



# Healthwatch Wandsworth Assembly Report 2022

**healthwatch**

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# Summary

## Background

Healthwatch Wandsworth holds assembly events to discuss with the Wandsworth community developments in health and social care. We met on the 13<sup>th</sup> of October 2022 to discuss health inequalities. This report outlines the speakers that we heard from and the discussions that we had about health inequalities and working with different communities.

## What we did

At this Healthwatch Assembly we heard from a range of speakers including:

- Mary Idowu, Deputy Director for Wandsworth Place Partnership spoke about health inequalities and the impact of Covid-19
- Geetha Maheshwaran, Chair of Wandsworth Community Empowerment Network (WCEN) and Director of the Shree Ghanapathy Temple and Jacob Adams, Programme Manager, WCEN and June Pilgrim-Ndure, Project Manager WCEN told us about their work using an 'Asset Based Community Development Approach to Health Inequalities in Wandsworth'.
- Lynne Capocciana – Estate Art, who told us of her experience of 'Championing the health of Roehampton residents' and the great things she has achieved.
- Zahra Bihi, Elays Network and Zara Karimi, Live Karma Yoga spoke about their work with the local women in the community to improve health and well-being.
- Polly Rawlings, Healthy Communities Project Officer, Wandsworth Care Alliance told us about her approach to recruiting health champions.

During the day we all discussed how these projects work with their communities to help people improve their health and support people to get something they need and strengthen skills they already have.

## What we were told

In the discussion part of the day, we spoke about things to consider when working with communities. Drawing from the discussions we had as well as from the speakers that we heard from we drew out some key messages about working with communities and tackling health inequalities.

Some of the important ideas and concepts that came up around working with communities included:

- The importance of building and fostering trust between organisations and the community and key people in the community. This includes visibility and transparency – not just the presentation of statistics. This takes time. It is important to have time for meaningful conversations and for people to have time to be involved
- Good communication is key, especially for real listening and creating networks
- Make the most of different cultural approaches (and plan cultural sensitivity into projects)
- Don't just involve people but empower them, consider peoples' priorities and provide them with information
- Ensure accessibility e.g., language and format
- Consider what you can offer to someone who wants to be involved (e.g., incentives for volunteers and flexible involvement)

# Introduction

Healthwatch Wandsworth holds public events called assemblies to discuss with local people key developments in health and social care. We met on the 13<sup>th</sup> of October 2022 to discuss health inequalities with people working in to improve health in their own communities, often in partnership with the NHS and Wandsworth council. This report outlines what we heard from the speakers and the discussions that we had about health inequalities and working with different communities.

# Health inequalities

**Mary Idowu, deputy director for Wandsworth Place Partnership, gave us an introduction to health inequalities in Wandsworth.**

**Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. They impact on:**

- **Access to healthcare**
- **Experiences of healthcare**
- **Outcomes in healthcare**
- **Risk of health conditions**
- **How long your life is**
- **Health and well-being.**

Mary spoke about the importance of organisations working together to improve health inequalities. For example, housing and education impact health but are not related to the NHS, so organisations working together can have more of an impact on overall health and well-being.

Mary shared some examples of the impact of health inequalities across the country. Some of the information she shared included:

- Healthy life expectancy increases with average income
- Black women are four times more likely to die in pregnancy and childbirth
- People who identify as LGBTQ+ have higher rates of common mental health problems and lower well-being than heterosexual people
- People with learning disabilities were at higher risk of death due to Covid compared to the general population.

Mary outlined how Covid-19 has exacerbated many of these inequalities and highlighted opportunities to do things better. She went on to speak about some of the things that the Wandsworth Place Partnership are doing to change health inequalities in Wandsworth. Some of the examples that Mary gave included how Primary Care Networks (PCNS) are helping to tackle neighbourhood inequalities and how Core20 is looking at how they can reach communities that are impacted by health inequalities.

