

Accessing Mental Health Support in Cornwall

APPENDIX: Survey Analysis

July 2021

Survey analysis

The survey ‘Accessing Mental Health Support in Cornwall’ was hosted by Survey Monkey and live for 3 weeks in February 2021. 397 people completed one or more questions. Each question is displayed below in pink text with analysis underneath.

Q1. Please tell us about positive things you have been doing day to day that have helped your mental health and wellbeing

Of 397 respondents, 94% described positive things they had been doing; 4% did not provide an answer and 2% said ‘nothing’. Comments were coded. Codes assigned to three or more people are included in Table 1.

| Code | Count | % | Code | Count | % |
|--|-------|-----|----------------------------------|-------|----|
| Walking | 165 | 42% | Going to the beach | 10 | 3% |
| Exercise | 112 | 28% | Keeping in touch with colleagues | 10 | 3% |
| Keeping in touch with family / friends | 85 | 21% | Hobbies | 10 | 3% |
| Dog walking | 52 | 13% | Writing a journal | 9 | 2% |
| Reading | 50 | 13% | Self care | 9 | 2% |
| Arts craft and needlework | 46 | 12% | Keeping in touch with others | 8 | 2% |
| Eating well (healthy eating) | 36 | 9% | Nature | 8 | 2% |
| Outdoors | 36 | 9% | Meeting others for exercise | 8 | 2% |
| Gardening | 30 | 8% | Bird watching | 7 | 2% |
| Yoga or pilates | 30 | 8% | Purpose | 7 | 2% |
| Routine | 26 | 7% | Time to relax | 7 | 2% |
| Cooking | 28 | 7% | Nothing | 7 | 2% |
| Watching TV and films | 24 | 6% | Drinking less alcohol | 6 | 2% |
| Working | 23 | 6% | Keeping busy | 6 | 2% |
| Helping others | 20 | 5% | Gaming | 5 | 1% |
| Pets | 19 | 5% | Learning new things | 5 | 1% |
| DIY and house chores | 22 | 6% | Writing | 5 | 1% |
| Spending time with family | 14 | 4% | Getting up and dressed as normal | 4 | 1% |
| Games and puzzles | 13 | 3% | Sharing worries | 4 | 1% |
| Focusing on the positive | 13 | 3% | Listening to radio | 4 | 1% |
| Listening to music | 12 | 3% | Dressing for work | 4 | 1% |
| Regular breaks | 12 | 3% | Separating work from home life | 4 | 1% |
| Meditation | 12 | 3% | Social media | 4 | 1% |
| Sleeping well | 11 | 3% | Baths | 3 | 1% |
| Avoiding news and social media | 11 | 3% | | | |

Table 1: Positive things people have been doing assigned to 3 or more respondents

Q2. Below are some statements about feelings and thoughts. Please tick the box that best describes your experience over the last two weeks

| Statements | None of the time | Rarely | Some of the time | Often | All of the time |
|--|------------------|--------|------------------|-------|-----------------|
| I've been feeling optimistic about the future | 1 | 2 | 3 | 4 | 5 |
| I've been feeling useful | 1 | 2 | 3 | 4 | 5 |
| I've been feeling relaxed | 1 | 2 | 3 | 4 | 5 |
| I've been dealing with problems well | 1 | 2 | 3 | 4 | 5 |
| I've been thinking clearly | 1 | 2 | 3 | 4 | 5 |
| I've been feeling close to other people | 1 | 2 | 3 | 4 | 5 |
| I've been able to make up my own mind about things | 1 | 2 | 3 | 4 | 5 |

Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS) © NHS Health Scotland, University of Warwick and University of Edinburgh, 2008, all rights reserved.

Dr. Richard Sharpe at Public Health and Wellbeing, Cornwall Council carried out analysis of the Short Warwick Edinburgh Mental Wellbeing Scale responses.

356 respondents completed the scale.

We used it to identify people with ‘probable’ and ‘possible’ depression or anxiety:

- Scores of 7-17 represent ‘probable’ depression or anxiety
- Scores of 18-20 represent ‘possible’ depression or anxiety

These definitions are based on similar SWEMWBS cut off scores used in a comparison study with clinical measures of depression and anxiety (Patient Health Questionnaire (PHQ)-9 and General Anxiety Disorder assessment (GAD)-7) [1].

We found increased prevalence of ‘probable’ and ‘possible’ depression and/or anxiety compared to Cornwall Council’s Residents’ Survey in 2017 [2] and Cornwall Coronavirus Survey in June 2020 [3].

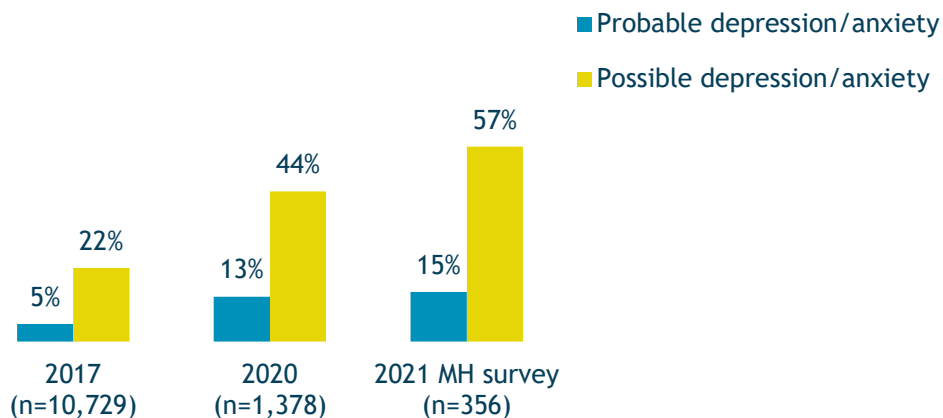


Chart 1: Prevalence of ‘probable’ and ‘possible’ depression and anxiety

Groups at risk of ‘probable’ depression or anxiety

Statistical analysis (logistic regression) was used to identify groups at risk of ‘probable’ depression or anxiety. The following groups were found to be at increased risk:

- Young adults aged 16 to 24
- People with a physical disability
- People with a long-term condition
- People with hearing impairment
- People who have identified as Lesbian, Gay, Bisexual, Pansexual, Asexual or Other
- People who are not married or in a civil partnership (the increased risk was not significant when analysis adjusted for age, gender and ethnicity)

Table 2 provides the odds ratios and confidence intervals for each group. Please note some of the groups are small and results should be interpreted with caution.

