



Frimley Health and Care



# Reconnect, Reset, Rebuild *Report*

January 2025

This document summarises feedback from a *Reconnect, Reset and Rebuild Engagement Event* which took place on 3<sup>rd</sup> December 2025

45 young people took part from eleven different ethnicities – a cohort proudly reflecting the diversity of Slough.

On the evening the young people analysed barriers to accessing health support using forcefield analyses, modelled where they would invest in health services and made delicious healthy wraps (the incentive to join the session!).

## **FORCEFIELD ANALYSES OF BARRIERS TO HEALTHCARE**

These can be found below.

However, the most common barriers cited were transportation and financial issues, with less frequent issues including: parental issues, fear of judgement or getting help, and cultural reasons.

## **INVESTMENT**

We gave the young people a challenge. We informed them they were an NHS commissioner who had found a million pounds in their budget and their challenge was to allocate the funds where they felt the spending was needed the most. We did this to gain an understanding of the young people's health concerns and investment priorities.



A breakdown of the young people's investment decisions can be found below.

	Digital and online health services	Youth specific services	Health Education and Prevention	Sexual Health	Emergency and Urgent Care	Physical Health	Mental Health and Well-Being	Specialist Services	Community and Social Health	Access and Equity	Innovation and Future Planning
Group 1a	75	75	200	75	75	75	50	100	75	75	100
Group 1b	100	50	75	100	250	75	75	100	75	50	50
Group 2a	100	75	25	25	250	150	75	100	75	50	75
Group 2b	75	75	75	50	200	150	100	75	50	50	100
Group 3a	75	25	75	50	300	100	125	100	50	50	50
Group 3b	75	50	75	25	350	50	50	75	75	100	75

The following examples were used to help the young people understand the different areas of investment:

#### Digital and Online Health Services

Examples include:

- Health apps and virtual GP consultations
- Online mental health platforms (e.g., therapy apps)
- Social media health campaigns

#### Youth-Specific Services

Examples include:

- Youth health drop-ins or hubs
- Peer support programs
- Health outreach in schools or youth clubs

## **Health Education and Prevention**

Examples include:

- Campaigns on healthy eating, substance misuse, and exercise
- Vaccination programs
- Smoking cessation and alcohol awareness

## **Sexual Health**

Examples include:

- Contraceptive advice and provision
- STI testing and treatment
- Relationship and consent education

## **Emergency and Urgent Care**

Examples include:

- A&E (Accident and Emergency) services
- Walk-in clinics and urgent care centers

## **Physical Health**

Examples include:

- Access to GPs and primary care
- Health check-ups and screenings
- Fitness and exercise programs

## **Mental Health and Well-being**

Examples include:

- Counseling and therapy services
- Support for stress, anxiety, and depression
- Crisis intervention and helplines

## **Specialist Services**

Examples include:

- Support for disabilities and long-term conditions (e.g., diabetes, asthma)
- Services for eating disorders
- Substance misuse programs

## **Community and Social Health**

Examples include:

- Access to safe recreational spaces
- Support for families and caregivers
- Community health clinics

