

Food & Healthy Lifestyles

What we heard from the Sudanese Community in Oxfordshire



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1 Executive summary

Background & Motivation

The motivation for this report is to help understand the current relationship between diet and exercise within the Sudanese community in Oxford, and to encourage individuals to maintain a healthy lifestyle.

This project was carried out by Nagla A R S Ahmed, as Community Research Volunteer at Healthwatch Oxfordshire. Nagla been actively involved in the Sudanese Community in Oxford for over 20 years, as well as supporting Oxford Community Action. The research and report were undertaken and written by Nagla with support of Healthwatch Oxfordshire.

As a community research volunteer for Healthwatch Oxfordshire, Nagla took part in a Community Participatory Action Research (CPAR) training and mentoring supported by Health Education England and Public Health England in the South-East. The rationale behind the CPAR training and mentoring programme was as follows:

“Throughout the COVID-19 pandemic, inequalities in health have become magnified amongst some Black, Asian and minority ethnic groups disproportionately affected. Public Health England’s report, “COVID-19: understanding the impact on BAME communities”, demonstrates the widening of existing health inequalities and makes 8 recommendations. Health Education South-East, working alongside Public Health England South-East are implementing a programme of work to support Recommendation 2: “Support community participatory research, in which researchers and community stakeholders engage as equal partners of the COVID-19”

The CPAR programme took place between April 2021 and March 2022 and focused on building participants' skills, awareness and understanding of community health,

community action research methodologies, and expanding their competence to conduct community action research (particularly among Black and minority ethnic communities). Scottish Community Development Centre delivered training and mentoring. Healthwatch Oxfordshire supported Nagla in her research throughout, including regular meetings, volunteer induction, data protection training and safeguarding check. Healthwatch Oxfordshire will also support Nagla with disseminating what she has learnt. Healthwatch Oxfordshire is an independent charity that listens to people who use health and care services. They make sure their voices are heard by decision makers in order to help improve the care people receive.

What is the report about & who did we hear from?

The Sudanese community in Oxfordshire consists of around 400 families including children, university students and working professionals many of whom have lived in the city for over 15 years. The COVID-19 pandemic has highlighted the disproportionate impact on infection and mortality rates of Black, Asian and minority ethnic groups in comparison to the white population [1]. Additionally, individuals from these groups are more likely to report negative experiences using health services and poorer health than their white counterparts [1].

This report aims to hear what members of the Sudanese community felt could improve their lifestyle through food and exercise as well as their relationship with health services in England. We know that maintaining a healthy lifestyle is challenging, lack of time, money, work and many other things make it difficult. Studies have shown that many health problems including (but not limited to); obesity, diabetes, high blood pressure, can be reduced by changing eating habits and an active lifestyle [4] [5] [6]. In some cases, this can be an alternative or decrease the amount of medication required for a person suffering with poor health.

Recommendations

After conducting research from members of the community, the findings show some actionable results that, if implemented can significantly help support the community (and beyond) achieve better health. For attention of local providers including Achieve Oxfordshire, Active Oxfordshire, Oxfordshire Public Health, Oxford Health, Oxford City Council.

A few key highlights include:

- Improve information sharing to support greater awareness of local support and services available for people with health problems including food banks. Better outreach and engagement and cultural awareness by local services with the community.
- For local services to develop more culturally appropriate and tailored information and support on healthy eating, activities and lifestyles, reflecting the needs of, and in partnership with Oxfordshire's diverse and multi-ethnic communities. This could include local cooking classes to teach different cultural and healthy meals, health information and use of social media, in different language formats etc. See for example videos made by Nagla herself for healthy cooking of Sudanese recipes <https://youtu.be/ZSctA-pZdBs> in Arabic with English translation
- Support access to more affordable and accessible healthy, fresh, cultural and organic food at local retailers, and addressing underlying drivers in the food system
- Prioritise more affordable and accessible facilities such as leisure centres to make it more accessible for everyone irrespective of income, and including supporting access and use of green space by communities

- Prioritise provision of single gender slots (men, women only sessions) in sports, swimming pools and/or gym timetables in order for individuals to feel more comfortable when exercising

What are your next steps or what difference can it make?

- Organise seminars and events by the local service advisers to educate people in the Sudanese community on the importance of living a healthy lifestyle and the consequences of not taking this seriously. Examples include [Oxfordshire County Council support](#) [7], [Community Diabetes Service](#) [8]. Better links to local services that can provide this support.
- Encourage people to go to regular GP / doctor health checks, particularly over 40s annually and over 50s biannually. Link to Oxfordshire Public Health to enable this to be promoted.
- Promote better awareness of local websites showing all the resources on local support available and regularly update this when things change for example Community Type 2 diabetes services. Ensure information is accessible and provided in community languages.
- Support development of community-based cooking classes to teach different healthy foods that can be made at affordable prices, and building on cultural recipes
- Share with Oxfordshire County Council Public Health to feed into their work on developing Whole Systems Obesity approach, and Oxfordshire Food Strategy and adding intelligence about needs of diverse and multi-ethnic communities.
- Share this report with Oxford City Council Leisure Services and Active Oxfordshire and others to help create regular, affordable fun fitness classes for people to join especially for older people. To advocate for support and offer of single gender classes

2 Why this topic?

Being a member of the Sudanese community, I have seen that many individuals are keen to start living a healthier lifestyle, however this can be challenging. Often social media advertises quick solutions such as weight loss surgeries or harmful diets as a solution to improving our health and wellbeing. Many people aren't aware of the side effects or upkeep of these solutions which can lead to dangerous outcomes such as risks of complications or repeat surgeries [9].

