

## Summary Report

**How do you help yourself  
and others to keep  
emotionally well?**

**Healthwatch Doncaster**

**Engage, Inform, Influence**

**Recovery Games - 16 August 2019**

**Doncaster Pride - 17 August 2019**

# 1 Executive Summary

## Background

In 2019 Healthwatch Doncaster completed an engagement project in relation to the NHS Long Term Plan which contained a section focussing on mental health and local people were involved to gain their feedback on the priorities.

The engagement events facilitated discussions with local people who were very keen to share their experiences and comment on the Long Term Plan proposals in order to influence services for those with Mental Health difficulties. These discussions and additional engagement opportunities facilitated wider sharing of experiences by the public in relation to the local support they receive with their own mental health difficulties. Further anecdotal feedback in other engagement events highlighted the difficulties for specific groups whose voices are seldom heard with regard to health support and all this information led to this project.

The following is a piece from a press release about the NHS Long Term Plan engagement event facilitated by Healthwatch Doncaster.

*“Local people in the region have their voice heard after publication of the NHS Long Term Plan report:*

- *88% said they agreed that it was right for the NHS Long Term Plan to focus on ‘prevention, choice and control, and promoting independence and self-care’*
- *93%, agreed on the commitment areas for Mental Health Service investment*
- *85% agreed that people’s physical and mental health should be treated together in relation to joined up care*

*Over a thousand people in South Yorkshire and Bassetlaw have provided their views on the NHS Long Term Plan to improve health services.*

*A significant proportion (92%) said it was either important or very important that they work in partnership with their GP/other health professionals to get the care that is right for them”*

This project was not confined to Doncaster and subsequently Healthwatch Doncaster wanted to find out more about how local people help themselves or others when experiencing Mental Health difficulties.

Following the engagement on the NHS Long Term Plan Healthwatch Doncaster planned engagement events at Pride and the Recovery Games to gather extended narratives to establish more views on Mental health issues focussing on:

- How people support others struggling with mental health conditions
- How equipped they feel to do this
- What services people in Doncaster would signpost others to

- Identifying any gaps in emotional and mental health support in Doncaster for individuals associated with recovery or the LGBTQ+ community.

## Planning and Engagement

Early conversations highlighted that people were much more comfortable talking about a friend or family member who they had helped through a difficult time than sharing personal experiences. In addition to this, previous anecdotal feedback and conversations indicated that people prefer to talk about 'emotional wellbeing' rather than mental health. These two points were pivotal to the Healthwatch planning and influenced the approach taken by the team to achieve their outcomes.

The intention was to engage with the public and facilitate extended narratives about how individuals support each other to stay well emotionally. In doing so we realised that we needed to be "visible" in order to engage with the general public and this thought was very prominent in our planning.

The group explored creative ways in which we could make our presence known and encourage people to come and speak to us and it was felt that we needed something visual to attract people. The engagement team came up with a concept of 'airing your views' where a washing line/rack would be used to hang cards illustrating activities someone may choose to do, to keep themselves emotionally well. Participants would be asked to rate the three most important activities that assisted them to stay emotionally well. This activity was considered an "ice breaker" to create a relationship with people and encourage their participation.

Whilst encouraging people to interact with "airing your views" the next step was to speak to the public about their experiences of helping someone who is emotionally unwell "What's YOUR Story? This engagement focussed on the extended narratives and were facilitated by the use of mobile phones recording the stories that people shared.

In addition, to create increased interest in our activity at the events we choose to wear bright pink promotional T-shirts so we were readily visible and recognisable to the public as Healthwatch representatives.

The project involved attending two events in Doncaster to engage with the public and gain their views and experiences on supporting each other emotionally. The first session at the Recovery Games and the following day at the local Doncaster Pride event. The objective was to identify what are the main themes and identify gaps in support for people with emotional difficulties and to influence future decisions on services.

## Findings

### Recovery Games

During the course of our engagement at the Recovery Games, we engaged with three people who agreed to participate in “What’s YOUR Story?”

- One related to offering support to a friend needing emotional support.
- One person talked about their experience of addiction.
- One person recounted their personal struggle and coming through that with support.

The weather was not conducive to lengthy interviews even when we were able to take shelter under a gazebo, as it was still very cold, but we did have brief interactions with participants in the “Airing Your Views” approach using the visual aids to ask people what they do to keep emotionally well.

The top three activities people stated helped them to stay well were:

- Being outdoors/nature/walking
- Talking to a friend
- Being around animals/pets.

The exercise demonstrated to us that there are many people that have at some point in their lives have experienced poor mental health. It also told us that many people have developed their own coping mechanisms to help them deal with low-level mental health issues on a day to day basis.

### Doncaster Pride

Throughout the day, we engaged with a variety of individuals who either participated with ‘airing your views’ activity or shared their story (What’s YOUR Story?) in relation to supporting someone else or managing their own emotional wellbeing.

The top three activities people stated helped them to stay well were:

- Spend time with pets
- Listen to music
- Talking with a friend.

In total, we engaged with ten people who agreed to take part in “What’s YOUR Story?”

The topics of discussion were as follows:

- Gender Identity
- Supporting a parent with PTSD
- Talking and Listening provides great support.
- A Cancer survivor’s story about accessing mental health services
- Physical mobility and my mental health
- Supporting a friend who is Hearing voices
- Struggling with finding community support for mental health issues
- Couple on how supporting each other through divorce is vital to staying well
- Suicidal partner

- Daughter supporting mum through cancer

## Findings/Themes

### How people support others (and themselves) struggling with emotional health

The stand out theme from this study is the importance that individuals place on the support that family and friends can provide.

Many of the respondents who were caring for another or experiencing a condition stressed the importance of being understood by another who had experienced the same thing.

Respondents picked out a number of activities that helped to keep themselves well.

For a number of respondents the importance of practical advice and physical support has helped to relieve their or their friends/family member's emotional struggles

A number of individuals highlighted the struggles with emotional health and stigma, which they felt they continue to experience in today's society.

### How equipped people supporting others feel they are to do so and how they look after themselves

Those supporting others with emotional wellbeing felt that they did not know what to do when they became aware of their family/friend's circumstances.

A number of respondents had feelings of trying to be there for their loved one to talk to.

There was a common theme coming through that carers need to support themselves in order to be able to support someone else.

Some carers discussed how the individual they are caring for and their difficulties with accepting that they need help from services.

### The experiences of services within Doncaster

Two respondents had come into contact with Doncaster Rape and Sexual Abuse Counselling Service (DRASACS).

One respondent had come into contact with Talking Shop.

Overall, the response regarding interactions with GP was negative with a few participants encountering a positive experience.

A number of respondents discussed the importance of their work place or school in providing appropriate support.

There was a theme coming through that, often due to desperation and long waiting lists, individuals were opting for private therapies over accessing NHS services.

Trans Mission was mentioned by a parent supporting her child with gender identity struggles.

Mind was mentioned by a daughter supporting her mother, who was referred to Mind.

There was a lot of positive feedback regarding the support that carers got from carers support.

## The gaps in emotional and mental health support in Doncaster

Several individuals highlighted that they required improved support with mental health when being diagnosed with a physical condition

### Mental Health Resources in the System

A number of individuals discussed the lack of mental health resources

### Holistic Approach

A number of people discussed how they were not treated holistically and how that would have really benefitted their care, this includes health and social care.

### General Practice

Some individuals found that the signposting they received via GP appointments was not what they considered the most appropriate service for what they were feeling.

### Youth Gender Identity Services

One respondent stressed the need for youth gender identity services in Doncaster

### Carers Assessment

One respondent, who has been a carer for a significant period, highlighted how they needed a more regular carer assessment from Doncaster Council.

