

Oldham

**LINK**

**MAKE IT HAPPEN!**

Local Involvement Network

**Chadderton  
Health &  
Wellbeing  
Engagement  
Project  
September 2011**



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## **1. Introduction**

- 1.1 Gaddum Centre was commissioned by the Chadderton District Partnership in 2010 to undertake the Health & Wellbeing Engagement Project. This was to provide a 'vox-pox' consultation to support existing public health data and to inform its District Plan. The project brief can be found at the Appendix.
- 1.2 The staff of Oldham Local Involvement Network (LINK), which is managed by Gaddum Centre, comprised the Project Team of three staff, along with the Associate Director of Stakeholder Engagement at NHS Oldham, who had a role to oversee the work.
- 1.3 The indicative budget for this work was £2,500 with £2,000 coming from the District Partnership and the remainder being management time from the Primary Care Trust.
- 1.3 Existing Oldham LINK resources were used to add extra value to the work and to enhance the breadth of what could be achieved within the project brief and budget.

## **2. Aim**

To inform the 2011-12 Chadderton District Plan by supplementing public health data with evidence of public opinions on the health and wellbeing needs and priorities at ward level.

### **3. Objectives**

- To gather information from local residents about their health and wellbeing needs and priorities.
- To help stimulate local debate on the longer term future of health and wellbeing services in the District (bearing in mind the financial context going forward).
- To assist elected members in preparing for their future enhanced role in NHS governance by giving them additional opportunities to engage with their constituents on health matters.

### **4. Methodology**

#### **4.1 Phase 1 - Scoping**

- 4.1.1 The project began with a mapping exercise of key community hotspots or hubs within each ward, from which to begin the public consultation process. A scoping exercise of a number of potential sites was undertaken in terms of the practical and logistical viability as well as determining which venues would promote maximum participation.
- 4.1.2 Asda in Chadderton was selected as being a central, accessible and co-operative venue within the Chadderton area that would be a busy place with a high footfall from which to engage the participants.
- 4.1.3 Phase 1 also included promotion of the event via local networks and within local community based centres.

## 4.2 Phase 2 – Information Gathering

4.2.1 The main part of the project took part during Phase 2, in which information in relation to the following issues were captured:

- what the best bits are about where people live;
- what concerns people had about their area that had an impact on their health and wellbeing;
- what barriers people experience to their health and wellbeing;
- what health worries people had, both now and for the future, either for themselves or their families; and
- what local community action could address this and what support might be needed to achieve this.



This approach enabled the Project Team to capture from people how they understood health and wellbeing and in particular what environmental and practical factors influence their health and wellbeing.

4.2.2 The information gathering phase consisted of three elements:

- A video diary room 'pod' was erected in Asda Chadderton, which was used to capture people's thoughts about their health and wellbeing. The Project Team conducted 72 semi-structured interviews with local people throughout the day. There was a broad 'social-mix' of people that took part here. This took place between 12 noon – 7pm on Tuesday 28<sup>th</sup> June 2011. Figure 1 shows the geographical spread of participants from this element within the Chadderton district boundary.
- A focused discussion was conducted at the coffee morning

