

# **Kensington and Chelsea Citizens' Panel – Supporting emotional health and wellbeing in the borough**

**Consultation report and findings September 2023**



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**THE ROYAL BOROUGH OF  
KENSINGTON  
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# Introduction

## Background

The Citizens' Panel is a large, demographically representative group of residents from across the borough who are regularly invited to give public preferences and opinions to inform Council decision-making. The Panel was launched in April 2021.

The Panel survey on 'Supporting emotional health and wellbeing in the borough' launched in July 2023 and focussed on getting Panel members' feedback on their emotional wellbeing needs, views on services and support. By understanding Panel members mental wellbeing and mental health experiences, it enables us to shape our services to better meet the needs of residents and their loved ones.

## Methodology and report

The survey was developed with colleagues from the Mental Health and Public Health teams, as well as the Lead Member for Adult Social Care and Public Health. The Panel survey was launched on 3 July 2023, four subsequent reminder emails and two reminder texts were sent to encourage Panel members to complete the survey.

The survey closed on 14 August 2023 and 314 completed surveys were received (291 online and 23 paper).

***Please note that throughout this report where the term Panel members is used, this refers to the 314 Panel members who responded to this survey.***

Throughout the report responses have been analysed for any key demographic differences. Responses to questions have been compared by sex, age, ethnicity and area lived in and differences of five per cent or more have been reported on.

# Introduction

## Appendix

The appendices report contains the data tables of results and the details of all themed comments made by respondents in relation to the consultation. All other responses and data are in this report. The appendices report is available upon request.

## Equalities

Equalities data is presented in the '**About Respondents: Demographic Breakdown**' section and is used throughout to identify any differences in opinion. Please note the split in age ranges used is limited to those under 60 compared to those over 60 due to the small number of responses from Panel members under 35 so it was not possible to make any further breakdowns meaningful.

For information, the area breakdown used throughout is as follows:

- **North** – Dalgarno, St Helen's, Notting Dale, Colville, Norland and Pembridge
- **Centre** – Holland, Campden, Abingdon, Queen's Gate, Earl's Court, Redcliffe and Courtfield
- **South** – Brompton and Hans Town, Stanley, Chelsea Riverside and Royal Hospital

## Acknowledgements

The Council would like to thank Panel members that took the time to take part in the exercise and gave their views.

# Results at a glance

**Panel members' current emotional health and wellbeing** – Panel members were asked a series of questions about their emotional health and wellbeing over the past two weeks using a scale from 0 ('not at all') to 10 ('extremely'). A mean score was calculated for each question. The score for feeling of satisfaction with their life over the past two weeks was 6.55, for having the motivation to do things 6.59 and for feeling optimistic/hopeful 6.44. The mean score for feeling anxious over the past two weeks was 4.35 and for feeling low or depressed the score was 3.5. Almost half of respondents (47 per cent) said that they had felt anxious to some extent over the past two weeks (scoring this 5 or above). Life satisfaction, motivation and optimism was lower for Black, Asian and Multi-Ethnic Panel members, as well as females and Panel members under 60.

**Positive/negative impacts on mental health and wellbeing** – Panel members were asked about different aspects of their lives and whether they had a positive or negative impact on their mental health and wellbeing over the past 12 months. Relationships with friends and family (69 per cent) and their home (57 per cent) had the most positive impact on Panel members' lives. The least positive aspect was their job/workplace (28 per cent), although this attracted a 35 per cent 'not applicable' response.

**Caring responsibilities** – Around one in five Panel members (18 per cent) stated that they are cared for or supported for problems related to ill health. More at 35 per cent stated that they had caring responsibilities.

**Activities to support wellbeing** – the most popular activities undertaken by Panel members to support their own wellbeing were 'going for a walk/other physical activity' (79 per cent) and 'spending time with family or friends' (69 per cent).

**Recommended physical activity** – Thirty-one per cent of Panel members always manage to follow the guidelines of 30 minutes moderate activity five times a week, whilst a third (33 per cent) manage this mostly. Twenty-one per cent sometimes manage to follow the guidelines, nine per cent almost never and seven per cent never follow them. The most popular ways for Panel members to keep active were walking, going to the gym, exercise classes and cycling.

**Locally available services** – Ninety per cent of Panel members have a park or open space within a 15-minute walk of where they live. Eighty-four per cent have a GP within the same radius, eighty per cent a library and 68 per cent a sports or leisure centre. Only 12 per cent of Panel members stated they have a local family hub, although 59 per cent gave a 'don't know' response to this.



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# Results at a glance

**Mental health support** - Forty per cent of Panel members agreed and 11 per cent strongly agreed with the statement 'if you or a loved one were going through a mental health crisis you would know where to go for help'. Nine per cent agreed and four per cent strongly agreed 'there are enough local mental health and wellbeing services to meet my community's needs'. This statement attracted a large neutral response (55 per cent).

**Services which support mental health** – When asked which services supported mental health, 45 per cent stated they didn't know about the services listed. Half of Panel members felt that the Samaritans supported mental wellbeing, 39 per cent IAPT talking therapies, 30 per cent substance misuse/alcohol recovery services and 27 per cent community health workers.. When asked which services were most useful in supporting their and their family members' mental wellbeing, 75 per cent said they didn't use any of the services listed. Of the remaining Panel members, 31 per cent selected IAPT talking therapies and 17 per cent community health workers

**Services wanted in the community** – Panel members were asked what they wanted to see more of in their community to support their mental health and wellbeing. The top three choices were: talking therapy (e.g., counselling, CBT or psychotherapy) (57 per cent), culturally appropriate services to meet local needs (33 per cent) and community collaboration (31 per cent).

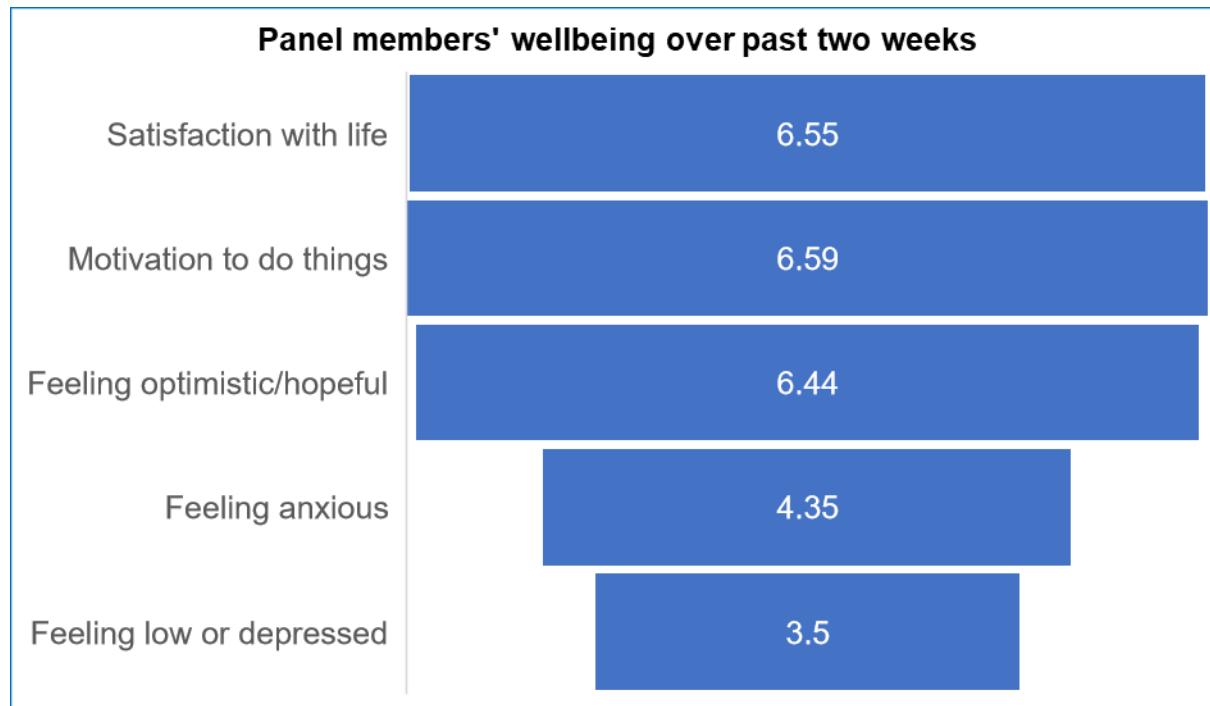
**Ease of accessing services** – Those Panel members who had accessed mental health services or support were asked how difficult or easy they had found it. Eleven per cent stated they had found accessing support easy and five per cent very easy. However, 22 per cent had found it difficult and 19 per cent very difficult. Suggestions for improving access to mental health support included: more communication/promotion, increasing services available and reducing waiting lists/times.

**Mental health and wellbeing digital resource** – Panel members were asked what they would like to see included in a mental health and wellbeing digital resource for residents. The most popular choices were: lists of local services (76 per cent), locations of local services (70 per cent) and NHS services (62 per cent).

**Awareness raising** – A number of questions about services attracted a high neutral response and comments about not having enough information to judge, reinforcing the need for communication and promotion around emotional health and wellbeing services and support.

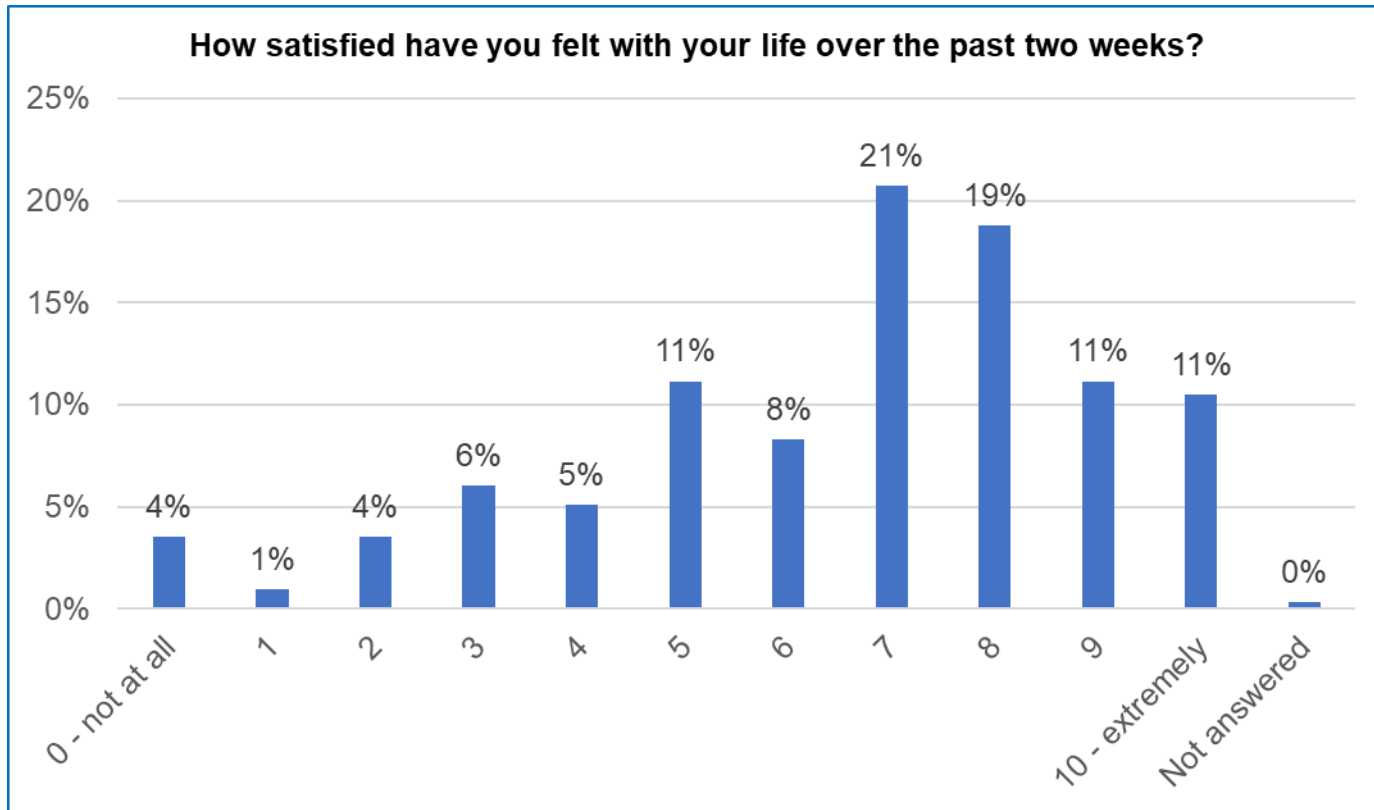
# Panel members' emotional health and wellbeing

Panel members were asked a series of questions about their emotional health and wellbeing over the past two weeks. They were asked to respond using a scale from 0 (representing 'not at all') through to 10 (representing 'extremely'). The scores have been added together and a mean score calculated for each question. The score for feeling satisfaction with their life over the past two weeks was 6.55 and for having the motivation to do things 6.59. The mean score for feeling optimistic/hopeful was 6.44. The mean score for feeling anxious over the past two weeks was 4.35 and for feeling low or depressed the score was 3.5. The charts on the following pages gives the detailed responses to each question.