| Groups with increased risk for ‘probable’ depression/anxiety are written in pink. | | Unadjusted | | | Adjusted (age, gender, ethnicity) | | |
|---|---|------------|--------------------------|-------|-----------------------------------|--------------------------|-------|
| | | ODDS RATIO | 95% confidence intervals | | ODDS RATIO | 95% confidence intervals | |
| | | | Lower | Upper | | Lower | Upper |
| Age | Age 16 to 24 (n=22) | Reference | | | | | |
| | Age 25 to 64 (n=228) | ***0.1 | 0.05 | 0.4 | | | |
| | Age 65+ (n=57) | ***0.1 | 0.04 | 0.4 | | | |
| Gender | Male (n=63) | Reference | | | | | |
| | Female (n=237) | 1.5 | 0.6 | 3.4 | | | |
| Physical Disability | No physical disability (n=277) | Reference | | | | | |
| | Physical disability (n=29) | *2.9 | 1.2 | 6.8 | | | |
| Long Term Condition | No Long Term Condition (n=225) | Reference | | | | | |
| | Long Term Condition (n=81) | *2.3 | 1.2 | 4.3 | | | |
| Sexual Orientation | Heterosexual (n=264) | Reference | | | | | |
| | LGB (n=28) (Lesbian, Gay, Bisexual, Pansexual, Asexual, Other) | **3.3 | 1.4 | 7.9 | | | |
| Marital Status | Married or in a civil partnership (n=227) | Reference | | | | | |
| | Not married/civil partnership (n=91) (Separated, Single, Widowed, Divorced) | **3.1 | 1.6 | 6.4 | | | |
| Carer status | Not a carer (n=251) | Reference | | | | | |
| | Carer (n=55) | 1.5 | 1.3 | 5.4 | | | |
| Religion | No religion (n=132) | Reference | | | | | |
| | Religion (n=166) | 0.6 | 0.3 | 1.1 | | | |

Table 2: Odds ratios and confidence intervals for regression analysis to identify groups at risk of ‘probable’ anxiety or depression; ***p<0.001; **p<0.01; *p<0.05

Chi square tests were used for groups with low numbers of respondents where regression analysis was not appropriate. We found:

- Increased risk of probable depression/anxiety for people with hearing impairment (n=18; $X^2=4.9$; $p<0.05$)
- No evidence of increased depression/anxiety amongst transgender people (n=10; $X^2=0.2$; $p=0.66$)

Analysis could not be carried out for groups with less than ten respondents. This included analysis of respondents with sight impairment and learning disability.

Odds ratios, confidence intervals and p values explained

The **odds ratio** gives an indication of the likelihood of an event occurring. For example when we used logistic regression to see whether age predicts 'probable' anxiety or depression, we see in Table 2 the odds ratio for Age 65+ is 0.1. An odds ratio of <1 indicates a lower risk and an odds ratio of >1 indicates a higher risk. So as our reference group is young adults age 16 to 25, we can say that older adults are at lower risk for 'probable' depression or anxiety compared to young adults age 16 to 25. The size of the difference in risk is $1-0.1=0.9$ - so young adults have a 90% higher risk of depression or anxiety compared to adults aged 65 years and above.

The **confidence intervals** provide an upper and lower limit for the true odds ratio. So for age 65 years and over we can be confident the true odds ratio falls somewhere between 0.04 and 0.4. The upper confidence interval is <1 so we can be confident that those age 65 years and above have a lower risk for 'probable' depression or anxiety. The larger the confidence intervals, the less confident we can be about the true value of the odds ratio. Small sample sizes often have larger confidence intervals.

P values provide another indicator of how confident we can be in the results. P values of less than 0.05 indicate a statistically significant result and are marked with one or more *. These results are unlikely to be due to chance.

Groups at risk of 'possible' depression or anxiety

Statistical analysis was also used to identify groups at risk of 'possible' depression or anxiety. The following groups were found to be at increased risk:

- Age 16 to 24
- Females
- People with a physical disability
- People with a long term condition
- People who were not married or in civil partnership
- People without a religion

Table 3 provides the odds ratios and confidence intervals for each group.

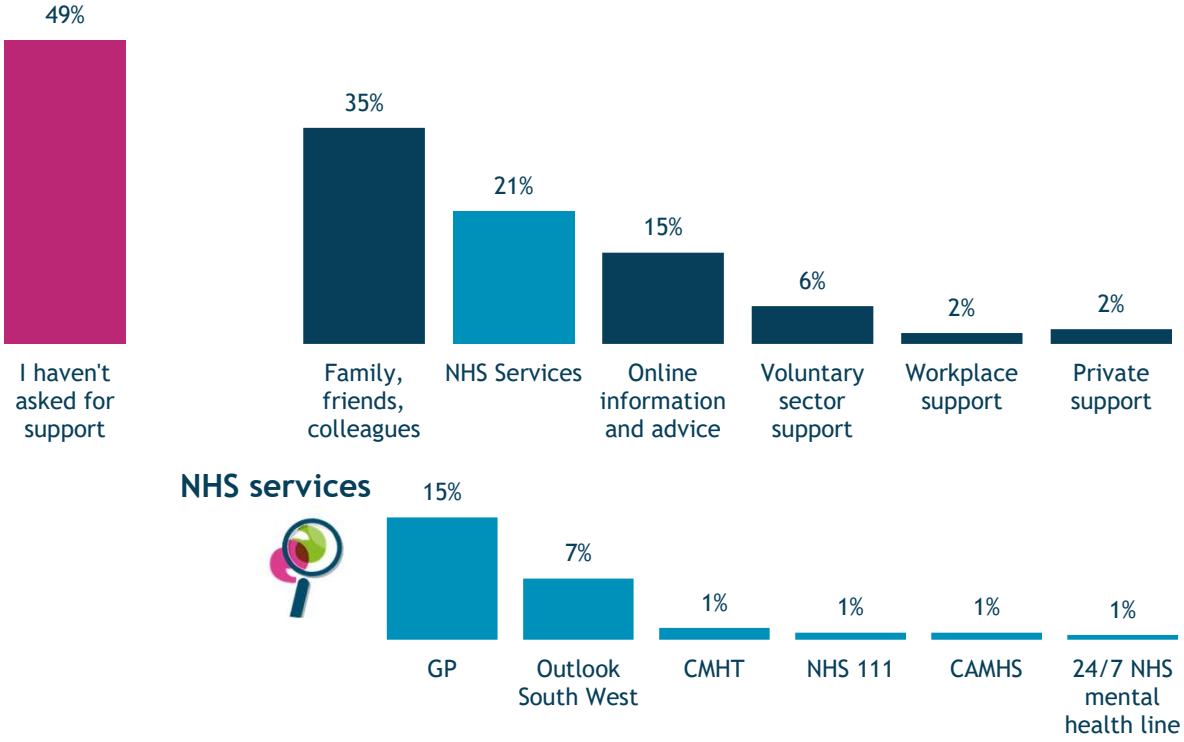
| Groups with increased risk for 'possible' depression/anxiety are written in pink. | | Unadjusted | | | Adjusted (age, gender, ethnicity) | | |
|---|---|------------|--------------------------|-------|-----------------------------------|--------------------------|-------|
| | | ODDS RATIO | 95% confidence intervals | | ODDS RATIO | 95% confidence intervals | |
| | | | Lower | Upper | | Lower | Upper |
| Age | Age 16 to 24 (n=22) | Reference | | | | | |
| | Age 25 to 64 (n=228) | *0.2 | 0.06 | 0.7 | | | |
| | Age 65+ (n=57) | ***0.1 | 0.02 | 0.3 | | | |
| Gender | Male (n=63) | Reference | | | | | |
| | Female (n=237) | ***2.8 | 1.6 | 5.1 | | | |
| Physical Disability | No physical disability (n=277) | Reference | | | | | |
| | Physical disability (n=29) | 2.0 | 0.9 | 4.5 | | | |
| Long Term Condition | No Long Term Condition (n=225) | Reference | | | | | |
| | Long Term Condition (n=81) | *2.0 | 1.2 | 3.3 | | | |
| Sexual Orientation | Heterosexual (n=264) | Reference | | | | | |
| | LGB (n=28) (Lesbian, Gay, Bisexual, Pansexual, Asexual, Other) | 1.3 | 0.6 | 2.9 | | | |
| Marital Status | Married or in a civil partnership (n=227) | Reference | | | | | |
| | Not married/civil partnership (n=91) (Separated, Single, Widowed, Divorced) | **2.1 | 1.3 | 3.6 | | | |
| Carer status | Not a carer (n=251) | Reference | | | | | |
| | Carer (n=55) | 1.5 | 0.8 | 2.6 | | | |
| Religion | No religion (n=132) | Reference | | | | | |
| | Religion (n=166) | **0.5 | 0.3 | 0.9 | | | |

