”

Education

Respondents suggested working with schools, colleges, and universities.

“Primary and Secondary schools.”

“Individual clubs as well as schools - from primary right up to 6th form and higher/further education. Also, sports and leisure facilities need to be involved.”

“Hackney learning Trust, schools.”

The Council

Respondents recommended working with the Council & councillors.

“The council should provide a 24hr service for people in MH crisis in our borough - not just send them to A+E after 4pm every day. MIND are a great organisation that the council can partner up with on this.”

“The council.”

Housing

Respondents suggested working with social housing, housing groups, shelter charities and support for homeless people.

“Housing.”

“There is a need to link with Housing services at Hackney (e.g Benefits and Housing Needs given the affect [sic] that fuel poverty and poor housing/homelessness can have on individuals mental health). There is also a need to work with external organisations such as registered providers/housing associations. Internal teams at the Council such as regeneration also may pay [sic] an important role as even the design of our housing stock can indirectly contribute to good mental health.”

Government & policy

Respondents suggested working with the national government and policy actions, including comments related to universal credit.

“The Government.”

“Benefits advice, voluntary sector, CAB, MInd.”

“Working with the government and Local Authorities.”

Social outreach, activities & organisations

Respondents suggested outreach via local businesses, leisure centres and libraries, and activities such as exercise groups.

“They should work with gyms and independent places that offer these services to the general public.”

“Community run exercise classes, GP surgeries (access to gyms/classes), Public Health, children's centres and schools etc.”

“Other health services; community groups; promoters of all outdoor activities; sports clubs; gardening clubs; schools; youth clubs.”

Employment

Respondents suggested working with employers and workplace-based actions and the job centre.

“employers across hackney; especially education settings.”

“Teachers, employers, employees, GPs, people in job centres, the government and MPs.”

Legal sector, courts & police

Respondents suggested working with the police, legal sector, prison and courts services.

“Police, NHS and Government.”

“Housing needs service, voluntary sector organisations, law centres and legal aid focussed law firms eg Lawstop.”

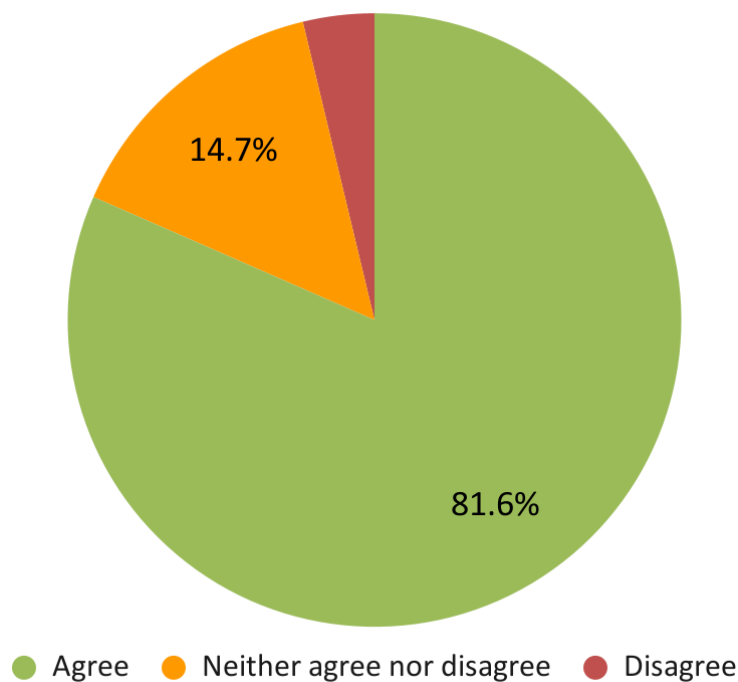
Other

Two respondents suggested working with IT providers and sharing IT skills to reduce digital exclusion.

“...Also IT providers and data providers to see if anything can be done to reduce digital poverty. The government to influence policy.”

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Increasing Social Connection)

In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)? (Base 293)

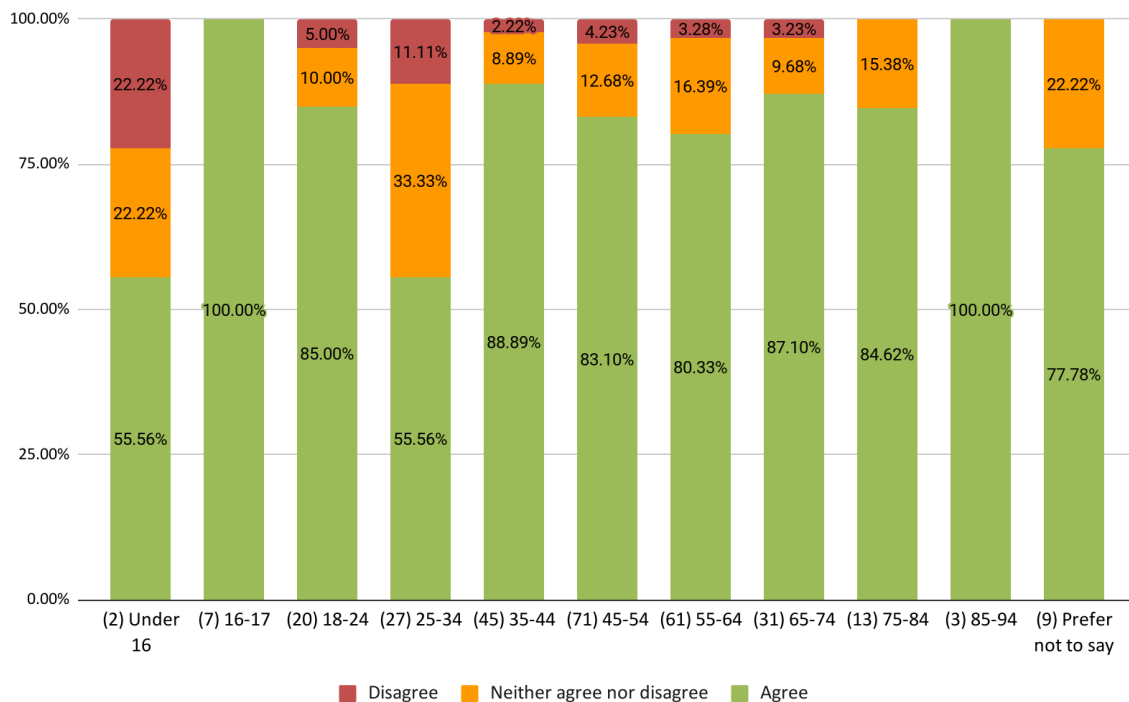


The chart above shows the responses to the question “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?”

The majority of respondents, just under 82% (239), stated that they agreed with the suggested actions for Priority 2.

Just under 15% (43) stated that they neither agreed nor disagreed and less than 4% (11) respondents disagreed.

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by Age Group (Base 273)



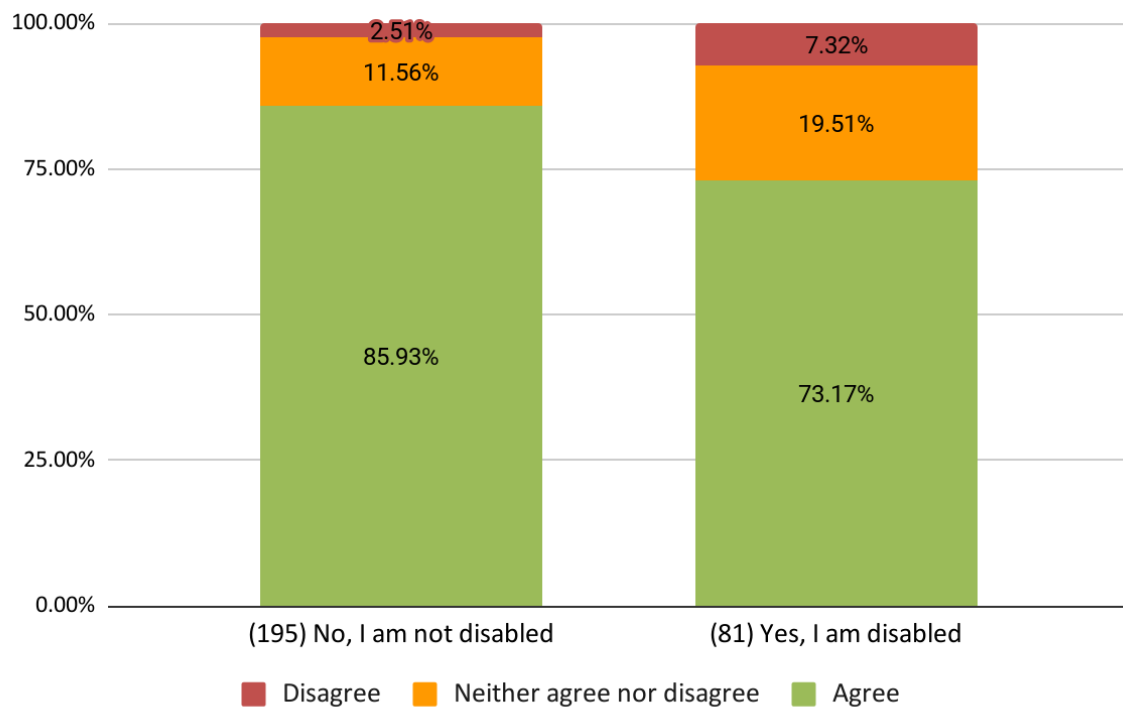
The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by age group.

Across all age categories, the majority of respondents agreed with the suggested actions for priority 2.

The age groups 25-34 and 45-54 had the highest number of respondents who disagreed with the actions for priority 2 (3 respondents for both age groups).

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by Disability (Base 266)

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by Disability (Base 266)

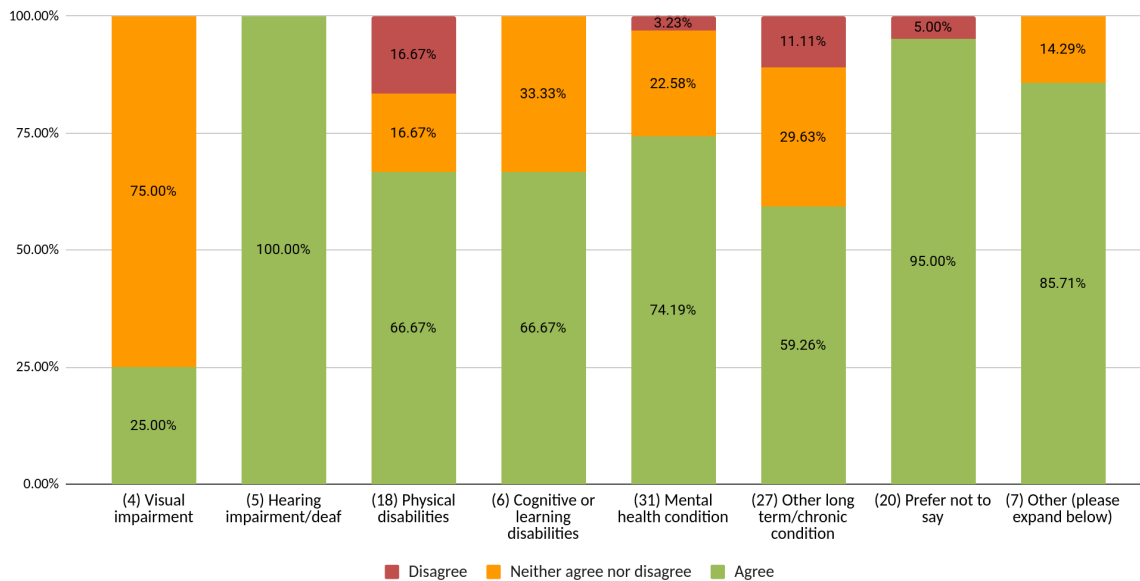


The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by disability.

The majority of respondents with and without disabilities agreed with the suggested actions for Priority 2.

Respondents with a disability were more likely to disagree with the suggested actions than respondents who did not consider themselves to be disabled. Just over 8% of respondents with a disability (6) disagreed with the suggested actions.

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by Nature of Disability (Base 180)



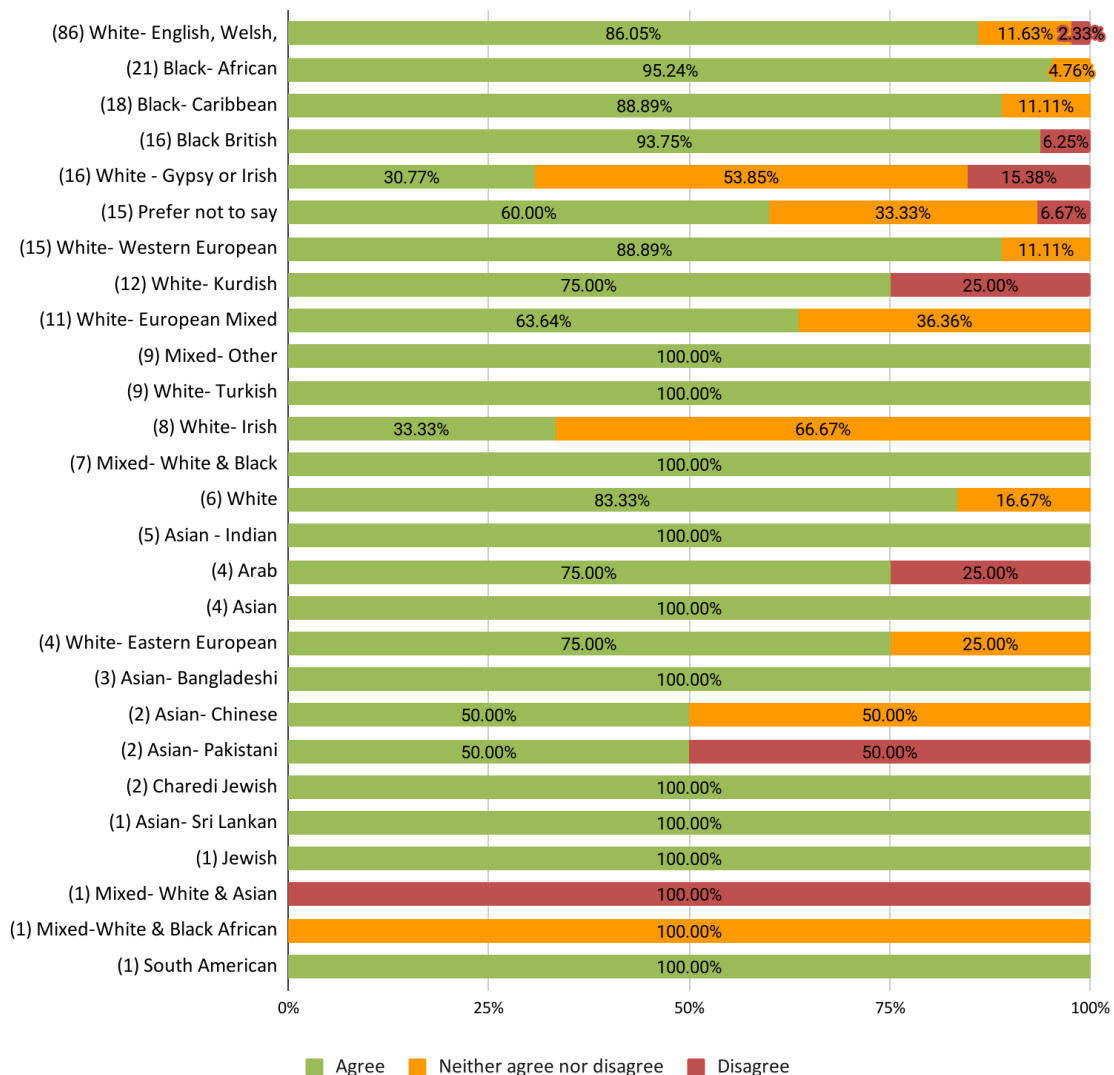
The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by nature of disability.

With the exception of visual impairment, the majority of respondents in all disability categories agreed with the suggested actions for Priority 2. Visual impairment had a lower count of 4 respondents.. Three of the four respondents with a visual impairment neither agreed nor disagreed with the suggested actions.

Physical disabilities and other long term/chronic conditions were the categories with the highest number of respondents who disagreed with the suggested actions (3 respondents for both categories.)