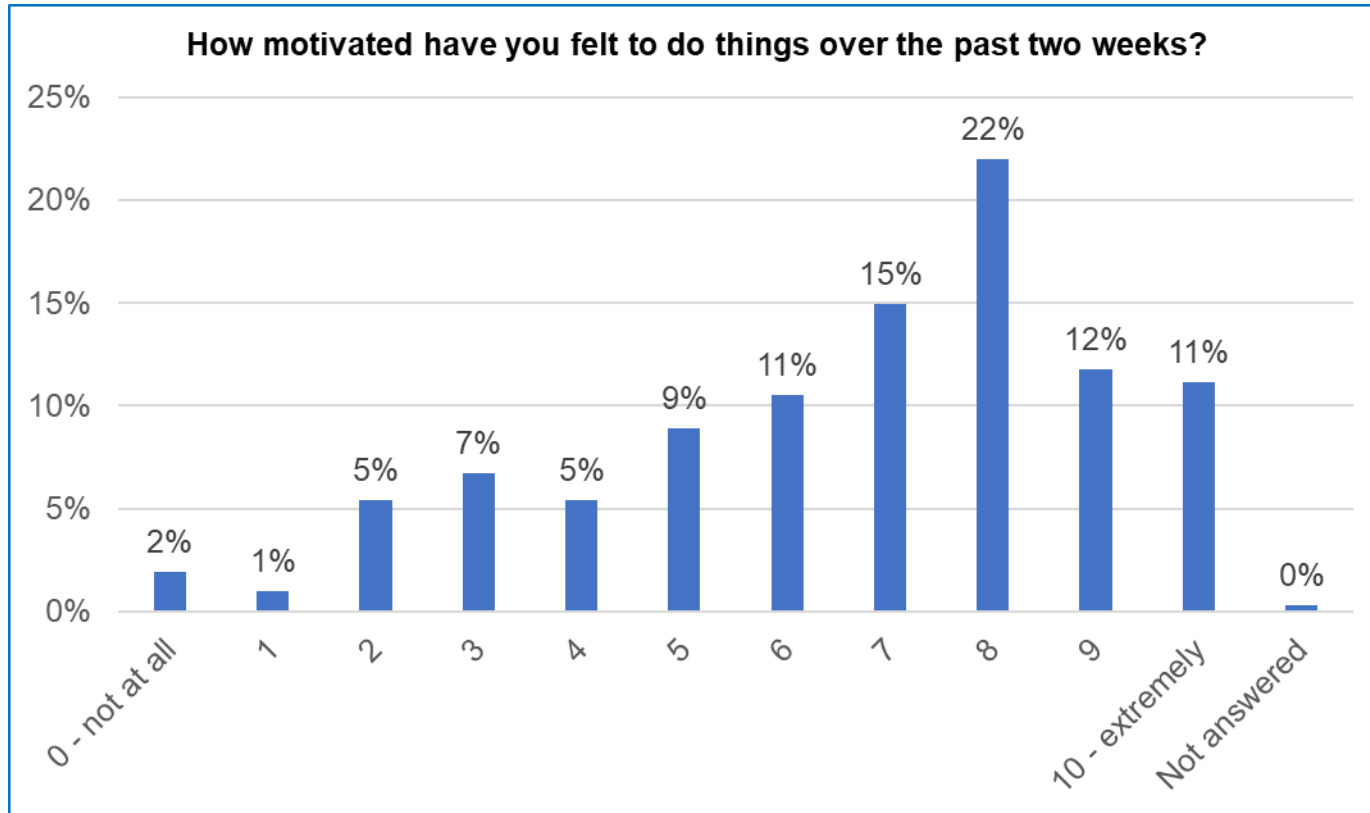
**Base: 314 (all responses)**

# How satisfied have you felt with your life over the past two weeks?



**Base: 314 (all responses)**

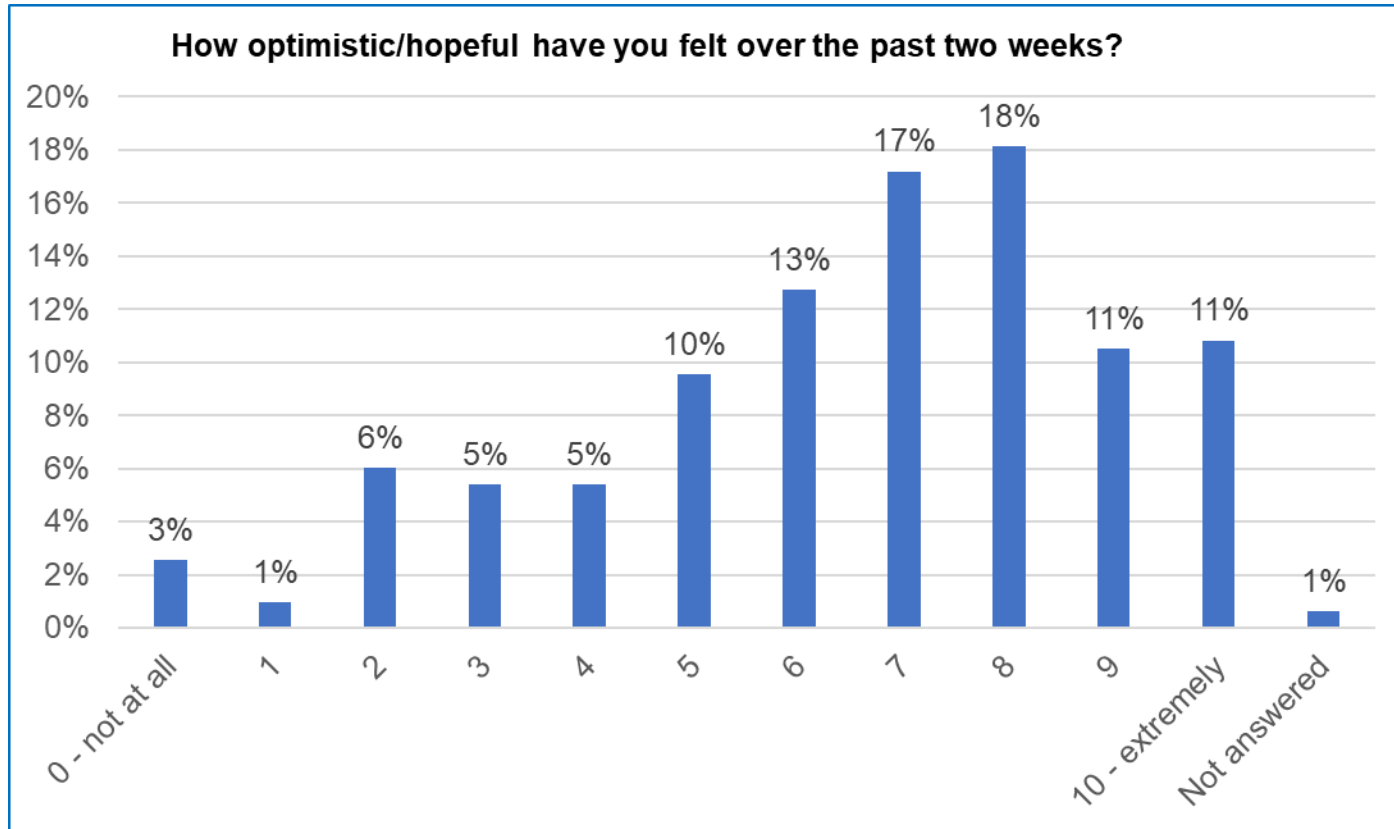
# How motivated have you felt to do things over the past two weeks?



Base: 314 (all responses)

