



Experiences of Cancer Screening Services in Tower Hamlets

July 2024

healthwatch
Tower Hamlets

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Introduction

Healthwatch Tower Hamlets is your **local, independent health and social care champion**. We help local people to voice their **views and opinions** about the services they use.



We **listen** to people and **collect their feedback** on health and social care services.



We **report on key findings** and **make recommendations** for improvement.



We **present these reports** to those involved in the planning and commissioning of the health and social care services.

Project Background

Cancer is the leading cause of premature deaths in Tower Hamlets (NOMIS, 2023¹), and yet the uptake rates for cervical, breast and bowel cancer screening services are well below the national targets (80% for cervical and breast cancer, and 60% for bowel cancer).

The latest figures show that in 2023 only around 49% of women aged 25-49 attended their cervical screening appointment when invited while the attendance rate for breast cancer screening was even lower (46%). In fact, the uptake of these appointments has declined in recent years, specifically between 2020 and 2021 when the screening services were either suspended or affected by the Covid-19 pandemic.

While the bowel cancer screening rate has been improving over the years, in particular after the introduction of a home test kit in 2019, the rate in 2023 was still below the national target at 55%.²

Treatment options and survival rates for many cancers are improved the earlier they are detected, and the NHS Long Term Plan has set a target of 75% of cancers to be diagnosed at stages 1 and 2 by 2028.

¹ <https://www.nomisweb.co.uk/>

² [Fingertips – Public Health Data](#)

Based on this evidence, Healthwatch Tower Hamlets decided to carry out a project exploring the experience of cancer screening services by local people and the barriers preventing people from taking up the offer of these free tests.

Methodology

The feedback was collected through an online survey between November 2023 and March 2024. The survey was widely promoted through local community organisations and NHS trusts.

In addition to the online survey, Healthwatch Tower Hamlets conducted face-to-face engagement at local services and events. These included: the Tower Hamlets Inter Faith Forum event, Idea Stores in Whitechapel, Crisp Street, and Watney Market, the Royal London Hospital, Account3 ESOL Class, Community Diagnostic Centre at Mile End Hospital, and the International Women's Day event at Maryam Centre in East London Mosque.

We spoke to 75 people regarding cervical, breast, and bowel cancer screening services. Depending on their age, some responded to questions on all three screening services. In total, 63 people shared their feedback on cervical cancer screening, 24 on breast cancer screening, and 22 on bowel cancer screening.



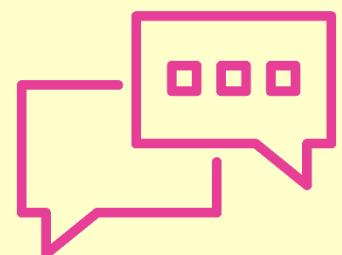
Limitations

We collected feedback regarding the bowel screening from only 6 men while there was a lack of responses from Black and Black British women regarding cervical and breast screening.

Acknowledgements

Healthwatch Tower Hamlets wishes to thank the following organisations who helped us reach a diverse range of people:

- All the community and voluntary organisations: Account3, Tower Hamlets CVS, Tower Hamlets LGBT+ Forum, Tower Hamlets Friends and Neighbours, Tower Hamlets Carers Centre, St. Hilda's and East London Mosque
- Tower Hamlets Together



- Tower Hamlets Council
- Barts Health NHS Trust
- East London NHS Foundation Trust
- GP Care Group
- Idea Stores

How to read this report

The report starts by presenting the key findings emerging from the feedback collected and the recommendations based on these findings. The report then goes on to present the full findings which have been split into 3 main sections including:

- Experiences of Cervical Screening
- Experiences of Breast Screening
- Experiences of Bowel Screening

Each section explores the experiences around booking, travelling and attending a screening appointment and some of the reasons that can prevent people from attending them. We also asked respondents to tell us how these services could be improved to make them easier to access in the future.