## **Access and Equity**

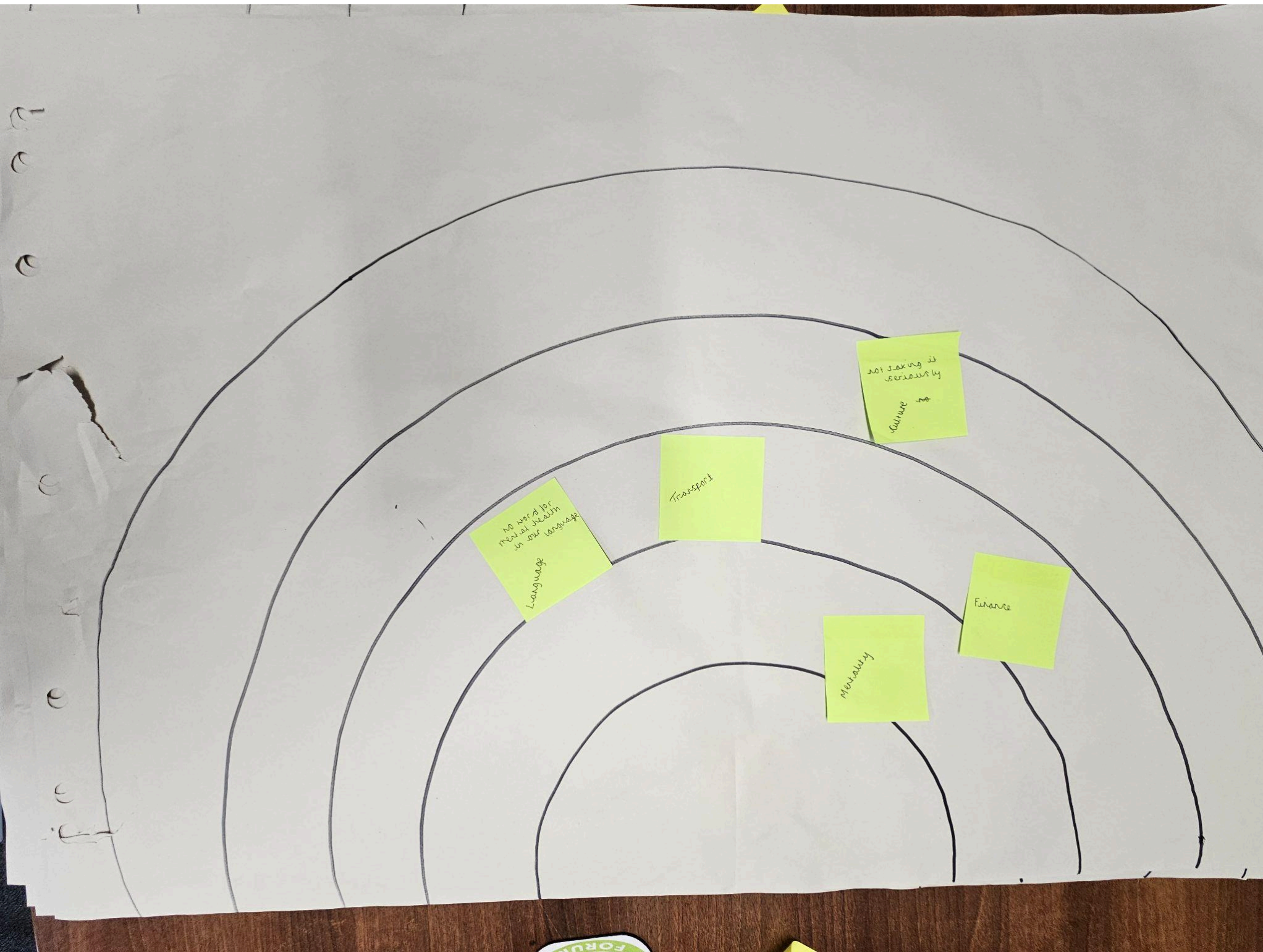
Examples include:

- Transport to health services
- Services for underserved or vulnerable groups
- Language and cultural support

The exercise yielded few clear conclusions, with one notable exception: the overwhelming importance young people placed on emergency care. Every participant could recount a personal incident where they had needed urgent support from the NHS but felt let down. This shared experience underscored their collective prioritisation of improvements in emergency services.

In contrast, the other areas identified for investment were more diffuse. Some of the areas that received the least support were surprising. For instance, the apparent lack of enthusiasm for investing in sexual health services might reflect the conservative backgrounds of many participants, where expectations of sexual activity are delayed until later in life.

