

# Wakefield Health Needs Assessment for Residents born outside the UK

Overarching Summary  
2023/24

Health Needs Assessment Report: Number 4  
November 2024

# Introduction

This Health Needs Assessment (HNA) comprises of a series of reports and digital stories. When collated together, provide a comprehensive insight into the health and wellbeing priorities and needs of Wakefield District's non-UK born communities.

Participants recognised that 'good health is everything.' Health is influenced by multiple complex factors, beyond physical health needs, affecting all aspects of daily life. Some participants were involved in creating the 'signs of wellbeing' statements which reflect their broad wellbeing priorities in terms of feeling valued, having security and peace, choice and feeling connected to other people.

Supporting the health and wellbeing of our communities is beyond the scope of any single organisation and requires an integrated system wide response to shape future services, to include the identified needs of non-UK born communities.

There are a wealth of examples of good practice, which include bespoke health services for vulnerable asylum seekers and refugees as well as the newly commissioned health inclusion service, museum and library initiatives, the Art House community projects, Step-up, the role of faith and community groups and English for Speakers of Other Languages (ESOL) provision to name just some of them.

We are confident in the strength of the findings as professional stakeholders and those with lived experience shared similar views. The detail in each of the reports offers us a strong ability to make local evidence-based decisions, which will improve people's lives.

Our vision is that all partners across the system will use the relevant information to shape future services.

## Signs of wellbeing in Wakefield

I can be an active part of community life and it's easy to socialise with people I live near.

I wake in the morning and feel refreshed – I have had enough sleep.

I have the freedom to choose a job I like and is satisfying regardless of my migration status.

I wake up knowing I have a job that has a secure contract which gives me confidence that I can look after my family.

I have financial security.

I wake up in the morning and feel useful to society on a daily basis.

I wake up in the morning and I have meaningful activities planned for the day

I have a secure place to live.

There is wellbeing in Wakefield when...

I can feel safe to let my children go out on their own.

When I can speak English well enough for my daily needs (for example, talking to the doctor or neighbour).

I wake up and don't feel isolated.

Authorities support me to break the language barrier so I can work in my profession.

When we have pets at home for company in the house and walks.

I can live my daily life independently in all situations.

I meet people in the street and they say hello regardless of how they look or their accent.

There is no bombing on a daily basis.

I can plan my near and distant future.

I have the chance to meet people from different backgrounds.

# Our Approach

To deliver this HNA the Public Health Team at Wakefield Council and Wakefield Integrated Care Board formed a working group of internal and external partners to oversee the project.

Our vision is that the services people can access will meet their needs and help them have the best health and wellbeing possible, especially the most vulnerable people.

## OUR SCOPE

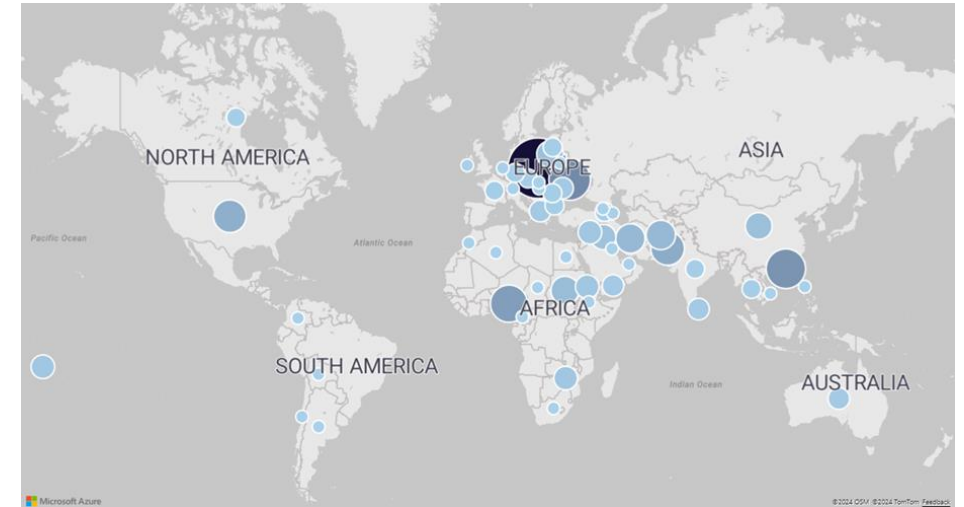
All individuals aged over 16 years, born outside of the UK, irrespective of their reasons as to why they moved to the UK or the length of time they have lived in the UK.