During the COVID-19 pandemic and lockdowns, health concerns increased significantly with people staying at home. Physical exercise decreased and many people resorted to unhealthy eating. We have also seen a rise in food banks and emergency food since the start of the pandemic, with families with children being hit the hardest [10]. Along with this, rising living costs make it difficult for people to afford good, healthy food. In December 2021 alone, inflation figures show that food costs rose by 5.4% impacting some of our everyday essentials [11]. Finally, the increase of technology usage over the past 20 years has had a direct effect in people's hobbies especially in reference to outdoor activities. These health problems are modern issues that are affecting, society, individuals and the government. Problems are rapidly increasing but we still have time to prevent further issues.

Obesity has risen dramatically in England's poorest neighbourhoods in recent years, expanding the gap between the poorest and wealthiest districts. Obesity in children has followed a similar trajectory. In Oxfordshire, approximately 1,400 children aged 4 or 5 were overweight or obese in 2017/18. Nearly 560 of these children (7.8% of the total) were obese, with 120 of them severely obese (1.7% of total) [12]. In 2019, the obesity rate differential between the most and least impoverished children in year six was 13 percentage points, up 5 percentage points since 2006 [2]. While the epidemic has touched the entire population, the impact is not evenly distributed.

The wider public health, social, and economic impact of coronavirus is likely to have a greater negative impact on the capability, opportunity, and motivation to be physically active for some groups over others, including women, people from lower socioeconomic groups, older adults, people with a long-term condition, illness, or disability, and people from some Black and minority ethnic communities – all of whom are still finding it difficult to be active [13].

Diabetes facts and figures [3]

- Diabetes affects more than 4.9 million people in the United Kingdom [14]
- African and African-Caribbean people are up to three times more likely to develop type 2 diabetes [14]
- In the UK, 13.6 million people are now at risk of developing type 2 diabetes.
- If you have a close relative with diabetes, you're more likely to develop type 2 diabetes.
- There are now 850,000 persons living with type 2 diabetes who have yet to be diagnosed.
- Research has consistently demonstrated that a combination of lifestyle treatments, such as nutrition, physical activity, and persistent weight loss, can reduce the risk of type 2 diabetes by roughly half in certain people.

Aims:

With this in mind, the research set out to find out:

- How we can prevent people from getting health problems
- How we can work together as a community to lead better lifestyles
- How serious people are in taking the step to improve their lifestyle
- How making simple changes can impact people's health in the long run
- What factors are preventing people from eating healthy and exercising
- Raise awareness with the local services and providers to support the Sudanese community to help reduce these health problems

Who did we hear from?

We wanted to hear from members of Oxfordshire's Sudanese community and in particular views from those:

- impacted by different health conditions or the family and friends of these people
- who want to live a healthy lifestyle but may not know how
- who want to help their communities live better, healthier lives

A few local experts and services in the fields of health and lifestyle that can work with the community to provide information and activity include: Good food Oxfordshire [15], Oxfordshire County Council support [7], Community Diabetes Service [8] During the research, Nagla was able to attend as an observer on Oxford Health Community Diabetic Service webinar on Type 2 Diabetes, and also meet with health professionals from the service to discuss better outreach to communities.

Who do we want to share the results with?

I attended the Oxford Health Community Type 2 Diabetes Awareness workshop as an observer. I will be feeding comments back to them on any insights, and potential to link to the Sudanese community to set up a specific session for them [16]. Other services that we plan to share the results with including:

- Local voluntary and statutory services including: Active Oxfordshire, Oxford Health Community Diabetes Service, Achieve Oxfordshire, public health and local councils, GPs and health professionals
- Oxfordshire Sudanese Community with findings and way forward
- Reporting via Healthwatch Oxfordshire to Health and Wellbeing Board, Health Improvement Board and others

3 What methods did we use and who did we hear from?

My role as a community researcher was to connect with members of the Sudanese community to understand their current lifestyle habits. Using existing relationships, we were able to liaise with individuals and conduct primary research such as interviews, a survey and observations. Most individuals were happy to communicate in English, however some preferred speaking in Arabic, which is the Sudanese native language. In this case, I was able to help translate the information collected.

I have been observing this topic for several months, however it was especially highlighted during the COVID-19 pandemic while I was volunteering with Oxford Community Action Food Bank. Here, I had the opportunity to meet with many individuals from different backgrounds who raised concerns about healthy eating, the lack of cultural options and maintaining an active lifestyle with the ongoing lockdowns. The next course of action was to carry out secondary research online to understand how local services in Oxford are supporting different communities. We were able to find articles and statistics such as those on the NHS website which detail the figures on conditions such as diabetes, high blood pressure, obesity and more [13] [14].

The interviews were conducted from May 2021 and consisted of telephone and face to face conversations. Here we were able to collect information, personal experiences and stories from individuals about their health concerns and lifestyles. The topics that were covered during these conversations included:

- Existing food options, food budgets and what different individuals consider to be healthy
- Exercising habits and local leisure centre facilities advantages and disadvantages
- Availability of local services that exist for the community to make the most of

