### Responses from Nottinghamshire Women's Health Survey

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### How to use this document:

**Question Responses** 

Thematic Analysis

Narrative and Quotes

**Content Analysis** 

Ranked Responses

Standard question responses are presented in a bar chart or table.

Questions were reviewed using thematic analysis that created codes. Codes were then collectively reviewed to create themes within the data. Codes are displayed under the main theme headings.

Themes/Codes highlighted in this colour were dominant themes

Narrative was written for each of the themes and gives a fuller picture of the story surrounding each question.

Quotes from the questions are displayed to help the reader understand key statements that the women of Nottinghamshire have made.

For some questions, content analysis was undertaken.
These are displayed either in word clouds or connecting word diagrams.
Within the word clouds, the larger the word, the more prominent it was within the

Within the word diagrams, words or connecting words that appear more than 3 times are displayed

data.

Some questions within the survey were ranked responses, where respondents were given the opportunity to rank their top 3 choices.



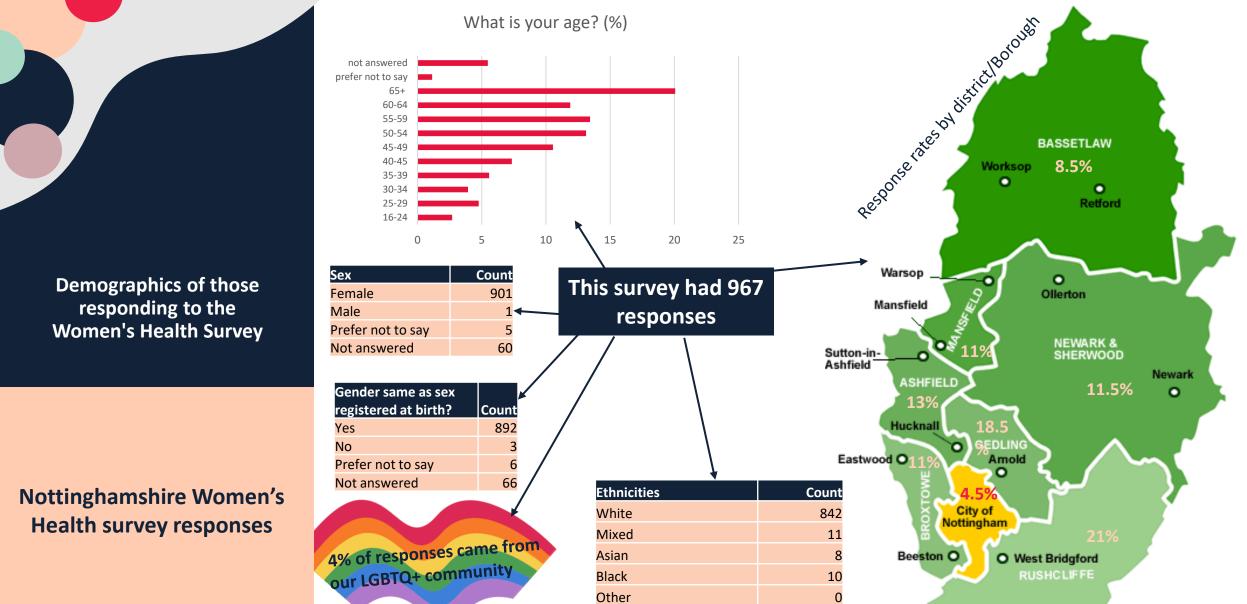
About the Women's Health
Survey

Nottinghamshire Women's Health survey responses

### About the survey

- The survey was open from 18<sup>th</sup> October- 20<sup>th</sup> December 2024
- The survey was designed by the Women's Health project team, with input from the Public Health Intelligence Team and Public Health Core Senior Leadership Team.
   System stakeholders were also engaged in the early phases of the survey design as part of the Women's Health steering group. The survey consisted of a range of ranking responses, Likert scales, and free text responses.
- The survey was available online via the <u>Citizenspace platform</u> and printed copies and pre-paid postage envelopes were made available to community workers on the ground to support those to complete who are otherwise digitally excluded.
- The survey took on average between 10-15 minutes to complete.
- The survey was advertised through a series of routes, through NCC staff intranet, through GPs and pharmacies, through posters in libraries, sexual health services and other healthcare services, and through Council press releases it was publicised in local online press.





**Not Stated** 

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# Question 1 Please describe what good

Please describe what good health and wellbeing means to you.
(250/870 responses)

Thematic Analysis

Nottinghamshire Women's Health survey responses

#### **Building blocks of health**

- Living environment
- Ability to work
- Community and social wellbeing
- Learning
- Work life balance
- Nature
- Functioning and having a role in society
- Eating healthily inc access healthy food
- Contributing

#### **Managing Life**

- A normal life and the idea of normal
- Access to services
- Energy
- Expectations
- Feeling well
- Health and wellbeing being important
- Holidays
- Independence
- Living a long life
- Time constraints

#### Mental health

- Valuing yourself and others
- managing adversity
- Stress free or mental health
- Being in control
- Isolation
- life satisfaction
- Rest

#### **Physical health**

- Healthy Weight
- Mobility exercise inc places to be able to be mobile
- Not using medication
- good sleep hygiene
- Age
- physical health and illness
- Not needing help
- Taking care of needs
- Pain and being pain free



## Question 1 Please describe what good health and wellbeing means to you.

Narrative and Quotes

Nottinghamshire Women's Health survey responses

**Building blocks of health**: Women described good health as having access to basic needs, not having to struggle to contribute and work. Women noted that a community was particularly important for good wellbeing.

**Mental health:** Women described good mental health as having life satisfaction, that allowed for rest, being able to manage what life throws at you whilst valuing themselves.

**Managing Life:** Women wanted easy access to services that help them maintain their health, whilst being able to balance time.

**Physical Health:** Women discussed the importance of being able to move and be pain free, having the balance right to be able to maintain a healthy weight, sleep well and age with dignity, without the need for support from health and social care services.

"For me, good health is a balanced approach to physical, mental, and emotional wellness, rooted in self-awareness, care, and respect for our complex human systems."

"Having good wellbeing should mean that you have the mental, emotional and physical resources to manage and navigate the adversity in life. Most women including myself don't have these because of the expectations often placed on us"

"It is the most important thing.

Having good physical
and mental health is at the core of
living. Age creates challenges for
the physical body so maintenance
and repair is important. It is about
balance and harmony"

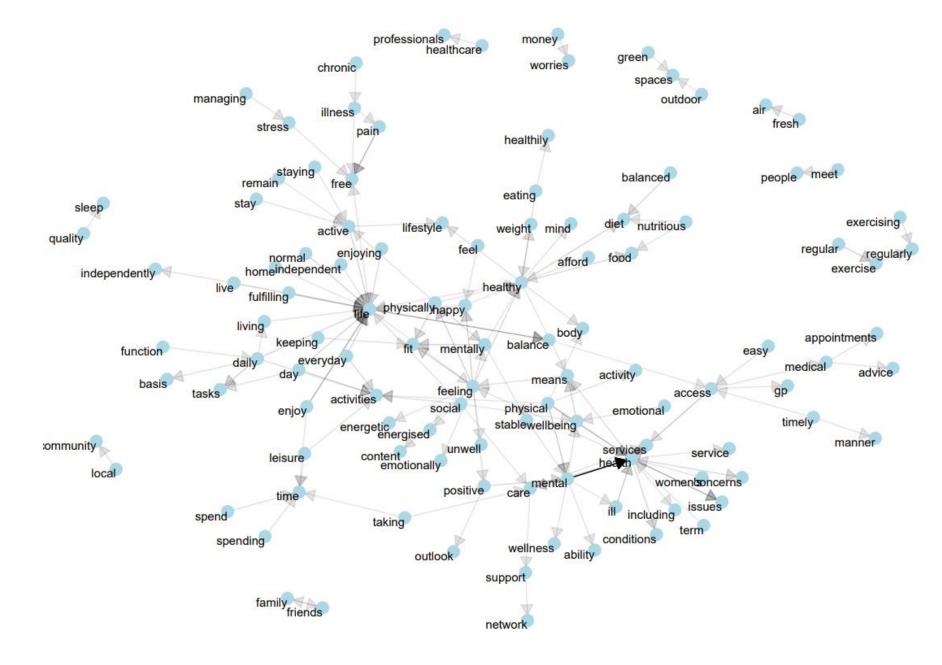
"Good health to me is an intentional journey that considers how my choices and surroundings impact my body and mind"

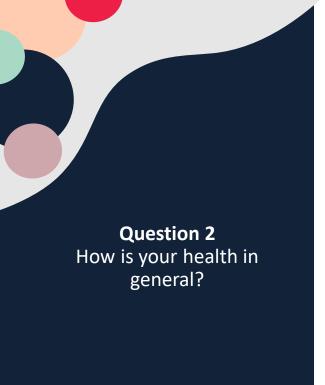


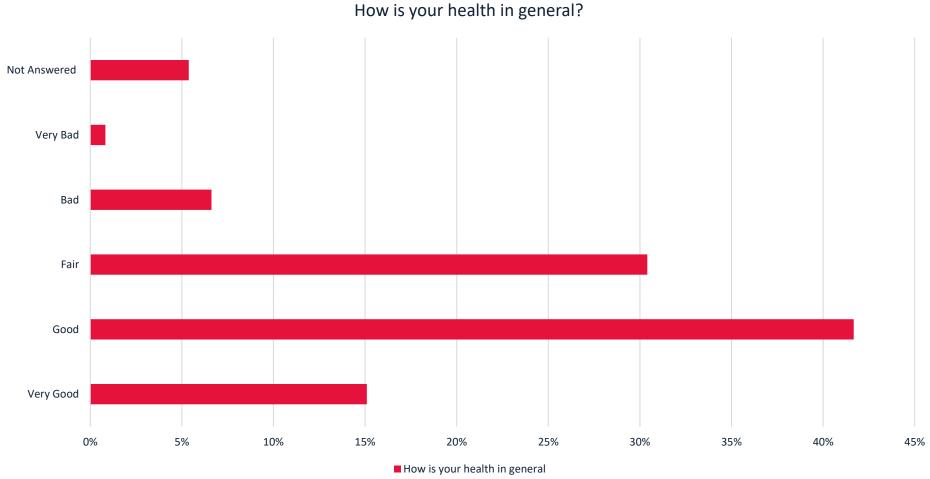
## **Question 1** Please describe what good

health and wellbeing means to you.

**Content Analysis** 















**Content Analysis** 

#### Age 16-29 years





#### Age 50-64 years



#### Age 64+ years





## Question 4 Do you have any health conditions? These can be physical or mental health?

Narrative

### Nottinghamshire Women's Health survey responses

#### **Health Conditions**

#### • Age 16-29

For younger women conditions the most mentioned were mental health conditions mainly anxiety with some depression, PTSD and ADHD. Other highlighted issues were autism and asthma and endometriosis.

#### • Age 30-49

For slightly older women anxiety and depression were at the fore. Perimenopause becomes prominent as well as asthma and endometriosis being still being commonly mentioned. There are some mentions of pain and fibromyalgia.

#### • Age 50-64

In this age group although there is anxiety there is slightly less mention of depression, but menopause now stands out alongside anxiety. This age group is where physical health issues start to rise to prominence with conditions such as high blood pressure, osteoarthritis and arthritis and pain. Fibromyalgia is still commonly mentioned as is asthma and diabetes starts to be mentioned.

#### Age 65 and over

In the over 65 years age group anxiety seems to become less mentioned as well as depression. The main conditions after this that are mentioned are arthritis then high blood pressure and knee pain.