### Facilities and Accessibility

A number of individuals highlighted how the facilities at their school, college or workplace did not work for them.

### Community Integration

Community acceptance and integration during recovery

## Recommendations

Recommendation 1: Referral and Signposting

Recommendation 2: Continue work to promote integrated working

Recommendation 3: Doncaster Council to assess Carers Education and Support

Recommendation 4: NHS Doncaster Clinical Commissioning Group to assess youth Gender Identity Services in the Doncaster Place

Recommendation 5: The experiences of services within Doncaster

## 2 Introduction

In 2019 Healthwatch Doncaster completed an engagement project around the Long Term Plan, the plan placed a focus on mental health and identifying priorities and local people were involved to gain their views. It was encouraging that the NHS Long Term Plan identified Mental Health as being a priority for the future a view shared by those involved in the engagement.

Engagement events facilitated discussions with local people who were very keen to share their experiences and comment on the Long Term Plan proposals in order to influence services for those with Mental Health difficulties. These discussions and additional engagement opportunities facilitated wider sharing of experiences by the public in relation to the local support they received with their own mental health difficulties. Further anecdotal feedback in other engagement events highlighted the difficulties for specific groups whose voices are seldom heard with regard to health support and all this information led to this project

*“Local people in the region have their voice heard after publication of the NHS Long Term Plan report:*

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*Over a thousand people in South Yorkshire and Bassetlaw have provided their views on the NHS Long Term Plan to improve health services.*

*A significant proportion (92%) said it was either important or very important that they work in partnership with their GP/other health professionals to get the care that is right for them”*

Following this project Healthwatch Doncaster wanted to find out more about how people help themselves or others when experiencing Mental Health difficulties. We wanted to gather extended narratives to establish more views on Mental health issues focussing on:

The focus of the engagement was on:

- How people support others struggling with mental health conditions,
- How equipped they feel to do this,
- What services people in Doncaster would signpost others to,
- Identifying any gaps in emotional and mental health support in Doncaster for individuals associated with recovery or the LGBTQ+ community.



In the planning of this engagement a member of the team visited a peer support group for people with mental health difficulties and gained insight through discussion that individuals might prefer to talk about helping someone else, rather than reflecting on personal experiences.

Another team member visited a local organisation who support people in recovery from alcohol misuse. The second opportunity included participants sharing that they are happy to talk about their current situation in regards to their mental health. Their preference would be to speak about ways in which they keep themselves well, rather than what happens in a crisis. One woman shared that she keeps emotionally well by promising herself a cup of tea every morning, this gives her a positive reason to get out of bed and start the day in a positive way, rather than remaining in bed for the majority of the day and having negative thoughts.

In addition to this, from early conversations people shared that they would rather engage with us to talk about 'emotional wellbeing' rather than mental health. This evidence was utilised in the planning and development of the approach for this project and further evidenced our approach to gather extended narratives.

The team set out to gather extended narratives for this project as it was considered that this approach would facilitate gathering real stories from individuals, which could be analysed to identify themes.

Regular planning meetings were attended by the team members and included discussion as to how we could encourage engagement. Previous engagement activities had assisted us to identify that creating interest from people and being noticed is crucial to achieve any interaction with the public. The group explored creative ways in which we could make our presence known, encourage people to come and speak to us, and it was felt that we needed something visual to attract people. The engagement team came up with a concept of 'airing your views' where a washing line/rack would be used to hang cards illustrating activities someone may choose to do, to keep themselves emotionally well.

In addition, we wanted to be visual at the events and we choose to wear pink promotional T-shirts so we were visible and recognisable to the public as Healthwatch Doncaster representatives.

Whilst encouraging people to interact with "airing your views" we facilitated discussion with the public about their experiences of helping someone who is emotionally unwell. This engagement focussed on the extended narratives and were facilitated with the use of mobile phones to record people's stories.

Marketing support was also organised and implemented through the planning stages to ensure our engagement activities were well advertised, prior to the events taking place and on the day of events and the team posted on social media throughout both events.

Planning included a risk assessment to ensure that potential risks were mitigated where possible and to ensure the activities planned could be delivered with minimal risk.



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## 3 Engagement

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The project involved attending two events in Doncaster to engage with the public and gain their views and opinions on supporting each other's emotional wellbeing. The first session at the Recovery Games and the following day at the local Doncaster Pride event. The focus was to engage with the public and facilitate extended narratives about how individuals support each other to stay well emotionally. The objective was to identify what are the main themes and identify gaps in support for people with emotional difficulties and to influence future decisions on services.

Early conversations highlighted that people were much more comfortable talking about a friend or family member who they had helped through a difficult time than sharing personal experiences. In addition to this, previous anecdotal feedback and conversations indicated that people prefer to talk about 'emotional wellbeing' rather than mental health. These two points were pivotal to the planning and influenced the approach taken by the Healthwatch Doncaster team to achieve their outcomes.

The aim was to engage with the public and facilitate extended narratives about how individuals support each other to stay well emotionally. In doing so we realised that we needed to be "visible" in order to engage with the general public and this thought was very prominent in our planning.

The group explored creative ways in which we could make our presence known and encourage people to come and speak to us and it was felt that we needed something visual to attract people. The engagement team came up with a concept of 'airing your views' where a washing line/rack would be used to hang cards illustrating activities someone may choose to do to keep themselves emotionally well. Participants would be asked to rate the three most important activities that assisted them to stay emotionally well. For example; spending time with animals, shopping and meeting up with friend. This activity whilst it had a purpose in finding out how people supported their emotional wellbeing was also an "ice breaker" to create a relationship with people and encourage their participation in "What's YOUR Story".

In addition, to create increased interest in our activity at the events we choose to wear bright pink promotional T-shirts so we were readily visible and recognisable to the public as Healthwatch Doncaster representatives.

In gathering the extended narratives the participants were encouraged to talk about experiences of helping someone who is emotionally unwell and what they were able to offer in terms of support, questions were also directed to their awareness and experience of services.

This engagement was facilitated by the use of mobile phones recording the stories that people shared. All participants gave consent for these conversations to be recorded and analysed as a later date.

At both events, participants were recruited through engagement with the Healthwatch Doncaster team. Participants were people attending either event that encountered a member of the team. For the qualitative recruitment, potential participants were told they would be entered into a prize draw to win a £25 voucher in order to give participants an incentive for their involvement. This was because gaining narratives from participants was the main objective of this piece of work, which is why it had a monetary incentive. There was no monetary incentive for the quantitative arm of the study.

### Recovery Games

The intention at the Recovery games was that Healthwatch Doncaster staff would be mobile throughout the event with the “airing the views” clothes line/rack to attract attention and achieve engagement opportunities with the public. The Recovery Games were well attended by teams from across the country unfortunately on the day that the games were held the weather in Doncaster was inclement with torrential downpours and strong winds. This coupled with the fact that the teams and their supporters were focused on the games themselves meant that we were unable to engage in detailed conversations with more than a very small number of attendees. However, the team did employ the “Airing Your Views” engagement activity, as described earlier, to which we had a relatively good response as it was something that wasn’t too time consuming.

During the course of our engagement at the Recovery Games we managed to record interviews with three people:

- One related to offering support to a friend needing emotional support
- One person talked about their experience of addiction
- One person recounted their personal struggle and coming through that with support

As stated previously the weather was not conducive to lengthy interviews even when we were able to take shelter under a gazebo, as it was still very cold, but we did have brief interactions with participants using the “Airing Your Views” approach. The areas that came out the top were:

- Being outdoors/nature/walking
- Talking to a friend
- Being around animals/pets.
- Sport/exercise

The exercise demonstrated to us that there are many people that have at some point in their lives have experienced poor mental health. It also told us that many people have developed their own coping mechanisms to help them deal with low level mental health issues on a day to day basis.

