

Women's health hubs survey responses

July 2024



Background and context

The survey was codesigned by those with lived experience of using women's health services in Dorset and by the NHS Dorset communications and engagement team, to capture the views of individuals in Dorset and how they felt in accessing the services.

The survey was sent out on 16.05.2024 and was open for 34 days. In this time 978 individuals from Dorset responded with their views on the women's health hubs. This survey provides insights to support and influence the work planned in Dorset and be used to evaluate outcomes.

This short report explores the findings of the responses of the surveys, and will inform future works.

Key findings for review

- Menopause was identified as a key area needing more information throughout the survey.
- Inclusivity appears to be a topic of contention. Individuals reported strongly on ensuring women were able to access the hub, regardless of disability, age, digital literacy, or socio-economic background, however there were opposing views on whether the women's health hub should be accessed by transgender individuals.
- Working with and understanding existing services, outside of primary care, was mentioned across the survey. Several respondents suggested the hub creates a directory of existing women's health services.
- Responses showed a general feeling of difficulty in accessing existing NHS services. A secondary theme showed that respondents who were able to access NHS services often felt not listened to, or even dismissed, by the individual they spoke with.
- Responses showed an appetite to learning more about women's health issues, and knowing where to find relevant, understandable, evidence-based information. Throughout the survey, this theme was linked to myth-busting, raising general awareness, and supporting body positivity & self-care.

Question format

- Q1 asked for suggestions and ideas and has been left in a readable format which summarises the richness of content
- Q2, Q3, Q4 & Q8 asked for responses which fit into one category or another and have been presented as graphs to compare the responses
- Q5-7 asked for suggestions which were thematically analysed to be presented in graphs as common themes emerged
- Question 2 and Question 4 have been placed together in this slide deck for ease of comparison between individuals' confidence levels and feelings towards accessing women's health services.

Q1 We are developing an online resource/website to be a central point of reference for all information, education, awareness, self-help, and service provision concerning women's health for the women of Dorset.

Is there anything else you feel that the online resource should include?

264 of 978 individuals responded to this question

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Key themes in Q1

- Information and education
- Community and support
- Access to care
- Inclusivity
- Accessibility
- Additional themes

Q1 Key themes

Information and Education:

- Comprehensive and accurate health information: This should cover all stages of a woman's life, and common physical issues affecting women.
 - Named stages and issues included menopause, menstruation, accessing free period products, pregnancy, sexual health, gynaecological cancers, PCOS, and endometriosis.
- Mental health: Considering the impact of hormones and life events on mental wellbeing.
- Body positivity and self-care: The hub should promote healthy lifestyle choices and habits, and a positive body image. This should include information on nutrition, exercise and alcohol consumption.
- Myth busting: Provide accurate information to dispel common misconceptions about women's health.
- Employment support: The hub should provide information on the impact of ill health on employment and what employment support should look like. Respondents wanted to know more about what their employers should be doing for them especially whilst menopausal.
- Educating partners: Comments related to the hub providing information and empathy training for men/partners/fathers/friends to support women/partners/daughters/friends

Q1 Key themes

Community and Support:

- Safe space for discussion: A forum or chat room where women can share experiences and support each other.
- Support groups: Connecting women with others facing similar challenges. This could expand to include regular social gatherings. (i.e. walking groups, knitting groups, meeting for hot drinks)
- Sharing personal stories: This can help to normalise experiences and reduce feelings of isolation.
- Advocacy: Equipping women with the tools to advocate for themselves and their health needs. The hub should consider ways of supporting women going through domestic abuse and those who are in refuges.

Access to Care:

- Signposting to relevant services and resources: Knowing which services are open at what times, and what to expect for waiting lists. Respondents wanted to know which service is best for which condition. A directory was mentioned by several respondents.
- Information on navigating the healthcare system: How to find the right doctor, clinician or specialist, understand treatment options, and advocate for yourself. In addition to a directory, individuals wanted help to navigate the nuances of healthcare, such as knowing when to ask for a second opinion or having the confidence to ask for a different clinician.

Inclusivity:

- While there appears to be some disagreement in responses, a core theme is catering to the needs of biological women.
- The language used should be inclusive, respectful, and include reference to protected characteristics / the Equality act 2010.
- There is some suggestion to include resources for transgender individuals, for both biological women transitioning to men and for biological men transitioning to women.

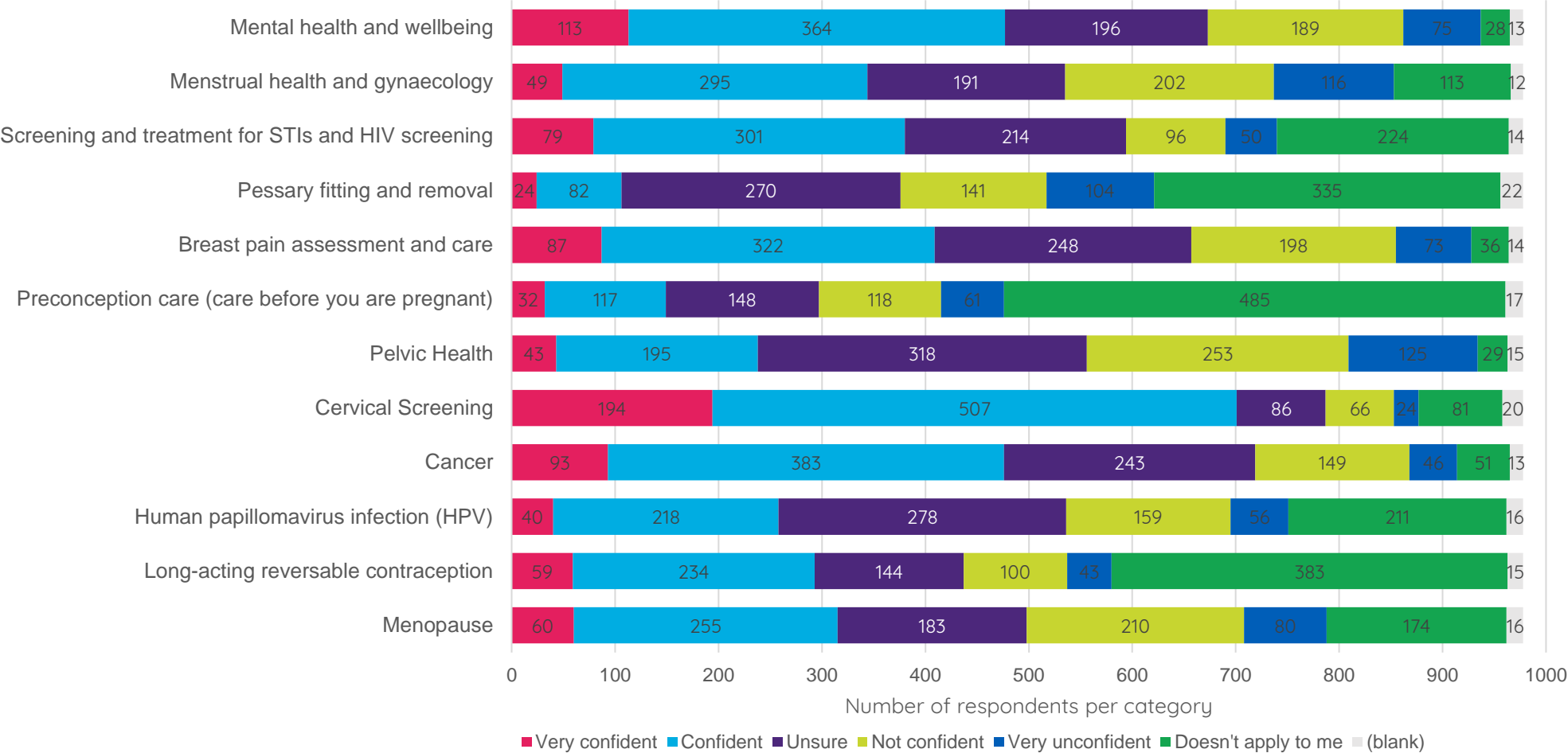
Accessibility:

- The hub should be accessible to women, regardless of age, disability, digital literacy or socio-economic background.
- The hub should be accessible for those who are deaf and partially sighted.
- A physical women's health hub: This suggestion was largely coupled with comments on digital literacy. Could the women's health hub consider a physical drop-in service, or phone line, for those less confident using the internet.

Additional Themes:

- Iteration: Once the hub has been developed, the respondents wanted to contribute to making it better in future iterations.
- Nothing else to add (38 responses) – agreed that the outlined scope was comprehensive

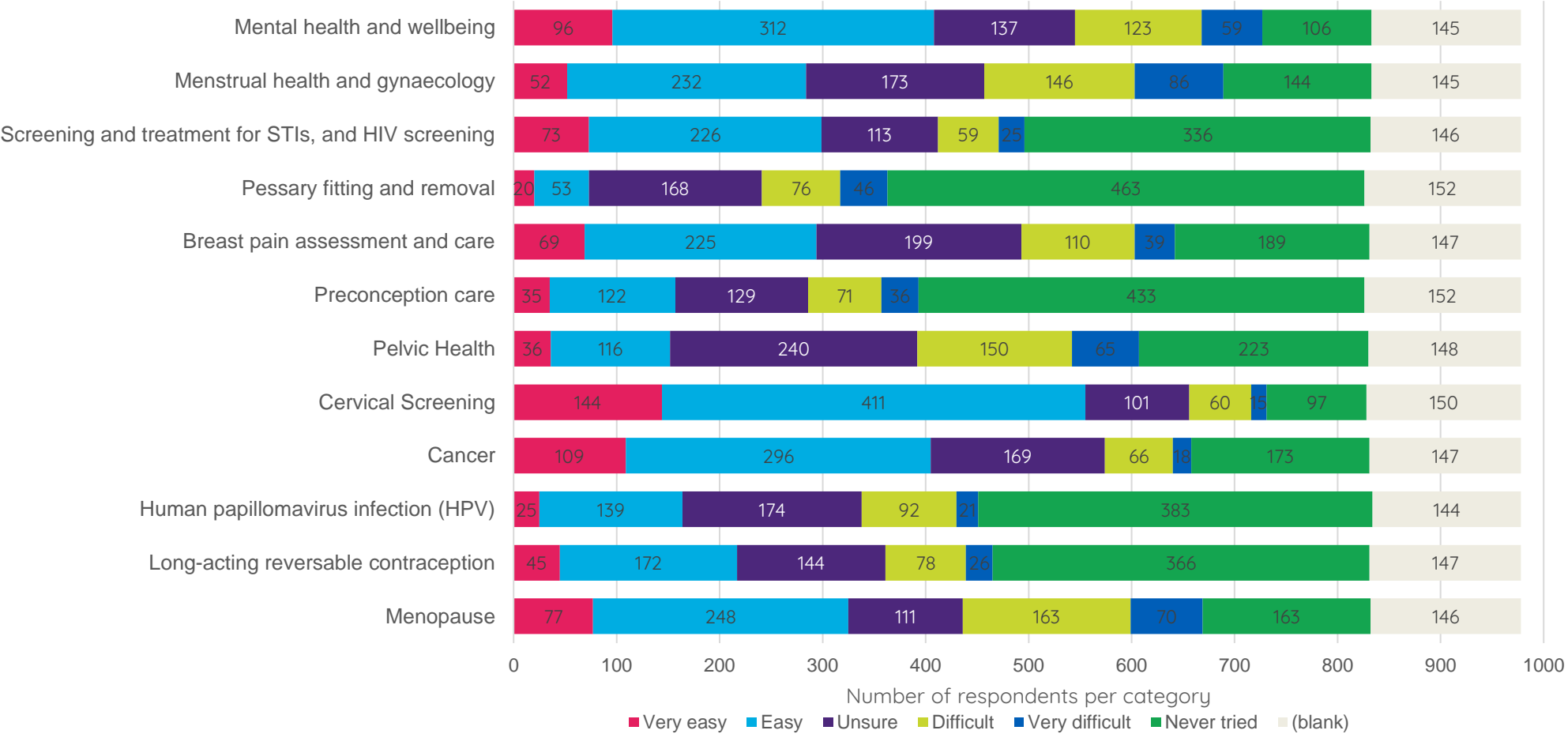
Q2) Based on the priorities within the national women’s health strategy, please indicate how **confident** you are of finding support within each of these areas below.



Overall mixed confidence levels in finding support for women’s health needs. Cervical screening had the greatest levels of confidence whilst pelvic health had the highest levels of non-confidence.