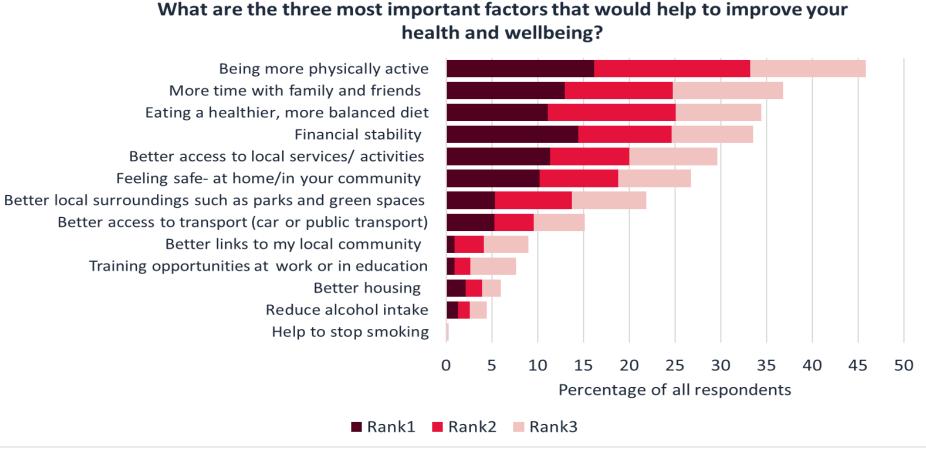


# Question 5 What are the three most

What are the three most important factors that would help to improve your health and wellbeing?

Ranked responses

Nottinghamshire Women's Health survey responses



The main factors women thought would help them and their health and wellbeing were around physical activity and healthy eating as well as striking a balanced home and work life. Other important factors were the environment and green spaces where they lived. The respondents cover this further in Question 6.



# Question 6 Thinking about the previous question please give any examples of what would help to improve your physical and mental health and wellbeing.

Thematic Analysis

Nottinghamshire Women's Health survey responses

#### Healthcare

- Being listened to, taken seriously and not being fobbed off.
- Not being made to choose one symptom and feeling rushed.
- Women's clinics to improve support during menopause.
- Better training for GPs around menopause and all women's issues.
- Ending the 8am appointment rush.
- Face to face appointments
- Appointments outside of work hours or times that carers can attend.
- Timely appointments where the concern does not get worse.

#### Healthy eating, drinking and exercise

- Healthy, convenient alternatives on the high street.
- Healthy food too expensive
- Shorter waiting list for weight management support service
- Overweight but lack support and motivation.
- Exercise pitched at the right level, also activities delivered by people who understand conditions like arthritis.
- Better transport to exercise facilities.
- Access to facilities expensive outside working hours
- Personal safety whilst out exercising especially after dark

#### **Environment**

- Local environment can impact on mental health.
- Being able to access safely green spaces, away from roads.
- Concern around green spaces being built upon.
- Walking in green areas with friends, families and pets, helps people to feel more active and connected
- Being able to cheaply travel to green spaces if not local.
- Keeping public transport, public bathrooms in a sanitary condition.

#### **Physical and Mental health**

- Support for those with mobility issues to access exercise and services.
- Difficulty of accessing GP leading to deterioration of conditions.
- Access to a dentist\GP etc
- Shorter specialist waiting lists
- Better GP and employer understanding around menopause.
- Support and diagnosis for ADHD
- Delays and access to healthcare impacting Mental health

#### **Communities**

- Knowing about activities and social events locally.
- More educational and creative courses.
   Libraries to be open longer hours.
- Access to local multipurpose hubs
- Better policing.
- Alternatives to pubs
- Cleaner streets

#### Work – life balance and employment

- Working long hours and little time for leisure, family time and healthy habits
- Exhausted by the end of the day
- Access to activities outside working hours.
- More encouragement from employers to allow flexible working to enable exercise more easily
- Reduce stress at work
- Cost of living



# Question 6 Thinking about the previous question please give any examples of what would help to improve your physical and mental health and wellbeing.

Narrative and Quotes

### Nottinghamshire Women's Health survey responses

#### Healthcare and the attitude of professionals

Appointments were an important issue, making them was often stressful and difficult. They often took several attempts to secure an appointment and had to wait with the worry that any concerns might get worse. Those who could not take appointments during working hours stated they could not always get suitable appointments. Many also said they wanted face to face appointments. When the respondents finally got their appointments, they said they felt they were not taken seriously and were rushed and could not discuss their issues holistically. They also stated that GPS were not sufficiently trained around menopause and other women's issues, and they also thought that women's clinics may improve support during menopause.

#### Physical and Mental health

Women with mobility problems felt that they had issues accessing exercise and services and that this needed addressing. The delays in accessing GP appoints adding to concerns around conditions potentially deteriorating. This was also the case for other aspects of health with long waits including dentistry and mental health care.

#### · Healthy eating, drinking and exercise

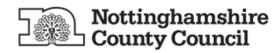
The cost of eating healthy food was a concern in the current cost of living climate, and that there were not always convenient healthy alternatives on the high street. Those women who are overweight mentioned support and motivation was a struggle and the waiting list for the weight management support service was too long. Issues with exercise ranged from cost outside working hours to it being pitched at the right level for individuals. Other issues were transport to exercise facilities and concerns around personal safety whilst out exercising after dark. Around drinking it was mentioned that safe alternatives to AA may be helpful.

"Better services and support for women. Not being fobbed off when visiting the doctors (if you can get an appointment) access to healthcare that didn't take so long that the problem gets 10x worse before you get seen"

"I am obese, and am actively dieting and losing weight, but its slow progress, I don't meet the criteria for support with this. I'm not physically active because of my existing conditions and I have been discharged by all NHS services, I feel let down about this and no longer have confidence in the NHS or my GP"



"Improved access to GP and community health services - it is extremely hard to get an appointment and when you do manage to see someone it feels as if they are in a hurry to get you back out the door meaning the treatment, diagnosis and support they offer is lacking."



# Question 6

Please give any examples of what would help to improve your physical and mental health and wellbeing.

Narrative and Quotes

Nottinghamshire Women's Health survey responses

#### Work-Life balance and Employment

Women reported that by the end of long working days they had little time for exercising and other healthy habits and were often too exhausted. Also, they prioritised spending time with their families. The higher cost of living means needing to work long hours to make ends meet, creating additional stress. Several mentioned wishing that their employers would encourage flexible working to enable exercise to be fitted in easier.

#### Environment

The environment was considered important, for many being able to access a good environment and green spaces boosted their mental health. There was concern around green spaces being built upon or being too close to roads. If green space was not local, they wanted good, cheap transport to green spaces. Women also wanted to be safe when they exercised outdoors.

#### Communities

Women mentioned that they did not always know about events and activities going on in the community, and they need to be better advertised. The range of activities and events women wanted ranged from mental health community-based groups to more educational and crafting type activities on varying days and hours so all could access. They would also access more multipurpose hubs and libraries that are open longer hours and safe alternatives to pubs, "third spaces". Other issues were around better transport and cleaner streets as well as and lower council tax. Also mentioned was better policing and getting rid of drugs in the local area.

#### Carers/ care and support

Many women responded that they had caring responsibilities for elderly parents and aging partners and had little if any help and were struggling to cope with both their own financial and or physical/mental health. One woman said that she wished she had more people willing to pushing her wheelchair so that she could be more involved with others.

"More people willing to push my wheelchair so that I can be taken to places of interest, a holiday, general shopping. Friendship, companionship"

"I have increased my working hours so that I can afford increasing bills. I have had to increase my working hours despite experiencing multiple challenges with peri menopause especially brain fog and fatigue which is affecting my performance at work."

"There are fewer "third spaces" in the community where i can go with family/friends which are accessible, safe, local and affordable; we would prefer not to go to a pub and most cafes are expensive."

"Having safe green spaces to be able to walk would help with both physical and mental wellbeing and enable me to be more active."

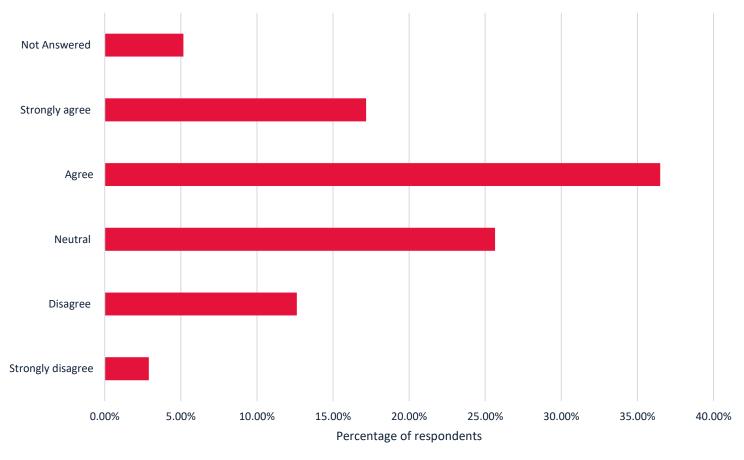


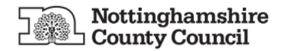




your health and wellbeing?







## Question 7a For those who answered no to question 6: Why do you not prioritise your own health and wellbeing? (145/145 responses)

Thematic Analysis

### Nottinghamshire Women's Health survey responses

#### **Self-Issues**

- Guilt for prioritising health
- Loneliness
- Mental health
- Motivation
- No one taking care of you
- No or limited support
- Physical health having an impact
- Putting self last
- Struggling to add into a routine
- Time Challenges
- Unsure of how to look after oneself
- Cant see a way out
- Doesnt see the point in bothering
- Energy
- Feeling well
- Financial challenges

#### Responsibilities

- Family and caring responsibilities
- Work

#### Healthcare

- Access to healthcare
- No faith in the healthcare system
- Taking health for granted

#### **Societal issues**

- Pressure on women
- Expectations within the home
- Expectation of being a woman
- Generational expectations



# Question 7a Why do you not prioritise your own health and

Narrative and Quotes

wellbeing?

Nottinghamshire Women's Health survey responses

#### **Self-Issues**

Overwhelmingly women commented about how they put themselves last when considering the prioritisation of those in their bubble. When considering self-care, they commented that time and finances were a barrier to their self-care.

#### Responsibilities

Again, women commented that responsibilities they had included family, and other caring responsibilities and well as needing to work to contribute financially to the home. These all contributed to not prioritising their own health and wellbeing.

#### Healthcare

Women spoke about their struggle with accessing healthcare and this being inflexible when balancing caring responsibilities. Examples are trying to contact the GP whilst doing the school drop off. There was a small number of people who commented that their faith in the healthcare system was lacking.

#### Societal issues

Many women commented on how the culture within our society still puts most of the pressure on women for caring responsibilities. There are expectations on them in the home and generational expectations around what the role of

the woman is.

"Too busy through the culture in this country looking after everyone else. As a woman when I complain about the unfair weight of responsibilities within the home, I am often met with hostility. with phrases like - don't start!!!! Or shut up!!! Everyone in society puts me last and I put myself last as well. There is never enough, time, energy or money left for me."

