



Chlamydia Lived Experience Report

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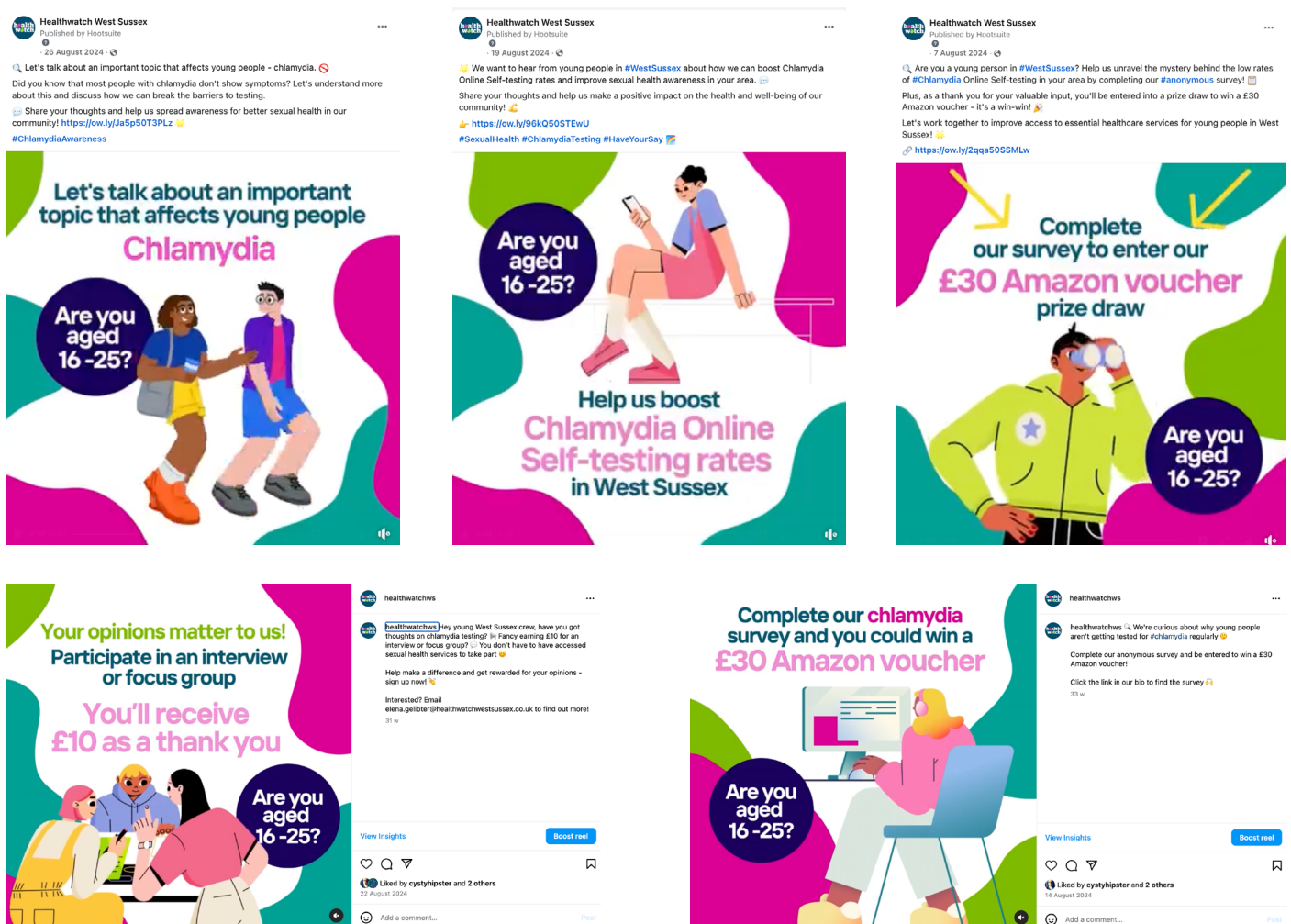
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Introduction & Context

Rates for Chlamydia online self-testing among young people in West Sussex are significantly lower than the national figures for % population screened and detection.

Healthwatch West Sussex worked with Public Health (West Sussex County Council) and West Sussex NHS Sexual Health Services to create a project to understand what young people (aged 16–25 and living in West Sussex) think about the low uptake of free online **Chlamydia Testing**. The key aims were to find out what barriers or challenges young people perceive in accessing testing.

We also wanted to learn from young people what they think services could do differently to increase awareness, increase uptake of chlamydia testing and improve sexual health locally.



Thank you

We would like to thank all the young people who have completed the survey, had conversations, attended focus groups and shared their stories to support this work.

Summary

It is known that the rates for chlamydia online self-testing among young people (aged 16 – 25) in West Sussex are lower than the national average.