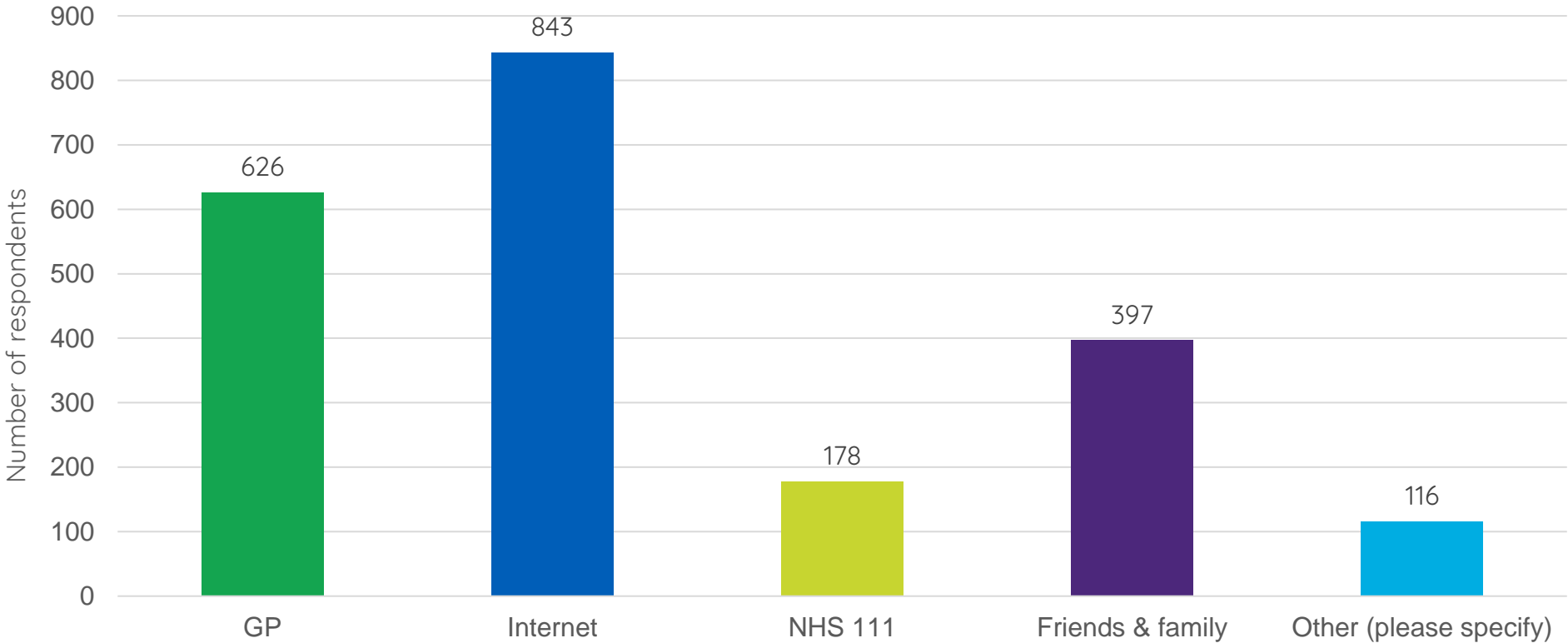
Q4) How easy do you **feel** it is to find out information about each of the following service areas?



Overall mixed feelings on finding information for women’s health services. Cervical screening had the greatest levels of ease whilst menopause had the lowest levels of ease in finding information about the service.



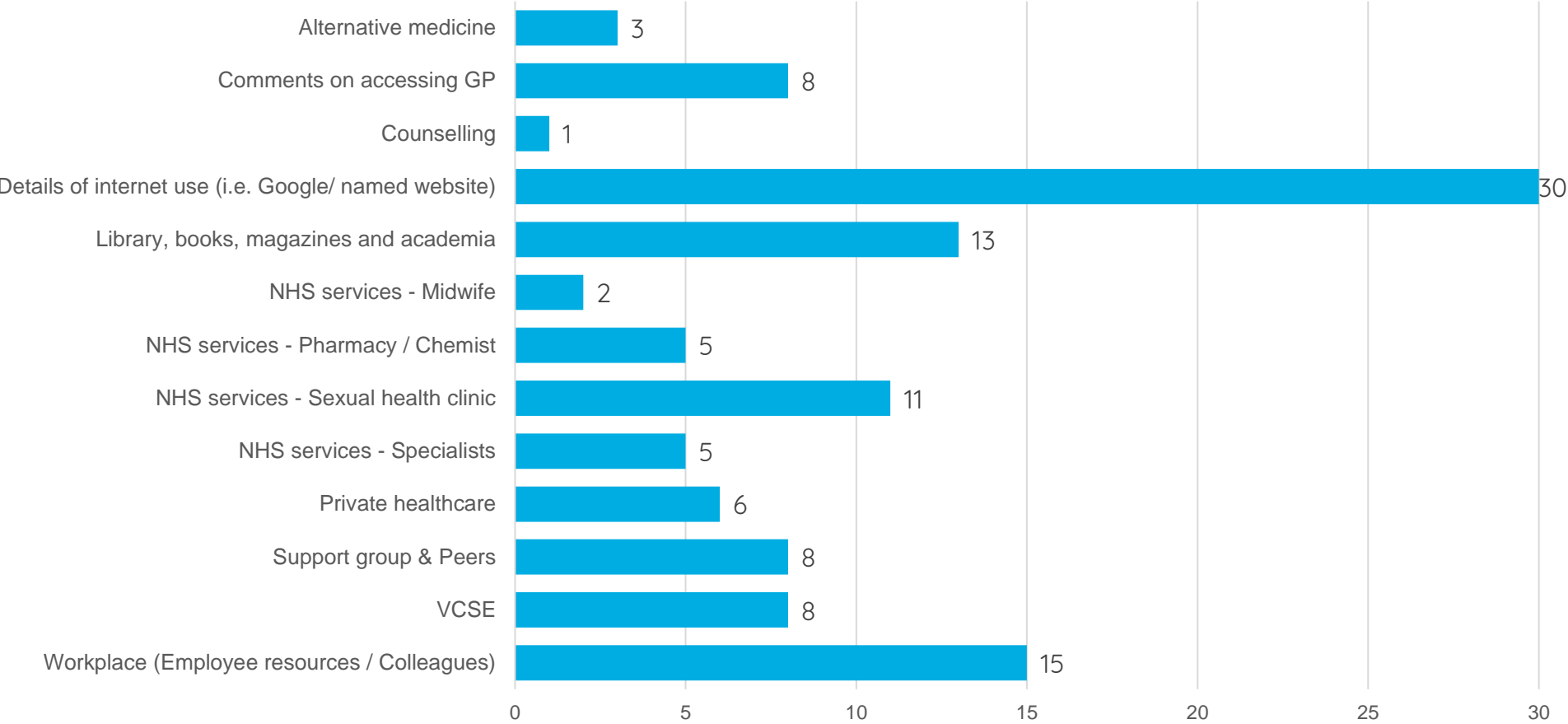
Q3) Where would you go or look for information about Women's health or Women's health services?



Of the options to select, respondents mostly used the internet and used NHS 111 the least to find information on women’s health and services. The option ‘Other’ has been further categorised on the next slide.