"I slip to the bottom of the pile, until a wakeup call makes me re-evaluate"



"as a woman we are still trapped in this main carer/home maker role as well as having a career - there is simply not enough hours in the day"



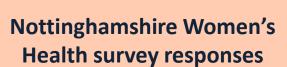


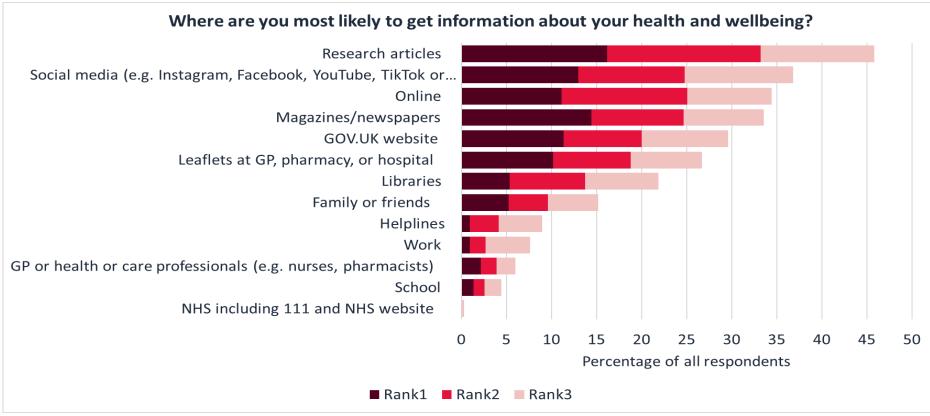
Option	Total	Percentage
I look after myself	687	71.04%
I have informal connect from my family class friends / naighbours	244	25.220/
I have informal support from my family, close friends/ neighbours	244	25.23%
I am supported regularly by healthcare staff (such as District Nurses)	9	0.93%
I am supported by formal carers that visit me to support my everyday needs on a daily basis	7	0.72%
I have support from other services (charities, wardens/carers on site, etc)	5	0.52%
	200	20.600/
Not Answered	200	20.68%





Ranked responses





The respondents commented that they are most likely to get their information about health and wellbeing from research articles, with over 45% of the respondents selecting this within their top 3 choices.

Second and third, respondents selected social media and online.

It is important to note that magazine/newspaper was the second highest ranked 1 response.





information about your health

Thematic Analysis

and wellbeing?

**Nottinghamshire Women's Health survey responses** 

Additional to the ranked responses, a number of people commented in open text that they seek information about health and wellbeing from:

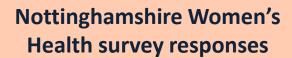
- Friends and family
- •Social media, online
- •Books and academic literature
- •Health Professionals

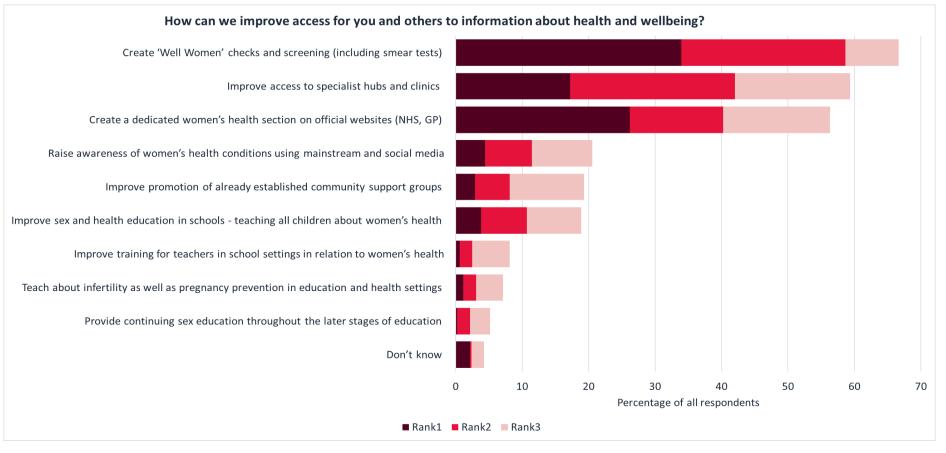
All matched the narrative from the rankings apart from:

- Health and exercise groups such as leisure centres and alternative /complementary therapists
- Podcasts









The respondents strongly believe that specialist and dedicated service provision is essential around women's health and would enable women to more easily access information around their health and wellbeing. Other comments follow in the next pages/slides around question 10b.



# Question 10b Let us know your ideas for how to improve your access to information about health and

Thematic Analysis

wellbeing

Nottinghamshire Women's Health survey responses

#### **Appointments**

- Face to face appointments
- For GPs to listen and take a more holistic approach instead of one symptom.
- Quicker access to appointments
- improve GP knowledge of women's conditions
- Well women style appointments
- Make, making appointments easier, reduce the mental impact of this process.

#### Other information sharing

- TV programs
- Leaflets and other hard copies as not all access the internet.
- GPs surgeries could be more proactively publicising
- women's services, where women meet informally, through schools, shops hairdressers.

#### Workplace

- Workplace seminars in larger employers, Mobile units for well women checks at workplaces.
- Workplace leaflets to advertise, women's support networks with regular meetings

#### Specific women's conditions and screening

- More support and awareness for female-specific conditions such as PCOS, menopause
- Access to HRT is a lottery and you're told to pull yourself together.
- screening should be done from early ages, like 25.
   More studies on women's health, Medical study are done on males

#### Well women health hubs

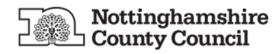
- More dedicated clinics for women to access health education and advice confidentiality
- Drop-in centres for women health
- "NHS needs to have specific support for women you finally get time and an appointment at GP level, and they just do not listen"
- well women hubs and clinics that are well supported by professionals and provide information and guidance about health conditions and treatment options.
- Some kind of advice hotline either one to one calls or email conversations

#### Education

- Improved education in schools
- · Women's health needs to be taught to boys as well!
- All people should be educated about women's health conditions from periods to endometriosis/PCOS and menopause because everyone interacts with somebody in their life going through these stages
- infertility and women's health in sex education

#### Online information including social media

- A specific woman's health section on the NHS website
- Social media campaigns
- Social media will help women's health be more mainstream.
- Podcasts





Let us know your ideas for how to improve your access to information about health and wellbeing (150/455 responses)

Narrative and Quotes

Nottinghamshire Women's Health survey responses

#### Appointments

This theme revolved around being able to access appointments quicker with time for a holistic discussion, ideally face to face with a professional who was knowledgeable about women's conditions. There was many comment around how difficult and stressful it is to get appointments especially outside of working hours.

#### Well-Womens health hub

There were responses that called for more women specialist and dedicated health hubs, which should be staffed by experts in women's health. These could be hubs, drop-in clinics or even a dedicated email or phone line for advice. Another suggestion was well-women specific appointments.

#### Education

This theme was around better education for everyone about women's issues including professionals, men and boys. It was also suggested to teach menopause to all in schools.

#### Workplace

Improved information could be shared in the workplace, with informational things such as leaflets/flyers on women's health and support networks. In larger organisations perhaps seminars.

#### Online or Social media

Information could be communicated through social media campaigns to make women's health more mainstream. Podcasts were another suggested mechanism of sharing women's health concerns. There were also suggestions of a dedicated women's area on the NHS website.

#### Other

Other suggestions were around more traditional media such as leaflets\ posters and displayed in areas that women

informally gather.

"The NHS waiting lists for referrals to specialist care is ridiculous. Waiting 9 months for an appointment for gynaecology is outrageous."

"De-stigmatise "women's" issues"

"We are distrusting of services. The mental energy and preparation it takes to make an appointment where you know you will have to sit opposite someone and be gas lit into thinking that it's all in your head or it could be worse, or told you just have to deal with it is off putting"

"I would like to have women's health taken seriously and for male health providers to be trained in things like period pain, menopause, and pms, pmdd. And not minimise women's pain. This is especially important for women of colour. Get rid of stereotypes and assumptions."

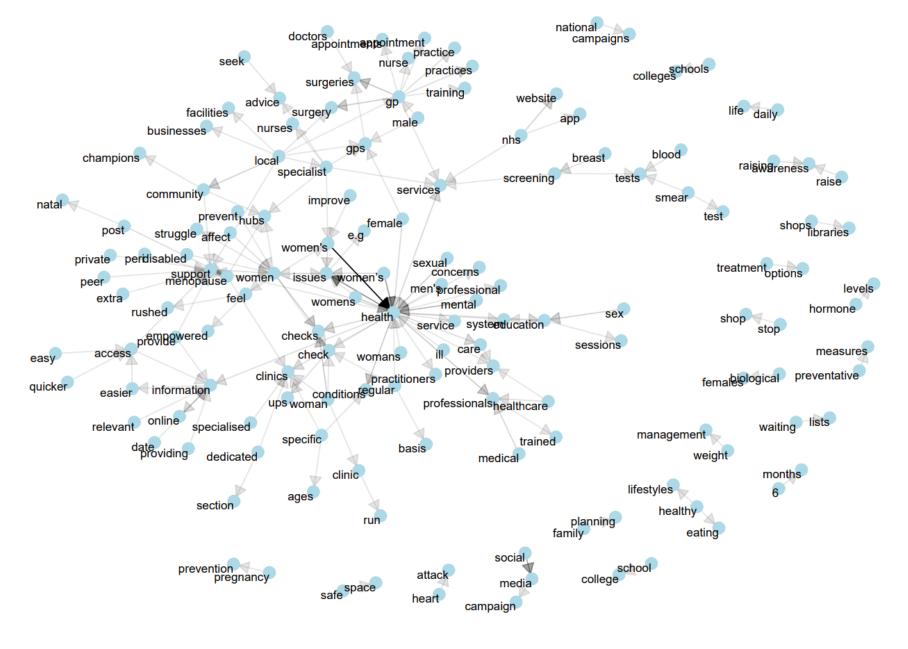
"I feel women's health should be included in schools and higher education. Well women/young woman checks could be undertaken in schools perhaps? Advice for women only sessions on healthy relationships"





Question 10b
Let us know your ideas for how to improve your access to information about these issues

**Content Analysis** 





#### How to prevent ill-health or maintain your health Yes 36 No Does not apply to me Not answered Menstrual well-being (e.g. period pain, heavy menstrual bleeding) Yes 17 No 33 **Question 11** 33 Does not apply to me In the past two years have 11 Not answered you accessed any services Gynaecological cancers (e.g. womb, ovarian, cervical, vulval to support your health and and vaginal wellbeing for the Yes 14 following? No Does not apply to me 22 109 Not answered Gynaecological conditions (e.g. endometriosis, fibroids) Yes 16 No 43. 24 Does not apply to me Not answered 12 **Nottinghamshire Women's** Menopause

Yes

No

Does not apply to me

Not answered

	General physical health concerns (e.g. diabetes, heart disease,	
428	asthma)	
369	Yes	465
80	No	321
90	Does not apply to me	83
	Not answered	98
	Mental health conditions (e.g. depression, anxiety, bipolar)	
179	Yes	297
339	No	454
339	Does not apply to me	105
110	Not answered	111
	Musculoskeletal conditions (e.g. back pain, neck pain, arthritis)	
	Yes	464
142	No	355
491	Does not apply to me	54
225	Not answered	94
109		
	Disabilities	
	Yes	105
166	No	483
435	Does not apply to me	234
242	Not answered	145
124		
	Specific health services (e.g. female genital mutilation clinics,	
	sexual assault referral centres)	
313	Yes	25
358	No	517

Does not apply to me

Not answered

202

94



**Health survey responses** 

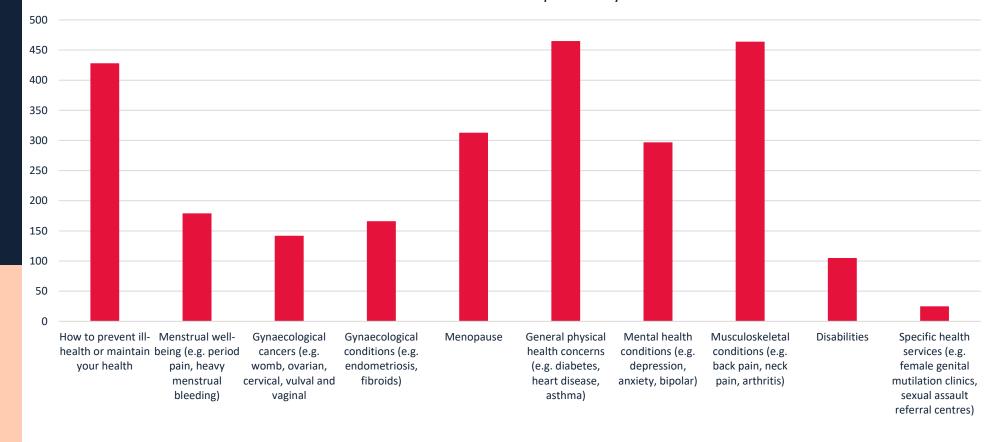
295

130

## Question 11 In the past two years have you accessed any services to support your health and wellbeing for the following?