A copy of Mary's presentation and those of other speakers are available on our website:

<https://www.healthwatchwandsworth.co.uk/report/hwwassembly13thoctober2022>

**Geetha Maheshwaran, Chair of Wandsworth Community Empowerment Network (WCEN) and Director of the Shree Ghanapathy Temple, Jacob Adams, Programme Manager, WCEN and June Pilgrim-Ndure, Project Manager WCEN told us about their work using an 'Asset Based Community Development Approach to Health Inequalities in Wandsworth'.**

Geetha spoke about how WCEN has worked alongside the NHS to improve health inequalities. Their approach uses partnership to tackle issues such as religious groups and ethnic minorities presenting late at A&E for things that could have been avoided, why they might not take part in preventative programmes such as health checks and mistrust of authorities. Through working in partnership and with the support of funding from the Health Innovation Network and Wandsworth NHS, WCEN created culturally tailored solutions to improve the health and well-being of communities. There was a focus on catching long-term conditions at an early stage. Health clinics were launched before the Covid lockdowns and time during the lockdown period was used to do training.

Through this project, it has been possible to bring people together and build trust within the communities. It was important to train leaders within the relevant communities to help build this trust and become health coaches. These health coaches didn't just take care of their own communities but also had a passion for helping others too, for example, Christian and Hindu volunteers visited other places of worship or community groups supporting different demographics in Wandsworth.

**Zahra Bihi from Elays network and Zara Karimi from Live Karma Yoga spoke about their work together tackling health inequalities in Wandsworth.**

Elays started 20 years ago, initially working with young people. They quickly realised the importance of working with the family unit. To start addressing inequalities they wanted to discover what people wanted support with. When they talked to people a theme that came up, again and again, was wanting physical activity. In November 2021 a partnership was created to provide yoga to the Elays community. The feedback from the ladies attending yoga and fitness classes has been incredibly positive as participants have built strength and confidence and the yoga has helped physical and mental health and well-being.

**Polly Rawlings from Wandsworth Care Alliance**

Polly introduced her [new project](#) to recruit organisations as health champions to signpost more people to support health and well-being. Health champions are people who work with community organisations in Wandsworth and they help keep people informed and up to date with the information that they need to keep safe and healthy. Funding is available for organisations for up to £8000 and the application process is as simple as possible. Polly and her team can offer support to draft applications. There will need to be some information collected about what the health champions achieve, but there is flexibility in what this is, for example, it can be a video.



“Those of us who live on an estate like the Alton, live in some of the most deprived parts of the country, not just London. It means that many of us are more likely to suffer from serious health conditions due to inequalities in access in health care. But I also see a community full of big hearted and talented people. And I fully believe they deserve the best, not just in health care, but also opportunities.”

Lynne  
Cappocciama



**Lynne Capocciama told us about her experience of championing the health of Roehampton residents. She runs the community health champions programme in Roehampton. Lynne outlined how the scheme is designed to be for the community and run by the community.**

Lynne outlined how sometimes residents in Roehampton don't trust statutory bodies like the NHS and the council and how programmes like this can help the communities to support themselves and each other. Lynne addressed the stark health inequalities in the most deprived parts of the country, with people in these areas, such as Roehampton, more likely to suffer from serious health conditions due to inequalities in access to healthcare. Running her project, Estate Art, and supporting people in many different ways through the Covid-19 lockdowns Lynne was motivated to support people through hardship and experienced first-hand people coming together to support one another.

# Discussion

## Discussion topic one

Discussion plays an important role in Healthwatch Assemblies. Our first discussion topic questions was:

- What is important to make sure projects (like the ones we've heard about) can work with or work alongside the community to help people maintain or improve their health?
- Why might people come forward to take part or why wouldn't they?
- How should organisations make sure that champions are representative of their community?

In response to this series of questions, we spoke about ensuring that outreach is effective and accessible. Some of the things that came up in conversation around this included ensuring that elements such as visibility, transport, physical accessibility, education, language and utilising neutral or informal environments are considered in planning outreach.

