

# Health Messaging for All

Insight workshop  
Queen Mary University of London  
6th July 2021



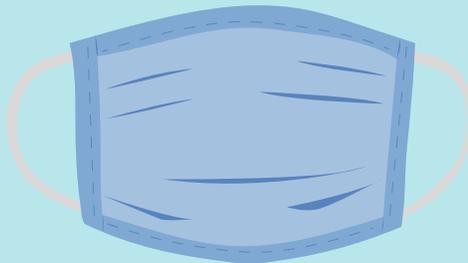
## About the participants

Number of participants: **3**

The group is made up of students from Queen Mary University of London. One of the participants is the current Disability Rep for the Mile End campus

The language used at the workshop was English. All participants were female and aged in their late teens/early twenties.

The all identified as having an impairment, this included dyslexia and long term health conditions.



We asked participants to tell us what their main sources of Covid-19 health information are



Main sources of Covid-19 Info



NHS website



Instagram



New Channels



TikTok



Twitter

## Accessibility



**All** participants found most health information about Covid-19 accessible and easy to understand.

# YOU GET YOUR INFORMATION FROM



The NHS website - uses it, but hasn't really found much apart from information about Covid symptoms and how to book the vaccine. General news e.g what Boris is saying. She tries to tune into his news broadcast but she doesn't like listening to him, and the news is a bit much. So she waits for the scrolling information at the bottom of the screen to come round slowly, and she watches that on repeat. She likes big subtitles. She finds it easier to read these than focus on what is being said.



NHS website - much easier to read than the government website because of font sizing. It's been invaluable. Especially since they have added everything to do with Covid systems to their 119. It's a lot easier to follow than block information. The background of the script on the NHS website is white, so if she is using colour overlay, it comes up a lot stronger than on the government website. It's an off-white/grey - it makes colour overlays more difficult to actually be the colour it is meant to be. They use bigger font than the government website, which is more 'squared off', and smaller.



Social media helps - she focuses on the rules that affect her. Usually her work place will send a message to tell her what the new rules are and if they are affected. Because she didn't leave the house much during Covid times, she didn't really keep up with it much. The rules were always changing and because she stayed at home, she didn't really see the point in keeping up with it, especially if didn't affect her going to work.



She googles - she thinks social media has made it easier to condense information, and has made it more accessible. A summary of the news on Instagram is more accessible.



Half way through the pandemic, her council started emailing her (every 2-4 weeks), and they are really informative. She wishes they were a bit more consistent with it as the information they provide is really helpful.

# Social media - how do you know if you can trust the information?

1

Tiktok/Instagram - there are some reputable people that she follows, e.g. doctors, (one called the Munchin Medic). You get a lot of memes, but take them with a pinch of salt because they over exaggerate things, and they are usually about the rules of lockdown, and she doesn't care.

2

Twitter is helpful, especially after Boris makes an announcement. Usually a few people against/for....you can read a few of them, and then work out what is going on. Doesn't really look at the original sources of where the tweets come from.

3

Follows 2 doctors on Tiktok - one of them always features on BBC, and the other features on ITV/Channel 4. They put out info on new rules, and safety advice to follow. Memes thing is true, you have to take with pinch of salt, but often hits some key points. She'll watch lots of different news channels on repeat so she can process things better. They all have biases but can draw out common/key points.



**“YOUNG DISABLED PEOPLE  
HAVE BEEN LEFT OUT OF  
THE COVID NARRATIVE”**



# We asked participants to tell us how lockdown has been for them

She would like to see young disabled people included in the narrative – it was very focussed on older people. It meant, they were largely left out of the conversation about who should be protected and largely ignored. For example, when she went to the hospital to visit her consultant, the way people behaved towards her versus an older person was different and people were quite lax and less vigilant about their Covid hygiene compared to how they were around older people. Including young disabled people in the narrative from the beginning, and emphasising they are vulnerable people would mean there was a lot more things aimed at them, and a lot more consideration around having vaccine centres with chairs in the waiting room, or quiet times. When she turned up for the vaccine, she only found out which vaccine she was getting after she had been given it. She would like more information on symptoms.

They don't feel like young disabled people have been prioritised in the Covid narrative at all. They also haven't been prioritised at their university.

She has never been able to deal with so much ignorance as she has had to deal with this year.

They haven't focussed on other groups of people (other than old people) who are also affected by this pandemic.

# VACCINES

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Had it done through GP but at a separate surgery. You had to stand outside until you were called in, but they didn't have chairs outside. Although she didn't have to stand for a long time, one of her conditions means it can be hard to stand for a long time in one spot. This was not accessible. The signage was not accessible either - didn't provide a lot of information. Didn't get given any information about what you are likely to experience, which is especially needed for those with mental health conditions, learning disabilities and anxiety conditions. For a friend of hers who is Autistic it was really stressful not having the necessary information in the run up to getting it done.

She was accompanying her sister who is a wheelchair user to the vaccine centre. They were taken to the front of the queue and told they had a lot of spare ones, and she could have it then too, even though she wasn't booked in. Her sister has downs syndrome. She was agitated. They took her to the front. People in the queue seemed annoyed that they were being asked to go in front of them in the queue. There were chairs available. She still doesn't understand the difference between each of the vaccines, and which age group should be taking what, what side effects to expect etc.

She got AstraZenca before it was banned for under 40s. First one fine, second one really ill. For some people who are really ill (like her mum), the GP called beforehand to discuss what would be the best vaccine to take. But it is not accessible to everyone. She went with her dad at a pharmacy. There was only a couple of other people. Went straight in. Didn't get a leaflet/information to take away.