The highest number of respondents who neither agreed nor disagreed with the suggested actions had described their disability as “other long term/chronic condition” (8).

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by Ethnicity (Base 265)

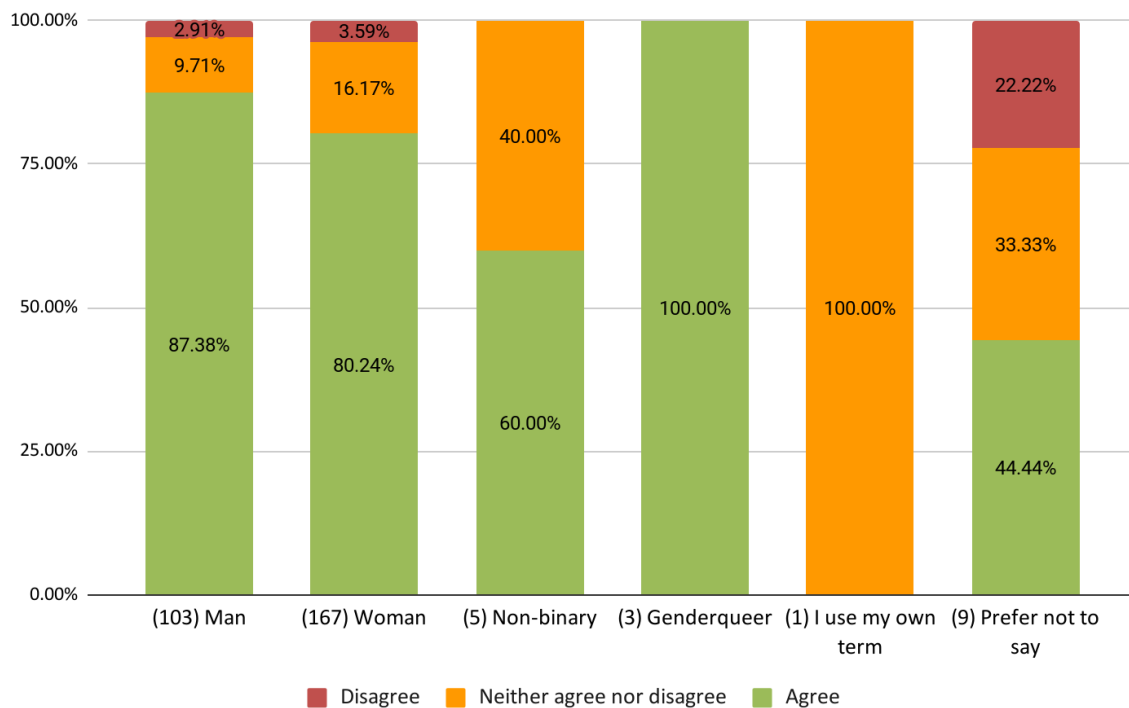


The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by ethnicity.

Other than White - Gypsy or Irish Traveller (count 16), Asian - Chinese (2), Asian - Pakistani (2), mixed - White & Asian (1) and Mixed - White & Black African (1), the majority of respondents in all other ethnic groups agreed with the suggested actions for priority 2.

White British accounted for the ethnicity with the highest percentage of respondents and the highest number of respondents who disagreed with the actions for priority 1 (22).

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by Gender (Base 269)

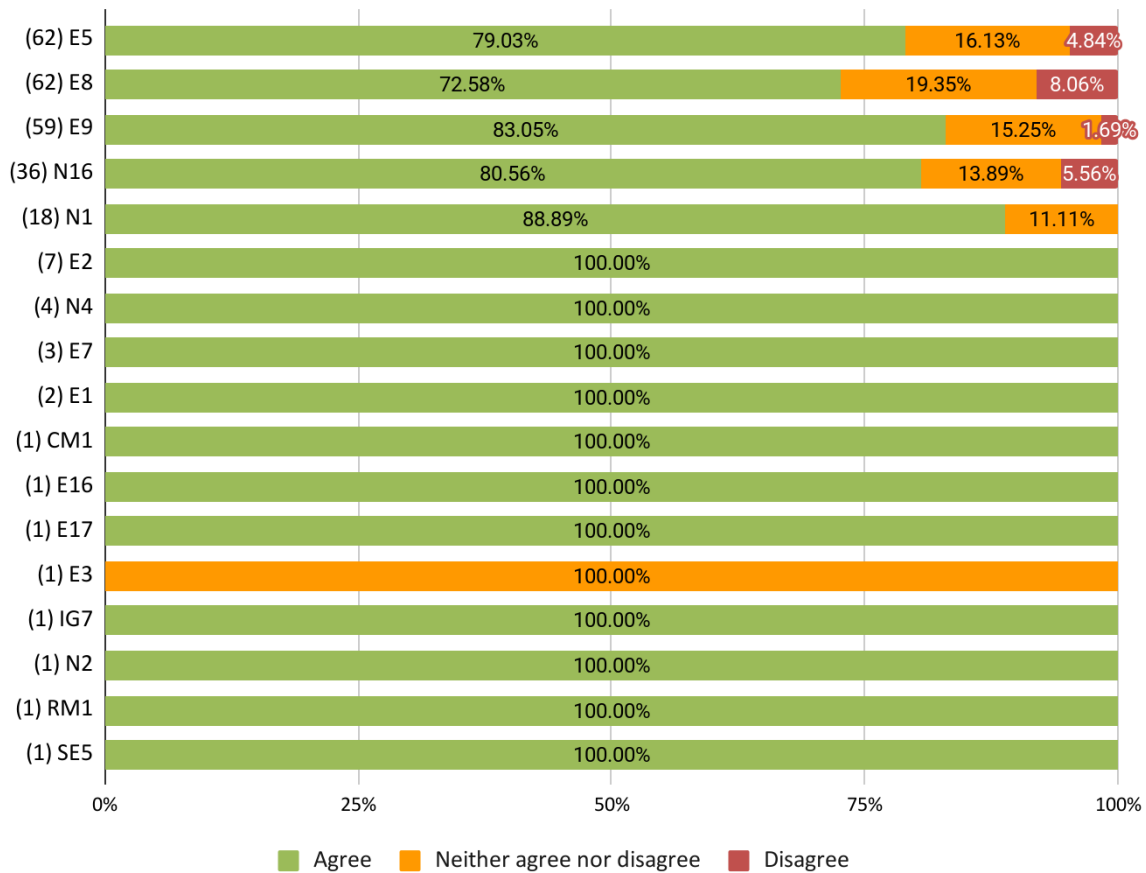


The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by gender.

For all gender categories, except I use my own term, the highest percentage of respondents agreed with the priority 2 actions.

Women accounted for the gender category with the highest number of respondents and the highest number of respondents who disagreed with the priority 2 actions (6).

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by Postcode (Base 245)



The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?” by postcode.

Other than E3, the majority of respondents for all postcodes agreed with the suggested actions for priority 2.

E8 accounted for the postcode with the highest number of respondents and the highest number of respondents who disagreed with the suggested priority 2 actions (5).

Please explain your response above:

Respondents were asked to explain why they agree or disagree with the strategy and their responses were analysed into the following key themes. Please note, responses could be coded into multiple themes.

Theme	Meaning	Count
SUPPORTS STRATEGY ACTIONS	Support for the focus on increasing social connection.	89
PRIORITY GROUPS	Suggested priority groups to focus on through social connection actions.	57
BARRIERS TO SOCIAL CONNECTION	Including safe social environments, housing, communication, crime & public safety, digital exclusion.	40
SUGGESTION FOR ADDITIONAL ACTIONS & CONTENT	Including community centres & social activities, food banks & access to food, advertising & social media, limiting gentrification.	30
IMPACT OF COVID-19	The impact of the pandemic on social connection.	27
STRATEGY CRITICISM & QUERIES	Criticisms and queries about the strategy & actions	26
FACILITATORS OF SOCIAL CONNECTION	Including friends & family, fostering community connections, respect & belonging, and supporting economically disadvantaged people.	26
IMPACT & EXPERIENCE	Impact and personal experience of lack of social connection	20

Supports strategy actions

Respondents stated their support for the focus on increasing social connection and the importance of social connection.

“The actions are clear and robust and we believe will be effective in tackling social isolation. In regards to creating and developing healthy and sustainable places and communities it would be good to see how this action will be implemented.”

“It is vital to stay connected, engaged and interact for a better balance life.”

“Social connection is incredibly important especially since the pandemic.”

Priority groups

Respondents suggested priority groups to focus on through social connection actions including the elderly, children & young people, Black and Global Majority residents, vulnerable people, the traveller community, migrants & refugees, disabled people, women, non-English speakers, local LGBTQIA+community, and low income groups.³

“Sounds great. My understanding is that it's really important that vulnerable people - children, young, old, ethnic minorities - not only feel that services were designed for them but also codesigned by them.”

“Because of years of facing discrimination and racism we generally keep to our community. Discrimination against Travellers is one of the last forms of acceptable racism.”

“Social connection and inclusiveness is what is lacking as far as refugees/migrants are concerned. They are isolated, almost locked in their own room, no where to go, no-one to talk to.”

Barriers to social connection

Respondents commented on barriers to social connection, including safe social environments, housing, communication, crime & public safety and digital exclusion.

“Humans are social creatures and poverty, mental health issues, inequalities, major changes ie coronavirus, housing issues all impact people in different ways and not not being able to meet one's basic needs ie, having a suitable shelter, adequate clothing, proper nourishment are obstacle that can trigger a person's wellbeing and stop social interaction and cause mental health issues in the long run.”

“Social connections hard [sic] to make especially in certain areas of Hackney where there are not many activities to create relationships with nearby residents and likely increased during the pandemic.”

“Many young people feel like they can't keep up with the gentrification - need more opportunities available to us. Older people as a result of covid effected [sic] by social isolation the most need help and support to integrate back into life especially in terms of community and getting involved.”

Suggestions for additional actions & content

³ Note, the term “vulnerable people” is phrased as written in respondent comments.

Respondents made additional suggestions including community centres & social activities, food banks & access to food, advertising & social media, limiting gentrification.

“Safe places to go and socialise (day centres, library with social spaces such as Cllr James, coffee shops (not only expensive ones). Estate community halls. Schools.”

“social network must be achieved and is inclusive of mental health individuals; support with accommodation; early response; charity to help with food banks.”

“Working and networking with local groups, individuals and organizations will help develop a sense of inclusiveness, trust and respect in council and community relationship.” [sic]

Impact of COVID-19

Respondents commented on the impact of the pandemic on social connection.

“Post pandemic this is what people want and have been denied for so long.”

“I think that this pandemic has shown us how isolation can be detrimental for our mental and physical health.”

“Integral after pandemic recovery.”

Strategy criticisms and queries

Respondents raised criticism and queries about the strategy & actions.

“Not sure the actions are concrete enough.”

“Again it needs to be more specific and name the groups it seeks to support, 'disabled' is only mentioned once in the entire document! The pandemic highlighted the digital divide and providing access to free internet and devices will help people stay connected. Again sexual orientation and gender identity are NOT mentioned. The report needs to acknowledge and mention other forms of discrimination (not just racism).”

“I think other things are more of a priority here in Hackney”

Facilitators of social connection

Respondents commented on the facilitators of social connection including friends and family, fostering community connections, respect and belonging, and supporting economically disadvantaged people.

"We are a small charity that support people with disabilities at a day activity centre. A lot of our members do not get to engage in a lot of socialising when they are not in our care so it is incredibly important to try to find engaging sessions where they can interact with each other and new people. All of our members are always obviously happier when doing stuff with their friends, even if it is just going to get a cup of coffee. Social connection is instrumental to good mental health and improving social skills."

"I think we need to build communities, neighbourhood parties so we can know neighbours more. We should have communities looking out for each other and properly interacting with each other."

"Being with others, loved, respected and valued is what makes life enjoyable. Breaking down barriers of age, gender, race, beliefs and know the person."

Impact & experience

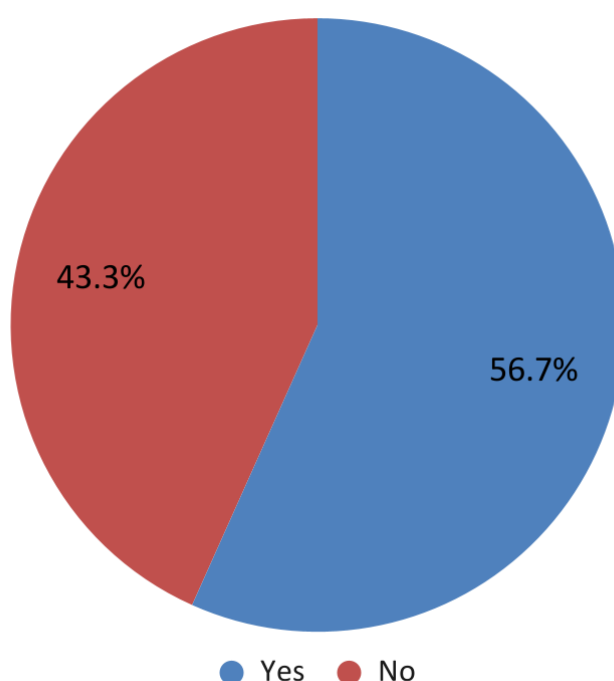
Respondents shared personal experiences of lack of social connection and its impact.

"Because I know what it means being an immigrant and not having family and friends around and struggling to find healthy connections."

"More support is needed by my family & by others. I have been isolated from everyone for nearly 2 years due to the pandemic - and my 2 sons with their SEN needs keep me busy but through coming to projects like this Food Bank & now Community Lunches I have made some nice new friends."

"As a carer, working in Hackney I see many people who are lonely and have seen their health deteriorated quicker than those who have families and friends coming around."

Can you suggest other actions that we should include in our Strategy to improve social connection that will reduce health inequalities? (Base 291)



The chart above shows responses to the question “Can you suggest other actions that we should include in our Strategy to improve social connection that will reduce health inequalities?”

The majority of respondents, just under 57% (165), stated that they could suggest other actions to include in the strategy.

Just over 43% of respondents (126) stated that they could not suggest other actions.

If yes, please specify: (Base 202)

Theme	Meaning	Count
SOCIAL & ACTIVITY ACTIONS	Including social clubs, community & youth centres, physical activities & exercise, green spaces, and play streets.	73
PRIORITY GROUPS	Suggested priority groups to focus on through social connection actions.	51
ENGAGEMENT	Engagement with community groups, faith groups & places of worship, outreach & increased community engagement, digital resources & digital exclusion, and the need for cultural sensitivity.	41

HEALTH & MENTAL HEALTH SERVICES	Actions relating to wider NHS & GP services, greater availability of mental health services & therapies, collaboration between health centres, NHS practices & local organisations, substance misuse support, and access to home carers.	22
COMMUNICATION	More advertising and sharing of information.	18
EDUCATION	Education and outreach on health inequalities, children & young people's education, and wider information about mental health.	13
PARTNERSHIPS	Suggested partnerships with Hackney Council (and Council based actions), senior health teams, public safety, and government policy-based actions.	9
HOUSING	Actions related to housing, housing conditions & affordable housing.	6
STRATEGY ACTIONS & REFERENCE	Suggestions for the strategy.	5
EMPLOYMENT	Employability & skills.	4
FINANCIAL SUPPORT	Debt and financial advice, cost of living and economic inequalities.	3
FOOD SUPPORT	Access to food & food banks.	2

Social activity & actions

Respondents suggested social activity actions including social clubs, community & youth centres, physical activities, green spaces, and Play Streets.

“Open community centres that have free classes & activities on for local people. Workshops, cooking, exercise, things that can bring people together would be really good for Hackney.”

“re-fund & reopen local community halls - get local residents involved in their local communities.”

“Free and open to all activities such as craft groups / dress making / tennis classes / yoga and mediation groups / cooking together and community meals etc at an easily accessible venue.”

Priority groups

Respondents suggested priority groups to focus on through social connection actions including children & young people, elderly people, disabled people, vulnerable & isolated people, the traveller community, non-English speakers, Black and Global Majority residents, people with long-term health conditions, migrants & refugees, and low income groups.

“More youth centres for children so they can socialise better and gain confidence. They can also build on communities in their area too.”

“Connect with all housing groups where elderly locals need help.”

“Provide personal opportunities for those who are bed bound or unable to travel to be visited weekly by volunteers in their home, to enable them to feel less isolated, and part of the community.”

