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VASL currently deliver two projects supporting adults with mental health issues within the Harborough district – My Mind Matters and Wellbeing Befriending Service. We are currently in the process of gathering information to help VASL identify need and secure further funding for mental health support.

We would like to hear your views on community mental health and wellbeing services that are provided in the district. We have put together a short questionnaire and appreciate you completing the form.

This questionnaire can be returned in the self-addressed envelope or emailed to:

**Email:** [**wellbeing@vasl.org.uk**](mailto:wellbeing@vasl.org.uk)

**Please ensure your response reaches us by Monday 21st February 2022**

**Q1. What services have you or the person you care for used in the last year?**

*Please select* ***one*** *option for each service by putting a tick in the box*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Currently using services** | **Previously used services** | **Have not used services** | **Not applicable to me** |
| **My Mind Matters (VASL)** |  |  |  |  |
| **Wellbeing Befriending Service (VASL)** |  |  |  |  |
| **Any of VASL other projects (Support for Carers, Community Champions, Transport or Young Carers)** |  |  |  |  |
| **Talking Therapies (like Vita Minds)** |  |  |  |  |
| **Support Groups (online and face to face)** |  |  |  |  |
| **Professional 1 -1 support** |  |  |  |  |
| **Drop in Café`s** |  |  |  |  |
| **Anything else**  **(Please write what it is)** |  |  |  |  |

**Q2. In the last 12 months how supported have you felt by services in the Harborough District?**

*Please tick the box that relates the most to how you feel*

|  |  |
| --- | --- |
| **Extremely Support** |  |
| **Fairly Supported** |  |
| **Neither supported or unsupported** |  |
| **Unsupported** |  |
| **Very unsupported** |  |

|  |
| --- |
| **Any comments about the support you have received:** |

**Q3. What gets in the way of getting help?**

*Please tick any boxes that you wish to*

|  |  |  |  |
| --- | --- | --- | --- |
| **Covid 19** |  | **Embarrassed to say how I feel** |  |
| **Fear** |  | **Transport** |  |
| **Anxiety** |  | **Money** |  |
| **Not knowing anyone** |  | **Physical health issues** |  |
| **Lack of digital skills** |  | **Lacking confidence** |  |
| **Low motivation** |  | **Feeling isolated** |  |
| **Long waiting lists** |  | **Not feeling welcome** |  |

|  |
| --- |
| **Anything else that can get in the way of getting the help you need?** |

**Q4. What do you think might help you going forward?**

*Please tick any boxes that apply to you*

|  |  |  |  |
| --- | --- | --- | --- |
| **Gardening & Tree Planting** |  | **Creative sessions** |  |
| **Photography** |  | **Tea & Chat group** |  |
| **Being Active** |  | **Going to a café with a volunteer** |  |
| **Volunteering** |  | **Adult learning courses** |  |
| **Connecting with nature** |  | **Mindfulness** |  |
| **Poetry & Creative Writing** |  | **All Male or All Female Group** |  |
| **Walking Groups** |  | **Befriending talking to a volunteer over the phone** |  |
| **1-1 Support** |  | **Healthy Change sessions** |  |
| **Advice, information and guidance** |  | **Allotment Group** |  |
| **What ideas do you have that could help you and other people you know improve their wellbeing?** | | | | |

**More about you**

We want to make sure that everyone is treated fairly and equally, and that no one gets left out. That's why we are asking you these questions. We won't share the information you give us with anyone else. We’ll use it only to help us make decisions and improve our services.

|  |  |
| --- | --- |
| **Q5. Please tell us the first five characters of your postcode:** |  |

*Please do not reveal your whole postcode. We use this to help us to analyse our data. It will not be used to identify who you are.*

**Q6. Are you…..?** *Please select* ***one*** *option.*

|  |  |
| --- | --- |
|  | Male |
|  | Female |
|  | I prefer not to say |

**Q7. Which of these age groups applies to you?** *Please select* ***one*** *option.*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0-15 |  | 16-24 |  | 25-34 |  | 35-49 |  | 50-59 |  |
| 60-64 |  | 65-74 |  | 75-84 |  | 85+ over |  | I prefer not to say |  |

**Q8. Do you regard yourself as belonging to a particular religion or holding a belief?** *Please select* ***one*** *option.*

|  |  |
| --- | --- |
|  | Yes |
|  | No |
|  | I prefer not to say |

**Q8a. If you answered ‘Yes’ to Q7, which of the following applies to you?** *Please select* ***one*** *option.*

|  |  |
| --- | --- |
|  | Christian |
|  | Buddhist |
|  | Hindu |
|  | Jewish |
|  | Muslim |
|  | Sikh |
|  | Other |
|  | I prefer not to say |

If you selected Other, please specify:

**Q9. Do you consider yourself to be disabled as set out in the Equality Act 2010?** *Please select* ***one*** *option.*

|  |  |
| --- | --- |
|  | Yes |
|  | No |
|  | I prefer not to say |

**Q10. Are you a Carer?** *Please select* ***one*** *option.*

|  |  |
| --- | --- |
|  | Yes |
|  | No |
|  | I prefer not to say |

**Q11. Are you …?** *Please select* ***one*** *option.*

|  |  |
| --- | --- |
|  | Heterosexual/Straight |
|  | Bi/Bisexual |
|  | Gay man |
|  | Gay woman/Lesbian |
|  | Other |
|  | I prefer not to say |

**Q12**. **To which of these ethnic groups do you feel you belong?** *Please select* ***one*** *option.* (Source 2011 Census)

|  |  |  |  |
| --- | --- | --- | --- |
| White English |  | Mixed White & Black Caribbean |  |
| White Scottish |  | Mixed White & Black African |  |
| White Welsh |  | Mixed White & Asian |  |
| White Northern Irish |  | Mixed Other\* |  |
| White Irish |  | Black or Black British Caribbean |  |
| White Gypsy/Roma |  | Black or Black British African |  |
| White Irish Traveller |  | Black or Black British Other\* |  |
| White Other\* |  | Arab |  |
| Asian or Asian British Indian |  | Chinese |  |
| Asian or Asian British Pakistani |  | I prefer not to say |  |
| Asian or Asian British Bangladeshi |  |  |  |
| Asian or Asian British Other\* |  |  |  |

**\***Other - If your ethnic group is not specified on the list, please describe it here:

**Thank you for taking the time to complete this questionnaire; your feedback is important to us. All feedback received will be reviewed and considered in the development of our proposals. Any sharing of feedback we receive will remain anonymous and we will keep your personal details confidential.**