



Cost of living CHECK-IN

October to December 2022

A summary of what we heard from community groups and people in Leeds from October to December 2022 as part of the “Check In” engagement work. We were interested to find out about how rises in the cost of living affect people’s health and wellbeing.

Your
healthwatch
Leeds

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Check-in reach

We posted a link to our questionnaire via our social media and went out to speak to people in various groups:

- Carers Leeds carers' support group (Horsforth, Cross Gates, Pudsey, Belle Isle parent carers)
- Gipsil Voice and Influence group (young people who are homeless or with housing needs)
- Lychee Red (Chinese older people)
- Better Action for Families (families and family carers of adults with learning disabilities)
- Different Strokes (people recovering from stroke and their families)
- BAME Hub

The key themes below have been taken from all the responses we received online and from individual surveys with group members.

In total, we received

91

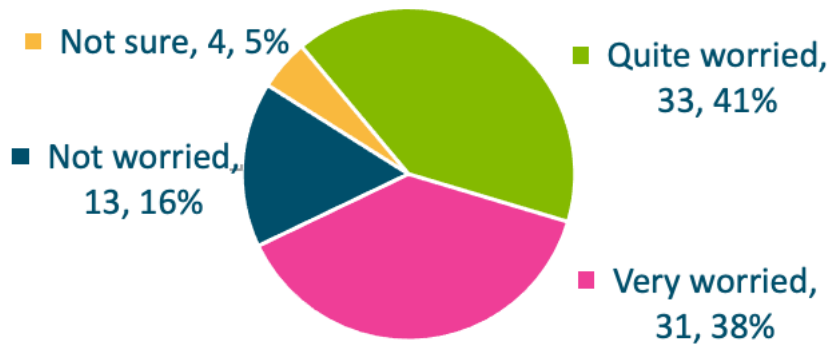
responses.

Findings from the survey

81 people answered the following question: “How worried are you about the way rising prices will affect you over the next few months?”

They were asked to choose between the following options: “I’m not worried”, “I’m quite worried”, “I’m very worried” and “I’m not sure”.

How worried are you about the way rising prices will affect you over the next few months?



- 41% said they were “quite worried”
- 38% were “very worried”
- 16% said they were “not worried”
- 5% weren’t sure

People told us that the increased cost of living has negatively impacted their ability to access health services, ability to manage their own or others’ health conditions and negatively impacted the health and well-being of people who would usually be considered healthy.

