

Saalik Youth Project #SpeakUp project report

Understanding how young Pakistani Muslim people experience health services in Sheffield



#SpeakUp: Saalik Youth Project

What is #SpeakUp?

#SpeakUp is Healthwatch Sheffield's micro grants programme, offering funding of £2000 to not-for-profit, voluntary, and community groups. The purpose is to run a project which will reach out to people across Sheffield, and hear what matters to them in relation to health and social care. By working with groups which are already trusted partners in their communities, we can make sure we're hearing from even more people, including those whose voices aren't often heard by decision makers.



Saalik Youth Project

Saalik Youth Project are a local grassroots-based youth project that aims to serve and support the advancement of young people and the community facing disadvantage; with a focus on ages 6-25 and those from ethnically diverse backgrounds and origins. To advance their interests; confidence; self-esteem; and aspirations enabling them to realise their potential by promoting and providing various cultural; educational; social; and recreational activities.



Healthwatch Sheffield

Healthwatch Sheffield Healthwatch Sheffield helps adults, children and young people influence and improve how NHS and Social Care services are designed and run. We're completely independent and not part of the NHS or Sheffield City Council. We want to understand your experiences, and help your views to influence decision-makers in the city.



Introduction

Why did we carry out this SpeakUp project?

Part of our service to young people is to improve health and wellbeing; we wanted to capture their voices so we can provide services to support them.

We also want to share their views with decision-makers in the NHS and local Council so they understand the perspectives of young Pakistani Muslim people living in and around Burngreave, and highlight what their needs are.

This is a highly populated area with high levels of deprivation, crime, and poorer health outcomes than average, which all contribute to poor health and wellbeing.

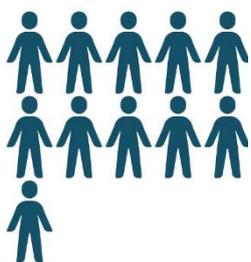
What did we do?

For our SpeakUp project, we hosted conversations with young people through our boys' group and girls' group in July 2023.

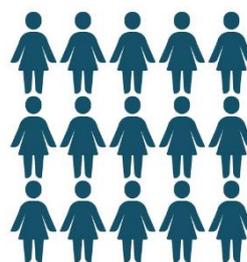
We talked about their experiences of accessing health services in Sheffield, what the barriers to accessing care might be, and how they would like to see things improve.

We also talked about the role the internet plays in health; from where people get information about health, to using apps, and the impact of social media. The girls' group did some work to create story boards, with ideas for social media videos that could provide informative health messaging.

Who did we speak to?



We held one session with the boys' group, where we spoke to 11 young men aged 17-20.



We held two sessions with the girls' group, where we spoke with 15 young women aged 13-26.

All the young people we spoke with were from Pakistani Muslim backgrounds, living in and around the Burngreave area of Sheffield.

Findings

Young people's experiences of health services

People told us about a range of services they and their families had used recently, with a range of positive and negative experiences shared:

A&E **Hospitals** **Opticians** **Walk-in centre**
School/college wellbeing services
Dentists **GP practices** **Pharmacies**

What makes a positive experience of care?

We heard some positive examples of using **urgent and emergency care** at the Walk-in Centre and at A&E (both the Children's and Northern General). People told us about long waits, but felt the care once they were seen was good:



"They put the walkable on and they said you'll be fine in six weeks, all like that"

"Efficient when get seen"

"[A&E] have a good system. You have to wait but they are good"

Efficiency more generally was highly valued, with other positive examples shared:



"My GP surgery is efficient – it's really good"

"Opticians are good. They get you in straight away and they get checked up straight away and they prescribe you and check you properly"

Flexibility was another key theme in people's positive experiences. Where services or professionals were able to work around people's schedules or preferences, this



made for a better experience:

"If you tell the GP you need a call at a certain time they will try their best to do that"

Good treatment explanations are also important, with people praising opticians and dentists who had taken the time to explain the check up, and ask them broader questions about their health, wellbeing, and personal lives:



"The experience is good. They'll tell you what you need"

"They have a conversation with you and everything"

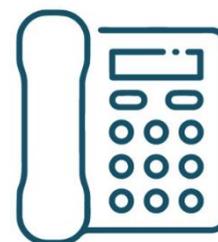
What leads to a less positive experience of care, or makes it harder to access?

Some of the experiences people told us about were less positive. We have drawn out the key aspects of these experiences below, along with topics that came up when we spoke about barriers to accessing care in the first place, in order to understand why people might not present to a health professional when unwell or feel confident they will get the care they need.

