

Understanding barriers to staying healthy and ways to overcome them

The Adults and Health Scrutiny Panel of Haringey Council is looking at the physical health of people with mental health needs; the barriers people face in trying to stay healthy and finding ways in which these can be overcome.

This survey will help the panel understand the physical health of local people with mental health needs in order to develop recommendations that can help to improve local services. Recommendations will be presented to local organisations that provide services for people with mental health needs including the Barnet, Enfield & Haringey Mental Health Trust, Haringey Council and Haringey Clinical Commissioning Group.

As a local mental health service user or carer of someone with mental health needs, I invite you to complete this short survey. It is anonymous (you don't have to give your name) and it should take no longer than 10 minutes to complete. I would be grateful if you could complete this survey before Monday 3rd February 2014.

Cllr Gina Adamou, Chair of the Adults of Health Scrutiny Panel

You, your physical and mental health

1. **I am completing this survey as a:**
 - Mental health service user
 - A carer of someone with mental health needs

2. **How would you describe your current physical health? (Please tick ONE box only)?**
 - Excellent
 - Very Good
 - Good
 - Fair
 - Poor

3. **How would you describe your current mental health? (Please tick ONE box only)?**
 - Excellent
 - Very Good
 - Good
 - Fair
 - Poor

4. **When was the last time you met with a Mental Health worker? (Please tick ONE box only)**
 - Less than 1 month
 - 1-2 months
 - 3-5 months
 - 6 months or more

You and your GP

5. **Are you registered with a local doctor (GP)?**
- Yes
 - No
6. **If yes, when was the last time you visited your doctor (GP)? (Please tick ONE box only)**
- in the past 3 months
 - between 4 and 6 months ago
 - between 7 and 11 months ago
 - between 1 and 2 years ago
 - more than 2 years ago

Your physical health

7. **When was the last time you had a physical health check up? (Please tick ONE box only)?**
- in the past 3 months
 - between 4 and 6 months ago
 - between 7 and 11 months ago
 - between 1 and 2 years ago
 - more than 2 years ago
8. **Do you think that any of the following may be affecting your health? (Tick as many boxes as apply)?**
- Smoking
 - Eating unhealthily
 - Weight
 - Alcohol
 - Tooth ache
 - Eye sight
 - Stress/anxiety
 - Problems at work / unemployment
 - mental health
 - Feeling depressed
 - Lack of exercise
 - Sexual Health
 - Medications
 - Drug use
 - Feeling lonely
 - None of these issues are affecting my health
 - Other physical health problems

Please describe:

9. **Have you felt physically unwell in the last 12 months?**
- Yes
 - No
10. **When you have felt physically unwell have you experienced any of the following problems in getting the help that you needed?**
- I didn't know where to go to get help in the NHS
 - There were problems getting an appointment with my GP (doctor)
 - I felt embarrassed talking about personal health issues
 - I hoped the problem would go away so didn't seek help at first
 - I was anxious that I wouldn't be listened to due to my mental health needs
 - There are other things that have stopped me from seeking advice when I was physically unwell
- Please tell us what these were:*
-
-

Improving your physical health

11. **Have you taken any steps over the past 12 months to improve your physical health?**
- Yes
 - No
- If yes, please describe what this _____
was _____
-
12. **If you wanted to maintain or improve your health (for example lose weight, do more exercise or stop smoking) would any of the following issues stop you?**
- I don't know who to talk to about this
 - I don't have enough time
 - This is not a priority for me at the moment I need to focus on my mental health
 - I don't feel that I would be taken seriously because of my mental health
 - I don't feel unwell
 - Health workers do not understand mental health
 - I don't like the preaching attitude of health workers
 - I already know what to do to keep healthy
13. **What other reasons might stop you from seeking advice about how to improve your health?**
-
-
14. **If you wanted support to stay healthy, which of the following things be helpful?**
- | | Yes | No |
|--|--------------------------|--------------------------|
| Face-to-face advice from a health professional | <input type="checkbox"/> | <input type="checkbox"/> |
| A local group to discuss health issues | <input type="checkbox"/> | <input type="checkbox"/> |
| A booklet with information about local health services | <input type="checkbox"/> | <input type="checkbox"/> |

- | | | |
|--|--------------------------|--------------------------|
| Health information/ tips to your mobile | <input type="checkbox"/> | <input type="checkbox"/> |
| A website of local health information | <input type="checkbox"/> | <input type="checkbox"/> |
| Discounted health and fitness membership | <input type="checkbox"/> | <input type="checkbox"/> |

15. Is there any other support that you need that could help you stay healthy?

Any other suggestions?

16. Please use the space below to describe services which work well to support you, could do more to help, or have any suggestions that could help local people with mental health issues improve their physical health?

About You

Asking questions about you can help us improve the services we deliver to the community, monitor what different groups of people think about a particular service or issue and influence decisions that affect them.

17. What is the first part of your post code? (For example, N22)

18. What is your age group?

- Under 20
- 21-24
- 25-29
- 30-44
- 45-59
- 60-64
- 65-74
- 75-84
- 85-89
- 90+

19. Which ethnic group best describes you?

- White category
- Mixed category
- Asian or Asian British
- Black or Black British
- Chinese or any other ethnic group

20. **Are you?**
 Male
 Female
21. **Do you have a religion or belief that you would like to mention? If so, please tick the appropriate box**
 Christian
 Muslim
 Jewish
 Buddhist
 Other
 Hindu
 Sikh
 Rastafarian
 No religion
 Prefer not to say
Any other religion, please specify
-
22. **Please tick the box that best describes your sexual orientation?**
 Heterosexual
 Bisexual
 Gay
 Lesbian
 Prefer not to say
23. **Are you**
 Single
 Married
 Co-habiting
 Separated
 Divorced
 Widowed
 In a same sex civil partnership
24. **Are you**
 A Refugee
 An Asylum Seeker
25. **What country or region are you a refugee/asylum seeker from?**
-
26. **Please tick the box which best describes your language?**
 Albanian
 Arabic
 English
 French

- Lingala*
- Somali*
- Turkish*
- Other*

Any other language, please specify

Thank you for completing this survey. The information that you have provided may help to improve physical health services and support available to people with mental health concerns.