Table 3: Odds ratios and confidence intervals for regression analysis to identify groups at risk of 'possible' anxiety or depression; ***p<0.001; **p<0.01; *p<0.05

Q3. Where have you accessed support and/or information for your mental health in the last 6 months? (Tick all that apply)

- 24/7 NHS mental health response line
- GP
- Community Mental Health Team
- Child and Adolescent Mental Health Services
- Outlook South West
- Samaritans
- Valued Lives
- Pentreath
- Young People Cornwall
- Social Prescribing
- Cornwall Council, e.g. mental health and wellbeing guides
- NHS 111
- NHS websites
- Family and friends
- N/A - I have not asked for support
- Other

349 respondents provided information on where they have accessed support in the last 6 months. One in two people (49%) had not asked for support.



Charts 2 and 3: The percentage of respondents accessing support from different sources in the last six months.

Table 4 shows how different kinds of support and services were categorised for analysis. The number of respondents accessing sources are displayed in brackets. Please note one person may have accessed support from more than one source.

| | | |
|---|---|--|
| Support through NHS Services (74) | GP (52) Outlook South West (26) CMHT (5) 24/7 MH helpline (3) NHS 111 (3) CAMHS (3) Boundervean (1) | |
| Other active support (30) | Active support - voluntary sector (20) | Valued Lives (6) Social Prescribing (4) Macmillan counselling (2) Samaritans (2) Young People Cornwall (2) Pentreath (1) CN4C (1) Oakleigh house (1) Man Down (1) AA (1) Pegasus Counselling (1) Volunteer Cornwall (1) |
| | Private counselling (8) | |
| | Workplace support (6) | |
| Self help / Information and advice (136) | Information and advice (51) | Cornwall Council wellbeing guides (42) |
| | | NHS websites (20) |
| | | Voluntary sector websites (4) |
| | Family, friends, colleagues (121) | Family and friends (119) |
| Colleagues (4) | | |
| Self management (4) | Using previous experience and therapy to help themselves - coded from 'other' | |
| No support (170) | | |

Table 4: Sources of support accessed in the last six months. Number of respondents are in brackets.

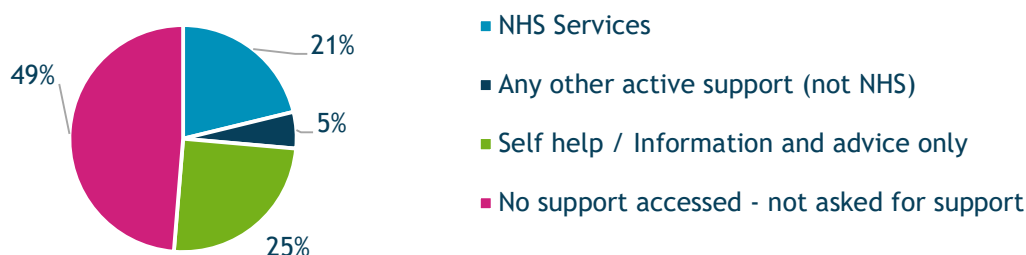


Chart 3: Sources of support categorised for analysis. Each respondent falls into one of these four categories.

Support accessed by people identified with depression or anxiety

We looked at where those identified as having anxiety or depression were accessing support. As might be expected, there was higher prevalence of people identified with ‘probable’ and ‘possible’ depression or anxiety accessing NHS services.

Just under one in two of 52 people (46%) with ‘probable’ depression or anxiety accessed NHS services, one in four (23%) helped themselves to information and advice online, and one in four (25%) did not ask for support. The proportion of people with ‘possible’ depression or anxiety accessing NHS services and self help / information and advice only was similar (30% and 27% respectively).

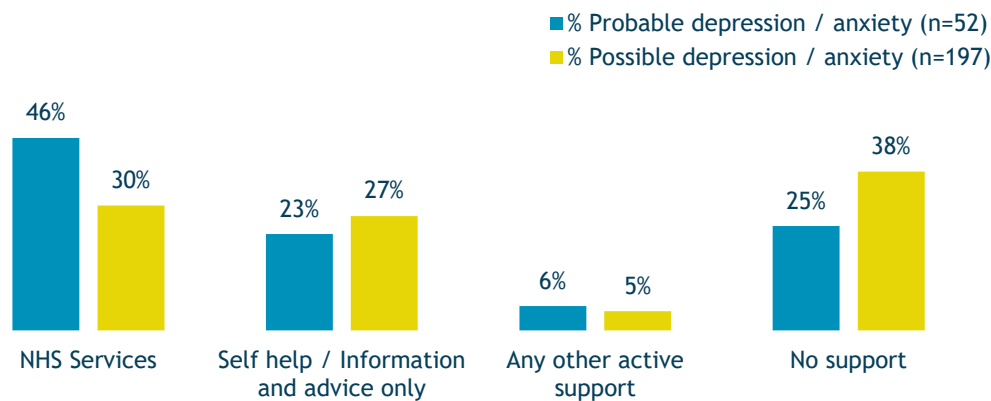


Chart 5: The percentage of people with ‘probable’ and ‘possible’ depression or anxiety accessing support from different sources.

Statistical analysis (Chi square) confirmed that those accessing NHS services are at increased risk of ‘probable’ depression or anxiety ($X^2=24.8$; $p<0.001$) and ‘possible’ depression or anxiety ($X^2=27.9$; $p<0.001$).