GP appointment systems don't fit around school, college or work

One of the most common negative experiences we heard about was booking GP appointments, which was described by many as difficult. People spoke about the '8am rush' for same-day appointments:

"I start work at 8am, so I can't phone then. I can phone at 8.15 but by then it's too late, all the appointments are gone"



People also told us that not being able to book advance appointments caused frustration. One person spoke about having to go to the GP on a regular basis for blood tests, but they are not able to book these in advance; they have to go through the same-day appointment booking process for several days each time, until they are able to book one. Another said:

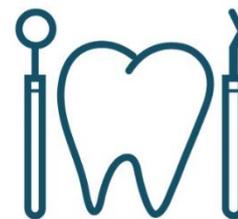
"The GPs, their appointment systems don't make sense, you can't book for the next day you have to book on the day – so you have to wake up at 8 o'clock and ring but if you ring at 7:59am they'll say they're closed so you ring at 8:00 and then you'll be in a queue of like 20 people. You have to wait all the way and then if you get to the other side they tell you there's no appointments left. Then you ring the next day [...] we should be able to book for the next day [...] it's just silly"

We also heard that telephone appointments aren't always suitable for this age group. People spoke about not being able to pick up the phone during college classes, meaning they missed appointments:

"The system is always that the doctor will call you, but they don't say a time. You can't pick up a call if you are in college"

It is difficult to see an NHS dentist

Dentists for the most part received negative feedback. When people were able to get an appointment, most were happy with the care they received, so negative feedback related specifically to the difficulty of getting an appointment and lack of communication about how the NHS dental system works:



“It’s got a huge waiting list, and I waited for ages and then they kicked me off the list”

“I haven’t been able to see a dentist for about 3 years [...] they lost their NHS dentist and they haven’t got one back”

“They said they would see my son on the NHS if I registered as a private patient myself”

“If you missed one appointment [...] you have to be on the waiting list for about a whole year”

The location of services can be a barrier to accessing care

The location of services was often cited as a barrier to accessing care, or a factor that made it more difficult. Young people might be more impacted by services being far away from where they live, as they are more likely to be reliant on public transport, or being driven by parents if they have a car.



The girls’ group spoke about this much more than the boys’ group. The girls had a conversation about the cost and logistics of travel, saying that it can be difficult to get to appointments because of the cost of bus fares, but also that there isn’t always a bus that gets you where you need to go at the right time – the area is not well connected to some of the services in Sheffield. This is particularly an issue when attending more specialist or urgent services, rather than their regular GP or dental practice:

“When you phone 111 they might offer you an appointment somewhere but they book you in where there is space, not where is easy for you to get to”

Some of the group also said they had been offered appointments at other GP practice ‘hubs’ – ones that offer weekend or evening appointments, or offer additional services – but that these could be really hard to get to.

The way health professionals interact with patients can create a negative experience

In the same way that professionals explaining things in detail led to a good experience for some people, we also heard that poor communication led to a bad experience for others. Healthcare professionals not explaining diagnoses or treatment well, or not including people in decisions, didn't help young people to build trusting relationships with them:



“They just be rushed with the decisions”

Staff attitudes more generally could also lead to negative experiences – the boys' group felt that doctors (especially in hospitals) could be “rude” and dismissive: “just like ‘OK, go – see you later’”.

Waiting times cause frustration and delays to care

People spoke to us about long waiting times – both to get an appointment, and to see a health professional when you arrive for your appointment.



They boys talked about how long it takes to make a GP appointment:

“If you want to make an appointment with your doctor [...] it takes about two and a half months, two months to make one”

They also talked about waiting in A&E for a variety of reasons – broken legs and head injuries – and felt they waited for longer than they would expect:

“I cut my head open and they made me wait for like three hours. While my head was still bleeding”

“I cut my head open as well, so I had to wait four hours for them to just glue my head back together”

One young person has a relative who uses a wheelchair, and they described how there was a two week wait for repairs when the wheelchair broke:

“It couldn't be fixed for 2 weeks [they] were expected to stay in for 2 weeks because that chair was the only transport they had”

Support services within schools and colleges were not viewed particularly positively

We asked both groups about their experiences of accessing wellbeing services within schools. Both groups had some awareness of this kind of support being offered in schools and colleges, but did not describe having used them. There was an overall negative impression of this service offer, not feeling they would be much help:



“They don’t really help much [...] I think that people go there to miss out on classes, to take time off class”

“They call it wellbeing don’t they, but you do therapy or just stuff like that”

The rising cost of living has a negative impact on people’s health and wellbeing

A barrier to accessing care mentioned by both groups was the rising cost of living. Transport costs were mentioned by several people – some people received support with this (“Sheffield City Council pay for my bus fare”).