Engagement

Respondents suggested engagement with community groups, faith groups & places of worship, outreach & increased community engagement, digital resources & digital exclusion, and the need for cultural sensitivity.

“work together with community facilities like the faith based community areas like Islamic centres, children centres, community centres - all should work together to promote better interactions in the area.”

“There are communities with varied understanding of what is mental health and well being. So differences can occur but community forums and meetings can bridge the differences.”

“continue work to invest in community navigators in each neighbourhood and better advertise this offer to people in the borough.”

Health services & mental health services

Respondents suggested social connection actions relating to wider NHS & GP services, greater availability of mental health services, therapies and counselling, collaboration between health centres, NHS practices & local organisations to support communities, substance misuse support, and access to home carers.

“Joint meetings with local health centres, organisations and related departments of the NHS and council on certain issues and topics.”

“more availability of at home carers - due to covid lockdown not as frequently available.”

“LB Camden have supported Women & Health for over 30 years. They provide subsidised hands-on and talking therapies to vulnerable members of the community (primarily women), those with mental health issues, and take self referrals. We know such services are expensive, so Hackney could look at its

existing facilities to see whether a commercial offer could subsidise benefits for poorer members of the community.”

Communication

Respondents suggested more advertising and sharing of information.

“Providing newsletter via post re events in the area so people can go.”

“Easier access to community groups and more advertising of them.”

“Information on patient's rights should be available in their own language.”

Education

Respondents suggested more education and outreach on health inequalities, children & young people's education, and wider information about mental health.

“social connections can lead to advise and help on education and employment and empowerment. As marmot review, fair society is healthier society. The local young people should be able to find good advise and guidance for employment, education and healthcare when they want where they want it easily.” [sic]

“There should be an effort to educate and have access to help readily”

“A better understanding of Travellers offering cultural awareness training and training on racism.”

Partnerships

Respondents suggested partnerships with Hackney Council (and Council based actions), senior health teams, public safety, and national government policy-based actions.⁴

“Have face to face interaction with council employees; having to deal with computer websites council issues is extremely stressful and creates mental health issues.”

“improve local safety measures for example street lighting & reintroduce estate community workers. reopen more community centres & reach out to local communities. have free workshops & activities available to local communities

⁴ Please note, respondents did not go into detail regarding “senior health teams.”

have Safe Areas in the borough - for example, a lot of people are scared of dogs - why not have a park or area in parks that is dog free? We can also have Estate Amnesty Boxes working to reduce crime & violence in local areas."

Housing

Respondents suggested actions related to housing, housing conditions & affordable housing.

"Similar to Priority 1, affordable, good-quality and safe housing is essential in meeting support for social connection (e.g the Council's Sustainable Communities Strategy to 2028 recognises housing as key - 'Residents have access to decent, stable and genuinely affordable housing that meets their needs as these change through their lives')."

"Working to reduce child poverty. Providing easy access to information and support for healthy diet [sic], exercise and better management of long term illnesses like chronic heart, lung and kidney disease, hypertension and type 2 diabetes. dealing with poor housing conditions like overcrowding and damp and condensation. Accessing medical care reasonably quickly as and when needed."

Strategy actions & reference

Respondents offered further comments and suggestions for the strategy.

"There doesn't seem to be any interventions targeting the elderly or immigrants who might be most at risk of feeling isolated."

"the actions that this strategy suggest are all very good ideas. Those goals can take us a long way!" [sic]

Employment

Respondents suggested actions related to employability and skills.

"Education employment and housing."

"bring back Employment One Stop Shops again to the borough & bring back employers instead of just building property -that would help people get into jobs..."

Financial support

Three respondents suggested actions related to debt and financial advice, cost of living and economic inequalities.

“get noticeboards up again advertising whats on where in local areas. Have a local community centre or base in each area of the borough where people can walk in & access the information they need or get signposted to the right places. If places like these open, then services like I don't know, maybe Debt Advice or Fuel Poverty can go round them all & people can access without all the red tape & go here, go there. So many people are frustrated when they ring us, we get the brunt of their annoyance whatever it may be & so much of that could be diverted via other routes. We leave work drained every day. [sic]

“Lower living costs.”

Food support

Two respondents suggested improving access to food and food banks.

“More support for food banks. Open more food banks and get supermarkets and Amazon to provide for them”

Who should the Health and Wellbeing Board work with on this action/these actions? (Base 222)

Responses were analysed into the following key themes.

Theme	Meaning	Count
COMMUNITY ORGANISATIONS, VOLUNTARY SECTOR & CHARITIES	Suggested working with community organisations and voluntary sector organisations including mental health & health charities and organisations, faith groups and places of worship, hospice care and food support.	86
THE COUNCIL	The Council and councillors.	31
EDUCATION	Schools, colleges and universities	27
ENGAGEMENT WITH PRIORITY GROUPS	Suggested priority groups to focus on through social connection actions including vulnerable people, seldom heard groups, people with long-term health conditions, older people, children, parents & families, carers, the traveller community, young people, and substance misuse and recovery support.	26
SOCIAL OUTREACH, ACTIVITIES & ORGANISATIONS	Including exercise groups and leisure centres, travel & tourism organisations, outreach via organisations & businesses, arts organisations, and libraries.	20
MENTAL HEALTH, HEALTH SERVICES & SOCIAL CARE	Mental health and health services and social workers.	19
HOUSING	Housing, resident groups, shelter charities and support for homeless people.	14
EMPLOYERS & EMPLOYMENT	Local employers and job opportunities, the job centre.	13
NATIONAL GOVERNMENT	Government policy and MPs.	10
LEGAL SECTOR, COURTS & POLICE	Police, legal, justice, prison, and probation services.	4
OTHER	Advertising	1

Community organisations, voluntary sector & charities

Respondents suggested engaging with priority groups through social connection actions including mental health & health charities and organisations, faith groups and places of worship, hospice care and food support organisations to achieve actions under the social connection priority.

“community groups, mental health organisations, leisure centres, physical activity providers and charities.”

“community navigators, neighbourhood teams, communities, schools.”

“GP surgeries, mental health and well being charities as well as with wellbeing officers in colleges and schools.”

The Council

Respondents suggested working with the Council and councillors.

“Council & partner up with local community projects that can visit community centres in our local areas.”

“Council.”

“Council, youth clubs, charities.”

Education

Respondents suggested working with schools, colleges and universities.

“Schools, colleges.”

“Schools/universities, GPs and community centres.”

“Education authorities and school governors.”

Engagement with priority groups

Respondents suggested priority groups to focus on and work with through social connection actions including vulnerable people, marginalised and under-represented communities, Global Majority residents, residents in temporary accommodation, people with long-term health conditions, older people, children, parents & families, carers, the traveller community, young people, and those experiencing substance misuse and recovery support.⁵

“Target sections of the community ie. those in temporary accommodation. Go and see people in temporary accommodation.”

“parents and children and families to see what they would like to happen/ to do.”

⁵ Note, the terms “vulnerable people” and “marginalised and under-represented communities” are phrased as written in respondent comments.

“Gather feedback and implement immediate change through the help of one-to-one conversations or phone calls with local residents, service users and local activists. Especially disabled residents and people with long term chronic health issues.”

Social outreach, activities & organisations

Respondents suggested social outreach & activities, including exercise groups and leisure centres, outreach via organisations & businesses, arts organisations, and libraries.

“Sports clubs, theatres, schools and after schools clubs, drug /drink addiction organisations, community safety teams, community groups, restaurants, cinemas.”

“Organisations that do this well are for example The Outrunners, where more well off adults, typically in good city jobs, can open opportunities for youngster in fields which they would never have previously contemplated or open doors for them. We need to embrace door opening, not forever bang the drum that old and new hackney shouldn't mix.”

Mental health, health services & social care

Respondents suggested working with mental health and health services and social workers to increase social connections.

“Local NHS providers, local communities, NGOs, HealthWatch & places like that.”

“NHS”

Housing

Respondents suggested working with housing teams, resident groups, shelter charities and support for homeless people.

“Perhaps Housing Services at Hackney Council, Registered Providers operating in Hackney and Private Sector housing.”

“adult social care, resident participation team, voluntary sector.”

Employers & employment

Respondents suggested working with local employers to provide job opportunities, and the job centre.

“Youth centres, Employers, Teachers, Gps and pharmacists and Job centres.”

“MP’s housing sector and the employment sector”

National government

Respondents stated that the Health and Wellbeing board should work with the government and members of parliament.

“Government.”

“Government. Colleges. Community research.”

Legal sector, courts & police

Respondents suggested working with the police, legal, justice, prison, and probation services to increase social connections.

“Voluntary Sector including relationship support providers. Family Courts in the pre-court space.”

“Police, Health services, turning point.”

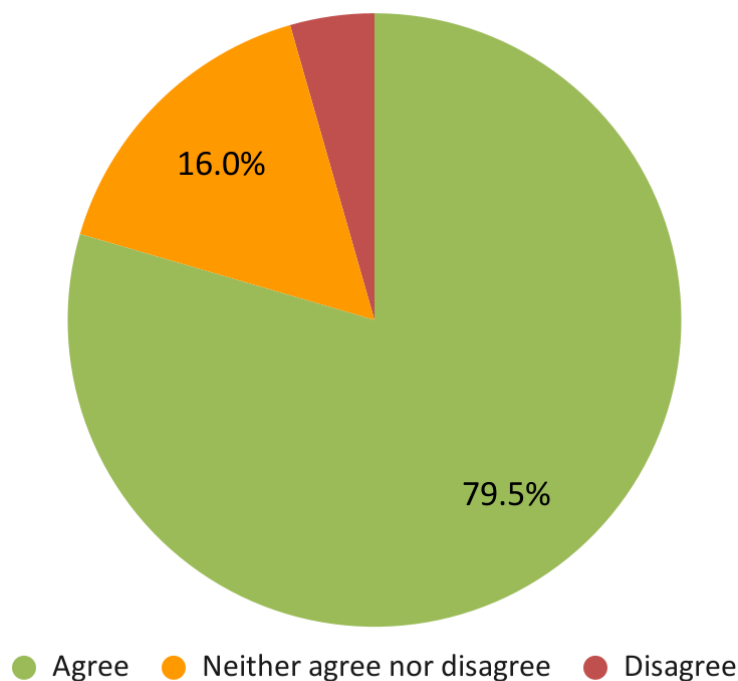
Other

One respondent suggested working with advertising companies.

“The council, advertising companies, community groups.”

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Supporting Greater Financial Security)

In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)? (Base 293)

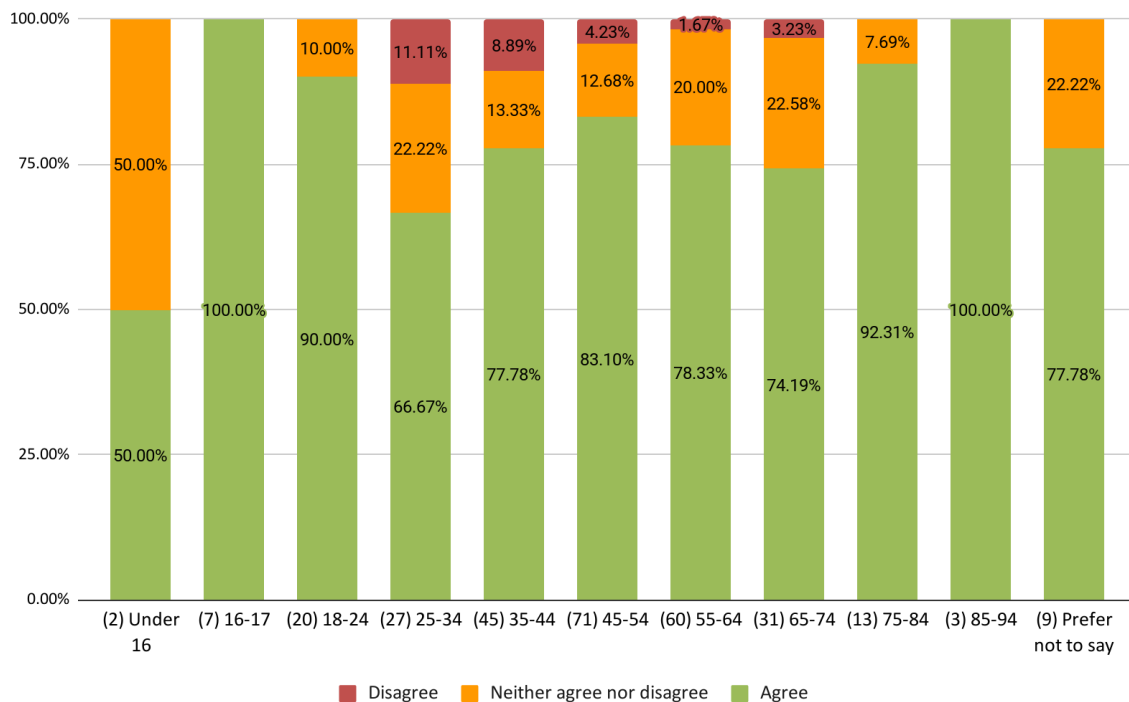


The chart above shows responses to the question “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?”

The majority of respondents, just under 80% (233), stated they agreed with the suggested actions for Priority 3 (Supporting Greater Financial Security).

Just over 4% (13) of respondents stated that they disagreed with the suggested actions for Priority 3. 16% (47) stated that they neither agreed nor disagreed.

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by Age Group (Base 273)

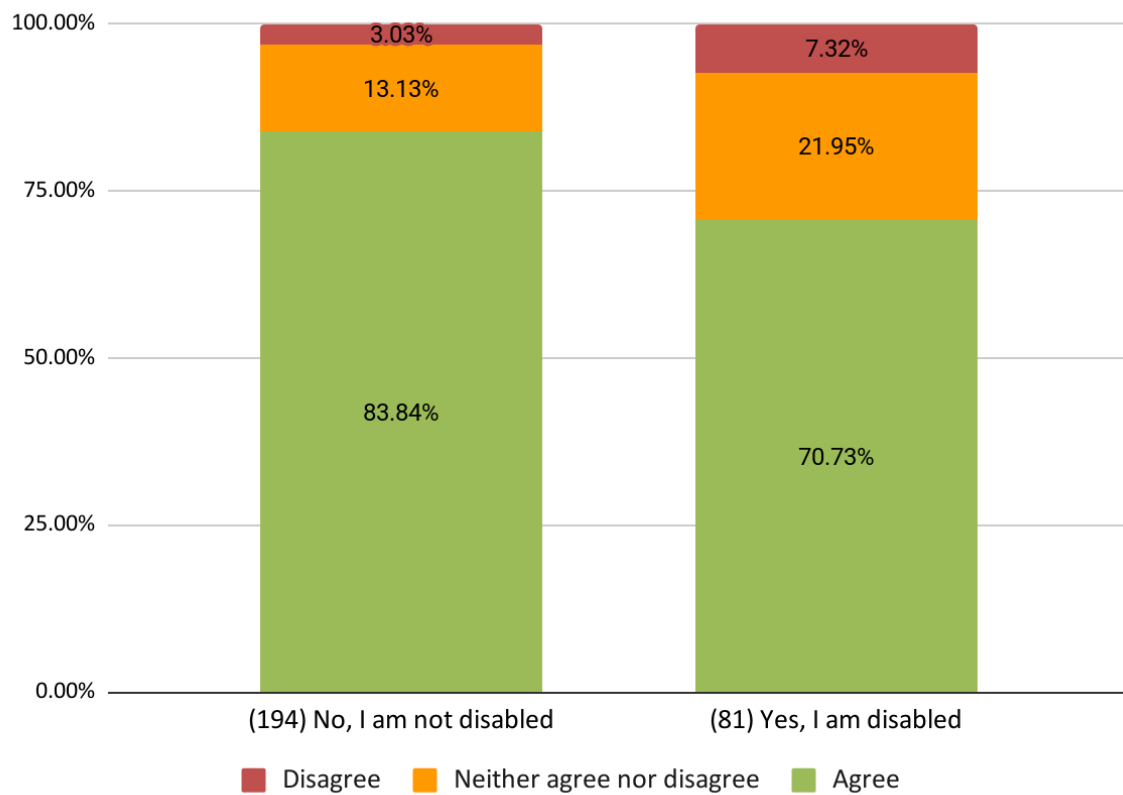


The chart above shows responses to the question “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by age group.