Support accessed by different age groups

We looked at where different ages were accessing support. Older people aged 65 and over were less likely to ask for support and less likely to access NHS services.

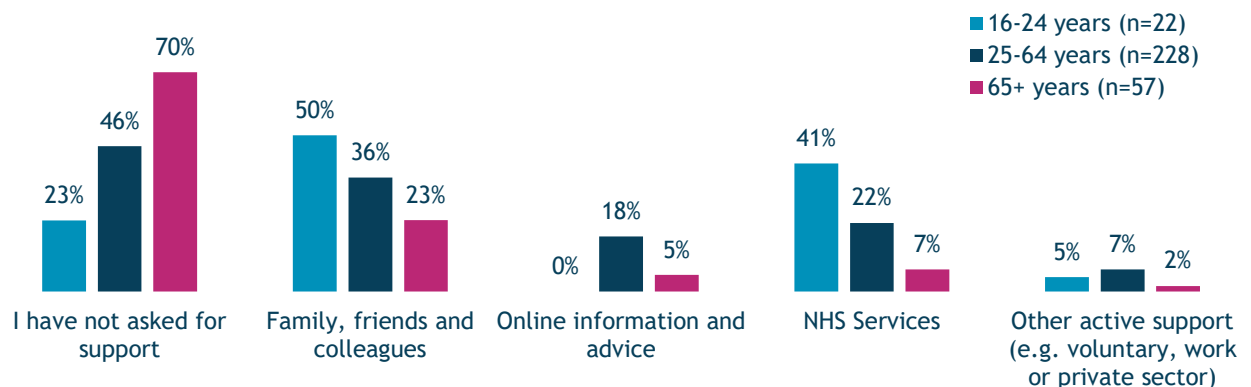


Chart 6: Sources of support accessed by different age groups.

Q4. Have you been able to access the support you would like?

- Yes
- No
- Some, but not all

144 people answered this question. One in two (50%) had been able to access the support they would like.

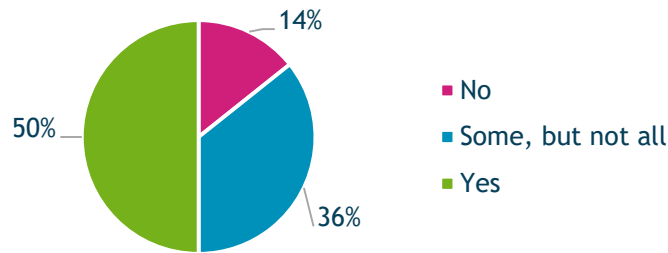


Chart7: The percentage of people who have been able to access the support they would like.

Responses were broken down by organisation. It is difficult to compare responses between organisations due to small numbers of respondents accessing support at individual organisations. It's also important to bare in mind a person's response may refer to more than one service. For example, someone may have responded 'some, but not all' and accessed the support they would like from the GP, but not been able to access the support they would like from the secondary service they were referred on to. This would be displayed as 'some, but not all' for both the GP and the secondary care service.

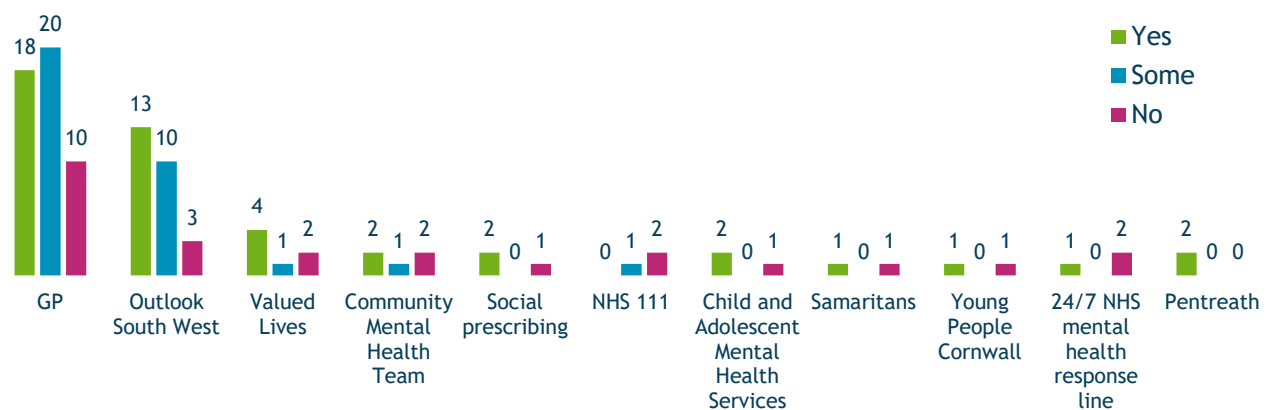


Chart 8: The percentage of people who have been able to access the support they would like, broken down by organisation.

People accessing NHS services were less likely to be able to access the support they would like compared to those accessing online information and advice

One in five people accessing NHS services (21%) said ‘No’ they were not able to access the support they would like compared to one in 12 (8%) of those accessing information and advice online. Free text responses from the 8% of people who were not able to access the support they would like online included requests for access to counselling and talking therapies, rather than improvements to online provision.

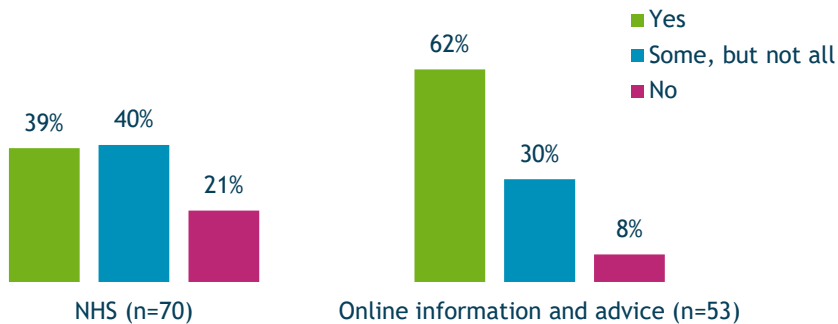


Chart9: The percentage of people who have been able to access the support they would like.

People with ‘probable’ depression or anxiety were less likely to be able to access the support they would like

Of those who had accessed support, 31 people with ‘probable’ depression or anxiety and 111 without responded to Q4 ‘Have you been able to access the support you would like?’. Only one in five people (19%) with ‘probable’ depression or anxiety were able to access the support they would like compared to one in two people (58%) who were not identified with ‘probable’ anxiety and depression.