Digital access

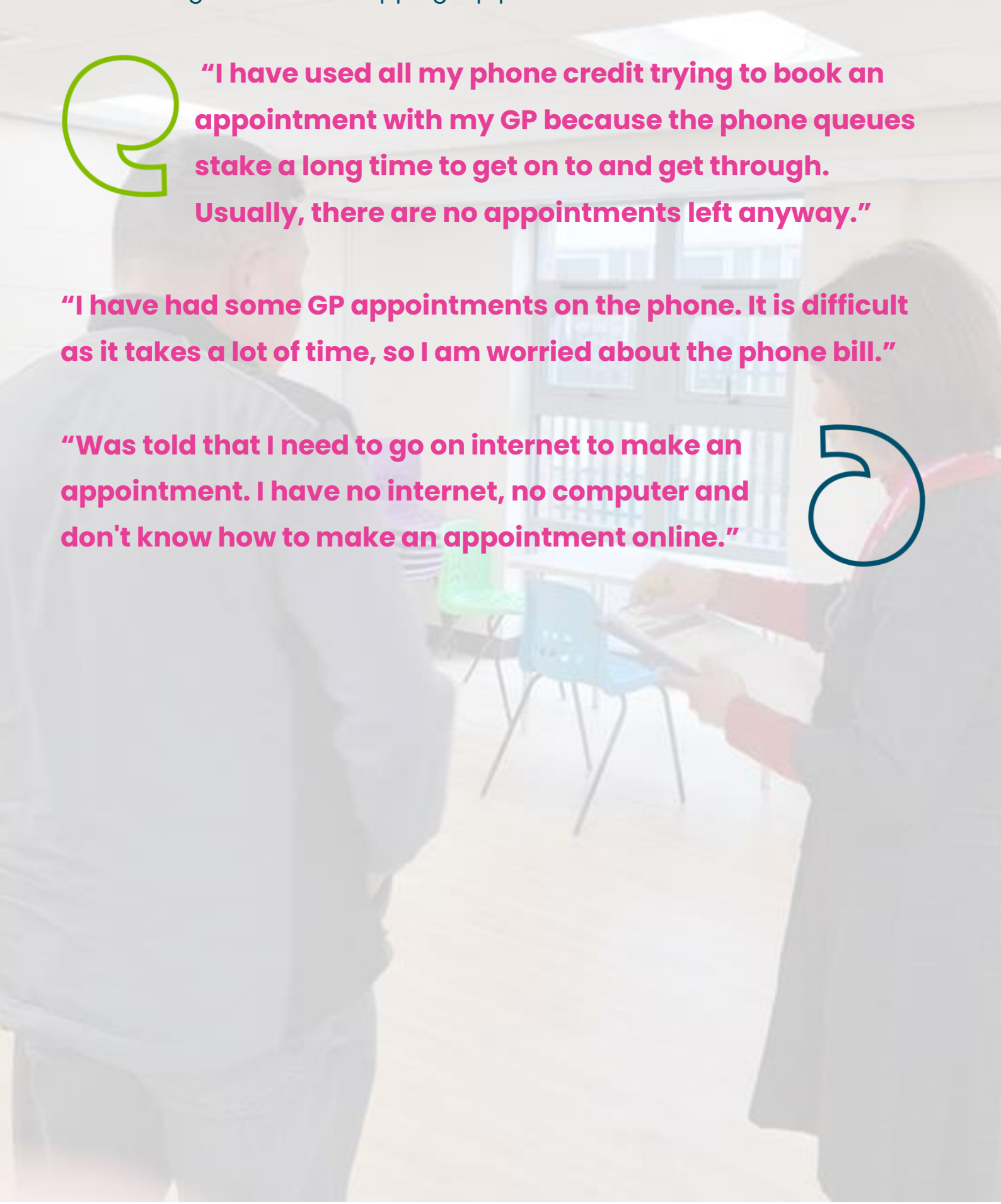
Not everyone can afford a computer or smartphone which is a barrier to booking GP appointments online. There is also an added cost of maintaining use such as topping-up phone credit to make calls.



“I have used all my phone credit trying to book an appointment with my GP because the phone queues take a long time to get on to and get through. Usually, there are no appointments left anyway.”

“I have had some GP appointments on the phone. It is difficult as it takes a lot of time, so I am worried about the phone bill.”

“Was told that I need to go on internet to make an appointment. I have no internet, no computer and don't know how to make an appointment online.”



Transport


Some people are unable to attend appointments because of the cost of travelling to get there. The rise in fuel costs has meant that people are reluctant to drive and use expensive public transport. Students in particular travel further than others depending on whether they are registered at home or a GP practice near the university housing and where they are residing at the time. One person said they only book online because of the cost of travel.



“I won’t go for medical appointments unless essential due to cost of public transport”

“I find it expensive to drive my mum to her hospital appointments and pay for parking. It comes out of my own pocket, but it is the only way my mum can get to appointments because of mobility issues.”

“I am a student registered in Leeds and I went home over the summer and had to travel back to Leeds to get a lump checked in my breast. Because of planning travel and trying to book an appointment, it all took a long time, and I could have been seen sooner.”



Treatment

Some people are reducing the frequency of treatments that they must pay for due to the costs. People told us dental treatment is very expensive. Through our information, advice and signposting service we heard people talk specifically about how they are unable to find an NHS dentist and cannot afford to go private, people registered with an NHS dentist but are being offered private treatment and people who have little to no income wondering if there is any financial support for NHS dental treatment prices.



