

Access and interaction

Navigating the health system in the UK

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Understanding UK health services

- ➔ Wide range of experience of health services
- ➔ Language barriers
- ➔ Brokerage of information by intermediaries (family and friends from own community, workplace, third sector organisations)
- ➔ Wide range of expectations

‘In fact when I came here it was a contrast [to what] I saw in Sudan. I went to this charity organisation and was referred to register with a doctor, which is something we don’t have in Sudan. It took me a number of months to know and understand so many things here in UK. Because of my limited English language, I am just like a deaf person. I couldn’t watch the TV because it is all in English and the only place where I became aware of health and well-being was when I went to the Community Centre in X. That’s where I was able to get some health and wellbeing leaflets written in Arabic language, and also when my flat mate and I were invited to take a health and wellbeing awareness workshop at the Refugee and Migrant Centre in X, facilitated in English and interpreted from English to Arabic and Tigrinya.’ (Sudan)

To be honest I cannot really say for sure what the (GP) role is. I know they are kind of first contact doctor, but that's about it. They are the first person to contact when something is wrong, but I'm not sure where to go if I want new glasses or regular gynecological check, or when my bones are broken or something like that, or when there is something wrong with my belly, I don't know how to access the specialist. I don't know how it works here. (Poland)

Here first you have to go to your GP and your GP, I don't know ... will send you to the hospital and ... I asked what is the way to pay for a private doctor to see my child. He said there is no way and like other people, if your child is very poorly, you have to go to the Children's Hospital and sit in the queue and get your child seen ... in this time all in all when my son and I have been ill maybe four or five times, we have gone to the GP and only to find a path to the hospital, to go on the list. (Iran)

Access to health services

➔ Largely dependent on migration route and existing family/ community links

‘At the Chinese Community Centre in London, they said you have to register with a GP - only after registering with a GP you can see doctors when you are ill.’
(China)

‘The best thing we have as asylum seekers is that we are registered to a GP. I have not had any problem with my GP or getting information about health.’ (Ivory Coast)

‘My friends showed me nearest GP surgery and I just went to register there. They explain that here, you go to GP with everything, so it kind of makes it easier, you don’t have to think which specialist you need referral to which is not like in Poland. But, from the other hand, you don’t really get to see specialist here.’
(Poland)

‘We were asylum seekers and had to register with a GP. We had a support worker, she did everything for us. She took us to the GP and registered us.’ (Iran)

‘I arrived in the UK when I was three months pregnant. They checked me and the following day, they took me to the hostel where I find a nurse, who looked after me. She is the one who gave me a letter when I moved to Birmingham and I took it to the GP, so that they could follow me up until I had my baby.’ (Rwanda)

Prevention

- Leading a healthy life (eating fresh fruit and vegetables, avoiding smoking, alcohol and drugs, cleanliness, fresh air, clean living spaces, enough sleep, parks and trees)
- Peace and freedom from violence
- Screening
- Immunisations
- Avoiding stress important for both physical and mental health

‘Many people have told me about health and well-being as it is important to keep me fit and healthy while here in England. I am also being advised by the nurses and staff from the migrant centre about eating unhealthy foods ... I am attending English classes at this centre. Two of the instructors are multilingual and were able to speak Arabic. They also use leaflets and pictures about health and wellbeing during the workshop.’ (Sudan)

We speak about this quite often with my friends about how to exercise, and about food, how it affects our bodies, we discuss different diets. I think these days a lot people are aware of that, and there are different styles, different approaches to the healthy lifestyles. But actually we never talk about mental health. (Poland)

The number one thing that will lead to good health and wellbeing to me is peace of mind and grant of refugee status or indefinite leave to remain in this country. These are the things that are constantly ringing in my mind and affecting my health and well-being. Any time I receive a letter from the Home office or my solicitor, I always feel sick and worried that I would be deported or denied the status in this country. (Somalia)

Seeking help for health problems

Emergency Department or 999

'My son wasn't very well, he was crying and I checked his temperature, and it was a little bit high, so I gave him children's Paracetamol. However in the night, his health became worse and we had to take him to emergency services.' (Pakistan)

Primary Care, mainly GP

'I know how to take care of myself. And if I didn't feel well I have to take care of myself and have to go to my GP or surgery or walk in centre.' (Somalia)

Internet based resources,
pharmacist

'If it is just a common thing like for example a sore throat, or if it would be something like headache, I would just go to the pharmacy to ask for some remedy.' (Poland)

Informal help and advice from
family, friends from own
community, community centre

'People (in my community) do talk to each other. And if you say I have a stomach pain you get advice on herbal remedies.' (Iran)

Interaction with healthcare professionals

- Language and communication
- Expectations of compassion
- Expectations of transaction
- Gratitude

‘If it is small things it is OK (without the translator); if it is serious illnesses, if the translator is not there my heart will beat quicker (meaning nervous and stressed). If the translator can be there (in the clinic with the GP) I will feel more relaxed, don’t have worry about things.’ (China)

‘Once when I went to the hospital for an Xray someone came to give me information, I couldn’t understand what they were saying. So I said talk slowly and repeat and she became very angry and shouted. If you don’t speak English you get a very bad reception here.’ (Iran)

'I think that the doctor's first job should be to talk to you in a patient and positive way; because compassionate approaches can half make you better!'(Pakistan)

'Talking to the GP, the attitude of the GP is very good. For example if I cannot understand him, I tell him I cannot understand, then he will explain to me again in the simplest language, explain to me slowly. After he explained two to three times, more or less I can understand.' (China)

'You see here in my opinion is that you really have to inflate how are you are for them to care. If you just go and say I have a pain here from start to finish you get a Paracetamol. They won't do anything else for you ... and generally [you have to] big everything up until they care.' (Iran)

He said when you go to the surgery the doctor will see you only for one illness and only for a short time. If you tell him/her that you have headache, he/she will ask you to buy paracetamol over the counter. And if you ask them to prescribe you antibiotics, they will not give it to you, and say it will not be good for your health. He said that's what needs to be improved, but otherwise, everything else is very good. (Somalia)

'The best thing we have as asylum seekers is that we are registered to a GP. I have not had any problem with my GP or getting information about health.' (Ivory Coast)

I don't have much to say except thanking those who took care of me when I was pregnant and when I was in hospital. I will never have the words to express my thanks. (Rwanda)