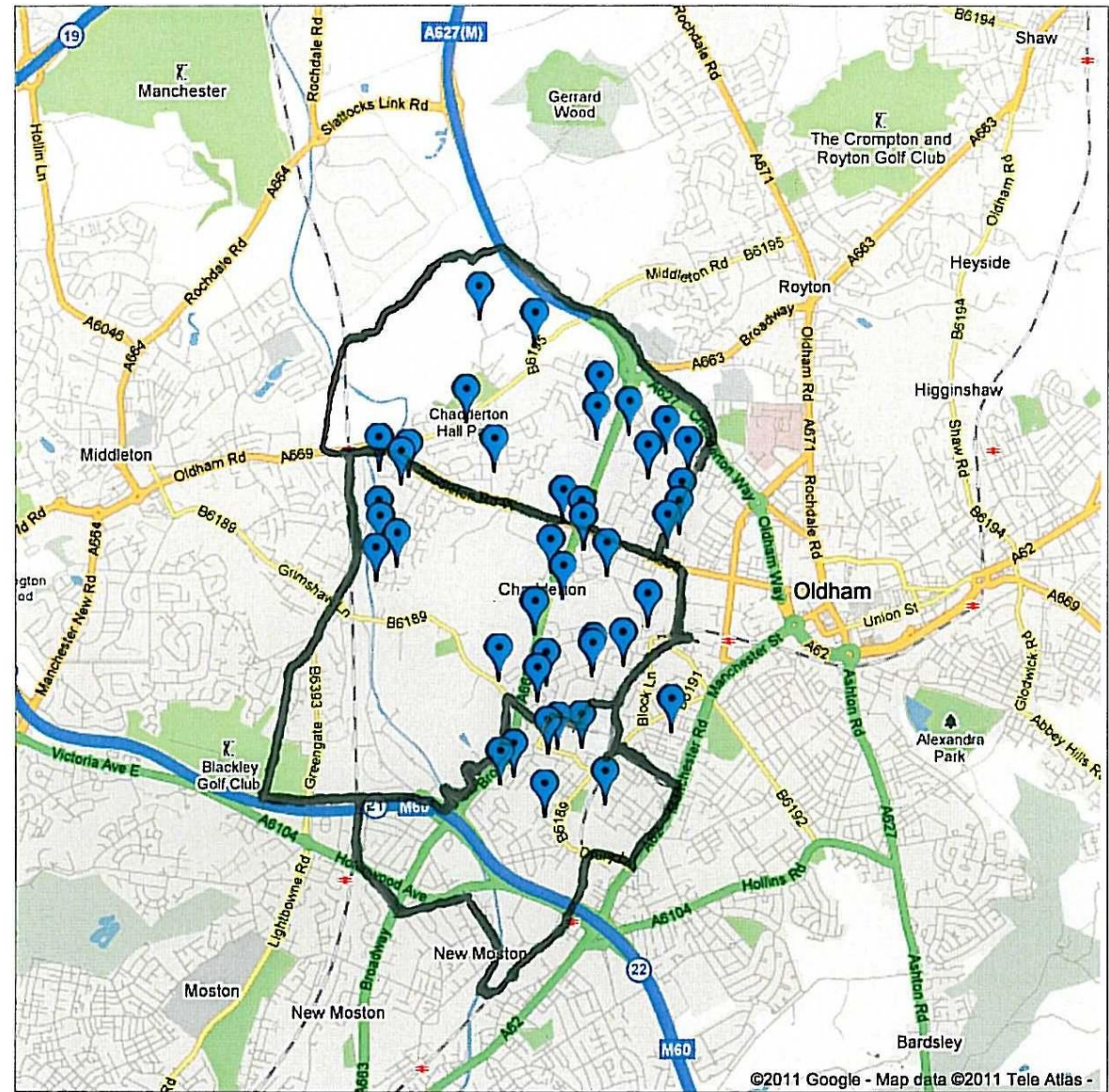


Figure 1 – geographical spread of participants

session held at Burnley Brow Community School on the morning of Friday 24<sup>th</sup> June 2011. Approximately 30 women, all of South Asian ethnicity participated in this element. This was useful to capture any issues specific to this particular community.

- Telephone interviews were conducted with eight Forum 4 Age members, all of whom were over 50 years of age and White-British. This work was done during 13<sup>th</sup> -21<sup>st</sup> July 2011.

4.2.3 During the video diary-room exercise, some interviews were captured on camera in the 'pod', which have been edited into a short DVD to accompany this report. A number of people however, were happy to talk to us about the issues but preferred not to be filmed. The Project Team ensured that both options were available so that a greater number of people could be engaged with and henceforth a broader number of views captured. Face-to-face interviews were recorded in writing and analysed along with the data captured on film.

### **4.3 Phase 3 – Prioritising the Issues**

4.3.1 The raw data recorded throughout the consultation day was analysed to identify the range of issues that are important to people in each ward.

### **4.4 Phase 4 – Focus Group**

4.4.1 The Project Team prepared a focused discussion around identified issues, to stimulate a consideration of:

- What actions need to be taken against each identified priority.
- Which statutory agency should assume responsibility.

- How local communities/groups could be engaged in this.
- Timescales for action, based on local views, perceptions and experience.
- How the District Partnership, other statutory organisations and local communities can begin to address the issues.
- What role community and voluntary organisations within the ward can play to support this and collaborate where appropriate.

4.4.2 The focus group session was held during the afternoon of Wednesday 24<sup>th</sup> August 2011 at Chadderton Wellbeing Centre. Nine local residents that participated within Phase 2 registered to take part, although only two people arrived on the day. For this reason, a full action planning activity against the identified themes and priorities could not be conducted. Instead, a general discussion was held in relation to the identified issues and any additional comments have been added to the research findings.