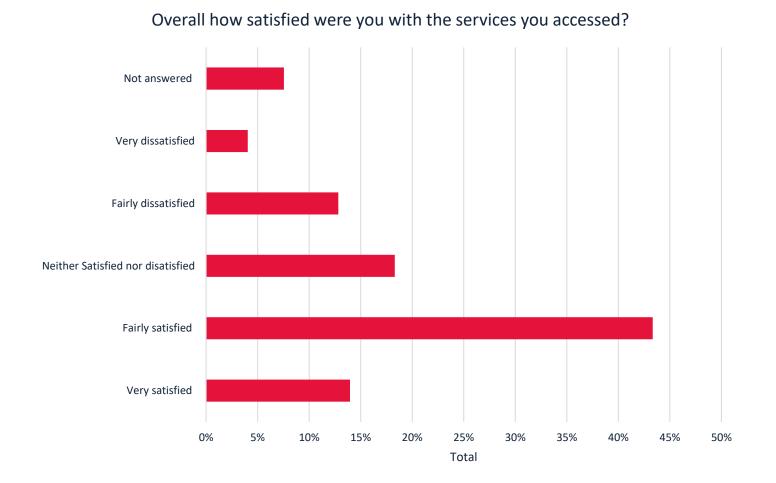
Nottinghamshire Women's Health survey responses

The number of survey respondents who responded yes to accessing the health and care services for different reasons in the past two years

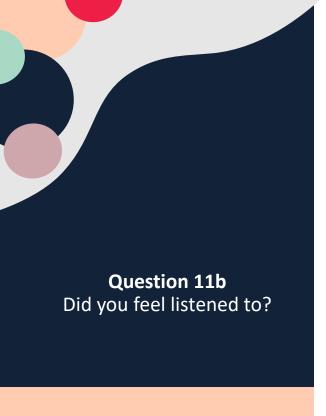


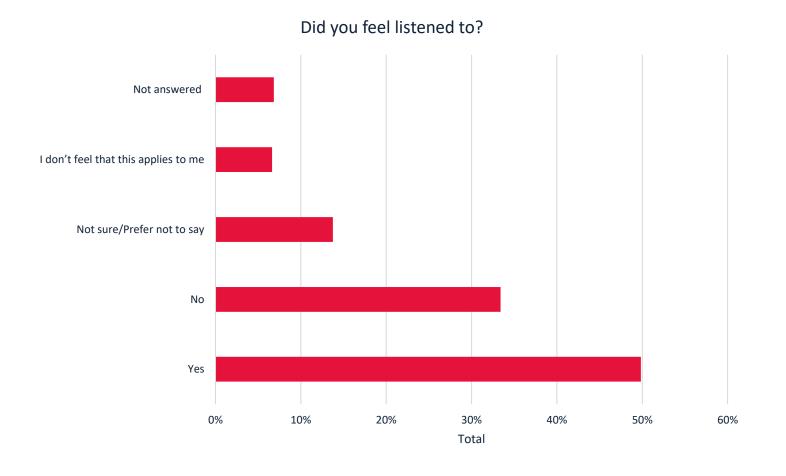


# Question 11a Overall, how satisfied were you with the services you accessed?





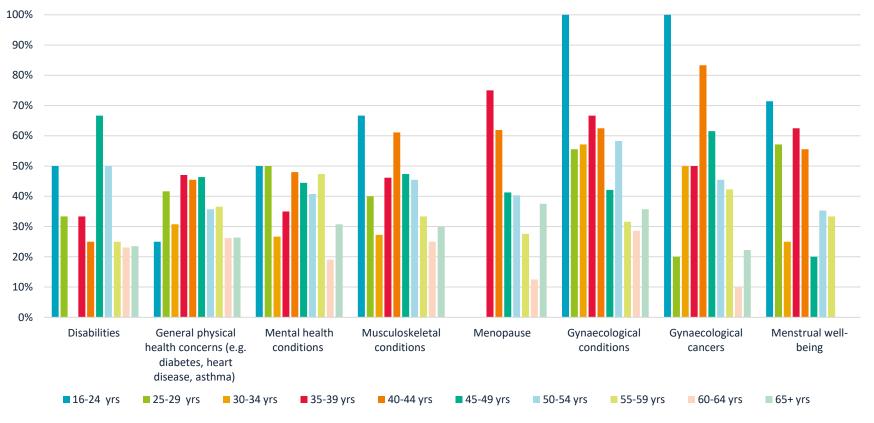








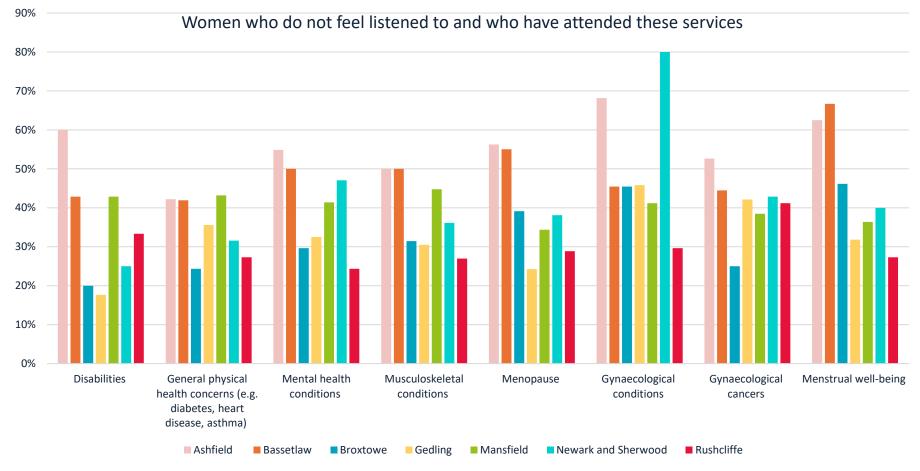
#### Women who do not feel listened to and who have attended these services



- The youngest women on the whole felt the least listened to when attending these services and particularly so in the Menstrual and gynae services.
- Women in their forties felt particularly not listened to in the 'women' specific conditions services, most notably around menopause.
- Womens in their sixties and older felt the most listened to.
- Even though women felt most not listened to around women specific services, they felt not listened to in at least 30% of attended services.



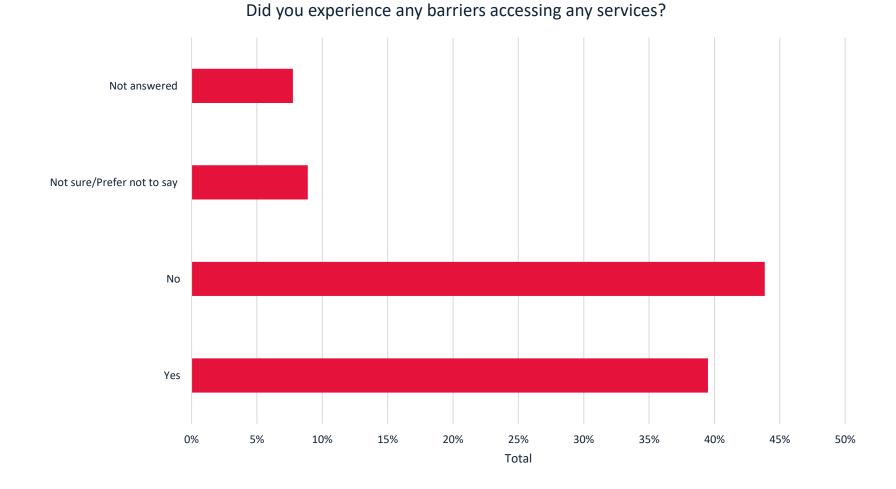




- When looking at whether women felt listened to in these services there was an overall North-South of the County split.
- The Southern Districts of Broxtowe, Gedling and Rushcliffe felt the most listened to.
- In particular, Bassetlaw and Ashfield felt the least listened to.
- There were a few variations amongst the different services, for example in gynaecological cancer services all Districts, with the exception of Broxtowe, around forty percent of felt they were not listened to.
- Women in menopause, gynaecological conditions and menstrual wellbeing services in Ashfield and Bassetlaw felt not listened to in over 60% of respondents. In gynae condition services Newark & Sherwood respondents the did not feel listened to in around 80% of cases.
- Overall respondents appeared to feel less listened to in 'women' specific services.



## **Question 11c** Did you experience any barriers accessing any services?







Please provide any further feedback on your experience of accessing these services. (150/572 responses)

Thematic Analysis and Narrative

**Nottinghamshire Women's Health survey responses** 

#### **Healthcare Professionals**

#### Private care

Women reported that some GPS recommended that they go private to access more timely care particularly around physio care. They also felt that some professionals, mainly around the menopause\perimenopause, lacked knowledge and believed they had to do their own research and pay privately. Others said they were rushed and fobbed off with professionals not taking the time needed to give appropriate care.

#### Knowledge

Many women stated that GPs often had limited or out-dated knowledge around areas such as menopause and endometriosis. Others felt they had been passed between professions who did not know what to do with them, they also received conflicting advice. This also led to women seeking private care.

#### **Empathy**

This was a strong theme, women reported feeling fobbed off, dismissed and that GPs were uninterested in menopause. Older women felt that there was a dismissive attitude towards them, and were told things like "that is the way it is", they felt they were not being taken seriously. Also, that they had to chase hard to get what they needed. Others mentioned that they were told their issues were lifestyle choices and implied they were lazy.

#### **Appointments/ Referrals**

This section covers the difficulties around making appointments and other issues such as finding appropriate times and cancellations which prolongs already long waits. As well as when the appointment time finally arrives.

#### Difficulty in getting referrals

Some stated that there were barriers to getting appointments such as reception staff suggesting they go elsewhere instead of the GP. Also, that getting appointments with female GPs was hard. Another issue was that women felt they were being pushed towards a phone appointment.

#### Cancellations

One woman pointed out that due to her condition it meant she couldn't always make her appointment at short notice and was consequently penalised for this DNA. Others reported cancellations from professionals considerably extending their waits.



# Question 11d Please provide any further

Please provide any further feedback on your experience of accessing these services.

(150/572 responses)

Thematic analysis, Narrative and Quotes

Nottinghamshire Women's Health survey responses

#### Appointments/ Referrals continued.

· Appointments outside working hours

Working hours caused difficulties for both making appointments and attending them. Also, taking phone appointments at work created problems and added to stress.

Process to book appointments

Many felt that the process of phoning at 8am when you may or may not get an appointment, after often long phone waits, was stressful and off-putting experience. For those that worked or were in education it could be go to Uni or work, *or* make an appointment.

Length of waits for appointments

Women said that regular/routine appointments often had waits of weeks to over a month and sometimes professionals suggested going private.

When you finally get an appointment

Some women felt that the short appointments and the fact the they were only allowed to talk about one thing per appointment led to them thinking they were not being looked at holistically. This sometimes meant they felt rushed into making decisions around their health.

#### **Positive experiences**

 There were also responses of good practice and empathy where women had good outcomes and praise for a range of professionals including GPs, Pharmacists and Nurses.