One interviewee told us about some solutions that were available in her local area which provided support for and raised awareness of mental health. One idea which sounded really useful was a mental health awareness walking group which took place at the weekend, so was available to a larger number of people than perhaps it would be if held midweek. The group provides an opportunity for exercise, fresh air and social interaction, all of which were identified by the people we spoke to as being beneficial to helping them maintain a sense of wellbeing.

### Doncaster Pride

At the Pride event, other creative ways to engage with people were developed to help attract people to our designated pitch, we painted the washing line poles to represent the Pride flag colours and wooden pegs were also painted in the appropriate colours. All staff involved in the Pride engagement event made the most of the festival atmosphere by joining the 'Walk of Unity' to show our support to the LGBTQ+ community while also raising the profile of Healthwatch Doncaster by carrying our promotional pop-up mesh printed sign with the company slogan 'Your Voice Counts'. Furthermore, the team wore the bright pink coloured t-shirts to help establish our presence.

On the day of Doncaster Pride, the proposed engagement activities were delivered well by the engagement team with ten recorded stories captured on how people help others to keep well. Topics of conversations ranged from how physical disability can impact on someone's emotional health, experiences of a mother trying to help her daughter understand her gender identity, to a father who had attempted suicide. All the stories gathered were difficult to hear at times due to the harsh reality of the participant's experiences but all provided powerful insight in gathering people's views and opinions.

Throughout the day we engaged with a variety of individuals who either engaged with the 'airing your views' activity, or sharing their story in relation to supporting someone else to help them with emotional difficulties and potential maintain emotional wellbeing.

In total, we engaged with ten people who chose to take part in 'What's YOUR Story?'

The topics of discussion were as follows:

- Gender Identity
- Supporting a parent with PTSD
- Talking and Listening provides great support
- A Cancer survivor's story about accessing mental health services
- Physical mobility and my mental health
- Supporting a friend who is Hearing voices
- Struggling with finding community support for mental health issues
- Couple on how supporting each other through divorce is vital to staying well
- Suicidal partner

- Daughter supporting mum through cancer

Many other people engaged with the 'Airing your views' activity, the findings are as follows; a total of 52 people engaged with our colourful washing line. The top three activities people do to stay well are:

- Spend time with pets
- Listen to music
- Talking with a friend.

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## 4 Methodology

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### 1. Ethics

As the topic of emotional and mental well-being has the possibility of upsetting and triggering individuals, we ensured that the ethics of the approaches had been considered and adjusted prior to the events.

The language used by the interviewers was aimed to address the topic in a sensitive way. For example, words that may be more triggering were avoided and replaced with words and phrases that may be less likely to trigger individuals, such as "emotional well-being" and "wellness" over "mental health", and "breakdown"

When recording individuals we ensured that we had asked in advance whether individuals were happy to be recorded. Furthermore, we did not record any personal details, with the exception of contact for entry into the prize draw. However, these details were kept separately and not able to be easily linked in order to identify individuals.

In order to maintain anonymity of the individuals interviewed the interviews and their respective transcript will be kept confidential and not included in this report. Quotes will be used throughout the finding in this document but they will be formatted in a way that will not reveal the identity of any individuals.

### 2. Qualitative Approach

There were 13 interviews collected across the two events: 10 interviews at Doncaster Pride and 3 interviews at The Recovery Games.

#### Interview structure and collection

The interview was open in its structure, with a handful of open questions. Please see Appendix B to see cue cards used to prompt the interviews.

This approach was taken to prevent biasing the participant's answers to the questions and to give the questions an explorative nature so that the participant's responses were not closed off or leading participants.

The team were keen to have a conversational approach and therefore interviewers were given freedom to ask the questions in a way that suited their style and prompt respondents according to how the conversation flowed rather than having formal prompts. Although a more exploratory approach brings in the potential for bias, this approach ensures that the approach stays explorative of the avenues that the narrative travels.

## Interviewers

There were six interviewers involved in collecting the interviews. Appendix C lists the Healthwatch Doncaster Team members who took part in the engagement project and what events they were involved in.

## Preparation

The majority of interviewers, with the exception of interviewer 6 (HWD volunteer) were involved with development of the studies aims and the cue cards used to prompt the interviews. Therefore, the majority of interviewers were heavily involved in the planning of the project. The Healthwatch Doncaster volunteer was briefed prior to the event and fully aware of the aims and approach of the engagement event.

In the week leading up to the events the more experienced team members provided some role-play examples and advice for others in the team to enhance their skills and confidence in preparation of an event that might pose some emotional and difficult situations.

## Interview Approach

Each interviewer took relatively similar approaches at both events. The interviewer would look to approach passers-by to ask if they wanted to give an interview regarding emotional wellbeing. Potential respondents were informed of our role and our aims and asked if they had supported anyone with emotional problems and whether they would be willing to tell their story. Whilst this was a very sensitive discussion and some parties clearly did not want to engage however, we were encouraged with the positive responses that we had to this request. At this point, the potential respondent was made aware they would be entered into a prize draw if they completed the interview, if the potential respondent was interested the interviewer would ask if they are happy to be recorded and ask another interviewer to start recording, and begin the interview. For each interview there was a main interviewer who asked the majority of questions and a second interviewer who offered assistance in prompts and ensuring all the aims of this study were covered. Once both interviewers were happy the interview was concluded, the recording was stopped and the respondent was entered into the prize draw. A number of the interviews were facilitated by one interviewee as the environment and the responses of the individual was more conducive to this approach.

As there was an emphasis on the importance of engaging with the public as well as gaining evidence, the team was keen to ensure that the interviewers were natural and brought their own approach that suited their style in order to interact with the public and avoid a rigid approach. Therefore, all interviewers used the cue cards as a guide but used their own style and prompts to steer the conversation. Although this is likely to bring some biases into play, this is a much more engaging approach for the respondents and also allows the team to build relationships with people who may want to approach Healthwatch Doncaster in the future.

## Thematic Analysis

Thematic analysis is an approach to qualitative analysis that aims to find themes in the interviews that outline common feelings and opinions about the issue in focus.

The method is done by two or more people. Independently, they read or listen to the interviews repeatedly and bring some themes together and see how many times these occur. Then the two people analysing the themes come together to combine and confirm the themes before drawing findings, and thus recommendations and conclusions from the analysis. In this study there was an analyst who studied all the interviews and the interviewers were studied again by at least one other team member. The analyst then met with the respective team members and discussed the themes. The whole team then came together to discuss the themes and confirm them.

## Potential bias

Despite all efforts and mitigations the approach remained open to potential bias due to elements outside of the control of the team and the need for a blended engagement and analytical approach. Acknowledging this, the approach has been formed to manage and minimise the potential for bias and thus maximise the validity of the findings. Although the approach is vulnerable to bias, this does not mean the results are in anyway unusable. It is important to understand how bias affects the results, this awareness in itself and other steps help to mitigate bias and strengthen the results.

Acknowledging the bias that could exist will be helpful in reducing their impact on the results received.

## Sampling bias

The approach is open to selection bias, which occurs when the sample is not an accurate reflection of the population. In this case the sample is not random but has instead been selected through convenience sampling, which has the potential to effect results.