The majority of respondents in all age groups agreed with the suggested actions for priority 3.

The age category with the highest number of respondents who disagreed with priority 3 actions is 35-44 (4).

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by Disability (Base 268)

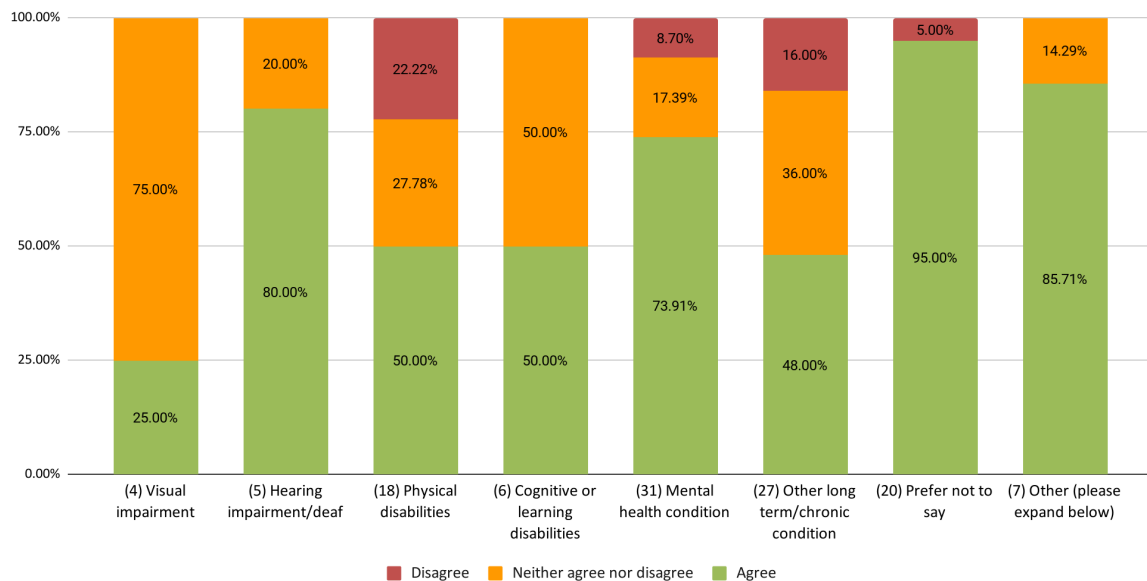


The chart above shows responses to the question “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by disability.

The majority of respondents with and without a disability agreed with the priority 3 actions.

A higher number of respondents with a disability disagreed with the suggested actions (6)

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by Nature of Disability (Base 108)



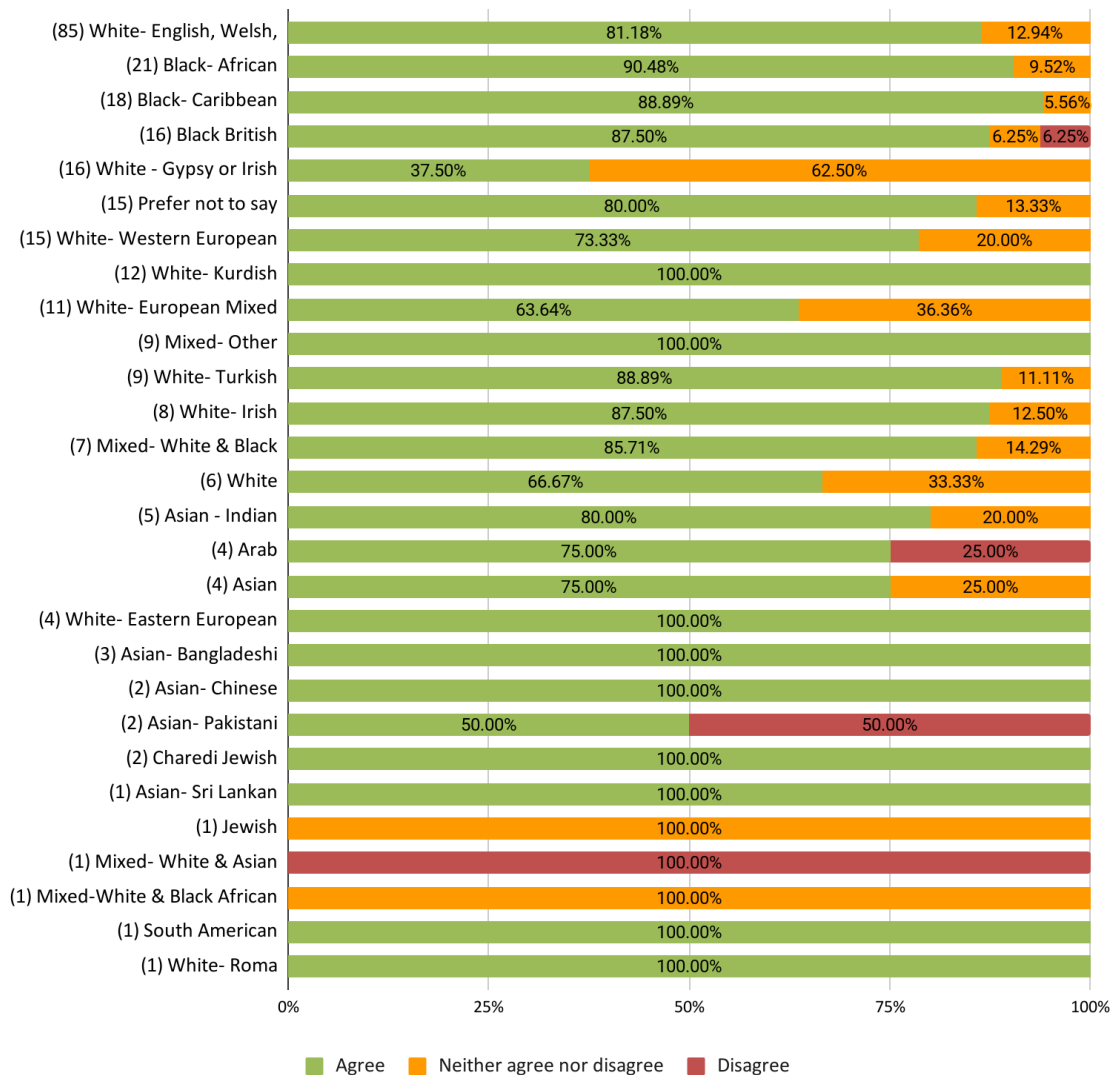
The chart above shows responses to the question “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by nature of disability.

With the exception of visual impairment, the highest percentage of respondents in all other disability categories agreed with the suggested actions for priority 3.

The majority of respondents with a visual impairment neither agreed nor disagreed with the priority 3 actions (3).

The highest number of respondents who agreed with the priority 3 actions preferred not to say the nature of their disability (19).

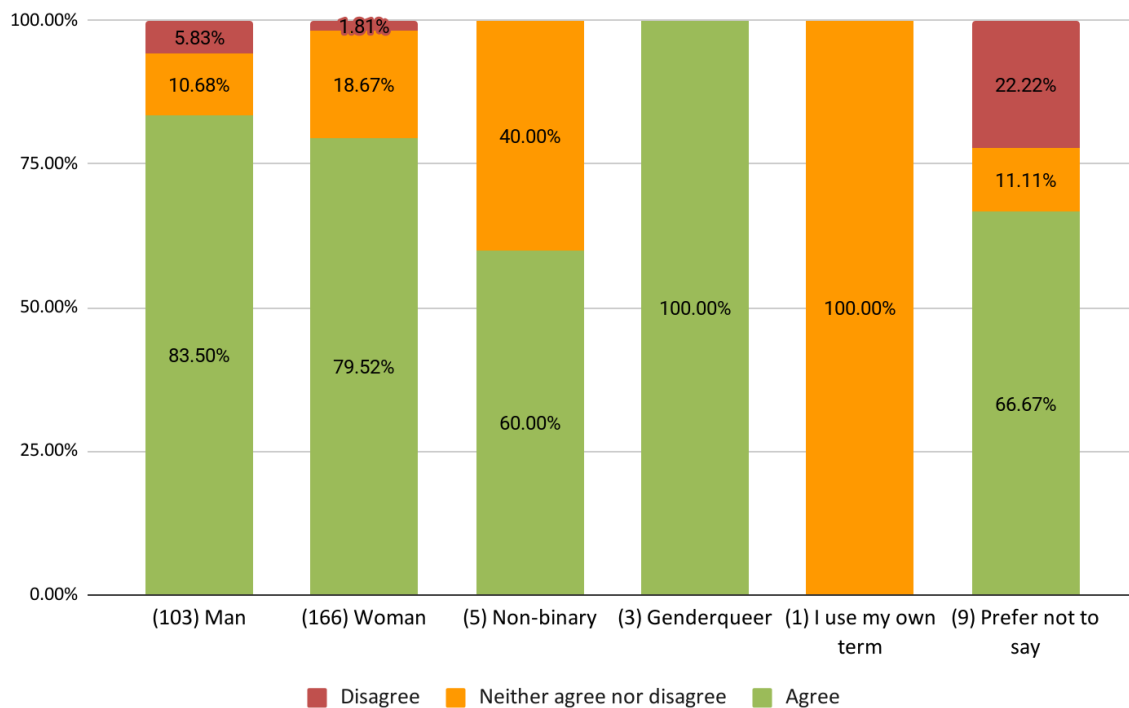
Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by Ethnicity (Base 264)



The chart above shows responses to the question “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by ethnicity.

Other than White - Gypsy or Irish Traveller (count 16), Asian - Pakistani (2), Jewish (1), Mixed - White & Asian (1) and Mixed - White & Black African (1), the majority of respondents in all other ethnic groups agreed with the suggested priority 3 actions.

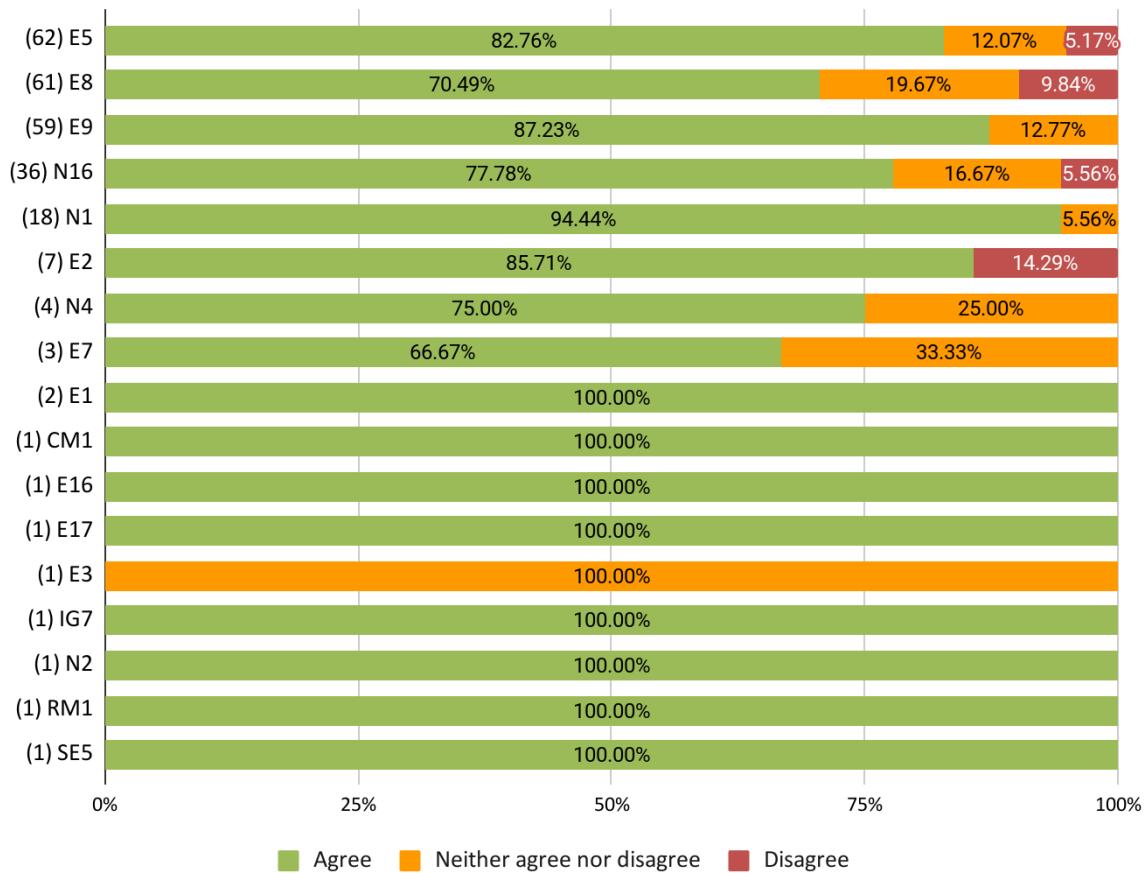
Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by Gender (Base 271)



The chart above shows responses to the question “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by gender.

With the exception of “I use my own term,” the majority of all other gender categories agreed with the suggested actions for priority 3.

Cross-analysis: “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by Postcode (Base 244)



The chart above shows the responses to “To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?” by postcode.

Other than E3, the majority of respondents for all postcodes agreed with the suggested actions for priority 2.

E8 accounted for the postcode with the highest number of respondents and the highest number of respondents who disagreed with the suggested priority 2 actions (6).

Please explain your response above:

Respondents were asked to explain why they agree or disagree with the strategy and their responses were analysed into the following key themes. Please note, responses could be coded into multiple themes.

Theme	Meaning	Count
SUGGESTIONS FOR ADDITIONAL ACTIONS & CONTENT	Including access to information & advice, employment, cost of living, housing, Hackney Council actions and access to financial support.	98
IMPACT OF FINANCIAL INSECURITY	Impact of financial insecurity in Hackney, lived-experience accounts and comments relating to housing & food insecurity.	77
STRATEGY QUERIES & CRITICISM	Queries, criticism and further comments about the strategy & actions	36
SUPPORTS STRATEGY ACTIONS	Support for the focus on financial security and positive impact of financial security.	31
OVERLAP OF BENEFITS	Overlap of financial security and other factors and the interconnection of the three priorities.	18
PRIORITY GROUPS	Including children & young people, vulnerable people & carers, ethnically diverse groups & actions to against racism & discrimination, and migrants & refugees.	17

Suggestions for additional actions & content

Respondents suggested additional actions & content, including access to information & advice, employment, cost of living, housing, Hackney Council actions and access to financial support.

“Education both for young people and life long learning seems a key to enabling people to fulfil their potential and get a decent standard of living. Good quality affordable housing within the community so people can build and maintain support networks is important and will need huge financial input at a national level which is currently not happening.”

“More classes to give people opportunities in work training so they can do a job they will enjoy and make the mental health of that individual improve.”

“housing and the cost of living is a huge priority here, Jobs are poorly paid as are benefits. People simply do not have enough to live on anymore. Rising fuel costs just add to the existing stress.”

Impact of financial insecurity

Respondents commented on the impact of financial insecurity in Hackney, lived-experience accounts and comments relating to housing & food insecurity.

"Lack of money and insecurity impacts on all areas of life and limits opportunities - this causes at best a lack of confidence but also depression and other mental health issues and physical problems."

"I work full time and receive no benefits. Each month I have less than £50 disposable income left after bills. Rent & council tax alone take almost 2/3 of my wages. I have social housing but it costs £1000 per month. I have nothing left over so its [sic] very demoralising to work so hard but not even be able to afford a meal out at the end of the month."

"Life is very expensive now. We are a 4 generation family & each generation is going through financial hardships yet we all work very hard. If what you bring in doesnt [sic] cover what's going out it is never going to end well for anyone. I thank god for the food banks, and even a children's clothing bank we've had to use a few times now. They are a blessing to our community people like that."

Strategy queries & criticisms

Respondents raised queries, criticism and made further comments about the strategy & actions.

"I can't see how any of the actions are going to resolve financial security concerns?"

"It is difficult to say without knowing the detail of your poverty reduction strategy mentioned, and more detail on the 'prevention' strategy..."

"The economy needs systemic change to ensure financial needs are met. Measures like UBI would be a start but the whole system is rigged in favour of people who already have resources."⁶

Supports strategy actions

Respondents stated their support for the focus on financial security and the positive impact of financial security.

