

## BIG HEALTHY MINDS CENSUS 2023

Many thanks to those who took the time and trouble to respond to this year's census. The information we get from this is really important to see what's working well, where we need to concentrate on improving, and what else we could be doing.

We can glean lots of insights from the information you have provided and we will use these to inform our strategy and planning actions. What follows are some of the initial results from the analysis.

### Rate of return:

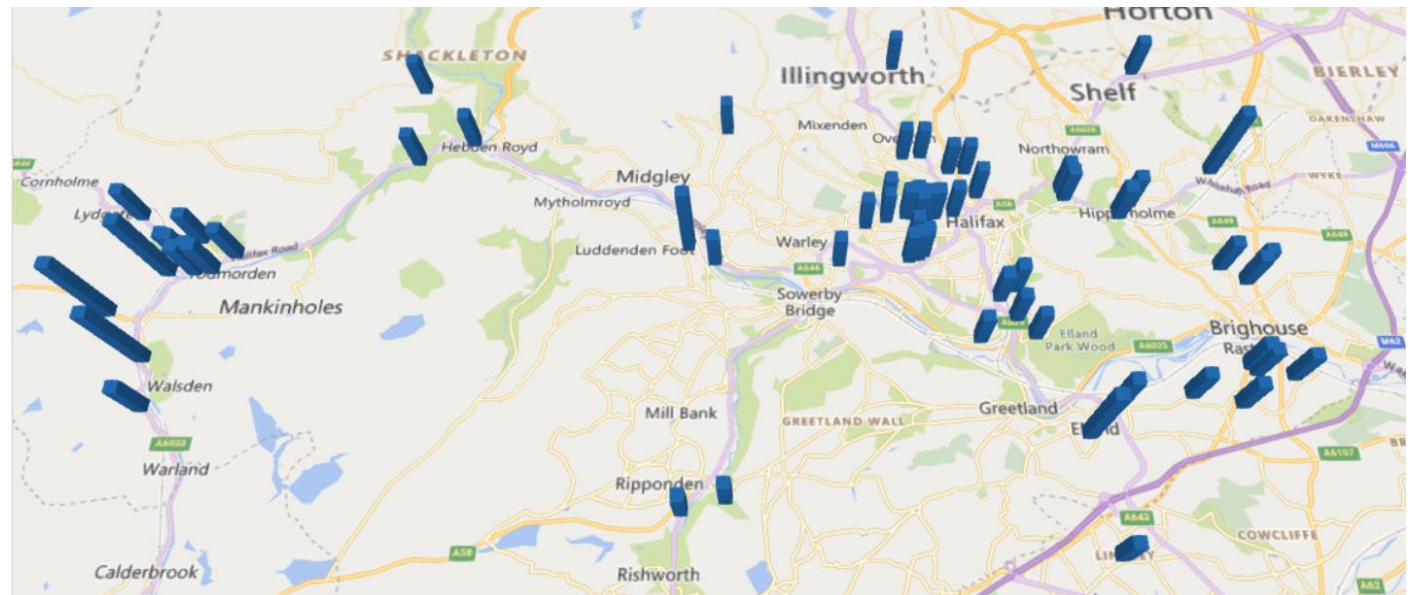
Responses were collected via a mixture of online forms and paper forms completed in person, some completed with support from staff where necessary. We got 77 census returns overall. That represents 16% of the people in touch with Healthy Minds services, excluding Safespace and Time Out. (We wouldn't ask someone contacting Safespace in crisis to go through these questions, nor would we expect a classroom of children to do this in a Time Out mental health session.)

### Postcodes

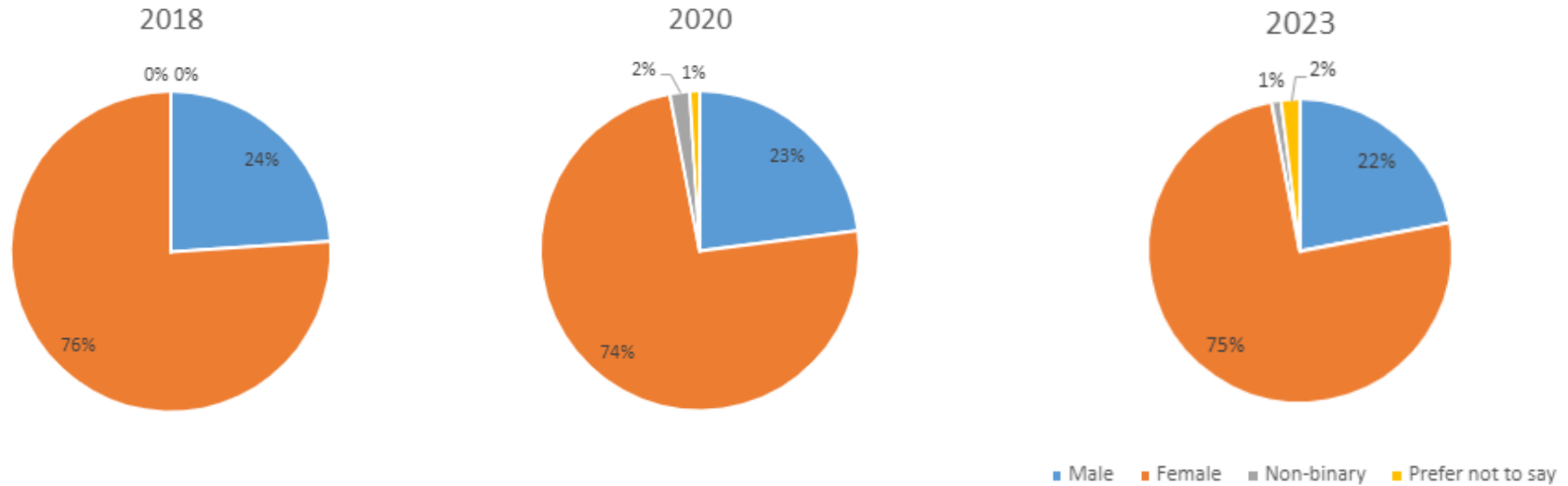
We asked for postcodes to see how we reach people across Calderdale.