The respondents were selected as they were easy to recruit from the stands, however this may not be a representative sample of the whole population we may want to consider. Participants were selected because they have chosen to go to either event and also encountered an interviewer. This may have an impact on their responses and therefore we may not capture the feelings and opinions of the total population we are looking to engage with. For example, a respondent that supports an individual that is part of the LGBTQ+ community who attends pride may have different responses to someone that does not attend pride. Therefore we may be missing a community that would not attend either Recovery Games or Pride. The analysis will need to consider that responses may not be a true reflection of the whole population.

## Interviewer bias

This approach is open to bias associated with the interviewers; there are two main potential biases in this study approach; social desirability bias and interviewer bias.

Social desirability bias is where the participants may present a response that they believe the interviewer will deem appropriate, this can be minimised by asking non-

leading questions. Therefore, we refined the questions to ensure that the questions were not leading respondents towards certain responses.

Interviewer bias is where the interviewer's preconceptions effect the questions asked. The interviewer's tone and ordering of the questions, although this could be unintentional, can influence responses. As the approach had multiple interviewers this is open to further interviewer bias. By acknowledging the potential for these biases, the interviewers were aware of their impact on participants, had these not been acknowledged.

### **Analysis Bias**

The approach to the analysis of the data makes it difficult for the analysis to be totally unbiased as it is almost impossible for those involved in the interview to be unbiased regarding the responses. To combat this, two people have interpreted the each interview independently and then agreed on the themes together. Furthermore, the findings and recommendations were agreed with the whole team.

## **3. Quantitative Approach**

### **Method**

The team formulated 11 categories that are normally associated with keeping well. These categories were:

- Spending time with animals/pets
- Crafting/hobbies
- Having a “cuppa”
- Listening to music
- Enjoying the outdoors/nature/walking
- Maintaining a routine
- Shopping
- Socialising
- Partaking in sports/exercise
- Talking with friends/family
- Volunteering

The team created a stand that had cards with pictures representing each of these categories. At each event the team encouraged passers-by to engage with the display and to place up to three stickers on the top three things that keep them well. This was to find the categories that help people the most to stay emotionally well. This approach was mainly aimed at engaging with the public, however it gave the opportunity to gain some data to support the evidence gained in the interviews.

### **Bias**

This approach is open to the same biases discussed in the Qualitative Approach [see above].



## 5 Findings

### Qualitative

Following the thematic analysis, the following themes have been collected to give an overview of the picture respondents were openly sharing with the Healthwatch Doncaster Team. The themes have been split in order to address the different objectives the team wanted to answer.

*n.b. Please note that although these insights are truly valuable to assess how services are received in Doncaster, the Healthwatch Doncaster team is keen to clarify that these opinions and experiences are those of the public interviewed and are not opinions or experiences of the Healthwatch Doncaster Team.*

### Respondents

The respondents involved in this study had a wide range of life experiences, which meant that a variety of sub-groups were represented within the interviews. A number of the respondents experienced mental health conditions such as PTSD, social anxiety and depression. There were a number of respondents who had experienced a physical diagnosis or life experience that had a significant impact on their mental health, such as a disability diagnosis, cancer, chronic pain, addiction, recovery, bereavement and gender identity. The access into these perspectives is really valuable and gave an excellent insight into a wide range of viewpoints across peoples experiences across both the Doncaster Place and the services experienced.

### How people support others (and themselves) struggling with emotional health

#### Theme 1.1 Family and friends support:

The stand out theme from this study is the importance that individuals place on the support that family and friends can provide. Some interviews pointed out that friends and family helped their emotional wellbeing by having someone to listen and talk to, where are others, particularly those linked to recovery stressed the importance of having someone simply being around.

*"I've always said whether you're in recovery just being around people always helps massively even if they don't say owt. Just being around people." Recovery Games Interview Three*

*"Friends have been very, yes supportive, just be there for you" Doncaster Pride Interview Two*

*"[My daughter/carer]'s colleagues have supported me, just by sending their love and asking how I am, they've supported me but most of all I know they have supported my daughter." Doncaster Pride Interview Four*

In contrast, some respondents had negative reactions from their family or friends in response to their condition or scenario that have a negative impact on their emotional wellbeing.

*"When I got ill, they stopped being around me because my whole life was this chronic illness. And they couldn't understand why I couldn't drink when I didn't do certain things. And It's not because I didn't want to it was just because my health wouldn't allow me to do. And I realised that actually they were not really true friends because they wouldn't stick around."* Doncaster Pride Interview One

*"I have more friends than family sometimes it's hard to share with family"* Doncaster Pride Interview Two

*"He does have other family members but they are not interested, or they are working full time and to be honest over the last couple of years they have practically stopped visiting because they get ignored when they are with him."* Doncaster Pride Interview Five

*"At that time I had no close family. So completely, really on my own. But that has changed now, because of what I went through and because of the therapy I was able to build bridges with the family again so that made it."* Doncaster Pride Interview Ten

Therefore the reliance on an individual's support network is vital for a lot of people in Doncaster who struggle with their emotional wellbeing. This reliance and stressed importance on the support from people around an individual links with Themes in the following section, that show the emotional strain caring for another can put on the carer.

### **Theme 1.2 Talking to people who have been through similar experiences helps them feel understood:**

Many of the respondents who were caring for another or experiencing a condition stressed the importance of being understood by another who had experienced the same thing. This came through with the significant attendance to carers for support from other carers. For respondents who had a condition, they found they gained support from friends who had also been through the same condition or online forums where others going through the same condition came together.

*"I know there is a local Facebook site and it is just about making friends"* Recovery Games Interview One

*"I've already been active within my recovery myself ... it's helped me to grow into the person that I am, so now from being in that low place, hitting rock bottom, now I'm supporting people through volunteering"* Recovery Games Interview Three

*"I started looking online and I found communities and people with the same condition as me and I didn't feel as alone. And you know, everyone has the days where they have really bad days, and I know if I have a bad day. I can go online and find someone and I can talk to them about how I'm feeling even if it's something silly."* Doncaster Pride Interview One

*"We're [online community] friends, you know, people have gone through similar things as me makes you feel slightly less alone in the world, when you see the kind of community of people that like have the same conditions as you, you don't feel so alone."*

*"My friend, she has just been given her 5 year remission so she totally clear but she knows how she felt so she knows what I'm going through. [...] Because she knows and I don't have to explain to her because there are things that you feel that you cannot explain"*  
Doncaster Pride Interview Four

### **Theme 1.3 Activities to relieve emotional struggles**

Respondents picked out a number of activities that helped to keep themselves well, whether they are supporting someone or whether these are activities that helps the individual with emotional struggles. These included, spending time with animals, sports, continuing with what are considered normal hobbies, role modelling, public speaking and going to work. Many of these responses were reflected in the findings from the data [See the findings in the Quantitative section].

*"So next week we, [Sober Social], are going to Sandall Beat on a bike ride and we also do litter picking, it's about breaking down barriers."* Recovery Games Interview Three

*"So I like make up and I do a lot of singing, and I'm into musical theatre. I dreamt about going to med school because I wanted to be a doctor but that's on hold until things get a little bit more stable. But I'm definitely looking into acting as a career choice [...] I'm looking into acting because it's a passion of mine. And I want to be like more visibility in the acting world as a disabled person."* Doncaster Pride Interview One

*"I run, I have just done a park run here, this morning, and I have a dog, got a dog last year and she helps and I've got [my partner]"* Doncaster Pride Interview Ten

*"That was the biggie, being able to get back into work, especially working on the anxiety side of it, it was absolutely priceless."* Doncaster Pride Interview Ten

There are other more emotional behaviours that individuals undertake to improve their emotional wellbeing such as putting things into perspective, reflecting on progress and feeling empowered/confident.

