

## Experience of Accessing Health and Wellbeing Services in Surrey & NE Hants %

This survey has been created by the Independent Mental Health Network to understand people's experiences of seeking support for health and wellbeing in Surrey and North East Hampshire.

We will use this information to help the local mental health trust, Surrey and Borders Partnership NHS Foundation Trust, understand where services are working well and where they are not, and how they can be improved to meet the needs of everyone in the community.

We want to hear from everyone over the age of 18, whether you have accessed mental health and wellbeing support in the past or not. Please consider any past health and wellbeing service experiences you may have had when answering our questions.

The survey questions will ask about 'organisations providing support services'. Examples of relevant organisation providing support could include, but is not limited to: NHS services, charities, faith groups and community groups. Examples of support could include, but is not limited to: specialist therapies, counselling services, peer support group, and communitybased crisis support.

The survey will ask about aspects of your health and emotional wellbeing experience. If you find completing this survey distressing, please take take a break or reach out for support you can reach out to someone you trust or by accessing one of the support services provided at the end of this survey.

If you are a carer and completing this survey on behalf of someone else, please complete all questions with that person's information and experiences.

This survey will be submitted **anonymously**, unless you choose to provide us with your contact details to discuss the topics further. If you have any questions or concerns about completing this survey, please email <a href="mailto:charlotte.payne@surreycoalition.org.uk">charlotte.payne@surreycoalition.org.uk</a> or

|            | e range *  |
|------------|--|
| $\bigcirc$ | 18-25  |
| $\bigcirc$ | 26-34  |
| $\bigcirc$ | 35-54  |
| $\bigcirc$ | 55-64  |
| $\bigcirc$ | 65+  |
|            |  |
|            |  |
|            |  |
| 2. Wh      | ich of the following best describes your sexual orientation? *                           |
| 2. Wh      | ich of the following best describes your sexual orientation? *  Straight or Heterosexual |
| 2. Wh      |  |
| 2. Wh      | Straight or Heterosexual   |
| 2. Wh      | Straight or Heterosexual  Gay or Lesbian   |

| 3. To \    | which gender identity do you most identify? * |
|------------|---|
| $\bigcirc$ | Female  |
| $\bigcirc$ | Male  |
| $\bigcirc$ | Transgender Female                            |
| $\bigcirc$ | Transgender Male                              |
| $\bigcirc$ | Non-binary                                    |
| $\bigcirc$ | Gender variant or non-conforming              |
| $\bigcirc$ | Prefer not to say                             |
| $\bigcirc$ | Other   |

| 4. | 1. What is your ethnicity? * |                                       |  |  |
|----|------------------------------|---------------------------------------|--|--|
|    | $\bigcirc$                   | White: British                        |  |  |
|    | $\bigcirc$                   | White: English                        |  |  |
|    | $\bigcirc$                   | White: Welsh                          |  |  |
|    | $\bigcirc$                   | White: Scottish                       |  |  |
|    | $\bigcirc$                   | White: Northern Irish                 |  |  |
|    | $\bigcirc$                   | White: Irish                          |  |  |
|    | $\bigcirc$                   | White: Gypsy, Roma or Irish Traveller |  |  |
|    | $\bigcirc$                   | Black: British                        |  |  |
|    | $\bigcirc$                   | Black: Irish                          |  |  |
|    | $\bigcirc$                   | Black: African                        |  |  |
|    | $\bigcirc$                   | Black: Caribbean                      |  |  |
|    | $\bigcirc$                   | Asian: British                        |  |  |
|    | $\bigcirc$                   | Asian: Indian                         |  |  |
|    | $\bigcirc$                   | Asian: Pakistani                      |  |  |
|    | $\bigcirc$                   | Asian: Bangladeshi                    |  |  |
|    | $\bigcirc$                   | Asian: Chinese                        |  |  |
|    | $\bigcirc$                   | Asian: Nepalese                       |  |  |
|    | $\bigcirc$                   | Mixed: White and Black Caribbean      |  |  |
|    | $\bigcirc$                   | Mixed: White and Black African        |  |  |
|    | $\bigcirc$                   | Mixed: White and Asian                |  |  |

| 5. |            | you consider yourself disabled? * xample, long-term health condition, physical, learning, mental health |
|----|------------|---|
|    | $\bigcirc$ | Yes   |
|    | $\bigcirc$ | No  |
|    | $\bigcirc$ | Prefer not to say   |
|    | $\bigcirc$ | Other   |
|    |            |   |
| 6. | -          | you identify as neurodivergent? * ose all that apply, you do not need a diagnosis                       |
|    |            | No  |
|    |            | Attention Deficit Hyperactivity Disorder (ADHD/ADD)   |
|    |            | Autism (ASC/ASD/Asperger's)   |
|    |            | Dyscalculia (Difficulty in understanding numbers)   |
|    |            | Dyslexia (Difficulty reading, writing and spelling)   |
|    |            | Dyspraxia (Developmental Coordination Disorder/DCD)   |
|    |            | Tourette's Syndrome   |
|    |            | Prefer not to say   |
|    |            | Other   |

| • | difficulties who couldn't manage without your help? * |
|---|---|
|   | Yes   |
|   | O No  |
|   | Unsure  |
|   | Prefer not to say                                     |

| 8. | Wha        | at area do you live in? * |
|----|------------|---------------------------|
|    | $\bigcirc$ | Elmbridge                 |
|    | $\bigcirc$ | Epsom and Ewell           |
|    | $\bigcirc$ | Guildford                 |
|    | $\bigcirc$ | Hart                      |
|    | $\bigcirc$ | Mole Valley               |
|    | $\bigcirc$ | Reigate and Banstead      |
|    | $\bigcirc$ | Runnymede                 |
|    | $\bigcirc$ | Rushmoor                  |
|    | $\bigcirc$ | Spelthorne                |
|    | $\bigcirc$ | Surrey Health             |
|    | $\bigcirc$ | Tandridge                 |
|    | $\bigcirc$ | Waverley                  |
|    | $\bigcirc$ | Woking                    |

