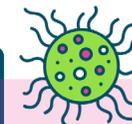
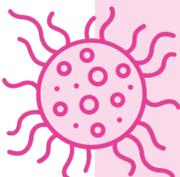


We are Healthwatch Central West London (HWCWL),

an independent organisation for people who use health and social care services. We have been speaking to NHS service users in **Kensington & Chelsea** about how COVID-19 has affected them and their families.



Understanding the impact of COVID-19 on Kensington and Chelsea



Since March 2020, we have been asking our local communities in Westminster and Kensington and Chelsea about how they have been affected by the COVID-19 outbreak, and the measures responding to them.

The [COVID-19: Your Experience Matters](#) survey was developed to capture the broadest range of experiences, from general wellbeing to the direct impact, and many other changes to your experiences of health and social care. This survey will be an ongoing project for us, with the results shared regularly, to reflect the changing face of the pandemic and its response in Kensington and Chelsea.



Understanding the impact of COVID-19 on BAME communities

12 people completing the survey (16%) identified their ethnicity as BAME. This document is a short summary of the key themes and issues that have been raised by this group so far, and precedes a more detailed summary and analysis, which will be shared over the coming weeks.

As a charity that works in two of the most diverse boroughs in the country, we take seriously the importance of representing the full spectrum of views from our communities. We remain committed to engaging directly with local BAME and migrant groups, in addition to gathering their experiences through this survey, so that their voices are central to discussions about improving local health and social care.

Health and Services

One in four (25%) of people who completed our survey said they had received a shielding letter.



However, **nobody** who considered themselves to be vulnerable registered for support.



50%

Almost half of the people who needed treatment delayed it.

When asked which services they were likely to use seek help from, respondents were **twice as likely to use the pharmacy**, over others, such as their GP, the council or a local community organisation.



Information

Three quarters of people found it easy to understand the available information about the COVID-19 outbreak.

“Straightforward” language and repetition of slogans, such as **‘stay at home’** or **‘wash your hands’**, were considered helpful. More complex messaging, on employment, schooling or shopping, led to some confusion. Complaints about ‘conflicting information’ were common.



Mental wellbeing and relationships

Half of the respondents said that the COVID-19 outbreak had impacted their emotional and mental wellbeing

Key contributors to stress were uncertainty and living conditions, as was the welfare of children.



“I have increased loneliness and anxiety. Worries about my family, the future, my job, relationships.”

When compared to their White British counterparts, BAME respondents in Kensington & Chelsea were:



More likely to be on the shielding list.



A quarter of people (25%) received a shielding letter, compared to 15% of White or White British respondents. It is notable that none of those who consider themselves to be vulnerable have registered with the Council for support, though no one provided detail as to why this is the case.



Half as likely to use their GP.



Less well connected with neighbours and the wider community.

Levels of family support are similar across demographics, however White or White British respondents appear to be more active socially:

34% more likely to call on the help of neighbours, and according to responses, also more involved in support networks such as Mutual Aid Groups.



More likely to experience income reduction.



17% of respondents said they have lost their income entirely, while a further 25% report a reduction. This equates to 42%, contrasting with 30% from White or White British backgrounds.



More likely to experience emotional and mental health difficulties.

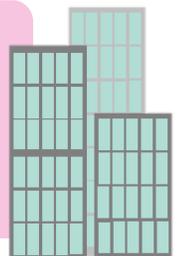


50% said their mental wellbeing has changed 'a lot' or a 'great deal', compared to 34% of White/White British.



Not as able to remain indoors.

When asking people about their ability to remain indoors, just under half (42%) suggest it is 'easy' or 'very easy' - this compares with 53% from White or White British backgrounds.



Healthwatch Central West London (HWCWL)

Healthwatch was established under the Health and Social Care Act 2012 to understand the needs, experiences and concerns of people who use health and social care services.

We deliver the statutory Healthwatch provision for Kensington & Chelsea and Westminster, and we previously delivered this work for Hammersmith & Fulham. Our research and local engagement puts local people's views at the centre of decision making about health and social care.

We make this happen by:



Helping to improve the quality of local health by sharing what people need from their care with those who commission, run, and make decisions about NHS and social care services.



Listening to what people like about services and what could be improved.



Monitoring how changes in the healthcare system affect local people.

Contact us

If you would like to contact HWCWL about this report, or about our other research and local engagement in Westminster, you can get in touch with us here:

Write:

5.22 Grand Union Studios,
332 Ladbroke Grove,
W10 5AD

Phone:

020 89687049

Email:

info@healthwatchcentralwestlondon.org

You can add your voice to this ongoing survey here:

<https://www.surveymonkey.co.uk/r/YourExpMatters>

You can request a paper version of the survey via any of the contact details above.