Local young people told us that the main barriers for them are a lack of knowledge and information on how to get tested for sexually transmitted infections, including Chlamydia. This is not helped by young people feeling embarrassed, afraid of family and friends finding out, and having a fear of being labelled.

Young people responding to our survey told us they prefer to access sexual health information online or on social media and suggested that information about sexual health needs to be more engaging and easier to access. Feedback suggested that young people did not learn much about sexual health at school.

I would feel embarrassed, I think many young people do not feel confident speaking about their sex life.

I would speak to my GP, so long as they keep everything confidential. I would not like information to be shared with anyone.

A recurring theme young people were concerned about was that their personal information was kept private and confidential by services.

Young people and online

Young people use online/social media extensively as a learning tool to access information on topics of interest, connecting with experts, and exploring different perspectives. However, our insight suggests that concerns remain about potential risks like cyberbullying and exposure to harmful content. Platforms such as YouTube and TikTok are particularly popular for learning new skills and staying updated on current issues.

In the UK, **social media** is most popular among Gen Z and Millennials. Social media has a 97 to 98 percent reach with both generations.

Social media is now a part of everyday life, especially for young people. Research shows that among 16-to-25-year-olds in the UK, as many as 99% use social media every day.

We recognise that this work only included a small sample of respondents (15 young people in phase 2 and 3) to be regarded as statistically significant. However, it does provide an indication of some of the barriers young people experience trying to access STI/chlamydia support and advice in West Sussex.

What we did

The project was formed of 3 phases:

Phase 1

- Co-design survey, develop with Sussex Sexual Health Team
- Promote and share via social media
- Data analysis
- Recruitment of young people for Phase 2

Phase 2

- Individual interviews / 1-1 conversations with 15 young people
- Data analysis
- Recruitment of young people for Phase 3

Phase 3

Publication of project report outlining data analysis from Phase 1 & 2.

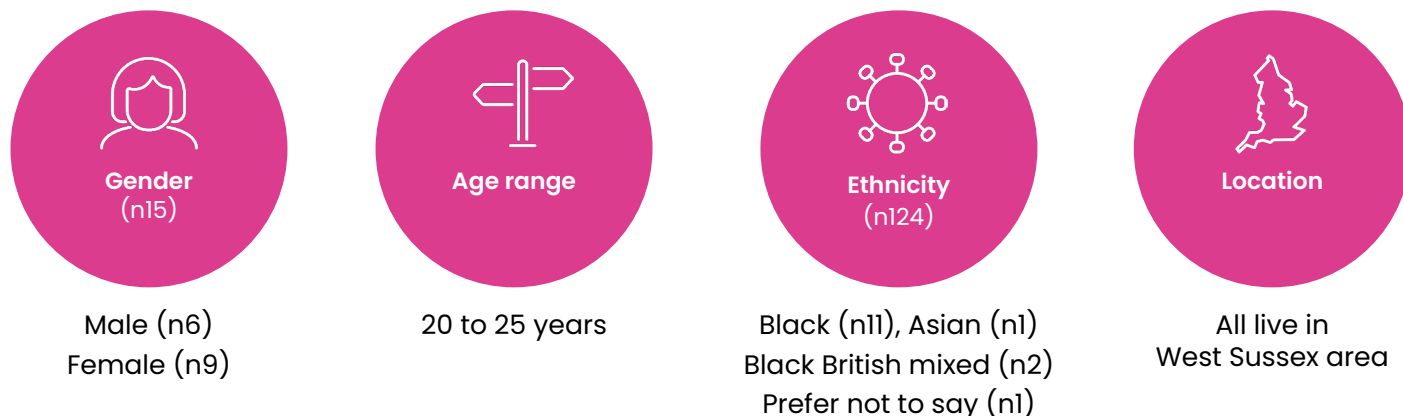
Three Focus Group Workshops with 6 young people to develop solutions:

- Co-design a social media campaign to raise awareness and share information with local young people.
- Co-produce 2 videos – one vlogging the online chlamydia testing process from the perspective of young people, another sharing factual content relating to chlamydia delivered by a trusted healthcare professional.

Conversations in detail

As part of the project, 15 follow up conversations were conducted with people who had completed the survey and provided their contact details.

All responders had learned about the project through online and/or social media.



Our survey respondents indicated on a scale of 1-10 (with 1 having no knowledge and 10 having full knowledge) about sexual health.

0		1 (7%)			13 (86%)			1 (7%)	
1	2	3	4	5	6	7	8	9	10
0	0	0	0	1	2	2	9	0	1

One young person stated they had full knowledge. A further 13 young people stated they had a moderate level of knowledge.

How information is accessed by young people about sexual health fell into the following categories: through own research (n10), information from school (n5), information from GP (n5), and social media (n4).

Other areas information is accessed about sexual health were from family members and older siblings. Basic information came from school, with specific information gained through social media.

