**Thematic analysis**

**Ethnic Minority Health Needs Assessments 2023**

In 2022/23 a series of Focus Groups have taken place with ethnic minority communities across Doncaster. Consultation took place the following groups:

* The Caribbean community
* Muslim ladies’ group
* Asylum Seekers (International Hotel, Ramada Hotel and The Conversation Club)
* The Chinese community
* The Polish community
* The Roma community
* The African community

Themes were as follows:

* Access
* Mental Health
* Community Transport
* Community Space/Involvement
* Housing
* Community Safety
* Funding
* Employment and volunteering
* Misc

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| **Mental Health**  **Asylum Seekers (International Hotel)**   * Mental health support should be offered as soon as people arrive to the hotel. * People seeking asylum are very isolated, this contributes to mental health issues and concerns.   **Asylum Seekers (Conversation Club)**   * Trips out to see different places and environments, this could help with both mental health and wellbeing issues and provide an education on the UK and its geography. * The creation of a football team and other physical activities that have positive effects on wellbeing and help combat boredom. This will also create a sense of community within the hotels. * additional services coming in to support and educate on topics such as vital system navigation, health and wellness concerns and guidance on accessing services   **Asylum Seekers (Ramada Hotel)**   * Long wait times for Home Office decisions, leaving many residents living at the hotel for longer than usual periods of time. This has a huge impact on individuals mental health, leading to issues with physical health. | **Community Transport**  **Caribbean community**   * Lack of facilities in local areas away from town centre, no local based services and facilities for those unable to travel into town * Accessing facilities in town centre can be difficult as public transport is not great, especially if you have mobility concerns and often puts people off from even trying to access support/facilities * Not enough public transport access to local attractions for local people * Transport that is more accessible with links from places further out of town centre * Increase accessibility for those with mobility concerns   **Polish Community**   * School buses;   + McCauley School, there is only one bus organised by the school yet they have many after school classes and extra curricula activities, but many pupils are unable to attend unless their parents can collect them or they use public transport which is normally very busy.   + Hallcross Lower, it is 1 hour by bus to get from Balby to Hallcross lower school, commuting in Doncaster is difficult   + Issues raised around safety, in winter as it gets darker earlier but also pupils will be travelling alone, raised as a safeguarding issue.   + The council allocate the school places and have given places that require travel and therefore need to ensure there is adequate provisions in place to support their decision to place children where they do.   + It was highlighted that there used to be more school buses for McCauley, but they were vandalised and not replaced   + McCauley is split into three sites, lower, upper and 6th form. If you miss the school bus for 6th form you have to get a bus into the city centre and then a second bus to school.   + If the school organises after school activities like McCauley’s they need to ensure transport is also arranged   **Asylum Seekers (Conversation Club)**   * Those in dispersed accommodation in more rural areas are financially unable to access city centre services. This leaves them at a disadvantage when reaching out for support and guidance. This also applies with access to amenities such as the library, centre based events and green space activities.   **Muslim Ladies**   * Better, transport access across the City, more busses to local attractions around Doncaster to make them accessible to everyone   **Chinese community**   * Transport to hospitals like Mexborough   **Asylum Seekers (Ramada Hotel)**   * Lack of funds to access local transport |
| **Housing/Accommodation**  **Caribbean community**   * Long waiting times for repairs, sometimes waiting months for STLH to respond * Mould and damp issues are not classed as a priority but cause serious health issues * More support with smaller issues so that they do not turn into bigger problems * Tackle maintenance when reported * More communication * Make issues such as mould a priority * Listen to the tenants more   **Asylum Seekers (international Hotel)**   * People staying within the hotels for long periods, while others are moved on quickly. * No transparency on how their claim is progressing with updates that are more regular. * Feel like they do not have a right to an opinion and they have no autonomy in their day-to-day life. * Would like more say on food, especially around religious festivals. * No communication around how to navigate religious festivals and fasting etc.   **Asylum Seekers (Conversation Club)**   * Lack of thought from Home Office when housing people in HMO’s leading to issues around safety and cultural differences. * Accommodations in poor state of repair and when reported, nothing seems to be done. * No housing officers to support with repairs. * People staying within the hotels for long periods of time, while others are moved on quickly. More transparency on how their claim is progressing with more regular updates. * Those housed in rural areas have little to no support; they feel that they are forgotten. * Mears no longer have wellbeing officers and so they are cut off from that kind of support, especially in rural areas. * Feel like they are only seen as a number   **Asylum Seekers (Ramada Hotel)**   * Lack of autonomy, so smaller things such as food become a big issue. * Hotel is very isolated and residents themselves feel isolated leading to negative impact on mental health. * The stay at the hotel is supposed to last a few months, most have been there over a year. * Residents feel like the Home Office has forgotten about them | **Community Space/involvement**  **Caribbean Community**   * Not enough local community centres for groups to meet and support each other. * People don’t know when there are city and community events happening * Since the pandemic venues for community group have closed * Build more local community centres that can cater for support groups that provide a vital service, with suitable access for everyone * Priorities local community groups * Bring services to communities that are further away from town centre, such as council services, NHS services, housing etc. to support those unable to get into the city centre * More community activities, such knitting groups and crafting groups * More news available locally regarding support/ community activities/ events. Use village notice boards, churches and social media and already established community groups   **Polish Community**   * They have a good place to meet with St Peter’s in Chains and there used to be a Polish Club outside of the church. If would be good to have this again like with the Ukrainian Club so they can meet up. Potential venues suggested:   + Central, Nether Hall Road as there are lots of Polish shops there, would be good to have a central space.   + The group highlighted that there are many buildings around that are empty e.g. Diamond Lounge, that could be used for community groups   + Natasha will share a list of buildings that can be rented at a small cost.   + Having a community facility would help the community and would help the council and other organisations to work together. * Scouts has recently been set up and is good for the children to have something they can access and enjoy.   **Asylum Seekers (International Hotel)**   * No physical activities offered to support health and wellbeing. * Unable to visit friends and stay over, or have friends come and visit them at the hotel. This leaves residents feeling very isolated. * No planned activities to break up the days. * No support with integration within the communities they reside in. * Receive racial abuse and made to feel unwelcome when they go out. * Trips out to see different places and environments, this could help with both mental health and wellbeing issues and provide an education on the UK and its geography. * The creation of a football team and a programme of activities that have positive effects on wellbeing and help combat boredom. This will also create a sense of community within the hotels.   **Asylum Seekers (Conversations Club)**   * More support with community integration, though events and community volunteer groups. * Hold more groups that allow people seeking asylum the chance to speak out on issues that affect them more often. * More police outreach work, to build reassurance and trust between people seeking asylum and the police. * More training around trauma informed working, cultural competency ensuring that any hate and racially motivated crimes against people seeking asylum is dealt with in the right way.   **Muslim Ladies**   * Lack of community groups and activities for all ages, but it was highlighted that specifically that there is a gap in services for 12 to 16/17 year olds, adding they have very little in the way of activities and youth clubs. * More access to community halls. * Not enough funding for those that want to set up community and support groups. * There is a need to have more of an awareness of the Muslim culture, the religious events and time when they will be fasting etc. in order to offer support and flexibility in jobs and this may encourage more members of that community to feel comfortable applying for vacancies within organisations such as Doncaster Council, St Ledger Homes * Publicise attractions more, as many do not even know they exist. Send out a local attractions guide to all community groups, Facebook and Council communications. * Have offers for those living in Doncaster, giving a discount on attractions and events. * More inclusion with events held. * Easier access to funding for community organisations. More groups will form to help our diverse communities as a result of this. * A bigger focus on culture and celebrating the diversity within Doncaster, this could be with religious festivals, culture fusion events etc. * Encourage local walking groups, yoga classes, and other well-being groups to conduct classes in parks; this will help with problems such as poor mental health, social isolation, and community cohesion, as well as support smaller independent businesses and support organisations.   **Chinese Community**   * A community setting for people to attend that are socially isolated- the centre to   + Be a good environment that is easily accessed   + Have a community kitchen, teas and coffees, music   + Offer painting, card games * Use the community group to communicate about services * Peer support for carers. * it would be good to look at doing activities around food and do some day trips   **Caribbean Community**   * Lack of diversity in some areas with few or no black people. Often feel unwelcome in certain places. This leads to suspicion from people in certain areas. Not outright racism but its obvious that people are not used to seeing black people and will stare. * Education needed in some communities to help with community cohesion (could be via event or community building techniques). If a Caribbean event took place, it would help with cohesion and expose others to the culture leading to better understanding and less suspicion. * A lot of events for the older community. Not anything for younger adults. Tend to only see people at community funerals * No Caribbean food outlets left in Doncaster |
| **Community Funding**  **Caribbean Community**   * Funding to help run groups, provide days out and support training such as upskilling to help tackle issues such as digital exclusion. * More funding for community groups, they provide an essential support and wellbeing service. They help to tackle the issues around loneliness and isolation and help bring communities together.   **Muslim Ladies**   * Clearer pathways for service support and funding that is out there.   **Chinese community**   * Funding has been affected/decreased over the last five years | **Access to services**  **Caribbean Community**   * Not being able to get doctors’ appointments, * Feel uncomfortable when the receptionist asks what the issue is, * Very hard to get past receptionist to even get an appointment as they can be rude/obstructive, * Lines busy all the time, even when you call first thing and then when you have been calling for a long time and finally get through you are told no appointments available * No consistency across GP practices in how you access appointments and services * Lack of information at Doctor’s surgeries and they don’t signpost you to other services if they can’t help you * More available GP appointments and more GPs at each practice * Make the appointment system consistent across all GP practices * Receptionists require additional training in order to successfully assist patients and refer them to the appropriate service when necessary. * Access to dentist, there are none unless you are at crisis point   **Polish Community**   * Dentistry- son’s back teeth have not developed and requires -fillings every three months and has been on a waiting list to see a specialist for 18 months and is in pain. The referrals process is slow. * Suggestion to utilise Polish speakers to support non-English speakers to access services and appointments * Have food menus in schools translated into Polish to help parents engage in the decisions with their children and to help newly arrived children/students to access. * Being asked to provide documents as proof of being able to access NHS treatment, the example given was for a dental appointment and because they did not know there was a deadline before the appointment to produce the documents her appointment was cancelled. * Language barriers, letters that come from school, Drs, council, specialists need translating and people rely on their family to do this. * Navigating council systems is complex without the language barrier * Letters from medical specialists are difficult to translate due to the terminology used. * It was highlighted that anyone accessing a medical appointment has the right to request a translator for this. * Letters need to be translated into the person’s first language too not just an interpreter for appointments * Driving theory tests- this is only offered in English and it used to be available in approx.14 languages, there are people within the Polish community that are now not able to learn to drive because of this language barrier. * One informed that she helped a friend to book an appointment at their Drs which would have been in a week if they hadn’t needed to book a translator which made it three weeks for the next available appointment. * It was explained that additional time is needed for appointments when a translator is needed and if the appointment becomes more urgent to contact the practice again   **Asylum Seekers (International Hotel)**   * Understanding of how Doctor’s appointments and services are run, and not being able to get an appointment. * Having to walk quite a distance to doctors’ appointments. * Complicated and lengthy appointment system. * Need more support with translation when booking and attending appointments. * Lack of training around trauma informed working and poor understanding of cultures in vital services that they access. * No access to Dentist. * Receive a very small living allowance, not enough to get to appointments etc. * More police * More training around trauma informed working, cultural competency ensuring that any interaction with vital services is done in the right way. * Ensure that police have trauma informed training and are culturally competent, so that Hate and racially motivated crimes against people seeking asylum can be dealt with in the right way. This would build trust and confidence between both parties.   + - * additional services coming in to support and educate on topics such as vital system navigation, health and wellness concerns and guidance on accessing services.       * More police outreach work, to build reassurance and trust between people seeking asylum and the police   **Asylum Seekers (Conversation Club)**   * Issues accessing mental health support. * Unable to get appointments with doctors, sometimes it has taken many months to get any appointments. There is a big issue with the system as it is and high risks patients not getting the care they need * Complicated and lengthy appointment system. * No translation facilities offered for those who do not speak English, this puts people off contacting the doctors. * Lack of training around trauma informed working and poor understanding of cultures in vital services that they access. * People seeking asylum think if they reach out for help for their mental health, it will go against them with the Home Office with their claim. e.g. A man who has become paranoid that Mears and the Home Office have bugged his home and apparently this is quite common but dare not get help. * Long-term health conditions are not taken seriously, when it’s related to a person-seeking asylum, it then takes too long to get a diagnosis, and then the support or treatment required. * Lack of wellbeing support for young asylum seekers, often they require a complex support system and that this is not taken into account on arrival. * No access to Dentist, unless at crisis point. They have been trying to access dentistry for their children and have not got anywhere. * Feel like they do not have a right to an opinion.   **Muslim Ladies**   * Access to primary care services, delayed appointments for ongoing treatment and long term health conditions. * Better understanding of complex issues, when trying to access Dr’s appointments. For example if a person is living with long-term condition or has a child with Autism. This will help front facing staff with giving appropriate support when booking appointments and offering advice. * Access to female clinicians, doctors, not having this option would delay a person from making an appointment, delay treatment and cause added complications long term. * There is a lack of cultural awareness in reception staff, nurses Etc. Requires more training in GP practices around cultural knowledge. * The complicated appointment system within GP surgeries that cause delay and often result in no appointments at all. * More support with language barriers when accessing services such as GP’s, hospitals, council’s police, housing and other support services. * Lack of knowledge of other support services out there, not being signposted to more support when required. * Lack of diversity within vital services, having diversity would mean that there would be a better understanding of how to better support different cultures/ faiths. * Ensure that all services have access to a database of all other relevant services. This will ensure that if they are unable to support, other alternatives will be offered   **Chinese Community**   * Accessing dentist appointments and being able to register with an NHS dentist * Accessing GP appointments, call when they open and when you get through you are told to call back the following morning and it is the same everyday * Translators in services and support the older generation to be able to access services * Not being able to see the same clinician at the Drs, no continuation of care * Terminology for dementia in the community referring to people as crazy * A direct place for people to go to for help from services with no language barrier * Be able to see the same doctor when you need to * Be able to see an NHS dentist and not have to go private, some people don’t have the money for private dentists * Being removed from the NHS dentists after not being seen for a year * Services to access and educate in a community setting e.g. dementia * Falls- Suggested the service that offers the falls pendant that can be pressed when someone has a fall that links to family and emergency services, but concerns raised that someone with dementia would not remember why they are wearing it and take it off. * Support for Carers * Translation services need to improve as the services used don’t offer the right dialects and some of the older generation speak Hakka a volunteer offered to help those attend appointments as they speak Hakka, Cantonese, and English. It was suggested that they sign up to the translation service at the council and they could be paid too but they insisted on offering this free of charge and also offered to help people get to appointments when family members might be struggling. * Lack of education around dementia for both carers and those diagnosed with it. People are afraid of it and don’t understand. There is the perception that this is how it always is. * Support from dementia services could help, the group highlighted that people from their community don’t know that this support is available   **Asylum Seekers (Ramada Hotel)**   * GP appointments hard to access, system hard to navigate. * Mental health support lacking, they are given medication rather than support to tackle the root cause. * Not much in the sense of preventative measures, only reactive when trying to deal with health concerns. * Access to a dentist is very difficult * Very little in way of updates from Home Office. * No caseworkers from the Home Office, this was the only connection to the Home Office and what was going on with their claim. * Solicitors have very little information and updates   **Caribbean Community**   * Concerns around black women’s experiences in childbirth * Community members checked GP surgery websites to see the diversity of the GPs before registering to help with cultural competency/representation |