The map on the right shows the distribution of people in contact with Healthy Minds services.

There is fairly good reach across the borough. The map confirms, however, that areas such as Sowerby (Bridge), Ryburn Valley and mid-Calder Valley are less well-covered. The Community Health & Wellbeing Service offers more targeted provision in some areas and we will explore areas of unmet needs in future planning across all our services.



## Sex & Gender Identity

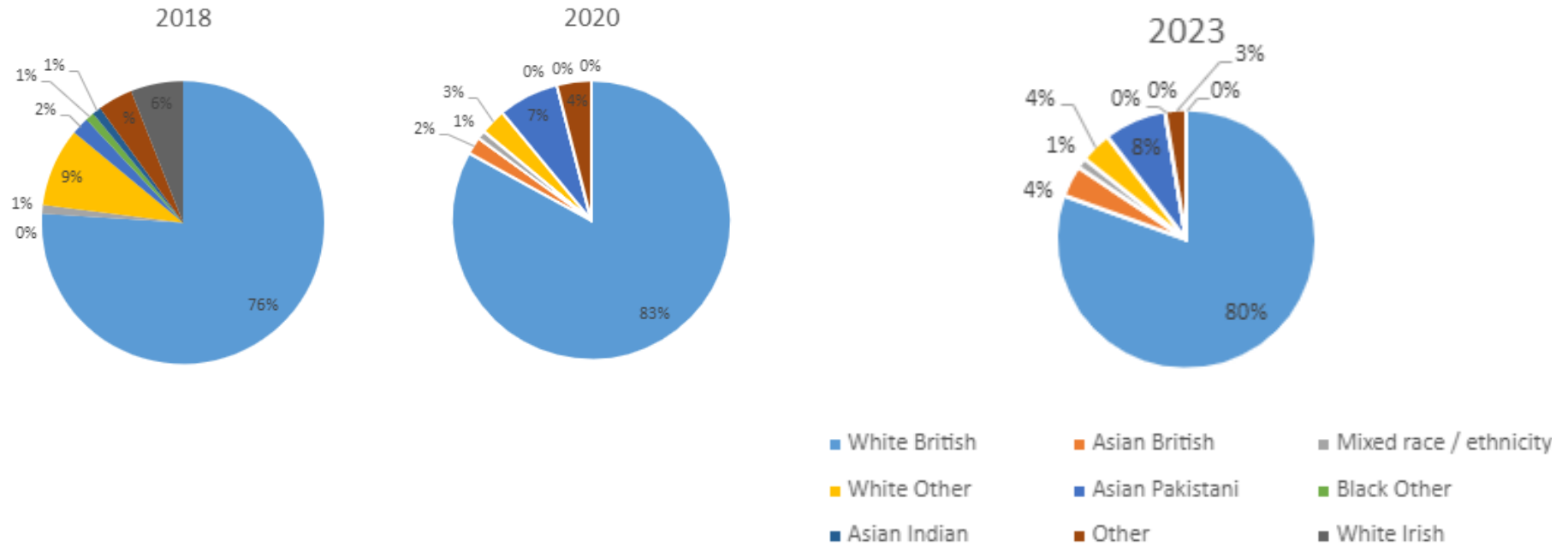


Not much change in the balance of sexes: around **75% of people in touch with Healthy Minds are female**. Calderdale's population is 51.2% female.

We need to do more to understand why fewer men are in touch with Healthy Minds.

We also asked about gender identity: 97% said that their gender is the same as the sex registered at birth. In the 2021 UK Census, 0.5% said their gender was different than their sex registered at birth.

## Race and Ethnicity



The majority of people in touch with Healthy Minds are White British (80.5%); all “White” race categories total 84%. This compares with Calderdale Council demographic data, with the “White” population at 89.7%. The next biggest group in the HM census is Asian Pakistani at 8%, with all “Asian” race categories totalling 12%. This compares with 8.3% “Asian” population in Calderdale Council’s data. Although this indicates that Healthy Minds is achieving a good level of diversity in race and ethnicity, relative to the population, there are many complex issues that create health inequalities and people from non-White backgrounds have poorer health outcomes and access to services than those from White backgrounds. Identifying and addressing health inequalities, particularly around mental health, is a priority in Healthy Minds’ strategy for 2022-25.

**Roshani**, offering culturally sensitive mental health support and education for Asian people, is in its 8<sup>th</sup> year now and remains a valuable source of support:

*I have been a committed user of Roshani for many years. As I can communicate in Punjabi I am able to benefit from peer led support groups in my language. This is something that has helped me maintain good mental health and my health and wellbeing are better with this support.*

Roshani has a limited resource, funded by Calderdale Council's Stronger Neighbourhoods programme but at the same level of funding it's had for the past few years. The Roshani approach has been successful and we would like to do more to develop its potential. This year will see more development in Roshani, particularly in extending reach through volunteers.