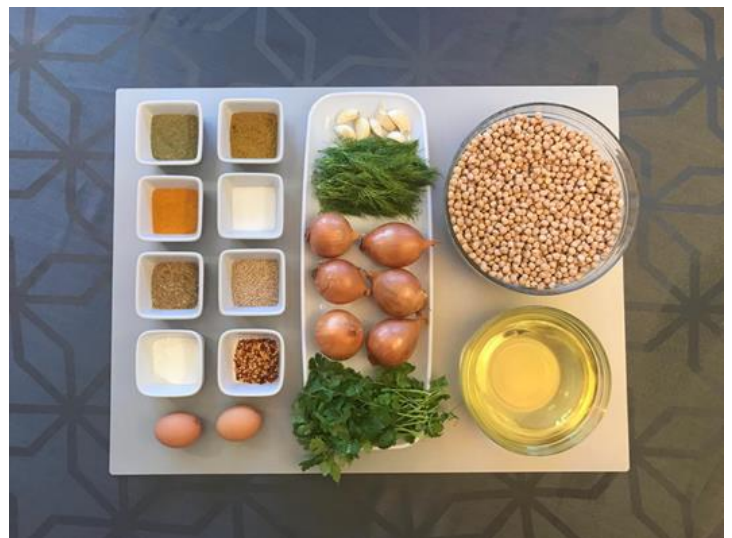
Current health problems, risks and concerns

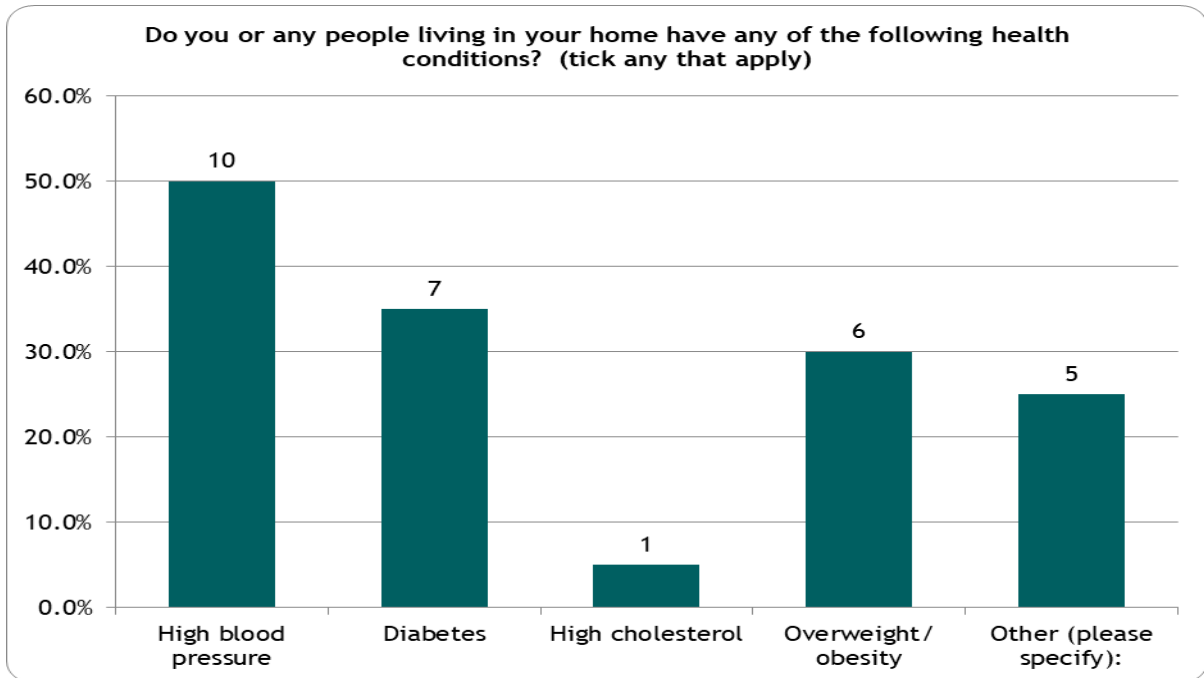
The survey was written after getting some background information from the interviews, it was conducted using an online survey tool and was also provided in paper format. It was promoted between October – December 2021 through local networks, word of mouth and social media. Reaching people and asking them to fill in the survey was challenging, and it took long time to gain responses. This was particularly difficult with restrictions under COVID-19. Usually, the Sudanese community meet socially on a regular basis, and this would have been the best way to get people to participate, but it was not possible at the time, making it difficult to reach individuals in the community. Although the survey was anonymous, some people mentioned being reserved when asked about sharing information on the survey. Since trust is essential and understanding why we were collecting information and / or how it will be used, it was extremely important that we made sure everyone who took part in the interview gave informed permission.

In total, 22 people took part from the Sudanese community in Oxfordshire

- 16 women, 5 men and 1 chose not to say
- 50% of individuals were between the ages of 25 – 49 years old

Within the Sudanese community, of 20 responses, as shown on the next page, a significant number told us they either have or are living with, individuals who suffer from high blood pressure, diabetes, overweight or obesity.





4 What did people tell us?

Views on keeping healthy:

We asked people to tell us about what things they and their family do to stay healthy (Q2). They told us about keeping healthy through eating well and taking regular exercise. After gathering the responses of the survey, we were able to consolidate some key findings that can help us begin to tackle the concerns that were raised.

- 63% of people said they try to exercise by going on walks, the gym or sports clubs, however the regularity ranged from daily to weekly.
- 50% of individuals mentioned eating healthy foods was important. Others were more specific referencing avoiding sugar, eating salads every day with meals and having a balanced diet.

What does good food mean to you?

We asked, "What does good food mean to you or your family?". People who responded generally showed good understanding of what makes a healthy diet. Comments include:

“Good food is cutting out salt, sugar and carbohydrates and highly saturated fat”

“I think local Sudanese food is healthy as it’s main ingredients are vegetables”

“Good food is healthy diet and balanced in nutrition contain protein,



carbohydrates, vitamins, I think the most important food is vegetables and fruits because it has most of minerals and vitamins and it will not increase your weight”

“Healthy eating habits the most important when we eat look at the nutritional value of our food and avoid fast food”.