Key Findings & Recommendations

In this section, we present the key findings and recommendations for each screening service: cervical, breast, and bowel. While the feedback highlighted differences in the main barriers for each screening service, we found that there were also some similarities in how all screening services could be improved.

The collective recommendations are:

- 1. Offering out-of-hours appointment times for working people and people with commitments such as caring responsibilities.**
- 2. Patients should be asked about additional requirements such as a disability, feeling anxious, or needing an interpreter and appropriate assistance offered.**
- 3. Patients should be better informed about who will perform the screening test and what happens during the appointment to help reduce negative feelings.**
- 4. Information should be provided in different languages including Bengali.**

Below we have detailed the key findings and recommendations for each service.

Cervical Screening

Recommendation 1: Introducing an online booking system for cervical screening tests could help make appointment booking easier.

Telephone was the most used method of booking a cervical screening appointment. However, some respondents mentioned experiencing long wait times and language barriers over the phone. Introducing an online system that can be translated into multiple languages could help to improve accessibility.

Recommendation 2: Offering out-of-hours appointment times for people who work or have other commitments that prevent them from booking appointments during usual opening hours.

Most people reported being able to book an appointment for a date and time that suited their schedule. However, some residents did mention having to change their work schedule or take time off work to be able to attend their appointments. A few respondents also had their appointment before work which

caused some concern about being late for work adding further anxiety to what can already be a stressful situation.

Recommendation 3: Patients should be asked about any additional requirements, such as a disability, feeling anxious, or needing an interpreter during the appointment booking and appropriate assistance should be offered.

Respondents reported not always being asked whether there are any specific requirements such as a disability, anxiety, or needing an interpreter that should be considered before and during the appointment. In addition, respondents with pre-existing medical conditions reported finding travelling to their appointments difficult.

Recommendation 4: Provide patients with techniques to help them reduce anxiety about the procedure.

Respondents reported being scared of the procedure which was described as uncomfortable and painful. Some respondents suggested being provided relaxation techniques to help alleviate the anxiety around the procedure and to help make it more comfortable.

Recommendation 5: Patients should be better informed about who will perform the cervical screening test and what happens during the appointment to help reduce negative feelings.

Patients reported not always being told who would perform the test, or what would happen during the appointment. In addition, the procedure for the cervical test was the main barrier for non-attendance with 6 respondents telling us they were scared of the procedure and the same number of respondents saying they had found the procedure painful in the past.

Recommendation 6: Information on the importance of the test should be provided in different languages to help raise awareness.

Several people mentioned that information about the test should be provided in different languages, such as Bengali, to help people understand why the test is important and who it is relevant to as 4 respondents selected not being sexually active as a reason for not attending their appointment when invited.

Breast screening

Recommendation 7: Increase the number of locations for breast screening to reduce travel time and cost.

The majority of respondents had used public transport to travel to their breast screening appointments and reported travel times of up to an hour. This is costly and time-consuming making it more difficult for people who, for example, work or have caring responsibilities to attend these important appointments. One respondent told us they had not attended their appointment in the past because it was too far away.

Recommendation 8: Allow patients to choose their appointment time and improve flexibility with out-of-hours appointment times for people who work or have other commitments that prevent them from booking appointments during usual opening hours.

Although the majority had found booking their appointment easy, a fifth had found it difficult because they were not able to choose a suitable appointment time. Some respondents mentioned being able to book their appointment for the weekend which had made the appointment time suitable for them. This could also help to reduce travel costs and time if patients are able to travel to their appointment outside peak travel times.

Recommendation 9: Patients should be asked about any additional requirements, such as a disability, feeling anxious, or needing an interpreter during the appointment booking and appropriate assistance should be offered.

Only a fifth of the respondents had been asked about additional requirements while just a small proportion had been offered an interpreter for their appointment. One respondent told us that they had previously not attended their screening appointment because of their disability which makes it difficult for them to attend appointments.