*"When you think how down you were, and how absolutely and utterly, you know no hope, and then you look at how you've come through that to be the person that you are, that's worth a million pounds really."* Doncaster Pride Interview Ten

### **Theme 1.4 Physical and practical support can relieve the emotional struggles:**

For a number of respondents the importance of practical advice and physical support has helped to relieve their or their friends/family member's emotional struggles. For example, legal advice, housing support and help with shopping can contribute to reducing emotional struggles.

*"When you have gone through what you have sometimes it is the practical things that upset you emotionally and helpful if someone can address those practical things for you"*  
Doncaster Pride Interview Two

*"I have got an amazing friend and she took me to every radiotherapy session, every hospital appointment" Doncaster Pride Interview Four*

*"[I support] in any way I can really, I do everything, I look after our child, I look after the house, I look after the finances, I do the cooking, everything basically, the DIY, the gardening, the lot. So basically I've took all his responsibilities." Doncaster Pride Interview Five*

*"If he [father] needs shopping, I'll help him get out and get what he needs. He struggled to focus on what's he's doing, he often gets distracted and thinks people are looking at him. He also has a difficult time looking after my brother as he's disabled and he's also dyslexic so I help him as well" Doncaster Pride Interview Seven*

### **Theme 1.5 Stigma and speaking up**

A number of individuals highlighted the struggles with emotional health and stigma, which they felt they continue to experience in today's society. One respondent discussed how talking about it helps to reduce the stigma, but they couldn't do that during the time, but freely and happily talk about their experiences now. The stigma that endures to exist today can prevent people from speaking up and discussing their experiences.

*"For most people I think put a front on, people ask you how you are, you say yeah I'm alright when actually you're not. It's just what you do, you try and cover it up because you still have such a stigma about it, having to admit it. I don't find it a stigma. I'm very open about it, with all the things I go through so I think we need to be able to talk more about these things." Doncaster Pride Interview Ten*

## **How equipped people supporting others feel they are to do so and how they look after themselves**

### **Theme 2.1 Those supporting other with emotional wellbeing felt that they did not know what to do when they became aware of their family/friend's circumstances**

There were a number of individuals that supported another going through emotional struggles. There was a common theme of not knowing how to approach the situation. In these cases this can often put a lot of pressure and emotional stress upon the carer. Without education, some individuals felt confusion towards and difficulty understanding their family/friend's experiences and emotional struggles.

When people did not know how to approach the condition they learnt from online and signposted resources as they went along.

*"I was a mum and I learnt as I went along, once she got ill I learnt off nurses and doctors how to care for her, [...] I learnt as I went along, every day is different." Doncaster Pride Interview One*

*"I didn't know what to do. Basically, I was really lost [...] I didn't know what to do about this. This was all really worrying." Doncaster Pride Interview Six*

*"I got used to it because I grew up with them, so once I'd figured out how to do something, I'd show them." Doncaster Pride Interview Six*

In contrast, some carers felt confident that they can support people who either had similar experiences to them or if they had experience working in an organisation that associated with supporting individuals going through similar experiences. This links with Theme 1.2, people who have prior experiences feel confident that they can support someone and people who receive support from someone with experience value this.

*"Because I work in services I've got a good knowledge of the local services, so this friend did some access some counselling. After a while I encouraged her where she needed to go." Recovery Games Interview One*

*"I'm a volunteer now at Sober Social, as a co-ordinator, so I run groups and have one-to-ones with people, stuff like that. So it's whatever issue they want say if it's housing we guide them to someone... I think what helps is I've had that personal background... if I can't help them there are members of staff, counsellors at our place." Recovery Games Interview Three*

*"I am lucky because I have access to an employer that provides it [resources/information]. Not everybody has that." Doncaster Pride Interview Two*

*"I've read up, what can you do to help and I've done all that myself for her and you know what it says don't say this and don't say that and you know you've heard it all haven't you. I've done all that." Doncaster Pride Interview Three*

*"If I knew someone who was going through anything similar to what I'd been through, I would encourage them to talk about it, either myself or be able to sign post them to organisations." Doncaster Pride Interview Ten*

## **Theme 2.2 Being there for them through emotional struggles**

A number of respondents had feelings of trying to be there for their loved one to talk to, listen and to understand their family member/friend. This was also linked to those that did not feel like they had the knowledge or expertise to support their loved one [see Theme 2.1]. As individuals did not feel they had experience, they felt the best way they could support was to listen.

*"Just be there, there for each other, always very honest aren't we, open, we have both had different lives and gone through changes and helped each other." Doncaster Pride Interview Two*

*"Just see if you can speak and understand their feelings at the time, and go from there. Usually everyone is different so you've got to make sure people feel heard." Doncaster Pride Interview Eight*

In contrast, those that felt confident that as they had similar experiences felt they could understand and support well. This links strongly with what was outlined in Theme 1.2.

### Theme 2.3 Support themselves to support others – emotional and physical strain from caring for another

There was a common theme coming through that carers need to support themselves in order to be able to support someone else. A number of carers felt pressure as they were aware they are being relied upon. Therefore, they felt a necessity and pressure to keep themselves emotionally well. Some approached this by maintaining hobbies and found support in Carers support [see Theme 3.7]. A number of carers felt that they needed to maintain confidence in themselves and strength in their ability to care for another.

*"I always say it's not the it's not only you that has a chronic illness and everyone around you that looks after you've developed this chronic illness as well, because you sleep and breathe this chronic illness." Doncaster Pride Interview One*

*"She's got me to talk to. It's hard for me as well because I had my own emotional problems. Well I work so that helps [to support myself emotionally], [...] my partners really, really caring and I do a lot of fitness and walking so I keep myself going in that way." Doncaster Pride Interview Three*

*"Just be a shoulder to cry on really, like yesterday I'd been at work all day, gave blood and I went up and she was crying and unfortunately there isn't much you can say [sic]. I told her I loved her and that I'm here for her and there's not much more you can do really. Sometimes I make her get up and take her out but obviously I can't always do that as after work I am tired. But yes it is hard." Doncaster Pride Interview Three*

*"I do Karate training, burlesque chair dancing, I have recently finished a massage course, I do a lot of things and that keeps you well emotionally, yes I have to keep well emotionally, I can't go down." Doncaster Pride Interview Five*

### Theme 2.4 Individuals need to accept that they require help

Some carers discussed how the individual they are caring for and their difficulties with accepting that they need help from services. The carers in this situation found that their loved one often did not respond to encouragement from family and friends. This can induce increased emotional labour on the carer.

*"I think people don't realise in their lives that they are suffering, Normal people don't think they suffer from mental health but they do. It's accepting that you need that help." Doncaster Pride Interview Two*

*"I tried to encourage him to go on it [access services] 6 months ago but he wasn't having it" Doncaster Pride Interview Five*

*[Int]: "Is there anything you feel you can specifically do for him when he is really bad that helps him?" [Res]: "At the moment no, I've got to the point where I am at a loss, I think now it has to come from him" Doncaster Pride Interview Five*

*"He has to help himself, for the CBT to help and the talking therapies you have got to be up for it, you have got to do the leg work and the homework. If you are not willing to do the diaries and the logs and fill the journal in and the different things that they are asking you to do it isn't going to work. [...] I try and encourage him, I ask him to come out with us, I*



*encourage him all the time but it makes no odds, if he isn't going to do it then he isn't going to do it." Doncaster Pride Interview Five*

## The experiences of services within Doncaster

### Theme 3.1 DRASACS

Two respondents had come into contact with DRASACS. One respondent was waiting to access the service, another respondent had very high praises of all the support they had received from services within Doncaster over the years, DRASACS included.