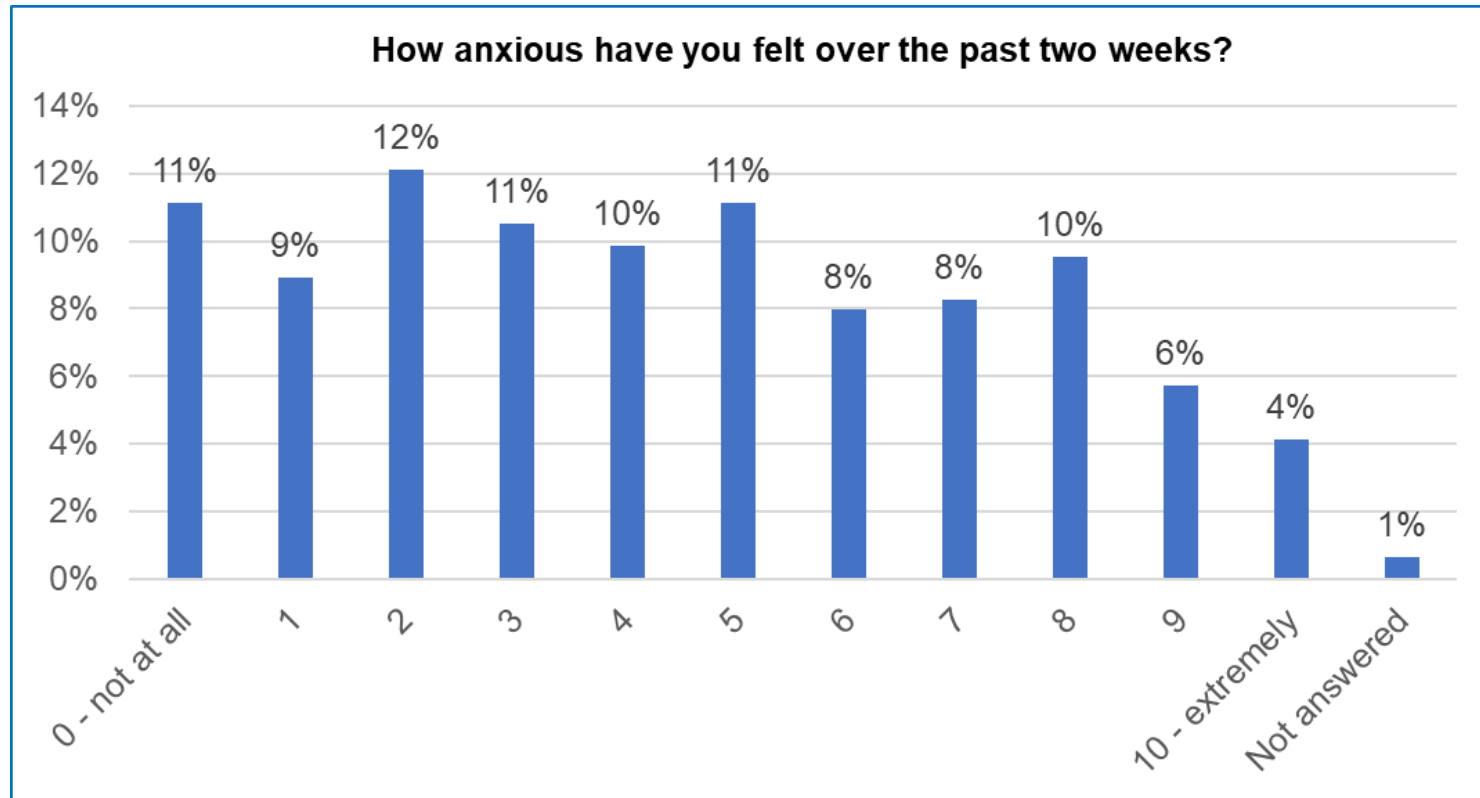


# How optimistic/hopeful have you felt over the past two weeks?



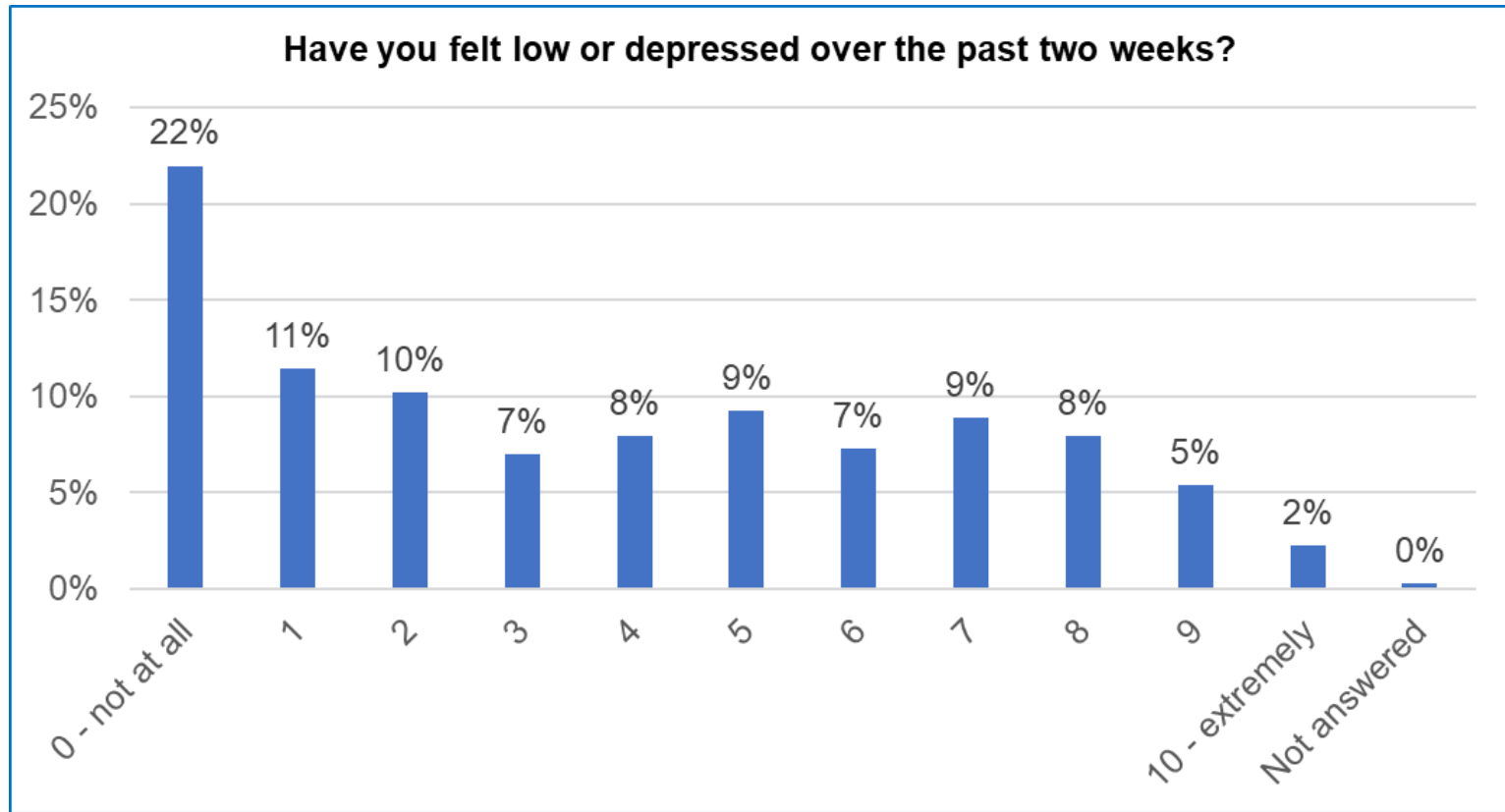
Base: 314 (all responses)

# How anxious have you felt over the past two weeks?



Base: 314 (all responses)

# Have you felt low or depressed over the past two weeks?



**Base: 314 (all responses)**

# How Panel members have felt over the past two weeks – demographic differences

The table below shows the mean score for the questions about how Panel members have been feeling over the past two weeks broken down by different demographic groups. Generally, those feeling more satisfied/motivated/optimistic also felt more anxious or low/depressed. This was true of:

- Male Panel members compared to female Panel members
- Panel members aged 60+ compared to those aged under 60
- White Panel members compared to Black, Asian and Multi-Ethnic Panel members.
- Those living in the centre of the borough compared to Panel members living in either the north or the south of the borough.

	Female	Male	60+	Under 60	Black, Asian and Multi-Ethnic	White	Centre	North	South
Satisfaction with life	6.4	6.8	6.8	6.3	6.2	6.6	6.8	6.3	6.4
Motivation to do things	6.4	6.8	6.9	6.3	6.1	6.6	6.9	6.4	6.5
Feeling optimistic/hopeful	6.3	6.6	6.7	6.2	6.3	6.7	6.6	6.2	6.3
Feeling anxious	4.8	3.7	3.9	4.7	4.8	4.3	3.9	4.8	4.4
Feeling low/depressed	4	3.1	3	4.2	4	3.6	3.1	3.9	4.2

# Positive/negative impacts on mental health and wellbeing

Panel members were asked about a number of aspects of their lives and whether they had a positive or a negative impact on their mental health and wellbeing over the past 12 months.

The aspects of their lives that Panel members viewed as having the most positive impacts on their wellbeing were 'your relationship with family/friends' (69 per cent positive, 11 per cent negative) and 'your home' (57 per cent positive, 17 per cent negative).

Forty-six per cent of Panel members felt their relationship with family/friend had a positive impact on their life compared to 11 per cent who felt this had a negative impact. One in five (21 per cent) stated this was not applicable to them.

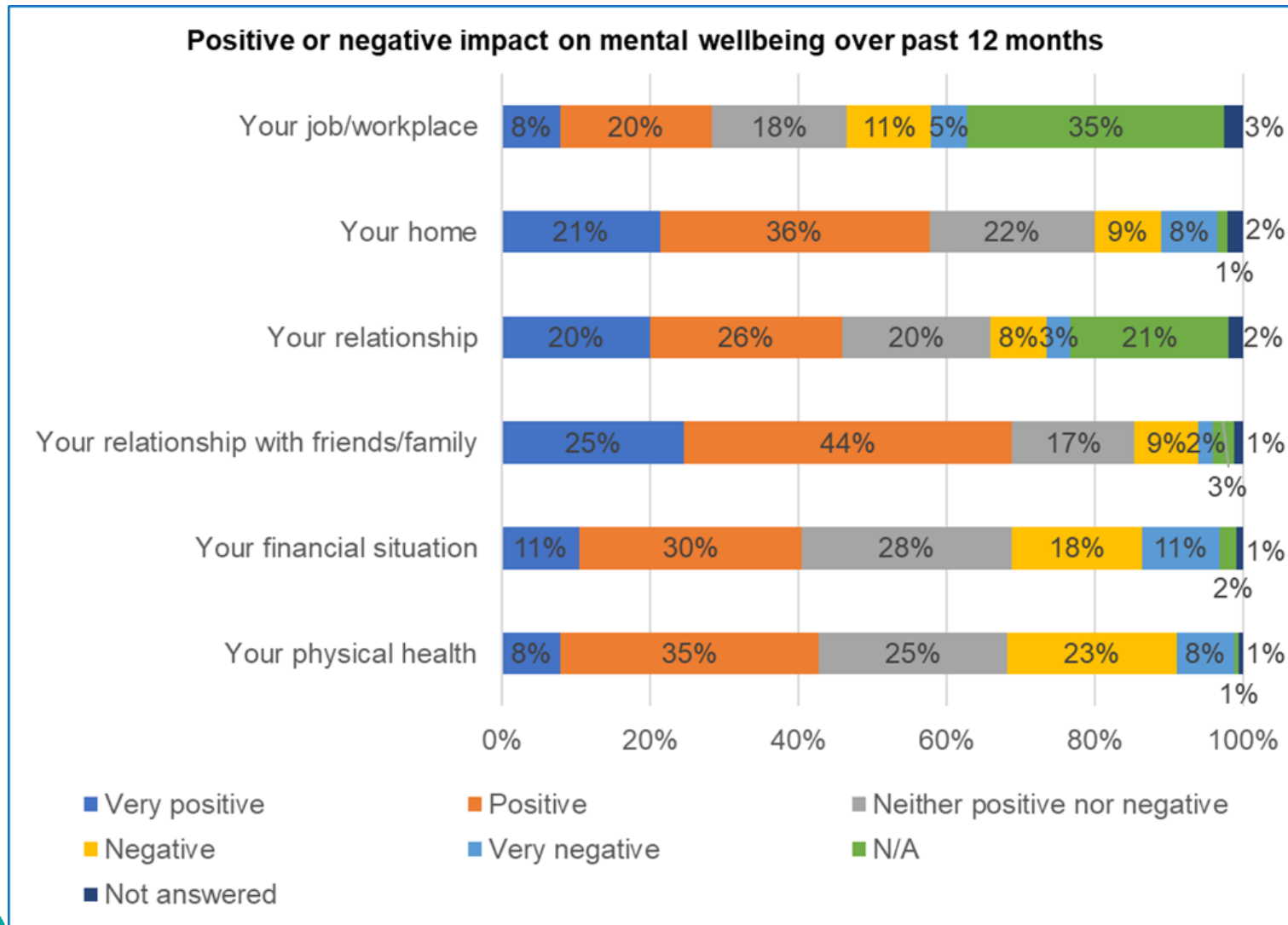
Views on Panel's job/workplace also attracted a 'not applicable' response from over a third of members (35 per cent), whilst 28 per cent felt it had a positive impact on their mental health and wellbeing and 16 per cent a negative impact.

Forty-three per cent of Panel members felt that their physical health had a positive impact on their mental health and wellbeing over the past 12 months compared to 31 per cent who felt it had a negative impact.

Forty-one per cent felt their financial situation had a positive impact and 29 per cent a negative impact on their mental health and wellbeing.

The results for this question can be found in the chart on the next page.

# Positive/negative impact on mental health and wellbeing



**Base: 314 (all responses)**

# Positive/negative impacts on mental health and wellbeing – demographic differences

The table on the next page shows the combined score for positive/very positive impact on mental health and wellbeing broken down by different demographic groups:

- Male Panel members were more likely to think that their home, their relationship and their financial situation had a positive impact on their mental health and wellbeing compared to female Panel members.
- Those over 60 were more likely to think that their home, their relationship with friends and family, their financial situation and their physical health had a positive impact than those under 60.
- Those under 60 felt their job/workplace had a positive impact more than those over 60, although some of those over 60 will be retired.
- White Panel members felt that their home, their relationship, and their physical health their relationship with family and friends had more of a positive impact compared to Black, Asian and Multi-Ethnic Panel members.
- Black, Asian and Multi-Ethnic Panel members felt their job/workplace had a more positive impact than White Panel members.
- Those living in the centre of the borough generally felt that all aspects had a more positive impact on their lives than those living in the north and particularly those living in the south of the borough.
- Those living in both the centre and the north of the borough felt that their physical health had more of a positive impact than those living in the south.