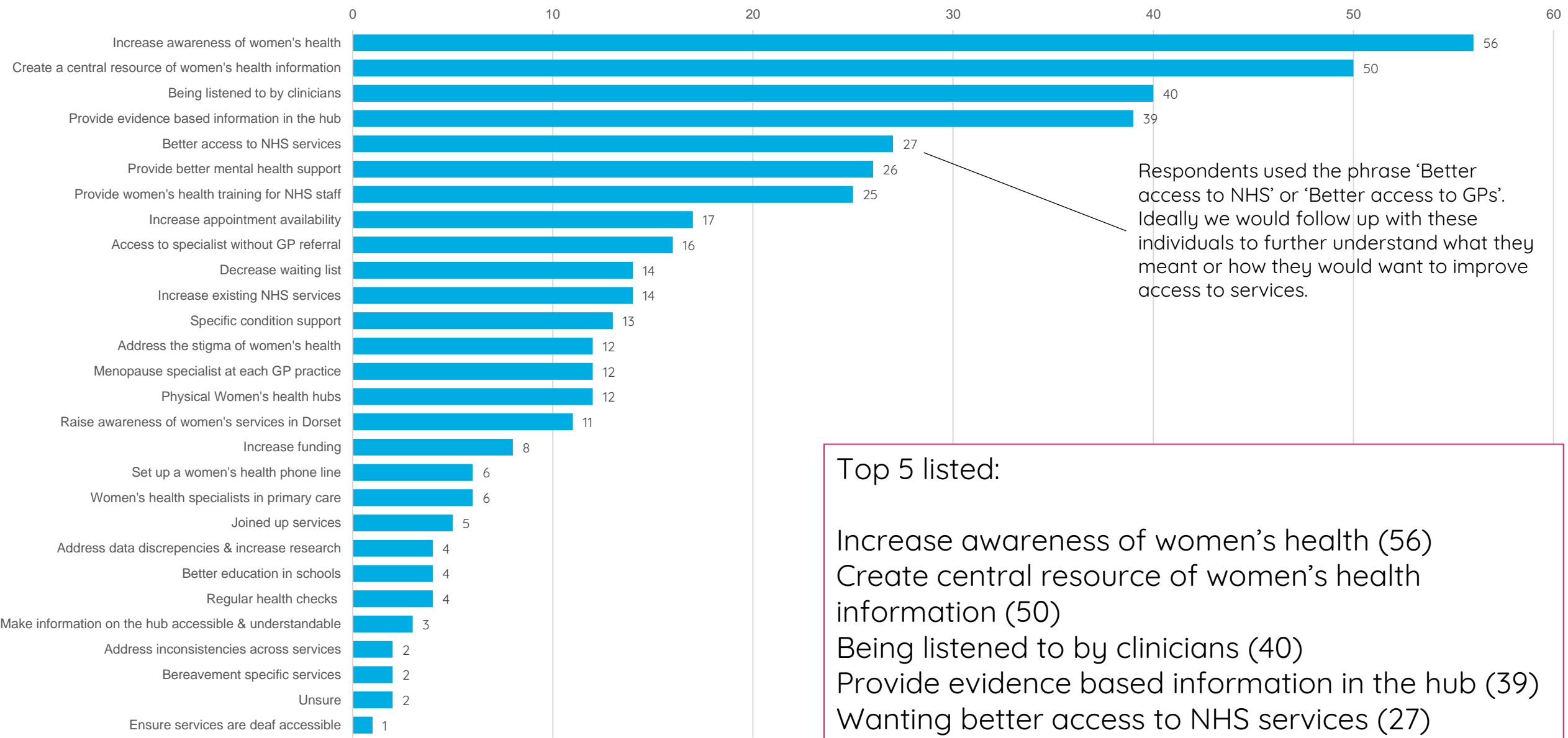
Q3) Where would you go or look for information about Women's health or Women's health services? 'Other'



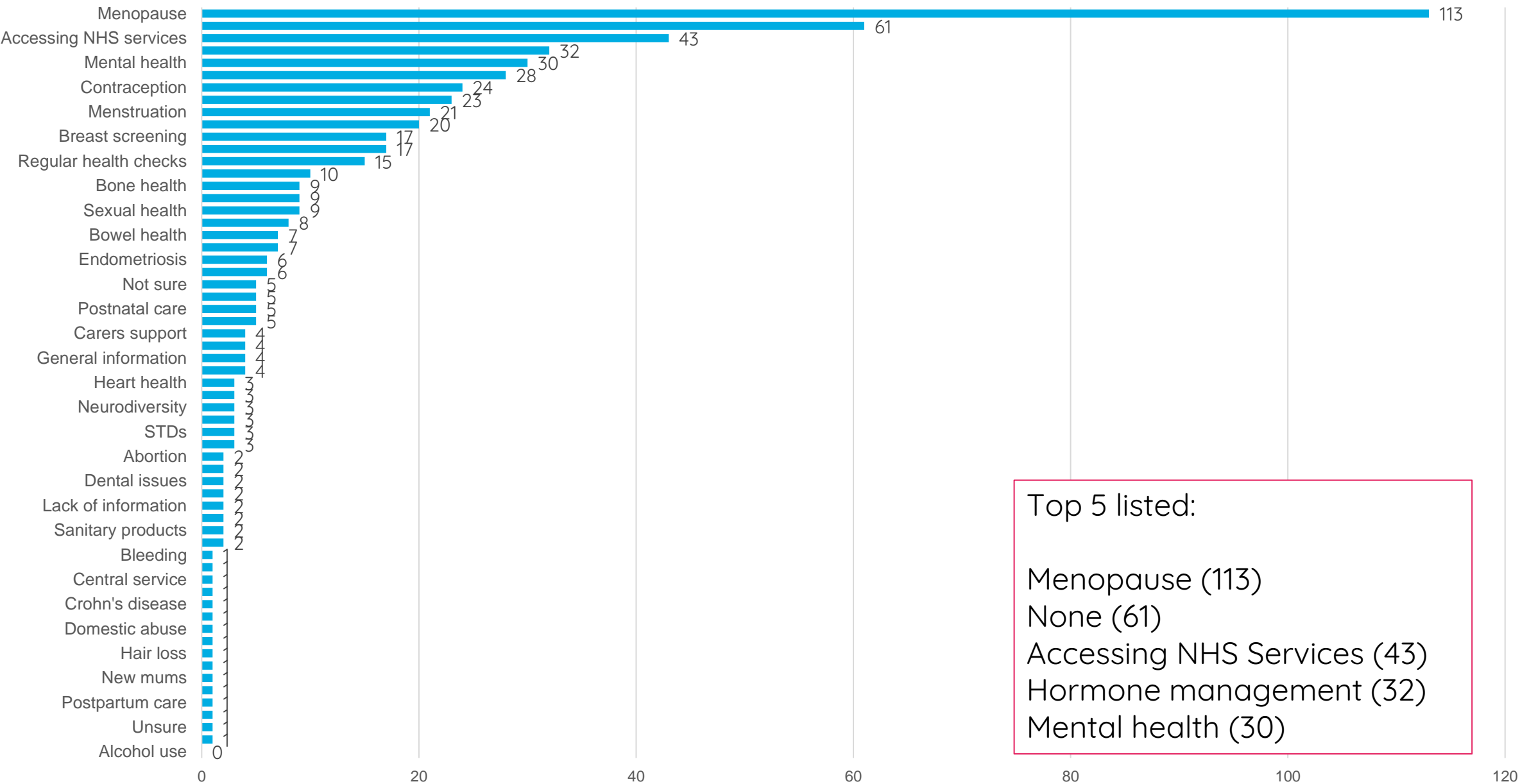
Most responses for this question went on to detail how they used the internet i.e. Google/ named websites. The second most common theme was in speaking with colleagues or accessing resources made available by employers.