We considered what factors could act as a uniting force, inspiring people to come and work together. Some ideas around this included elements of people's identity such as religion, place, food, arts and other incentives.

### Other factors impacting engagement

Positive impact on engagement	Negative impact on engagement
Covid has made people more aware of health and social care issues	Technology can be a barrier for many people
Identifying people who are committed to making a change	Fear of being used by the council to improve their image
Empowering communities and thinking culturally to be their own advocates	Differences in health care provisions and responses between organisations

We spoke more about technology and what types of technology might encourage or discourage people from taking part in something. For example, Whatsapp groups can appear easy to access and take part in whilst accessing something via a laptop might be difficult or impossible for some people.

Throughout this discussion topic, the importance of trust came up repeatedly. We spoke about how it's important to ensure that engagement is impactful and helps create lasting change.

## Discussion topic two

- What is most important to make sure that projects:
  - a) support people or communities to make or build strengths/skills/tools?
  - b) provide something the community needs?
- What would the community want to get out of taking part?

In this part of the discussion, we spoke about what is important to people taking part in projects like the ones we heard about earlier in the day. Some of the ideas raised included the importance of the involvement of different groups, the opportunity of receiving a grant or funding, and how attending a meeting is the best way to find out things about the project. Other ideas included:

- Raising awareness
- Communication
- Understanding and listening to all views
- Attendee needs being listened to, and solutions found with them
- Creating sustainable improvements in well-being through building skills in the community
- Supporting mental well-being
- Supporting Employment
- Giving participants a sense of self-worth
- Documentation of work

A question that arose during the second discussion was "What training would people expect?" There were many ideas about this:

- Communication – networking
- Training including accredited training courses

- Reducing isolation e.g., social events, workshops
- Accessibility – e.g., language, culturally appropriate

A final question in this part of the discussion was ‘What could be pooled or shared?’. Below are some of the suggestions that were discussed:

- Knowledge
- Skills
- Sometimes there is a need for some people to be paid
- Experience
- Encouraging people to speak in public (e.g., projecting voice)
- Encouraging people by making them feel safe, and remembering confidentiality
- Trust
- Changing mindset of youth (and they can influence parents)
- Ongoing evaluation
- Open forums/conversations to share experiences
- Re-grouping after training
- Coaches/champions – supervision and help with boundaries/safety.

# Conclusions

In this section of the report, we want to draw out some key themes and messages from the speakers we heard and the discussions that we had at our Healthwatch Assembly in October 2022.

Firstly, it is important that projects tackling health inequalities incorporate the following, where possible, to make sure they can work with and alongside the community:

- Build and foster trust between organisations and the community and key people in the community. This includes visibility and transparency – not just

statistics. This takes time, and time is important for meaningful conversations and to give people time to be involved.

- Good communication – real listening and creating networks
- Making the most of different cultural approaches (and ensure projects are culturally sensitive)
- Not just involving people but empowering them, considering peoples' priorities and what they want and providing them with information.
- Ensure accessibility e.g., language and format

Additionally, when working with people and involving different communities it is important to consider offering;

- Accredited training and a network of support and social aspects to reduce isolation
- Flexible/accessible involvement e.g., at accessible times or day and giving people time.
- Incentives for 'volunteers' and consider payments and funding
- Inclusive approach that doesn't judge and can support people to build their self-esteem and confidence
- Consider supporting mental well-being.



# healthwatch

Healthwatch England  
National Customer Service Centre  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA

[www.healthwatch.co.uk](http://www.healthwatch.co.uk)

t: 03000 683 000

e: [enquiries@healthwatch.co.uk](mailto:enquiries@healthwatch.co.uk)

 [@HealthwatchE](https://twitter.com/HealthwatchE)

 [Facebook.com/Healthwatch](https://www.facebook.com/Healthwatch)