# Positive/negative impacts on mental health and wellbeing – demographic differences

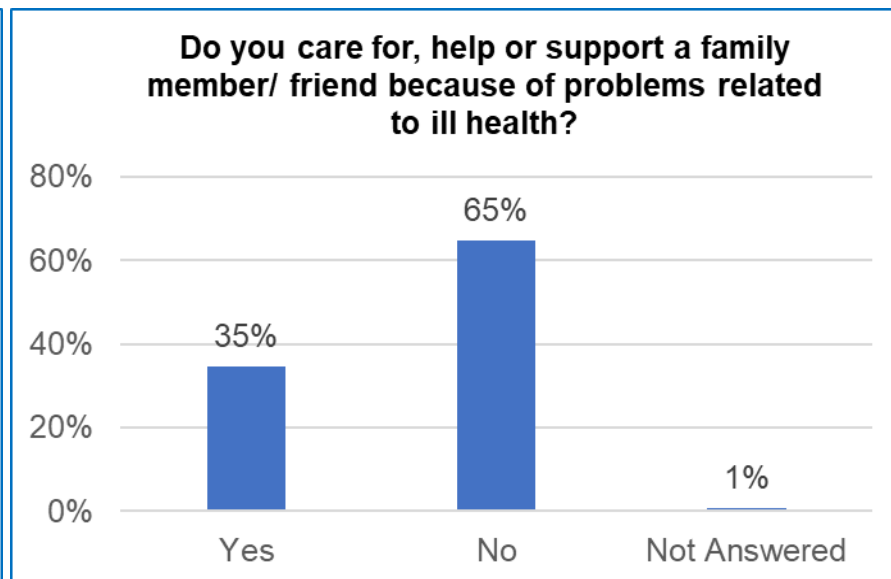
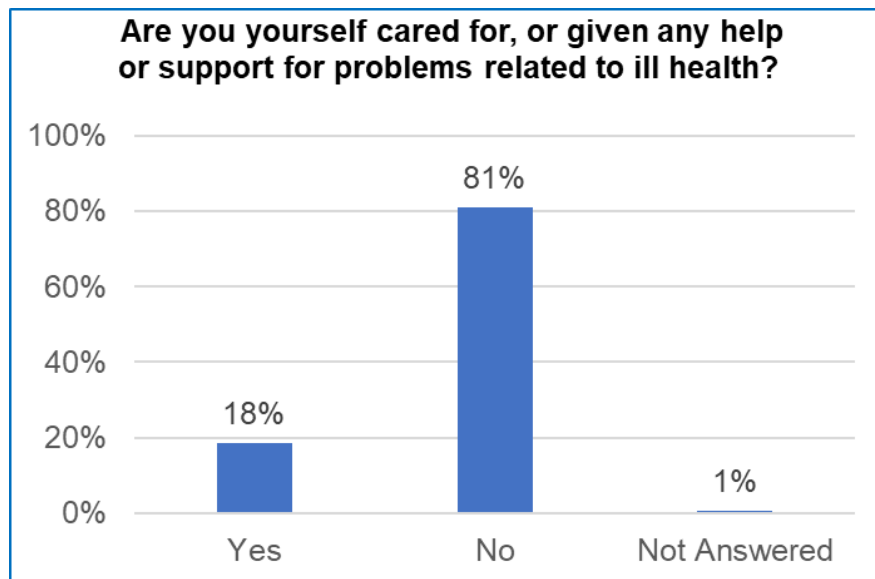
	Female	Male	60+	Under 60	Black, Asian and Multi-Ethnic	White	Centre	North	South
Your job/ workplace	27%	31%	21%	34%	33%	27%	35%	30%	15%
Your home	52%	67%	65%	53%	49%	60%	64%	56%	51%
Your relationship	41%	54%	46%	46%	37%	48%	49%	44%	43%
Your relationship with family and friends	67%	71%	73%	66%	59%	71%	72%	66%	68%
Your financial situation	31%	54%	53%	31%	23%	46%	50%	34%	36%
Your physical health	42%	45%	46%	41%	34%	45%	46%	44%	35%



# Caring responsibilities

Around one in five Panel members (18 per cent) stated that they are cared for, or given help or support by family members, friends, neighbours or others for problems related to ill health, whilst 81 per cent stated they are not cared for. More at 35 per cent stated that they care for, help or support a family member or friend because of problems related to ill health. Sixty-five per cent of Panel members have no caring responsibilities.

**Demographic differences:** Those living in the north (23 per cent) or the south of the borough (21 per cent) were more likely to be cared for than those living in the centre (11 per cent). Those aged under 60 (38 per cent) were more likely to have caring responsibilities than those aged over 60 (30 per cent). Black, Asian and Multi-Ethnic Panel members were more likely to have caring responsibilities (47 per cent) compared to White Panel members (32 per cent). Those living in the south of the borough were more likely to have caring responsibilities (40 per cent) than those living in the centre and north (33 per cent).

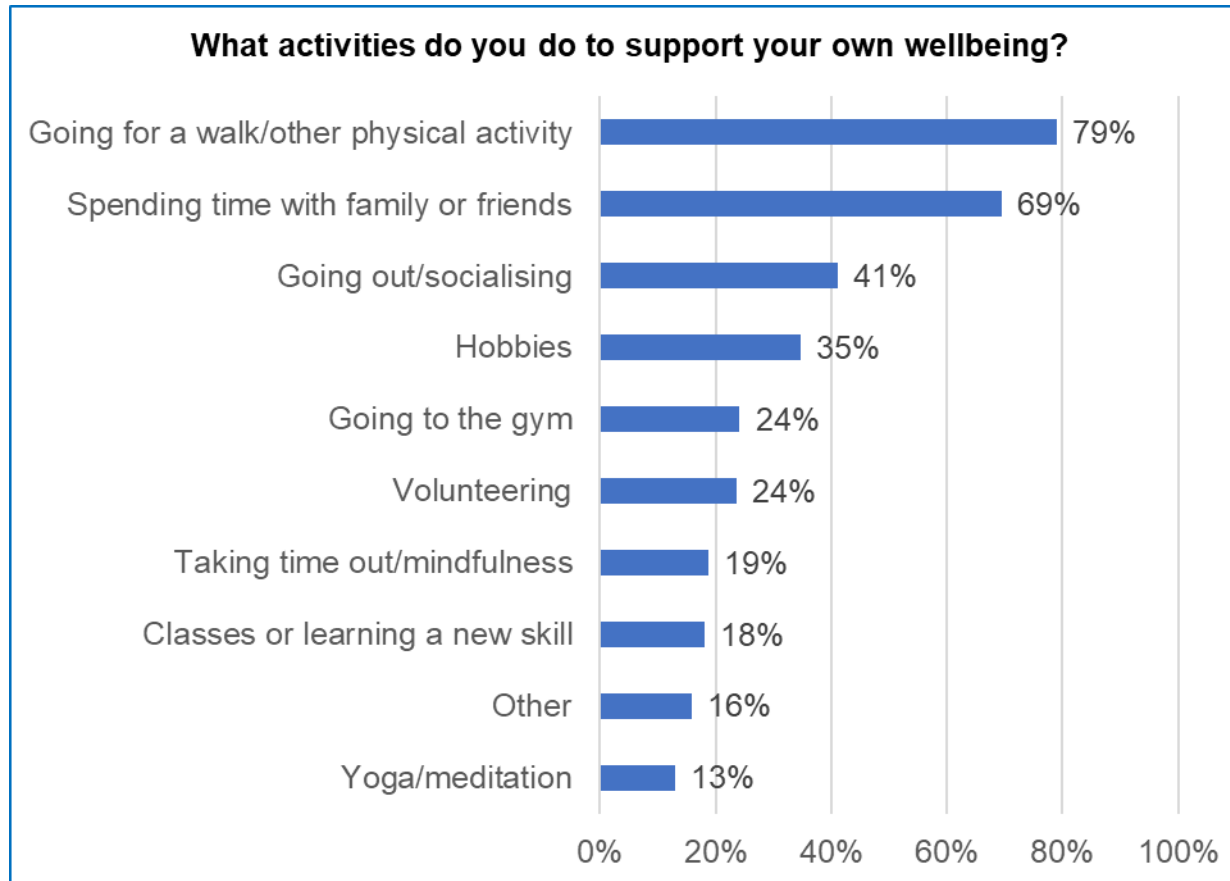


**Base: 314 (all responses)**

# Activities to support wellbeing

The most popular activities undertaken by Panel members to support their own wellbeing were 'going for a walk/other physical activity' (79 per cent) and 'spending time with family or friends' (69 per cent). Less at 41 per cent go out or socialise, 35 per cent undertake hobbies whilst 24 per cent each go to the gym or volunteer to support their wellbeing.

**Demographic differences:** The top three activities were the same across all demographic groups: going for a walk/other physical activity, spending time with family or friends and going out/socialising.



Base: 314 (all responses)

# Activities to support wellbeing – ‘other’ comments

Panel members, who selected ‘other’ when asked what activities they do to support their own wellbeing were asked to comment further. The comments made have been themed and themes with three or more comments have been summarised in the table below. Examples of the comments made can be found on the next page whilst the full list of comments is available in the appendix report.

Theme	Count
Clubs/hobbies	8
Reading	8
Gardening	6
Volunteering/community work	6
Nothing	5
Exercising at home	4
Going to theatre/cinema/events	4
Sport	4
Work	4
Exercise classes	3
Physio/acupuncture/massage	3

# Activities to support wellbeing: 'other' comments

*"Singing for health at Chelsea Theatre.  
Knitting for charity at Chelsea Theatre.  
Chair Exercise at Chelsea Theatre."*

*Clubs/hobbies*

*"I spend approx. 40 minutes exercising  
at home before getting dressed in the  
morning."*

*Exercising at home*

*"Supporting family, friends and my  
local community with help, positive  
energy and motivation gives me  
energy."*

*Volunteering/community work*

*"Going to the theatre a lot."*

*Going to theatre/cinema/events*

*"Travel and gardening."*

*Gardening*

*"I have returned to practising the piano,  
and learning new pieces. And  
sometimes I read a book in French, to  
keep up my language skills."*

*Reading*

*"Reading - keeping up with current  
affairs. Reading for pleasure."*

*Reading*

*"Try to get out when I can to do my  
photography."*

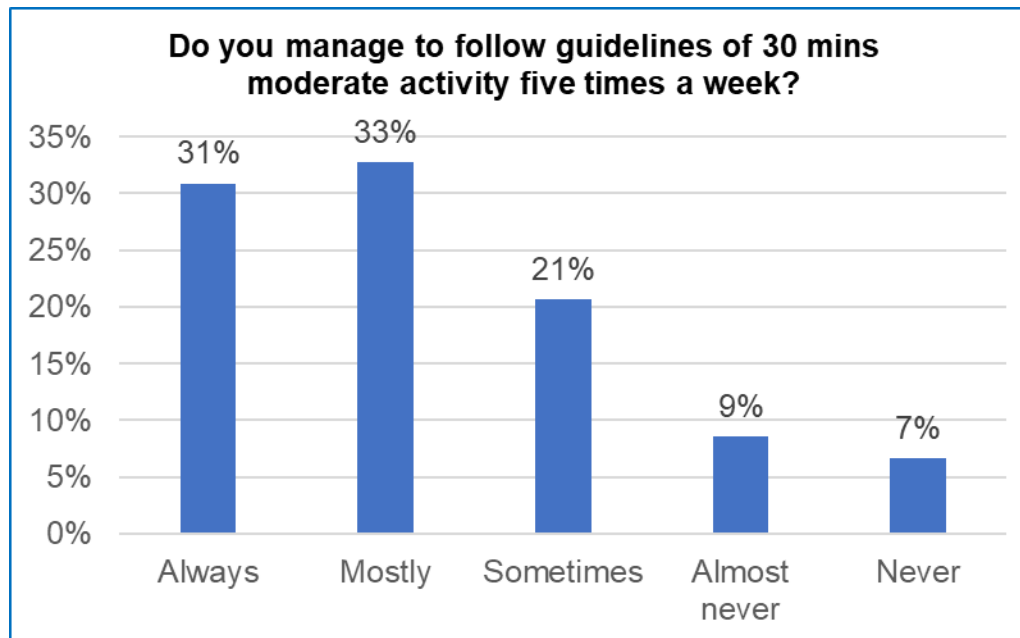
*Clubs/hobbies*



# Recommended physical activity

Thirty-one per cent of Panel members always manage to follow the guidelines of 30 minutes moderate activity five times a week, whilst a third (33 per cent) manage this mostly. One in five (21 per cent) sometimes manage to follow the guidelines with nine per cent almost never following the guidelines and seven per cent never following them.

**Demographic differences:** Male Panel members were more likely to mostly/always meet the physical activity recommendations than female Panel members (68 per cent compared to 61 per cent) as were White Panel members (68 per cent) compared to Black, Asian and Multi-Ethnic Panel members (49 per cent). Those living in the centre of the borough (74 per cent) were also more likely to mostly/always meet the recommendations compared to those living in the north or the south (both 58 per cent).