Six young people stated they had used a sexual health service recently. One told us they collected free condoms at an event at college during Freshers Week where the Sexual Health Service had a stand, however, they also told us that they, did not want to stop and chat.

The main healthcare service used by young people for contraception, information and testing is GP's. They visit pharmacy services for condoms, and the Sexual Health Service (n4) for testing. A few young people told us that they had accessed information around safe relationships, consent, and contraceptives in an educational setting.

I feel confident about relationships, trauma, and consent, and less so about the impact of certain sexual diseases on health.

I do not talk about sexual health with friends. I have spoken with my mum about it though.

Young people's experiences of using Sexual Health Services from their GP's was mixed according to the insight received.

Good service:

- Positive experience
- Communication was good
- Felt welcome
- Listened to me
- Tell me what to do
- Got contraception
- All very informal
- Did not feel embarrassed or uneasy

Poor service

- Could not get an appointment
- Embarrassed talking to GP
- The questions were embarrassing - do you have more than one sexual partner? Do you use condoms?

Sexually Transmitted Infections (STI's) knowledge:

Young people were confident in their knowledge of how STI's are spread: through unprotected sex (n6) and that there are a number of different STI's such as HIV, chlamydia, gonorrhoea and syphilis.

Young people appeared to be aware that some STI's can be a bacterial infection contracted through sexual intercourse; that some STI's can cause pelvic pain, itching, painful sex, abnormal discharge - awful smell, skin rashes, difficulty urinating and longer-term damage to reproductive organs.

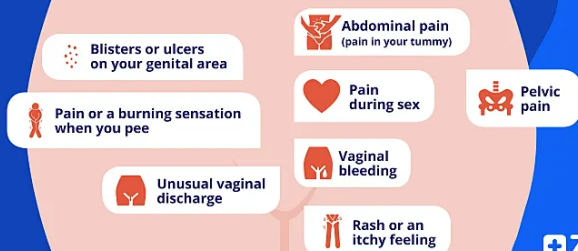
Most young people were aware that treatment of STI's is by prescribed medications.

Knowledge of how to prevent STI's was good, with young people quoting actions such as maintaining good personal hygiene/ washing after intimate contact and using contraceptive methods which also protect from infection (e.g. condoms) and abstaining from unprotected sexual activity.

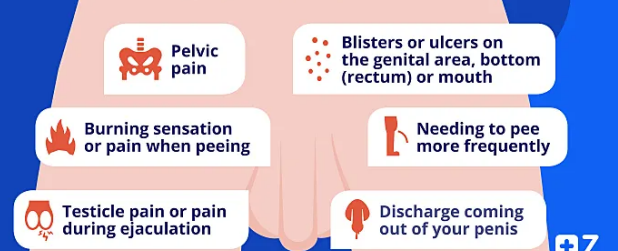
I am not sexually active so I'm not too knowledgeable.

I trust my partner, so I don't need to get tested.

Common STI symptoms in women



Common STI symptoms in men



Images from ZAVA UK

A wide range of time frames were suggested for testing from daily, monthly, 6 monthly and annually.

There was some misinformation that came from 3 (50%) of males who shared; 'they trust their partner, so it was not necessary to be tested unless they showed symptoms.'

Regularly but not sure how often.

Did you know that testing for STI's needs to be at least 2 weeks after sex?

Chlamydia: 2 weeks after

Gonorrhoea: 2 weeks after

HIV: 45 to 90 days after

Syphilis: 90 days after

(NHS/UKHSA/trusted UK resource information)



Knowledge of where and how to access testing for chlamydia and other STI's in West Sussex as also mixed.

Most young people told us they:

- go to Sexual Health Clinic (n7)
- go to GP* (n6)
- order online (n2)
- to find out more information go to Google

I now know that I would order a test online - I got this information from the Healthwatch survey.

I trust my GP so would be happy to speak with them.

Some of the young people we heard from told us that they have spoken with family members and most have used social media.

*It is noted that GP's only test symptomatic cases whereas the online chlamydia testing seeks to reach asymptomatic cases as well.

I feel uncomfortable picking up a test from a pharmacy - I would not like to be seen or overheard.

The preferred option of where to get information and testing was from their GP (n6) but there was concern about keeping information private and confidential. Communication ranged from social media, face to face, and online.

None of the young people who participated in these conversations had prior knowledge about Chlamydia Online Testing.

They felt if they had known about the Chlamydia Online Service, they would have used it as it seems to be very private and confidential.

Young people do not feel comfortable talking about sexual health.