“I’ve been trying to get into a dentist for such a long time now & I’m not getting anywhere, everyone I speak to is private & asking for £50 to see me, I don’t have that kind of money”

“I’m needing root canal treatment, but no dentist is taking on NHS patients. I can’t keep affording to pay £24 a time for the emergency dentist to tap on my tooth and tell me I need root canal. Then have to go pay £18 for antibiotics that don’t work.”

“I pay for an osteopath treatment monthly but may have to reduce frequency. Cost has just gone up”



Prescriptions

The cost of prescriptions has gradually risen and those who need multiple prescriptions are finding the cost to be too much. Some are thinking of prioritising one medication over another.



“Struggle to get Calpol for kids”.

“I am concerned about the possibility the NHS will not take on my shared care agreement for my ADHD meds, if this happens to me I will be unable to afford medication, therefore, impacting my health even more, making work almost impossible.”

“I would like to afford my medication but refused to pay for an inhaler for Asthma, a condition I have had all my life.”



Food

Many people told us they had noticed food prices going up. We heard from different people that they are:

- Reducing the food, they buy to the minimum.
- Struggling to buy fresh fruit and vegetables.
- Prioritising feeding their children and reducing their own meals.
- Buying food that will be filling first and foremost, rather than nutritious or tasty.
- Avoiding using gas to cook food.

Occasionally, people – younger people in particular – told us they were choosing to get takeaways rather than turn on the oven. We have also heard concerns from one person about their medication being less effective because it needed to be taken with food, something they cannot afford.



“Priced out of healthy options, local shops are expensive.”

“Food of a lot lower quality. Not much protein.”

“Having to buy more frozen food and prioritizing my toddler's healthy food over my own. Going without fruit and veg so that my toddler can still have it. Unable to afford a gym membership and lack energy due to poor eating. Unable to pay for prescriptions at the moment.”



Heating

People told us they are limiting their use of heating at home. This is affecting people's mental health as their home is no longer a nice environment to live in and impacts people's physical health and long-term health conditions.



“We're both on state pensions, we only put the heating on for 60 minutes per evening (if it is really cold) and wear at least 3 layers of clothes indoors.”

“Very damp and mouldy home because the heating isn't on.”

“I have to change my diet to keep the cost down. This has impacted my mental and physical health. My energy bill is doubled. I dare not switch on the heating. I feel cold and can't sleep. I have cancer and lots of other long-term conditions. Living in a cold house has made the conditions worst.”



Socialising & self-care

Some people told us they aren't socialising with friends as much because they can't afford to go out, can't afford to have people at home because of heating costs, or because they are having to work longer hours. Some described how they lived with worry about money, with a few making a link between their declining mental wellbeing and fears for their financial future.

Some told us that they no longer do the self-care activities they used to do, such as going to the gym.

“Not able to get outdoors as much as I like as having to work overtime to increase income. Also lack of spending money too. Not able to meet friends like I used to as no money to do social things. Can't afford the gym no more and swimming has become a luxury, me and the children only go once a month now.”

“Social life – zero. I can't afford to do that anymore. I don't go to restaurants and the cinema anymore. It's not the same with the people I know, not normal anymore because everyone is trying to work more hours. I am very stressed, depressed and exhausted because I am worrying about money [...] The worry stops me sleeping, I wake up a lot of times at night so I'm more tired the next day.”

A growing divide

Some of our conversations suggested how it's easier to save money when you already have cash. Examples of things some people have been able to pay for include new, more efficient boilers; home insulation; and freezers and other cooking appliances. Other money-savers that some people have but others don't include free prescriptions and bus pass.

While some people we spoke to have resolved to make adjustments that could save them some money, such as turning the heating off most of the time, it's important to remember that not everyone can do the same. For example, family carers and people with disabilities might need to keep the house warm all day or power medical aids.



“My partner has dementia and is incontinent. The incontinent pads have cost doubled.”