Recommendation 11: Patients should be better informed about who will perform the breast screening and what happens during the appointment to help reduce negative feelings.

Less than half of the respondents had been told who would perform the screening, and one person had previously not attended their screening appointment because of feeling embarrassed. Providing more information about what to expect from the appointment can help to reduce negative feelings such as embarrassment.

Recommendation 12: Implement better training for staff around explaining the procedure and making patients feel comfortable during the appointment.

The majority agreed that staff treated them with respect and dignity, they felt comfortable asking questions and were given a private space to undress. However, fewer people agreed that staff had explained the procedure in a way that was easy to understand and that they felt comfortable to raise concerns or ask to stop the procedure. One respondent also reported having had an experience with a “disgruntled” nurse.

Recommendation 13: Review of the administration of the breast screening invitation letters.

Three respondents who have not attended a breast screening appointment in the last 3 years but have attended one in the past, mentioned that they have not received an invitation. This could indicate a potential issue with the invitation letters.

Bowel screening

Recommendation 14: Improve the clarity of the instructions provided with the home test kit, including when and how the test results will be received, and provide the information in other languages.

Although the majority of the respondents found the test kit easy to use and the instructions easy to follow, some people mentioned they had not been given information on when and how they would receive the results and that the information was not provided in a way that was easy to understand. One respondent mentioned struggling to understand the instructions and having to ask someone to explain. Participants also suggested that the instructions should be provided in other languages.

Full Findings



Experiences of Cervical Screening

Our survey asked people about booking and attending their cervical screening appointments and how these services could be improved to make it easier for people to attend them in the future. We also asked about barriers to attending these appointments.

Booking and travelling to an appointment

Booking a cervical screening appointment is a smooth experience for most. However, some concerns were raised about communication issues during the appointment booking and the suitability of the appointment times.

Telephone was the most common method of booking an appointment with more than 50% of respondents having booked their most recent cervical screening appointment using this contact method. A small portion of the respondents had booked their appointments online or face-to-face.

A significant majority of the respondents (90%) found it easy to book an appointment. Most people reported being able to book an appointment for a date and time that suited their schedule, however, some residents did mention having to change their work schedule or take time off work to be able to attend their appointment. A few respondents had also attended the appointment before work which caused some concern about being late for work adding further anxiety to what can already be a stressful situation.

A few respondents reported having experienced difficulties related to a language barrier and long wait times over the phone.

Attending the screening appointment

Travelling to the appointments is generally easy although there can be barriers for people with pre-existing health conditions.

Travelling to the cervical screening appointment was easy for most respondents (85%) due to the appointment being in the local area, but people with pre-existing medical conditions, such as mental health conditions, experienced some difficulties as travelling, in general, can be difficult for them.

In practical terms, most people reported walking or cycling to their cervical cancer screening appointment with a travel time typically being 15 minutes or less. A fifth of respondents had travelled to their appointment by public transport with a handful of people reporting a travel time of 30 to 45 minutes.

Selected comment



"I work shift work and was able to organise cover although I was not paid for the time I had off to attend the appointment."



Woman, aged 25–34, White British

Information about screening appointments

Patients should be provided more information about their appointment and asked about additional requirements, such as a disability, anxiety, or needing an interpreter.

Our survey included a series of statements about the information provided before the cervical screening appointment and asked whether the participants agreed or disagreed with the statements.

The majority of the respondents agreed that they were given information about when and how they would receive the test results and the information was given to them in a way that was easy to understand.

However, roughly a third disagreed that they had been given information about who would perform the test and that they had been asked about whether any additional requirements should be considered.

In addition, just under a quarter disagreed that they were given information about what would happen during the appointment and a fifth had been offered an interpreter for their appointment, however, this statement was not applicable for 63% of the respondents.