Others said getting to appointments can be difficult because of the cost of bus fares. There was also speculation that some of their friends were not attending as many social activities or groups because they couldn’t afford to:

“A lot of people make excuses, but maybe they don’t want to tell people they’re struggling with it because they might feel embarrassed”

The other cost mentioned was for prescriptions – one young woman said she would have to stop taking some medication:

“Prescription prices are ridiculous – I paid £9 for my iron tablets and thought ‘I’m never taking those again’”

We did have a conversation about ways to reduce healthcare costs, including buying some medication over the counter instead of by prescription, but neither the GP nor the pharmacist had made her aware that she might be able to save money in this way.

Cultural barriers for young Pakistani Muslims

Overall, both groups said they didn't feel their cultural background as young Pakistani Muslims had been a barrier to them accessing services. Neither the boys' nor the girl's group saw race or ethnicity as a major barrier to accessing health services.



However, they both mentioned that professionals working in local services came from a range of ethnic backgrounds and they seemed to value this, so this is likely a contributing factor. One of the boys said:

"My dentist [...] he's Pakistani so that's not really an issue"

We asked whether a health professional's gender was important to people – the girls' group did feel they would rather see a female doctor where possible. However, they said they would see a male doctor for some issues, or if it was urgent. They didn't suggest this had stopped them from being able to access care they needed in the past:

"If you were desperate and you had no choice you would, if it's that or wait weeks when you really need to be seen"

Doctors' gender was less of an issue for the boys' group, who told us that for the most part they would be happy with male or female GPs:

"I don't mind. As long as you can help me"

People from both groups did tell us about barriers that existed for their parents and grandparents – we heard about the young people regularly attending health appointments with older relatives to act as interpreters. One young man told us:

"My dad went to his optician appointment. I went with him because he doesn't know the language too well, so I have to go with him too"

Some of the girls' group shared the ways in which this can be difficult – "you can't get across exactly how they are feeling". They said this was partly because interpreting is challenging, and there might not be direct translations for certain phrases or feelings. However they also identified that being a family member acting as an interpreter carries extra challenges, as it's difficult not to add thoughts in yourself, or adapt what the person is saying to what you think they mean.

How could services improve people's ability to access them, and people's experience of care?



We asked both groups what they thought would make health services to improve. They shared some specific ideas for how services could improve for them as patients, but also reflected on how the health service could improve as a whole:

- Lots of people said the appointment booking system needs to improve – there need to be more flexible ways to book and more appointment options. For instance, young people said they would like to be able to send a text or message– they identified that one local GP practice in Pitsmoor used to have this system and it was well received, but it no longer offers this service. This offer should sit alongside phone and face-to-face options, and should be less restricted to particular times of the day.
- People shared strong feelings about NHS staff retention. The boy's group shared concerns about staff wellbeing in the NHS, saying they are “always stressed” and understaffed, and are not treated fairly. They felt addressing staff retention and increasing staffing levels would have better outcomes for patients, too “it's going to shorten the waiting times”, and allow staff “more time to spend with the patients”.
- Both groups chose to talk about the ways the NHS could appeal to a wider group of potential healthcare professionals. They would like to see more funding, apprenticeships, and other routes in to the NHS workforce that would make things more equitable for families who cannot afford extra tuition or support to get their child into a medical degree at university, particularly working-class people and people from ethnic minority backgrounds.

The role of the internet in health and wellbeing

Where do young people go to find information about health?

We asked both groups where they would go to find information about health and wellbeing they were concerned about a particular issue.

Nearly everyone said they would go online – mostly using online services offered by statutory services. People spoke about the NHS website (particularly the Health A to Z section) and the NHS app:

“The NHS website, it’s really good. It’s very specific, it tells you symptoms, treatment”

“It’s really really good, if you haven’t got the NHS app I would say download it. It shows your history, you can see consultations, your vaccinations, your Covid pass, you can order prescriptions”

People also spoke about NHS 111 – either using this online or calling them up – and those who had used it had found it helpful:

“You can also call 111. I think it’s for non-emergency or something like that. You can call them to request information. They’ll tell you whether you need them to go hospital or appointment”

Other statutory service people mentioned going to for advice included the Walk-In Centre, and their local pharmacies. People liked services you could refer yourself to for advice and support, like IAPT.