## METHODOLOGY

As part of the HNA approach we commissioned two independent agencies, to undertake and document the engagement with residents born outside the UK and organisational stakeholders who work with them. Also, the Public Health Team completed a report describing the demographic and health profile of non-UK born communities residing in Wakefield District.

## WHO HAS BEEN INVOLVED

- 370 non-UK born residents
- Aged between 17 and 75 years old
- Representing 66 countries
- 57 organisational stakeholders, representing 43 services across all sector agencies



## HOW PEOPLE WERE INVOLVED

- A survey of 344 non-UK born nationals across the Wakefield District
- 15 resident interviews
- 3 focus groups with a total of 22 residents
- 12 residents took part in a workshop to develop statements about broad wellbeing priorities
- 3 residents were supported to create digital stories to showcase their health and wellbeing journey

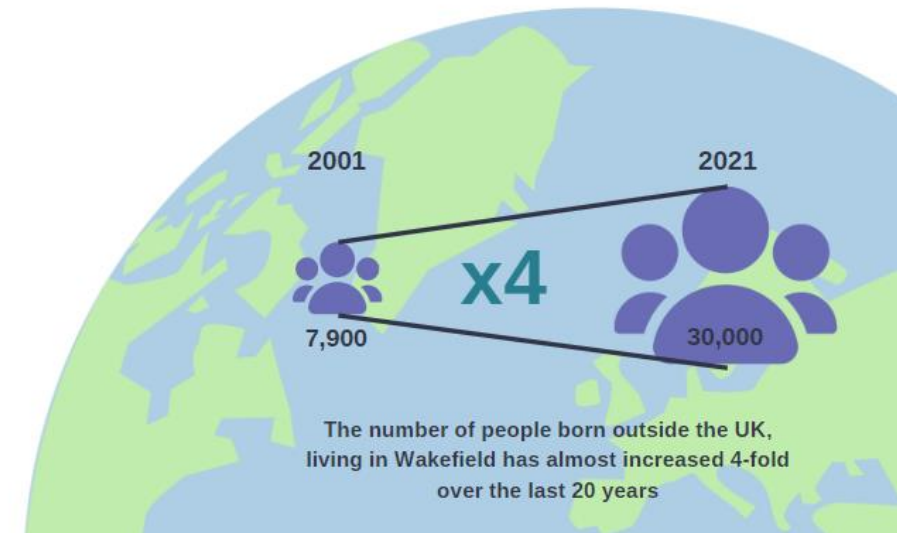
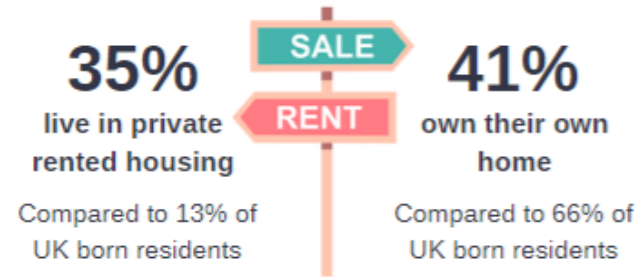
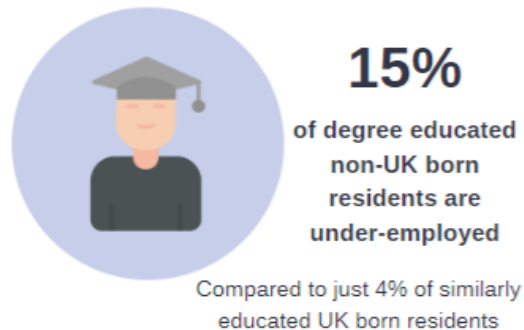


# The Wakefield Picture for Non-UK Born Communities

There is very little routine data published on the health of non-UK born residents, and only a very limited amount of health information on this population can be extracted from local data information management systems. It is evident that more work is needed to develop local data collection mechanisms to plan for the health needs of non-UK born residents, now and in the future.