“My husband is in care, and it is costing me quite a bit a month to pay towards his care. It's a big amount I have to find each month. That affects what's left over for me. It's the worry that is getting to me. sometimes you are worried or stressed out and you don't even realise”

“I look after my husband who is on disabled benefit, and I am on my pension. We carry on the best we can and continue with all our usual activities. We are not sure energy bill in the next 6 months though as I need to keep my house warm for my husband who has had a stroke”



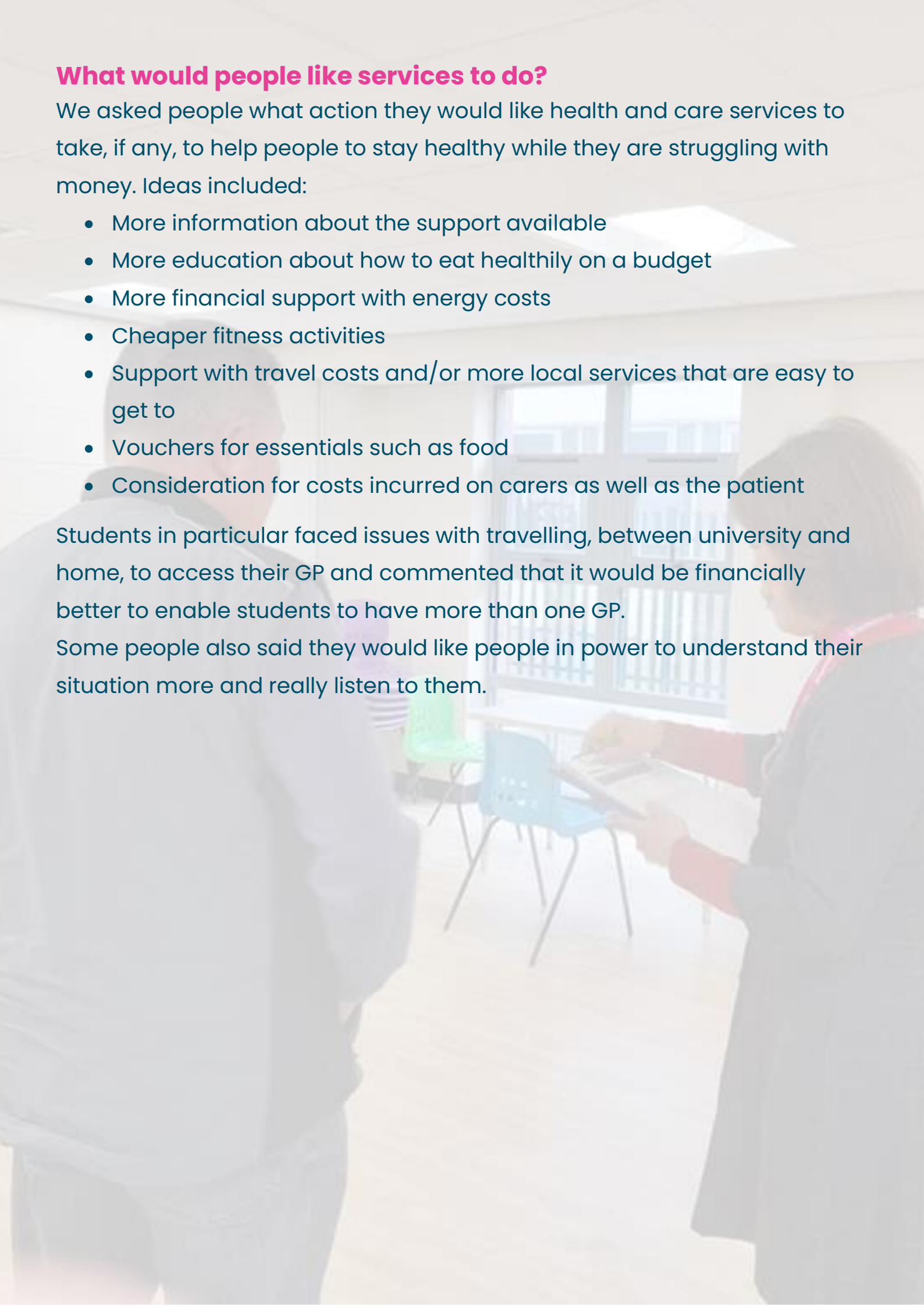
What would people like services to do?