"GPs aren't trained about menopause/women's health and it's pot luck whether you get one who is rude and dismissive or who has taken the time to educate themselves. Most medical

diagnoses/prescriptions are based on studies carried out on men"

#### Other

• Comments ranged from services like menopause nurses not being widely promoted to wanting a women's health hub and that individual differences are not being taken into consideration. Many felt they did not want to further burden services, so didn't like to ask for help.

"Booking an appointment is impossible especially if you work 9-5"

"I have had years of doctors telling me to just suck it up and get on with it (mainly men, I just want to add) It really feels like there is no point trying to get any sort of help for anything to do with health and wellbeing"

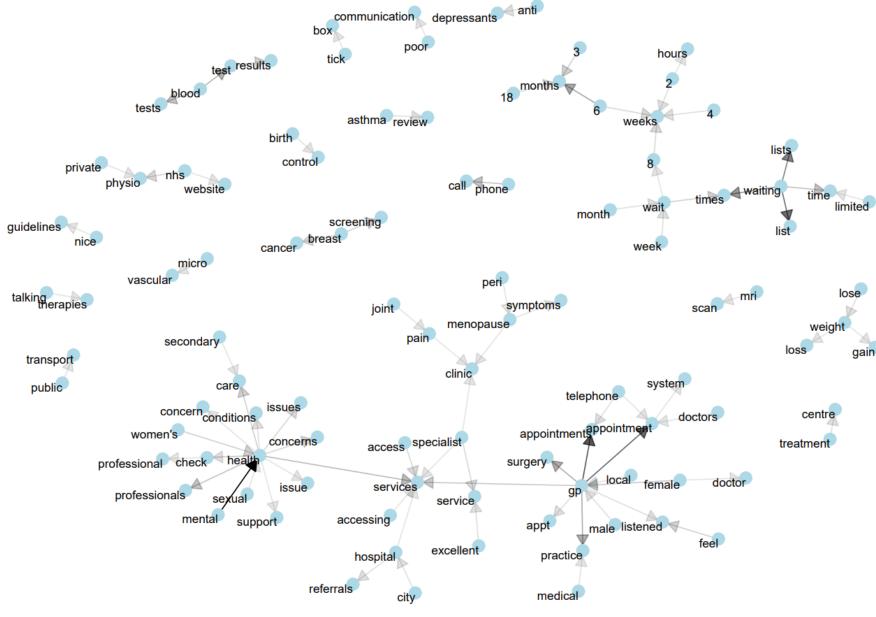




Question 11d

Please provide any further feedback on your experience of accessing these services.

**Content Analysis** 





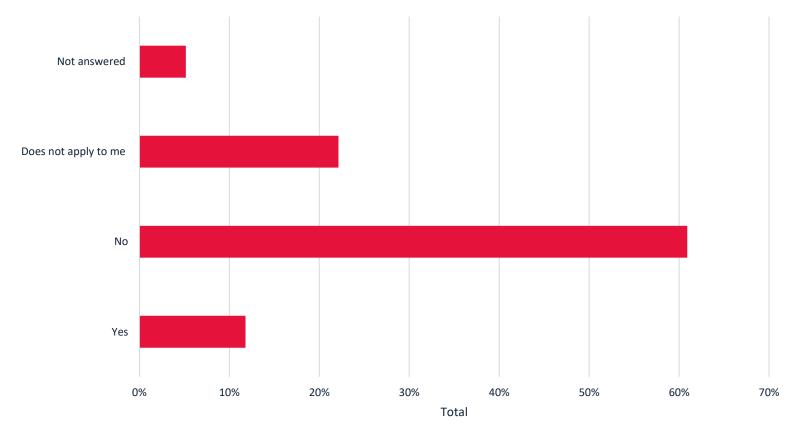
# Question 12 In the past two years have you accessed sexual health services (sexually transmitted infections

or to prepare for/prevent

pregnancy) to support your health and wellbeing?

Nottinghamshire Women's Health survey responses

In the past two years have you accessed sexual health services (sexually transmitted infections or to prepare for/prevent pregnancy) to support your health and wellbeing?







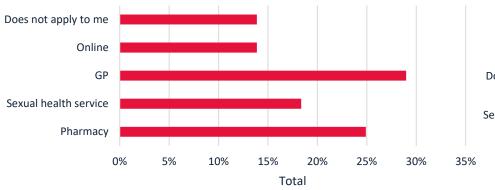
**Sexual Health** 

*Narrative and quotes* 

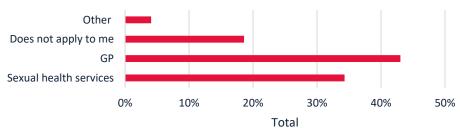
**Nottinghamshire Women's Health survey responses** 

245 responses

12a If you use or are thinking of using oral contraception (e.g. combined contraception pill or progestogen-only pill), or the contraceptive patch, where would you be happy to get these from?

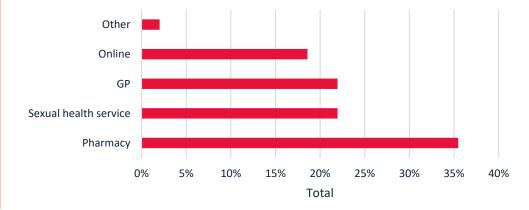


172 responses 12b If you use or are thinking of using longacting contraception (i.e. implant, coil, intrauterine device, or intrauterine system), or contraceptive injection which of the following places would you be happy to get your contraception from?

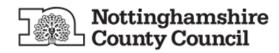


296 responses 12c If you were to need it, where would you like to be able access the morning after pill/emergency

hormonal contraception in Nottinghamshire?



Note: sample size for these questions was much smaller as it only asked those who had accessed SH services - the majority of respondents did not answer this question



# Questions 12a, 12b and 12c Sexual Health

Narrative and quotes

Nottinghamshire Women's Health survey responses

Question 12a: If you use or are thinking of using oral contraception (e.g. combined contraception pill or progestogen-only pill), or the contraceptive patch, where would you be happy to get these from? Please select all that apply. (7/7 responses)

There were a small number of responses to this, those that did respond said that this should be easily accessible in as many places as possible and that stigma needs to be reduced.

"The more options the better."

"Accessible and available outside work hours."

"Online if previously prescribed."

Question 12b: If you use or are thinking of using long-acting contraception (i.e. implant, coil, intrauterine device, or intrauterine system), or contraceptive injection which of the following places would you be happy to get your contraception from? Please select all that apply. (14/14 responses)

Women pointed out that it was difficult to get timely appointments as there were often long waiting lists. Where they attended, they would want experienced professionals and the option of sedation.

"Hospital as GPs aren't always able to fit coils"

"Where pain relief is available"

"Anywhere professionals are knowledgeable"

"Calling clinics women's health clinics may make more people visit."

"Waiting lists are too long"

Question 12c: If you were to need it, where would you like to be able access the morning after pill/emergency hormonal contraception in Nottinghamshire? Please select all that apply. (7/7 responses)

Respondents said they should be able to get EHC in as many places as possible but not GPs as it is too difficult to get appointments.

"As many places as possible."

"Walk in centres"

"Not via GPs as cannot see them in appropriated time scales."

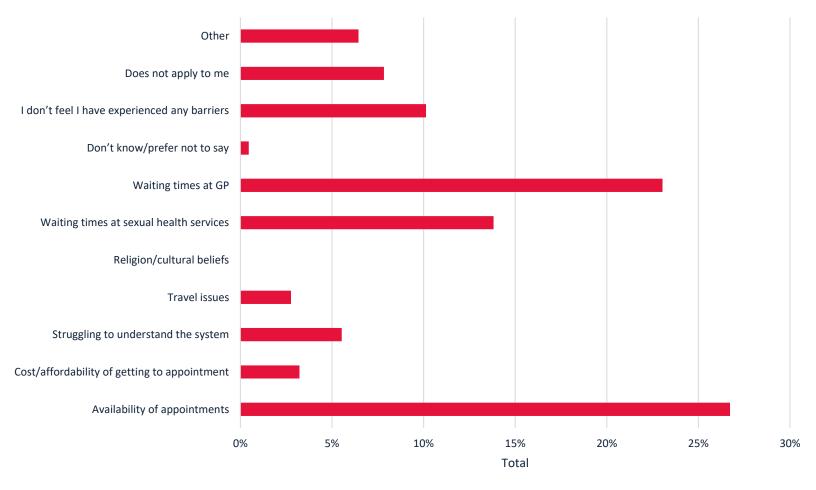


Question 12d

Do you feel there are any barriers that prevent you from accessing your preferred form of contraception?

Nottinghamshire Women's Health survey responses

# 12d Do you feel there are any barriers that prevent you from accessing your preferred form of contraception?





# Question 12e Please tell us about your

Please tell us about your experiences of accessing contraception or suggestions for how we can improve our services (60/60 responses)

Thematic Analysis

Nottinghamshire Women's Health survey responses

# Easy to access services

- Quick and easy
- See same professional

# Lack informed choice

- Don't know choices or options
- Personal effects of different types of contraception aren't discussed
- GP's lack knowledge

# Well informed

Discussed all options

## **Felt shamed**

- Judged by staff
- Left door open during procedure

Kind and supportive staff

# Lack a holistic approach

No regard for impact on other health issues

## **Felt Pressured**

Staff pushed their own bias

# **Negative impact on health**

- Negative side effects dismissed
- Painful

# **Poor communication**

- Kept cancelling appointments
- Invited for un-needed appointments

Don't feel listened to

# Suggestions to improve services:

- · Better availability of appointments
- Sexual health services incorporated within general local services
- Improved education around women's health (young women AND professionals)
- Discrete access to services
- Easy to use online booking system
- Offering of pain relief for certain procedures
- Offer follow-up support

## Hard to access services

- Long wait times
- Inconvenient appointment times
- Appointments not always available locally making it hard to travel
- Hard to book appointments
- Emergency contraception can be expensive
- Denied access to services



# Question 12e

Question 12e
Please tell us about your
experiences of accessing
contraception or suggestions for
how we can improve our services

Narrative and Quotes

Nottinghamshire Women's Health survey responses

# **Experiences accessing services:**

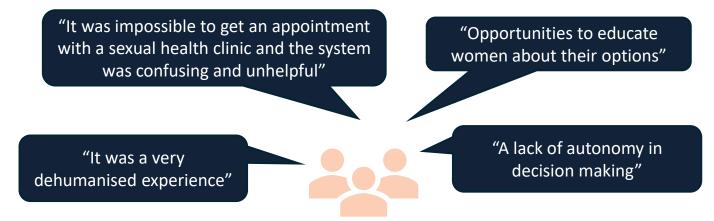
Though some women found accessing contraception an easy experience (particularly so at the GP) the majority did not. Many women found it hard to get an appointment, facing complicated booking systems, long-waiting times and cancelled appointments.

Once at the appointment, many women felt like they were not listened to. This led to them feeling uninformed about the different contraception options and pressured into choosing a specific option.

# How we can improve our service:

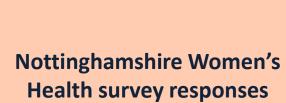
The most noted suggestion was around increasing the availability of appointments. This consisted of increasing the number of appointments to reduce waiting times, expanding the timings of these appointments to accommodate those who work 9-5, and making these appointments available locally.