| **Employment and volunteering**  **Asylum Seekers (international Hotel)**   * Too many restrictions and barriers in being able to use your qualifications etc. to the UK. * Even when you have transferred your qualifications, you are still not able to utilise them straight away. There are always barrier to being able to work. * Many people-seeking asylum that have valuable medical qualifications, cannot apply for the qualifications transferred for use in the UK, and so will take a lower skilled job rather than their skills be utilised. * You will have to apply for from your country of origin for jobs, meaning those who are already in the UK seeking asylum are not eligible. * Allow those seeking asylum to volunteer in schools and hold talks on what it means to be an asylum seeker, this would aid in educating kids about different cultures, ethnic groups, and the reasons why people seek asylum. The result would aid in deterring hate speech and fighting racial abuse. * Ability to give back to the community, via volunteering until they are allowed to work. * Easier access to ESOL lessons, currently they have to wait 6 months before they can enrol at college, having something at the hotel, onsite group classes or access to online classes. * Support with upskilling and transference of skills and qualification while waiting for a decision.   **Asylum Seekers (Conversation Club)**   * Too many restrictions and barriers in being able to use your qualifications and degrees etc. to the UK. * Even when you have transferred your qualifications. * So many people-seeking asylum have medical qualifications and cannot apply for the qualifications to be transferred for the UK * The visa to be able to work in the UK is too expensive and so not attainable for most, with average cost running above £1000 and you need 70 points just to apply and to get those points you need to have finances, accommodation etc. in place which is simply not possible for many. * For many you will have to apply for from your country of origin, meaning those who are in the UK seeking asylum are not eligible. * Allow those seeking asylum to volunteer in schools and hold talks on what it means to be an asylum seeker, this would aid in educating kids about different cultures, ethnic groups, and the reasons why people seek asylum. The result would aid in deterring hate speech and fighting racial abuse. * Ability to give back to the community, via volunteering until they are allowed to work * Easier access to ESOL lessons, currently they have to wait 6 months before they can enrol at college, having something at the hotel, onsite group classes or access to online classes. * Support with upskilling and transference of skills and qualification while waiting for a decision.   **Muslim Ladies**   * Recruitment drives with an ethnic focus to encourage more diversity within local services. * More recruitment events overall, from all the major employers not just warehouse and temporary contracts. * More permanent contracts from employers across Doncaster, this will encourage people to work and stay here and provide better services overall. * More support for training in digital skills, all agreed that there is a need to bring training to communities, as cost of living crisis stops many from traveling to get training and support. * Racial and cultural training made mandatory. It should not be an option to take this training and then moving forward if linked with more diversity across employees there will be a more culturally inclusive workforce. | **Community Safety**  **Muslim Ladies**   * More visible policing will help people feel safer and encourage them to return to the town centre and the green spaces. * Address safety concerns in and around local greenspaces to encourage people to use them, and then add more health and wellness activities during the summer months. * Safety in and around Doncaster - people do not feel safe using the greenspaces even though they appreciate them and would like to utilise them more.   **Chinese community**   * Concerned about the safety for people living alone, when they know the minibus is picking them up, they leave their doors unlocked   **Roma Community**   * People are afraid to let their kids outside. The park is continuously full of bottles, broken glass, the smell of weed, fights. Also, drunk people knocking on windows or doors during the day or night |
| **Misc.**   * Asylum Seekers (International Hotel) - Lack of safe and legal routes to asylum, this means that more people are taken advantaged of when trying to get to a place of safety. * Muslim Ladies - Too many people allow their dogs off the leash in public parks, and dog fowling on the pavements and in green spaces is on the increase. * Roma Community - Parents have received fines after their kids were absent while in Romania for Easter, even when Schools are forewarned. Easter dates in Romania differ to those in the UK * Roma Community - ***Waste*** on the streets and the smell in the back alleys is a problem, even on the waste collection day, the waste soon accumulates again * Roma Community - ***Rats*** are a serious issue. People are even afraid to open their windows due to this problem |  |