We asked people what action they would like health and care services to take, if any, to help people to stay healthy while they are struggling with money. Ideas included:

- More information about the support available
- More education about how to eat healthily on a budget
- More financial support with energy costs
- Cheaper fitness activities
- Support with travel costs and/or more local services that are easy to get to
- Vouchers for essentials such as food
- Consideration for costs incurred on carers as well as the patient

Students in particular faced issues with travelling, between university and home, to access their GP and commented that it would be financially better to enable students to have more than one GP.

Some people also said they would like people in power to understand their situation more and really listen to them.



Conversations with organisations

As a complement to the survey, we spoke to workers from a few community organisations. Some of the themes from our conversations are given below.

Solace

Solace provides psychotherapy and support to survivors of persecution and exile living in the Yorkshire and Humber region.

- Asylum seekers' benefits are lower, so the impact of rising food prices is greater.
- People who have no recourse to public funds are reliant on friends for shelter and food, but may not be able to count on their generosity when everyone's struggling for money.
- Hotel accommodation for asylum seekers is often out of town. As a result, they are reliant on public transport, which comes with cost implications.

Women's Lives Leeds

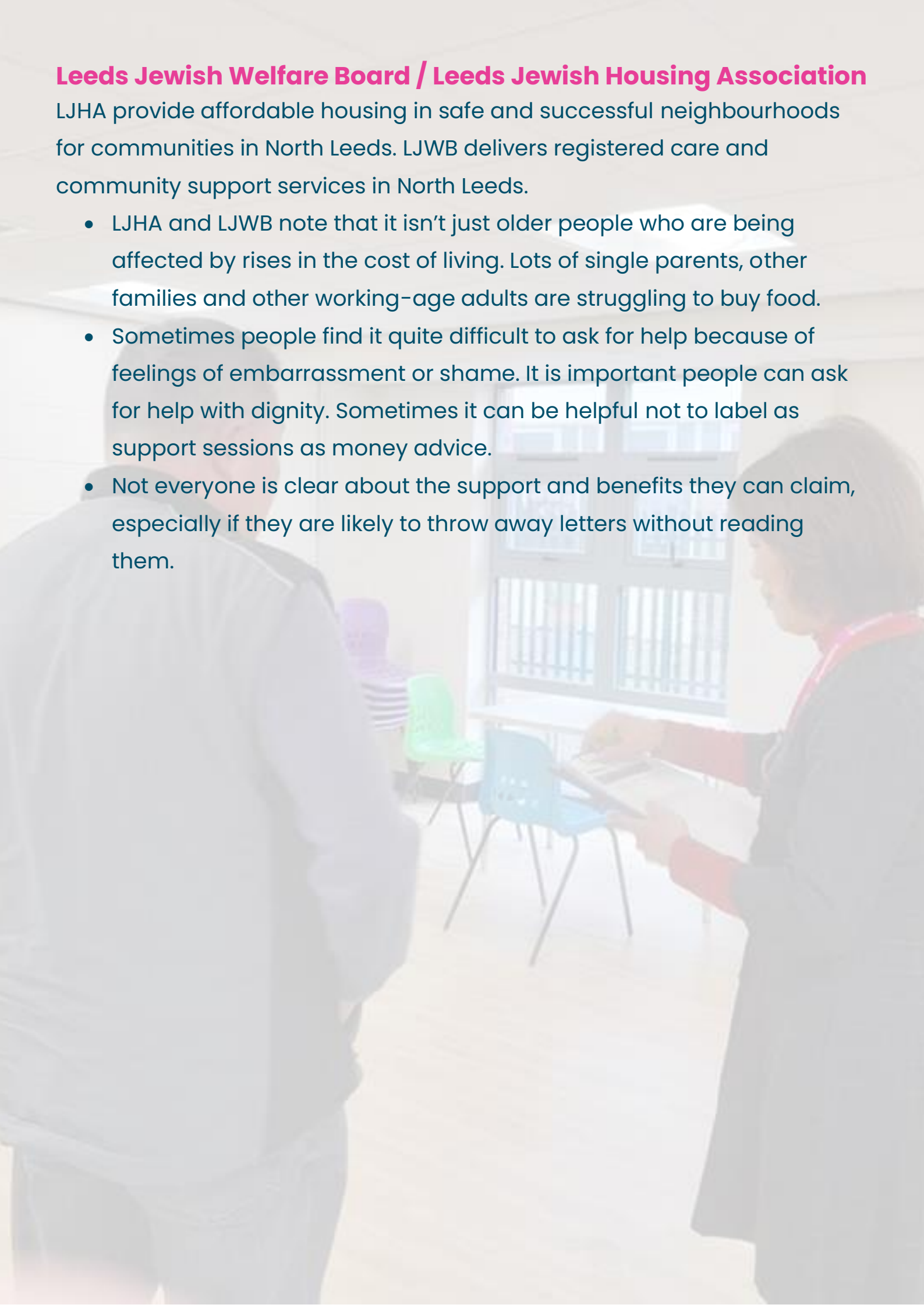
Women's Lives Leeds is an alliance of twelve women and girls' organisations from across Leeds.