Statement	Agreed	Disagreed
I was told who would perform the test prior to the appointment	50%	31%
I was given information about what would happen during the appointment	52%	23%
I was given information on when and how I would receive the test results	73%	8%
I was told how to cancel/reschedule my appointment	56%	13%

I was given all the information in a way that was easy for me to understand	69%	8%
I was asked about any additional requirements that needed to be considered for the appointment (For example, if you are a trans man, have a disability, have experienced trauma, feel anxious etc.)	44%	33%
(If applicable) I was asked if I needed an interpreter for the appointment	19%	6%

Selected comment



"I usually find cervical smear tests uncomfortable but I wasn't asked before the examination about it."



Woman, aged 55–64, Bangladeshi

Experiences of the screening appointment

Our survey included a series of statements about the screening appointment and asked whether the participants agreed or disagreed with the statements.

The majority of the participants agreed that during their appointment, the staff treated them with respect and dignity, they felt comfortable asking questions, they were given a private space to undress, and the staff member explained the procedure in a way that was easy to understand.

Nearly a fifth disagreed that their specific needs were considered during the appointment. However, it should be noted that this statement did not apply to 65% of the respondents.

Statement	Agreed	Disagreed
The staff treated me with respect and dignity	88%	2%
I was given a private space to undress	77%	2%
The staff member explained the procedure to me in a way that was easy for me to understand	75%	6%

I felt comfortable to ask any questions	88%	2%
I felt comfortable to raise any concerns or to ask to stop the procedure	71%	4%
(If applicable) My specific needs were taken into consideration during the appointment. (For example, if you are a trans man, have a disability, have experienced trauma, feel anxious etc.)	25%	6%

Selected comment



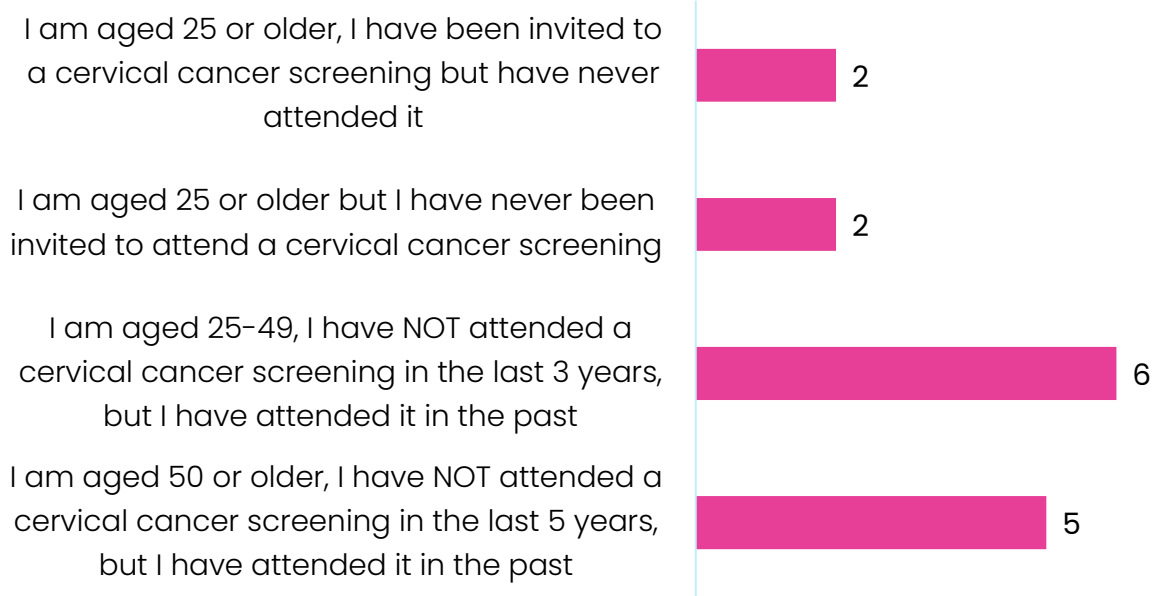
"I didn't feel comfortable."