There was also evidence to suggest that young people are attuned to the government's policy focus, as many highlighted digital transformation as a worthy area for investment. Alongside this, physical health emerged as another prominent spending priority in the consultation, reflecting the broader concerns of the young participants.



not taking it  
seriously  
Culture

Transport

no words for  
mental health  
in our language  
Language

Finance

Morality

# Group 1

## Barriers to getting support with help

### **Primary reasons:**

None

### **Secondary reasons:**

Mentality

### **Tertiary reasons:**

Finance

Transport

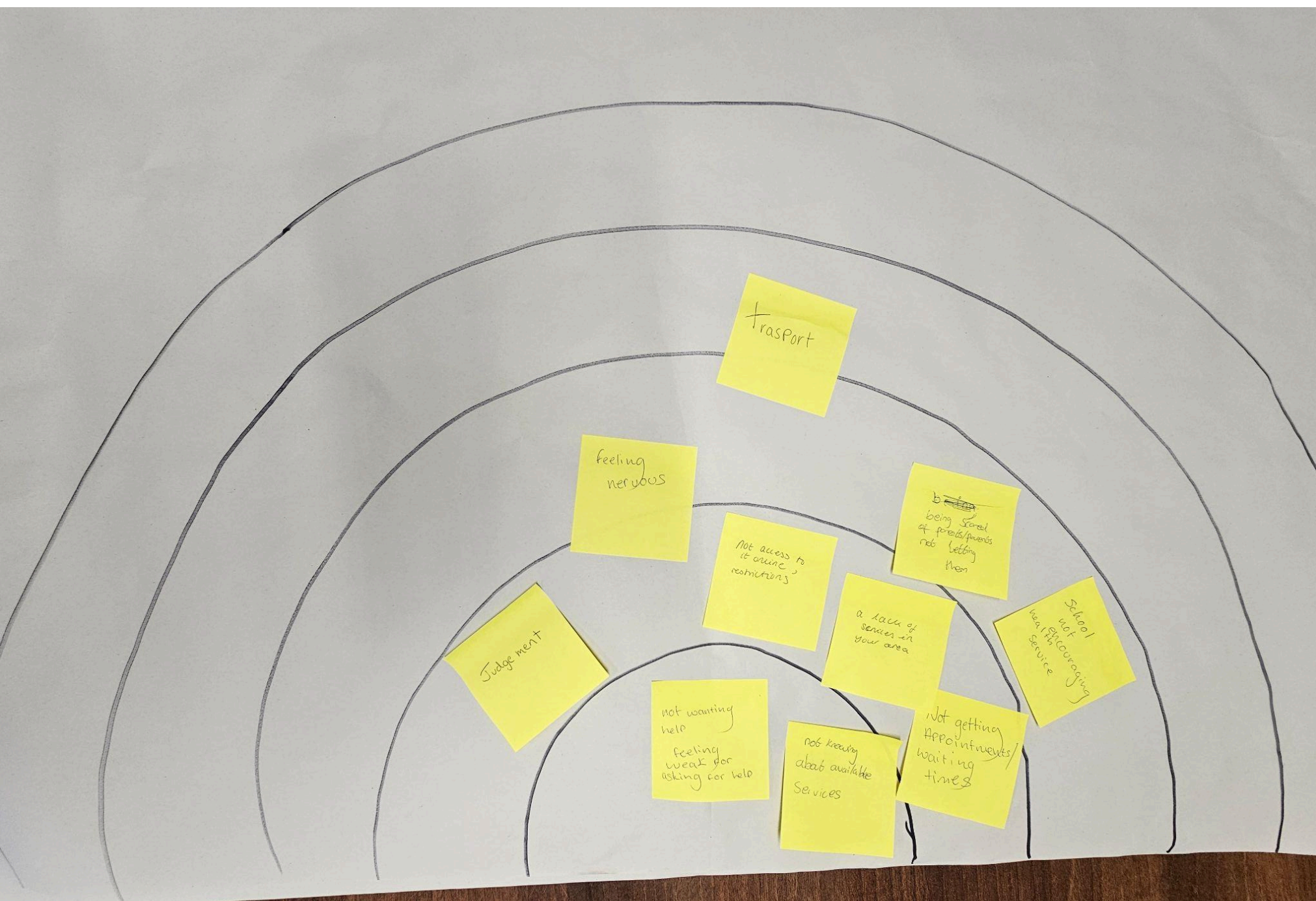
Language, eg. lack of words in some languages (Mental health doesn't have a word in some)