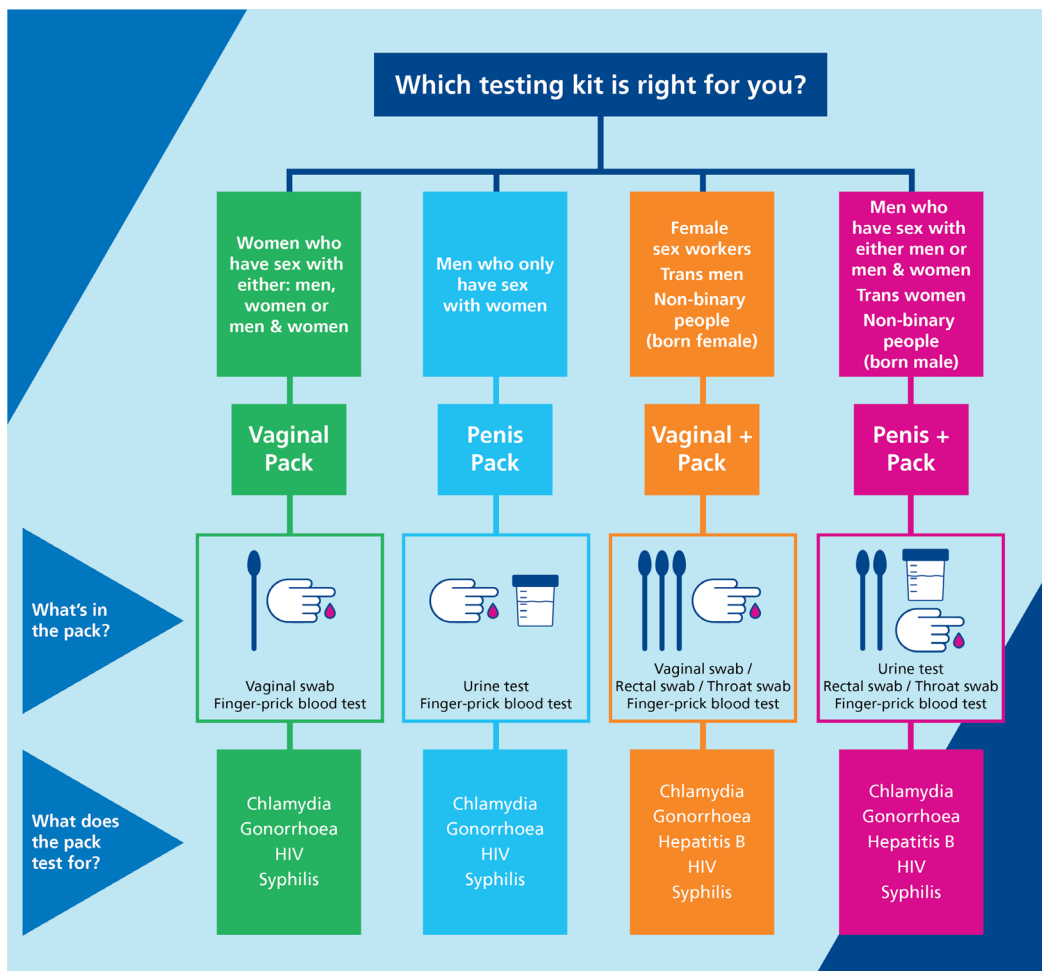


Image from: <https://www.sexualhealthwestsussex.nhs.uk/online-testing/>

With regards to the barriers young people face when testing for Chlamydia

- Stigma around sexual health (n8)
- Embarrassment (n7)
- Cultural (n6)
- Fear of being judged by friends and peers (n5)
- Lack of knowledge (n4)
- Fear of the test being positive (n3)
- Culture or religion forbids sex before marriage (n3)
- Fear of being seen (n3)
- Not trusting professionals

Amazing!!! If I was aware of this I would have used the service -less embarrassing as you do not have to speak to anyone.

Young people simply do not know enough about STI's.

One of the main barriers for young people is lack of knowledge and information on how to get tested. Followed by embarrassment, fear, guilt and being labelled.

Barriers for young people

Very anxiety inducing, not knowing what the result will be.

Men feel invincible and STI's will not affect them ever. That it just happens to dirty people who sleep around all of the time.

Everyone pretends to be a 'good girl'.

Young people feel uncomfortable talking about their sexual health – There is 'embarrassment around the topic', they do not believe it is important to them, and there is a misconceptions about STI's.

From the data we collected, and in listening to local young people, there are some suggested actions to increase knowledge and confidence about STI's – including:

- More health talks in schools, colleges and university to debunk the myths.
- Know more about the on-line testing.
- Normalising the subject in conversation.
- Advertise on social media.
- Information needs to come from trusted agency.
- Diverse video clips.

Young people told us that there needs to be better and more promotion of sexual health services, young people said that the information would be:

- More acceptable to young people on social media (n15).
- Information from schools and collages (n8), parents, GP, Pharmacy, and counsellor.
- Doing your own research.
- Webinars and peer to peer.

Other suggestions from young people:

A social media campaign but different to what you learn in school.

