



## Appendix 4

### 'Socho Sehat' Think Healthy Specialist Workshop

#### Introduction

In the beginning of this report we have highlighted that no consultation can confidently claim it has been able to reach out to everyone, and gathered every possible viewpoint. The aim should be to try and include as many rather than as few. As we found great enthusiasm for our open forum workshops grew, during our planning meetings with the Trust we discussed the possibility of doing a third workshop. Socho Sehat (the words mean 'Think Health' in Urdu/Punjabi) is the name we chose for our third workshop. This time the aim was to look at any particular community of service users, and to target groups who do not regularly access services they require.

The Trust advised us that they had already invested time and resources in training up mental health volunteers for the Asian community – and it would be a good opportunity to engage them further in a workshop format. We were acutely aware that singling any one community would mean that others feel their voices are not being heard. The choice was to try and do at least one specialised workshop or none at all. Given that the Trust had already made some inroads, and multi lingual volunteers were already in place, it seemed a practical option to go with Socho Sehat. We did receive some feedback asking why one community was chosen, and we hope the above clarifies the reasons why. As Healthwatch Derby has always tried to do, we will endeavour to include as many different community groups as possible in our open format events.



(Indian Community Centre Manager, Healthwatch Derby Chair, Trust Engagement Lead for Socho Sehat Workshop, 2014)

Our future engagements will see us focusing on and working with other specialised service user groups. We do have a very limited budget, and the consultation was not a commissioned project. The Trust contributed by providing the generic workshop food taster and its venues. When the specific workshop was proposed, the Trust generously paid for the community venue, and some refreshments as part of the workshop. As an organisation we do not have a vast budget, and our literature was not translated – but we depended on multi lingual volunteers who were happy to provide translation as well as facilitate group sessions.



(Healthwatch Derby facilitators, Socho Sehat, Indian Community Centre, 2014)

In the reality of public services running with a funding squeeze, innovative and out of the box ideas need to be trialled. Socho Sehat was an example of running a successful workshop, on a shoestring budget which still enabled meaningful service user dialogue with decision makers. Despite the lack of commissioned funding, or extensive resources the team were able to engage with a fairly large number of people in a workshop format for both generic workshops as well as Socho Sehat with each producing a significant number of patient feedback.

Workshop	Number of Attendees	Feedback received
Radbourne	50	Total 215 items of feedback
Kingsway	61	
Socho Sehat	137	Total 145 items of feedback
Total	248	360



(Healthwatch Derby group session facilitator, Socho Sehat, Indian Community Centre, Think Healthy 2014)



(Socho Sehat, Group Session, Indian Community Centre, Think Healthy 2014)

### Socho Sehat Group Session Plan

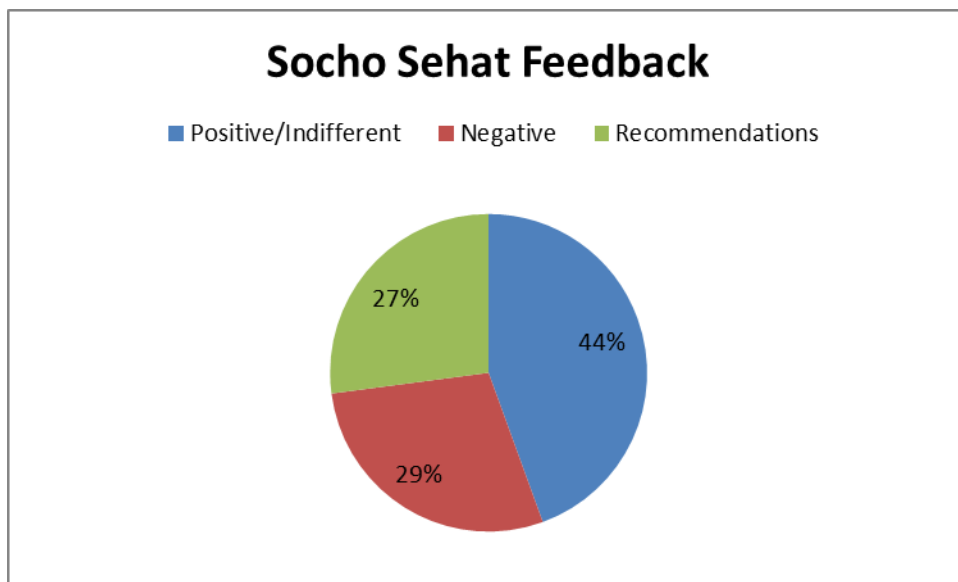
For the specialist workshop, we designed a bespoke group session. From the Trust's own engagement leads we were aware that stigmatisation for mental health was a big problem facing the community we were going to be inviting to the workshop. It was not going to be an easy task to get them to speak to us confidently about accessing mental health services, when admitting to having a mental health problem could be viewed as a potentially shaming experience. Healthwatch Derby worked with community leads as well as the Trust's own bilingual staff in developing a

simple yet effective group session plan which looked at 5 key questions:

Questions	Themes
1. What is the definition of good mental wellbeing?	Understanding
2. What are the symptoms to look out for if you need more support?	Awareness
4. Do you know how to ask for help and who to contact?	Access
3. Why are we as a community so hesitant to ask for help?	Barriers
5. What improvements, information and support do you need to make things better?	Improvements

### Socho Sehat Observations

The workshop generated 145 items of feedback. Firstly a breakdown of the type of feedback received:



Socho Sehat asked delegates about their own understanding and awareness of mental health condition and symptoms to look out for. The responses received for the themes of Understanding and Awareness cannot be seen as anything other than a positive recognition of a

condition – there were some very personal reflections about mental health which have been classed as indifferent. Although there were some negatives highlighted, the majority actually concentrated on voicing their opinions on what could make things better for a community that does not easily or readily engage with mental health services. To get the community members to speak about barriers or improvements a discussion was needed about understanding and awareness, and the questions were therefore structured to give a level of personal as well as community reflections. As the themes of understanding and awareness were personal to the individuals, we honour them by mentioning the fact that a very positive and involved conversation took place which saw many rich experiences being shared. Recommendations from the Socho Sehat workshop will feature in our key findings and recommendations chapter.

Theme – Access		
Type	Observations	Examples
Positive	A good understanding of routes of accessing services demonstrated	Various examples given of where people can ask for help such as GPs, health visitors, friends and family, community members etc.
Negative	GPs do not have specialised mental health knowledge	"GPs treat mental health like any other health condition and I am only allowed to discuss one condition at a time"
Negative	Language barriers	"GP or CMHT there is a language problem"
Negative	Lack of culturally appropriate services	"We do not have language appropriate service interpreter and translated information or a helpline. No support groups and homecare which is culturally specific"
Negative	Lack of community specific publicity for services	"No promotion at local organisations, we need more awareness to filter through community centres"

The next theme is that of 'Barriers'

Theme – Barriers		
Type	Observations	Examples
Negative	Focused primarily on cultural issues within the community rather than Trust related negatives.	"Refusal, stigmatisation, discrimination, mockery, lack of trust or confidentiality, gossiping. Don't want community members to know. Men more hesitant than women. Shame in admitting that we need help. Don't know what response or reaction I will get if I speak out"