## 4.5 Phase 5 - Analysis & Report Write-Up

4.5.1 Information from the information gathering phase has been analysed, so that the key findings and recommendations can be presented within this report.



## 5. Results

### 5.1 Phase 2 Findings: Video Diary Room Pod

#### 5.1.1 What is good about where you live?

##### **GOOD COMMUNITY SPIRIT**

“It’s very friendly where I live. “

“I like that everybody where I live knows each other.”

“Lived here all my life, I’ve got good family ties.”

“Friends, friendly area (lives in central Chadderton). Foxdenton Park is good”

“Always lived here – family ties. Convenient.”

“Homely. My family are here. Friendly community spirit. ASDA.”

“Very happy”

“Likes the area”

“I have lived here for 26 years and wouldn’t move.”

“Chadderton- history & heritage.”

“Quiet & peaceful”

“The area is ok”

### **CENTRAL LOCATION, EASE OF TRANSPORT**

“Easy access to Manchester”

“I live in south Chadderton, and feel like I’m in a good central location.”

“Central good facilities”

### **GOOD LOCAL AMENITIES, SERVICES & PARKS**

“Everything’s local, all handy.”

“People are friendly; got everything you need (except pet shops). Got parks, fields, trees, grassy areas. Plenty of petrol stations. Convenience. “

“Park on the doorstep. Town centre, ASDA all I need. Live on nice estate. Convenient.”

“The parks are nice we go for walks there. “

“Foxdenton Park and Tandle Hills”

“Health and Wellbeing Centre – library and swimming baths as well. Schools are good, as are local amenities. “

“Local amenities, central to most things, transport. Close to motorway.”

“I have young children and I am happy with the schools and there are good GP services. Also I like the ICC, but there is a long wait to be seen at the A&E.”

“Police station good. PCSOs sorted out anti-social behaviour.”

### **GOOD SHOPPING FACILITIES**

“ASDA, Home Bargains.”

“Shopping centre not bad. Home bargains. Convenient location-wise.”

“Good for shopping close to schools, bus, more parks needed in Chadderton.”

“Tend to come for food shopping”

**NEGATIVE**

“Not a good area- but it is safe and I can walk down the street.”

“Nothing”

“Not a lot, hoping to move.”

“I used to like living in Chadderton, but it’s not like it used to be. Now I live near an Asian area & the houses are losing their value.”

“Don’t enjoy my estate & recent changes i.e. new schools being in addition to the four already in the area.”

“Not really”

**5.1.2. What worries you about where you live?****TRANSPORT**

“I cannot catch a bus from where I live (Butler Green) to ASDA”

“Access can be a problem with child on bus.”

“The bus service is not regular, and at night it doesn’t seem to service every area.”

“Public transport is poor (disabled driver). The buses are not reliable.”

“Concreting over green belts in Chadderton, building works which don’t seem to be required for transport to Manchester. “

**SAFETY & CRIME**

“I don’t feel safe on the streets”

“Drugs are a big problem. Happens day and night.”

“Rising crime rate”

“Road safety. Speeding is a problem.”

"Crime, car crime, vandalism & theft, drugs." ( Lives in South Chadderton.)

"High crime rate, burglaries."

"Crime & ASB worries me but I don't experience it very often."

"Drug users on Middleton Road & crime."

"Crime and ASB"

"Crime, litter, ASB, unsociable behaviour"

"Dirty Littered streets. But it's safe as there are no gangs."

### **YOUNG PEOPLE/ANTI SOCIAL BEHAVIOUR**

"Teenagers drinking & antisocial behaviour"

"A lot of groups of youths can be intimidating, when it goes dark."

"Anti social behaviour, but alley gates have helped."

"Need more activities for young people - Coffee bars."

"No concerns. Feel safe. But, no employment for the young. Jobs are a major issue. No career prospects. Too many pointless courses."

"Unemployment is a big issue. There are socioeconomic problems. Education is poor, local schools are not up to standard. Concentrate more on social inclusion rather than teaching."

"Certain areas of Broadway can be intimidating, i.e. groups of kids."

"No concerns mixed community, so overall quite good. However, kids are a problem as they set fire to my back garden (arson). "

"Youths hanging around they are noisy and loud. Also there seems to be a lot a litter. "

"ASB and kids are a problem but on the whole not bad. "

"Kids causing trouble, dog fouling in communal areas and cars speeding."