The main message needs to be 'WHY' you should get tested.

Educate the parents.

Speak with males and females separately so feel freer to ask questions.

Social media



Young people gave us lots of useful suggestions as to what would be needed for a successful Chlamydia campaign:

- Social media; using a wide variety of methods video, visuals, posts, Instagram. Delivered by experts and lived experience that young people can relate to.
- Social media online education platforms.
- Anonymous – I want to be aware of sexual health without having to speak to a person.
- Something you can access from the comfort of home.
- Online workshop and a specific App

I think Healthwatch should come up with a social media campaign to address all these issues. Something clear and simple, simple message but straight to the point.

Survey in detail

311 responses were received, however, only 185 (59%) were from young people aged between 16 –25 years old. It is important to note that only these 185 responses have been included in this report.

It is noted that national eligibility for chlamydia screening is young people between 15–24 years olds (inclusive). All responses received were within the national eligibility for screening.

Knowledge about sexual health

Respondents self-reported knowledge of sexual health using a scale of 0–10 with 0 meaning no knowledge and 10 full knowledge.

0			n69 (37%)				n103 (56%)			
0	1	2	3	4	5	6	7	8	9	10
1	4	8	5	7	23	34	36	49	7	11

Self-reported knowledge of sexual health indicated that 56% (n103) respondents had a good level of knowledge, 37% (n69) had some knowledge and 7% (n13) had low of knowledge.

Responders stated where they currently access information from, with 38% (n72) being from web-based and social media.

The main areas where young people go for information	Number
Social media	37 (20%)
Sexual health services	17 (9%)
GP	16 (8%)
Friends and Family	16 (8%)
School	13 (7%)
NHS Website	13 (7%)
Internet, we media, community publicity	12 (6%)
Internet	10 (5%)
Hospitals	8 (4%)
Public health agencies	7 (3%)

No-one selected accessing information from a pharmacy.

There was a wide range of other places young people use to access information, such as: local bookshops, libraries, pharmacies, find it out centres, community centres, youth clubs and other youth organisations.

Young people tend to obtain general information from websites such as: online resources, networks, sexual health specific, government health sites, non-government health sites, general websites, and adolescent health organisations such as YES.

The Internet is one of the main sources of information about sexual health. You can access a wealth of information about sexual health through search engines, social media and specialist health sites. The information covers sexual physiology, psychology, sexuality, and prevention of sexually transmitted diseases.

Social media covered: You Tube, information podcasts, blogs and video channels, and TikTok.

Attending school, college and university health fairs, television and radio programmes and youth activities.

Popular Science videos on the video platform, from professional science bloggers explaining how to use contraceptives properly.

Many schools provide sex education programmes covering physical health, prevention of sexually transmitted diseases, contraceptive methods, etc.

How confident young people are about seeking advice and support about Sexual Health from different areas.

Area	Not confident at all	Somewhat confident	Extremely confident
GP	0	149 (81%)	36 (19%)
Pharmacist	31 (17%)	104 (56%)	50 (27%)
Teacher/education	22 (12%)	110 (59%)	53 (29%)
Youth Worker	44 (24%)	105 (57%)	36 (19%)
Social worker	42 (23%)	106 (57%)	37 (20%)
Family	24 (13%)	118 (64%)	43 (23%)
Counsellor/support worker	30 (16%)	126 (68%)	29 (16%)
CAHMS worker	46 (25%)	109 (59%)	30 (16%)

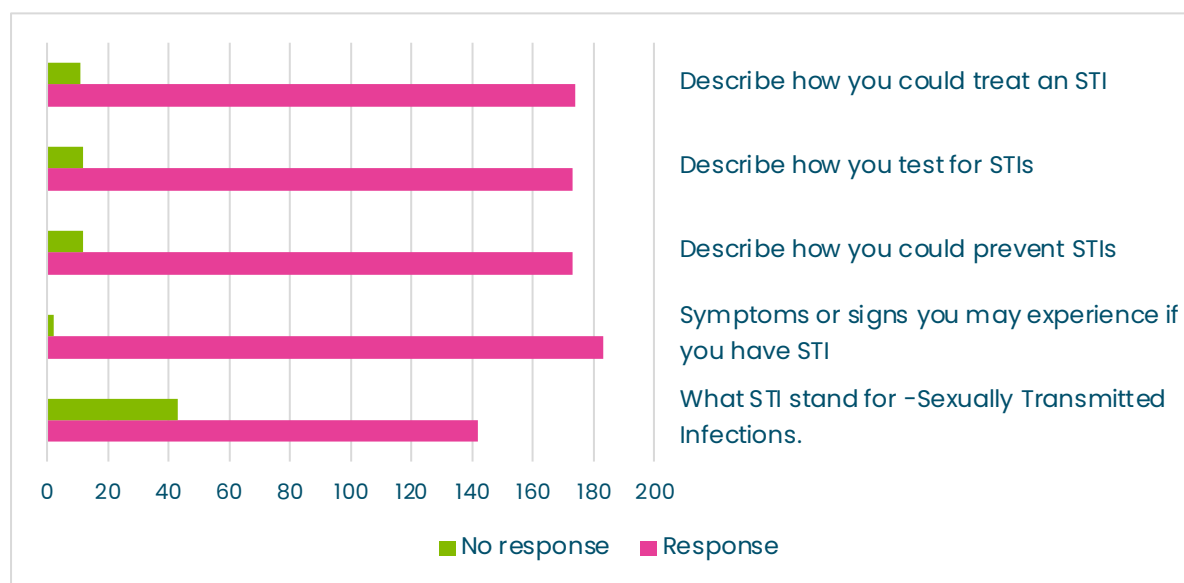
Knowledge of Sexually Transmitted Infections (STI's)