Q5) If any of these services mentioned in question 5 were not easy to access, do you have any suggestions for improvement? (358 responses)



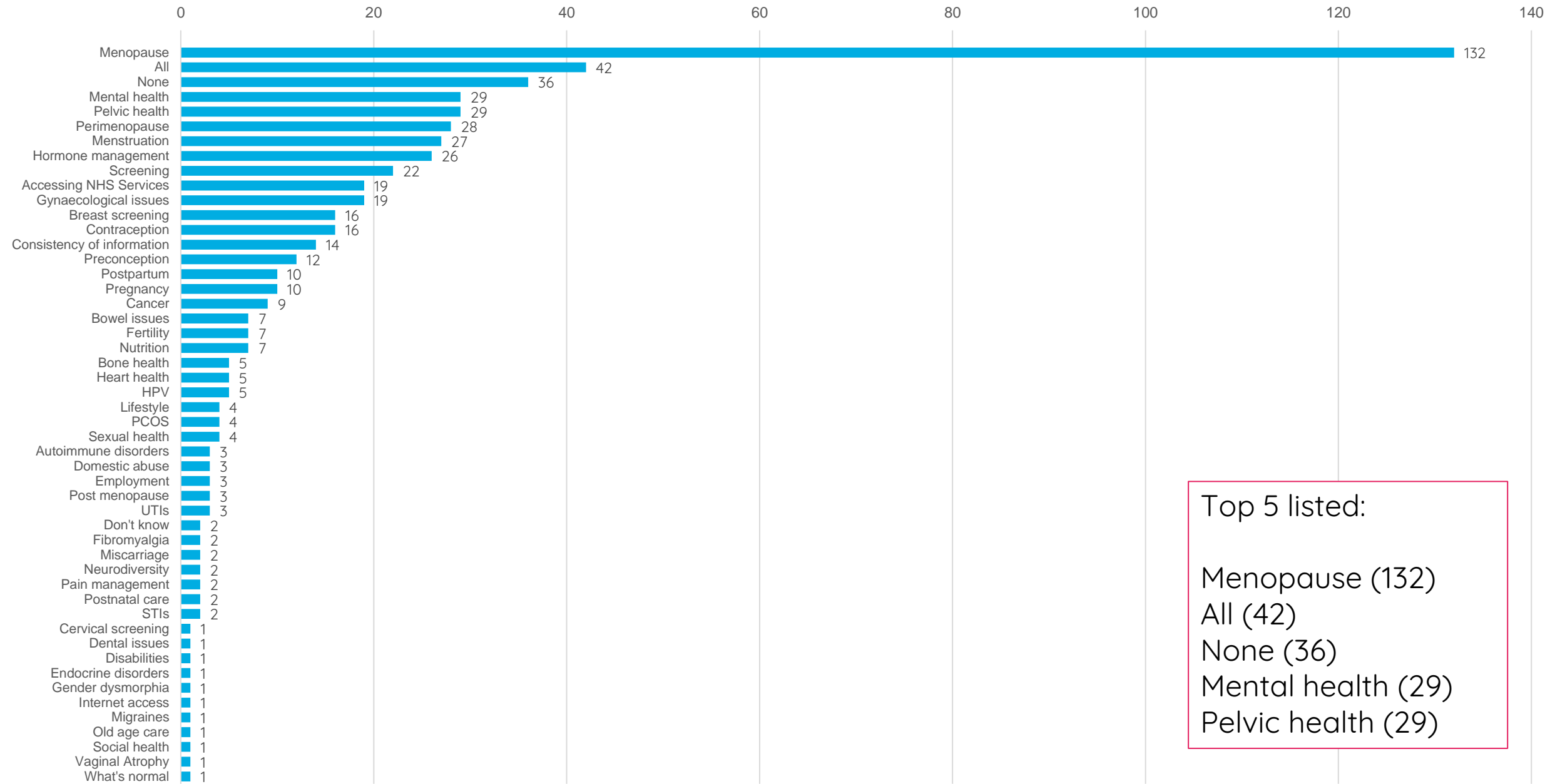
Q6) Are there any services in women's health that you need and don't get? (417 responses)



Top 5 listed:

Menopause (113)
None (61)
Accessing NHS Services (43)
Hormone management (32)
Mental health (30)

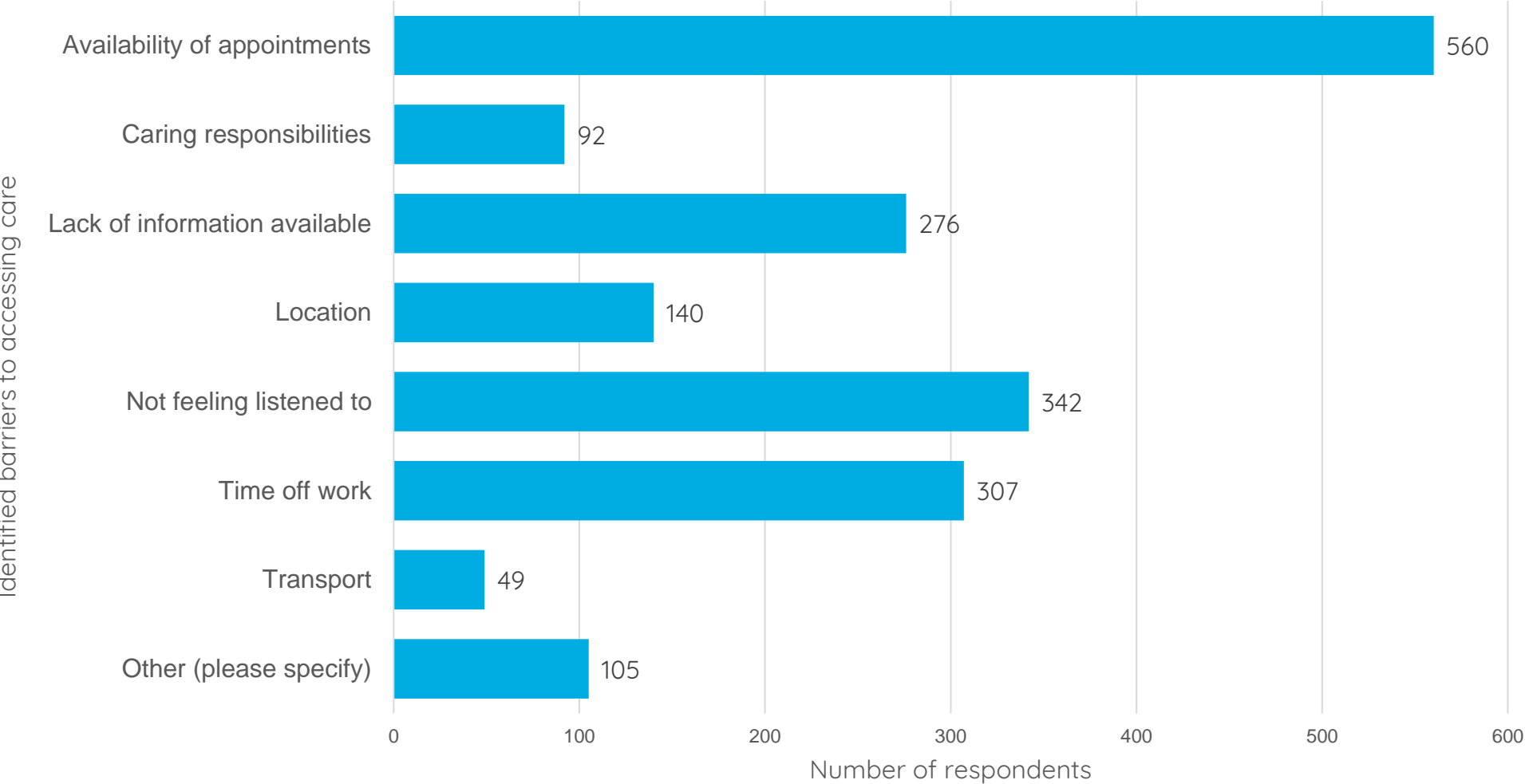
Q7) Are there any services in women's health where you feel there is a lack of information available? (404 responses)



Top 5 listed:

Menopause (132)
All (42)
None (36)
Mental health (29)
Pelvic health (29)

Q8) What makes it more difficult for you to access the care you need?