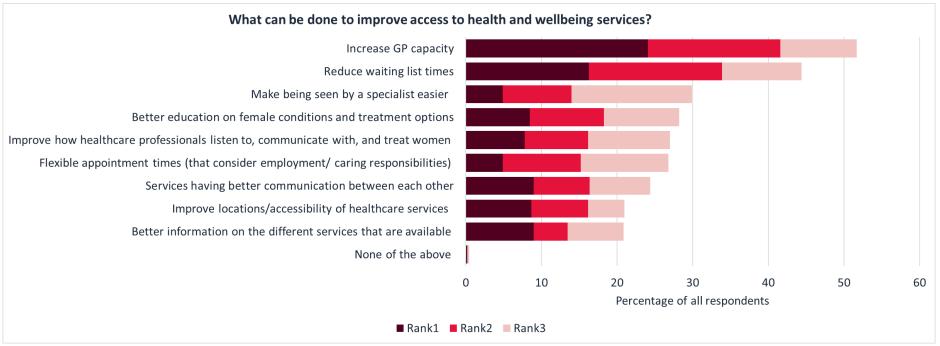
The second most noted suggestion was around improving healthcare professionals and young women's knowledge around all the different contraception options, allowing women can make informed choices.











Above is the ranked responses for the question "What can be done to improve access to health and wellbeing services?"

Ranked 1, survey respondents felt that increasing GP capacity would be preferable, with overall 50% of respondents selected this their top 3 ranks.

Ranked second was reducing waiting times and ranked overall 3<sup>rd</sup> was making being seen by a specialist easier.

Open responses to this question can be seen on the next slide.



# Question 13 What can be done to improve

What can be done to improve access to health and wellbeing services? important. If you would like to feedback your own ideas, please add these into the 'other' section. (83/83 responses)

Thematic Analysis

Nottinghamshire Women's Health survey responses

# Improved education for all

- Education around women's health needs
- Education round how to use NHS services

Increased promotion of currently available services

# Women's hubs & experts

- Regular drop ins for women with similar issues
- More menopause experts

# **Options for homebound**

- Home visits
- Online appointments

Improve repeat prescriptions

Ensure women feel listened to

**Promote pharmacies** 

**Buddy scheme** 

## **Financial investment**

Service reviews

# Improved communication between professionals

- Improve referrals process
- Better transfer of patient information between services

Create a local wellbeing resources website

# More service locations

- More local services
- More community groups

# Annual Women's health checks

# **Improve transport**

- Improved parking at services – park & ride
- Provide transport to clinics

# Improved access to appointments

- Reduced waiting times
- Evening & weekend appointments
- Improve booking systems
- Make GP surgeries contactable
- Offer initial appointments via online chat (if physical check not needed)

# **Specialist services within GPs**

- Mental Health
- Occupational health /physios

# Self-referrals / triage

- Not always have to go through GP
- GP surgery triage queries

# **Holistic approach**

- Access to a range of treatment options
- Focus on the overall wellbeing of a patient
- Services linked with local support groups
- Integrate complimentary therapies



# Question 13 What can be done to improve

What can be done to improve access to health and wellbeing services? If you would like to feedback your own ideas, please add these into the 'other' section.

Narrative and Quotes

Nottinghamshire Women's Health survey responses

Most women agreed that **ALL** of the above rankings were important

## Most women shared ideas around:

Improving accesses to appointments by making the booking process easier, increasing the number of appointments to reduce waiting times and expanding the timings of these appointments to accommodate those who work 9-5.

Improving knowledge around women's health. This was suggested through educating healthcare professionals on women's health conditions. Furthermore, it was suggested through the creation of women's hubs, creating a space for women to share their knowledge and experience of having specific health issues.

Healthcare professionals providing a holistic approach. Women want to be seen as an induvial, being provided with a range of different treatment options in consideration of their overall health/wellbeing.

Improving communication between different healthcare professionals and services. Women want to be referred to the right people quickly and easily but also get referred to appropriate local services and support groups.

Ensuring women feel listened to supported.

"Create regular drop ins for women with similar issues"

"So much time and effort lost because of duplication of services and lack of sharing info. And getting passed from one service to another because services are fragmented" "Drs don't listen to what we are saying, talk over us, make assumptions and negate our testimony; they don't give enough credence to us knowing our own bodies"

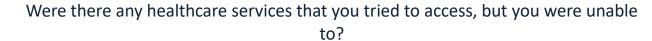
"Ensure health professionals have a high level of knowledge, understanding, and then makes appointments available"

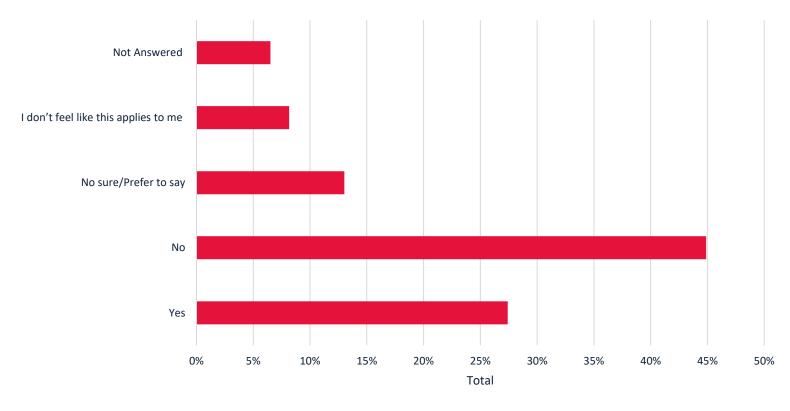


# Question 14 Were there any healthcare

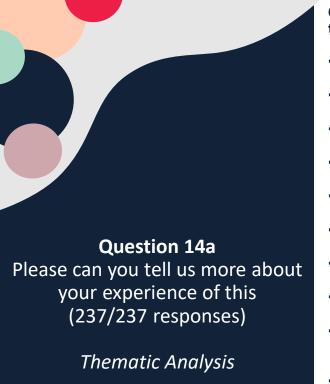
services that you tried to access, but you were unable to?

Nottinghamshire Women's Health survey responses









# Nottinghamshire Women's Health survey responses

# Conditions and treatment:

- Arthritis
- Asthma
- Breast surgery
- Cancer
- Contraception
- Dementia Services
- Dental Care
- Fertility
- Endocrine and Hormone service
- Gender services
- Gynaecology services
- Menopause treatment
- Mental Health Care
- Obesity
- Pain
- PCOS

- Pharmacy services
- Physiotherapy
- Podiatry
- Pregnancy
- Prolapse
- Screening
- Smears
- Sun exposure
- Well Women Check

## Service Issues:

- Better understanding or more research needed
- Confusion with the system
- Difficulty accessing services and waiting for treatment
- Fell outside of criteria
- Impact of covid
- Inadequate services
- Local service not available
- Males offering care
- More capacity required
- Occupational Health
- Online appointments
- Out of Hours provision
- Poor communication
- Seeing the appropriate healthcare professional
- Self-diagnosis and selfhelp

## Self-referral

- Service no longer available
- Spending time in the system
- Tailored care required
- Telephone appointments
- Using private healthcare

## Life Impact:

- Balancing work
- Caring responsibilities
- Financial impacts
- Travel issues

# Feelings:

- Feeling stuck
- Giving up
- impacting health and wellbeing
- Not feeling heard
- Not taken seriously
- Unfair treatment



Question 14a

Please can you tell us more about your experience of this?

Narrative and Quotes

Nottinghamshire Women's Health survey responses

**Conditions and treatment:** The services that women commented on accessing most were mental health and menopause services.

**Service Issues:** Women discussed how it was difficult to access healthcare services and even when you can see someone, seeing a specialist for the issue you have attended with was even harder. Many women within Nottinghamshire have turned to private healthcare to see the appropriate health professional in a timely manner, but there was an acknowledgment that this isn't possible for all.

**Life Impact:** Women noted that there were life barriers that got in the way of accessing healthcare, such as having to balance work alongside and the financial impact of getting to services, paying to park etc.

**Feelings**: Women commented that they did not feel heard by their healthcare professional, which led them to giving up on trying to access care and feeling very stuck in terms of what to do and where to go next.

"Lucky I earn enough to afford private health care, but what happens to those who can't afford it? I speak to these women all the time and they just accept their failing health and poor service."

"if people wouldn't need to wait such a long time, it would safe so many lives."

"I just always come away feeling like I am a hinderance, and it is all in my head, stupid fat hysterical woman, so I have stopped going even filling this form in is making me feel like I am doing something wrong by admitting it"

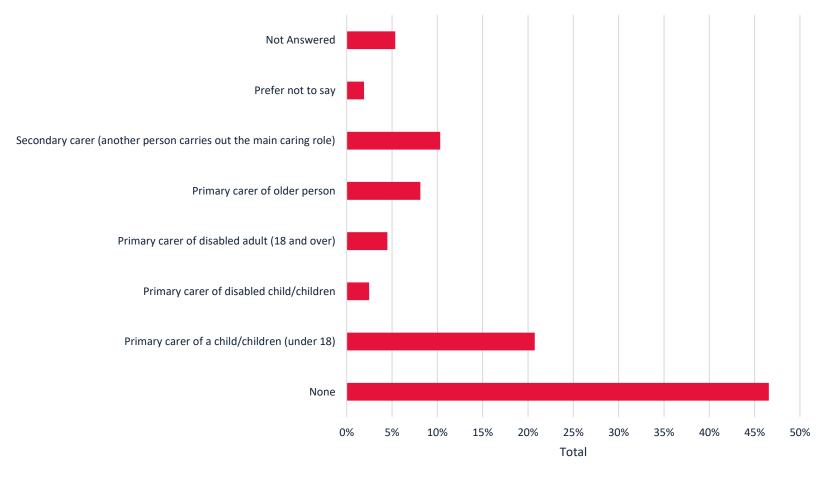
"Listen to peoples experiences. We shouldn't have to wait until we are desperate to get support. Our health conditions shouldn't impact our daily lives in the way they do"





Nottinghamshire Women's Health survey responses



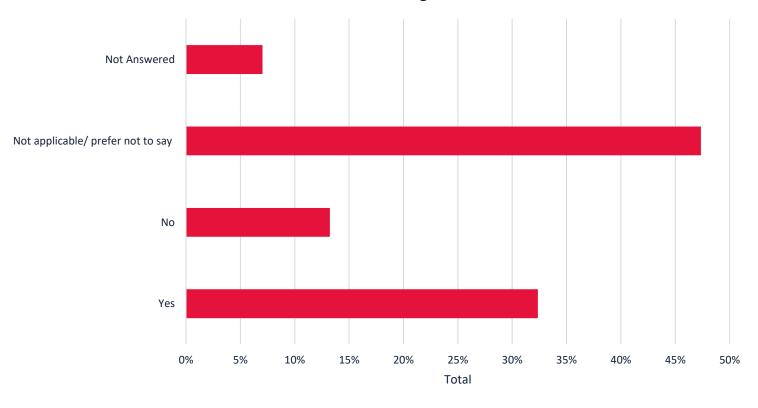




# Question 15a Of those who said they had caring responsibilities in Q15, Do you feel that your caring responsibilities have an impact on your health and wellbeing?

# Nottinghamshire Women's Health survey responses

# Do you feel that your caring responsibilities have an impact on your health and wellbeing?





# **Question 15a** Do you feel that your caring responsibilities have an impact on

your health and wellbeing? (276/276 responses)

Thematic Analysis

**Nottinghamshire Women's Health survey responses** 

# **Mental Health and emotional impact**

- Mental load
- Impacting mental health
- Worrying about outside care facility
- Stress
- Pressure
- Neglecting oneself
- Isolated
- Irritable
- Guilt
- General worry
- Frustration
- Feels like I'm failing.
- Despair
- Depression
- Burn out
- Brain fog
- Anxiety
- Angry
- Responsibility

# The Positives:

- I'm coping
- Enjoying Caring- the positives

## **Navigating Daily Life and Responsibilities**

- Impact on work
- Balancing other priorities
- Cant leave the house
- Difficulty getting a break or respite
- Life not as imagined
- Logistics of caring-phone calls etc
- Loss of independence
- Impacting time
  - Time for exercise
  - time for self-care

# **Navigating the Care System and services**

- Understanding professional jargon
- Uncertainty
- Travel
- Struggling to get support
- **SEND**
- Having to home educate
- Hard work being a carer
- Getting a GP appointment alone
- Getting a diagnosis
- Get on with it
- Accessing services being harder

## **Physical Impacts on carer**

- Low Energy
- Physical impact on carer
  - Weight gain
  - Tired
  - Missing or delaying seeking help for important health issues
  - Migraine
  - high blood pressure
  - **Heavy Periods**
  - Hair loss
  - **Back Pain**

# Social expectations and responsibilities

- No recognition
- Putting the needs of others first
- Needing to be on call or available
- · Motherhood and parenting

## **Lifestyle Impacts**

- Financial impacts
- Change in lifestyle since become carer

# Question 15a Do you feel that your caring responsibilities have an impact on your health and wellbeing?

Narrative and Quotes

Nottinghamshire Women's Health survey responses

**Mental health:** Carers singled out many negative mental health impacts of caring and talked about the weight of the mental load on women.

