

The Harbour - report on accessibility for hard-to-reach groups

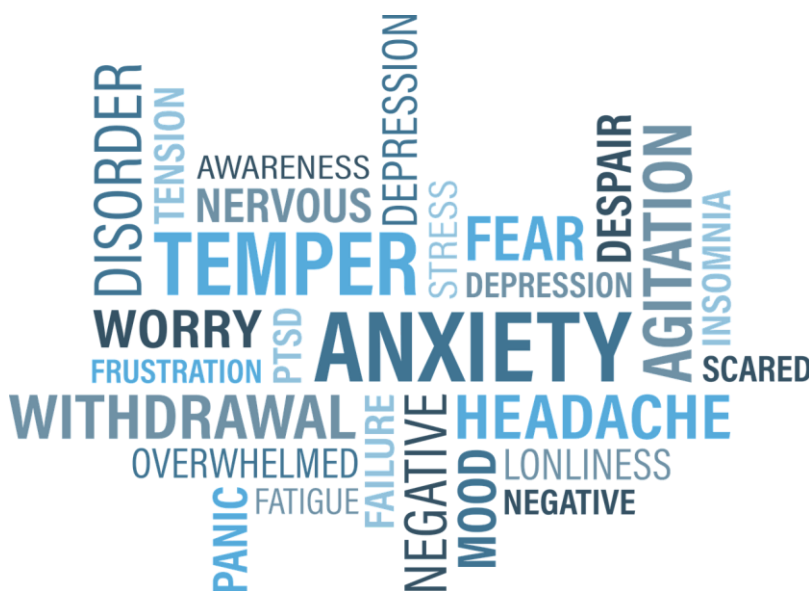
What is The Harbour?

Founded in 1992 by Psychotherapist Jill Brown, The Harbour is an independent local charity that exists to support people in the Bristol area with the emotional pain, loss and isolation that comes with a life-threatening illness or bereavement.

We offer 1:1, group and couple therapy to any adult affected by any life-threatening illness - people with a diagnosis, their loved ones and carers, and people who have been recently bereaved. Each year we support more than 250 people with over 2,500 sessions of counselling.

Healthwatch Bristol provided funding through the 'Community Pot' fund for The Harbour to carry out research that was designed to find out which groups of people find access to The Harbour more difficult, and what reasons are behind this difficulty.

The research was conducted by Dr Marta Bolognani, Research Affiliate at the Centre for the Study of Ethnicity and Citizenship at the University of Bristol, and Psychotherapist at The Harbour.



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Summary

What did we do?

We analysed the demographic information that we have collected about people who used our service during 2016 and 2017, and compared this to demographic data on the population of Bristol. This enabled us to identify groups of people who were under-represented in our client cohort. We then recruited people from these groups to participate in two focus groups, and we asked them for their views on the barriers to accessing our service.

Following the focus groups we developed the feedback from participants into themes, and created a series of recommendations that are designed to improve access to our service for people from under-represented groups.

Data analysis and focus groups

When we reviewed the demographic data that we collected on people who have used our service and compared it to data on the population of Bristol, we found that people from BAME backgrounds, and people from Eastern European backgrounds were significantly under-represented in terms of our client cohort.

We then recruited people from these backgrounds to participate in two focus groups. The two groups totalled 15 individuals (6 men and 9 women), and they took place in May 2018 at the Assisi Centre, a building in Easton which is rented by a number of different community organisations.

“For my generation counselling is not alien, but we have different forums, a night out, a drink, a chat. Family settings as well...”

“The subtle messages of the leaflet are important... Who is going to welcome you? Is it open to you? Is access easy?”

“You get what you pay for, the usage of the word ‘free’ is misleading... these services are not free, they are funded by a number of things”

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The findings and our recommendations

We identified five main themes during the focus groups:

1. There is a growing familiarity with talking therapies among BAME groups

Our recommendations are to:

- Explore ways to link up to other services (eg. Oasis-Talk 'Elders' project)
- Create more specific interventions (eg. groups for men, or illness-specific services for BAME groups)
- Review the words we use in our promotional leaflets (eg. consider alternatives to words like 'counselling' and 'psychotherapy')
- Collaborate with existing initiatives that are contributing to the shift in perception about talking therapies

2. The first ports of call are the people in one's own close networks

Our recommendations are to:

- Identify suitable places to promote our service (eg. faith groups, community radio, hairdressers)

3. The idea of talking to strangers about personal matters generates multiple tensions

Our recommendations are to:

- Review The Harbour's diversity training
- Include in our vision the aim of facilitating a widening of the diversity of our client base, and ensure we do not communicate in a way that implies an assumption that our target audience is 'white'

"If you did not use 'therapy' and used 'wellbeing, lifestyle' you may have more success..."

"In my culture you talk with your friends and family in the best of cases... but really the previous generation will just say 'you have to suck it up and deal with it yourself'..."

"Black people's experience of the mental health system is not good; a black person would be sectioned for something a white person would get CBT for..."

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4. The quality of the service is important

Our recommendations are to:

- Not assume that all BAME clients want to engage with the service in the same way
- Include more information about the funding and delivery of the service in our publicity material

5. There are some practical and structural obstacles to accessing The Harbour

Our recommendations are to:

- Publicise the service using vocabulary which expresses a welcoming of ethnic diversity
- Understand whether or not our referral system is biased against people from a BAME background
- Understand whether or not we are perceived by our referral partners as BAME-friendly
- Ensure we provide clear information for everyone accessing the service about how it works
- Consider working in partnership to create new referral pathways to The Harbour

What we will do next

As a next step we will be reviewing and discussing the findings of this report across the organisation, in Trustee meetings and at our regular staff meeting.

Where we can quickly and easily implement the recommendations outlined in the report, we will do so. However, some of the recommendations will require further funding, and a collaborative approach with other providers, and statutory services across Bristol.

We are therefore keen to develop partnerships with organisations and groups who can work with us to ensure a more 'joined-up' approach to psychological support services for under-represented groups in Bristol.

For more information and to request a copy of the full report, please contact:

Sam Thomas (Chief Executive) on 0117 925 9348 or email sam@the-harbour.org.uk

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