Base: 314 (all responses)

# How Panel members like to keep active

Panel members were asked how they like to keep active. The comments made have been themed and themes with fifteen or more comments are summarised in the table below. Examples of the comments made can be found on the next page whilst all comments made can be found in the appendix report. The most commonly mentioned ways of Panel members keeping active were walking, going to the gym and exercise classes.

Theme	Count
Walking	169
Going to the gym	40
Exercise classes	32
Cycling	27
Sport	27
Exercise at home	25
Swimming	20
Dog walking	18
Gardening	16
Housework/DIY	15

# How Panel members like to keep active

*“I walk at least two miles a day and I live in a house with several flights of stairs..”*

*Walking*

*“Walking instead of taking the bus. 20 minutes light exercise every morning.”*

*Walking/exercise at home*

*“Yes - I go to the gym, do spinning and play tennis and basketball.”*

*Going to the gym/sport*

*“Walking my dog in our amazing parks.”*

*Dog walking*

*“By working out from home every morning before work during week days and going on long walks during the weekend.”*

*Exercising at home/walking*



*“Stretch & Tone class; walking with a friend; volunteering at Clothes Bank and Food Bank.”*

*Exercise classes/walking*

*“Cycling. Weekly Pilates classes.”*

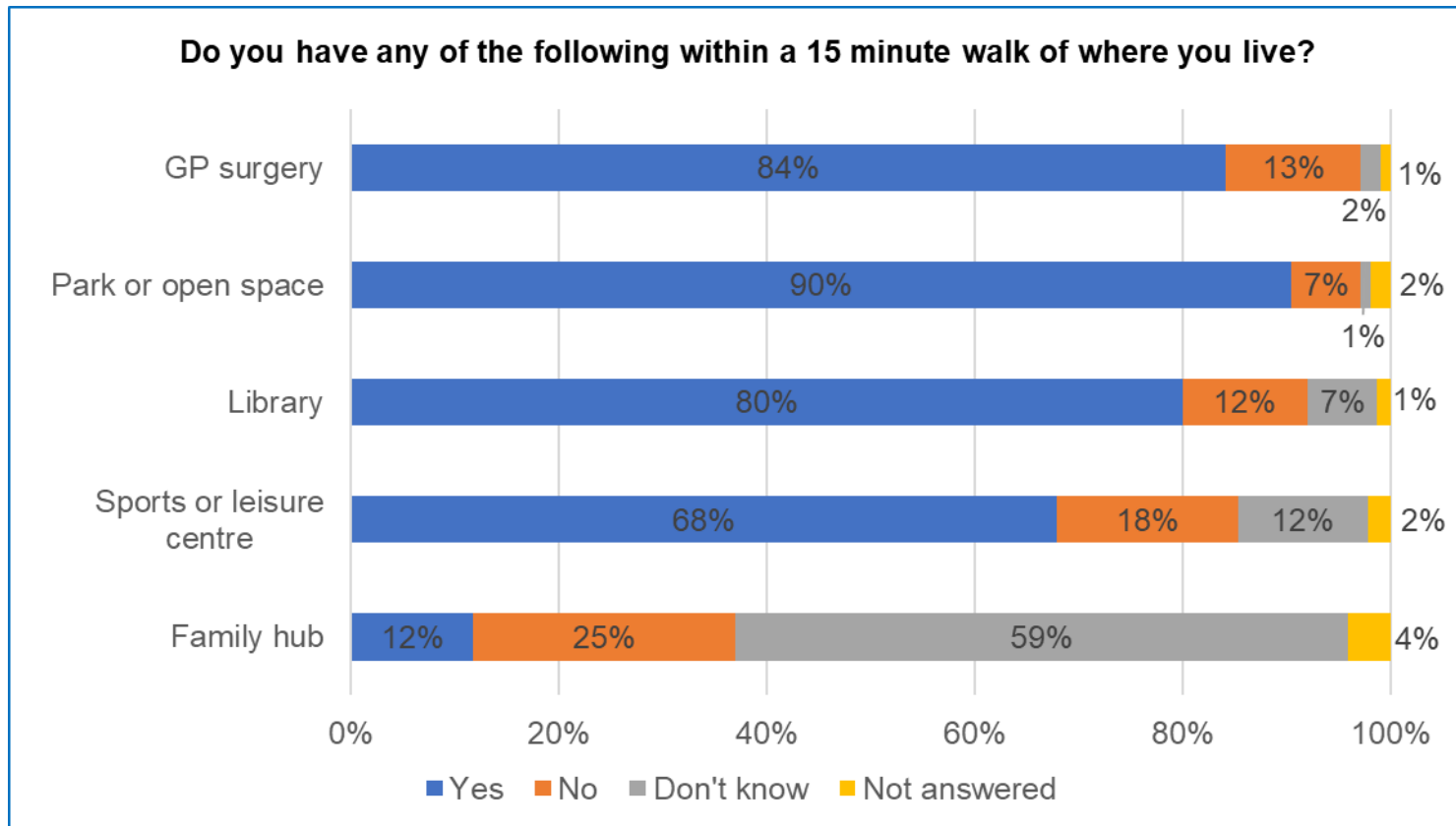
*Cycling/exercise classes*

*“House work, try help people, walk dog.”*

*Housework/DIY/dog walking*

# Local services within a 15-minute walk

Nine out of ten (90 per cent) of Panel members have a park or open space within a 15-minute walk of where they live, slightly less at 84 per cent have a GP within the same radius. Eight out of ten (80 per cent) have a library and 68 per cent a sports or leisure centre within a 15-minute walk of their home. Only 12 per cent of Panel members stated they had a family hub within a 15-minute walking distance, however, this option attracted a large 'don't know' response (59 per cent) perhaps indicating a lack of awareness of family hubs.



**Base: 314 (all responses)**



# Local services within a 15-minute walk – by area

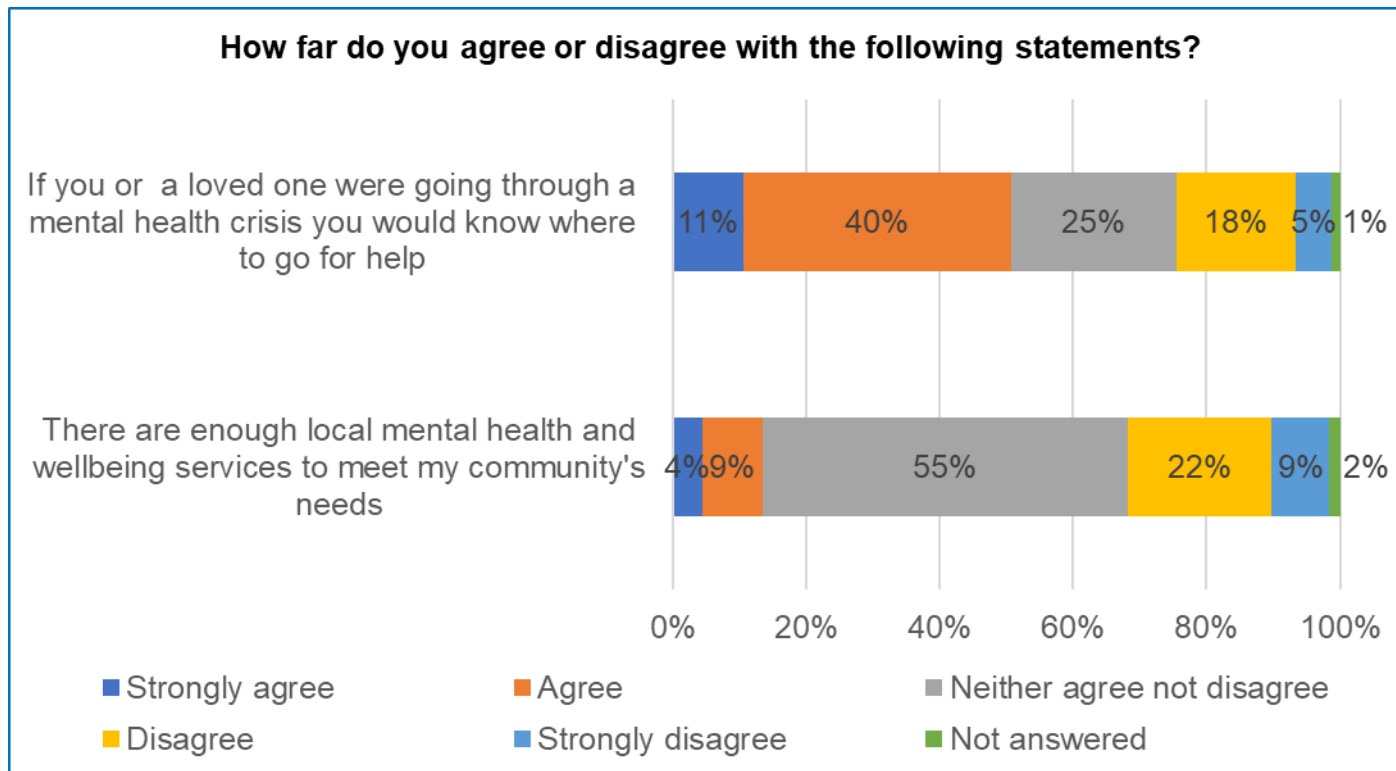
The table below looks at the results for services/facilities within a 15-minute walk of Panel members' homes broken down by area:

- Those living in the south were more likely to be within a 15-minute walk of a GP's surgery compared to those living in the centre of the borough.
- Those living in the centre and north more likely to be within 15-minute walk of a park or open space than those living in the south.
- Those living in the north of the borough were more likely to be within 15 minutes of a sports or leisure centre compared to those living in the south.
- Those living in the centre were less likely to live within 15 minutes of a sports and leisure centre than those living in both the south and the north
- Those living in the north were more likely to be within 15 minutes of a family hub than either those living in the south or the centre.

	Centre	North	South
GP surgery	81%	85%	86%
Park or open space	94%	91%	85%
Library	81%	81%	78%
Sports or leisure centre	54%	80%	71%
Family hub	7%	17%	10%

# Agreement with statements about mental health support

Panel members were asked how far they agreed or disagreed with two statements about emotional health and wellbeing support. Forty per cent agreed and 11 per cent strongly agreed with the statement 'if you or a loved one were going through a mental health crisis you would know where to go for help', 18 per cent disagreed and five per cent strongly disagreed. A quarter (25 per cent) gave a neutral response. Nine per cent agreed and four per cent strongly agreed 'there are enough local mental health and wellbeing services to meet my community's needs'. Twenty-two per cent disagreed and nine per cent strongly disagreed. This statement attracted a large neutral response with over half of Panel members (55 per cent) neither agreeing nor disagreeing.