**The Positives:** Some women commented on how caring responsibilities gave them purpose and kept them active, especially grandparents looking after grandchildren.

**Navigating Daily Life and Responsibilities:** Carers found it hard to balance life's requirements on top of their caring responsibilities. Notably, the found that there was an impact on their work. Time left for themselves was limited, especially for self-care and exercise, which women noted would have a positive impact on their mental health.

**Navigating the Care System and services:** Women commented on how travel to their caring responsibility or indeed taking those they care to health appointments was tricky to balance. SEND was a key theme coming through in terms of those who require care.

**Physical Impacts on carer:** Carers commented on how there were many negative physical health impacts on their body whilst undertaking their caring needs.

Lifestyle Impacts: Women commented that there was a financial burden in having caring responsibilities.

**Social Expectations and Responsibilities:** Putting the needs of others first was another key code that came out of this question. Many women commented on how they had several people in front of them before they can care for themselves.

"they say it takes a village and there is no village here"

"This mental load simply isn't shared by most men."

"I am just a carer I didn't ask to be it just happened and I was expected to deal with it"

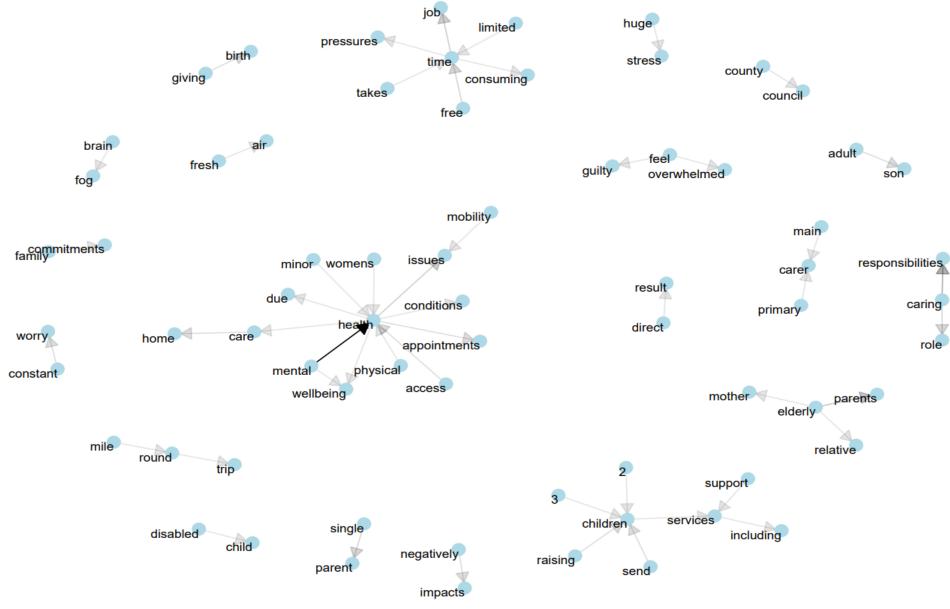
"Trying to balance work and child care needs can be a struggle in our society where there is an expectation woman can 'have it all'"





**Content Analysis** 

Nottinghamshire Women's Health survey responses

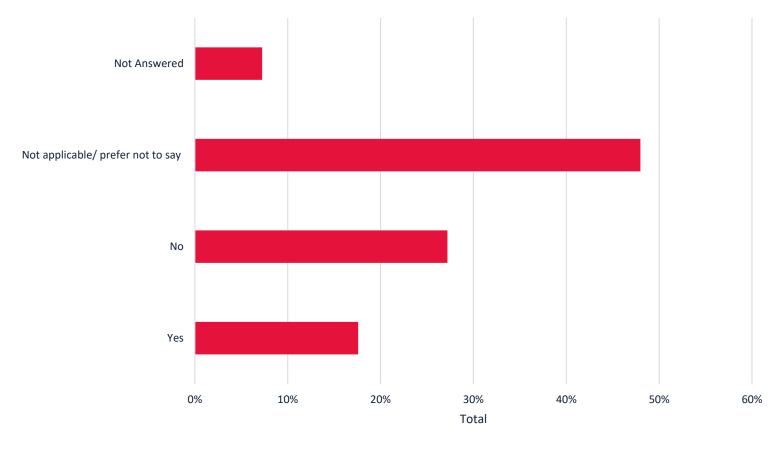




# Question 15b Do you feel that there is any further support that you would like or need to manage your health and wellbeing alongside your caring responsibilities?

Nottinghamshire Women's Health survey responses

Do you feel that there is any further support that you would like or need to manage your health and wellbeing alongside your caring responsibilities?





# Question 15c Please detail what support you feel would be helpful. (162/162 responses)

Thematic Analysis

Nottinghamshire Women's Health survey responses

# **Practical support**

- All about me leaflets
- Appointment being on time
- Carers assessments
- Carers support group
- Being self sufficient
- Check in or someone to talk to
- Diagnosis to open up support
- Financial aid
- Government Policies
- Healthcare clinical support
- Knowing how to access help and what's available
- Legal support
- Medication availability
- Support system
- Support with paperwork
- Supported living
- Time Flexibility

# Being a carer

- Acknowledgement
- Asking carer status
- More understanding
- Respite
- Privacy
- Reducing loneliness
- Worries for the future
- Work Commitments

# **Support with conditions**

- Dementia
- Menopause support
- Mental health support
- Post partum Support
- SEND support
- Stroke support

## Access to services

- Access and affordable childcare
- Access to education
- Access to exercise
- Access to healthcare

## **Environment**

- Public Transport
- Local services
- Housing issues



Question 15c
Please detail what support
you feel would be helpful.

Narrative and Quotes

Nottinghamshire Women's Health survey responses

**Practical support:** Many women had practical solutions for ways to manage their health and wellbeing. There was a call for improving information on what help is already available and how to access this, alongside support in the form of groups or check ins. Women commented that time and money were key barriers to being able to manage their health and wellbeing.

**Being a carer:** Women who were carers commented that having more time to themselves and having those they care for in good, safe, respite would be a helpful resource.

**Support with conditions:** Many specific conditions were commented upon, however as expected, mental health support was noted to need further support.

**Access to services:** There was a huge call for childcare services to be more affordable to allow women to balance their health and wellbeing needs with their caring needs. Additionally accessing healthcare needs further support.

**Environment:** Women commented on the need for improved public transport and housing support.

"How many families are struggling because they aren't aware of the support they can access!!"

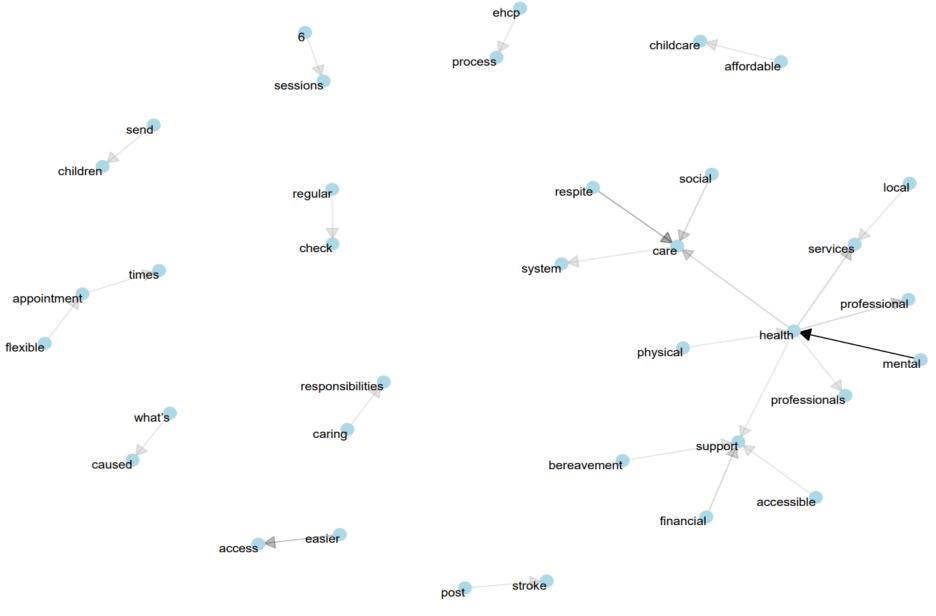
"Women bear an unequal burden of responsibility"

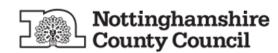




Content Analysis

Nottinghamshire Women's Health survey responses





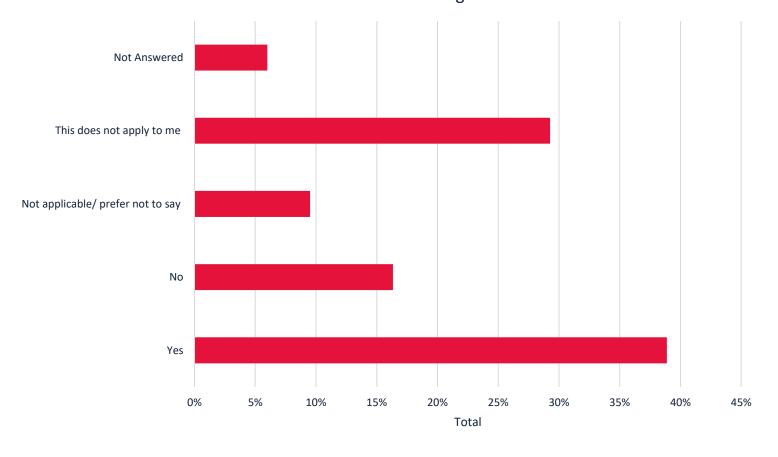
# Question 16

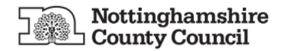
Question 16

Do you feel that you are well supported in the workplace to look after your health and wellbeing?

Nottinghamshire Women's Health survey responses

# Do you feel that you are well supported in the workplace to look after your health and wellbeing?



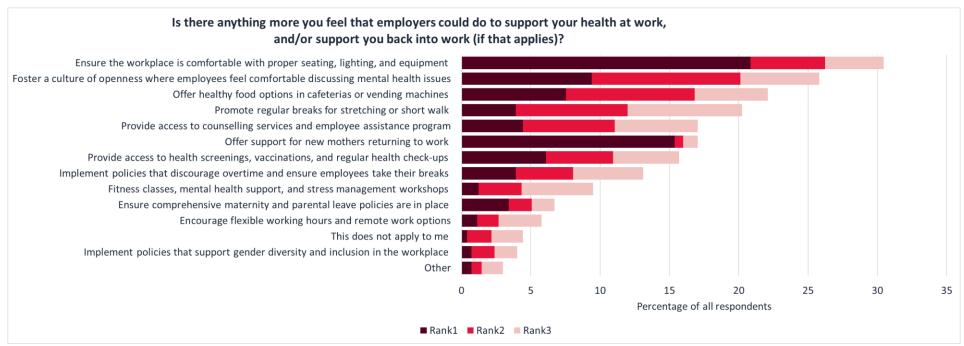


# Question 17 Is there anything more you feel that employers could do to

Is there anything more you feel that employers could do to support your health at work, and/or support you back into work?