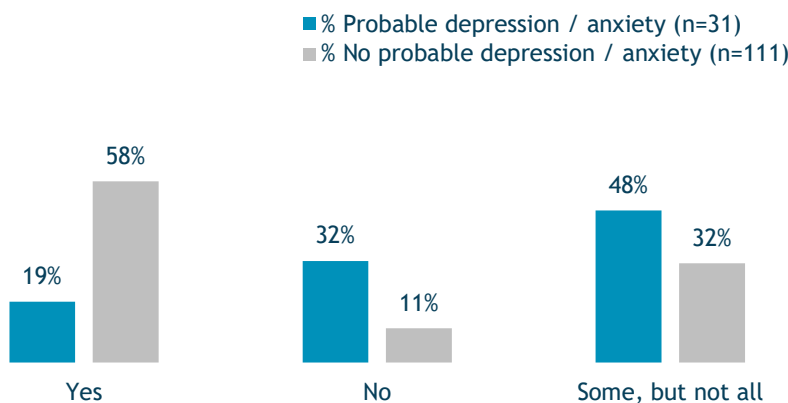


Chart 10: The percentage of people with and without ‘probable’ depression or anxiety who have been able to access the support they would like.

People with ‘possible’ depression or anxiety were also less likely to be able to access the support they would like

Of those who had accessed support, 96 people with ‘possible’ depression or anxiety and 46 without responded to Q4. One in three people (39%) with ‘possible’ depression or anxiety were able to access the support they would like compared to three quarters of people (72%) without ‘possible’ depression or anxiety.

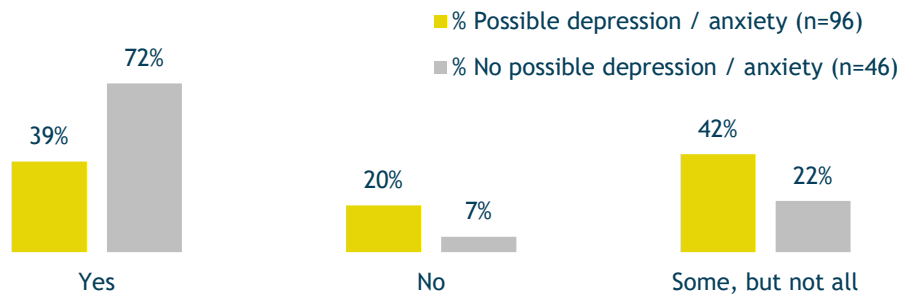


Chart10: The percentage of people with and without ‘possible’ depression or anxiety who have been able to access the support they would like.

Statistical analysis (logistic regression) confirmed both of these trends as significant. Tables 5 and 6 shows people who were not able to access the support they would like were more likely to have ‘probable’ depression or anxiety and more likely to have ‘possible’ depression or anxiety. Please note some of the groups are small and results should be interpreted with caution.

| Risk for ‘probable’ depression or anxiety | Unadjusted | | | Adjusted (age, gender, ethnicity) | | |
|--|------------|--------------------------|-------|-----------------------------------|--------------------------|-------|
| | ODDS RATIO | 95% confidence intervals | | ODDS RATIO | 95% confidence intervals | |
| | | Lower | Upper | | Lower | Upper |
| Yes, I have been able to access the support I would like (n=71) | Reference | | | | | |
| No, I have not been able to access the support I would like (n=22) | ***8.9 | 2.7 | 29.1 | ***15.7 | 3.6 | 69.5 |
| I have been able to access ‘some, but not all’ (n=51) | **4.6 | 1.6 | 12.8 | 6.1 | 1.8 | 21.1 |

| Risk for ‘possible’ depression or anxiety | Unadjusted | | | Adjusted (age, gender, ethnicity) | | |
|--|------------|--------------------------|-------|-----------------------------------|--------------------------|-------|
| | ODDS RATIO | 95% confidence intervals | | ODDS RATIO | 95% confidence intervals | |
| | | Lower | Upper | | Lower | Upper |
| Yes, I have been able to access the support I would like (n=71) | Reference | | | | | |
| No, I have not been able to access the support I would like (n=22) | **5.6 | 1.5 | 20.8 | **9.1 | 1.7 | 48.8 |
| I have been able to access ‘some, but not all’ (n=51) | **3.5 | 1.5 | 8.2 | **3.7 | 1.4 | 10.1 |

Tables 5 and 6: Logistic regression analysis of risk of ‘probable’ and ‘possible’ depression and anxiety and satisfaction with support; ***p<0.001; **p<0.01; *p<0.05.

Q5 If you have sought help for your mental health, please tell us more - we would like to know about services that are working well for people, as well as suggestions for improvements. Please provide details in your feedback, such as the name of the mental health organisation(s) where your experiences took place.

Q5a What was good about your experience? What was helpful?

Ninety seven people described their experiences. Fifteen people provided negative feedback, which was analysed under the next question ‘What could be better?’. The remaining 82 comments (including 18 interviews) were analysed thematically. Common themes are listed in the table below. Themes are displayed in blue and subthemes in orange.

| Themes and subthemes | Count |
|--|--------------|
| Sharing experiences with empathetic listeners | 31 |
| Listening understanding GPs and mental health staff | 22 |
| Family, friends and colleagues | 10 |
| Peer support | 4 |
| Online support | 16 |
| Online information and advice | 15 |
| Signposting | 5 |
| Flexibility and convenience of access | 5 |
| Sharing experiences | 4 |
| Counselling and talking therapies | 12 |
| Having a safety net | 5 |
| Open, supportive workplace | 5 |

Table 7: Themes and subthemes for ‘What’s good?’

Q5b What could be better?

Eighty people described ‘what could be better’ within the survey and interviews. Common themes are listed in the table on the next page. Themes are displayed in blue and subthemes in orange.

| Themes and subthemes | Count |
|---|--------------|
| Access to support when needed | 19 |
| Easier access through GPs | 10 |
| Faster access to support | 9 |
| Wider access to free or low cost counselling | 4 |
| Provision for people with long-term, more complex mental health conditions | 17 |
| Access to more than 6 sessions of CBT | 5 |
| Signposting to further support when treatment is complete | 4 |
| Support following discharge from CMHT | 2 |
| Criteria for accessing CMHT and CAMHS | 2 |
| Provision for people who have experienced trauma | 2 |
| Lifting of covid social restrictions | 9 |
| Better organisation and communication | 7 |
| Provision for people with long-term conditions | 6 |
| Face to face preferred | 5 |
| Workplace support | 5 |

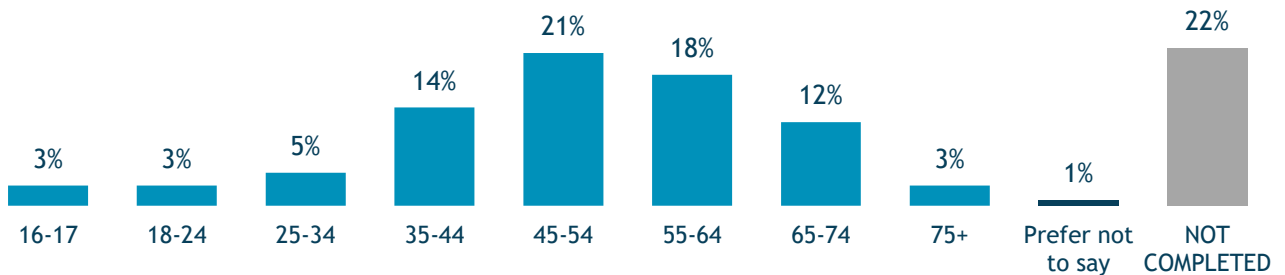
Table 8: Themes and subthemes for ‘What could be better?’