**Base: 314 (all responses)**

# Agreement with statements about mental health support: demographic differences

***If you or a loved one were going through a mental health crisis you would know where to go for help.***

There were a number of demographic differences in agreement with this statement:

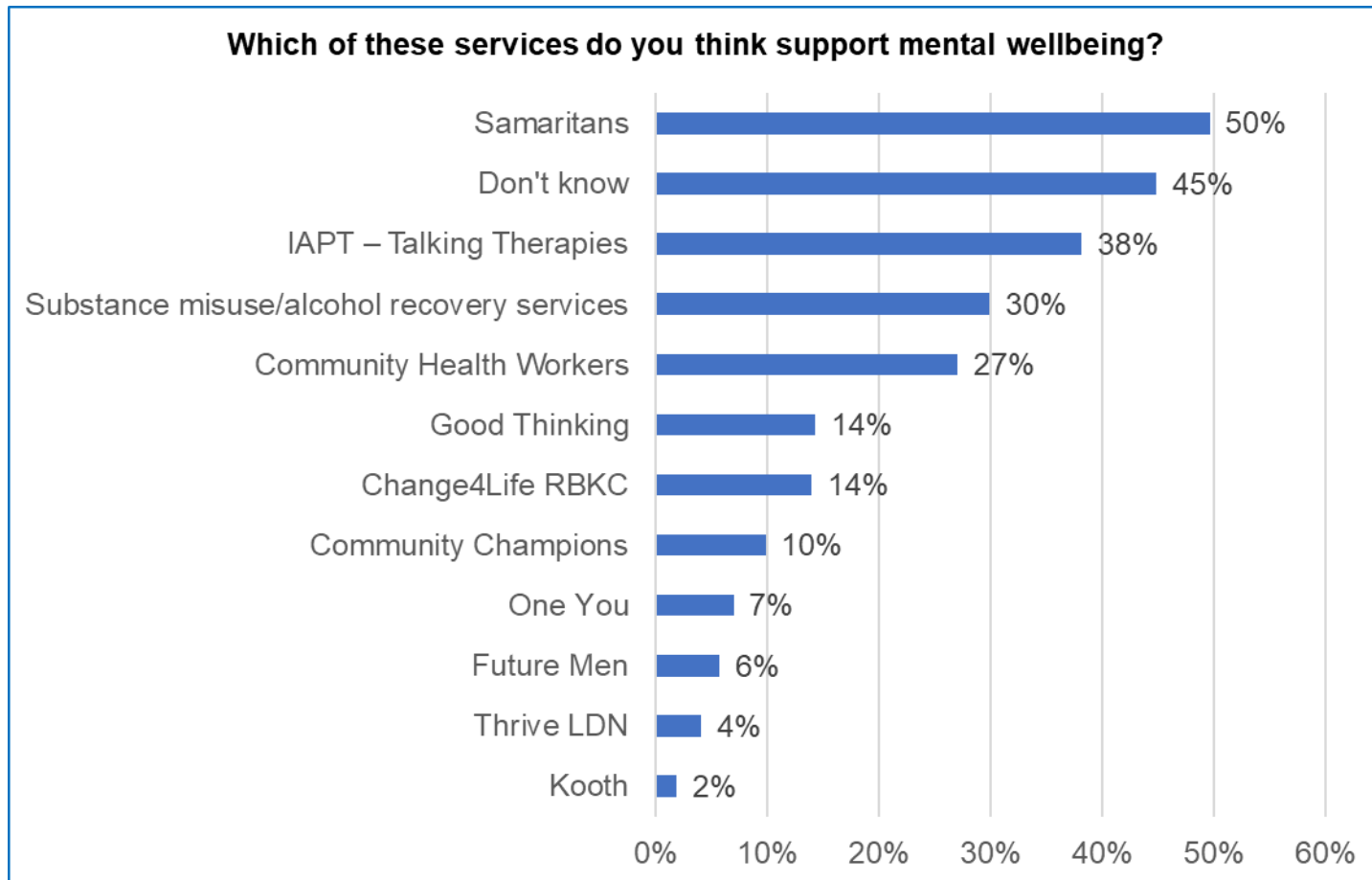
- Female Panel members were more likely to agree (54 per cent) that they would know where to go for help in a mental health crisis compared to male Panel members (45 per cent).
- White Panel members (64 per cent) were also more likely to agree with this statement than Black, Asian or Multi-Ethnic Panel members (51 per cent).
- Those living in the south of the borough (57 per cent) and those living in the north (56 per cent) were more likely to agree than those living in the centre of the borough (40 per cent).

***There are enough local mental health and wellbeing services to meet my community's needs.***

As there was a lower level of agreement with this statement there was little difference in agreement between different demographic groups. However, Black, Asian and Multi-Ethnic Panel members were more likely to agree than White Panel members (21 per cent compared to 11 per cent).

# Services which support mental wellbeing

Panel members were given a list of services and asked which they felt supported mental wellbeing. Forty-five per cent of Panel members stated that they didn't know about the services listed. Half of Panel members felt that the Samaritans supported mental wellbeing. This was followed by 39 per cent who felt that IAPT talking therapies did, 30 per cent felt that substance misuse/alcohol recovery services and 27 per cent community health workers support mental wellbeing. The remaining services were selected by a smaller percentage of Panel members, perhaps indicating a lack of awareness of these particular services.



**Base: 314 (all responses)**

# Services which support mental wellbeing

## *Demographic differences:*

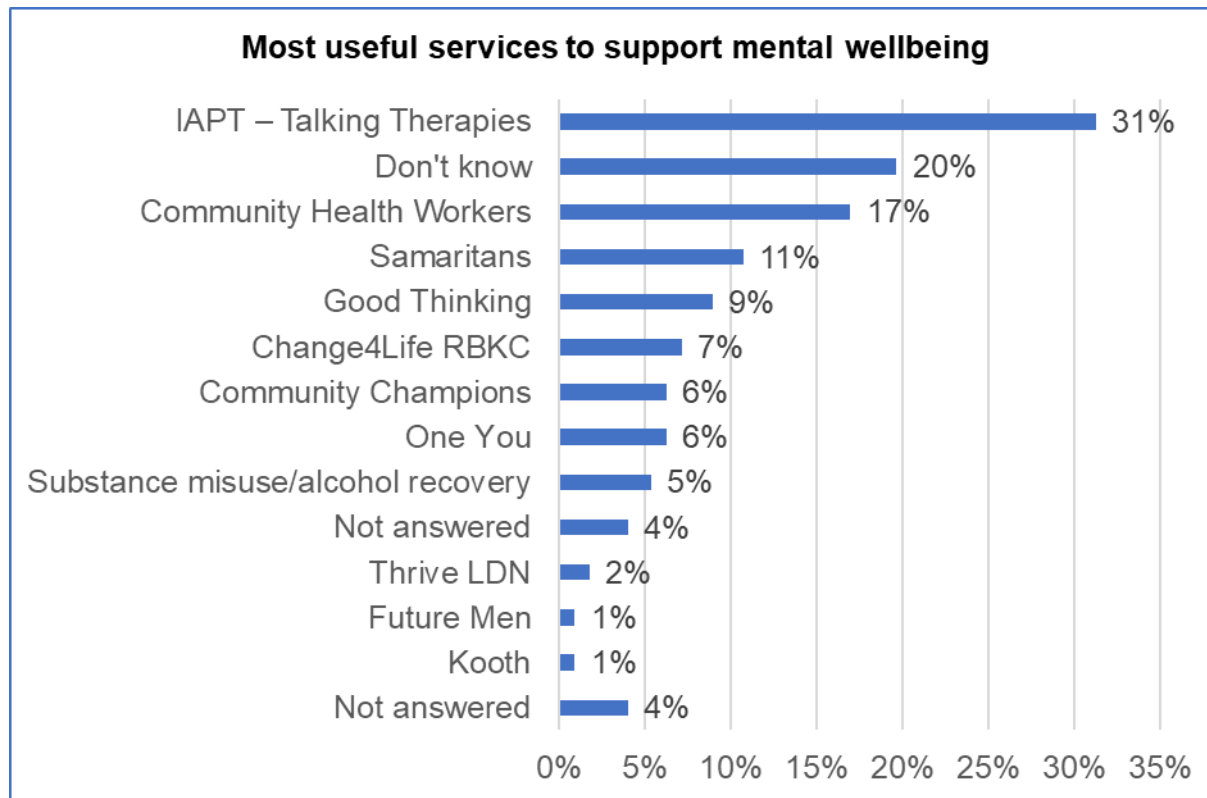
The top three responses to the question about services which support mental health were the same across almost all demographic groups (Samaritans, don't know and IAPT talking therapies). The one exception was age group.

- The top three for those aged 60+ were Samaritans followed by IAPT talking therapies and then don't know.
- The top three for those aged under 60 were don't know, then Samaritans and IAPT talking therapies.

# Most useful services which support mental wellbeing

Panel members were further asked which of the services they'd found most useful in maintaining their and their family's mental wellbeing. The majority of Panel members (75 per cent) stated that they had not used any of the services listed. The chart below excludes these responses. Of the remaining responses, 31 per cent selected IAPT – talking therapies, 17 per cent community health workers and 11 per cent Samaritans. Twenty per cent selected 'don't know'.

*Due to the smaller number of responses, it is not possible to make meaningful comparisons between demographic groups.*



**Base: 112 responses**

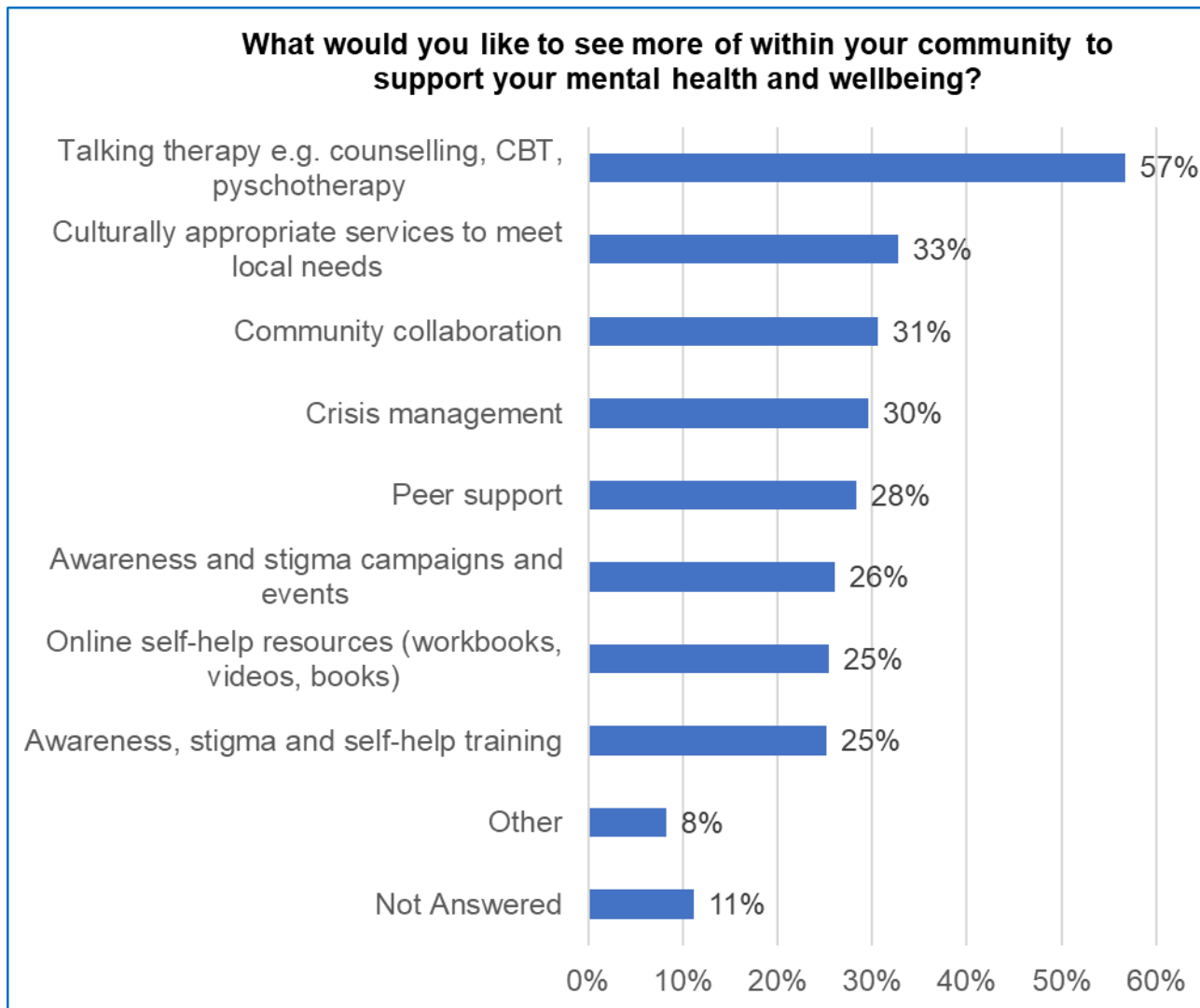
# Services wanted in the community

Panel members were asked what they wanted to see more of in their community to support their mental health and wellbeing. The most popular choice was talking therapy (e.g., counselling, CBT or psychotherapy) chosen by over half of respondents (57 per cent). This was followed by a third of Panel members (33 per cent) who selected ‘culturally appropriate services to meet local needs’ and 31 per cent who selected ‘community collaboration’. The least popular selection was ‘awareness, stigma and self-help training’ and ‘online self-help training’ (both 25 per cent). The chart of these results can be found on the next page.

**Demographic differences:** Talking therapy was the top choice across all demographic groups whilst there were some differences between the second and third placed options summarised in the table below.