**TRAFFIC AND ROADS**

“Increased traffic on Broadway. “

“Noisy – motorway, trucks. Schools – the grammar school was knocked down. Pot holes on Broadway.”

“State of the roads, potholes, arson attacks. Feel safe.”

**FACILITIES/CIVIC SPACES**

“Council not spending enough money on it. The new Health and Wellbeing Centre is half the size of what was there before.”

“The town centre could be larger.”

“Lost pride in the area, as there is no sense of community. “

**NO CONCERNS**

“No worries in particular “

“Nothing”

“Nothing.”

**OTHER**

“Parking on our street is a problem”

**5.1.3 What stops you keeping yourself or your family healthy & happy?****EXERCISE**

“There are lots of gyms and there used to be lots of Government schemes, such as free gym membership. Obesity is on the increase. Not enough exercise in schools.”

“As long as there are fitness facilities I should be OK.”

“I would like more women only swimming as I am a Muslim woman, it would enable me to go swimming more often.”

“Having a gym and the shopping facilities are a positive for the area as they are accessible. Also the sports centre seems to be good at keeping the youths off the street. “

“I go to the gym a lot, yoga (Total Fitness)”

“Smoking, drinking, not exercising.”

### **SPORTING AND OTHER FACILITIES**

“Plenty of parks.”

“There are enough facilities, but there is no table tennis.”

“Got swimming baths, ok.”

“Happy with facilities, although new library is not as good as the previous library as there are not as many books.”

“Nothing really, apart from road safety. Got all the facilities I need.”

“Happy with facilities. Old Library was nicer (Broadway library).”

“No, got all the facilities.”

“Got the Children’s Centre in Chadderton.”

“We have Chadderton sports centre, just short on time.”

“Lack of facilities, so the kids are out late and this is intimidating. The babies’ park is overrun with “rough people” they smoke and take drugs. There are no other play areas.”

“Pleased with the library & swimming baths etc. Opening gives a community focus. Getting cycle paths is a positive sign. There has been good work carried out by the council and I feel it is moving forward. “

“Lots of facilities parks. The council seems to have spent a lot of money.”

“More facilities for young people: sports club youth clubs that are accessible and affordable.”

“We need more facilities to do things with our grandchildren or just for them.”

“I don’t think the after school facilities are good enough.”

“ASDA is good.”

**FOOD**

“McDonalds?”

**ENVIRONMENTAL CLEANLINESS**

“Could be cleaner, streets have been cleaned better in past.”

“Noise pollution, air pollution. Wood fires – burning. Barbeques.”

“Traffic & pollution worry me. “

**OTHER**

“Council converted my house to suit my needs so I have no complaints.”

**POSITIVES**

“Nothing stops me from being healthy, there are good bus links.”

“No.”

“No.”

“Find it OK.”

“Nothing.”

“Nothing, I have what I need.”

“Nothing.”

#### 5.1.4 What [potential] health problems worry you?

##### **CLEANLINESS & POLLUTION**

“The streets should be tidier & cancer is a big worry to me.”

“Kidney transplant. Also worried about air pollution.”

“Risk of asbestos in old buildings that young children may get into.”

“Sewerage works smell.”

“My son is asthmatic, pollution is worry.”

“Asthma”

##### **SMOKING & ALCOHOL RELATED ISSUES**

“No health concerns, apart from I smoke too much and drink too much.”

##### **ACTIVITIES**

“Sedentary children. More local free activities. Nothing at weekend that gets kids active.”

##### **G.P.s**

“Can’t get in doctors, can wait up to 3 weeks for appointment (Fields New Road surgery).”

“I have no faith in my GP. Go private Eves Lane (Alexandra Hospital for diagnosis with poor circulation- condition).”

##### **SOCIAL CARE**

“My mum has Dementia, pleased with the care she has received, but I am worried about the funding.”

“Who will look after us when we are older and whether our house will be taken off us to pay for it.”

**NO CONCERNS**

“I have no health concerns.”

“No health concerns.”

“Nothing.”

“Nothing.”

“No health concerns, OK for doctors appointments.”

“Nothing.”

“No health concerns, but I am overworked (works for Pennine Acute).”

“Nothing.”

“Nothing”

“Nothing”

“No”

“No”

“Nothing.”

“Nothing.”

**5.1.5 What do you feel you can do to help your community?**

**STREET CLEANLINESS**

“Sweep front of house of cigarette buds, leaves and litter. Not every day. I vac every day.”

“I pick up bottles in the street to recycle them.”

“Help clean it up a bit.”