It is recommended:

- that opportunities should be explored to improve the completeness of patient's country of birth in healthcare records.
- that procurement exercises consider requiring service providers to collect country of birth of service users as part of the contract's data requirements.
- that surveys administered locally should also consider asking for information about country of birth.



# General Health and Wellbeing

Information from the survey and 2021 Census indicates that non-UK born communities in the Wakefield District tend to report positively on their health and wellbeing. However, some distinct groups seem more able than others to attain better health and wellbeing.

A recent UK research study indicated that those who move to the UK for employment, family and study reasons have better health outcomes than the UK born population, but this is the opposite for those who migrated to seek asylum.<sup>1</sup>

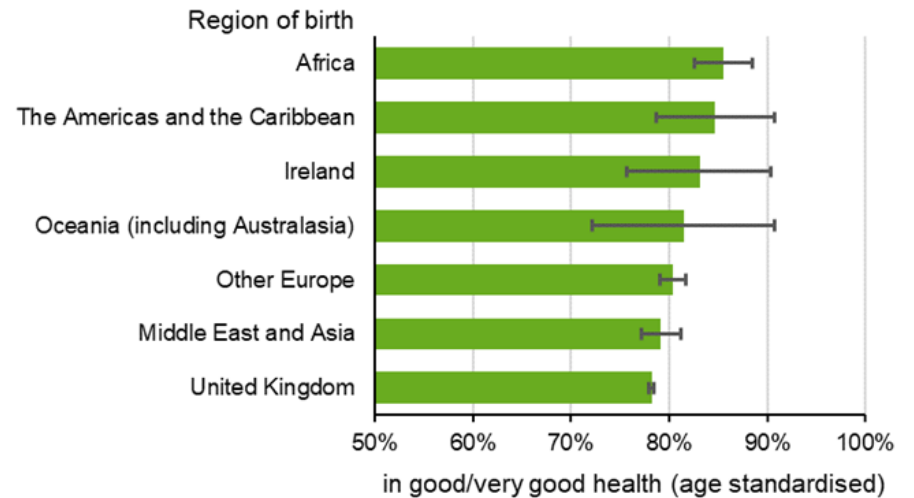
The lived experience survey indicated that health and wellbeing is perceived to be lowest for those who do not want to be identified by their ethnicity, people from Pakistan and Iraq or South Asia more broadly. As well as those identifying as of a Kurdish nationality, people without permission to work in the UK, those who live with people they don't know, and people with a disability.

89% of survey participants said they were registered with a GP and found the registration process to be straight forward.

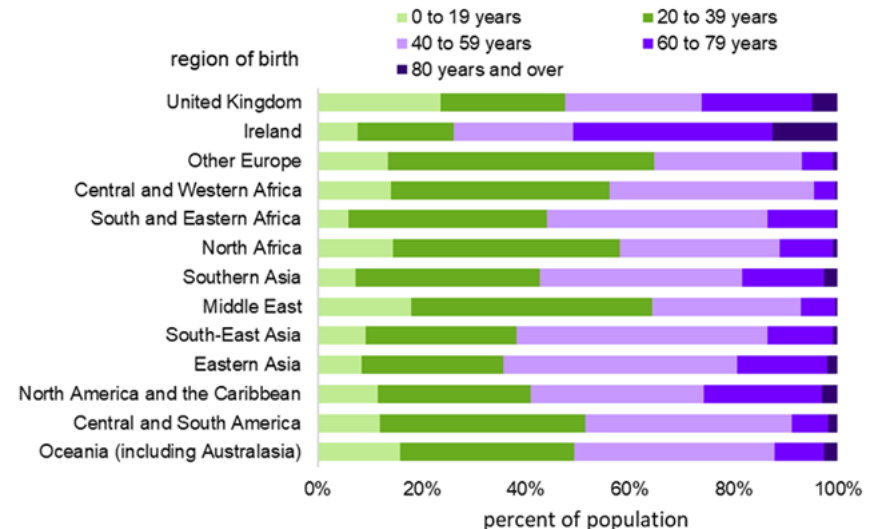
Engagement with non-UK born communities living in Wakefield District indicated that there are four key issues affecting their health and wellbeing. Getting used to the UK health system; social connections here and abroad; employment and housing circumstances; green spaces and a healthy lifestyle. The HNA reports collectively provide evidence of enablers and hindrances which have important influences on health and wellbeing outcomes.