Both the girls’ and the boys’ groups mentioned traditional or home remedies recommended by older relatives. The girls’ group said they would use these if they were offered them by family members, but wouldn’t actively seek them out themselves. The boys’ group were more mixed, with some saying they would approach elders for advice:

“There’s also natural memory [...] when you ask the elders in your family [...] I would have to have a bath in apple cider vinegar, you pour a cup inside it because I didn’t want to go to the hospital or the doctors or something like that. And it worked. It worked quite well”

As well as seeking information about particular health concerns, both groups also told us about ways they use technology to keep track of their general wellbeing. It was common to use the in-built step counters on smartphones, as well as apps for counting calories, monitoring water intake, and tracking sleep and exercise.

What role does social media play in health and wellbeing?

While people generally thought the internet was a useful tool to support health and wellbeing, this did not extend to social media. Both groups felt that social media had an overall negative impact on their health – particularly mental health. The girls' group said that Instagram could be detrimental, so they do not really use it:

“It gives you models etc to look at, which makes you think you need to look a certain way”

However, avoiding social media entirely doesn't feel possible to people. Lots of the group felt that it would have a negative impact socially:

“When I didn't have a phone there were jokes going round I didn't understand”

“You get judged”

“If you don't have social media you can feel left out”

The girls did use Whatsapp – but didn't consider this to be social media – and TikTok. They said they would get information about health from TikTok, but it “depends what it is”; it can be difficult to know who is sharing accurate information on platforms like this, and the girls said they would mostly look how many followers the person had as an indication of whether they were trustworthy.

The boys had similar feelings about the impact of social media on body image and mental health:

“People look at like models and stuff like that, and then they want their life”

They also talked about the impact of scrolling through social media, or online gaming, for hours:

“If you spend too much time on your phone, going through TikTok or whatever it is then two or three hours will go by so quickly and then you don't feel good afterwards”

“They're mentally tired from all that scrolling”

Storyboard exercise: How could we use social media to share positive health messaging?

The girls' group were interested in the role social media could play in health and wellbeing, so we held a second session with them to follow up on this idea. We asked them to explore the idea of creating a short film, shareable on Whatsapp, TikTok and similar, that would inform young people about a health priority.

What are your priorities for maintaining good health?

The first task was to identify health priorities for themselves and their peers – ‘what would you advise someone like to do to be healthy?’ Below are some of the key themes they identified, and the advice they would give for each.

Eat healthily:

5 a day, eat well, understand nutritional info – get enough protein etc

Drink more water:

Water!!

Healthy habits:

Maintain routine, stay consistent – small but purposeful, time management, less time on phone, set goals and regularly review them, don't stay in your room all day, hobbies, meditation



Get enough sleep:

Good sleep routine, sleep and get rest, sleep better

Socialising:

Spend time with loved ones, socialise, maintain healthy relationships with friends and family, spend more time around others – no isolation, include yourself in events, talk

Exercise:

Exercise, dancing, go for a walk, be more active, go out and about

How would you get these messages across?

We then asked the girls to create storyboards for a video, showing one of the messages they identified as important for their age group. Some wrote out their ideas, while others drew them