### **ASPIRATIONAL ACTIVITIES**

“More events for kids. There are only events for very young kids, my kids are too old for the activities that are on. There are no activities for kids between ages between 9 and 12, only for 5 to 11. Need more appropriate activities for pre-teens. Not really aware of how to help. More awareness needed.”

“Could contribute to leisure facility/park.”

“Open up youth centres. Closed The Rock, stopped swimming concessions. Bring back kids funding.”

### **EXISTING ACTIVITY**

“I volunteer with Diabetes Foundation, for tackling the disease in Asian women. “

“Currently I don’t do any voluntary work but has done in the past and think it plays a vital role.”

“Finished work and volunteers with Age Concern. Could do with more voluntary opportunities in Oldham & running more courses in the day etc. I am pleased with the volunteer centre in Oldham. “

“I support local charities e.g. hospice. Health issues stop me from being fully involved.”

### **UNABLE TO VOLUNTEER/DO NOT WISH TO VOLUNTEER**

“Not really, no time.”

“It’s all money.”

“Not really, difficult because I work shifts.”

“Organisation. Need more free time.”

“Kids & other responsibilities keep me busy. But I would like to do some volunteering in the future. “

“Wouldn’t like to get involved but would like to see his estate happy.”

“I have been put off getting involved (no reason given as to why).”

“No, too busy. Would be good to get bowling /cinema back.”

“I am opposed to this as I spend most of the time caring for my Husband.”

“After 5pm public transport finishes in my area so cannot get around at night.”

“Don’t know”  
“Do enough with my job.”  
“No much, I’ve been in jail here so I don’t feel too obliged.”

## 5.2 Phase 2 Finding: Burnley Brow Coffee Morning

### 5.2.1 What is good about where you live?

#### **ENVIRONMENT**

“Graffiti removed from the back of [my] house”  
“Potholes have been covered.”

#### **COMMUNITY SAFETY**

“Alley gates have been fitted. But want them on Osborne Street.”

#### **PARKS & FACILITIES**

“The parks are good, but travel further to Alexandra Park.”  
“Access to Beresford park is good, although the park was done up but got vandalised”  
“Swimming pool and the Library”  
“Mosque nearby shops and schools is positive”

**YOUTH ACTIVITIES**

“There are activities for older kids on Fridays now.”

**LESIURE**

“Retail park for eating out, although have to go out of Oldham in order to go to the cinema or to use the retail park.”

**5.2.2. What worries you about where you live?****MAINTAINING COMMUNITY LANGUAGES**

“Community classes for Bangla are needed for children. This has been done voluntarily in other areas by local residents. OMBC Neighbourhood Manager could facilitate the sharing of experiences with other groups that have done it.”

**PERSONAL/COMMUNITY SAFETY**

“Very fearful of Maygate subway. Would like to have CCTV installed in it.”

“Burnley Lane is very busy and has no pelican crossing. Traffic on Prospect Road.”

“Not enough Lollypop Ladies. The response is that they are all volunteers and that if people want more they should volunteer themselves.”

“Garforth Street – parked cars on street. Too many parked cars.”

## **ENVIRONMENT**

“Not clean – Rubbish on street.”

“Any parks available for little ones? Nowhere to go.”

## **CRIME**

“Scrap metal is being stolen from people’s back yards. Happened to lots of people. Suggestion – get the registration plates of the perpetrators’ vehicles [and submit to the police].”

“Burglaries.”

“Fear of crime (afraid of house burglary). Different to house burglary – 25% victims.”

“Also drug dealing in alleyways and throwing eggs on alleyways.”

## **YOUNG PEOPLE**

“Not many children’s clubs. Need for children and family – after school.”

“Young people drinking and smoking behind alleyways. Where are they getting it from? Problem with underage sales in local shops.”

### **5.2.3 What stops you keeping yourself or your family healthy & happy?**

“No nice destination to walk to.”

“ Organised walks are needed to nice green open spaces”

“Stray dogs prevent me from going walking where I live – I am afraid of them”

“Not enough women only exercise classes – any locally? (And for kids).”

“Woman’s only swim but 7pm not suitable for mums. Mornings would be after kids have been dropped off at school. (9:30am – 12:00pm). “

#### **5.1.4 What [potential] health problems worry you?**

“Weight. Stop from being at home. Isolated at home. Need activities with children and for teenagers so they have something to do. OMBC looking at girl only youth club activities. Would this work? Or would family activities be better to get young girls in.”