<sup>1</sup> Giuntella, O., Kone, Z. L., Ruiz, I., & Vargas-Silva, C. (2018). Reason for immigration and immigrants' health. *Public health*, 158, 102-109

**'HOW IS YOUR HEALTH IN GENERAL?' WAKEFIELD RESIDENTS BORN IN AFRICA HAVE THE BEST GENERAL HEALTH. (DATA SOURCE: 2021 CENSUS)**



**NON-UK BORN WAKEFIELD RESIDENTS TEND TO BE YOUNGER THAN THE UK-BORN POPULATION. (DATA SOURCE: 2021 CENSUS)**



# General Health and Wellbeing

Service providers emphasize the importance of tailored mental health support for asylum seekers and refugees as their traumatic experiences may differ greatly when compared to UK-born residents. In addition, the term 'mental health' is often poorly understood and stigmatised in their country of origin.

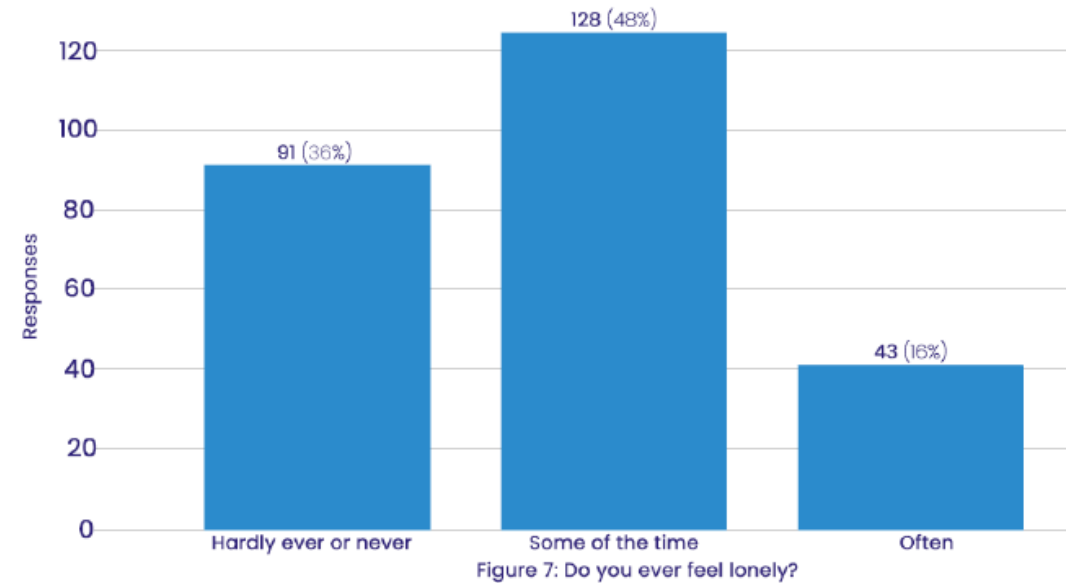
The HNA reports illustrate that there is a wide range of mental health needs for health and wellbeing interventions to more serious mental conditions. These have a range of causes and risk factors including social isolation, loss of social networks, circumstances surrounding an individual's journey to the UK and political policy amongst others.

When compared with national figures, it seems that our survey participants are more likely to experience loneliness than the general population, where 6% said they felt lonely 'often or always'.<sup>2</sup>

Overcoming boredom and isolation for those residing in Initial and Contingency Accommodation is particularly important. Suggestions included facilitating more sports and activities on-site, providing appropriate resources and equipment for sports, offering opportunities around training, volunteering and employment skills whilst not being able to work.

Within our Initial Accommodation it is challenging for residents to follow NHS advice about feeding and weaning their children, sleep training and toilet training, when living long-term in a fully catered setting, in a single family room with a shared bathroom along a corridor, and rotated laundry. Provision of devices and free internet was suggested to prevent digital health exclusion.