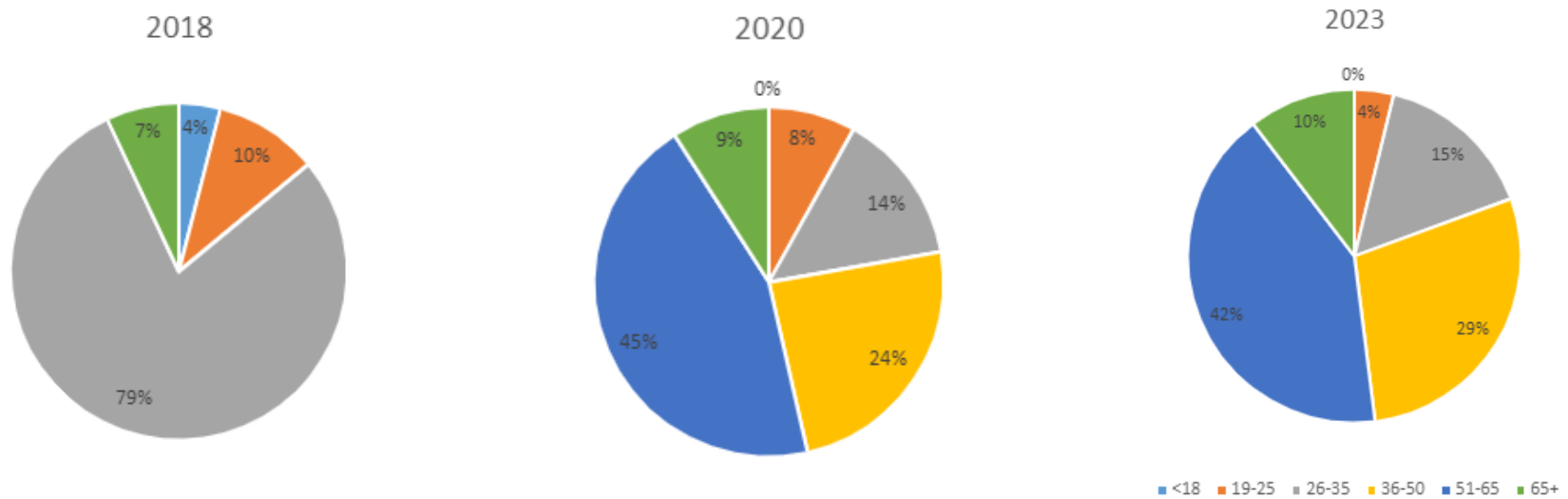
Our **Community Health & Wellbeing Service** includes workers based in Park Ward, who have extended reach into the community and have enabled people to access other Healthy Minds support services.

We have also funded a number of community services through **Spotlight**, a joint initiative with Healthy Minds and Rethink Mental Illness. Among these are Mums on a Mission, working with Black Caribbean families; Prayer Mats to Gym Mats, working with Asian men; and a specialist mental health role in St. Augustine's Centre to support refugees, migrants and asylum seekers.

We are about to work with York University on an action-focussed research project on health inequalities in the Asian community to gather strong evidence for meaningful initiatives to improve access to mental health support.

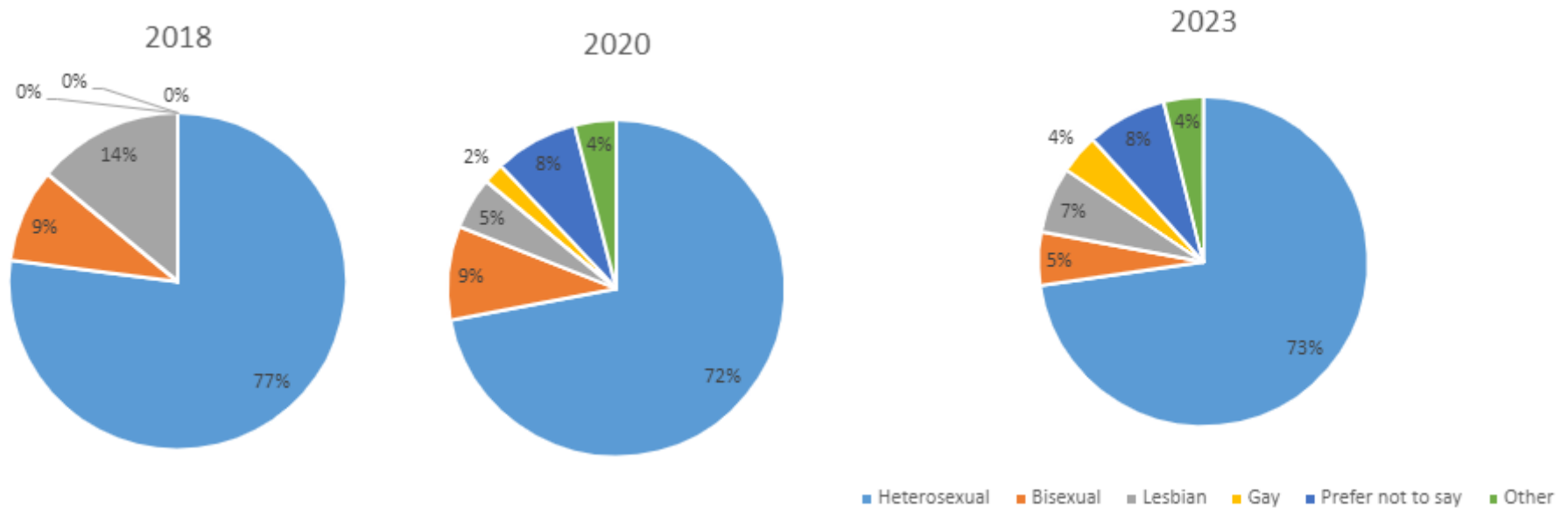
There remains a need for focussed support for groups of people who experience inequality. The longer-term aim must be to absorb inclusive practice into all our services so that people feel able and confident to access the support they need. That will take time to achieve, and we're not there yet even after 8 years of Roshani in Healthy Minds, but it remains an ambition we will work towards.