*"I emailed them or something and set up an assessment, I had my assessment a couple of weeks ago and it's like a six month waiting list. But it's what I need. And it's like the services are wonderful services, but they're so underfunded and seeing [...] how much it costs I thought how many people want to come here, and people don't bother turning up." Doncaster Pride Interview One*

*"I got a lot of help from talking shop and DRASACS and my GP. I went through a year of therapy, CBT, counselling, absolutely fabulous." Doncaster Pride Interview Ten*

### Theme 3.2 Talking Shop

One respondent had come into contact with Talking Shop. The respondent had extremely high praises of all the support they had received from services within Doncaster over the years, especially the support they received from their talking shop counsellor.

*"I got a lot of help from talking shop and DRASACS and my GP. I went through a year of therapy, CBT, counselling, absolutely fabulous." Doncaster Pride Interview Ten*

*"I was very fortunate; I got a fabulous counsellor at the talking shop." Doncaster Pride Interview Ten*

### Theme 3.3 GP

Overall, the response regarding interactions with GP was negative with a few participants encountering a positive experience. It is important to note that the exact GP service access was not divulged and therefore the feedback of GP across Doncaster will not apply to all practices. Many respondents felt that they weren't getting signposted appropriately or at all, that they weren't able to get GP appointments and that the care that was provided was not entirely appropriate.

*"The only support which she got was to be offered to be put onto a tablet medication for depression. She reached out to doctors for help and they told her that they would check on her. Four months later she received a call just to check in and in that time we are talking suicide thoughts and all sorts. Luckily she didn't get to that stage; there wasn't a lot of help at all." Doncaster Pride Interview Three*



*"She went out to the doctors crying and begging for help and she got nothing. I know there is [are] a lot of people out there with these problems, I understand that but it could have been one case where another didn't make it, but she did" Doncaster Pride Interview Three*

*"Initially there wasn't a lot of support the GP did what he could but we seemed to go backwards and forwards, he kept saying if we treat the mental health first then the back pain will get better and then they said we can't treat the mental health until we have treated the pain. And we sort of ping ponged like that for years and years and it is gradually getting worse and worse, the depression and the pain." Doncaster Pride Interview Five*

*"I got a lot of help from talking shop and DRASACS and my GP. I went through a year of therapy, CBT, counselling, absolutely fabulous." Doncaster Pride Interview Ten*

*"I think the biggest problem, was even though it is changing is getting a GP to sign post, there aren't enough therapists." Doncaster Pride Interview Ten*

### Theme 3.4 Work and School support

A number of respondents discussed the importance of their work place or school in providing appropriate support. One particular respondent had a high regard of the private support provided by their workplace, they stated how their workplace supported its employees considerably and the workplace believes that if the employees are happier they work more effectively. Another respondent discussed how helpful and understanding her child's school has been when they discovered that the child had been exposed to an attempted suicide and a parent with mental health diagnoses. The school supported the child and they are currently on the thrive program<sup>1</sup>. Furthermore, another respondent had a lot of support when trying to support their child with gender identity struggles; the school's safeguarding officer provided helpful support and was keen to understand in order to provide support. The school supported with a referral to a gender clinic in London. Then again, in contrast, a respondent described how they dropped out of Doncaster College as their facilities were not suitable for their disability.

*"It took them [Northern Racing College] so long to sort out like the lifts and things. And I had no access like a toilet or anything like a disabled toilet because there wasn't one. So things were hard. [...] It's a very small space. And it's not really suitable for disabled people. [...] So things have to be adapted and changed like I couldn't do what everyone else was. I couldn't go on trips [...] because the minibus didn't have like a ramp or anything. So I did feel a bit left out. And I decided to leave. Because things were deteriorating and it got too difficult." Doncaster Pride Interview One*

*"So I do get a lot of support from my employer, I get a lot of mental health support from them. [...] we can ring a call line and get mental health support or any support really [...] they actively promote people to talk to these services, it's a big company and their belief is that if they can help you then you are happier at work it's a big circle and then it also helps public services that are a bit stretched, because we know that, they are" Doncaster Pride Interview Two*

*"[As a teenager], I had CBT therapy from my school and I mean that's why I am where I am today because of them services." Doncaster Pride Interview Three*

<sup>1</sup> <https://www.thriveapproach.com/>

*"He is on Thrive Programme at school, and I do inform school if there are any problems but they are well aware that I am mentally capable and well and I will protect him"*  
Doncaster Pride Interview Five

*"The school was phenomenal. They said they know nothing about this [gender identity]. We don't know how it works, so any advice you can give us will be appreciated. So I just sent them literature that I got from Trans Mission. [...] There are quite a lot of gaps. Great school, but I don't think they really know where to go with it."* Doncaster Pride interview Six.

### Theme 3.5 Private therapies

There was a theme coming through that, often due to desperation and long waiting lists, individuals were opting for private therapies over accessing NHS services.

*"I went to see a private therapist because I found out the therapist that I was being offered from the NHS wasn't what I needed and she [the private therapist] was a good therapist but she wasn't trained in what I needed and it was costing us quite a lot of money, are it wasn't really helping so then I went away decided to take a break from therapy"* Doncaster Pride Interview One

*"My brother even paid for my mum to a private counsellor and that was like £80 for an hour and it did nothing really. That was just a desperate measure really I think. It's hard."*  
Doncaster Pride Interview Three

### Theme 3.6 Trans Mission

Trans Mission was mentioned by a parent supporting her child with gender identity struggles. The feedback from the mother was extremely positive. The organisation took the child into their groups despite the organisation being aimed towards adults. Furthermore, they provided literature for education that informed the child, mother and school.

*"Trans Mission as a charity was phenomenal. But they are a charity for grownups. [...] It's just a shame it was very much an adult environment"* Doncaster Pride Interview Six

### Theme 3.7 Mind

Mind was mentioned by a daughter supporting her mother, who was referred to Mind. The daughter felt her mother had a negative experience from the organisation as they had a single phone call to check in on how her mother was feeling; however she felt she required more help.

*[Discussing referrals from GP]: "They just said "read this" and I think it was Mind? Mind charity and they gave us a number to ring because she actually went to them and they were the people who rang her four months later, so you know it is not great is it. [...] She received a call just to check in and in, [by] that time we are talking suicide thoughts and all sorts. Luckily she didn't get to that stage; there wasn't a lot of help at all."* Doncaster Pride Interview Three

### Theme 3.7 Carers Support

There was a lot of positive feedback regarding the support that carers got from carers support. However, one individual mentioned how she would have benefitted from more regular carers assessments [see Theme 4.2 for more information].

*"I go to carers [...]. We normally sit down and have a cup of coffee and a cake and a natter about whatever is on TV and that helps." Doncaster Pride Interview One*

*"People forget about the family of someone with an illness. So I said to mom, you need emotional support, you need to be around people that are in similar situations and away from me for an hour or so when you can just talk about how you're feeling about things and how, you know, all your emotions being a carer." Doncaster Pride Interview One*

*"I am a member of the Carers Centre. [...] The Carers Centre [has helped with this journey] more than anything" Doncaster Pride Interview Five*

*"The council need to be more aware of the Carers assessment and make them more promoted. Also advise people that they are annual, I had one about 6 years ago and then didn't have one again until I was suffering last year with my mental health and I went to the Carers Centre and found out I should have been having them annually. I am on the books now, and I have been contacted this year so I will get one annually now but" Doncaster Pride Interview Five*

## The gaps in emotional and mental health support in Doncaster

### Theme 4.1 Healthcare

#### Mental Health Support after treatment or diagnosis

Several individuals highlighted that they required improved support with mental health when being diagnosed with a physical condition, this was highlighted that this was especially needed at diagnosis and following the conclusion of treatment as this is a life changing experience and can have a significant impact on an individual's well-being and individuals often felt "lost" at this point.