Figure: Percentage of respondents in each age group

Demographics

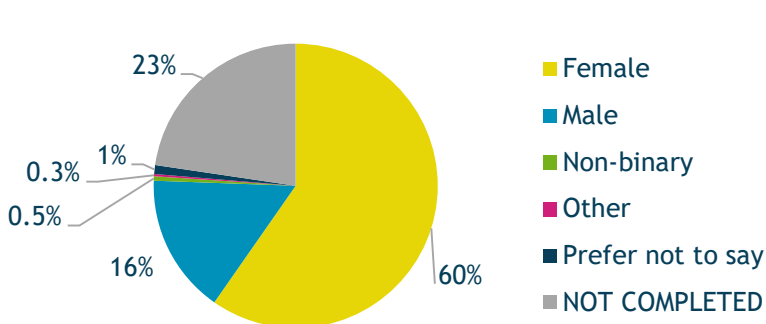
Please note, just under a quarter of respondents did not provide demographic information about themselves. Gender, age and ethnicity percentages provided in the report are the percentage of the total number of respondents who provided demographic information (307; 310 and 305 respectively). Here, the percentages are displayed as the percentage of total respondents taking part in the survey (397), so the figures differ from those provided in the report.

Q6 What is your age?



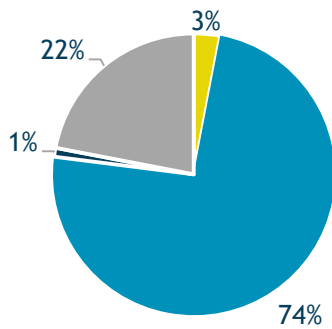
| | Count | % |
|-------------------|------------|-------------|
| 16 - 17 years | 11 | 3% |
| 18 - 24 years | 11 | 3% |
| 25 - 34 years | 18 | 5% |
| 35 - 44 years | 54 | 14% |
| 45 - 54 years | 84 | 21% |
| 55 - 64 years | 72 | 18% |
| 65 - 74 years | 46 | 12% |
| 75+ years | 11 | 3% |
| Prefer not to say | 3 | 1% |
| NOT COMPLETED | 87 | 22% |
| TOTAL | 397 | 100% |

Q7 Which gender do you identify with?



| | Count | % |
|-------------------|------------|-------------|
| Female | 237 | 60% |
| Male | 63 | 16% |
| Non-binary | 2 | 0.5% |
| Other | 1 | 0.3% |
| Prefer not to say | 4 | 1% |
| NOT COMPLETED | 90 | 23% |
| TOTAL | 397 | 100% |

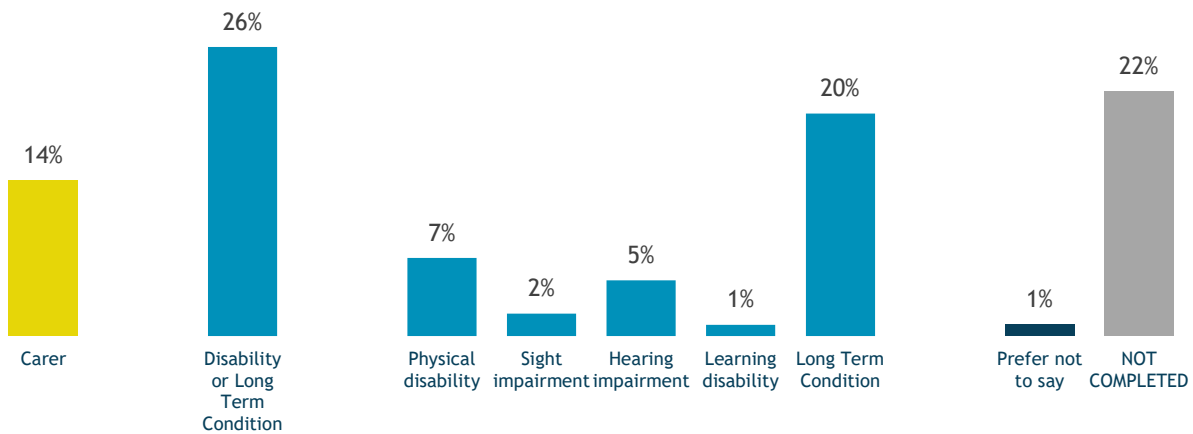
Q8 Is your gender different to the sex that was assigned to you at birth?



- Yes
- No
- Prefer not to say
- NOT COMPLETED

| | Count | % |
|-------------------|------------|-------------|
| Yes | 10 | 3% |
| No | 294 | 74% |
| Prefer not to say | 4 | 1% |
| NOT COMPLETED | 89 | 22% |
| TOTAL | 397 | 100% |

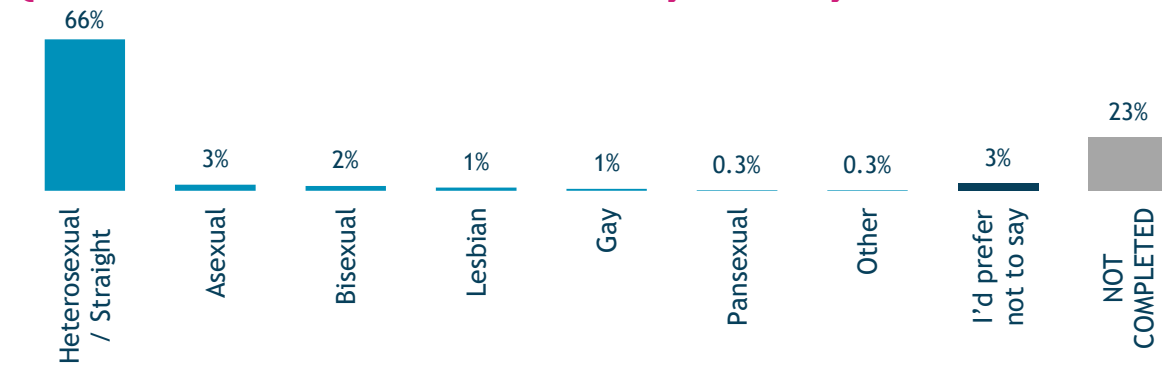
Q9 Do you consider yourself to be a Carer, have a disability or a long term health condition?