No demographic information submitted



Barriers to cervical cancer screening

We spoke with 15 people who have never or not recently attended a cervical cancer screening.



These respondents were given a list to choose their reason for not attending their cervical screening appointment when invited. They were able to select multiple reasons.

The procedure for the cervical test was the main barrier for non-attendance: 6 respondents told us they were scared of the procedure and the same number of respondents said they had found the procedure painful in the past.

There was also a misconception about who the test is relevant to – four respondents selected not being sexually active as a reason for not attending their appointment when invited.

One respondent said they were scared of the results, and one advised us that although they are aged 25 or older, they have never received an invitation to cervical cancer screening.

Selected comment



"I don't know how they do it but it seems to be very scary."

Woman, aged 25–34, Bangladeshi



How can the screening appointment be improved?

Several people mentioned that alleviating their anxiety before the appointment would make it easier for them to attend. Participants suggested being given relaxation techniques or being provided more information about the procedure so that they know what to expect. Several people also mentioned that information should be provided in different languages, such as Bengali, to help people understand why the test is important.

There were also some suggestions around the tools used for the test: some women had experienced the test being carried out using a metal speculum which had made their experience uncomfortable, and they suggested that plastic tools should be used instead.

Other suggestions mentioned included having female doctors perform the test, using an anaesthetic to numb the area, and having an easier way to book the appointment or to change the appointment time.

Some suggested that the frequency of the test should be increased.

Selected comment



"My friend who went to the GP for screening was 24 but had had the letter through asking her to book the appointment. She booked the appointment but when she got there they told her that because she was 24 they could not accept her appointment and she was sent home. I asked my GP about this as I was also 24 at the time I received the screening request, the GP told me that as soon as you get the letter you can book an appointment. I nearly cancelled my appointment due to the misinformation given to my friend."



Woman, aged 25-34, White British

Experiences of Breast Screening

Our survey asked people about booking and attending their breast screening appointments and how these services could be improved to make it easier for people to attend them in the future. We also asked about barriers to attending these appointments.

Booking an appointment

The booking of the breast screening appointment is a smooth experience for most but questions were raised about the flexibility and reliability of the appointments.

Telephone was the most common method with just under 50% of respondents having booked their most recent breast screening appointment using this contact method.

The majority of the respondents (73%) found it easy to book their appointment and the appointment time was suitable for their needs with some respondents mentioning being able to book their appointment for the weekend.

A fifth had found booking the appointment difficult with the main concerns being able to choose a suitable appointment time, and an appointment being cancelled at the last minute.

Attending the screening appointment

Travel to a breast screening appointment can be long and costly as many participants reported travelling to their appointment by public transport with a potential travel time of up to an hour.

53% of respondents said travelling to their breast cancer screening appointment was easy with a short distance to the appointment location and free parking for blue badge holders cited as reasons for finding travelling easy.

The majority of respondents (47%) had used public transport to travel to their breast cancer screening appointments with travel time typically being 15 to 30 minutes. However, a fifth of respondents reported having travelled between 30 to 45 minutes and one participant had travelled for more than an hour to their appointment.

Selected comment



“I could book an appointment for a Saturday which was most convenient for me as I am a carer but get respite over the weekend.”



Woman, aged 55–64, Indian

Information about screening appointments

Our survey included a series of statements about the information provided before the appointment and asked the participants whether they agreed or disagreed with the statements.

The majority of the respondents agreed that they were given information about when and how they would receive the test results, what would happen during their appointment, how to cancel or reschedule their appointment and the information was given in a way that was easy to understand.

However, less than a half had been told who would perform the test, and a fifth had been asked about additional requirements while just a small proportion had been offered an interpreter for their appointment, although it should be noted that the majority of the respondents had chosen ‘Not applicable’ as their answer to the last two statements (60% and 73% respectively).