**1 IN 6 (16%) SURVEY RESPONDENTS SAID THE 'OFTEN FEEL LONELY'.**



<sup>2</sup> Department for Culture, Media and Sport (2023) Community Life Survey 21/22: Wellbeing and loneliness

# System-wide Service Improvement

Overall, there was a consensus from professionals that current health and wellbeing service provision is working well, with opportunity for improvement. Generally, participants felt they were treated well by services particularly in relation to their faith requirements, being treated respectfully and knowing how to make appointments.

They were less confident about knowing where to get help and understanding information, which was partly affected by their migration reason. Great consideration is required for the translation of resources and use of interpreter services for building trust.

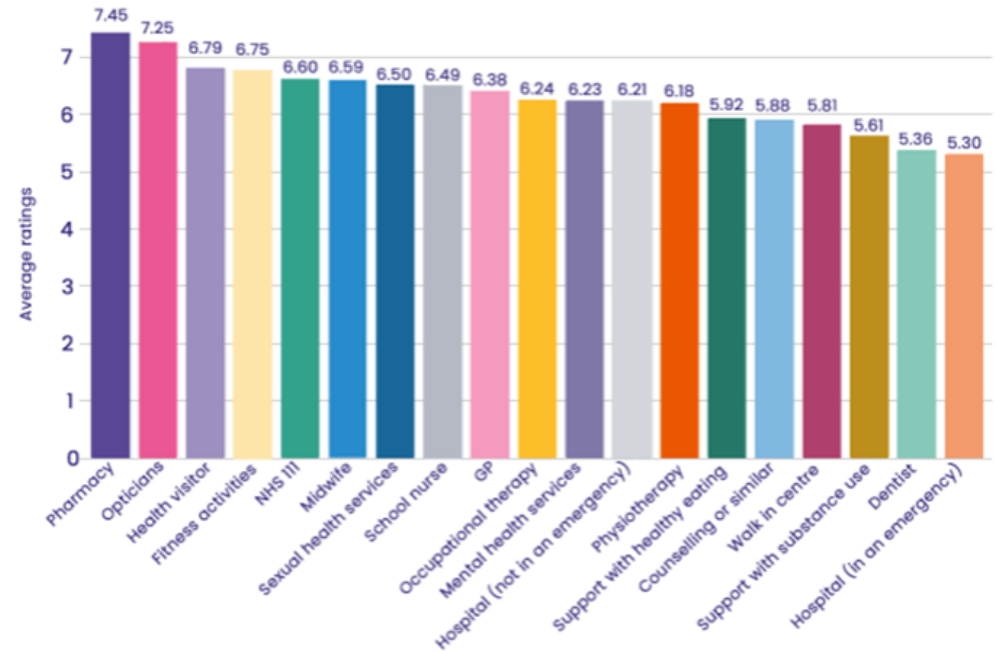
Topics raised around service provision in more detail included information provision, medical treatments, communication challenges, waiting times, accessing healthcare including diagnostics and treatments outside the Wakefield District (included internationally e.g. country of origin), and mental health support.

Positive professional working practices were associated with learning during and following the Covid-19 pandemic and the ongoing benefits of forging new relationships and networks at that time.

There are certain organisations who encourage and facilitate change and inter-agency working, over others. However, at times the workforce feel stretched to provide comprehensive support and can feel overwhelmed.

With the extent of organisations supporting those born overseas, understanding organisational roles and responsibilities plays a key part to achieving improved outcomes for our residents. There is a strong desire amongst local organisations to commit to identifying system priorities and having the appropriate resources in place to deliver on them.

The findings for the lived experienced survey showed that the services with the lowest rate scoring for positive experiences were emergency hospital services and dentistry, as well as substance use support, walk-in centres, counselling and support with health eating.



*‘There are lots of people in need who are looking for services and looking for support and there are lots of organisations who are out there who are able to provide that help, but it’s not quite joined up at the moment. I think a lot of the services don’t know what other services exist that they could link [together better].’*



# Community-Centred Services

Having a multi-agency approach and an interdisciplinary workforce who are culturally competent is extremely important to help alleviate disparities and improve health and wellbeing outcomes. This relies on personalised approaches through the understanding of different cultures, cultural practices and migration circumstances.