“Not enough play activities for kids at weekends. Leisure activities cost a lot. And keep fit.”

#### **5.2.5 What do you feel you can do to help your community?**

“Support needed about how to go about this, especially for after school activities.”

## 5.3 Phase 2 Findings: Forum 4 Age Members

### 5.3.1 What worries you about where you live?

“Nothing, broken into about 15 years ago, but nice and quiet and feels safe”

“not much anti-social behaviour or anything like that”

No, nothing particular, a few burglaries (e.g. next door but one). Makes sure everything is secure. Pretty decent, neighbours change, but everyone friendly – been there 30+ years – new neighbours have come but speak to each other and pass the time of day”

“No worries or concerns, quite nice, neighbours help with bin. Quiet area. Alleygates at the back, but lock not working and didn’t know who to contact. Overgrown with nettles. “

“No worries, not really.” [Having trouble with home repairs so information provided about info & advice service.]

“No problems where I live although the roads are pretty bad.”

“Longstanding issue about alleyways at the back – is unadopted so council will not provide alleygates.”

“Youths making a noise on the corner but this was a while ago – the police tackled it when a neighbour called and nothing has happened since.”

“On Mugh Lane at the corner of Mugh Lane and Broadway an apartment complex was built a few years ago – there was a bus shelter near the first house which was taken down while this was being built. Told the councillors about this at the time and was told not to worry it would be reinstated once the apartments were built. After completion nothing happened – never got anywhere with the councillors and there is still no bus shelter. With the bad weather it’s not very good having to stand out in the open and get wet through. Also problems with grass cutting - Housing 21

property.”

### 5.3.2 What stops you keeping yourself or your family healthy & happy?

“Nothing, I just get on with it, osteoporosis limits a little bit, if doing gardening can’t do as much as would like due to back pain with the osteoporosis.”

“No, I manage all right. I stopped smoking...not had a cigarette for about 2 years – I went to a couple of smoking cessation classes at GP surgery to get some support and found it helpful.”

“I live in a Housing 21 property – I can participate in activities if I want to. I don’t have much time to do too much though as I also look after my three-year old granddaughter, which has given me a new lease of life.”

“I appreciate life and take each day as it comes, appreciating life. Pleasures are things like just reading a good book or having a good cup of tea. My hobby is gardening and I enjoy keeping garden tidy.”

“Very convenient where I live to walk 10 mins to Asda and get buses. Does all of travel on bus. Buses less frequent than used to be but convenient as takes straight to door. Lot of people rely on the bus, particularly in later life. **Nicer to have a more frequent service** – “circle it in red!!” Forum4Age is great, glad to be touch with it.”

“Limited by illness but I can do most things. I have a stick, stairlift, rails and shower chair. I have to take advantage of special offer theatre tickets so I can afford to go with my carer.”

“Looking after my sister for two years and having caring responsibilities prevents me from having time to myself. Now my sister is in sheltered accommodation so I’m hoping to get back into activities and go back to Forum4Age meetings. Capable physically of going out and doing what I wants.”

“Cost of classes – used to go to an art class when there used to be a concession for older people, then the price went up from £25 per term to £50 – stopped going because of that.”

“I lead a craft group as a community group at Turf Lane Centre – this is cheaper as can join centre and pay tutor - £23 fee to join – 11 people in group – embroidery and card making are the activities.”

“Involved in local church. Still runs a car and is pretty mobile.”

“Lots of support from son and daughter – not very mobile and doesn’t like to leave the house.”

“Can’t do heavy shopping – family helps her – can’t walk round the aisles very easily.”

“Can’t walk much – gets taxis – can’t take public transport.”

“Restricted due to vision – was partially sighted now registered blind. Has Macular disease with only vision round the perimeter.”

“Try to do as much as I can myself, have to do living alone. Very fortunate to have bus services – wouldn’t get out if couldn’t get the bus due to worries about crossing the roads.”

“Don’t go out at night and don’t go out in the day unless have sorted out crossing the roads.”

“Would like to go to anything to do with music.”

“Have magnifiers to help at home. GP accessible by bus. “

### 5.3.3 What [potential] health problems worry you?

“Osteoporosis”

“Not long out of hospital with a partially collapsed lung, not sure why this happened.”

“Psoriasis – controlled – happy with health service treatment at north Manchester and Salford. “

“Very bad arthritis – sleeps downstairs, has a lot of pain. Trying out new diet to control arthritis. Chronic bronchitis and emphysema but gave up smoking 5-6 yrs ago.”