"This is the most important one in my opinion. When you don't have enough to pay the rent, buy food etcetera you can't concentrate in being [sic] healthy or

⁶ UBI refers to universal basic income.

learning or anything else. It is unfair and unnecessary to keep people in poverty in a rich country like the uk."

"I strongly agree because one of the key factors contributing towards bad mental health is poverty."

"To have financial stability is key to a secure homelife and well being."

Overlap of priorities

Respondents commented on the overlap of financial security and other factors and the interconnection of the three priorities.

"Financial burdens are often amongst the principal causes for mental health issues such as depression. I can't stress this enough, we must change our society to one that offers equal opportunities to all and that relieve financial pressure from people who live below the poverty line."

"All the priorities are interrelated and each one can trigger the other."

"Lack of money and insecurity impacts on all areas of life and limits opportunities - this causes at best a lack of confidence but also depression and other mental health issues and physical problems."

Priority groups

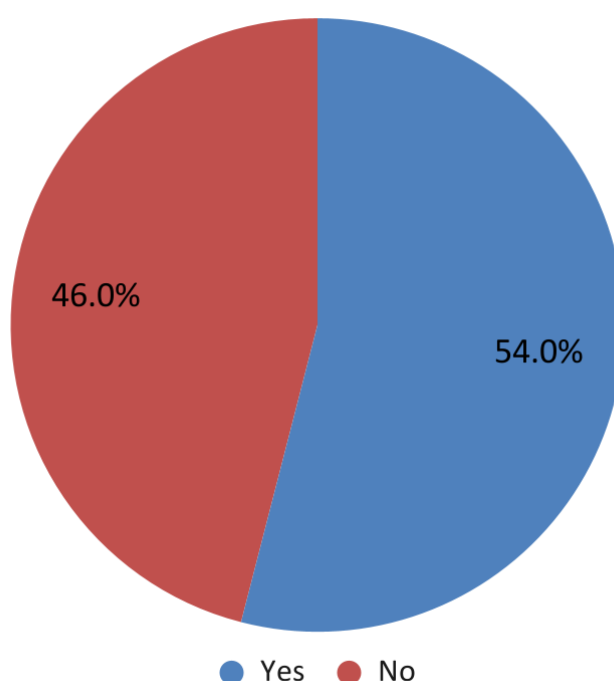
Respondents commented on priority groups, including children & young people, vulnerable people & carers, Black and Global Majority residents, and migrants & refugees.

"the inclusion of children is good as low incomes can put stress on the whole family - not just adults - impacts everything significantly in a negative way this effects young peoples mental health and makes school a struggle." [sic]

"Financial insecurity is the most significant factor impacting health inequalities. Race is also a huge factor, however this is not a separate issue. Structural and institutional racism is the root cause for higher rates of financial insecurity in POC and this goes back generations. Much more anti racism work has to be done because the ripple effect from that will in time lead to much better health outcomes and fewer health inequalities."

"Lack of resources and financial difficulties negatively effects of Refugee and migrant organisations to plan and organise activities to improve living standards and knowledge of their users especially during last 2 years of pandemic."

Can you suggest other actions that we should include in our Strategy to improve financial security that will reduce health inequalities? (Base 287)



The chart above shows responses to the question “Can you suggest other actions that we should include in our Strategy to improve financial security that will reduce health inequalities?”

Just over half of respondents, 54% (155), stated that they could suggest other actions to include in the strategy.

46% of respondents (132) stated that they could not suggest other actions.

If yes, please specify:

Theme	Meaning	Count
EMPLOYMENT	More employment & training opportunities, greater pay, employment support for young people.	55
FINANCIAL SUPPORT	Including comments related to high cost of living, living wage, greater access to financial support, universal credit, debt support, income disparity & gentrification in Hackney and fuel vouchers.	36
PARTNERSHIPS	Partnerships & collaboration with organisations, including Hackney Council, the government, community organisations and anchor institutions.	28

COMMUNICATION & INFORMATION	More communication, accessible advice and information for residents.	22
PRIORITY GROUPS	Suggested priority groups to focus on through financial security actions.	21
HOUSING	Including social sector housing, private sector housing and rent.	19
FOOD SUPPORT	Access to affordable, healthy food, cooking classes, partnerships with supermarkets.	19
EDUCATION	Financial security and budgeting education.	19
SOCIAL ACTIVITY	Opportunities for free or low-cost exercise classes, accessible community spaces and green spaces.	15
HEALTH SERVICES	Including wider NHS services, GP services, social prescribing and dental care.	5
ADDICTION SERVICES	Support for addiction and substance misuse treatment & prevention.	2

Employment

Respondents suggested more employment & training opportunities, greater pay and employment support for young people.

"I think a programme to increase the number of businesses paying London Living Wage would be good here. I think a programme to increase the number of paid sessional work positions instead of relying on volunteers to deliver important would also be good."

"More and inclusive opportunities for jobs. Training and apprenticeships for older people and more different courses."

"pathways to work, easier access to work, free training, improve adult education."

Financial support

Respondents discussed greater financial support, including comments related to high cost of living, living wage, greater access to financial support, universal credit, debt support, income disparity & gentrification in Hackney and fuel vouchers.

"drop in centres/events to help with careers and financial advice and problems."

"pay people better wages & reduce prices a bit again because life is too expensive now for everyone young & old."

"A living wage for everybody."

Partnerships

Respondents suggested partnerships & collaboration with organisations, including Hackney Council, the government, community organisations and local anchor institutions.

"More grants, more tax reduction for the poor and more job opportunities."

"There are limitations as to what the Council can do but the proposed actions are supported. However, as the solutions require a lot of collaborative working, the Council's voice can help to lobby for action by other organisations and stakeholders."

"This seems like the most thought-through of the 3 sections but it doesn't mention 2 drivers of financial insecurity, housing & affordable healthy food, which the Council does have some ability to impact. (eg through planning policy; housing provision; initiatives like Ridley Road Market support)."

Communication & information

Respondents asked for more communication, accessible advice and information for residents.

"The help available need to be more visible and easy to access."

"Information on where to go to for help"

"advertise foodbanks better. better employment support."

Priority groups

Suggested priority groups to focus on through financial security actions including children & young people, parents & families, Black and Global Majority residents, non-English speakers, the elderly and disabled people.

"Providing better and targeted advice to vulnerable and disadvantaged families and groups. Sign posting to agencies that can help with improving access to health care."

"Children should be provided with courses which will give them the skills they need to earn, but schools also need to provide practical skills such as Cooking from scratch to provide healthier meals, and a better understanding of nutrition. sewing, so clothes could be repaired, reducing spending. introduction to courses

like Electrician, Plummer, Mechanic so that they have a goal to get fully trained and earn for themselves."

"education of discrimination in the workplace - toxic work environments, institutional racism - people shouldn't have to settle just to get food on the table."

Housing

Respondents suggested actions related to housing, including social sector housing, private sector housing and rent.

"Affordable (as well as good quality and safe) housing is crucial to financial security for residents in Hackney. Although there is reference to the Hackney Housing Strategy within this draft strategy, Housing is one of the key determinants of health and well-being and perhaps needs to be considered more in the actions to reduce health inequalities."

"create more jobs in our borough for us! create a fair rent scheme & build more social housing - private sector has taken over."

"Expansion of the council house building programme. The regulation of rogue landlords."

Food support

Access to affordable, healthy food, cooking classes, partnerships with supermarkets.

"Involve the large supermarkets to donate food vouchers."

"increase access to affordable good quality healthy food. reach out to those who are embarrassed to seek food bank help but struggle to afford food. increase the number of schools that offer a 'breakfast club' which does not charge; or who offer food with the afterschool homework club or activities."

"cooking classes to learn how to cook on a budget a healthy meal for my family collection points for food at supermarkets for things they can't sell any more because of sell by date."

Education

Respondents suggested education on financial security and budgeting and working with schools.

“Educating people (starting in school) about financial responsibility so learn practical things like how to budget and what the APR on a credit card actually means in the long term. Free support groups, exercise classes, cooking classes (for kids as well as adults), and events promoting being more active. Educate businesses that when hiring young people the best person for a job may not be the one with highest grades so to interview more than just going by what’s on a CV. Growing up with financial insecurity can have a huge negative impact on academic success.”

“Educate the youth from early on about the expenses and how to manage money.”

Social activity

Respondents suggested opportunities for free or low-cost exercise classes, accessible community spaces and green spaces.

“Grants for exercise and well being facilitators to run classes at a sliding scale, discounted or free room bookings for community-run activities.”

“low cost options for engagement, physical activity etc, maintenance of green spaces.”

Health services

Respondents suggested health care actions, including wider NHS services, GP services, social prescribing and dental care.

“Providing better and targeted advice to vulnerable and disadvantaged families and groups. Sign posting to agencies that can help with improving access to health care.”

“Some focus on dental health - only people on some benefits get free dental care, so a lot of people are deterred from visiting dentists.”

Addiction services

Two respondents suggested support for addiction and substance misuse treatment & prevention.

“Increase the capacity for drug treatment.”

Who should the Health and Wellbeing Board work with on this action/these actions?

Theme	Meaning	Count
COMMUNITY ORGANISATIONS, VOLUNTARY SECTOR & CHARITIES	Including faith groups and places of worship, food support, environmental organisations, neighbourhood groups, and substance misuse and addiction support.	57
THE COUNCIL	The Council and councillors, in addition to advice from neighbouring local authorities.	43
EDUCATION	Schools, colleges and universities	33
GOVERNMENT & POLICY	Government policy and MPs.	28
MENTAL HEALTH, HEALTH SERVICES & SOCIAL CARE	Mental health services & organisations, health services & organisations and social workers.	27
EMPLOYERS & EMPLOYMENT	Employment, employers and the Job Centre.	24
FINANCIAL SUPPORT ORGANISATIONS	Including financial institutions, financial support groups, financial advice and debt collectors.	17
ENGAGEMENT WITH PRIORITY GROUPS	Suggested priority groups to engage with through financial security actions including young people, parents & families, vulnerable people, and people with physical disabilities.	14
HOUSING	Social and private housing and resident groups.	12
OTHER	Energy, gas & electricity providers and corporate funding.	6
SOCIAL OUTREACH, ACTIVITIES & ORGANISATIONS	Such as exercise groups and centres, and outreach via local businesses, libraries and leisure centres.	5
POLITICAL ORGANISATIONS & UNIONS	Political parties, organisations and unions.	5
LEGAL ADVICE	Police, legal, justice, prison, and probation services.	1

Community organisations, voluntary sector & charities

Respondents suggested working with community and voluntary organisations, in addition to faith groups and places of worship, environmental organisations and neighbourhood groups to progress actions related to supporting greater financial security.

“Voluntary sector.”

“Trusted community organisations who are already working with the council, such as Shomrim Community Safety Patrol.”

“Local charity, children's centres, community.”

The Council

Respondents suggested working with the Council and councillors, in addition to advice from neighbouring local authorities.

“Hackney Council.”

“Council and community centres”

“Council, housing associations, local community groups”

Education

Respondents suggested working with schools, colleges and universities.

“Schools and colleges and universities”

“Schools, local businesses, after school programs.”

“schools & children's centres; community organisations; health visitors etc”

Government & policy

Respondents suggested actions to influence national government policy and MPs.

“Government.”

“benefits people (DWP), government & businesses.”

“1. The Treasury 2. The Home Office 3. The Department of Business and Employment 4. Local workers”

Mental health, health services & social care

Respondents suggested working with mental health and wider health services & organisations and social workers.

“Care services, NHS, mental health charities”

“Organisations that will support health and well being, to create employment.”

“NHS, youth strategies, local council.”

Employers & employment

Respondents suggested working with employers, facilitating greater employment and the Job Centre.

“The Council and work place opportunities with job centres. Educating work coaches better in job centres to support people more to get work.”

“for younger people and children work with charities that help progression in terms of careers eg arts emergency, linklaters offers trips to young people interested in law”

“businesses, employers etc”

Engagement with priority groups

Respondents suggested priority groups to engage with through financial security actions.

“Local people, including youth and children with mental health issues.”

“Young People especially but this is again relevant to all groups.”

“parents, single parents those of low income.”

Financial support organisations

Respondents suggested working with financial organisations such as financial institutions, financial support groups, financial advice and debt collectors.

“Banks, schools, financial organisations, debt collectors.”

“Banks, the CAB, local businesses.”

“financial organisations who can provide the best ways of teaching children how to manage money. teachers.”

Housing

Respondents suggested working with social and private housing and resident groups.

“Council, housing associations, local community groups”

“Council refer people in continual trouble with rent.”

Other

Respondents suggested working with energy, gas & electricity providers and corporate funding.

“fuel companies like British Gas”

“Council, Energy firms, Communication firms, Computer firms”

Social outreach, activities & organisations

Respondents suggested social outreach activities and organisations such as exercise groups and centres, and outreach via local businesses, libraries and leisure centres.

“Travel agencies to offer discounted travel, benefits agencies to increase benefits, gyms, community centres, schools, secondary school academies that have facilities for parents to join and access.”

“Using underused facilities- sports based, swimming pools, operator venues- start with free initiatives - get great teachers involved to build up seniors paid for by investors.”

Political organisations & unions

Respondents suggested working with political parties, organisations and unions.

“Unions, the VCS, NHS, Council, private enterprise employers like hospitality venues.”

Legal advice

One respondent suggested working with legal advisors.

“Tenants groups, residents, VCS organisations, law centre people/advisors, housing associations.”

How can you/your organisation (if relevant) help us take action on the three priority areas (improving mental health, increasing social connection and supporting greater financial security)?

Theme	Meaning	Count
ENGAGEMENT	Respondents stated that their organisation could engage with residents and stakeholders on the strategy's priorities & actions.	53
SOCIAL ACTIVITIES & ACTIONS	Actions to provide physical activities, wellbeing support and social activities.	28
SPECIALIST RELATED ACTIONS	Respondents offered actions based on their and their organisation's specialism.	22
COMMUNICATION	Communication related actions including social media, advertising, leaflets and offering advice.	9
HACKNEY COUNCIL & COMMUNITY ASSEMBLIES	Actions by Hackney Council teams and departments, councillor actions and community assemblies.	7
FOOD SUPPORT	Suggestions for actions related to food security, food banks and cookery classes.	5
COMMITMENT TO ORGANISATIONAL ACTIONS	Respondents stated that they would make changes to their organisation's internal practices.	3
COMMENTS ON DRAFT STRATEGY, SUGGESTIONS FOR FURTHER ACTIONS & INDIVIDUAL ACTIONS	Respondents made further comments on the strategy, suggested further priority actions, and shared individual actions.	51

Engagement

Respondents stated that their organisation could engage with residents and stakeholders on the strategy's priorities & actions. This included direct engagement with communities, cross-organisational engagement, and priority groups such as older people, the Orthodox Jewish community, children & families and Black and Global Majority residents.

"Our organisation aims to strengthen social connection by educating parents from different backgrounds, ethnicity and neighbourhoods about how they can deal with social issues caused by knife crime and street violence. Through this we have developed relationships and trust with members of the community which enables us to obtain feedback from them and also cascade messages and relevant information that affects them." [sic]

"Foster community connections and mutual aid networks."

“Our organisation can work in partnership with you and other local service providers on all of the three priority areas as we have a good knowledge of working and engaging with the local community particularly the BME, Bangladeshi and South Asian Communities.”

Social activities & actions

Respondents stated that they/their organisation could provide physical activities, wellbeing support and social activities.

“Providing physical and social activities to local community groups, mental health charities and local residents.”

“I run a community fitness group near Dalston and am seeking to expand and develop our activities.”

“The organisation I volunteer at helps people with all three. We offer support, people can see their friends & we provide food & other goods to those in financial crisis.”

Specialist related actions

Respondents offered actions based on their and their organisation's specialism. This included training practitioners, housing, health service actions, teaching, mental health support and supporting volunteers.

“As a national organisation providing relationship support services, as well as training frontline practitioners around parental conflict, we would be very happy to contribute to Hackney’s strategy in whatever way we can, be that in an advisory capacity or through delivering training or interventions.”

“Through spatial planning and housing delivery expertise.”

“Our organisation can support substance misuse impacted mental health and attempt to prevent it in young people by working in schools and with individual support services such as social care YOT and education.”⁷

Communication

Respondents offered support with communication related actions including social media, advertising, leaflets and offering advice.