## Age



**The majority are in the 51-65 age group**, with a slight shift in 2023 to the 36-50 age group. We monitored age in broader groups in 2018, with 79% in the 26-64 age group; that works out at 83% for 2020 and 86% for 2023. It should be noted that these figures do not include Time Out participants in schools workshops, which account for a high proportion of Healthy Minds' participants overall. Other than Time Out, most HM services are designed for adults and this is reflected in the spread of ages. There is a decline in the 19-25 age group from 10% in 2018 to just 4% in 2023: this indicates a need for services that better serve younger adults.

## Sexual Orientation



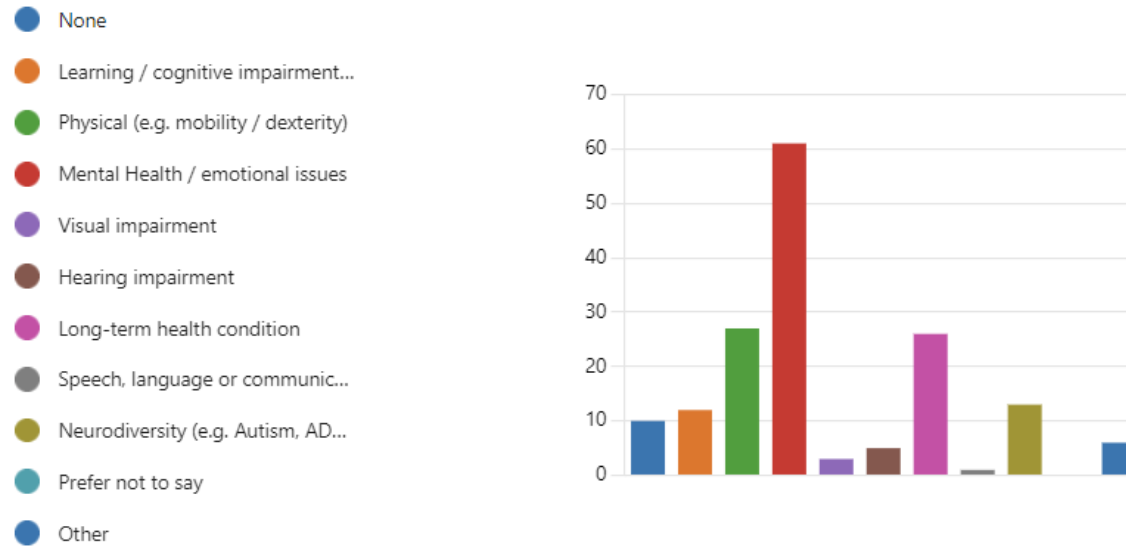
Broadly a similar picture from 2020 to 2023. 8% respondents chose not to answer this question: this might be explained by some sensitivity with this question but we should also consider whether Healthy Minds has inclusive practice and environments so that people feel safe to state their sexual orientation, should they want to. Further analysis on responses here shows that people who preferred not to answer this question were in the 36 and older age groups, which might reflect historical experiences of intolerance towards non-heterosexual orientation; younger age groups may feel differently.

The 2021 UK Census is the first to collect data on sexual orientation – results on this have yet to be published but the ONS estimate is that 93-95% of the population identifies as heterosexual. In the HM census, nearly 20% people identified as lesbian, gay, bisexual or “other”, which may reflect the perception that Calderdale has a higher LGB+ population.

Through [Spotlight](#), we have funded Brunswick Centre’s Mind Your Head programme to continue work to improve mental health outcomes for LGBT+ people in Calderdale.

## Ill-health and Disability

### Do you consider yourself to have any ill-health or disability?



As we would expect, **most people (79.2%) consider themselves to have mental health and emotional issues**. The next highest response was in physical health needs (35%). As overall health is a wider determinant in mental health, it is not surprising that a range of health needs has been expressed. We need to be mindful of this in service design.

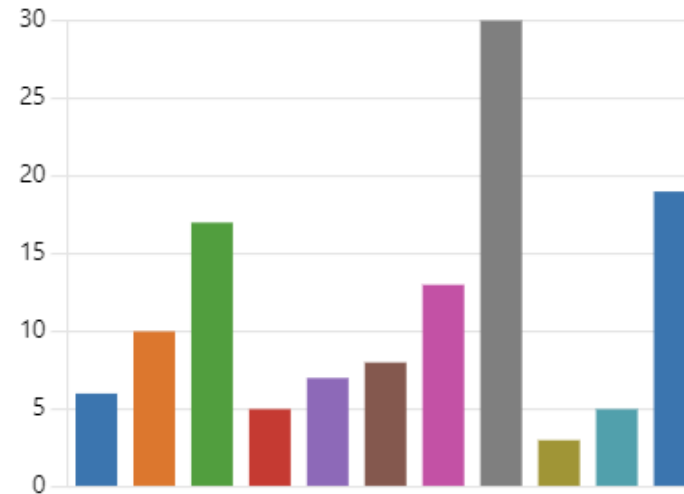
Once again, this highlights the problem of physical access to our King Street premises. *"I feel it's a shame the downstairs space at Halifax Drop in isn't accessible to all physical abilities."*

We are very conscious of this issue and sorry that we don't yet have a good answer. In the five years since we moved to King Street, we have had architects, builders and specialist consultants survey the building and various options have been explored that haven't been possible due to unforeseen quirks with the building, restrictions on what can be done on the pavements around us, and the cost of what can be done. We know this restricts access to the building for some people and we continue to try to find a solution. For now, we ask that people booking on to activities tell us if access is problematic and we will look to use other venues when we know it is necessary.

## Healthy Minds Services

Which Healthy Minds services are you in contact with?

- Community Health & Wellbeing...
- Drop-in (Halifax)
- Drop-in (Todmorden)
- Like Minds: peer support / befri...
- Link
- Roshani
- Safespace
- Support groups / activities
- Time Out: children & young peo...
- Welfare Rights
- I volunteer at Healthy Minds



Good to get some response from all Healthy Minds services, with most from people who attend support groups and activities. This is particularly good to see as we have tried to provide activities that offer some level of support to minimise the loss that many felt following the closure of the Recovery & Support Service last September.