### **Quaternary reasons:**

Not taken seriously

Cultural reasons





transport

feeling nervous

not access to it cause restrictions

~~being~~  
being scared of parents/parents not letting them

a lack of services in your area

School not encouraging health service

not getting appointments/ waiting times

not knowing about available services

not wanting help  
feeling weak for asking for help

Judge ment



## Group 2

### Barriers to getting support with help

#### **Primary reasons:**

Not wanting help

Feeling weak for asking for help

Not knowing about available services

#### **Secondary reasons:**

Judgement

No access to it online, physical access restrictions

Lack of services in your area

Not able to get appointments / waiting times

#### **Tertiary reasons:**

Feeling nervous

Being scared of parents / Parents not letting them access it

School not encouraging health services

#### **Quaternary reasons:**

Transport

Internet

Fear of  
being  
judged

Wait times

Not  
Knowing  
Certain  
Services

Finances

Transport

Languages

Getting  
Appointments

## Group 3

### Barriers to getting support with help

#### **Primary reasons:**

Getting appointments

Transport

Languages

#### **Secondary reasons:**

Not knowing certain services

#### **Tertiary reasons:**

Wait times

#### **Quaternary reasons:**

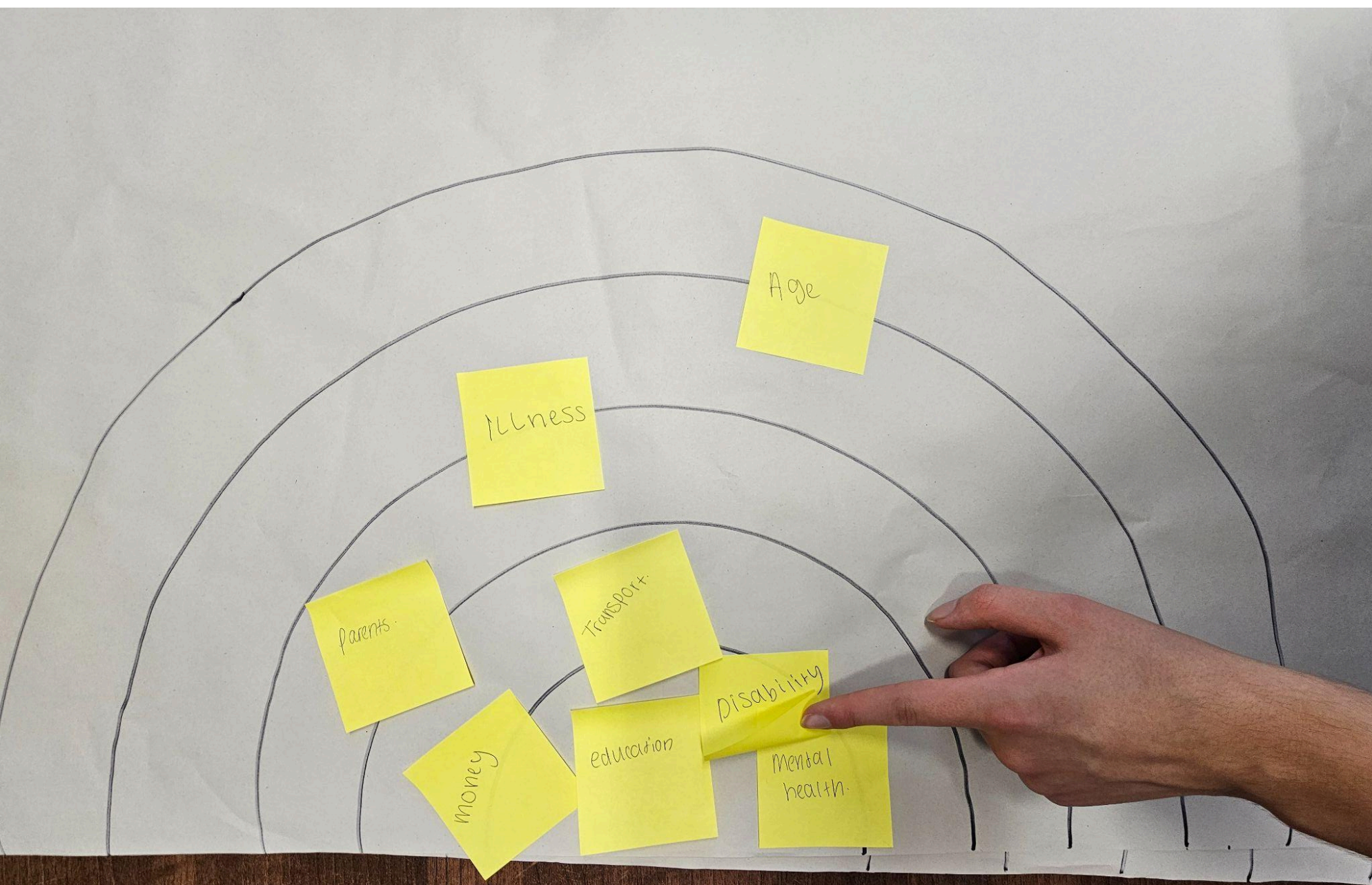
Fear of being judged

Financial reasons

#### **Quinary reasons:**

Internet







## Group 4

### Barriers to getting support with help

#### **Primary reasons:**

Education

Disability

Mental Health

#### **Secondary reasons:**

Money

Transport

#### **Tertiary reasons:**

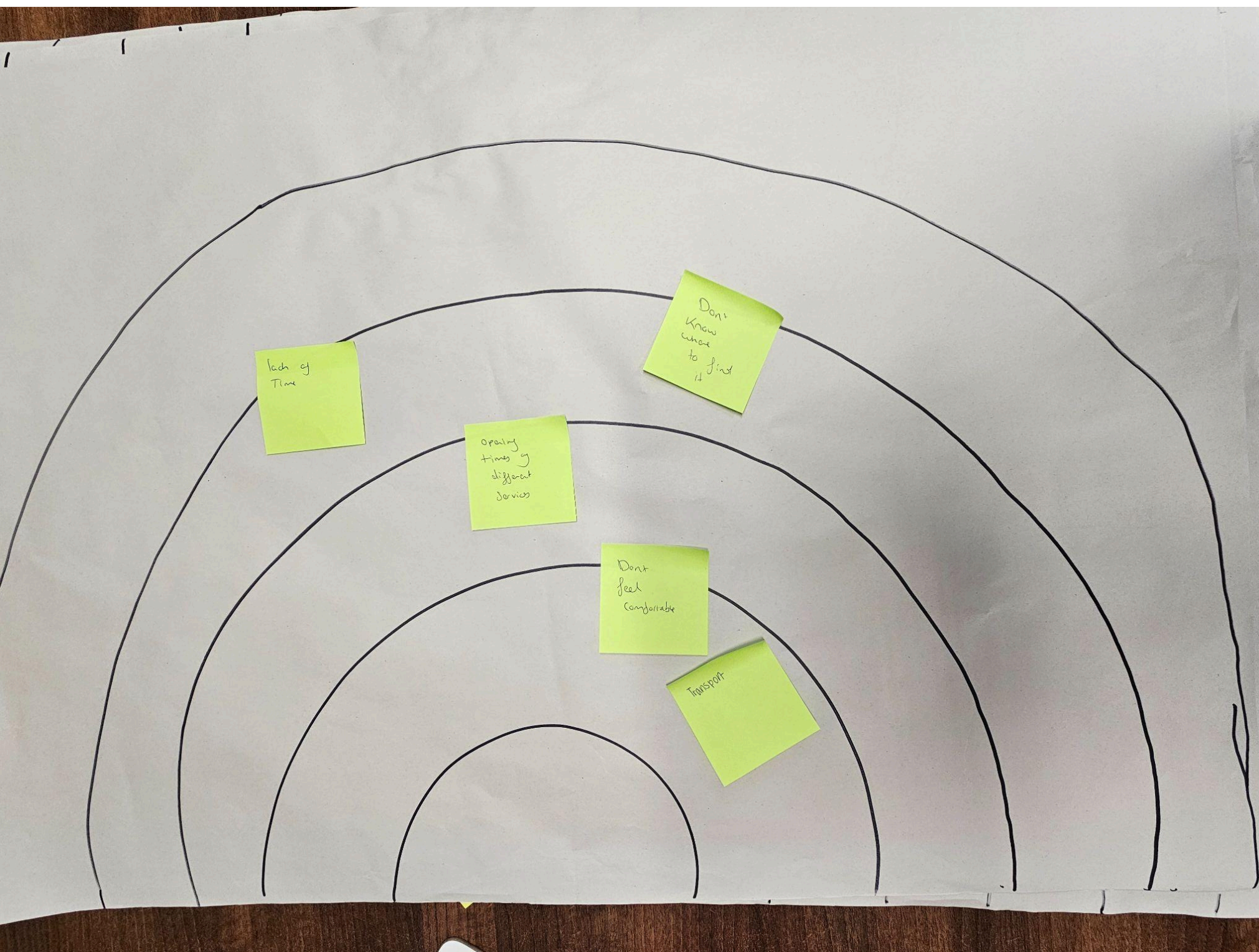
Parents

#### **Quaternary reasons:**

Illness

#### **Quinary reasons:**

Age



Lack of  
Time

Don't  
know  
where  
to find  
it

opening  
times of  
different  
services

Don't  
feel  
comfortable

Transport

## Group 5

### Barriers to getting support with help

#### **Primary reasons:**

None

#### **Secondary reasons:**

Transport

Don't feel confident

#### **Tertiary reasons:**

Opening times of different services

#### **Quaternary reasons:**

Lack of time

Don't know where to find it



Time taken  
for notes and layout  
Sept 10,

not having  
the support  
you need.

Language  
Barriers

The  
correct  
advice

money for  
transport



## Group 6

### Barriers to getting support with help

#### **Primary reasons:**

Money for transport

The correct advice

#### **Secondary reasons:**

Language barriers

#### **Tertiary reasons:**

Not having the support you need

#### **Quaternary reasons:**

None

COMMUNITY  
WORK

considering  