⁷ YOT refers to Youth Offending Teams.

"We can spread around leaflets and conduct assemblies to share this info with others and make them aware of these situations."

"Community assemblies, interviews, outreach, engagement, via social media etc."

"As a national organisation providing relationship support services, as well as training frontline practitioners around parental conflict, we would be very happy to contribute to Hackney's strategy in whatever way we can, be that in an advisory capacity or through delivering training or interventions."

Hackney Council & community assemblies

Actions by Hackney Council teams and departments and community assemblies.

"form a committee of public members who can discuss all these projects and help to provide solutions."

"While the remit of the Land Water Air Team is not directly related to the 3 priority areas, the links to our work are set out in the accompanying discussions. The co-benefits from the actions are very much associated with our aims of tackling environmental pollution and the health inequalities that arise from exposure to pollution. Therefore, the Land Water Team is keen to support work to engage communities and promote active travel and more pleasant environments. This will have benefits for air quality but also will help to address the three priority areas identified."

"Groups can be set up to ensure the smooth running of the actions and ensure that all communities are reached."

Food support

Respondents suggestions for actions related to food security, food banks and cookery classes.

"this is our key work. We already do foodbank referrals; and give ongoing support;"

"The organisation I volunteer at helps people with all three. We offer support, people can see their friends & we provide food & other goods to those in financial crisis."

"We deliver healthy cookery classes which enhance physical health but also mental health and social connection. We can deliver classes or courses at our venue or in schools/other organisations."

Commitment to organisational actions

Respondents stated that they would make changes to their organisation's internal practices.

"Making sure our work and actions link in with the priorities set out."

"by truly [sic] looking at gaps and interfaces in our work, not being boundaried by our organisations and finances, but asking the people we serve what they want, all people, including those who are hard to reach or have a limited voice, or no voice as in non-verbal."

Comments on draft strategy, suggestions for further actions & individual actions

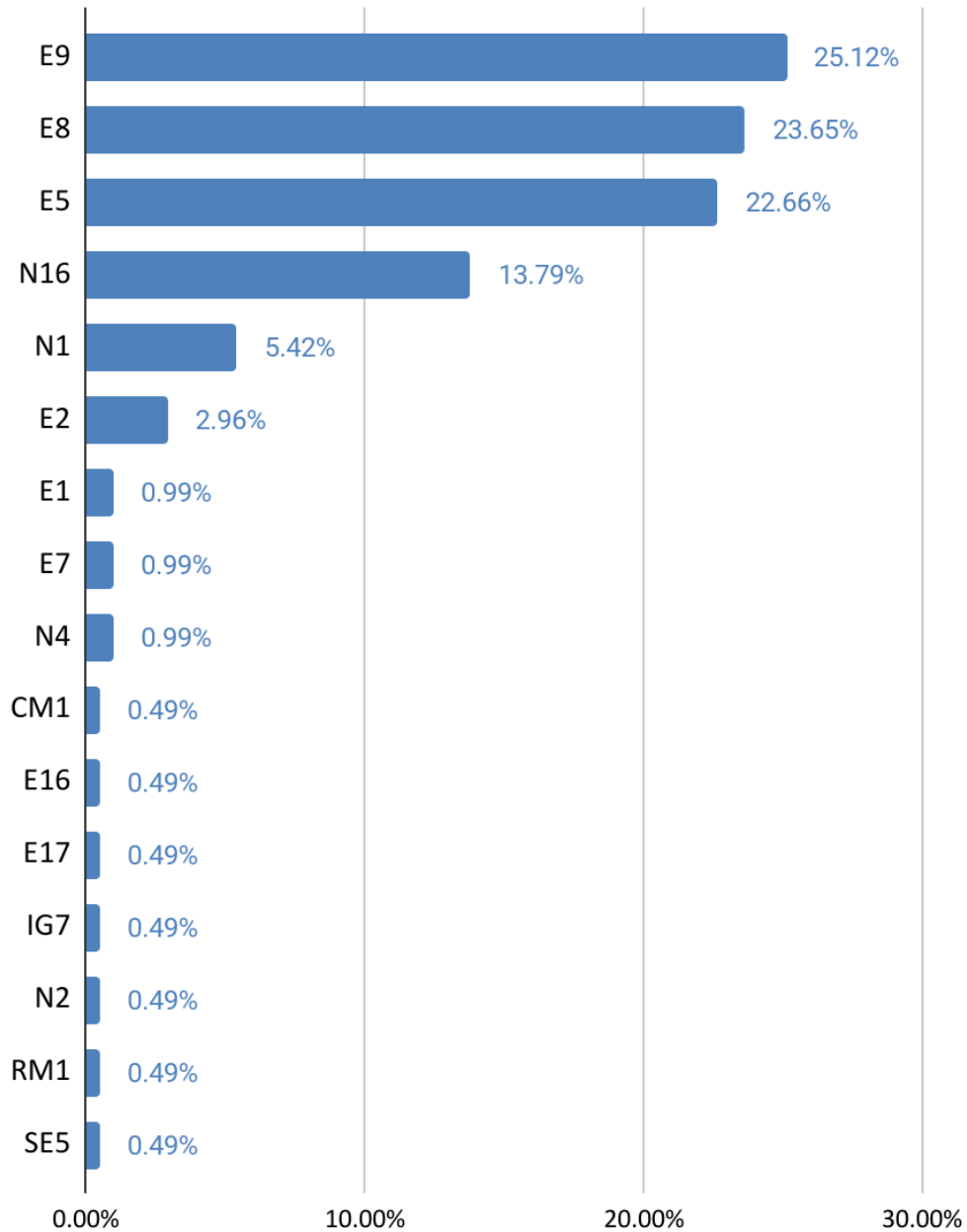
Respondents took the opportunity to make other comments on the strategy, suggested further priority actions, and shared individual actions.

"There is a clear link between the above priorities and affordable, safe and good quality Housing and this should be considered when taking action on them. This could include ensuring that partners and different departments across the Council are aware of services that are available to support residents in these priority areas (including external partners such as registered providers who have a large stock in Hackney). It is also important to ensure that Hackney staff who work with residents to provide support and guidance on areas like rent arrears, repairs etc (areas that can have a direct and indirect effect on the above priorities) are aware of services and the work that is being carried out here."

"Individuals can play a role in the community eg through voluntary work, checking on neighbours etc and advocate/vote for change at a national level that would change priorities and provide funding necessary to reduce inequalities."

About you

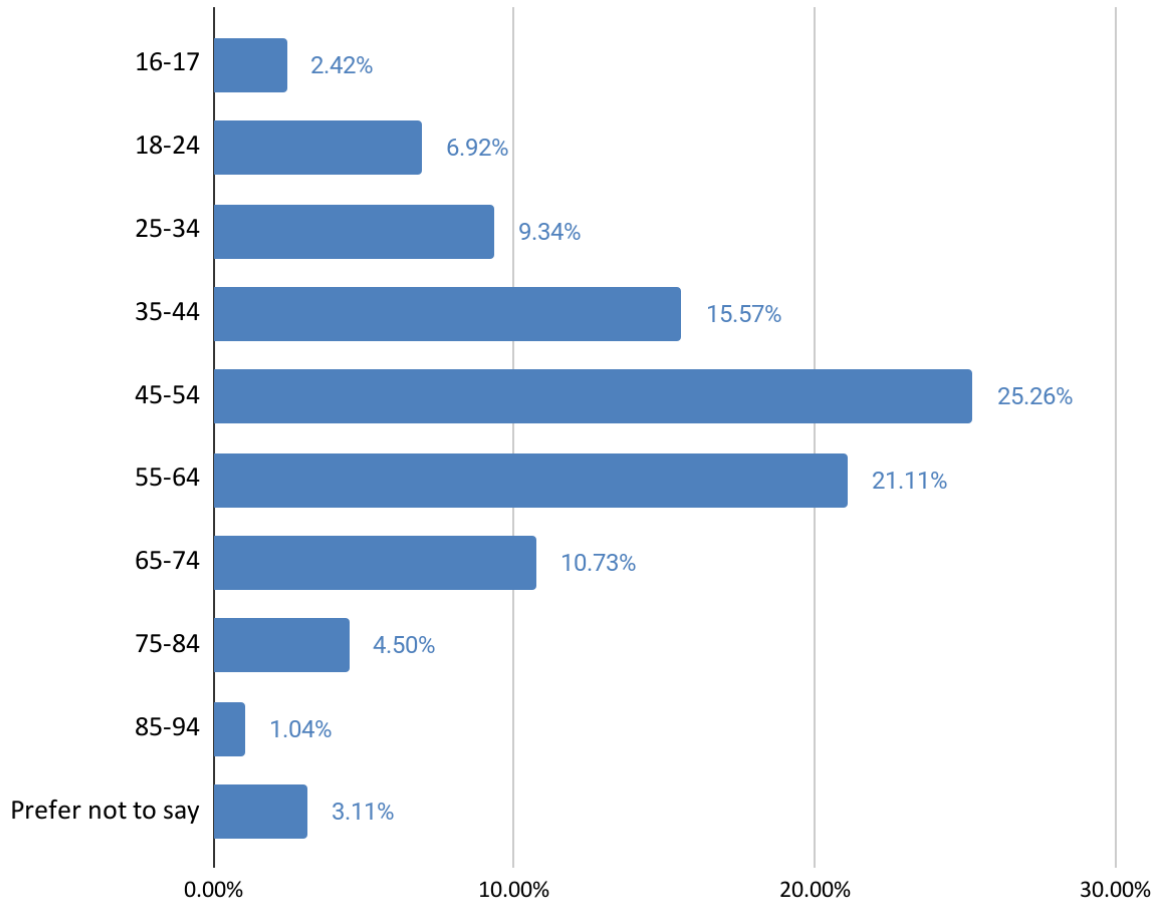
Postcode: Please provide the first 3 numbers/letters. (Base 203)



The highest percentage of respondents stated that they live in E9 (51). This is followed by E8 (48), E5 (46), N16 (28).

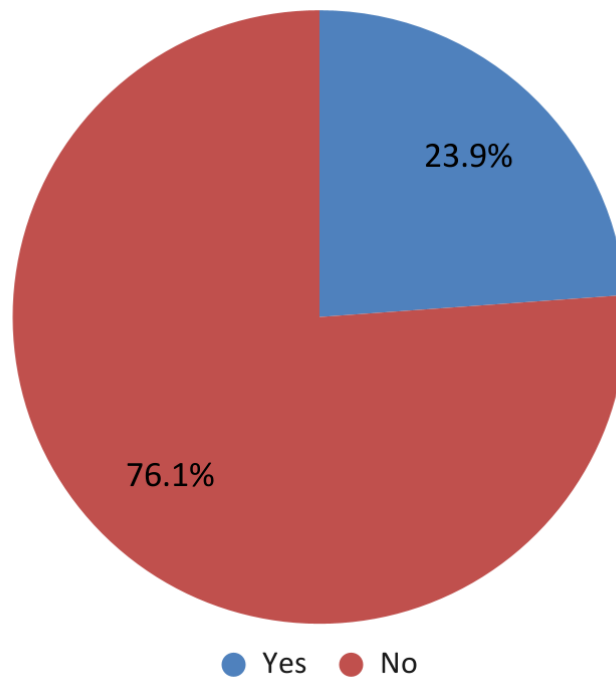
Of the respondents who provided their postcode, 194 were Hackney residents.

Age: What is your age group? (Base 289)



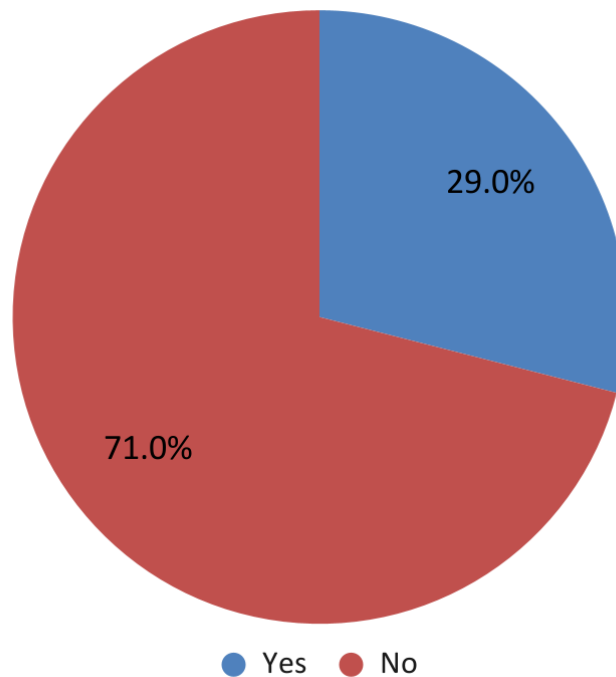
The highest percentage of respondents were aged 45-54 (73). This is followed by 55-64 (61), 35-44 (45), 65-74 (31), 25-34 (27), 18-24 (20), 75-84 (13), “prefer not to say” (9) and 16-17 (7).

Do you regularly provide unpaid support caring for someone? A carer is someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems. (Base 285)



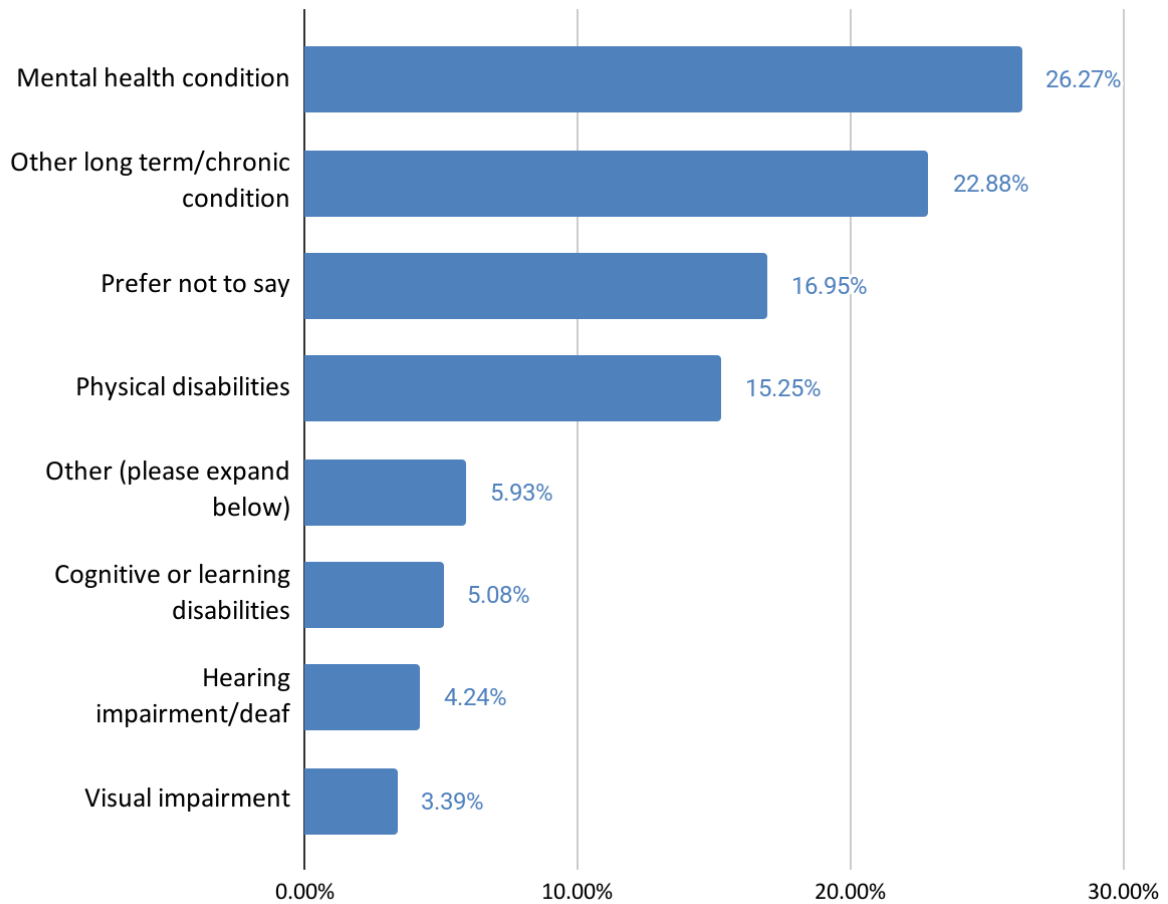
The majority of respondents, just over three-quarters (217) stated that they do not regularly provide unpaid caring support. Just under 24% (68) stated that they do regularly provide unpaid caring support.