Availability of appointments was the most selected option, second most selected option was not feeling listened to. Transport to appointments was the least selected option.



Q8) What makes it more difficult for you to access the care you need? (Other)

Access:

- Appointment availability (phone-based booking, difficulty getting appointments, wanting appointments outside of 9-5 hours)
- Inability to access services due to disability
- Location of services (distance, travel time)
- Parking availability

Communication:

- Feeling unheard or dismissed by healthcare professionals
- Lack of clear information about services, which can lead to lack of trust
- Discomfort and embarrassment discussing women's health issues

Knowledge and Expertise:

- Concerns with GPs knowledge about women's health issues
- Difficulty finding healthcare professionals who understand specific needs (e.g. menopause)

System Issues:

- Long waiting lists and times
- Short appointment times with GPs
- Feeling pressured not to waste NHS time
- Referral difficulties
- Not always able to see female clinicians

Other:

- Cost (of using private healthcare)
- Cultural and family perceptions
- Judgment from society
- NHS funding limitations
- Comments on NHS staff competency

Demographics of respondents

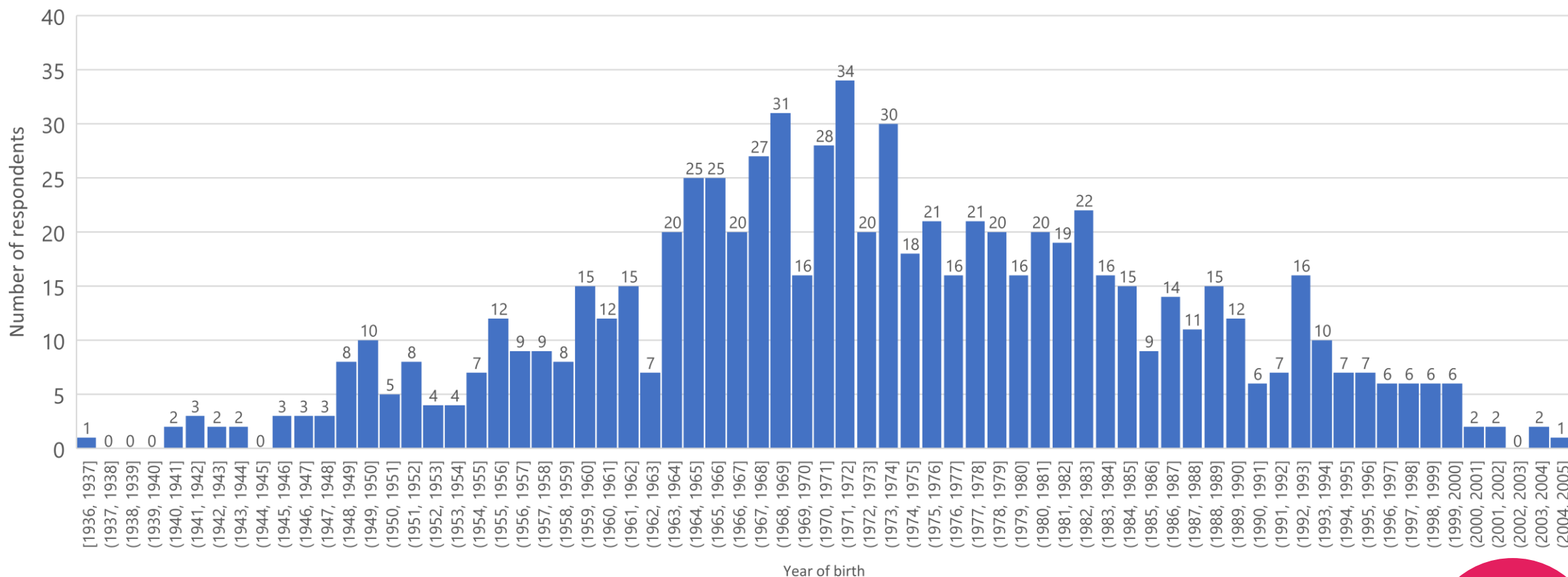
- 31 responses were written on behalf of someone else
- Responses came from a broad range across the Dorset geography
- The youngest individual to respond was 19, the eldest was 88, the average age was 51
- The ethnicity of respondents with the most responses was from those who are English, Welsh, Scottish or British (740). Second most common answer was to leave the question blank (164)
- The biological sex of respondents with the most responses was from biological Females (801). Second most common answer was to leave the question blank (172)
- The religion of respondents with the most responses was from those with no religion (405). Second most common answer was from Christians (302)
- The sexual orientation of respondents with the most responses was from those who are heterosexual (698). Second most common answer was to leave the question blank (198)

