

Community Champion Diabetes Findings

Healthwatch Kirklees

Introduction:

Between March and July 2023, Third Sector Leaders Community Champions engaged with local communities to understand;

- Diabetes and risk factors awareness
- The challenges and barriers to accessing diabetes services and support faced by individuals

A total of 1,869 individual conversations were held, and community champions reached out to various community segments, engaging 1,123 people through groups—a total of 2,992 conversations.

The findings were categorised based on demographics, including deprivation deciles, gender, age, and ethnicity.

Community Engagement & Awareness Efforts:

- 2,511 individuals were informed about diabetes symptoms and risk factors.
- 822 people were informed of the NHS Diabetes Prevention Programme.
- 334 respondents were directed to peer-to-peer support services.
- 1,232 individuals were directed to local diabetes-related activities.
- 465 people were advised to consult with their GP.

Current Service Utilisation:

- 195 individual respondents were already utilising some support for their pre-diabetes or diabetes.
- 122 of those received support from a GP, while 51 accessed support from hospitals, 33 from nurses, and 12 were supported via medication.
- Notably, 95 individuals diagnosed with pre-diabetes or diabetes were not accessing any support.

Key Findings:

Barriers to accessing services and support:

- Over 25% of all respondents mentioned a **lack of awareness of services and support** as a significant barrier. This indicates that outreach and communication efforts currently being completed by the NHS system and/or third-sector support organisations might not effectively reach all community segments or that the information provided is not easily understandable.
- **Language barriers** were prevalent among individuals in deprivation deciles 1-3 (postcodes HD1, WF13, WF5, WF16, WF17) and among those identifying as Asian or from “other” ethnic backgrounds. Such barriers can arise from the unavailability of health materials in various languages or the lack of interpreters in medical settings. 22% of diabetic people and 16% of pre-diabetic people mentioned language or understanding as a barrier to accessing services or support.
- Individuals in **deprivation decile 8** (postcode areas: HD8 and HD9) mentioned financial barriers. This could hint at concerns over hidden costs, perceptions regarding the quality of available free services, or the financial implications of taking time off work or other commitments to access services.

Demographic Insights:

- Those **aged 50-79** mentioned disability as a barrier to accessing support or services, reflecting potential challenges in physical accessibility or availability of specialised care.
- Individuals **aged 25-49** highlighted time constraints as a barrier. This could be due to work commitments, family responsibilities, or the perception that seeking support might be time-consuming.
- **Females** were more likely than men to state access to services and language/understanding challenges about accessing support and services. This might arise from traditional gender roles, where women might have more caregiving responsibilities – limiting their time, or feel less confident in navigating health services due to sociocultural factors.

- Those with **learning disabilities** faced language/understanding barriers and high costs, suggesting that standard health communication methods might not cater to their needs and that there might be insufficient financial support or clarity regarding costs for this group.
- Individuals with **physical or mobility impairments** talked about time constraints due to the additional time needed to commute or access services tailored to their needs.
- Those who identified themselves as a **Black** ethnic group predominantly highlighted a lack of service awareness, potentially hinting at a gap in community-specific outreach or representation in health promotion efforts.
- **White and White Irish** respondents mentioned access to services and disabilities, suggesting that even among English-speaking populations, there are challenges related to service accessibility or potential comorbidities.

Recommendations Healthwatch will be taking forward to the NHS and social care system:

Awareness:

The unanimous mention of a lack of awareness across all demographics underscores the need for more robust outreach and education efforts.

- Design targeted local awareness diabetes campaigns that address the unique needs of various demographic segments.
- Collaborate with community leaders, community champions or influencers to build trust and amplify outreach.

Language & Communication:

Beyond the linguistic challenges often associated with non-native English speakers, the data revealed that individuals with learning disabilities also face similar barriers.

- Offer translation services, culturally sensitive materials and resources that are Easy Read.
- The NHS and social care system, locally, regionally, and nationally, should complete further work concerning communication preferences to personalise care within NHS and social care software systems.

Time Constraints:

Time emerged as a significant barrier, especially among working-age individuals and those with physical impairments.

- Increase communication of the enhanced flexible service hours currently available in Kirklees.
- Offer alternative service delivery methods for services and support.
- Provide NHS and social care professionals with details of community champions peer-to-peer support or community-based diabetes support activities.

Gender Disparities:

Women's distinct challenges, particularly regarding language and understanding, emphasise the need for gender-sensitive approaches in service provision and communication.

- Healthwatch Kirklees will undertake a women's health engagement project from October 2023 to Dec 2023 to understand gender-sensitive approaches further.

Continuous Feedback:

Regularly engage with the community to understand evolving needs and refine strategies accordingly.

If you require this report in another format, please get in touch

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