“Arthritis – quite worried about it – seen doctor about it - affecting ankle – no use worrying about the future though!”

“Health not too bad – has cataract and will need a cataract operation and they’re talking about not doing those any more [information given about eye care and approaching GP re cataract operation]. Would seriously affect quality of life if couldn’t drive or do craft work.”

“Concerned about the closing of care homes for older people and intermediate care units. Current round of government and council cutbacks is very worrying.”

“Not very mobile”

“Use walking stick due to arthritis.”

“Doesn’t want to be in a wheelchair, but is being referred for one. Good GP surgery, but needs to get a taxi to the surgery even though it’s only a 5-minute walk.”

“No worries about that.”

“Health issue has come up - can’t use scissors to cut nails due to visual impairment – wants to comment on Eaves Lane Clinic podiatry system – “the way to get there seems not right now” – you have a card and send a stamped addressed envelope to them and on the card the clinic fills in the date you can come and the time and they send it back to you – this is all right but if anything goes wrong and can’t attend you can’t ring to let them know. There seems to be a longer and longer wait for an appointment and it gets more and more likely that something could crop up in the meantime or you go into hospital or just don’t feel very well and need to cancel or rearrange.”

## 6.0 Summary of Findings and Key Reflections

- 6.1 Overwhelmingly, Chadderton was reported as being a particularly friendly and welcoming place with a good community spirit. Whilst this was not disputed by the participants of the Burnley Brow Coffee Morning session, they did not themselves report this in the same way as participants of the Video-Diary Room and Forum 4 Age consultation elements. There were rather some fears around personal and community safety more heavily reported by the Burnley Brow group.
- 6.2 Some particular exceptions relating to two apparent 'hot-spot' areas concerned Limeside and Coalshaw Green Park, where youth anti-social and in fact criminal behaviour was reported.
- 6.3 There did however appear to be anecdotal evidence that where there is a good police presence and good relationships exist with the force, either with its officers or community support officers, residents feel safe and confident in approaching the police when there are problems, which were reported as being resolved in these instances. This was particularly notable by the Project Team and related directly to reports of being satisfied with where they live.
- 6.4 Young people and anti-social behaviour were consistently reported within each element of the information gathering phase. In the majority of cases, people attributed this to be due to a lack of appropriate and/or structured activities



for children and young people. Addressing this should be seen as a key recommendation and obvious priority based on the findings of this work.

6.5 There also appeared to be a greater need for signposting to appropriate social care services. A number of participants explained difficulties in relation to this service area; particularly with regard to the (lack of) co-ordination of services and around assessments of need. Quite often, people were not aware of what support was available to them and where to access it.

6.6 There were some culturally and religiously specific issues reported within the Video Diary-Room and Burnley Brow Coffee Morning consultation elements. Access to more frequent women-only swimming should be addressed if Muslim women are to be supported to use the local facility at the Chadderton Wellbeing Centre and encourage this form of exercise. Whilst there are women-only swim sessions at the Centre, the evening slot at 7pm does not enable women with children to access them due to family commitments and responsibilities outside of



school hours. Having women only swims just after the start of school for their children – i.e. at 9.30am, would mean that they would be able to go swimming whilst they had some time free of childcare responsibilities.

6.7 On the whole, people were particularly satisfied with the local parks and facilities, as well as with the shopping facilities in Chadderton. Exceptions to this however are highlighted and explored further in the accompanying DVD.

6.8 The central location of Chadderton and the good transport links to Manchester Oldham Town Centre and Bury for example appeared to significantly affect the wellbeing of its residents. People reported that work and leisure



opportunities were available to them because of their ability to travel easily around the Greater Manchester conurbation. This is a marked difference to the same exercise conducted in another of Oldham's Districts where poor transport links could be directly attributed to lower levels of wellbeing because people were not easily able to travel to cinemas or sporting facilities for example. The isolation within the district appeared to cause issues for youth activities resultant anti social behaviour fear of crime and underage drinking. This comparison therefore highlights a very important positive attribute of

Chadderton, where the difference was really quite striking.

6.9 Where there were difficulties reported, some residents were prepared to take local, community-based action although did not know how to go about this. Communities would need formalised support to develop in this way and is a clear issue for the District Partnership to consider in its forward plans.

6.10 It is however worth noting that these people were in the minority, with the majority of people either not feeling able to or not wishing to take action themselves, explaining that it would be too much of a burden in relation to the

commitments of their everyday lives. Further, people often felt a need for intervention from services where there were problematic issues.