Geography of respondent's residential address



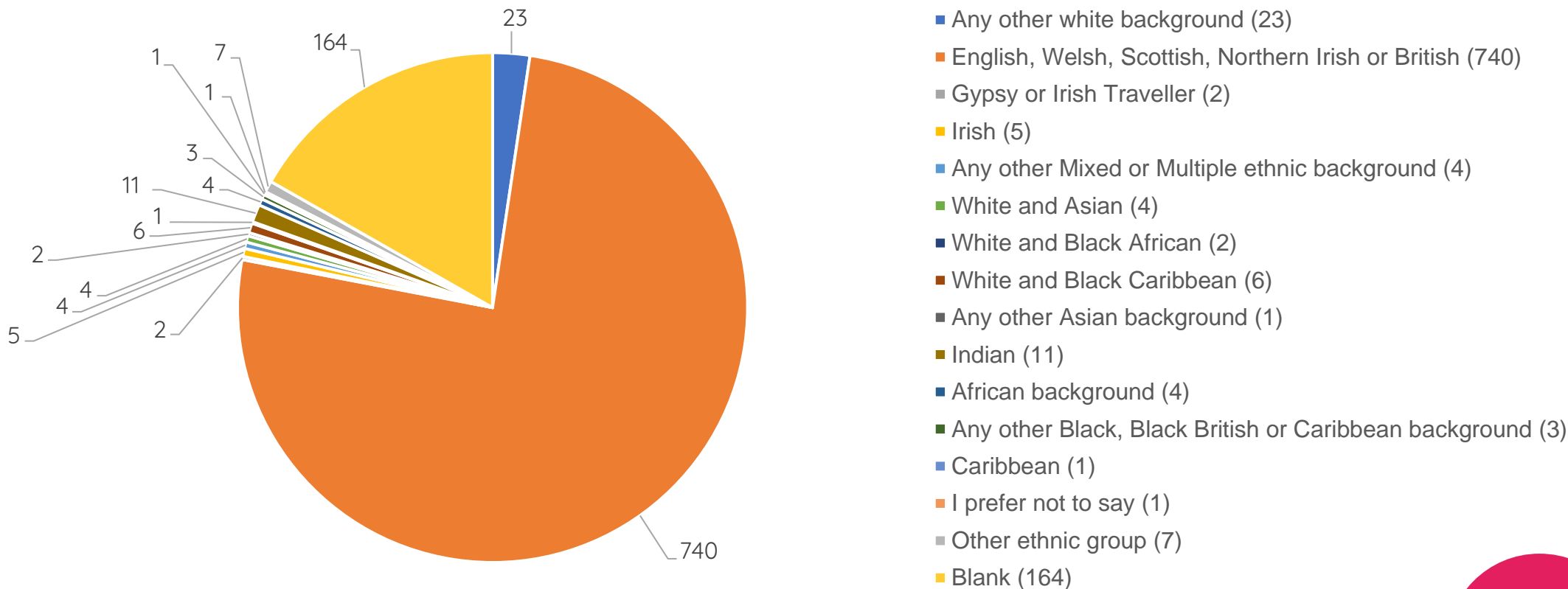
811 out of 978 respondents included the first line of their postcode. 2 postcodes from Southampton and 1 from Reading have not been included as the women's health hub is inclusive of Dorset services

Age range of respondents – 785 out of 978 answered to this question

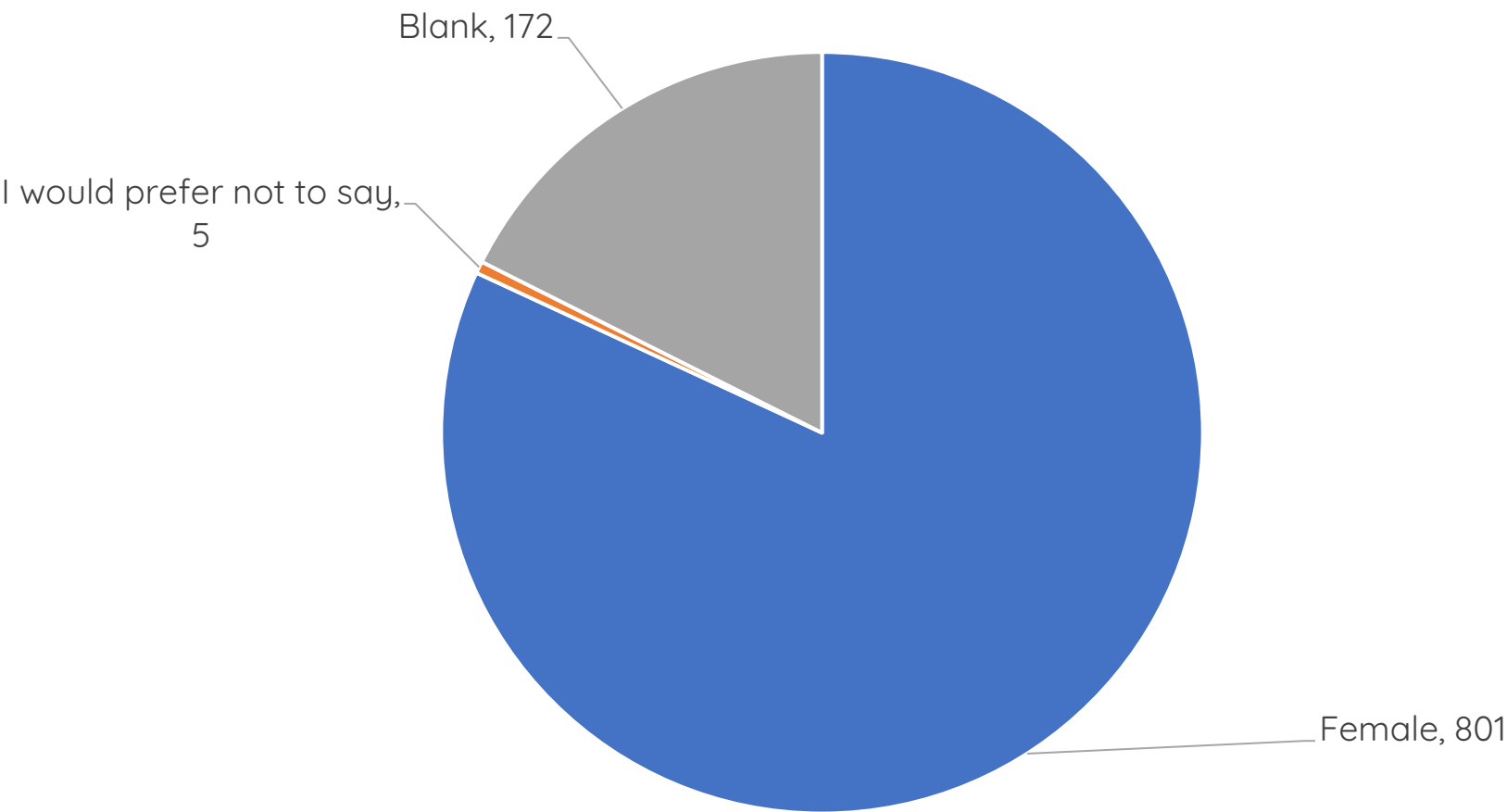


The youngest was 19 (2005), the eldest was 88 (1936), the average age was 51 (1973)