- While WLL didn't note any ways in which the cost-of-living crisis was specifically impacting on women, noting that it's a problem affecting all communities, it did say that it has been quite hard to signpost people to support. The support available can feel quite small and tokenistic, given the scale of the problems people are facing.

Leeds Jewish Welfare Board / Leeds Jewish Housing Association

LJHA provide affordable housing in safe and successful neighbourhoods for communities in North Leeds. LJWB delivers registered care and community support services in North Leeds.

- LJHA and LJWB note that it isn't just older people who are being affected by rises in the cost of living. Lots of single parents, other families and other working-age adults are struggling to buy food.
- Sometimes people find it quite difficult to ask for help because of feelings of embarrassment or shame. It is important people can ask for help with dignity. Sometimes it can be helpful not to label as support sessions as money advice.
- Not everyone is clear about the support and benefits they can claim, especially if they are likely to throw away letters without reading them.



Our recommendations

Actively communicate with people about what services exist and start conversations with people

During the pandemic, Leeds reached out to different communities to inform them about keeping safe, the support available and getting vaccinated. Although lots of excellent initiatives have been launched in the city to support people with money worries, it seems that not everyone has heard about them. Leeds could replicate some of the efforts it made during the pandemic to reach out to people. We need to get out into communities to tell people what help, and support are available, as we know not everyone will read leaflets or access websites.

Part of this should involve providing health and care professionals with concise signposting and referral information.

Furthermore, we have heard that people can feel ashamed of asking for help with money. We need to make sure offers of support are designed so that people feel their dignity isn't in question, and that health and care professionals feel empowered to start conversations about money with people.

Be conscious of how the increased cost of living is affecting the wider determinants of people's health

When making decisions about health and care systems, services should always bear in mind that some people's general health and wellbeing are being negatively affected by a lack of heating at home, regular meals and so on. This should be factored into plans. Furthermore, services should remember that the money some people previously had to travel to appointments, pay for prescriptions and so on may no longer be available to them.



Understand which groups of people are being particularly badly affected by the rising cost of living

Some people have less of a cushion to help them absorb financial shocks and not everyone can make money-saving changes, such as people who care for loved ones or live with a disability. Furthermore, those people with cash to spend are more likely to be able to make money-saving changes by, for example, insulating their homes or getting a more efficient boiler. Further work to understand how the cost-of-living crisis is affecting people around the city would help us tailor advice and support to people's individual needs.

Examine the cost implication of accessing health and care

Accessing health and care can come with all kinds of expenses, from travel to phone bills. By understanding where costs are built into health and care from an individual perspective, services can help to make them more accessible.

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