The census invited people to give feedback and there were several comments about the closure of a much-valued service. Recovery & Support held activities across Calderdale and we had to stop activity in all areas but it seems this loss has been more keenly felt in Todmorden:

*“here in Todmorden HM now barely exists and people involved in past experience only have negative thoughts about HM and how underrepresented we are now.”; “living in Todmorden (Upper Valley Area) there is much less provided here by Healthy Minds. Myself and other users I am in contact with do feel*



*neglected. Please can we have more groups/events in our area as not everyone has the ability or transport to get to Halifax.”; “There are no equivalent services in Upper Calder Valley to what R&S provided. The support available via the NHS is incredibly limited or non-existent.”; “Todmorden once had a vibrant HM community. Now it only has a drop in with Safespace once a week. Leaving many people again feeling isolated and alone.”*

The closure of R&S was publicly announced 3 months in advance in a detailed statement explaining why we had been forced into this action and plans within the teams to communicate and work closely with people receiving support to wind down the service. There was also lots of communication with individuals who expressed concern, and a public meeting in Todmorden about the closure. Feedback from Todmorden, however, suggests that there was insufficient communication with people there that is not reflected in other areas. Although it is important to recognise that no amount of communication would have averted the closure, a better focus on what was happening, and why, may have helped people understand and prepare for it.

With the relaunch of **Healthy Minds Forum**, and work to develop a membership base, we will create more opportunities for transparency and communication about what is happening in Healthy Minds and more widely in the mental health system.

Public resources are generally allocated based on population size so Calderdale gets less than neighbouring boroughs. This creates a challenge for any service to achieve coverage across a large geographical area with a relatively small population. Many areas in Calderdale don't have much mental health provision – this is something Healthy Minds has always sought to address and our strategy is to make the most impact with limited resources. Feedback and ongoing discussion helps us understand what people value about Healthy Minds:

*I came to Healthy Minds at a time where I was really struggling ... what I have found is a community, a safe space, a wealth of knowledge...*

*Healthy Minds is a very good and supportive service offering people a place to go to meet new people and learn and develop skills in a safe environment.*

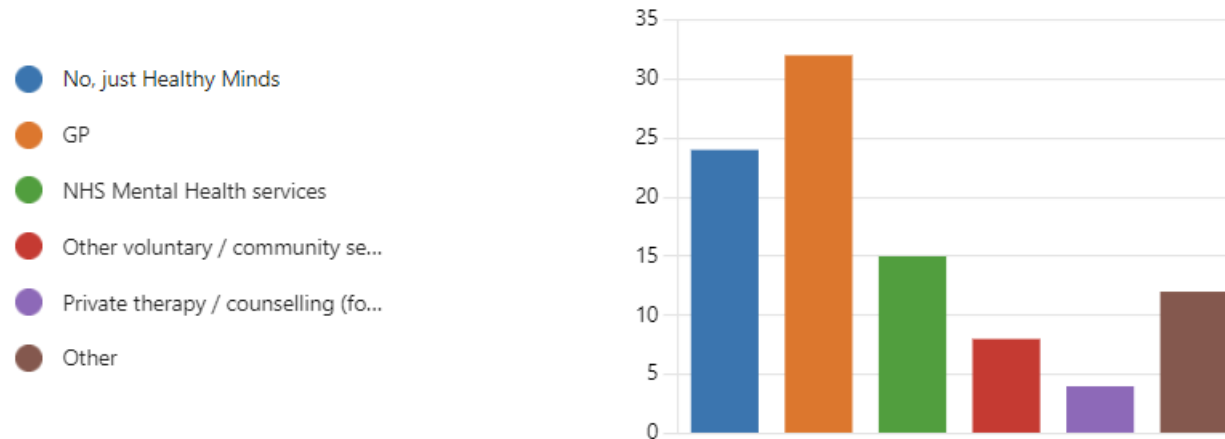
*In my view Healthy Minds is a vital service. There is no other organisation like it in Calderdale. It fills the gap between websites, apps, crisis numbers [which may help some, but can also be either inaccessible if no IT or overwhelming to navigate] and professional talking therapy [which can be impossible to qualify for or has a long waiting time]. Critically, HM has no long waiting list - having summoned up the courage to make contact you can go along ... HM provides human contact and environments where there is a tacit understanding and empathy among participants and volunteers. Simple but effective! I will be forever grateful that I was signposted to HM.*

**Overall, feedback suggests that things people appreciate about Healthy Minds are:**

- **Sense of community**
- **Access to support without waiting lists / referral criteria**
- **Support to develop skills and knowledge to manage mental health**

It is also useful, in this context, to understand how Healthy Minds' support relates to other services that people access.

### Do you currently get mental health support from other services?



**31.2% said that Healthy Minds is their only source of support:** of those, a third access the Todmorden Drop-in, indicating the dearth of alternatives that has been expressed in feedback. Just under a third of people who only access Healthy Minds support attend groups and activities.

**The Community Health & Wellbeing Service** is Healthy Minds' newest service. The CHW approach is to take support into communities, literally to people's doorsteps: two-thirds of people who are in contact with the CHW team say that this is their only source of support, which demonstrates the value of this approach.

Just 19.5% of respondents said they also get support from NHS mental health services: Healthy Minds was founded on the basis that 75% of people with mental health needs do not or cannot access NHS support so we are still fulfilling our purpose in that respect.

## People's Circumstances

In this census we asked some questions about people's housing, employment and financial situation to better understand whether and how these might relate to wellbeing. Further analysis can explore the relationships between these factors but the initial results are set out below.