Do you consider yourself to be disabled? Under the Equality Act you are disabled if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.
(Base 283)



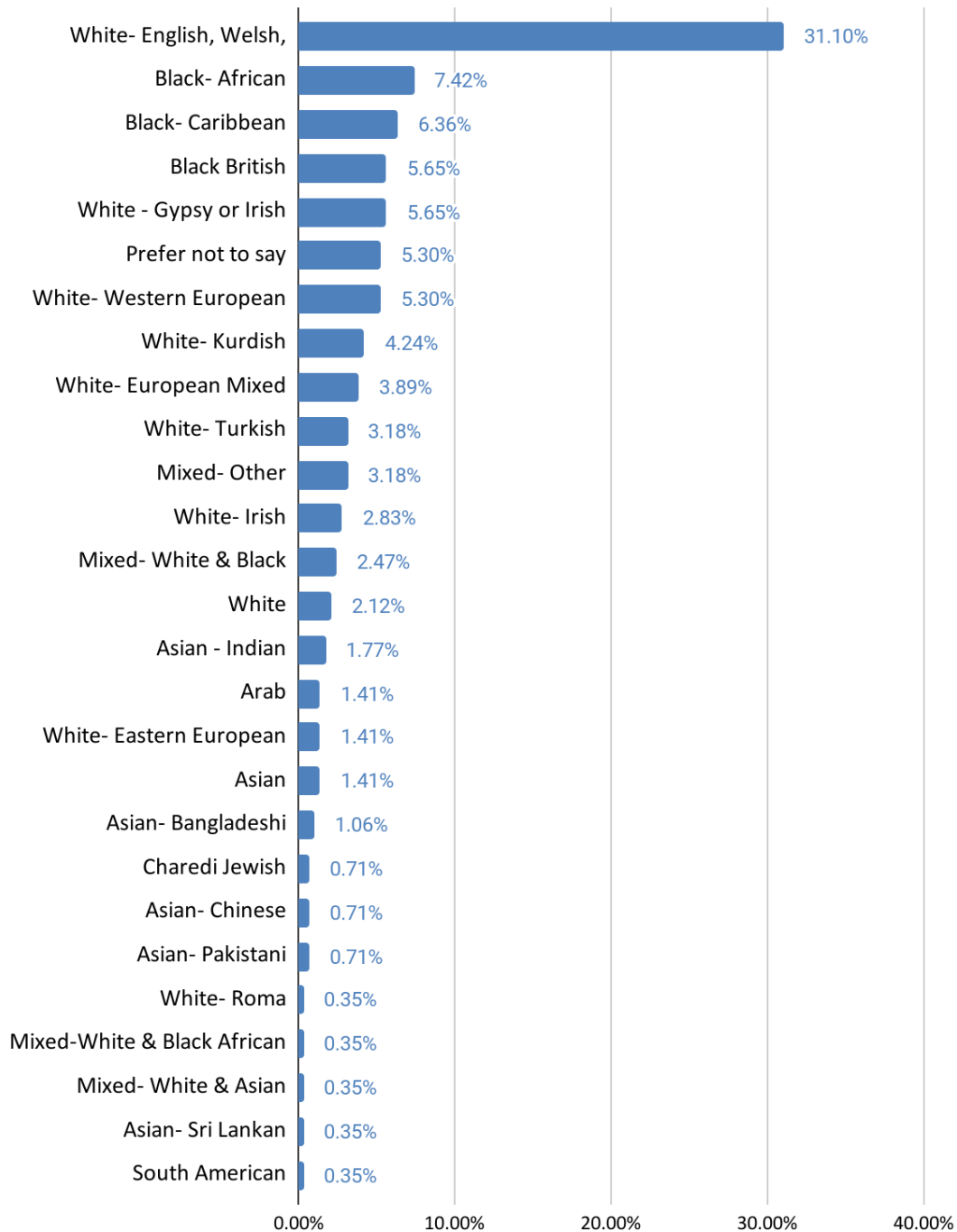
The majority of respondents (201) stated that they do not consider themselves to be disabled. 82 respondents consider themselves to be disabled.

If yes, please indicate the nature of your disability/disabilities: (Base 118)



The highest percentage of respondents who consider themselves to be disabled defined their disability as a mental health condition (31). This is followed by other long term/chronic condition (27), prefer not to say (20), physical disabilities (18), other (7), cognitive or learning disabilities (6), hearing impairment/deaf (5), visual impairment (4).

Ethnicity: Are you... (Base 270)



The highest percentage of respondents stated their ethnicity as White - English, Welsh, Scottish, Northern Irish or British (88). This is followed by Black - African (21), Black Caribbean (18), Black - British (16), White - Gypsy or Irish Traveller (16), Prefer not to say (15), White - Western European (15), White - Kurdish (12), white - European mixed (11), White - Turkish (9), mixed - other (9), white - Irish (8), mixed - white & Black Caribbean (7), White (6), Asian - Indian (5), Arab (4), White - Eastern European (4), Asian (4). All other ethnicities had a lower count.

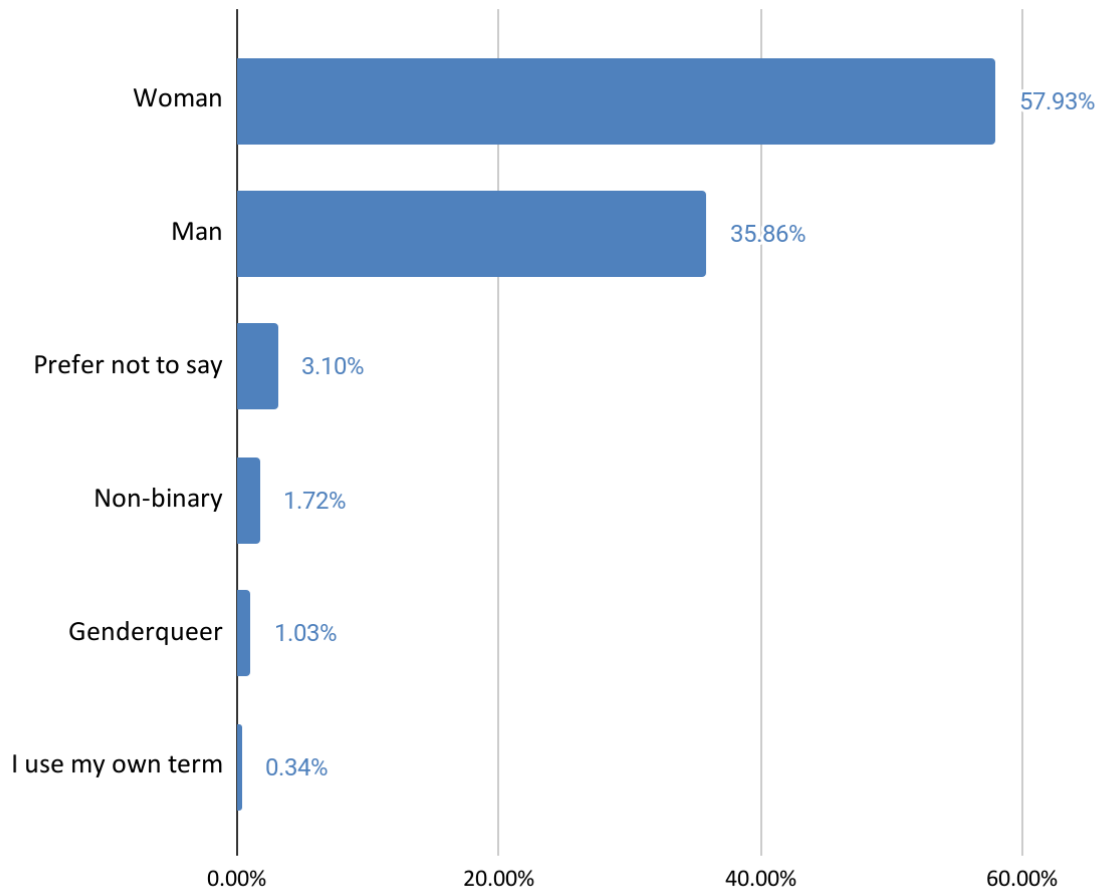
The table below shows the representation of ethnic groups in the Health and Wellbeing consultation in comparison to the demographic representation of the borough. The data for borough demographic representation is taken from the 2011 Census as the 2021 Census data is not available at time of reporting.

Ethnic group	HWB Consultation	Borough representation
White or White British	63.43%	54.70%
Black or Black British	20.52%	23.10%
Mixed Background	6.72%	6.40%
Asian or Asian British	6.34%	10.50%
Other Ethnic Group	2.99%	5.30%

A greater number of white or white British respondents and respondents with a mixed background took part in the survey than the wider representation across the borough.

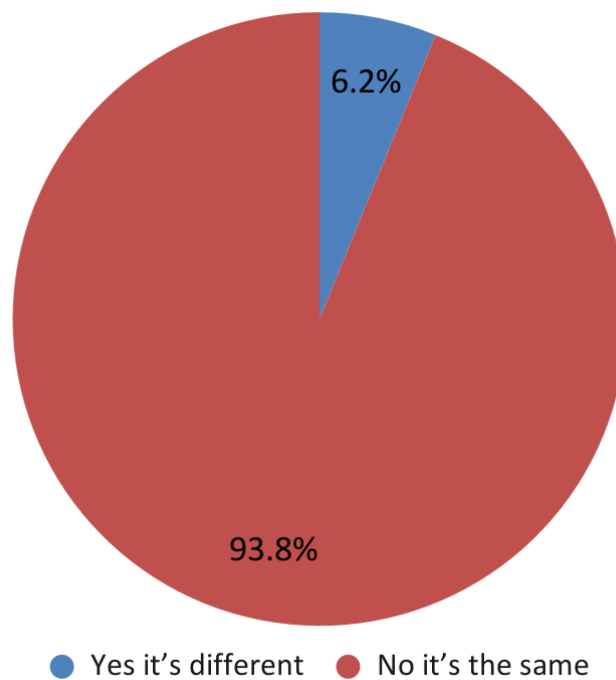
A smaller number of Black or Black British, Asian or Asian British or Other ethnic Group respondents took part in the survey than the wider representation across the borough.

Gender: Are you... (290)



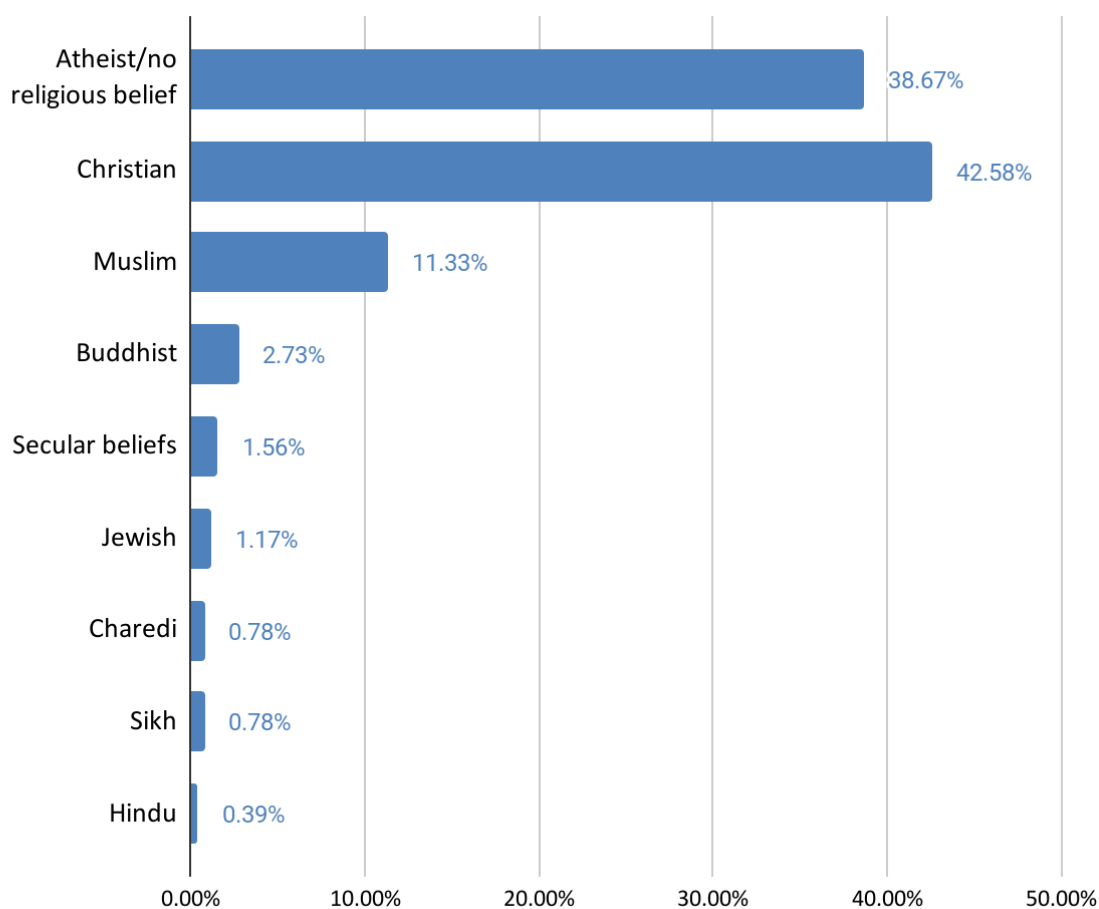
The highest percentage of respondents were women (168). This is followed by men (104), prefer not to say (9), non-binary (5), genderqueer (3) and "I use my own term" (1).

Gender: Is your gender identity different to the sex you were assumed to be at birth? (Base 259)



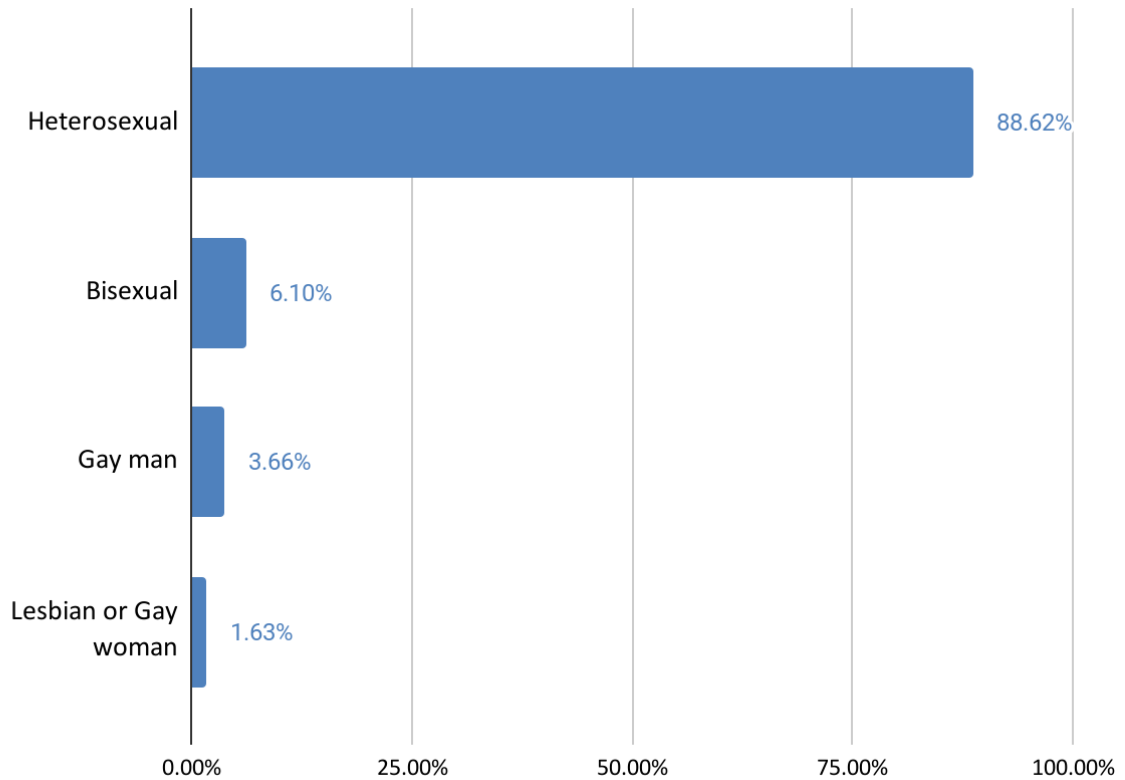
The majority of respondents stated that their gender identity is the same as the sex they were assigned at birth (243).