6.11 What is most striking about the findings of this research is how the things most important to people's health and wellbeing go much beyond the pathological presentations of ill health and concern more the environmental and social circumstances that surround them. A recent review by Marmot (2010) highlights the importance of the wider determinants of health as being most important to the population's health. Public health information also tells us that of its three domains of Health Improvement; Health Protection; and Health Services, it is the latter that actually has the least impact on health too.

6.12 From this point of view, we can see the importance of how local people in this instance have identified their health and wellbeing needs and it is encouraging that these findings are supported. This has particular resonance with the approach of public health at this time, as the recent Public Health White Paper (DofH, 2010) emphasises Marmot's assertions, as well as the Health and Social Care Bill (DofH, 2011) that calls for a greater co-ordination of the organisations and services that have a part to play in health and wellbeing, much beyond those of just health and social care which have been traditionally considered.

6.13 The actions identified here may require a broader approach from the Council and its partners to address these issues and cannot be considered in isolation by the District Partnership alone. It could be for the District Partnership however to outline the issues raised here and to instigate and/or lead appropriate partnership responses.



## **7.0 Limitations of Study**

- 7.1 This study was conducted only with a relatively small sample of the population within the District and as such cannot claim to account for a completely representative view of its population. This was however not intended to be a robust empirical study, but more so to provide qualitative information to support and compliment existing and emerging public health data.
- 7.2 Whilst the sample at Phase 2 comprised young people, the involvement of this age group may require further work in order to provide a balanced view of some of the issues raised and recommendations made regarding young people. Again, the proportion of involvement by this age group could not claim to be adequately representative of young people.
- 7.3 It is recognised that the District Partnership will receive this report during a particularly unstable financial climate and that the Local Authority as a whole, as well as other partners, are particularly limited by the financial and human resources available to execute these suggestions. Some of the information here therefore is aspirational, although its importance in terms of the local identification and definition of health and wellbeing needs should be acknowledged.

## 8.0 Recommendations

- 8.1 This report should be considered alongside the information contained within the accompanying DVD, with the key summary of findings and the key reflections accounted for.
- 8.2 The information collected here should be understood as a qualitative identification and definition of local health and wellbeing need and its importance acknowledged.
- 8.3 This information supplements public health intelligence and should be considered alongside it.
- 8.4 A further action planning process should be repeated with young people, if their priorities in terms of actions can be captured.
- 8.5 A number of the participants expressed a clear wish to stay involved in the process and to be kept updated of progress. It is recommended therefore that the District Partnership clearly communicates the outcome of the participants' involvement.
- 8.6 The information contained here should be communicated by the District Partnership to the emerging Health and Wellbeing Board, fed into the Joint Strategic Needs Assessment and could be used as a means to instigate partnership responses to the issues highlighted.

## 9.0 References

Department of Health (2011). Health & Social Care Bill. TSO: London.

Department of Health (2010). Healthy Lives, Healthy People: Our strategy for public health in England. TSO: London.

Marmot, M. (2010). Fair Society, Healthy Lives: Strategic Review of Health Inequalities in England post 2010.  
[www.marmotreview.org](http://www.marmotreview.org)

## Appendix

### Background & Project Brief

1. The PCT lacks the capacity to undertake the engagement but it is able to manage the work and draw up the final report.
2. The PCT, in consultation with the District Partnership, will engage a third party to do the 'spade work'.
3. The engagement will take place at ward level to ensure any different views between wards are picked out.
4. Councillors will be very much encouraged to become involved and, where possible, front engagement activities.
5. The information being collected will be mainly qualitative in nature – it will be focussed on capturing views on “what are the most pressing health and wellbeing issues in this ward?” and “how can the District Partnership and the individual statutory and voluntary sector organisations begin to address these issues?”
6. Methodologies could include a mix of health-themed public meetings, attending existing community meetings and events (including PACTs, luncheon clubs etc.) and surveys including the use of online response mechanisms. There would be a minimum of one activity in each ward and ideally two or more.
7. At the end of the work, the PCT (Mark Drury) will work with the third party to distil the feedback into themes and draw up recommendations for the 2011-12 District Plan and the individual partners.
8. NB This is not intended as a robust research project with specified sample sizes, scientific methodologies etc. It is intended as a vox pops exercise which could be followed up by more detailed research at a later date.

**This report was prepared by Gaddum Centre, the Host Support Organisation for Oldham LINK**



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