	Female	Male	60+	Under 60	Black, Asian and Multi-Ethnic	White	Centre	North	South
1	Talking therapy	Talking therapy	Talking therapy	Talking therapy	Talking therapy	Talking therapy	Talking therapy	Talking therapy	Talking therapy
2	Culturally appropriate services	Online self-help	Culturally appropriate services	Culturally appropriate services	Culturally appropriate services	Crisis management	Culturally appropriate services	Community collaboration	Peer support
3	Community collaboration	Peer support	Peer support	Community collaboration	Crisis management	Peer support	Crisis management	Crisis management	Culturally appropriate services

# Services wanted in the community



**Base: 314 (all responses)**



# Services wanted in the community: 'other' comments

Panel members who selected 'other' were asked to comment further. The comments made have been themed and the themes with three or more comments summarised in the table below. Examples of the comments made can be found on the next page whilst the full list of comments can be found in the appendix report.

Theme	Count
Don't know	7
Access to services	5
Children and young people's services	4
Other	3
Wellbeing services	3

# Services wanted in the community: 'other' comments

*“Not in a position to answer this question because I do not know what currently exists and where any gaps may be.”*

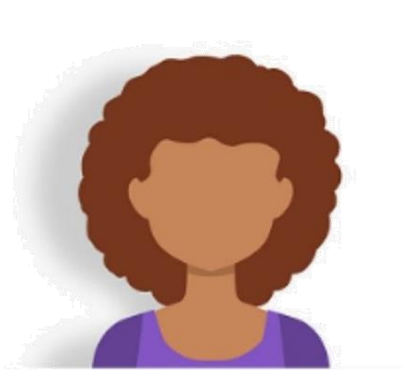
*Don't know*

*“It's hard to approach the right person, need more direct contact or correct GP direction to the service is.”*

*Access to services*

*“Services specifically for children and young people linked to schools.”*

*Children and young people's services*



*“Access to GP and / psychiatrist.”*

*Access to services*

*“Sports referral. Meditation sessions  
Sports sessions that are adapted to  
people that are physically not fit and  
mentally unwell.”*

*Wellbeing services*

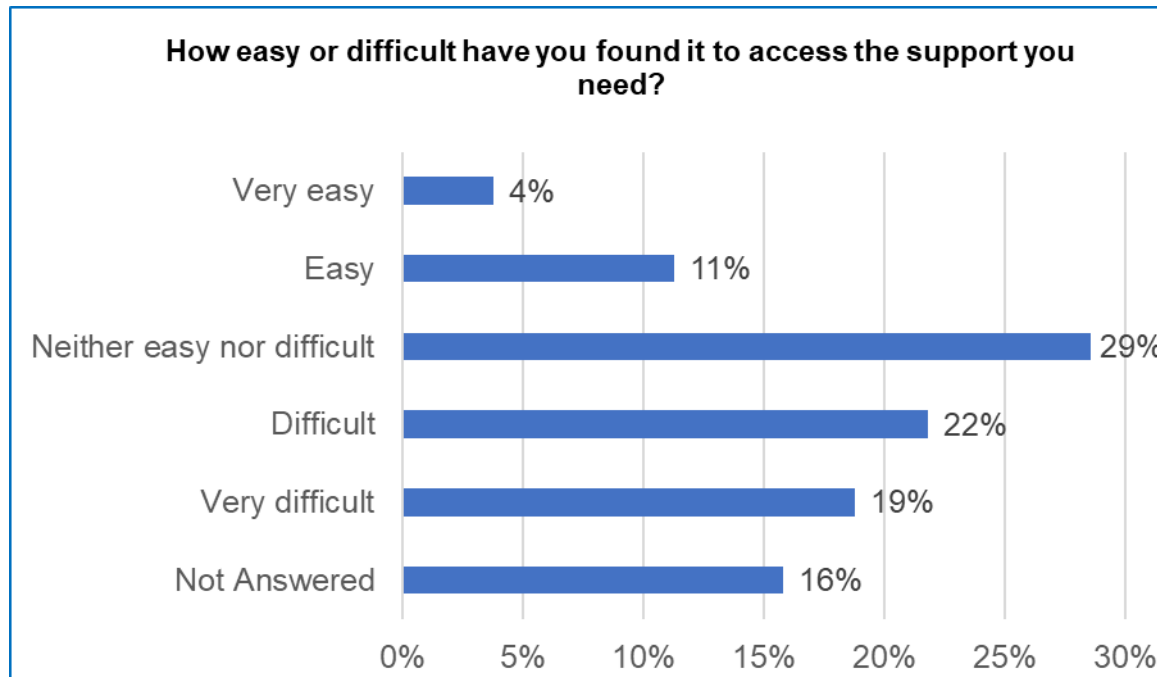
*“I think physical health can have quite  
an impact on ones mental health often.  
So perhaps more access to services  
aimed at improving ones physical  
health.”*

*Wellbeing services*

# Ease of accessing services

Those Panel members who had accessed mental health services or support were asked how difficult or easy they had found it. The chart below excludes those who stated they hadn't accessed any support. Eleven per cent stated they had found accessing support easy and five per cent very easy. However, 22 per cent had found it difficult and 19 per cent very difficult. Twenty-nine per cent of Panel members gave a neutral response.

*Due to the smaller number of responses, it is not possible to make any meaningful comparisons between the demographic groups.*



**Base: 133 all responses**

# Improving access to mental health services and support

Panel members were asked for their comments on how they think we can improve access to mental health services and support. The comments made have been themed and the themes with four or more comments summarised in the table below. Examples of the comments made can be found on the next page whilst the full list of comments can be found in the appendix report.

Theme	Count
Communication/promotion	68
Don't know	29
Increase services available	23
Reduce waiting lists/times	13
Difficulty in accessing services/support	7
Improve GP services	6
Wellbeing services	6
Make services easier to contact/access	5
Reduce stigma	5
Support for children and young people	5
Outreach in the community	4

# Improving access to mental health services and support

*“Publicise the services more openly and vocally, in schools, parks, libraries, hospitals etc.”*

*Communication/promotion*

*“Do not know enough about existing services in order to judge.”*

*Don't know*

*“Expand services - currently, demand outstrips supply. I have used Talking Therapies service but I was told the service is rationed (4-6 sessions only) due to the huge demand. I cannot access these services privately because they are expensive”*

*Increase services available*



*“By increasing the number of services to decrease damaging and unhelpful waiting list time.”*

*Reduce waiting lists/times*

*“Increase awareness of the wellbeing facilities available to us. If feasible, organise a group Zumba/aerobic session in parks.”*

*Wellbeing services*

*“Access to a GP or psychiatrist or psychologist (following from psychiatric assessment) is extremely challenging. Reform of these for better access is crucial.”*

*Difficulty accessing services/support*

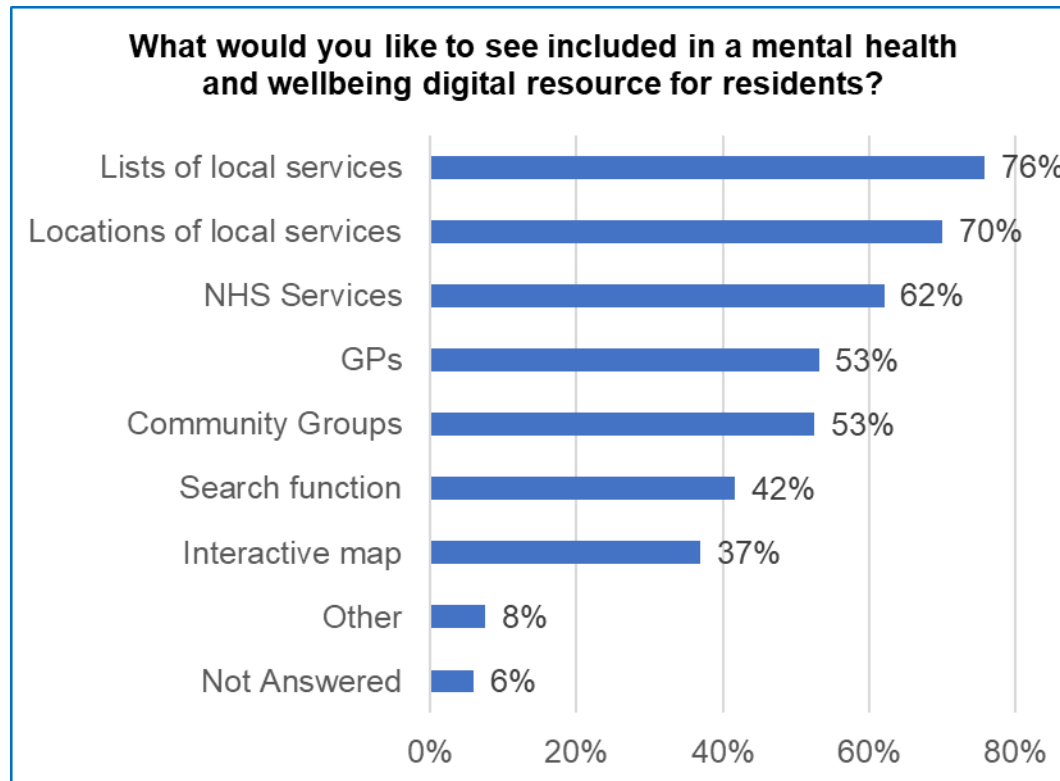
*“GP's are really hard to see or even speak to.”*

*Improve GP services*

# Mental health and wellbeing digital resource

Panel members were asked what they would like to see included in a mental health and wellbeing digital resource for residents. The most popular choices were 'lists of local services' (76 per cent), 'locations of local services' (70 per cent) and 'NHS services' (62 per cent). The least popular choices were a 'search function' (42 per cent) and an 'interactive map' (37 per cent).

**Demographic differences:** The top three choices for a digital resource were the same across all demographic groups (list of local services, locations of local services and NHS services) except for Black, Asian and Multi-Ethnic Panel members who had community groups third ahead of NHS services.



**Base: 314 (all responses)**

# Mental health and wellbeing digital resource: 'other' comments

Panel members who selected 'other' when asked what they would like to see included in a mental health and wellbeing digital resource for residents were asked to comment further. The comments made have been themed and the themes with two or more comments summarised in the table below. Examples of the comments made can be found on the next page whilst the full list of comments can be found in the appendix report.

Theme	Count
Digital inclusion	7
Crisis support/direction to right help	6
NHS services	5
Support groups	5
Contact/how to access details	4
Develop an app	3
Mental health support centre	3
Signpost private services	3
Helpline	2

# Mental health and wellbeing digital resource: 'other' comments

*“Not forgetting that not all older people have access to or have computers and/or tablets, etc., and or smart phones with apps, etc.!”*

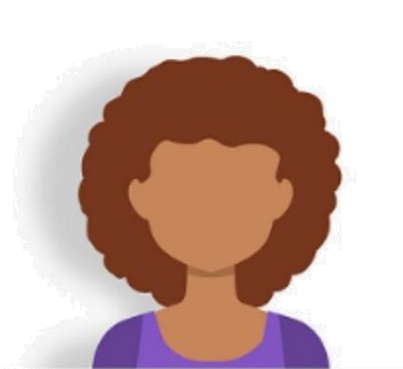
*Digital inclusion*

*“Crisis support for those that need help straight away without the need for a hospital admission.”*

*Crisis support/direction to right help*

*“Support groups with a specific cultural/ religious focus - women, teens etc.”*

*Support groups*



*“I would not use this - there is enough digital well-being platforms out there. However if it was an app to show all the services commissioned by both the NHS and RBKC then that would be well overdue.”*

*Develop an app*

*“Sounds great but ideally I don't think it will help that much, people need quick access to mental health professionals and while you can inform them of these so can their doctor which is normally the first port of call.”*

*NHS services*

*“Pointers to the private sector for those who may not find what they need on the website.”*