“Fruit and vegetables, getting a balanced diet including protein and carbs. Eating healthy 80% of the time but being able to enjoy chocolates and snacks 20%”

“A balanced diet i.e., a mixture of carbohydrates, fruit, dairy, protein and a small amount of fats and sugars”

“Organic food, fruit and vegetables”

“Less sugar and salty food”

What physical activity do people do?

When asked what type of exercise individuals prefer to do, of 19 responses, 18 said they like to go walking. Other responses included cardiovascular work outs, team sports and swimming. Women were more likely to prefer walking.

Impact of COVID-19 on health and wellbeing

Given that the COVID-19 lockdowns and pandemic have had significant impact on the daily routines for many of us, we asked those surveyed to share issues and concerns about health and wellbeing of them and their families during this period.

A few concerns included; high levels of isolation, stress & loneliness, increase in binge or unhealthy eating and decrease in physical activity. Other comments raised were:

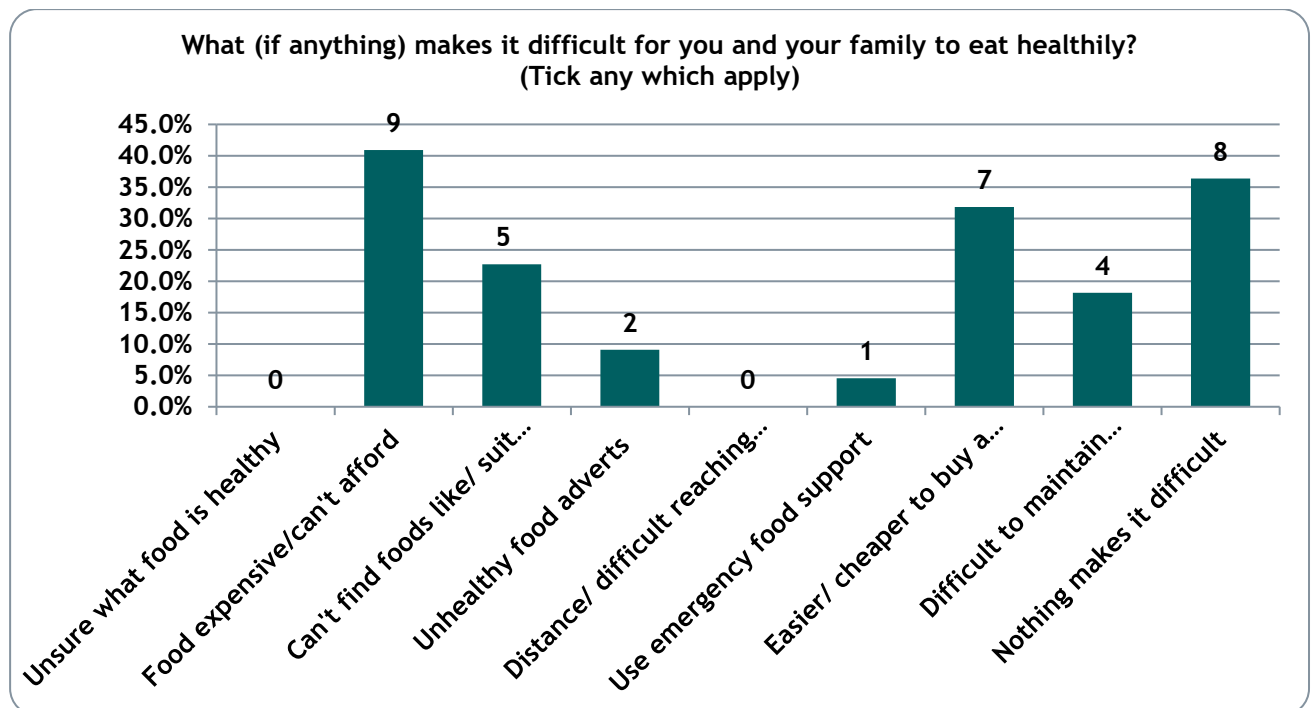
- *"Stress and obesity because we can't do anything outside"*
- *"The isolation, not being able to go out and mix with people"*
- *"Less physical activity" "Staying in more and being less active daily"*
- *"Comfort eating"*
- *"Getting sick and not getting enough fresh air or vitamins since we avoid going out when possible"*

What if anything makes it difficult for people to live a healthy lifestyle?

People told us about what they preferred to do to keep healthy. We also asked them about what makes this difficult to achieve, and to tell us about any barriers they face.

What (if anything) makes it difficult for you and your family to eat healthily?

There were 22 responses, and the graph below helps to illustrate the answers given.



No respondents indicated the uncertainty about what food is healthy, and 8 told us that *“nothing makes it difficult”* to eat healthily. However, others told us about some of the challenges faced when trying to maintain a healthy diet. Of the respondents:

- Cost was a factor for 9 who told us that healthy food was *“expensive or I can’t afford it”*.
- One told us they make use of emergency food support. *“Canned foods are cheaper than fresh food. It should be more affordable”*
- 7 told us that less healthy food was cheaper or easier, *“it’s easier or cheaper to buy a fast-food takeaway”*
- Lack of culturally acceptable foods was also noted, with 5 saying *“I can’t find the foods that I like/ suit my cultural needs”*

People gave suggestions as to what might help, including support with healthy meal planning, more affordable food, and availability of cultural foods:

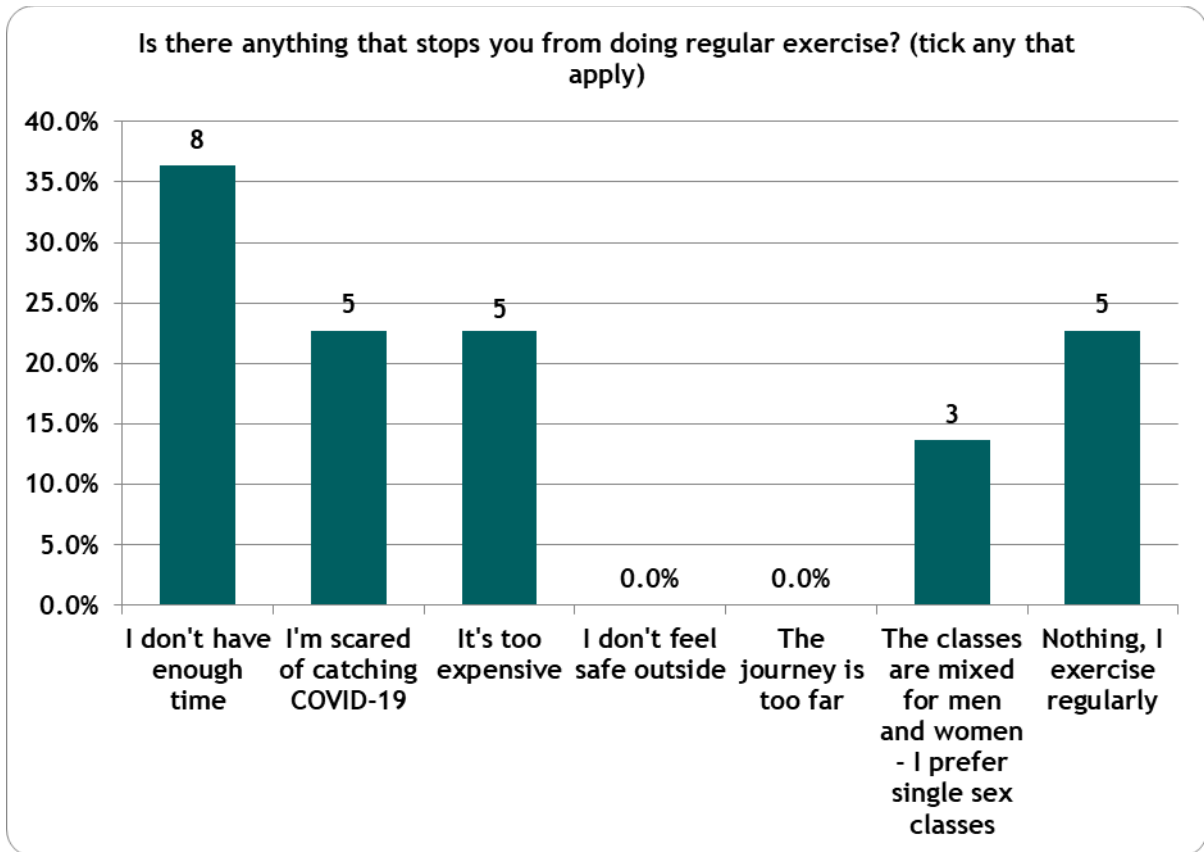
- *“If there is a business of preparing local Sudanese food with delivery services that would be very helpful as it makes it easier for people with busy work schedules not to depend on fast food take away”*
- *“Finding cheap cultur(al) and organic food”*
- *“More advertising about health food types”*
- *“When people plant in their garden different types of fruit and vegetables”*



Is there anything that stops you from regular exercise?

We asked people to tell us about anything that made it difficult to make regular exercise. Whilst some saw no barriers, comments indicated that maintaining a routine, linking up with friends, and developing self-discipline could help with exercise. One respondent noted they like to *“Set a goal in mind, try to be motivated, go with friends”*.

Out of 22 responses, lack of time was most cited (8 responses), followed by fears of COVID-19 (5 responses), and concerns about the cost (5 responses), as shown on the figure below.



Three people told us that they would like to have a choice of single sex sessions, with comments indicating lack of this was a barrier to taking exercise in organized settings.

- *"Finding exercise class and swimming in my area for women only"*
- *"To find not mixed cheap exercise class in my area"*
- *"I like swimming but prefer single not mixed sessions"*

When later asked to suggest improvements, comments reiterated these themes:

- *"To provide non mixed swimming pools and exercise class in the area"*
- *"Not mixed place of swimming and exercise in the area"*
- *"More gym and exercise classes that are affordable"*

Support & advice

We were interested to hear about recommendations of members of the community themselves. We asked those surveyed what type of advice or information they would like to help them keep healthy; responses include:

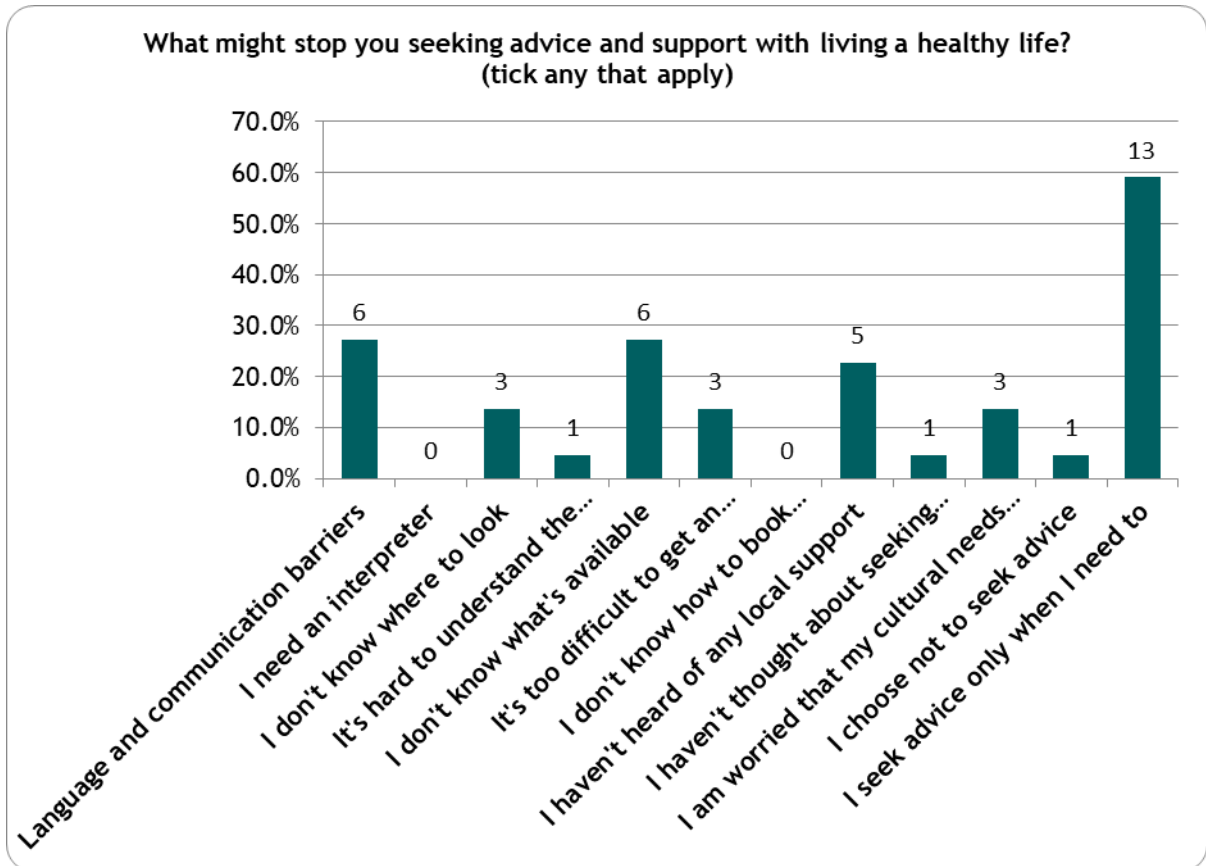
- Information on more affordable gyms and healthy food
- Requesting the local leisure facilities to offer more single sex sessions (e.g., swimming, sauna, gym)
- Information on the benefits of different nutritious foods and possibly how to cook them

A few quotes include:

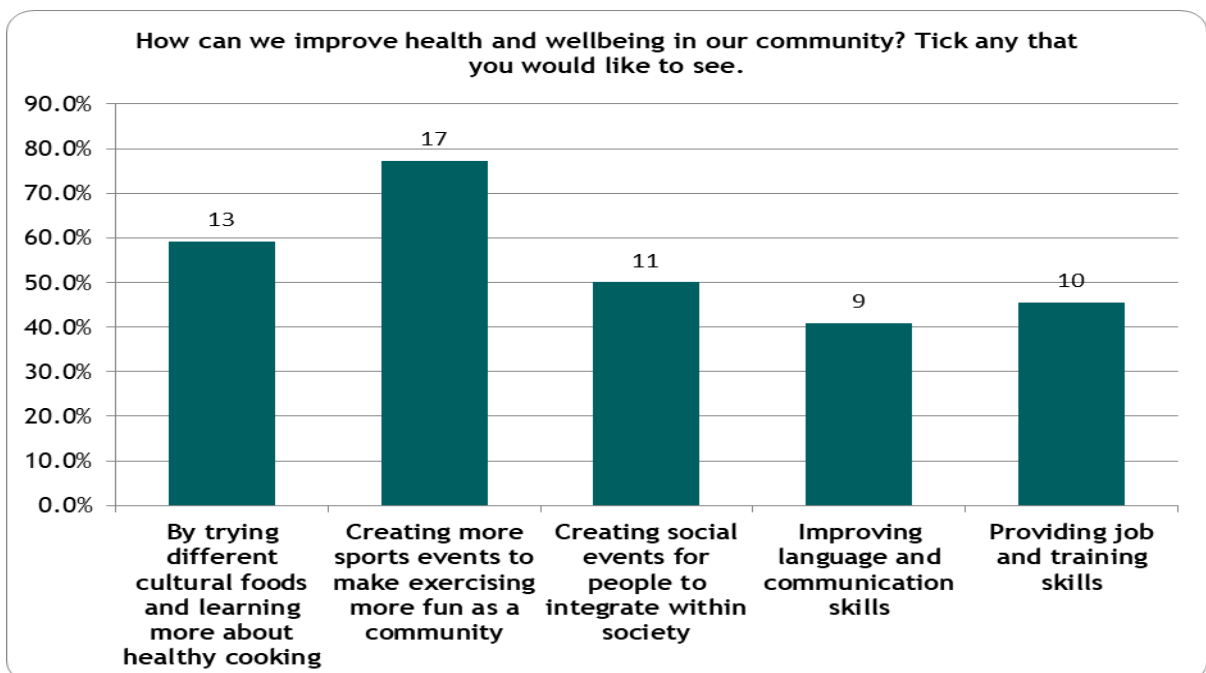
“Certain GP reluctant to prescribe, feels like bias, that she thinks I came here to get benefits and everything for free, judging me with a negative stereotype about my race, faith and dress”

“People may assume that I don’t understand even if I do and it can be patronising”

These responses show while individuals in the community are keen to make use of local facilities, some feel that these may not be accommodating their needs. This also shows the lack of communication and cultural awareness within existing services aimed to provide information and communities who seek this information. Out of 22 responses, when asked if race or ethnicity has impacted the way they are treated or the advice received from a medical professional, 5 said they felt they were treated negatively. One respondent mentioned feeling discriminated against due to their *“race, faith and dress”*, this indicates a need for education within different communities and integration amongst people with different cultures and backgrounds.