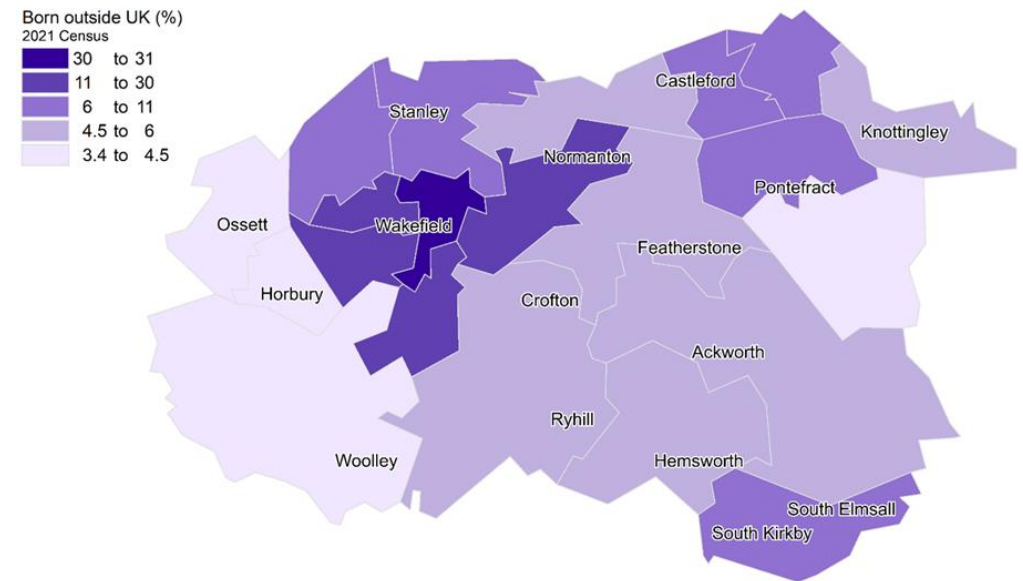
Wakefield has important assets and resources that support health and wellbeing in addition to specific services. These include access to green spaces, building social capital through community groups, institutions for learning including libraries and museums and through trusted workforce and neighbours.

Health and wellbeing challenges, often presenting in combination, include loneliness, community tensions, worry for loved ones, a lack of knowledge about local resources and services, insecurity, and knowing how to act in different situations in a new culture.

Outreach and engagement, regularly working with communities, building trust and giving consideration to formal co-production of service improvements will positively influence and diversify future services.

The Third Sector were praised for their positive work for and with non-UK born communities. The strength and diversify of their important role in supporting health and wellbeing outcomes is unfortunately, often hindered by limited financial and workforce capacity.

*‘More investment needs to be put into staff training about engaging with migrant communities. Especially for those working in universal services where you will naturally come across a community and not particularly understand how to engage with them appropriately’.*



**WAKEFIELD CITY WARDS ARE HOME TO THE HIGHEST PROPORTION OF OUR NON-UK BORN COMMUNITIES.**



# OUR VISION IS THAT ALL PARTNERS ACROSS THE SYSTEM WILL USE THE RELEVANT INFORMATION TO SHAPE FUTURE SERVICES.

The home for the HNA information is the Wakefield Joint Strategic Needs Assessment (JSNA).<sup>3</sup>

[Health Needs Assessment For Residents Born Outside The UK - Wakefield District JSNA](#)

The main HNA data resources:

- **Stakeholder Analysis** - the views and experiences of people and organisations who work with and provide services for non-UK born communities.
- **Lived Experience** - the voices of those with lived experiences of being a non-UK born national living in Wakefield District.
- **The Wakefield Picture** - a report describing the demographic and health profile of non-UK born communities residing in Wakefield.
- **Digital Stories** – three short videos created by three non-UK born residents to illustrate what health and wellbeing means to them.
- **Signs of Wellbeing in Wakefield.** - a collection of statements created by Wakefield residents which reflect their broad wellbeing priorities.

<sup>3</sup> [www.wakefieldjsna.co.uk](http://www.wakefieldjsna.co.uk)