Religion or belief: Are you or do you have... (Base 256)



The highest percentage of respondents stated that they were Christian (109). This is followed by Atheist/no religious belief (99), Muslim (29), Buddhist (7), secular beliefs (4), Jewish (3), Charedi (2), Sikh (2) and Hindu (1).

Sexual orientation: Are you... (Base 246)



The majority of respondents stated that they were heterosexual (218). This is followed by bisexual (15), gay man (9) and lesbian or gay woman (4).

Easy Read Survey

An easy read version of the survey was developed to ensure the Health and Wellbeing Consultation was accessible to all. Due to the nature of the strategy and consultation survey, the easy read survey broke down the contents of the strategy into specific ideas for each priority and asked respondents if they wanted to say anything more about each idea.

In total 3 respondents completed easy-read surveys.

Summary of responses

All three respondents selected “agree a lot” in response to all but one of the questions. One respondent selected “disagree a bit” to “Financial security idea 3. Get people into jobs. Help people get new skills and jobs that pay good money.”

One respondent gave the same response to each qualitative question: “We need to make sure that people with Learning Disabilities are thought about to.” [sic]

Priority 1 - Mental health:

- **Mental health idea 1.** Help children have a good start. We need to get help for children who worry about things. Do you want to say anything more about the mental health of children?
 - *“We need to create more spaces for children to express themselves creatively outside of academic achievement. This means we need to promote and invest in the arts and artistic spaces for children.”*
- **Mental health idea 2.** Look for ways that everyone can live how they would like to. We know that exercise helps people feel better. We need to give everyone the chance to have some exercise. Do you want to say anything more about how everyone can achieve all they can and live how they would like to?
 - *“It is important to have plenty of exercise to stay healthy. You can visit your local gym.”* [sic]
 - *“There needs to be accessible exercise to all, even those who are less able. There should be subsidised personal trainers. There should be free yoga and meditation classes in community centres for those that are low income, especially for BAME people. There should also be research of “play” and “sport” of other cultures, as someone from East Asian I do not want to play football, what about badminton? Or tai chi?”* [sic]
- **Mental health idea 3.** Get people into jobs. Help people to get and keep jobs. Make it okay to talk about your mental health at work. Do you want to say anything more about ways to get people into jobs?

- *“Signpost people into training according to the type of job they want to do. Or offer volunteering opportunities that is a first step towards finding a job.”*
- *“It is important for people to feel that are living. purpose driven life, and that could be through jobs. But so often we forgo the time to build relationships with our neighbours and community because we spend so much time at work. We should value community volunteering as much as we value the young professionals that come to Hackney and bring in more money through their spending and taxes. No only does valuing relationships and community building encourage”*
- **Mental health idea 4 and 5.** Keep everyone healthy and well and in touch with each other. Help people stay in touch with each other. Do you want to say anything more about ways to keep everyone healthy and well and in touch with each other?
 - *“Having a get together in a park.”*
 - *“We need to encourage people to see each other face to face. There needs to be more spaces to allow for these interactions to occur. We need to revive community centres, encourage people to bring skills to share or swap trades, goods, resources. These things bridge connections, and helps develop multicultural as well as intergenerational relationships. Parks are just not enough.”*
- **Mental health idea 6.** Stop people getting sick. Show people ways to stay mentally well before they get sick. Do you want to say anything more about ways people can stay mentally well before they get sick?
 - *“Do a crossword or anything that diverts attention away from whatever it is that is making them sick.”*
 - *“There should be spaces where people can practice gentle restorative exercises like yoga, tai chi, chi qong and meditation. These can also be spaces where there are counsellors or facilitators holding workshops, possibly group counselling spaces such as women's circles/ meets ups or men's circles/meet ups. As well as maybe for immigrants, or young adults. When people share their personal experiences and can feel well held by a group of people community.” [sic]*
- **Mental health idea 7.** Stop racism and discrimination. Offer people mental health support that suits their culture. Do you want to say anything more about ways to stop racism and discrimination?
 - *“Treating people from a different background the way you would like to be treated.”*
 - *“Start conversations about racism and invite everyone to the table. We started running circles during the BLM movement of 2020 the impact of the cross pollination of people in Hackney was incredible. Young white people and families suddenly heard stories of the BAME community and their fears of gentrification. It was as if these*

spaces had lives side by side and never heard the other. As more young people come to Hackney to live in expensive tower blocks and” [sic]

Priority 2 - Social connection

- **Social connection idea 1.** Help children have a good start. We must remember to include children when we plan ways to stay in touch with each other. Do you want to say anything more about ways to help children make friends in Hackney?
 - *“Introduce Children to others in their age group in their local community. A fun day could be organized where Children could meet other children.” [sic]*
 - *“No”*
- **Social connection idea 2.** Look for ways that young people and adults can stay in touch with others. We want to help people, especially young people not feel left out when changes happen. Do you want to say anything more about ways young people and adults can stay in touch with each other?
 - *“An event of some sort where young and adults can meet to share one another's experience.”*
- **Social connection idea 3.** Get people into jobs. Help people get paid and volunteer jobs with the support they might need to keep them. Do you want to say anything more about ways to get people into jobs?
 - *“Offer support and signpost to relevant volunteering organizations and prospective employers.” [sic]*
- **Social connection ideas 4 and 5.** Keep everyone healthy and well and in touch with each other. Help neighbourhoods make plans about staying well. Neighbourhoods are people living near each other. Do you want to say anything more about ways to help neighbours get to know each other?
 - *“Set up a Tenant's Association or a Neighbourhood Watch Scheme.”*
 - *“Encourage more street parties, empower people to be able to easily apply to shut down their street for a day, divert traffic so they can share a meal on the street with their neighbours”*
- **Social connection idea 6.** Stop people getting sick. Exercise is good for our body and brings us together with other people. Help people to be active or exercise where and how they want to. Do you want to say anything more about people can get together and feel better?
 - *“You could encourage them to join a sports club such as Tennis.”*
- **Social connection idea 7.** Stop racism and discrimination. Look at ways to support people from different backgrounds to do all they are able to. Do you want to say anything more about ways to stop racism and discrimination?
 - *“To treat those from different countries and background the way you would like to be treated.”*

Priority 3 - Financial security

- **Financial security idea 1.** Help children have a good start. Look at ways to help families with children who are poor. Do you want to say anything more about helping families with children who are poor?
 - *“One could donate to a foodbank so that the families don't go hungry. Provide unwanted clothes.”*
- **Financial security idea 2.** Look for ways that young people and adults can stay in touch with others. Ask schools to teach young people how to manage money. Do you want to say anything more about ways to teach young people how to manage money?
 - *“Young people should be taught the value of money and how to budget towards essential items.”*
- **Financial security idea 3.** Get people into jobs. Help people get new skills and jobs that pay good money. Do you want to say anything more about ways to help people get new skills and jobs that pay good money?
 - *“You could signpost to colleges/unis to gain the qualifications needed for the job.”*
 - *“I think it's less about pay good money, and it's more about getting paid enough money and feeling valued, connected and belonging in community. When the aim is to get "good money" we lose all the benefit of the previous questions being asked. We cannot both strive for a profit driven community and a relationship/connection/ healthy community.”*
- No further responses were given to the remaining financial security ideas.
 - **Financial security ideas 4 and 5.** Keep everyone healthy and well and keep our community healthy. Ask big groups like the hospitals and the council to make Hackney a good place to live
 - **Financial security idea 6.** Stop people getting sick. Make sure that health services go to people who need them most
 - **Financial security idea 7.** Stop racism and discrimination. Look at ways to treat all people fairly.

Demographics

- All three respondents live in Hackney and answered the survey by themselves. Two respondents also work in Hackney.
- The respondents were aged between 35 and 84.
- Two respondents stated that they have a disability or long term illness.
- Two respondents described their ethnicity as white. One respondent described their ethnicity as Asian.
- Two respondents were women; one was a man.
- One respondent was a Jehovah's Witness, one was Christian, and one was Buddhist.
- All three respondents described their sexuality as heterosexual.

Secondary Insight

Hackney's Liveaboard Boaters Survey 2022

Hackney has a diverse boating community living along the River Lee and Regent's Park Canal. It is those boaters without a residential moorings who are likely to face health inequalities and poor access to primary care services.

Liveaboard boaters/continuous cruisers are required to move every fourteen days as part of their Canal and River Trust boat licence conditions. This can have a detrimental impact on boaters with poor physical and mental health having to stay in one place to access health services.

Boaters survey

Over the course of two days during February the LBH Traveller officers visited the liveaboard boating community living along the River Lee. The primary aim of the visit was to engage with boaters and make them aware of Hackney's draft Health and Wellbeing Strategy. We distributed copies of Hackney's draft strategy and encouraged boaters to respond to the consultation.

We also conducted short interviews with 25 liveaboard boaters and asked them about their experiences of healthcare services in Hackney.

Key Recommendations:

Work with health care providers to ensure that Boaters are able to register with primary health care services. It is important that primary health services practitioners are aware that patients do not need proof of identification or address to register at GPs or dentists.

Ensure that processes are in place to ensure that all health and care services communicate effectively with nomadic patients when they're on the move.

Ensure that staff feel empowered to work across organisational and geographic boundaries to deliver care for patients.

Consider whether there is a need to commission targeted services to address unmet need among boaters.

Survey responses

Q1. Are you registered with a GP?

- 25 boaters were registered as permanent patients with a GP
- 21 were registered with GP's in Hackney
- 23 respondents used a land address of a friend /relative to register with a GP
- 2 boaters registered with a GP using the medical centre address
- 10 respondents had experienced problems registering and were informed that they could not use the GP's address

Q2. We then asked respondents if they were currently registered with a dentist?

- 17 respondents said that they were registered with a dentist using a land address.
- 14 respondents said that they had been refused registration as they were unable to provide a fixed address.
- 8 respondents said they hadn't tried to register with a dentist.

Q3. Do you have a disability or long term illness?

- 3 respondents stated that they had a long term illness.

Q4. Do you use Children Centres in Hackney?

- 7 of the respondents we interviewed had children/babies.
- 6 had used a Children's Centre in Hackney.
- Generally liveaboard boaters used Children's Centres to access healthcare including immunisations for their babies & children.

Q10. Do you find Emergency services easy to access?

- 1 respondent used the 'What three words' app.
- 9 respondents said it can be difficult giving boat mooring locations to emergency operators.
- 2 respondents said they sought help from other boaters to make emergency phone calls.
- 1 respondent had to walk to the nearest street address.
- 4 respondents haven't used emergency services.
- 7 respondents had to wait more than an hour for ambulance services to respond and more than 3 hours for the police to respond. In general Fire services were quick to respond

Appendix

Draft Health and Wellbeing Strategy Consultation Survey

1. Are you sharing your views as an individual or on behalf of an organisation?

- ☐ Individual
- ☐ On behalf of an organisation

2. Do you live, work, or study in Hackney? Select all that apply

- ☐ Live
- ☐ Work
- ☐ Study

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Mental Health)

4. In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 1 (Mental Health)?

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

5. Please explain your response above:

6. Can you suggest other actions that we should include in our Strategy to improve mental health that will reduce health inequalities? *Health inequalities are avoidable and unjust differences in health outcomes between groups of people and communities.*

- ☐ Yes
- ☐ No

If yes, please specify:

7. Who should the Health and Wellbeing Board work with on this action/these actions?

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Social Connection)

8. In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 2 (Social Connection)?

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

9. Please explain your response above:

10. Can you suggest other actions that we should include in our Strategy to improve social connection that will reduce health inequalities? *Health inequalities are avoidable and unjust differences in health outcomes between groups of people and communities.*

- ☐ Yes
- ☐ No

If yes, please specify:

11. Who should the Health and Wellbeing Board work with on this action/these actions?

We will now ask you for your feedback on our draft Health and Wellbeing Strategy (Financial Security)

12. In the draft Health and Wellbeing Strategy we have included actions we will take to achieve each priority. To what extent do you agree or disagree with the suggested actions for Priority 3 (Financial Security)?

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

13. Please explain your response above:

14. Can you suggest other actions that we should include in our Strategy to improve financial security that will reduce health inequalities? *Health inequalities are avoidable and unjust differences in health outcomes between groups of people and communities.*

- ☐ Yes
- ☐ No

If yes, please specify:

15. Who should the Health and Wellbeing Board work with on this action/these actions?

Working together to reduce health inequalities and improve health

16. How can you/your organisation (if relevant) help us take action on the three priority areas (mental health, social connection and financial security)?

About You

We want to hear from a wide, diverse range of residents and stakeholders during this consultation period, so this final section of questions about demographics will assist us in making sure we do.

You do not have to provide any of the information requested here if you prefer not to. It is up to each individual to choose how, and if, they define themselves.

The data you provide here will be treated as strictly confidential and anonymous. It will be used only in accordance with our Equal Opportunity and Data Protection policies (copies of which are available upon request).

17. Postcode: please provide the first 3 numbers/letters. For example, if your postcode was E8 1DY, you would write E8 1

18. Age: what is your age group?

- ☐ Under 16
- ☐ 16-17
- ☐ 18-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55-64
- ☐ 65-74
- ☐ 75-84
- ☐ 85-94
- ☐ 95+
- ☐ Prefer not to say

19. Do you regularly provide unpaid support caring for someone? A carer is someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems.

- ☐ Yes
- ☐ No

20. Do you consider yourself to be disabled? Under the Equality Act you are disabled if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.

- ☐ Yes
- ☐ No

21. If yes, please indicate the nature of your disability/disabilities:

- ☐ Visual impairment
- ☐ Hearing impairment/deaf
- ☐ Physical disabilities
- ☐ Cognitive or learning disabilities
- ☐ Mental health condition
- ☐ Other long term/chronic condition
- ☐ Prefer not to say
- ☐ Other (please expand below)

We recognise you may not consider having a mental health condition as having a disability. If you would like to provide further information about your disability/disabilities, please comment below.

If other, please expand:

22. Ethnicity: Are you...

- ☐ White- English, Welsh, Scottish, Northern Irish or British
- ☐ White- Irish
- ☐ White- Gypsy or Irish Traveller
- ☐ White- Roma
- ☐ White- European Mixed
- ☐ White- Kurdish
- ☐ White- Turkish
- ☐ White-Turkish Cypriot
- ☐ White- Eastern European
- ☐ White- Western European
- ☐ White
- ☐ Jewish
- ☐ Charedi Jewish
- ☐ Black British
- ☐ Black- Caribbean
- ☐ Black- African
- ☐ Asian - Indian
- ☐ Asian- Pakistani
- ☐ Asian- Chinese
- ☐ Asian- Bangladeshi
- ☐ Asian- Sri Lankan

- ☐ Asian- Vietnamese
- ☐ Asian
- ☐ Mixed- White & Black Caribbean
- ☐ Mixed-White & Black African
- ☐ Mixed- White & Asian
- ☐ Mixed- Other
- ☐ Arab
- ☐ South American
- ☐ Prefer not to say
- ☐ Other (please state if you wish):

23. Gender: Are you...

You can select multiple options or self describe.

- ☐ Man
- ☐ Woman
- ☐ Non-binary
- ☐ Genderqueer
- ☐ Agender
- ☐ Intersex
- ☐ I use my own term
- ☐ Prefer not to say
- ☐ Self describe

If you prefer to use your own term please provide this here:

24. Gender: Is your gender identity different to the sex you were assumed to be at birth?

- ☐ Yes it's different
- ☐ No it's the same

25. Religion or belief: Are you or do you have...

- ☐ Atheist/no religious belief
- ☐ Christian
- ☐ Muslim
- ☐ Buddhist
- ☐ Hindu
- ☐ Secular beliefs
- ☐ Charedi
- ☐ Jewish
- ☐ Sikh
- ☐ Other (please state if you wish):

26. Sexual orientation: Are you...

- ☐ Bisexual
- ☐ Gay man
- ☐ Lesbian or Gay woman
- ☐ Heterosexual
- ☐ Other (please state if you wish):