Respondents self-rated their knowledge of STI's using a scale of 0-10 (with 0 being no knowledge and 10 full knowledge).

6(3%)			63(34%)				104 (56%)			
0	1	2	3	4	5	6	7	8	9	10
1	1	4	13	11	27	24	39	53	4	8

This showed that 56% of respondents thought they had a good knowledge, 34% of respondent's knowledge was low and 3% almost non-existent, for STI's.

Respondents shared what they know about STI's.



Responders described what STI's are; diseases that develops from a sexually transmitted infection, through blood or semen during oral or genital sex with an infected partner.

Some of the signs and symptoms shared by respondents included that some people can be asymptomatic, and the signs and symptoms may not be visible at all. Typical symptoms include pain when peeing, unusual discharge, itchy genitals or anus, blisters, sores or warts around genital or anus areas.

Some of the things responders suggested they could do to prevent STI's:

- Use condoms (n58).
- Regular testing and check-ups (n34).
- Limited the number of partners (n22).
- Maintain good sexual hygiene (n21).
- Lead a healthy sexual lifestyle and safe sex (n11).
- Abstinence (n8).
- Know your partners history (n7).
- Avoid sex if you suspect a STI (n7).

Other things shared were not sharing sex toys (n7), vaccination (n4), better knowledge of STIs (n3), and education (n1).

Did you know?

HPV vaccination is a preventative measure for genital warts.



Responders' knowledge of testing for STI's:

- Via blood and urine test (43).
- Swab test (n40).
- Going to the Sexual Health Clinic (n18).
- Culture testing (n14).
- Regular testing (n13).
- Go to your GP (n9).
- Order an online testing kit (n8) and get information online.

Responders' knowledge of treatments:

- Medications, antibiotics and injections (n69).
- Seek medical advice and support (n57).
- Get regular testing and checks (n6).
- Maintain good sexual health habits (n6).
- Refrain from sex until you and your partner have finished any treatment.

Respondents shared what they believe the long-term effects of the STI Chlamydia are.

For women: infertility (n58), chronic pelvic pain (n20), pelvic inflammatory disease (n13), neonatal issues (n11), ectopic pregnancy (n5), increased risk of HIV (n8), and increased risk of urinary tract infections (n3).

For males: pain when urinating (n2), discharge from the penis (n3), pain in the testicles (n3), increased risk of HIV (n2).

The range of suggestions received from responders were wide ranging from test book answers, increased mental health, fatigue, anxiety, sexual health satisfaction, to decreased quality of life and tingling.

There were a number of conditions suggested by responders that studies have shown there is no increased risk such as venereal disease (n7), and prostate cancer (n10).

Respondents were asked what the longer-term health risks of Chlamydia are if left untreated. Knowledge again was variable from good information to little or no information being provided.

What the longer-term health risks of Chlamydia are if left untreated

For women infected with chlamydia, if left untreated, they may develop urethritis, cervicitis, pelvic inflammatory disease (PID), vaginitis, intrauterine infections (IUI), birth canal infections, and puerperal infections.

These conditions can lead to chronic pain, infertility, ectopic pregnancy, and an increased risk of preterm labour and miscarriage.

For men infected with chlamydia, if left untreated, it may lead to complications such as chronic prostatitis, epididymitis, decreased sexual function, impotence, etc.

These conditions may affect male fertility.

Respondents shared their knowledge about the recommended guidelines for Chlamydia testing.

This varied significantly and therefore shows that education is needed to confirm national guidance.

*The National Chlamydia Screening Programme recommends annual screening for all sexually active women younger than 25 years of age, or more frequently if they change their partner.