## Accessing Support in the Community

These questions are to gain an understanding of barriers which might deter you from seeking support.

| to-c<br>stop | would you reach out to if you were struggling to cope with dayay life at any time, for example you felt very worried or sad or had ped going out as much as usual? * |
|--------------|--|
| Choo         | se all that apply  |
|              | Friends, Family, Partner or Spouse   |
|              | GP   |
|              | Safe Haven   |
|              | Charity Services (such as, Counselling)  |
|              | Peer Support Groups  |
|              | Community Leaders  |
|              | Emergency Services or 111  |
|              | Crisis Line or Single Point of Access  |
|              | No-one   |
|              | Other  |
|              |  |
| 10 Wh        | at do you fool are notential barriers to you cooking support when  |
|              | at do you feel are potential barriers to you seeking support when are struggling to cope with day-to-day life? *   |
|              |  |
|              |  |

## **Experience of Support in the Community**

These questions are to gain an understanding of the experiences you have had when accessing support in the community.

Please answer the multiple choice with your standard experience of services. You are welcome to detail any exceptions to your choice or example experiences in the "Would you like to provide more information?" sections.

11. I feel listened to and respected when discussing my needs with

|     | orga       | anisations providing support? *           |
|-----|------------|---|
|     | $\bigcirc$ | Strongly agree                            |
|     | $\bigcirc$ | Agree                                     |
|     | $\bigcirc$ | Neutral                                   |
|     | $\bigcirc$ | Disagree                                  |
|     | $\bigcirc$ | Strongly disagree                         |
|     | $\bigcirc$ | Unsure/Not applicable                     |
|     |            |   |
| 12. | Wou        | ıld you like to provide more information? |
|     |            |   |
|     |            |   |

|     | 13. I feel that organisations providing support will understand my individual needs? * |   |  |
|-----|--|---|--|
|     | $\bigcirc$   | Strongly Agree                            |  |
|     | $\bigcirc$   | Agree                                     |  |
|     | $\bigcirc$   | Neutral                                   |  |
|     | $\bigcirc$   | Disagree                                  |  |
|     | $\bigcirc$   | Strongly disagree                         |  |
|     | $\bigcirc$   | Unsure/Not applicable                     |  |
|     |  |   |  |
| 14. | Wou  | uld you like to provide more information? |  |
|     |  |   |  |

|     | 5. I feel that organisations are well-informed about issues relating to diverse needs. *       |  |  |
|-----|--|--|--|
|     | For example age, ethnicity, gender and sexual identity, disability, and other characteristics. |  |  |
|     |  | Strongly Agree                           |  |
|     |  | Agree                                    |  |
|     |  | Neutral                                  |  |
|     |  | Disagree                                 |  |
|     |  | Strongly Disagree                        |  |
|     |  | Unsure/Not applicable                    |  |
|     |  |  |  |
| 16. | Woul   | ld you like to provide more information? |  |
|     |  |  |  |
|     |  |  |  |

| 17. | 7. I feel that organisations are well-informed about what other services are available to meet diverse needs. * |   |  |
|-----|---|---|--|
|     | For example age, ethnicity, gender and sexual identity, disability, and other characteristics.                  |   |  |
|     | $\bigcirc$  | Strongly Agree                            |  |
|     | $\bigcirc$  | Agree                                     |  |
|     | $\bigcirc$  | Neutral                                   |  |
|     | $\bigcirc$  | Disagree                                  |  |
|     | $\bigcirc$  | Strongly disagree                         |  |
|     | $\bigcirc$  | Unsure/Not applicable                     |  |
|     |   |   |  |
| 18. | Wou   | uld you like to provide more information? |  |
|     |   |   |  |
|     |   |   |  |

|     | 19. I am concerned that I may experience discrimination, prejudice or assumptions being made by organisations that provide support services * |   |  |
|-----|---|---|--|
|     | $\bigcirc$  | Strongly Agree                            |  |
|     | $\bigcirc$  | Agree                                     |  |
|     | $\bigcirc$  | Neutral                                   |  |
|     | $\bigcirc$  | Disagree                                  |  |
|     | $\bigcirc$  | Strongly Disagree                         |  |
|     | $\bigcirc$  | Unsure/Not applicable                     |  |
|     |   |   |  |
| 20. | Wοι   | uld you like to provide more information? |  |
|     |   |   |  |

## **Final Comments**

| 21.   | What would make accessing health care and support easier for you? |
|-------|---|
|       |   |
|       |   |
|       |   |
|       |   |
| 22. D | Do you have any other comments?                                   |
|       |   |
|       |   |