Statement	Agreed	Disagreed
I was told who would perform the test prior to the appointment	47%	20%
I was given information about what would happen during the appointment	60%	13%
I was given information on when and how I would receive the test results	73%	7%
I was told how to cancel/reschedule my appointment	60%	-
I was given all the information in a way that was easy for me to understand	60%	7%
I was asked about any additional requirements that needed to be considered for the appointment (For example, if you are a trans man, have a disability, have experienced trauma, feel anxious etc.)	20%	7%

(If applicable) I was asked if I needed an interpreter for the appointment

13%

13%

Selected comment



"I didn't know who would perform the test prior to the appointment."



Woman, aged 55–64, Bangladeshi

Experiences of the screening appointment

Our survey included a series of statements about their experiences of the screening appointment and asked them whether they agreed or disagreed with the statements.

The majority agreed that staff treated them with respect and dignity, they felt comfortable asking questions and were given a private space to undress.

However, fewer people agreed that the staff explained the procedure in a way that was easy to understand, and they felt comfortable to raise concerns or ask to stop the procedure. One respondent also reported having had an experience with a "disgruntled" nurse.

Statement	Agreed	Disagreed
The staff treated me with respect and dignity	80%	7%
I was given a private space to undress	73%	-
The staff member explained the procedure to me in a way that was easy for me to understand	67%	13%
I felt comfortable to ask any questions	80%	7%
I felt comfortable to raise any concerns or to ask to stop the procedure	67%	13%
(If applicable) My specific needs were taken into consideration during the appointment. (For example, if you are a trans man, have a disability, have experienced trauma, feel anxious etc.)*	13%	-

Selected comment



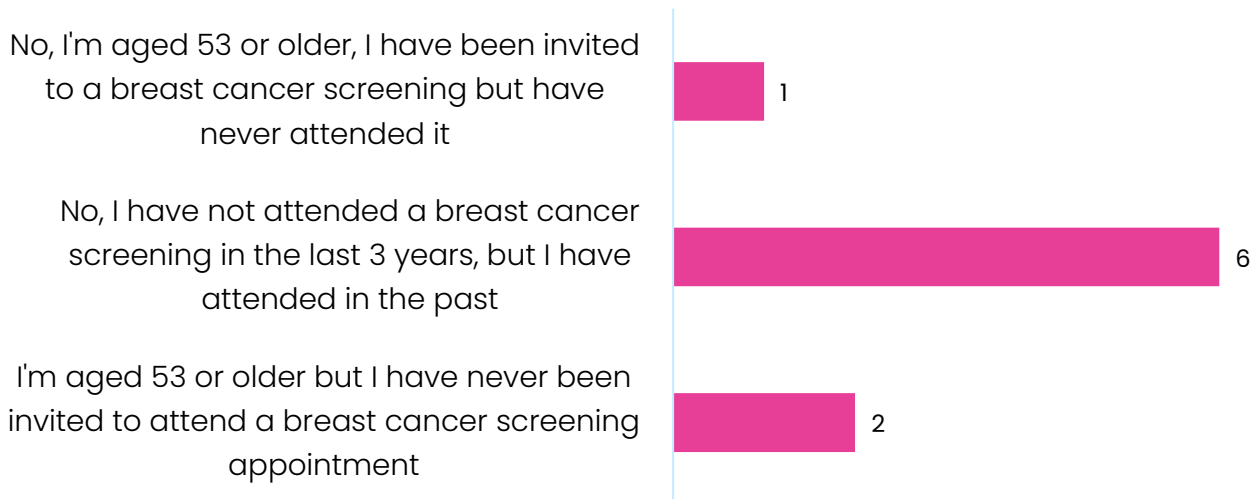
"The nurse was extremely grumpy and looked like she needed therapy. Sort of angry, disgruntled."



Woman, aged 45–54, Any other background

Barriers to breast cancer screening

We spoke with 9 people who have never or not recently attended a breast cancer screening.



The main barriers to attending breast screening appointments seem to be around accessibility.

The respondents were given a list to choose their reason for not attending their breast screening appointment when invited. They were able to select multiple reasons.