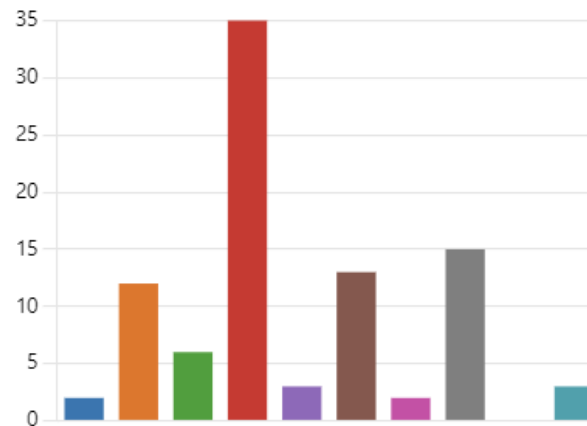
### Living Situation

There is a fairly even split between people who live on their own and those who share with family / friends. Also around the same for either renting or owning homes. 17% respondents stated "I feel safe and secure in my home": this was one option in a multiple-choice question and may have been better asked separately as a "yes/no" question.

We also asked whether people had been affected by flooding in their home or business: 8% said they had; of those, 50% said they still feel at risk of flooding. Our Recovery & Support Service in the Upper Calder Valley was originally instigated in response to the impact of floods and dedicated funding for this ended in December 2020. The emotional impact of floods has been devastating for those affected and continues for some – *"My mental health has worsened since the closure of R&S the threat of flooding is still there"* - but there is not a strong case for funding emotional support in response to flood anxiety. Healthy Minds' position is that it is important to build emotional resilience in communities against any adverse events.

### Employment

- I am unemployed and looking f...
- I am employed
- I am self-employed
- I am not working due to ill-healt...
- I am not working as I am a carer
- I am retired
- I am in education / training / ap...
- I work as a volunteer
- Prefer not to say
- Other



**The majority (46%) of people in contact with Healthy Minds are not working due to ill-health / disability.** 17% are retired and 16% employed. Most Healthy Minds activities take place during normal working hours and we know there is demand for more activities in evenings and weekends.

20% people said they work as volunteers (which may be in Healthy Minds or elsewhere). Volunteers have a valued and increasingly prominent role in Healthy Minds, bringing their experience, skills and time to develop and deliver services.

The benefits of volunteering are nicely illustrated in some of the feedback we received:

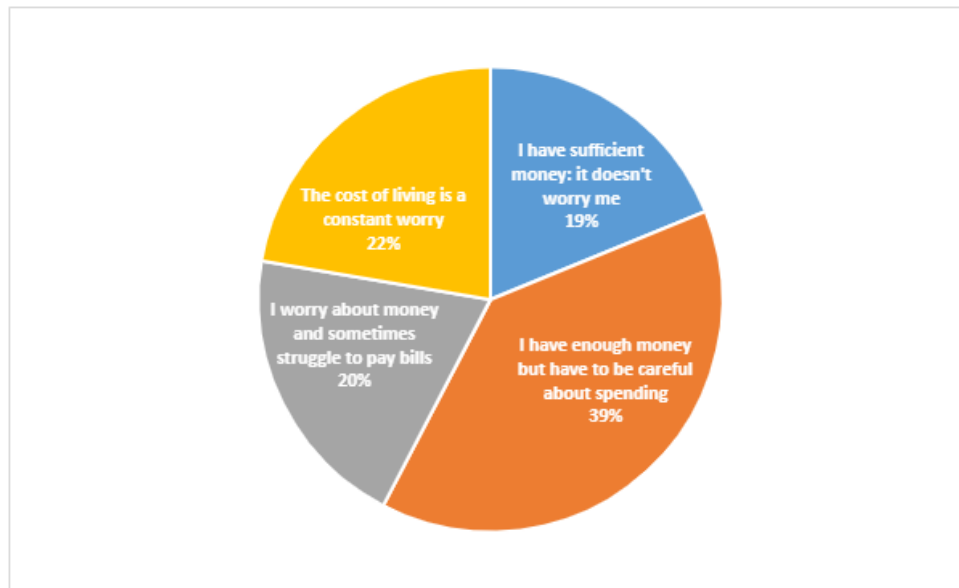
*Healthy Minds have changed my outlook on life for the better. Helping others has proved more rewarding than I ever imagined. It's like having a second family, I feel supported, understood and listened to.*

*An excellent organisation that I have used as both a service user and volunteer for quite a few years. I've accessed a great amount of support and met lots of wonderful people. Healthy Minds has given me so many opportunities and space to grow over the years.*

Other feedback suggested different things we could look at in how we offer volunteering opportunities and ensuring volunteers are kept informed about new services and developments in Healthy Minds. We will take these suggestions on board, and our new Like Minds service creates more opportunities and closer involvement in the organisation alongside membership and the Forum.

## Finances

There is a strong and well-recognised correlation between financial security and mental health. For the first time in our census, this year we asked how people feel about their financial situation.



In contrast to a perception that everyone is anxious about the cost of living, 19% said they aren't worried about money and 39% feel they have enough money so long as they are careful about spending.

Further analysis on responses may show relationships between answers here and other questions such as employment status, housing and postcode areas, which could help identify priorities for where we place Healthy Minds activities.

7% people said they need more advice and support about money. Healthy Minds, through our [Welfare Rights service](#), is part of Calderdale's Anti-Poverty Strategy Group. Although we have less capacity in our Welfare Rights service this year due to funding constraints, we will continue to provide this service as we recognise its importance.

## Charitable Giving

### Do you donate to any charity?

- Yes - regular donation (e.g. subs...
- Yes - occasionally (e.g. appeals /...
- No



**76% respondents donate to charity.**

46% people make regular donations by standing order or subscription; 30% donate occasionally (e.g. appeals or collections).