Finally, we asked people to give their own ideas as to how health and wellbeing could be improved in the community. Comments highlighted importance of language and communication in accessing advice and support, importance of community activity and sport, and need for support to be culturally appropriate:



"Language and communication is important for expressing views and urgent needs and also for knowing where to find health and advice"

"Improving language and communication skills is very important to understand about all you need to know"

"Trying different cultural foods as it is inclusive which is important"

"Creating social events for people to integrate within the community to help to understand other cultural need"

Stories

Thank you Nagla

I'm one of candidates who filled your questionnaire I have high blood pressure which I discovered accidentally ten years back unfortunately at that time I had no any advice from my GP apart from giving me medication so I started to gather the information from the internet regarding reducing weight eating healthy diets and others so my advice to anyone after forties and fifties

1-regular health check. 2- weight watch and 3- healthy foods

It is very inconvenient that there are no single sex gyms, leisure centers or swimming pools in Oxford or at least days or hourly slots that I can attend with my kids. My daughters and I really enjoy swimming, however we don't feel comfortable going to mixed gyms. We were told that one of the leisure centres has women and girls only classes, but when we arrived there were male life guards which defeats the point. Please can this be made a priority to the council since many of friends and colleagues have shared the

5 Next Steps / Recommendations

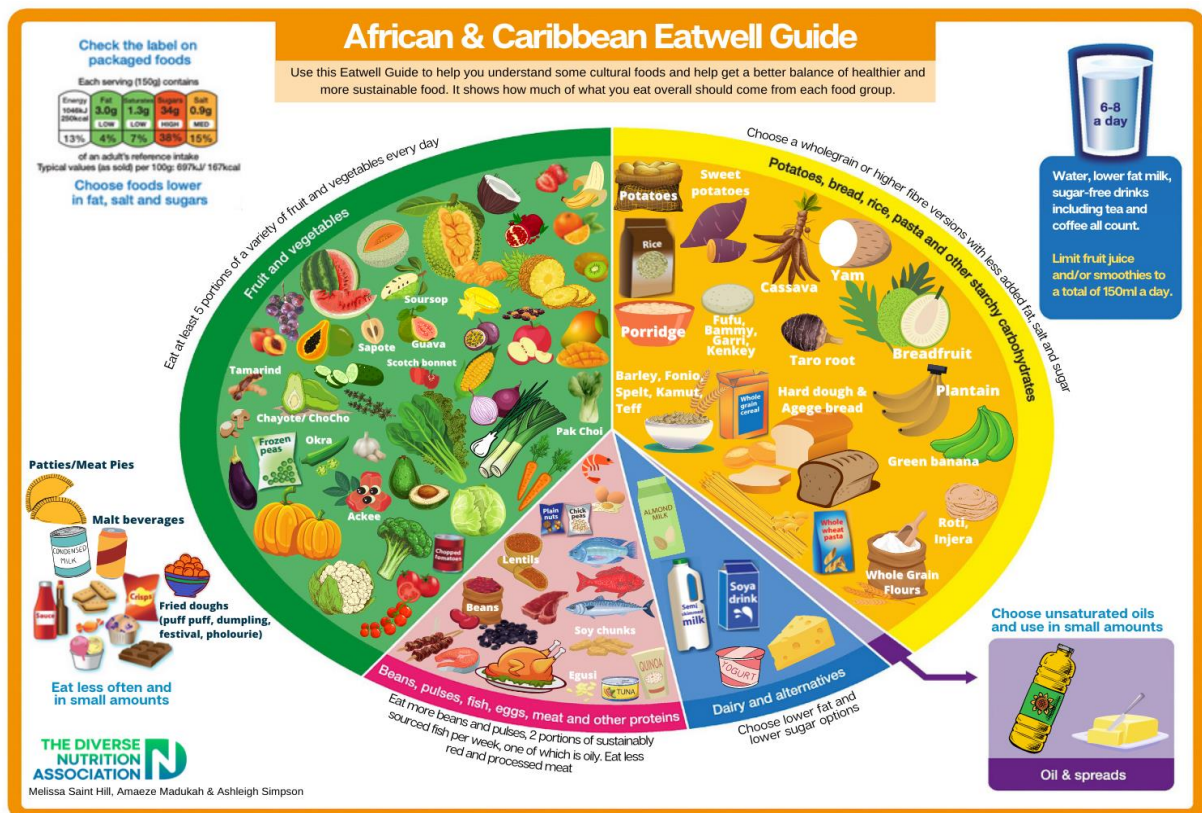
After conducting research from members of the community, the findings show some actionable results that, if implemented can significantly help support the community (and beyond) achieve better health. For attention of local providers including Achieve Oxfordshire, Active Oxfordshire, Oxfordshire Public Health, Oxford Health, Oxford City Council A few key highlights include:

- Improve information sharing to support greater awareness of local support and services available for people with health problems including food banks. Better outreach and engagement by local services with the community.
- For local services to develop more culturally appropriate and tailored information and support on healthy eating, activities and lifestyles, reflecting the needs of, and in partnership with Oxfordshire's diverse and multi-ethnic communities. This could include local cooking classes to teach different cultural and healthy meals, health information and use of social media, in different language formats etc. Support for access to more affordable and accessible healthy, fresh, cultural and organic food at local retailers, and addressing underlying drivers in the food system

- Prioritise more affordable and accessible facilities such as leisure centres to make it more accessible for everyone irrespective of income, and including supporting access and use of green space by communities
- Prioritise provision of single gender slots (men, women only sessions) in sports, swimming pools and/or gym timetables in order for individuals to feel more comfortable when exercising

6 Acknowledgements & supporting material

Thanks to all in the Sudanese Community in Oxfordshire who shared their views. Thanks too to Scottish Community Development Centre, Oxford Community Action, and Health Education England.