Three respondents who have not attended a breast screening appointment in the last 3 years but have attended one in the past, mentioned that they have not received an invitation.

Other reasons mentioned included the appointment being too far away, having a disability that makes it difficult to attend the appointment, or feeling embarrassed.

Selected comment



"I don't want one. If I get a screening it just tells me I don't have it that day. It doesn't mean I won't develop it the day later, sticking my breasts in plates full of radiation."



Woman, aged 25–34, White Irish

How can the screening appointment be improved?

Providing better accessibility to breast screening appointments could help to increase the uptake of breast screening appointments.

Participants suggested having the screening test done locally or having mobile clinics at supermarkets, for example, would mean shorter travel distances and easier access to appointments.

Other suggestions included reducing waiting times and cancellations of appointments.

Selected comment



"Make backup plans so that clients are not cancelled so often; this isn't the first time I have had to trawl back to re-book as a result of your cancellations."



No demographic data submitted

Experiences of Bowel Screening

Our survey asked people about their experiences using the bowel screening home test kit, and how it could be improved to make it easier for people to do the test in the future. We also asked about barriers to using the home test kit.

Following instructions and using the home test kit

Over 90% of people we spoke with found using the bowel home test kit easy while just under 90% agreed that the instructions were clear and easy to follow, and they felt comfortable doing the test instead of having a GP or a nurse do it.

Fewer people agreed that they were given information on when and how they would receive the results and that the information was provided in a way that was easy to understand. One respondent mentioned struggling to understand the instructions and needing to ask someone to explain.

Statement	Agreed	Disagreed
The instructions for the home test kit were clear and easy to follow	86%	-
The test kit was easy to use	93%	7%
I was given information on when and how I would receive the test results	71%	14%
I was given all the information in a way that was easy for me to understand	79%	7%
I felt comfortable doing the test on my own rather than see a doctor or a nurse	86%	-

Selected comment



"I understood how to read the instructions but I didn't know what they meant. Have not got my results, it's been 3 or 4 months."



Man, aged 65–74, Bangladeshi

How can the screening test be improved?

The accessibility of the instructions was the main improvement suggested.

Participants would like the instructions to be clearer and provided in other languages.

Other suggestions included providing more information on the importance of the test and sending reminders to people to complete the test.

A few people said they would prefer to have their GP do the test so they could ask questions and be reassured the procedure is done correctly.

Selected comment



"If someone can't read or write or they can't read English, the information contained in the test kit should be in their language. I think there were some instructions on how to get information in different languages but if they can't read English how are they going to be able to do it. They should send it to them in their language straightaway."



Woman, aged 55–64, Black or Black British – Other African

Appendix 1. Demographics

Ward	N.	%
Bethnal Green East	10	13%
Bethnal Green West	1	1%
Blackwall and Cubitt Town	1	1%
Bow East	3	4%
Bow West	2	3%
Bromley North	1	1%
Bromley South	1	1%
Canary Wharf	1	1%
Island Gardens	1	1%
Limehouse	1	1%
Mile End	1	1%
Poplar	10	13%
Shadwell	3	4%
Spitalfields and Banglatown	2	3%
St Dunstan's		
St Katharine's and Wapping		
Stepney Green	3	4%
Weavers	1	1%
Whitechapel	5	7%
Out of Borough	11	15%
Not known	17	23%
Grand Total	75	100%

Gender identity same as in birth	N.	%
Yes	62	83%
Prefer not to say		
Not known	13	17%
Grand Total	75	100%

Age	N.	%
16-24	2	3%
25-34	11	15%
35-44	16	21%
45-54	17	23%
55-64	10	13%
65-74	5	7%
75-84	2	3%
85+		
Prefer not to say	1	1%
Not known	11	15%
Grand Total	75	100%