We also asked whether people's charitable giving has changed in the last year or so. 53% said it hasn't changed. 27% have reduced the amounts they donate and 15% have cancelled or reduced regular donations. 1% said they give higher amounts when they donate.

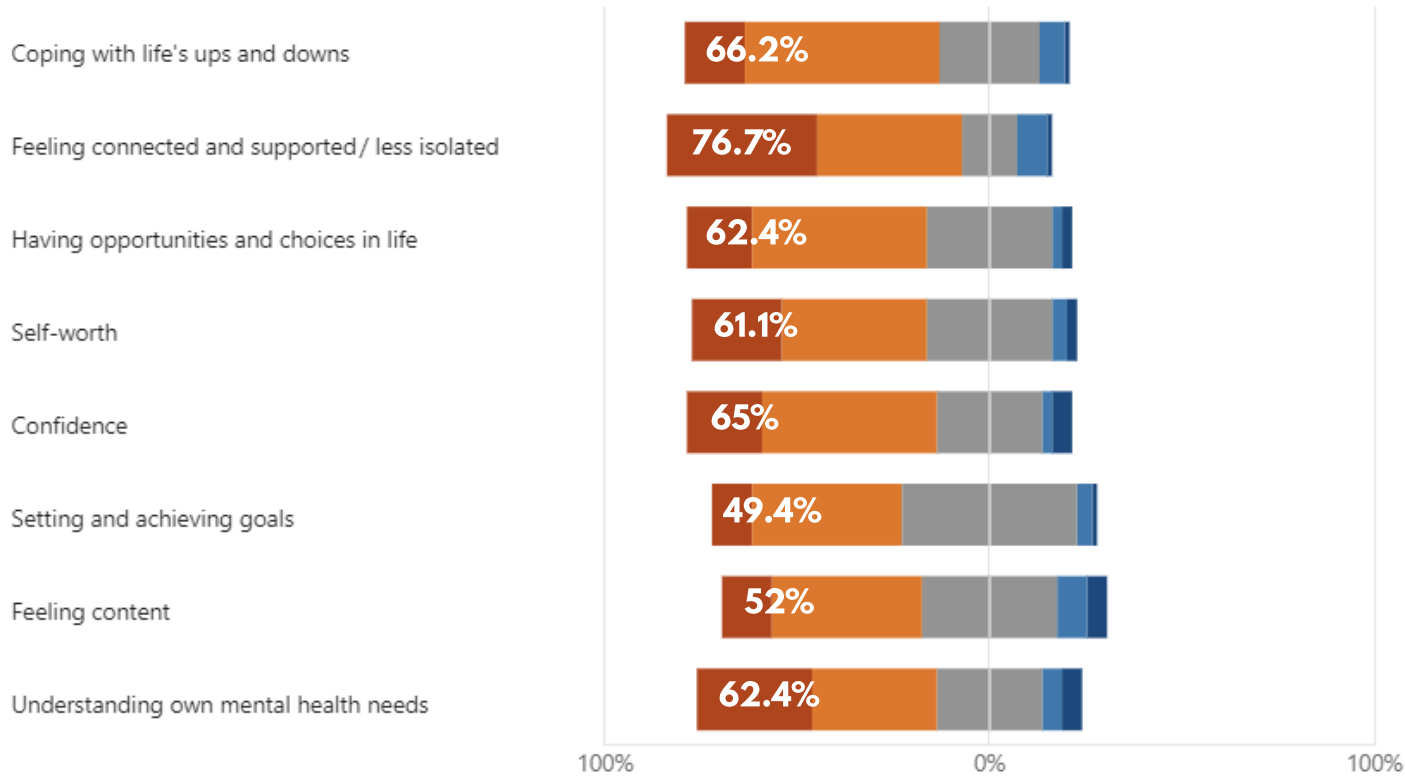
[Charities Aid Foundation](#) reports that fewer people donate to charity than before the pandemic, and 1 in 8 (12.5%) donate lower amounts. The Ukraine crisis, however, saw the largest donation average ever in CAF research, with 1 in 3 people making a donation.

As is the case with most charities, community fundraising and public donations are increasingly important as a source of income for Healthy Minds.

## Wellness Measures

We asked everyone to tell us how they feel they are doing now compared to when they first came into contact with Healthy Minds. The wellbeing categories below were developed with people supported by Healthy Minds and are used across all our services. The percentages shown in the graph below are those who reported improvements (i.e. much or somewhat better, shown in red and orange). **Across all categories, 62% reported improvements**, with the greatest improvement on **feeling connected / less isolated**: this has been the case consistently since we introduced these measures and reflects the sense of community that people say they value about being involved in Healthy Minds. 30% said “about the same”, so support has enabled them to remain stable. 8.1% overall reported that their wellbeing had worsened, however, and we need to analyse this further to understand what factors may affect this.