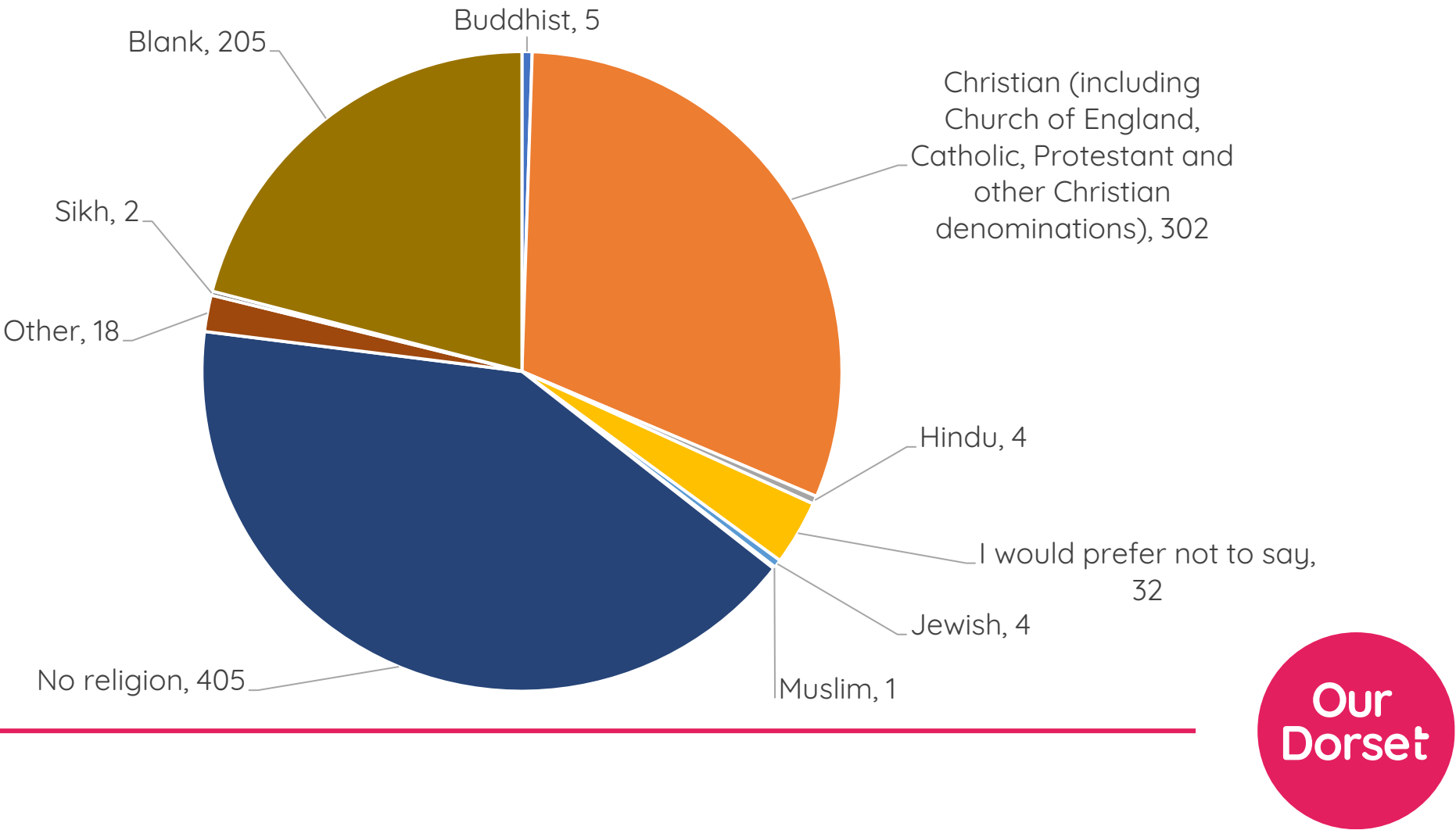
Ethnicity of respondents



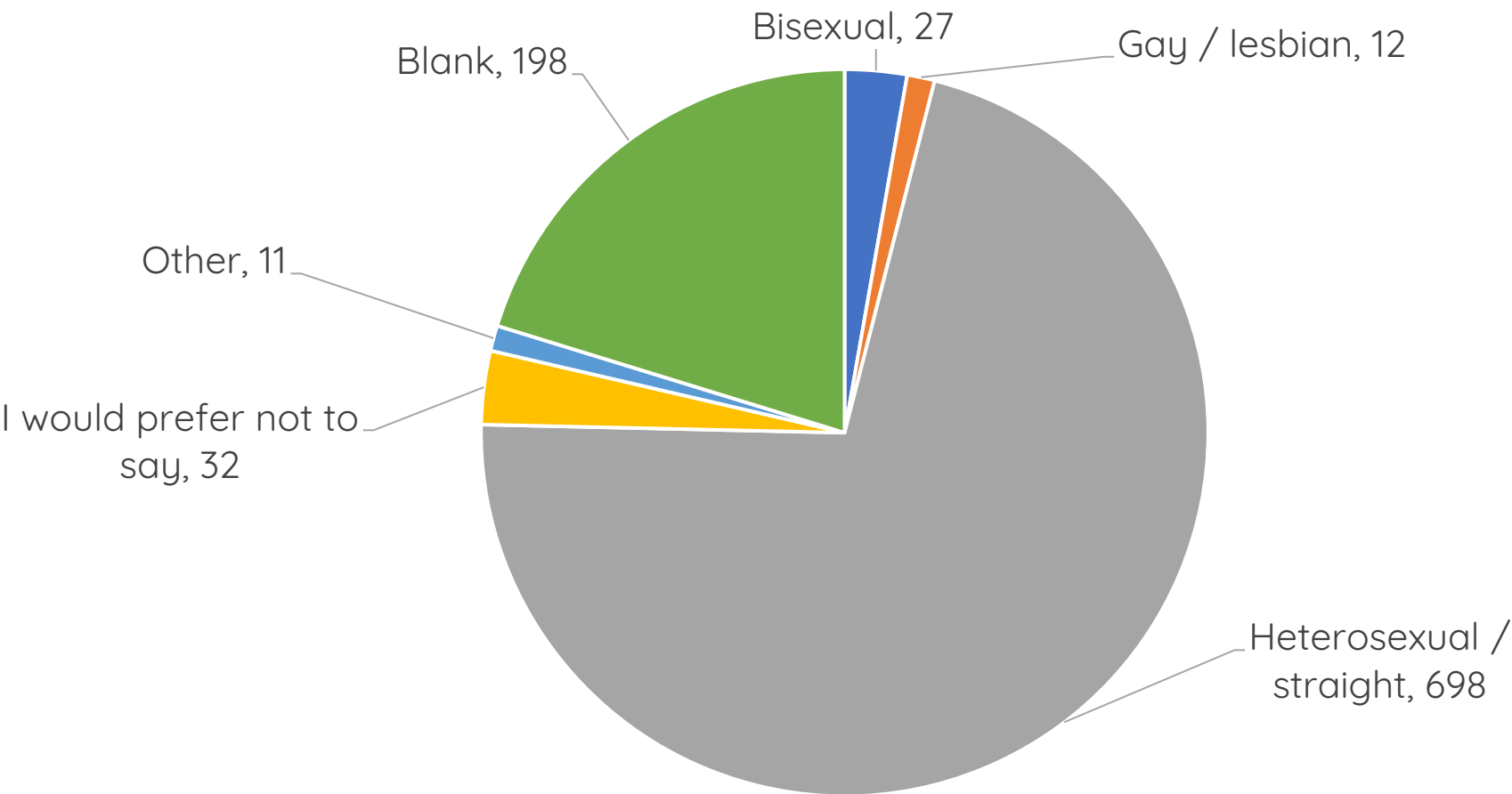
Biological sex of respondents



Religion of respondents



Sexual orientation of respondents



Appendix & Methodology



APPENDIX 1. Survey responses document



Women's health
survey responses

Methodology

This short report was completed by Health Innovation Wessex who used the thematic analysis framework to produce the information reported back from the survey's qualitative questions:

1. Initial familiarisation with the data
2. Summarise initial themes
3. Map themes against data
4. Review, revise, and finalise themes



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