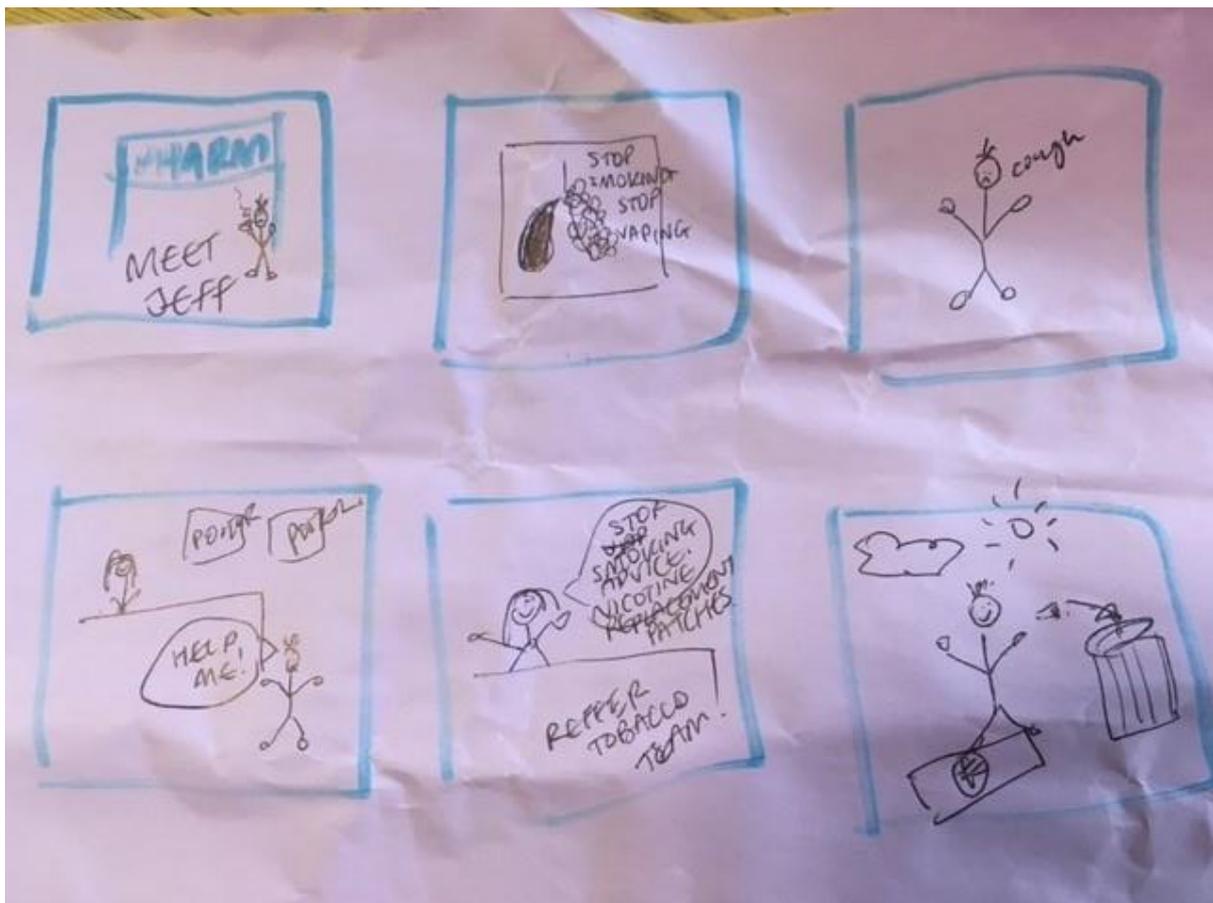
Bad sleep vs good sleep: The character is moody and tired, has a lack of focus and is pessimistic. After a good night's sleep, they are happier, refreshed, in a good mood and positive.

Socialising: The character maintains good relationships with family and friends and looks after their mental wellbeing. They talk to each other and are comfortable and open.

Healthy food: An information film, which has details of how to understand information such as protein needed to maintain a healthy lifestyle, but also to eat to your fullest.

Managing mental health: Starting the day – the character is an overthinker. They wake up overthinking. Their bedroom is messy and dark from having the blinds closed. Two people come in and take the character out of the room into a nice vibrant environment.

Vaping: The character is vaping outside a pharmacy. He notices a Stop Vaping support group poster in the pharmacy window. He starts coughing and decides to go into the pharmacy to ask for help. He is referred to the group and given advice and choices on how to stop. He leaves the group happy, throws his vape in the bin and looks at the extra cash he now has.



Recommendations

Flexibility is key for young people's services:

A range of individual circumstances can make accessing services difficult and should be considered when offering appointments – for instance, are people able to travel, or take a phone call in the day?

Good communication is valuable:

Young people are generally good at navigating the healthcare services they need, but additional explanation is valuable especially when experiencing things for the first time – for instance the process of buying over the counter vs prescription medication, or knowing what might happen in A&E

Young people acting as interpreters is not always appropriate, and creates additional barriers to care for families:

Services need to make better use of their formal interpreting contracts to book independent professionals for appointments. Placing this expectation (either formally or informally) on younger relatives also creates additional difficulties in booking appointments at times that suit all those involved.

Young people want to see themselves reflected in the healthcare workforce:

Consider increased outreach work in community settings, with the aim of showcasing a range of education and employment opportunities in the health sector, for people from a range of backgrounds – for instance visits from professionals, universities and colleges.

Young people increasingly access information and resources online:

Consider using these online platforms to engage more authentically with young people – for instance working with them to create resources that could be shared online with their peers.