| | Count | % |
|--|-------|-----|
| I am a carer | 55 | 14% |
| I have a disability or long-term condition | 105 | 26% |
| I have a physical disability | 29 | 7% |
| I have a sight impairment | 7 | 2% |
| I have a hearing impairment | 18 | 5% |
| I have a learning disability | 5 | 1% |
| I have a long-term condition | 81 | 20% |
| Prefer not to say | 4 | 1% |
| NOT COMPLETED | 87 | 22% |

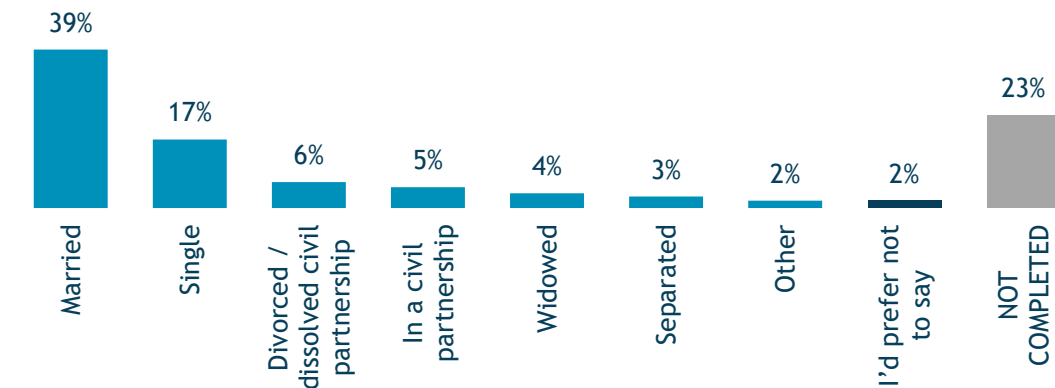
N.B. Percentages are displayed as a percentage of 397 respondents;
TOTAL row is not included as respondents selected more than one option.

Q10 Please tell us which sexual orientation you identify with?



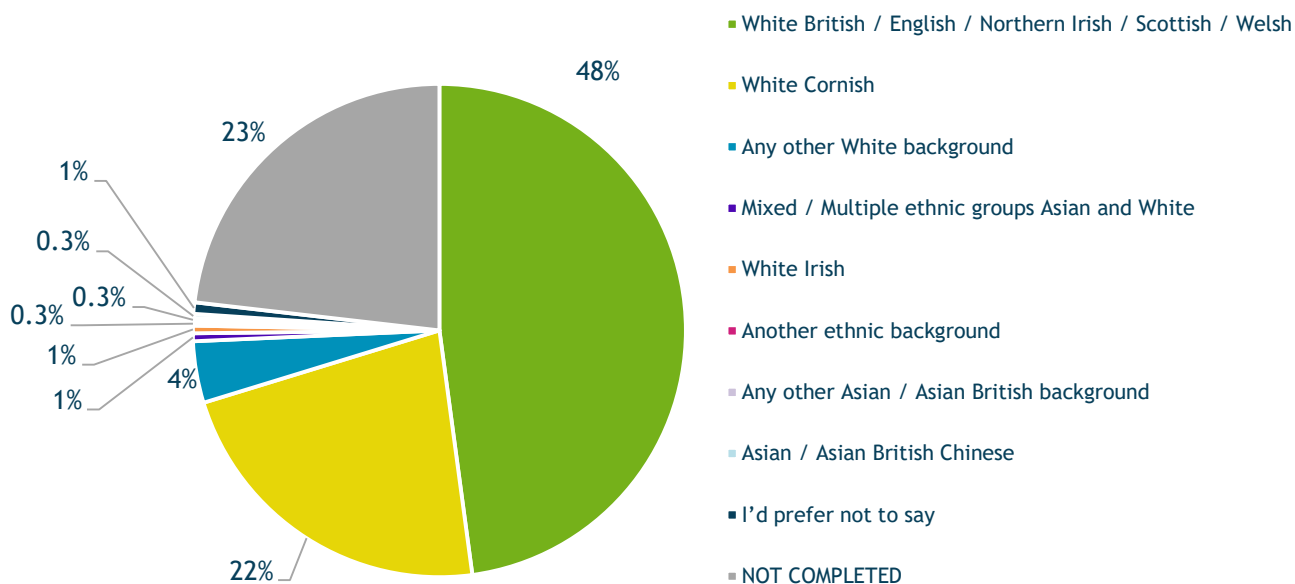
| | Count | % |
|-------------------------|------------|-------------|
| Heterosexual / Straight | 264 | 66% |
| Asexual | 10 | 3% |
| Bisexual | 8 | 2% |
| Lesbian | 5 | 1% |
| Gay | 3 | 1% |
| Pansexual | 1 | 0.3% |
| Other | 1 | 0.3% |
| Prefer not to say | 12 | 3% |
| NOT COMPLETED | 93 | 23% |
| TOTAL | 397 | 100% |

Q11 Please tell us about your marital or civil partnership status



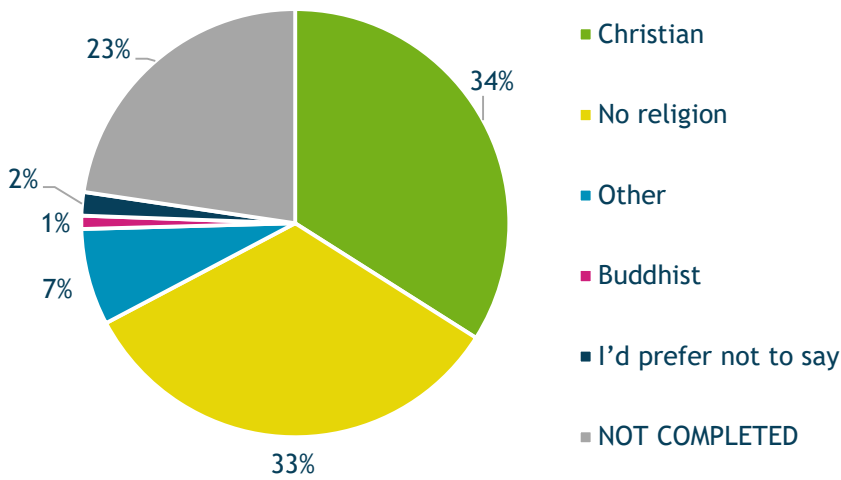
| | Count | % |
|--|------------|-------------|
| Married | 155 | 39% |
| Single | 67 | 17% |
| Divorced / dissolved civil partnership | 25 | 6% |
| In a civil partnership | 20 | 5% |
| Widowed | 14 | 4% |
| Separated | 11 | 3% |
| Other | 7 | 2% |
| Prefer not to say | 7 | 2% |
| Not completed | 91 | 23% |
| TOTAL | 397 | 100% |