Source: Public Health England in association with the Welsh Government, Food Standards Scotland and the Food Standards Agency in Northern Ireland

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(Diverse Nutrition Association)

7 References

- [1] <https://www.kingsfund.org.uk/publications/health-people-ethnic-minority-groups-england>
- [2] NHS Digital 2020b) <https://www.kingsfund.org.uk/publications/tackling-obesity-nhs>
- [3] <https://www.diabetes.org.uk/professionals/position-statements-reports/statistics>
“Understanding the impact of COVID-19 on BAME groups” report
<https://www.gov.uk/government/publications/covid-19-understanding-the-impact-on-bame-communities>
- [4] <https://www.nhs.uk/conditions/obesity/causes/>
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- [6] <https://www.nhs.uk/conditions/high-blood-pressure-hypertension/prevention/#:~:text=High%20blood%20pressure%20can%20often,in%20moderation%20and%20not%20smoking.>
- [7] <https://news.oxfordshire.gov.uk/small-lifestyle-changes-can-make-a-difference-to-mental-wellbeing/>
- [8] <https://www.oxfordhealth.nhs.uk/community-diabetes/>
- [9] <https://www.nhs.uk/conditions/weight-loss-surgery/risks/>
- [10] <https://www.trusselltrust.org/2020/09/14/new-report-reveals-how-coronavirus-has-affected-food-bank-use/>
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- [12] <https://insight.oxfordshire.gov.uk/cms/child-obesity-jsna-bitesize-2019>
- [13] https://mycouncil.oxfordshire.gov.uk/documents/s52827/Item%2013%20-%20HIB_Reducing%20Inactivity_Active%20Oxfordshire_10.09.20_%20FINAL.pdf
- [14] <https://www.diabetes.co.uk/diabetes-and-ethnicity.html>
- [15] <https://goodfoodoxford.org/>
- [16] <https://www.oxfordhealth.nhs.uk/community-diabetes/>
- Scottish Community Development Centre <https://www.scdc.org.uk/>
- Oxford Community Action <https://oxfordcommunityaction.org/>

8 Local services to support health and fitness

Active Oxfordshire: www.activeoxfordshire.org

Get Oxfordshire Active: www.getoxfordshireactive.org

Achieve Oxfordshire (weight loss support): www.achieveoxfordshire.org.uk

Health Walks in Oxford:

www.oxford.gov.uk/info/20278/sports_and_physical_activities/725/health_walks_in_oxford

Oxfordshire MIND Mental health support and Walking for Wellbeing:

www.oxfordshiremind.org.uk/walking-for-wellbeing

Oxfordshire MIND guide of mental health support: www.oxmindguide.org.uk/directory

Talking Space Plus mental health support: www.oxfordhealth.nhs.uk/talkingspaceplus

Community Type 2 Diabetes Service: www.oxfordhealth.nhs.uk/community-diabetes

Links to Health and Wellbeing support: www.oxfordshire.gov.uk/residents/social-and-health-care/public-health-and-wellbeing

Quit Smoking Oxfordshire (Stop for Life) www.stopforlifeoxon.org

Good Food Oxford: www.goodfoodoxford.org

National

Diverse Nutrition Association: www.diversenutritionassociation.com

Diabetes UK: www.diabetes.org.uk

NHS Healthy lifestyle support: www.nhs.uk/better-health/lose-weight

Healthwatch Oxfordshire our friendly staff are here for you to help answer questions or give you information on health and care services in Oxfordshire. If you need more information or advice call us on **01865 520 520** from 9-4 p.m. Monday to Friday

Visit our website www.healthwatchoxfordshire.co.uk (with translation facility)

email us on hello@healthwatchoxfordshire.co.uk

Healthwatch Oxfordshire ami-nia simpátiku funsionáriu sira iha ne'e atu ajuda hodi hatán pergunta sira ka fó informasaun kona-ba servisu asisténsia no saúde nian iha Oxfordshire. Se Ita presiza informasaun ka orientasaun barak liu tan entaun telefone ami iha **01865 520 520** husi tuku 9 dader to'o tuku 4 lokraik, Loron Segunda to'o Sesta.

Vizita ami-nia sítiu www.healthwatchoxfordshire.co.uk (ho facilidade tradusaun)

haruka email mai ami iha hello@healthwatchoxfordshire.co.uk

ሄልዝዎች ኦክስፎርድሺር (እኛ) ተግባቢ ባልደረቦች አሉን፤ ጥያቄዎቻችሁን በመመለስ ለመርዳት እንዲሁም በኦክስፎርድሺር ውስጥ ስላሉ የጤናና የእንክብካቤ አገልግሎቶች መረጃ ለመስጠት የሚችሉ ናቸው። ተጨማሪ መረጃ እና ምክር ቢያስፈልጓችሁ በስልክ ቁጥር **01865 520 520** ደውሉልን፤ ከሰኞ እስከ አርብ፣ ከጥዋቱ 3 ሰዓት እስከ ቀኑ 10 (9 ኤም - 4 ፒኤም) ጥሪ እንቀበላለን። ደግሞም

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