■ Much Better ■ Somewhat better ■ About the same ■ Somewhat worse ■ Much worse



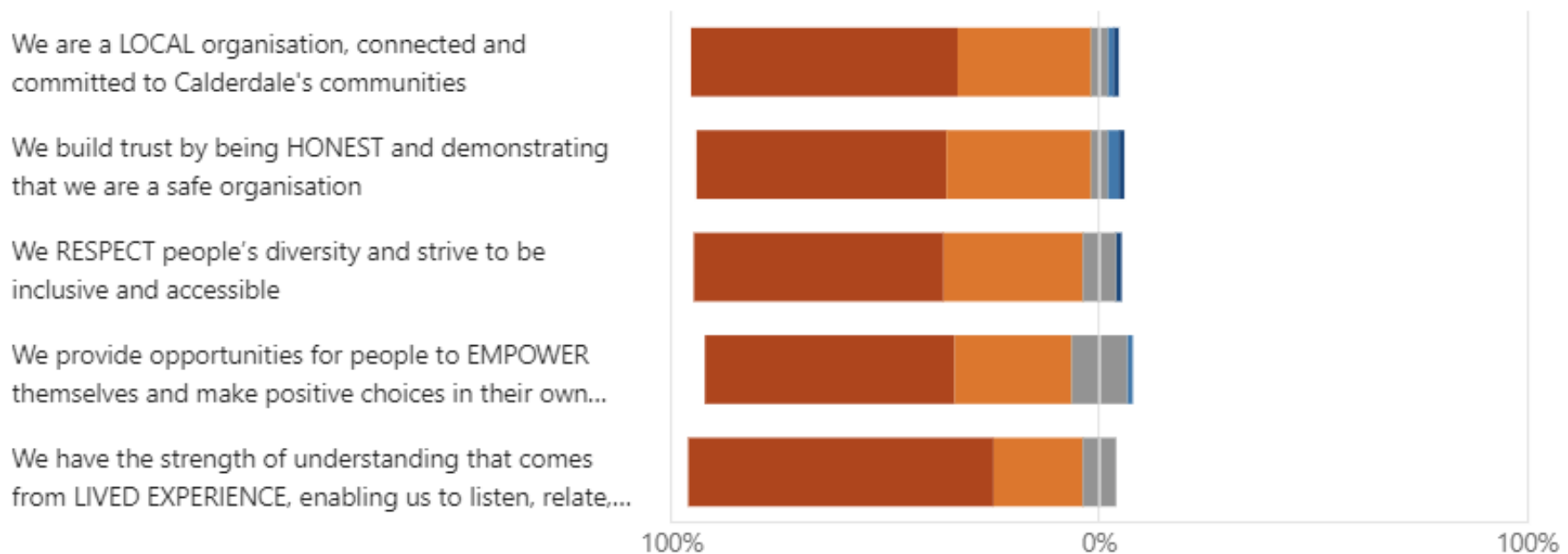
## Healthy Minds Values

We have done a lot of work with people involved in Healthy Minds to develop statements to reflect our values as an organisation. The values are the foundation of our strategy – what we do and how we do it. In the census, we asked how much people agree with the values statements.

The graph below shows overwhelming agreement: 91% agreed (62% completely agree; 29% agree). **The highest-rated value for complete agreement is on lived experience (71.4%);** nobody disagreed with this value. The results suggest that the values statements strongly resonate with people.

**Honesty** scored third highest on agreement but was also the highest on disagreement, with 3.9%. This relates to comments from people in Todmorden about communication around the closure of Recovery & Support.

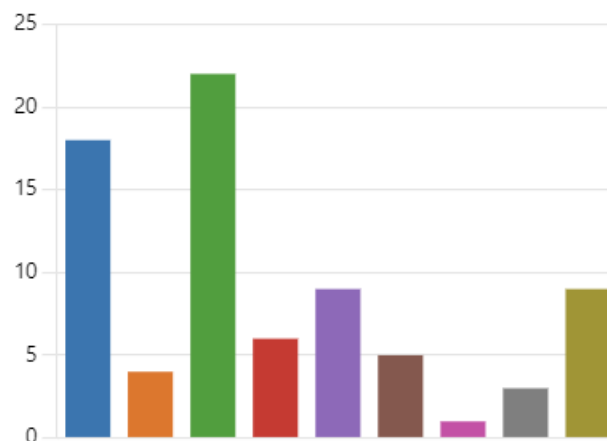
■ Completely Agree ■ Agree ■ Neutral ■ Disagree ■ Completely Disagree



## Membership and Engagement

### How did you first hear about Healthy Minds?

- Word of mouth
- Poster / leaflet
- Recommended by Health / Soci...
- Recommended by another service
- Website / internet search
- Social media (e.g. Facebook)
- Article in press / newsletter
- Information stall at an event
- Other



**Most people said Healthy Minds had been recommended by health / social care professionals (28.6%).** This is encouraging to see as we have built relationships and trust with statutory services. Previous census results had word of mouth as our biggest referral source and this came out second highest at 23.4%. We get in the region of 1800 unique visitors to our website every month and 11.7% people said they had found us through the website. Just 5.2% said they had seen a poster or leaflet, which is an interesting result as we still produce a lot of printed publicity material.

## Membership

People were invited to give their contact details if interested in helping us develop our new membership model. 39% of respondents have given their details and Georgia, our Membership & Engagement Coordinator, has made contact with them. For more details on how membership is developing, please visit the website: <https://www.healthymindscalderdale.co.uk/membership.html>



## Feedback

Finally, people were invited to give any additional feedback. Some themes are discussed in the relevant sections above, with some of the comments. Most feedback was positive and people have expressed their appreciation for some services. There are also some suggestions for improvements and, as mentioned above, several people shared their thoughts about the closure of Recovery & Support, particularly in Todmorden. All the comments will be shared with relevant teams.

*“I am very glad that Healthy Minds exists. I think that a lot of people get essential support and care in times of need when other support systems in the community fail.”*

*“Thank goodness for Healthy Minds!!”*

## Conclusion

Although we need to be cautious about giving too much weight to these results with 77 people having engaged, the results resonate with wider, ongoing discussions and we believe they are broadly representative. We will test the insights from the census with more consultation and coproduction but they give us a good basis on which to start. When we repeat this exercise we may be able to achieve higher levels of return, for example, through the Community Health & Wellbeing Team’s engagement many more people and through our membership base, for which the census has been a good starting point.

Overall, feedback and impact has been positive, and it is great to see strong agreement with Healthy Minds’ values. We can take from this that Healthy Minds is going in the right direction but, as the results show, there are some areas that need more consideration.

The next steps will be to ensure that our strategy and business planning uses these insights to inform future planning.

Thanks once again to those who took the time and trouble to provide us with this valuable information.