*"I got diagnosed with a chronic illness, I didn't know any organisations that could help me and I fell into like this deep depression" Doncaster Pride Interview One*

*"I was diagnosed, the geneticist sat me down and said, this is the condition that you have, here's all the things that can go wrong, and didn't ask me how I felt and I was left just kind of deflated, upset. I spent like a month in bed and now I bring it up that you need to ask patients how they are emotionally, especially when they've just been diagnosed with something life changing, it affects you emotionally and mentally" Doncaster Pride Interview One*

*"I kind of thought like when I got diagnosed, the doctor would then asked me afterwards "Now how do you feel about this?" And if I had any questions and it was never, it was like they shut the door. Just like, I've got so many questions. I'm scared, I'm anxious. I'm*

*worried. And I need your advice. I want to know if how I'm feeling is normal, and it totally is, but I didn't know that at the time."* Doncaster Pride Interview One

*"While you're going through the radiotherapy its fine you've got your cancer nurse but then once that finishes you've got nothing, so you have an empty void which I don't know if it happens up here but people need support with that void. I feel very empty very alone sometimes"*<sup>2</sup> Doncaster Pride Interview Four

### Mental Health Resources in the System

A number of individuals discussed the lack of mental health resources and how this had impacted on their care; several people approached private therapies due to the inability to access services when they felt they needed them and waiting lists were long.

*"I think mental health is such a big thing now, there is not enough people and resources."* Doncaster Pride Interview Three

*"My brother even paid for my mum to a private counsellor and that was like £80 for an hour and it did nothing really. That was just a desperate measure really I think. It's hard."* Doncaster Pride Interview Three

### Holistic Approach

A number of people discussed how they were not treated holistically and how that would have really benefitted their care, this includes health and social care. Similarly, individuals received contradictory messages from services and they were therefore "ping-ponging" around the system and not receiving the care they required.

*"He's always had lots of referrals, he's been to pain management, he's been to various talking therapies, they have always tried to help but they have never looked at it holistically so I am hoping this new service with IAPT will, like I say we have just ping ponged, we'll treat this, we'll treat that, we can't treat this till we have treated that."* Doncaster Pride Interview Five

*"[If he had been treated holistically] certainly 10 years ago when this first started if they had been able to tackle both [mental and physical conditions] at the same time I think he would not be in the position he is in now"* Doncaster Pride Interview Five

### General Practice

Some individuals found that the signposting they received via GP appointments was not what they considered the most appropriate service for what they were feeling. Therefore, several individuals need to self-refer themselves. Furthermore, some individuals felt that they were not given the support that they required from their GP.

*"I don't know if it's because of my mum's age as why the services weren't offered to her, and I think if she just had someone to talk to like a counsellor or support worker or someone like that then it would make it easier for people like me."* Doncaster Pride Interview Three

<sup>2</sup> n.b. Respondent lives out of area

*"[My GP] did nothing, he did not recognise my emotional needs, in 18 months I have had 2 appointments. I can't get in to see him. So I just try and deal with it myself"<sup>3</sup> Doncaster Pride Interview Four*

### Youth Gender Identity Services

One respondent stressed the need for youth gender identity services in Doncaster. In Doncaster Trans Mission is the largest support for gender identity, however this organisation predominantly supports adult service users and therefore children using this service may be exposed to experiences in group sessions that are not appropriate for the care and support they require. The parent of the child with the gender identity struggles had contacted mermaids, which is a national organisation for youth gender identity services but received no response, which further highlights the lack of support in the area.

*"I've been told that there are children's charities available, I've not been able to access any kind of children's support in the area. I mean Mermaid; I emailed those groups, and female gender intelligence, I emailed Mermaid, all of these, tried ringing them and trying to reach them, trying to explain [...] none of them got back to me." Doncaster Pride Interview Six*

*"There has to be something whereby you haven't yet made your decision. Half the challenge is supporting these young people that haven't made the decision. [When] they know where they're going all the help is there but these you people, 12-14, who don't know where they fit in. There's no help, to deal with this anxiety and stress. And there's no safe place to explore that. Mental health is an issue for 12-14 year old" Doncaster Pride Interview Six*

## Theme 4.2 Social Care

### Carers Assessment

One respondent, who has been a carer for a significant period, highlighted how they needed a more regular carer assessment from Doncaster Council. They had not had an assessment in over a decade and felt they would benefit from the support. The Doncaster Council website states that a carer assessment needs to be organised by the carer rather than followed up by the assessor.

*"The council need to be more aware of the Carers assessment and make them more promoted. Also advise people that they are annual, I had one about 6 years ago and then didn't have one again until I was suffering last year with my mental health and I went to the Carers Centre and found out I should have been having them annually. I am on the books now, and I have been contacted this year so I will get one annually now but" Doncaster Pride Interview Five*

<sup>3</sup> n.b. Respondent lives out of area

### Theme 4.3 Other Organisations

#### Facilities and Accessibility

A number of individuals highlighted how the facilities at their school, college or workplace did not work for them. An individual who attended Doncaster College highlighted how the disability access did not work for them and contributed to them leaving the college (this point was raised and was related to issues a number of years ago). One parent discussed how her child had struggled with accessing the toilets as they were being bullied due to their gender identity, in both toilets and therefore, they would have benefitted from a gender-neutral toilet.

#### Community Integration

For individuals in recovery, one individual highlighted the importance of areas outside of services. They discussed the difficulty of individuals going through recovery and their acceptance and integration into community.

*“One thing [gap] that I have found and I think this involves everything, there’s not enough things outside of services... because part of recovery or life anyway is getting out there and being with people and I’ve found a lot of various organisations is more bums on seats”*  
Recovery Games Interview Three

#### Quantitative

The below shows the results of the activities that help to keep people well. Although there was an exhaustive list, the categories encompassed an extensive array of activities. The category “Meditation/Mindfulness” has been added following the suggestion by a respondent who found this particularly important to them.