*Signpost private services*

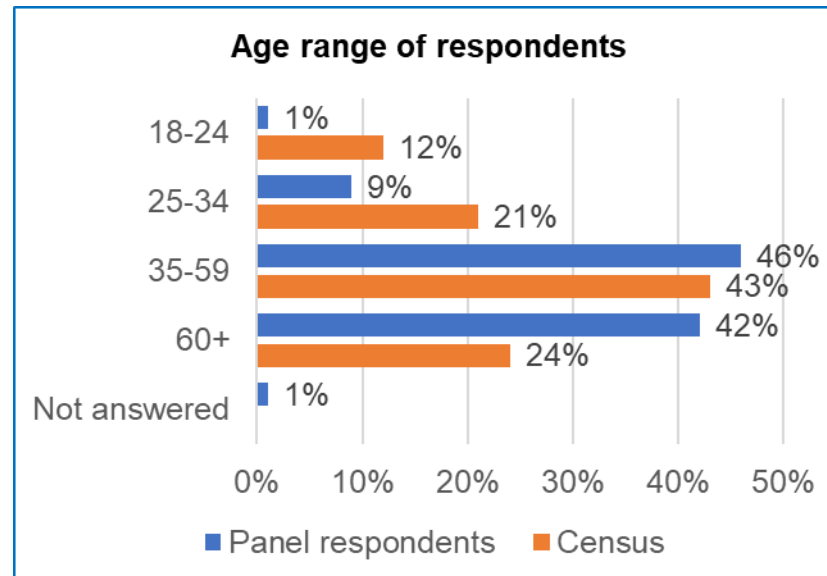
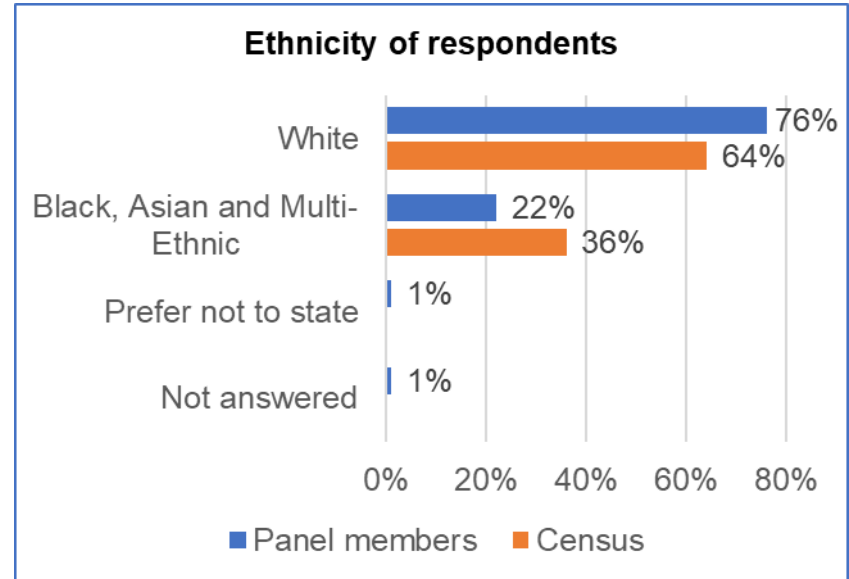
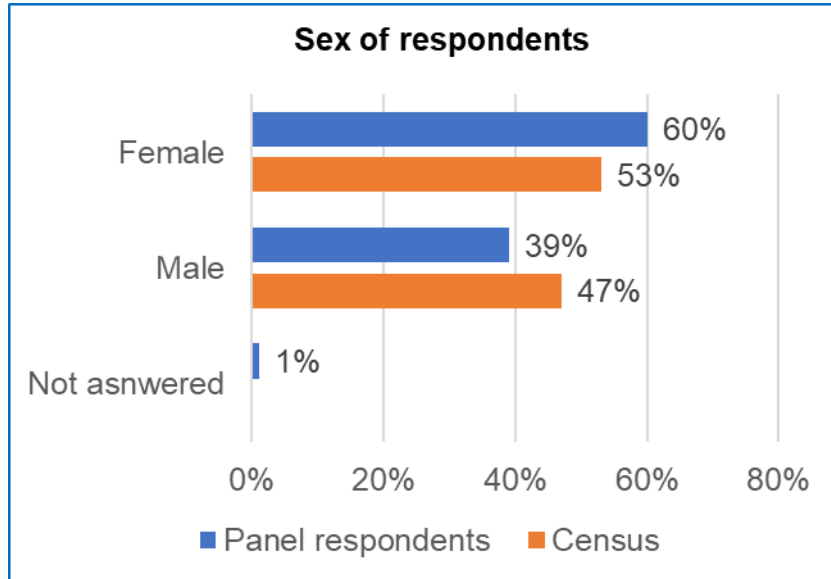
*“Nothing too complicated. Just plenty of telephone numbers, and telephone lines that will answer pretty rapidly.”*

*Contact/how to access details*



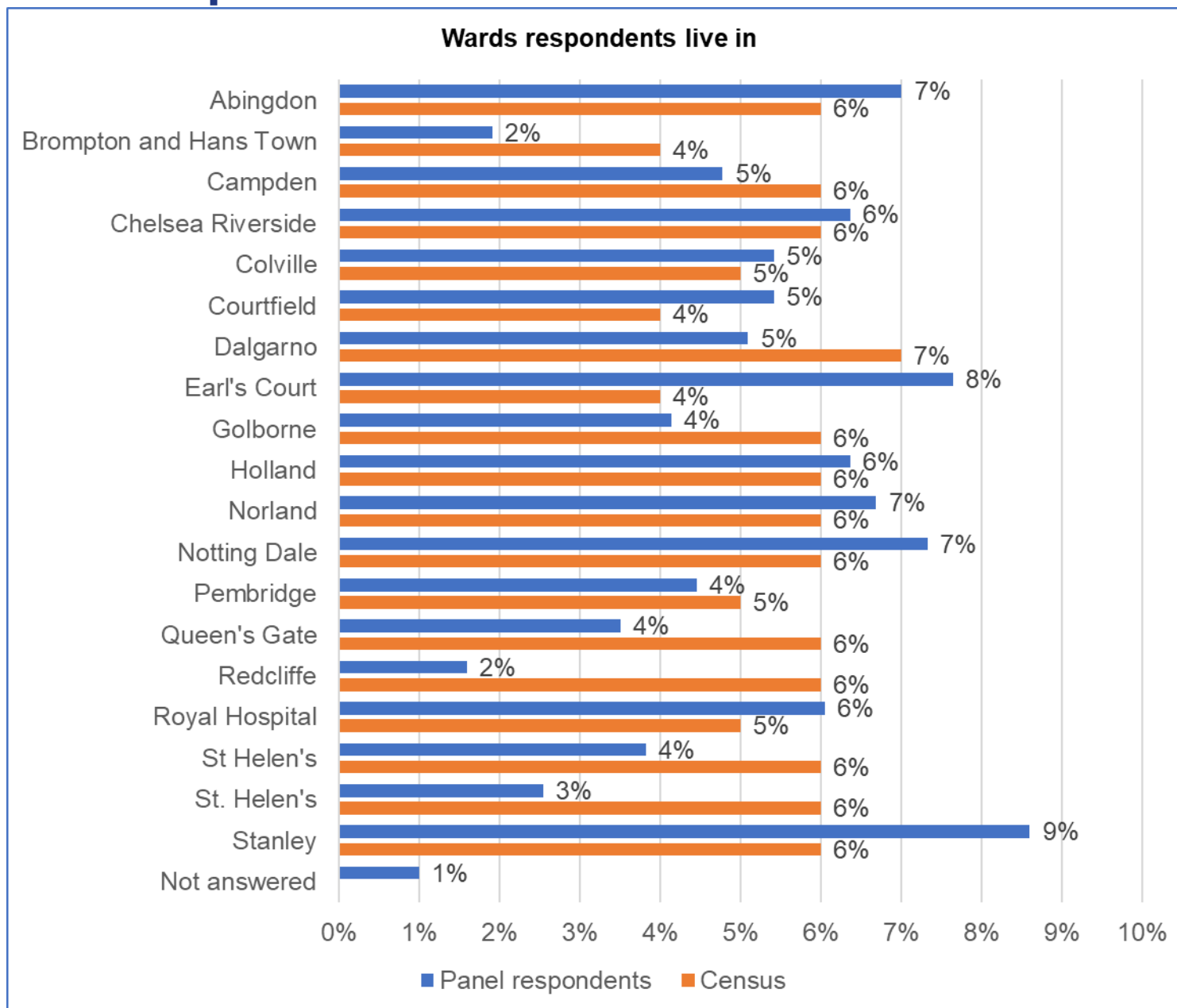
# About respondents: demographic breakdown

The membership of the Citizens' Panel is broadly representative of the borough in terms of sex, age and ethnicity. It is also broadly representative across the 18 wards of the borough. The following charts show the demographic breakdowns of the Panel respondents to this survey and compared this to the Census data for 2021.



**Base: 314 (all responses)**

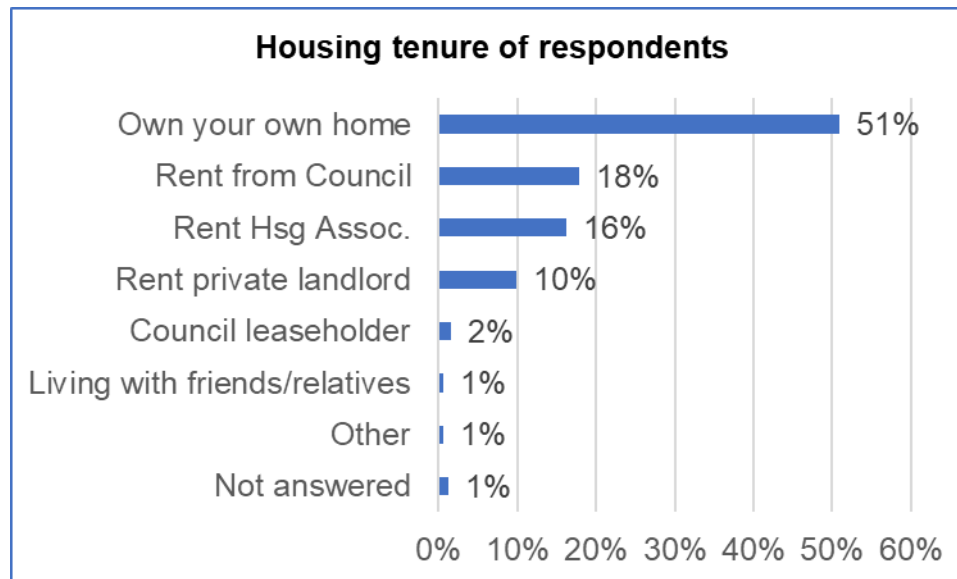
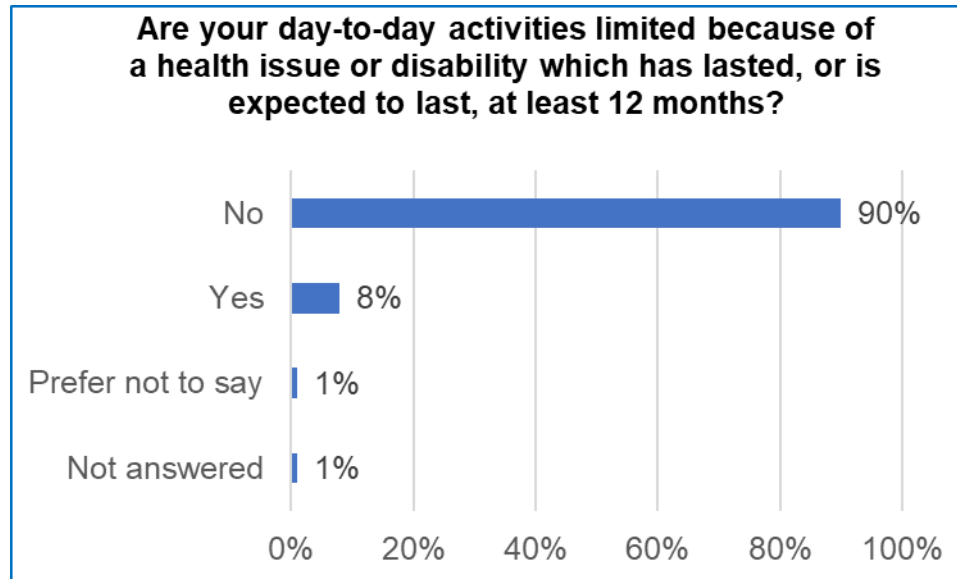
# About respondents: Ward breakdown



**Base: 314 (all responses)**



# About respondents: Demographic breakdown



**Base: 314 (all responses)**