Q12 Please select your ethnic background



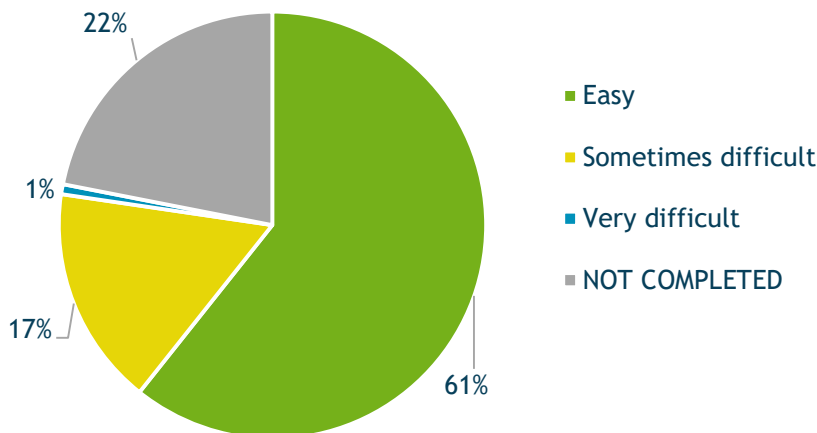
| | Count | % |
|---|------------|-------------|
| White: British, English, Scottish or Northern Irish | 190 | 48% |
| White: Cornish | 89 | 22% |
| White: Any other White background | 16 | 4% |
| Mixed / Multiple ethnic groups: Asian and White | 2 | 1% |
| White: Irish | 2 | 1% |
| Another ethnic background | 1 | 0.3% |
| Any other Asian / Asian British background | 1 | 0.3% |
| Asian / Asian British: Chinese | 1 | 0.3% |
| Asian / Asian British: Bangladeshi | 0 | |
| Asian / Asian British: Indian | 0 | |
| Asian / Asian British: Pakistani | 0 | |
| Black / Black British: African | 0 | |
| Black / Black British: Caribbean | 0 | |
| Black / Black British: Any other Black / Black British background | 0 | |
| Gypsy, Roma, Traveller | 0 | |
| Mixed / Multiple ethnic groups: Black African and White | 0 | |
| Mixed / Multiple ethnic groups: Black Caribbean and White | 0 | |
| Mixed / Multiple ethnic groups: Any other Mixed / Multiple ethnic group | 0 | |
| Prefer not to say | 3 | 1% |
| NOT COMPLETED | 92 | 23% |
| TOTAL | 397 | 100% |

Q13 Please tell us about your religion or beliefs



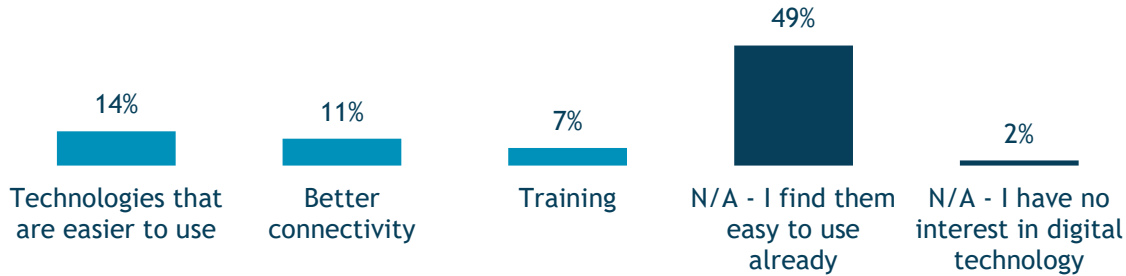
| | Count | % |
|-------------------|------------|-------------|
| Christian | 135 | 34% |
| No religion | 132 | 33% |
| Other religion | 29 | 7% |
| Buddhist | 4 | 1% |
| Hindu | 0 | |
| Jewish | 0 | |
| Muslim | 0 | |
| Sikh | 0 | |
| Prefer not to say | 7 | 2% |
| NOT COMPLETED | 90 | 23% |
| TOTAL | 397 | 100% |

Q14 How easy do you find it to use digital technologies, such as looking up information on websites or booking appointments online?



| | Count | % |
|---------------------|------------|-------------|
| Easy | 241 | 61% |
| Sometimes difficult | 66 | 17% |
| Very difficult | 3 | 1% |
| NOT COMPLETED | 87 | 22% |
| TOTAL | 397 | 100% |

**Q15 What would make it easier for you to use digital technologies?
(Tick all that apply)**



| | Count | % |
|--|-------|-----|
| Technologies that are easier to use | 55 | 18% |
| Better connectivity | 43 | 14% |
| Training | 28 | 9% |
| N/A - I find them easy to use already | 193 | 62% |
| N/A - I have no interest in digital technology | 8 | 3% |

N.B. Percentages are displayed as a percentage of 397 respondents;
TOTAL row is not included as respondents selected more than one option.

Residential postcode area of respondents

| Postcode | Count |
|----------|-------|
| TR1 | 20 |
| TR15 | 20 |
| PL25 | 17 |
| TR3 | 14 |
| PL27 | 13 |
| TR14 | 13 |
| TR18 | 13 |
| PL26 | 12 |
| TR13 | 12 |
| PL14 | 11 |
| TR11 | 11 |
| PL15 | 9 |
| TR4 | 9 |
| TR7 | 9 |
| PL13 | 8 |
| TR27 | 8 |
| TR2 | 7 |
| TR26 | 7 |
| PL24 | 6 |
| TR12 | 6 |
| TR16 | 6 |
| TR20 | 6 |
| PL12 | 5 |
| PL22 | 5 |
| TR10 | 5 |

289 respondents provided the first 3 digits of their postcode. The table on the left shows the most common postcode areas. The map below displays postcode areas where there was at least one respondent.



Interview participants

18 survey respondents took part in follow up interviews. Participants or their relatives had one or more physical or mental health conditions and/or were carers:

- 5 carers
- 9 with mental health conditions, including:
 - Depression
 - Anxiety or stress
 - Bipolar disorder
 - Post-traumatic stress disorder
 - Complex trauma
 - Dementia
- 2 with learning disability
- 6 with physical disability or long-term conditions

Ethnicity: All White British, White English or White Cornish.

| Gender: | Male | Female | | | | |
|---------|-------|--------|-------|-------|-------|--|
| Count: | 6 | 12 | | | | |
| Age: | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | |
| Count: | 1 | 2 | 5 | 6 | 4 | |

Contributions

Our thanks to Dr. Richard Sharpe for contributing to content and analysis of the survey, and to Dr. Yonette Hassell and Joseph Sabien for taking part in the Facebook Live discussion.

References

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2. Healthwatch Cornwall (2020). Cornwall Coronavirus Survey 2020: Full Report. Available online: <https://www.healthwatchcornwall.co.uk/report/2020-10-15/cornwall-coronavirus-survey-report>
3. Neha Shah, Mizaya Cader, William P Andrews, Sarah L Stewart-Brown (*In press*). Short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS): performance in a clinical sample in relation to PHQ-9 and GAD-7.