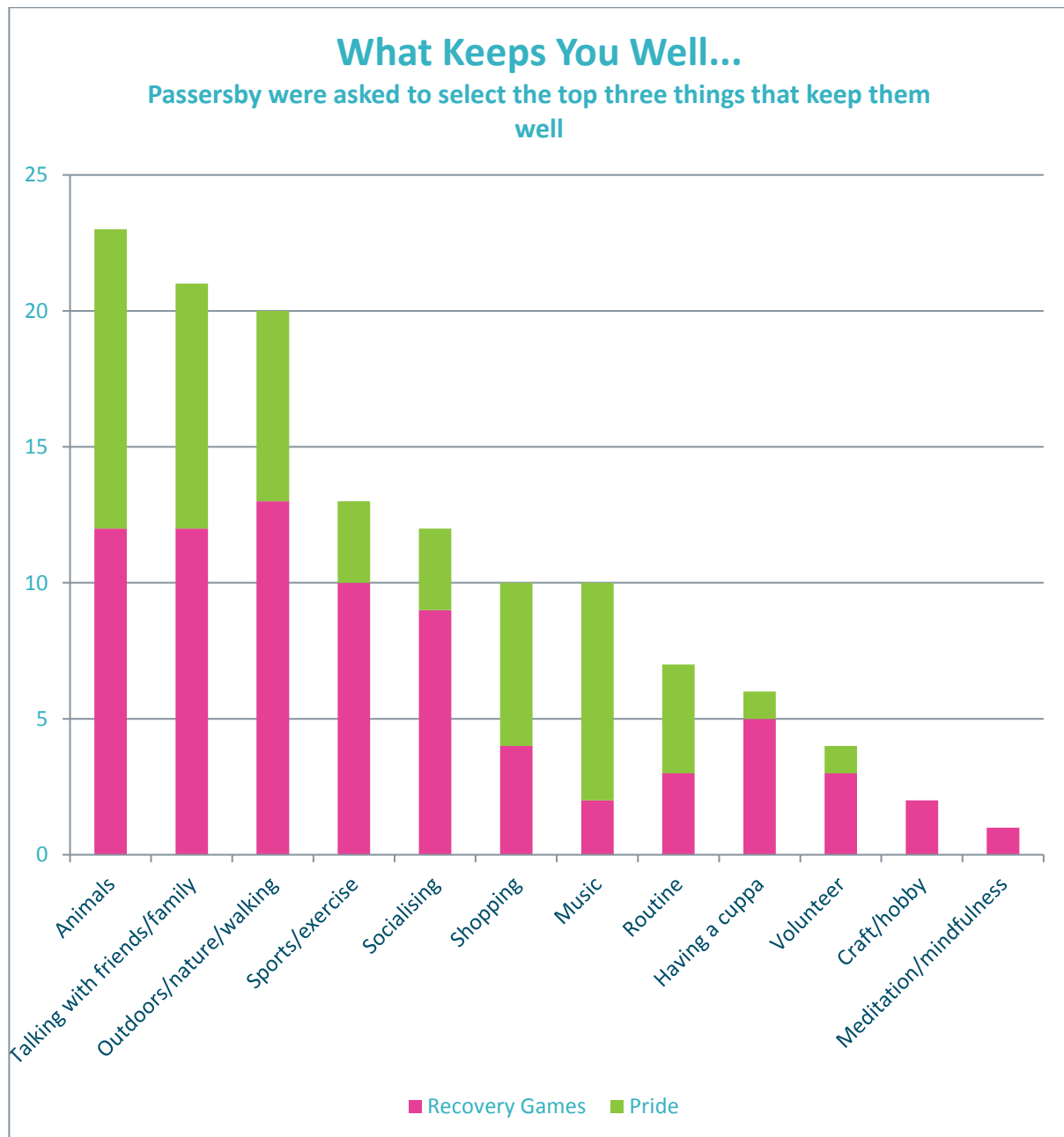
The findings show that overall the top five categories that contribute to keeping people in Doncaster emotionally well are:

1. Animals
2. Talking with friends/family
3. Outdoors/nature/walking
4. Sports/exercise
5. Socialising

There are contrasts in the responses across the events. For example, Sports/Exercise was considered the fourth most important category for respondents at the Recovery Games, but only the seventh most important category to respondents at Doncaster Pride. In contrast, music was the third most important to respondents at Pride but only the 10<sup>th</sup> most important to respondents at Recovery Games.

Although there were some contrasts across the preferences at the events, talking with family and friends, animals and outdoors/nature/walking were consistently in the top five. Therefore, these categories are likely to be the helpful activities for the majority of people but also it shows how different categories are important to others as there were contrasts across the events and all the categories have been chosen by respondents.

This quantitative data provides evidentiary support for the importance of friends and family support [Theme 1.1] and that activities relieve emotional struggles [Theme 1.4].





## 6 Recommendations

Following the findings from the interviews in this study Healthwatch Doncaster has made a number of recommendations to organisations within the Doncaster Place. Some of the organisations with recommendations may want to simply take feedback on board whereas others may want to consider bigger changes to their approach of service delivery.

### ***Recommendation 1: Referral and Signposting***

A number of respondents highlighted how the support they received from their GP had not been what they felt the required or expected. Several respondents highlighted how their GP had, either, not provided them with any signposting to services or had not signposted them to services at all. Therefore, individuals either struggled without the correct services, self-referred or accessed private therapies. In these stories, this meant that the condition was not treated as quickly, or at all, this also puts additional emotional strain on the carer.

Healthwatch Doncaster recommends that GP mental health signposting is reviewed across the Doncaster place and, where it is required, GPs receive training to improve their abilities to refer and signpost effectively.

### ***Recommendation 2: Continue work to promote integrated working***

There are many factors that contribute to the wellbeing of individuals and these vary from person to person. This can be shown the variety of stories that people shared with the team; everyone's life experiences were different.

The NHS Long Term Plan outlined the importance of integrated working in order to provide patients with pathways that approach the patient holistically rather than approaching each condition.

In Doncaster, the system has started working towards integrated working although there is still more work to do. This recommendation is to ensure that the continued work towards holistic working is maintained as a priority so that the patients are able to receive the best care for them.

### ***Recommendation 3: Doncaster Council to assess Carers Education and Support***

In June 2019, Doncaster Council did a piece of work to support carers within Doncaster. This piece of work looked to support carers and give them access to all the information they may require whilst caring for another.

The approach to carers within the Doncaster Council is encouraging as they truly value what carers provide to the system. However, some carers within the system continue to be without the information and support they would perhaps need, such as regular carers assessments. Therefore, Healthwatch Doncaster recommend that Doncaster Council assess how they are currently engaging with carers and see if there is a cohort of carers they could be missing when providing education and support.

***Recommendation 4: NHS Doncaster Clinical Commissioning Group to assess youth Gender Identity Services in the Doncaster Place***

Trans Mission has a truly positive and significant impact on individuals within Doncaster who are within or considering gender transition. However, Trans Mission is in a position to support adults rather than children and teenagers. Therefore, teenagers and children who require services to support them explore their gender identity have no services that can support their needs. In the pursuit of suitable services, the mother contacted Mermaids<sup>4</sup> on multiple occasions without receiving any response and the child's school referred them to a clinic in London.

Therefore, Healthwatch Doncaster would highly recommend NHS Doncaster Clinical Commissioning Group promptly look into how they will provide these services for children and teenagers in the Doncaster Place.

***Recommendation 5: 'The experiences of services within Doncaster'***

Healthwatch Doncaster recommends that the organisations listed in 'The experiences of services within Doncaster' section, review and apply any learning from feedback provided by the respondents.

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<sup>4</sup> <https://mermaidsuk.org.uk/>

## Appendix A: Doncaster Pride Site Map



## Appendix B: Cue Cards

**Have your say**

**healthwatch**  
Doncaster

Hello Hi

1. Do you know anyone who **struggles** with their **emotional well-being**?

**Have your say**

**healthwatch**  
Doncaster

Hello Hi

2a. answered **yes** to Q1:  
Did/could you help them?  
What did you do?

**Have your say**

**healthwatch**  
Doncaster

Hello Hi

2b. answered **no** to Q1:  
How would you support someone struggling?

**Have your say**

**healthwatch**  
Doncaster

Hello Hi

3a. answered **yes** to Q1:  
How equipped did you feel to help your friend?

**Have your say**

**healthwatch**  
Doncaster

Hello Hi

3b. answered **no** to Q1:  
How equipped do you feel to help someone struggling with their emotional well-being?

**Have your say**

**healthwatch**  
Doncaster

Hello Hi



4a. answered **yes** to Q1:  
Where did they find help?

**Have your say**

**healthwatch**  
Doncaster

Hello Hi

4b. answered **no** to Q1:  
What services may you signpost someone towards?

**Have your say**  
  


5a. answered **yes** to Q1:  
 What could have helped more?

## Appendix C: Healthwatch Doncaster Team and Interviewers

Recovery Games
Interviewer
Did not attend
Did not attend
Event Lead/Interviewer
Interviewer
Interviewer

### Acknowledgements

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