Ranked responses

Nottinghamshire Women's Health survey responses



Above is the ranked responses to the question "Is there anything more you feel that employers could do to support your health at work, and/or support you back into work?".

Survey respondents were asked to rank their top 3 offers that would support them in work or back into work. With a range of suggestions.

The top response was to ensure the workplace is comfortable with proper seating, lighting and equipment. The second highest response was to foster of culture of openness to discuss mental health and the third highest overall response was to offer healthy food options at work.

It is important to note that the second highest for "Ranked 1" responses was offering support for new mothers returning to work.

An open answer question followed this ranked response question, with the results on the next slide.





Is there anything more you feel that employers could do to support your health at work, and/or support you back into work (if that applies)?

(130/130 responses)

Thematic Analysis

Nottinghamshire Women's Health survey responses

6 people commented that they agree with the statements made as suggestions of what employers could do.

Whilst 4 people commented that they felt it wasn't the responsibility of the workplace to consider health at work.

Many people responding to this question were retired.

Many people commented on being self-employed and not having access to company benefits

# Workplaces doing well

- Positive responses
- Continued use of policies to promote wellbeing

# **Practical workplace requests**

- Reduce workload
- Reduce working hours
- Time for giving blood
- Time for breaks
- Staffing
- Sexual safety
- Paid time off for appointments
- Office space
- Improving reasonable adjustments
- Hybrid working
- Health and safety assessments
- CPD
- Occupational health
- Complementary therapy
- Blood Pressure screening
- Poor pay
- Night shifts
- Funding cuts impacting offer
- Financial services and support

# Responsibilities

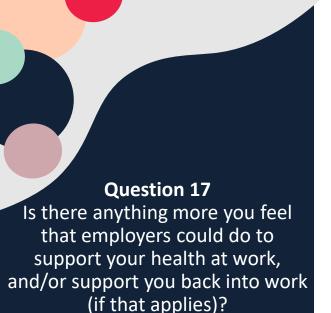
- Acknowledge role of carer
- Responsibility at work
- Expectations at work
- Senior Leadership issues

# Mental health and wellbeing

- Regular check in
- Good attitude towards staff wellbeing
- Counselling options
- Mental health support
- Listening to requests and caring
- Taking bullying seriously
- Ageism

# **Managing illnesses**

- Long term conditions
- Women's health issues
- Access to healthcare



Narrative and Quotes

Nottinghamshire Women's Health survey responses

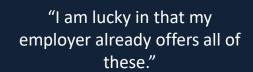
**Practical workplace requests:** many women noted that having practical workplace adaptations such as reduced workload, increased staffing, hybrid working and breaks would all have a positive impact on their wellbeing.

**Workplaces doing well:** It was great to hear that many businesses within Nottinghamshire already have fantastic policies in place to support women in the workplace that are sensitive to women's health issues, their caring responsibilities and promoting wellbeing in general.

**Responsibilities:** Women wanted workplaces to acknowledge their caring responsibilities and to recognize the impact that this has on their working life at times.

**Mental health and wellbeing:** Women discussed wanting workplace mental health support, this could be in the form of counselling options, a regular check in with those in the workspace and just taking the time to listen to requests.

**Managing illnesses:** Women wanted workplaces to be more sensitive to managing illness in the workplace, especially when it came to women's health issues such as the menopause.



"More education around women's health issues"



# Question 18 Part 1 Please share any additional thoughts on your experience with

Please share any additional thoughts on your experience with women's health and wellbeing in Nottinghamshire in the text box below. (312/312 responses)

Thematic Analysis

Nottinghamshire Women's Health survey responses

# Workplace & Education

- •Support in the workplace
- Education in school
- •Women's Hubs
- Balancing work

# **Access to Healthcare Services**

- Access to services
- •Getting a GP appointment
- •GP facilities
- Dentist
- •Longer GP appointments
- Reduced service
- Waiting times
- Parking at hospitals
- Local services
- Specialist healthcare
- •NHS app
- Multi-agency working

# Mental Health & Emotional Wellbeing

- Mental health support
- •Grief support
- •Trauma
- •Talk to someone
- Social prescribing

# Barriers to Healthcare & Health Inequalities

- •Age
- Alternative therapies
- •Being more than a diagnosis
- Caring responsibilities
- Community support
- •Confusion with the healthcare system
- Disparity between health services
- Domestic abuse and safety
- Equality
- Expectations placed on women
- •Female staff
- Finances impacted
- Housing
- •Improving public transport
- Isolated
- Life becoming harder with age
- •Life course
- Male provision
- Male staff
- Transgender comments
- Women only facilities
- •Women in leadership roles
- •Women's health being a priority

# Women's Health & Wellbeing

- Gynaecology support
- Endometriosis
- Family planning
- Menopause
- Perimenopause
- Periods
- •PCOS
- Prolapses
- Maternity care
- Post-natal support
- •Well woman check
- •Research for women's health
- Pain

# **Structural & Systemic Issues in Healthcare**

- Demand for services
- •Those in poor health putting a strain on healthcare services
- Offering choice
- •Time flexibility for healthcare

# Question 18 Part 2 Please share any additional thoughts on your experience with

Please share any additional thoughts on your experience with women's health and wellbeing in Nottinghamshire in the text box below. (312/312 responses)

Thematic Analysis

Nottinghamshire Women's Health survey responses

# Preventative Health & Self-Care

- Wanting prevention
- Health information
- •Access to health information
- •Information on selftreatment
- Self-diagnosis
- •Support in the workplace
- Support with form filling

# Medication & Medical Treatment

- Medication reviews
- Medication side effects

# **Lifestyle, Fitness & Nutrition**

- Diet
- Exercise
- Weight loss support
- •Wanting to be in nature
- Safe cycling option

# **Patient Experience & Quality of Care**

- Feeling fobbed off
- Feeling listened to
- •Happy with services and care
- Health care professionals normalising things that don't feel normal
- •Improvement in patient care
- •Ideas for improvement
- •Improve safeguarding
- •Wanting health professionals to follow their own advice
- •Understanding background during appointments
- Training for healthcare staff
- Wanting change
- •NGOs

# **Screening Services**

- Bowel screening
- Breast screening
- Cervical screening

# **NCC** specific feedback

"NCC offer workshops, and I think we should be able to attend without making time up or working early/late to make up this time. And to this to be seen as an employee taking this opportunity to support wellbeing."

# Question 18 Please share any additional thoughts on your experience

Please share any additional thoughts on your experience with women's health and wellbeing in Nottinghamshire in the text box below.

Narrative and Quotes

Nottinghamshire Women's Health survey responses

This catch all question brought up several key themes that arose throughout the survey. Whilst many have been commented on throughout previous narratives, it's important to mention that women were pleased and relieved to see that women's health was being surveyed by Nottinghamshire County Council, and what women's health was being seen as a priority.

With nearly 60% of responses for this question being from those over 50, it is unsurprising to see that a key theme in this question is around menopause, how more support is needed and how this needs to be a priority for women's health.

Again, a running theme throughout, but worth highlighting is the idea of being "fobbed off" and not listened to when engaging with health services. This has led to women mistrusting services, giving up on accessing care and feeling very frustrated.



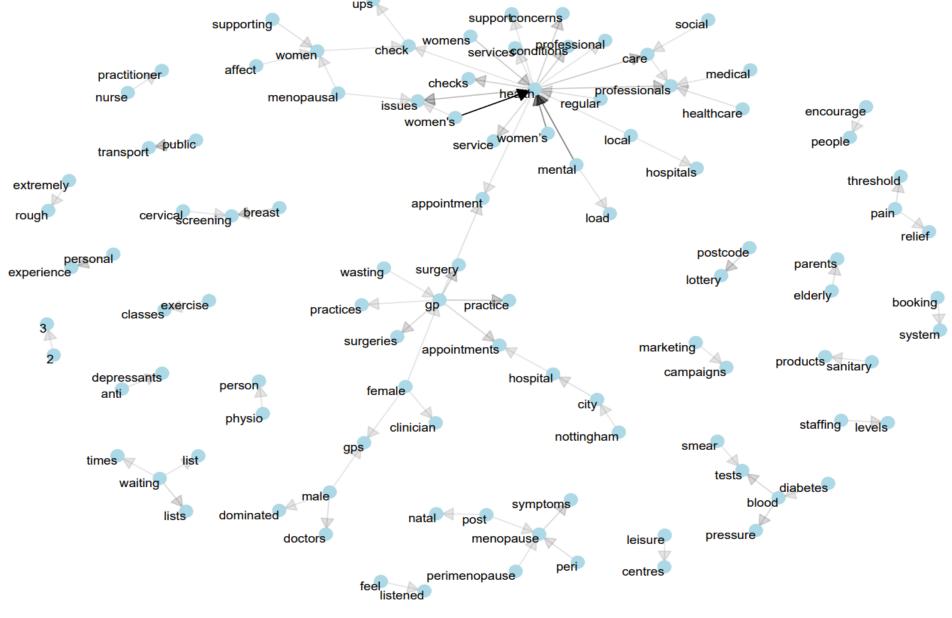


# Question 18 Please share any additional

Please share any additional thoughts on your experience with women's health and wellbeing in Nottinghamshire in the text box below.

**Content Analysis** 

Nottinghamshire Women's Health survey responses





# Methodology:

# Thematic Analysis

For larger data sets, codes were created up to 150 randomised

Some users coded used Nvivo Others coded using Excel.

Themes then formed from Codes.

# Narrative and Quotes

Narrative was formed from each of the codes by the person who did the initial analysis.

Quotes were selected during the analysis stage when it was felt that they were prominent.

# **Content Analysis**

R Software was utilised to create the connecting word diagrams.

Mostly, connecting words that appears n=3 times are displayed.





# Womens rough sleeper census

# Nottinghamshire Women's Rough Sleeper Census

# **Womens Rough Sleeper census**

## Women's homelessness can take visible and less visible forms

Sofa surfing; domestic abuse and VAWG; sex working; 'survival' sex or 'sex for rent'; exploitation, trafficking and modern slavery; refuge and charity funded support; informal arrangements – including separation from children.

# Women's rough sleeping can also be less visible

Walking around all night; sheltering in concealed locations, A&Es, public transport, McDonald's; concealing gender; sex working at night; staying with strangers. Current nationwide data collection and structures of services and processes can mean many of these experiences go unseen and unaccounted for. Women can also feel uncomfortable accessing services – e.g. due to lack of trust and high levels of male attendance – again making women less visible and less able to access support.

# What's the impact?

Women are underrepresented in commissioning and designing services, funding, policies and practices. This means that processes and services aren't designed for women and there aren't enough services for women.

Women are remaining homeless, unsafe and in need for much longer than necessary – sometimes resulting in lifelong or entrenched homelessness and disadvantage.



# Women's Rough Sleeping Census Organised by Framework and Solace Women's Aid

# Outcomes for Nottinghamshire County in 2023 and 2024

For Nottinghamshire County 44 women completed the surveys in 2023 and only 22 in 2024.

These numbers are small but generally show similar issues to the nationwide picture.

## **Themes and Barriers**

- Bad weather impacted participation in 2024
- There are more women out there than services are able to work with
- Women in couples (some abusive relationships) can impact if we can complete the survey and how we work with them co-dependency
- Pamper packs helped with engagement
- Women are transient and stay in a lot of locations
- Women have much higher complex needs than male cohort