privacy, especially  
for things such  
as addictions &  
sexual  
health

Transportation

WAR

RURAL  
AREAS  
(CIVILIAN)

ANXIETY  
SOCIAL FEAR

Blog-48.

OPPRESSIVE  
PARENTS / ABUSIVE  
FAMILY

countries  
with few  
centuries  
with poor  
life quality  
(LIC)

pay  
becomes better  
to mental  
health

1. mental  
for feeling and thoughts  
Coping to

## Group 7

### Barriers to getting support with help

#### **Primary reasons:**

Countries with poor life advice

#### **Secondary reasons:**

Oppressive parents / Asylum seekers

War

Rural areas

Anxiety / Social fear

#### **Tertiary reasons:**

Transportation

Privacy and confidentiality

Break ups

#### **Quaternary reasons:**

Construction work

# Participant Demographics

Total  
45

Gender  
26 Female  
19 Male

Ethnicities  
4 Black African  
1 Black Caribbean  
8 Indian  
1 Other Asian Background  
1 Other White Background  
1 Other Ethnic Group  
17 Pakistani  
6 Prefer not to say  
2 White English  
1 White and Black African  
3 White and Black Caribbean



Ages

- 10 Years : 1
- 13 Years : 3
- 14 Years : 11
- 15 Years : 10
- 16 Years : 8
- 17 Years : 7
- 18 Years : 3
- 20 Years : 1
- 26 Years : 1

SEND

Disabilities

- 2 Mental Health Conditions
- 2 Learning Disabilities
- 1 Hearing Impairments
- 1 Hearing Impairment, Long standing illness or health condition