Woman, under 25 and sexually active	Man, under 25 and sexually active
Responses ranged from 7 days (n4), once a month (n11), every three months (n14), every 6 months (n27) and every 12 months (n40)	Responses ranged from daily (n1), weekly (n3), monthly (n12), three monthly (n15), six monthly (n22), annually (n38), and unsure (n60)
Transgender man, non-binary respondent assigned female at birth, or intersex respondent with a womb or ovaries	Bisexual man or man who has sex with other men
Responses ranged from every 7 days (n8), monthly (n13), three monthly (n21), six monthly (n33), annually (n12), and unsure (n78).	Responses ranged from 4 days (n2), seven days (n3), 10 days (n1), monthly (n30), every two months (n10), every three months (n21), every six months (n23), annually (n14), have new partner (n3), and unsure (n76)

Respondents' knowledge of where to access Chlamydia testing in West Sussex. 83% (n154) of responders had some knowledge of where and how to access Chlamydia testing.

However, there were 17% (n31) of responder's who were unsure how to access Chlamydia testing services.

Sexual Health Clinics	34 (18%)
GP services	30 (16%)
Local hospital	29 (16%)
Order free kit online	15 (8%)
Find It Out Centres	6 (3%)

Responders also suggested:

- University health centres (n5).
- Online/mobile appointment services (n5).
- Mobile testing services (n5).
- Community health centres (n4).
- Pharmacy services (n3).
- Online NHS Webpage (n3).
- Youth centres (n3).

62% (n115) of responders confirmed they have/or could receive information from online and social media sources about Chlamydia and STIs from.

Online / social media	115 (62%)
At school/college/university	97 (52%)
At an outreach event	105 (57%)
In a Sexual health clinic	55 (30%)
At the GP	39 (21%)
From a friend or someone you know	0

Over half of respondents (n100, 54%) stated that they have used the Chlamydia Online Testing Service.

Yes	100 (54%)
No	72 (39%)
Unsure	10 (5%)
Prefer not to say	3 (2%)

Just under half of responders (n88, 48%) shared their experience of using the service.

Positive	36 (20%)
Neutral	52 (28%)
Negative	12 (6%)
Prefer not to say	1 (1%)
No response	84 (45%)

Using Chlamydia Testing Service

I was a little bit sceptical about the results.

Easy to do at home, quick and simple.

Chlamydia online testing offer a greater level of privacy, accurate result, and is convenient.

A quarter of responders (n47, 25%) confirmed they would use the Online Chlamydia testing.

It is important to note that 54% (n99) did not answer this question.

Yes	47 (25%)
No	6 (n3%)
Unsure	31 (17%)
Prefer not to say	2 (1%)
Did not answer	99 (54%)

Over half of respondents (n82, 63%) cited lack of information about the service.

Some of the things stopping young people using Chlamydia testing in West Sussex included:

Reason	Number
Lack of awareness/knowledge/information and publicity about the testing process	50 (27%)
Lack of publicity about testing	33 (18%)
Shy or embarrassed	33 (18%)
Living at home and privacy	27 (15%)
Lack of sexual awareness	21 (11%)
Ashamed	20 (11%)
Cost if not free on NHS	20 (11%)
Unsure about the process	18 (10%)
Access to testing	14 (8%)
Busy lives - lack of time	14 (8%)
Concern about the accuracy of the testing procedure	14 (8%)

Other areas stopping young people using Chlamydia testing in West Sussex included:

- Mistrust the information provided, the system and professionals. (n11).
- Fear of family finding out (n10), and fear of friends finding out (n10).
- Education –not aware they have to test regularly (n7).
- Stigma (n5).
- Uncomfortable topic to discuss (n4).
- Culture, social and religious factors (n2).
- Discrimination (n2).
- Language barriers (n1).
- The process is uncomfortable (n1).

Stopping young people using Chlamydia testing in West Sussex

Wouldn't want the test sent to my house!! How could I get the test without anyone knowing? Can it go to an In Post collection point?

Discomfort with the idea of physical examination.

Preference for avoiding discussions related to sexual health altogether.

Lack of knowledge about chlamydia and its consequences and the importance of testing.

Concerns about the privacy of personal information and test results.

Most young people do not think sexual health is important, and some young people feel ostracised and ashamed about such diseases.

Did you know?

You can collect and drop off a test too? [Pick up a test.](#)



Respondents suggested some of the potential barriers young people face in accessing the Chlamydia online self-testing kit are.

Reason	Yes	No
Lack of information on how to get tested	113	72
Stigma around STIs	100	85
Embarrassment, fear and guilt	96	89
Lack of knowledge around the evidence for chlamydia screening	88	97
Anxiety around using the self-test	66	119
Fear of test results being wrong or inconclusive	63	122
Cultural beliefs, values and attitudes	39	146
Testing not seen as a priority or perceived low risk	32	153
Religious beliefs	29	156
Lack of internet connection to make order	8	177

Respondents stated the ways they would access Chlamydia Testing.