Religion	N.	%
Agnostic	1	1%
Atheist		
Buddhist	1	1%
Christian	18	24%
Hindu	1	1%
Jewish	1	1%
Muslim	33	44%
No religion	6	8%
Prefer not to say	3	4%
Not known	11	15%
Grand Total	75	100%

Are you:	N.	%
A man	6	8%
A woman	57	76%
Not known	12	16%
Grand Total	75	100%

Ethnicity	N.	%
Asian/Asian British - Bangladeshi	26	35%
Asian/Asian British - Indian	5	7%
Asian/Asian British - Pakistani		
Asian/Asian British - Any other Asian background	1	1%
Black/Black British - Caribbean		
Black/Black British - Somali		
Black/Black British - Other African	3	4%
Mixed/Multiple ethnicities - White and Asian	1	1%
Mixed/Multiple ethnicities - White and Black Caribbean	2	3%
Mixed/Multiple ethnicities - Any other mixed background	1	1%
White - British	10	13%
White - Irish	2	3%
White - Any other White background	9	12%
Other - Chinese	1	1%
Other - Any other background	3	4%
Prefer not to say		
Not known	11	15%
Grand Total	75	100%

Sexual orientation	N.	%
Bi (attracted to more than one gender)	2	3%
Gay/lesbian	2	3%
Heterosexual/straight	50	67%
Prefer to self-describe		
Prefer not to say	7	9%
Not known	14	19%
Grand Total	75	100%

Are you a carer	N.	%
Yes	19	29%
No	39	48%
Prefer not to say	3	4%
Not known	14	19%
Grand Total	75	100%

Access to a device	N.	%
Access to a device (computer, smart phone, tablet)	61	81%
Access to a basic phone only	1	1%
No access to a device		
Not known	13	17%
Grand Total	75	100%

Type of disability	N.	%
Physical or mobility impairment	12	16%
Sensory impairment	1	1%
Learning disability or difficulties	3	4%
Mental health condition	11	15%
Other	2	3%
Prefer not to say	2	3%

Disability	N.	%
Yes	20	27%
No	38	51%
Prefer not to say	2	3%
Not known	15	20%
Grand Total	75	100%

Level of English	N.	%
Very good	47	63%
Good	15	20%
Not so good	2	3%
Not at all good		
Not known	11	15%
Grand Total	75	100%

Long-term condition	N.	%
Yes	34	45%
No	24	32%
Not known	17	23%
Grand Total	75	100%

Type of long-term condition	N.	%
Asthma, COPD or respiratory condition	10	13%
Blindness or severe visual impairment		
Cancer	3	4%
Cardiovascular condition (including stroke)	2	3%
Chronic kidney disease	1	1%
Deafness or severe hearing impairment		
Dementia	1	1%
Diabetes	7	9%
Epilepsy		
Hypertension (high blood pressure)	7	9%
Learning disability	3	4%
Mental health condition	5	7%
Musculoskeletal condition	3	4%
Other	7	9%
Prefer not to say		
Not known		

Technology skills	N.	%
Very good	36	48%
Good	17	23%
Not so good	5	7%
Not good at all	1	1%
Unsure		
Prefer not to say		
Not known	16	21%
Grand Total	75	100%

Access to internet	N.	%
Access to internet	61	81%
No access to internet	1	1%
On public wifi only		
Not known	13	17%
Grand Total	75	100%

Current Employment Status	N.	%
Working Full-time (employed or self-employed)	15	20%
Working Part-time (employed or self-employed)	11	15%
Unemployed and looking for work	5	7%
Unable to work due to health issues or a disability	5	7%
Retired	9	12%
Stay at home parent	4	5%
Caring for someone with long-term health conditions or a disability	5	7%
Student	2	3%
Doing unpaid work/volunteering		
Other (please specify)	1	1%
Prefer not to say	2	3%
Not known	16	21%
Grand Total	75	100%




healthwatch
Tower Hamlets


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 [Facebook.com/healthwatchtowerhamlets](https://www.facebook.com/healthwatchtowerhamlets)