Location	Definitely wouldn't	Probably wouldn't	Might	Definitely would
Online Self-Testing	0	32	106	47
At a Sexual Health Clinic	0	22	115	48
Via a Text or Telephone Advice Line	7	42	103	33
Via a local youth organisation	20	53	81	31

Thoughts of accessing Chlamydia Testing

If test kits were in the loos at college or in community centres, I might pick one up and then send it back, but I don't want to be seen to do it.

Develop a health APP for young people.

Co-promote with brands favoured by young people.

Through public health campaigns.

Respondents suggested the best ways to communicate to young people to access Online Chlamydia and Sexual Health services, for example:

- Social media, (n30), online campaigns (n18).
- Talks in schools, colleges and at universities (n18).
- Community events and workshops (n18).
- Sexual health education programmes (n17).
- Films, books, videos, cartoons, fun activities, handouts and guides (n10).
- Influencers, role models and peer educators (n8).

To engage with young people appropriately, responders suggested there needs to be safe online and social media information which has been developed in partnership with young people. As this ensures acceptance.

Other suggestions to communicate to young people to access Online Chlamydia and Sexual Health services, included:

- Creating educational videos, podcasts, how to guides and articles that explain the process and importance of chlamydia self-testing and STI's. (n32).
- Social media campaigns. (n16).
- Ensure anonymity and confidentiality to protect personal privacy. (n11).
- Easy-to-use self-test kits. (n9).
- Awareness-raising and education. (n8) and more education in schools and workplaces. (n8).
- Advocacy through social media, schools, community centres and online platforms to provide educational information. (n6).

Suggested communication for young people to access Online Chlamydia and Sexual Health services

Other suggestions shared, for example:

- Mandatory testing.
- Vaccination.
- Easily accessible resources.
- Providing incentives.
- Holding Q&A sessions on social media to answer young people's questions about chlamydia self-testing.
- Easily accessible resources.
- Provision of online courses and blogs on sexual health topics.
- Reducing the number of sexual partners.
- Regular reminders.
- Rewards and incentives: For example, young people who complete a test are offered small gifts, coupons or credits that can be redeemed for health-related products or services.
- Feedback mechanism, collect user feedback, and continuously improve detection tools and services.
- Explanation of why to test and advertise the importance on social media platforms.
- Create a sense of community among young people using the self-test.
- The process for online self-testing is simple, easy to understand, including clear instructions, easy-to-follow directions and convenient sample collection methods.
- Integrate comprehensive sexual health education into school curriculum's to ensure consistent and accurate information.

Thank you

We would like to extend a special thanks to **Public Health – West Sussex County Council** and **University Hospitals Sussex NHS Foundation Trust** for support with our project.

Further information about sexual health testing can be found below:

[The prevalence of sexually transmitted infections in young people and other high risk groups – Women and Equalities Committee](#)

Survey Characteristics



Gender

Male (n85)
Female (n94)
Non-binary (n5)
Prefer not to say (n1)

Gender at Birth

Same (n164)
Not same (n13)
Not sure (n6)
Prefer not to say (n2)



Age range

16 (n2)
17 (n3)
18 (n6)
19 (nil)
20 (n13)
21 (n18)
22 (n28)
23 (n38)
24 (n34)
25 (n32)



Disabilities

Have disability (n21)
No disability (n166)
Prefer not to say (n2)



Sexual orientation

Straight (n157)
Gay (nil)
Lesbian (n8)
Bisexual (n11)
Queer (n1)
Prefer not to say (n3)



Ethnic background

Asian British (n2)
Asian Other (n4)
Bangladeshi (n1)
Black African (n7)
Black British (n10)
Black Caribbean (n2)
Chinese (n2)
Mixed White/Asian (n2)
Mixed White/Black (n2)
Other white (n5)
Pakistani (n1)
White British (n144)
White Irish (n7)



Religion or Beliefs

Agnostic (n8)
Buddhist (n7)
Christian (n74)
Hindu (n1)
Islam (n1),
Jewish (n1)
Muslim (n7)
No religion (n99)
Prefer not to say (n3)



Talk to us

If you have questions about the content of this report, please either call 0300 012 0122 or email cheryl.berry@healthwatchwestsussex.co.uk

How this insight will be used?

We recognise that all health and care services are under pressure at this time and have had to adapt their ways of working. We will share this report with the local NHS, Local Government, and other providers to help them understand where things are working well and services are adapting to meet peoples' needs, and to help them identify any gaps. We see this as a continuation of discussions taking place and will continue to use this fresh insight and the solutions presented to challenge for a better future.

For help, advice, and information or to share your experience

We also help people find the information they need about health, care and community and voluntary health and care support services in West Sussex.

Here to help you on the next step of your health and social care journey



You can review how we performed and how we report on what we have done by visiting our website www.healthwatchwestsussex.co.uk



Healthwatch West Sussex works with **Help & Care** to provide its statutory activities.

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West Sussex

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