Without information about side effects, it is difficult to know whether you are having a flare up of your condition and whether you need to see your GP or if it a side effects of the vaccine. They got theirs early so wasn't much information and she called her consultant panicking that something was wrong when it was just a side effect of the vaccine.

# VACCINES

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She has social anxiety and she really struggles around a lot of people. She would like to know how many people would be at the vaccine clinic as it would get overwhelming for her if there were too many people. She would also like to know in advance what the expected waiting time would be as this would help her to manage her anxiety. She knows a few people on the autism spectrum that don't want to get the vaccine, and so she likes the idea of designated times for different impairment groups. They can see how hectic it is and they are worried about the experience. People want to avoid having breakdowns outside in front of lots of people.

In her NHS Trust, when you want to book a blood test - it shows you the morning, afternoon, evening and every appointment slot and the number of people that can physically attend each slot. So the NHS has this in place in some capacity, so if you had some vaccine slots throughout the day that were the 'quiet hours' where people with different impairments would be more comfortable with less people, dimmer lighting that would be really helpful.

Information in advance as opposed to when you arrive could help alleviate some people's anxiety. Walk-in-clinics, sometimes queues are really long, and you are waiting up to 2 hours. If you have a disability/condition, having chairs, and water could help make a difference to you.

Information in digital form would be best, as she forgets a lot and she can go back and look at her phone. She can also adjust settings on her own devices to make reading information more accessible to her. Having a digital means you can tailor it to your communications needs if it is in a widely accessible format. Being sent this information alongside your vaccine confirmation email/text would be really helpful.

# VACCINES - RECOMMENDATIONS

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Now talk of Booster - helpful to know who needs it/who doesn't need it from disabled category as there were some people who were disabled who weren't in the high risk category. Booster jab is seen as an 'old people thing', so she would like to know how they fit into it.

- 1 More information about how to book vaccine would be helpful. Best way to receive it would be through email or text message.
- 2 Providing information in advance about what you are likely to experience when you get your vaccine would help ease anxieties. This could be sent out with the vaccine confirmation text/email. Physical/digital leaflet beforehand.
- 3 Having seating available in queues at vaccine centres for those who have mobility issues and other health conditions which makes it difficult for them to stand for long period of times.
- 4 Clearer information about each of the vaccines, comparing them and stating what side effects to expect and which age group should be getting what vaccine.
- 5 Clear information on who needs/required to have the booster jab - which impairment groups/health conditions are eligible.
- 6 Allocated times to get vaccines for different impairment groups e.g. autism where it was quiet, trained support staff available, lighting adjusted with an explanation of what the set up would be in advance.

# REMOVING RESTRICTIONS

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She doesn't think it is a good idea as many people are irresponsible and lots of people are no longer wearing masks and leaving it up to people to make their own decisions makes it seem like there is not a threat. She doesn't want to be online again from September for university - she can't stand it. She feels like the government haven't done enough to enforce wearing a mask and socially distancing. There university has done well in enforcing the rules. If you sit with your friends, you get broken up.

She hates the announcement from the bottom of her heart, with passion. She likes the idea of social distancing. She goes on trains and doesn't like packed areas well. She doesn't handle crowds well and now people will be even closer to her. She doesn't want people to sit next to her on the bus and wants space in the queue, and all this will go with the new rules and she is not looking forward to it.

She feels uncomfortable at the idea of everything going - 'balls to the wall'. It doesn't feel right with all the major scientific and health bodies saying that they think it is a terrible idea. It doesn't instil confidence, especially with the rise of delta variant that effects the body worse than the other variants do, and cases rising more generally. She knows people that are really excited for freedom day, and she struggles to understand why people wouldn't rather keep social distancing, and mask wearing and still be able to go outdoors, and do things currently, than have this short lived period of freedom and be plunged into another lockdown, or this in between place e.g. lockdown / no lockdown / can do things / can't do things. The mixed messaging doesn't help with people's apathy towards the subject. Lots less people wearing masks on tubes, getting closer in queues

Delta variant, she has heard that it is effecting pets and a lot of pets are also vulnerable. Her dad told her that suddenly people's cats are coming down with it, and she is worried because her cat is not in the best shape and she doesn't want her cat to die.

She doesn't have faith in people. People are selfish. Even the people who were strict at the beginning are becoming very lax now.



# TRUST IN GOVERNMENT

WE ASKED PARTICIPANTS TO  
RATE THEIR TRUST IN THE  
GOVERNMENT OUT OF 10

2

Last year they actually closed things down which helped, but after that she lost hope when Boris Johnson did not listen to his health advisors. Cannot understand why they introduced the 'eat out to help out' idea. Good idea for the economy but did not help at all with the virus.

1

If she had to stick to scale it would be 1 out of 10, but in reality it is in the minuses.

MINUS  
INFINITY

They did not enforce lockdown rules last April and people were going out. She wrapped herself up in scarf, jacket, gloves to protect herself when she went out. She votes her trust in the government at minus infinity.

# Confusing information

We asked participants if there was any health information relating to Covid they will still not clear about

So hard that they keep changing the rules. Information is often conflicting. One clear narrative that public health could push out is the most important points. It is so confusing when one minister says something, then Boris says something else, then the British Medical Association says 'this is madness' - it becomes confusing what the key information is for individuals to look after their own personal safety and she thinks at the moment that is all we can do - look after ourselves. The communal mindset has dissipated.

She just focuses on the rules that affects her. Everything makes sense to her at the moment.



Clearer  
Information

The 'be mindful' of others message from the government doesn't work as Britain is more of an individualist country than Australia/NZ that are more collectivist. They should introduce income-based fines, as fixed fines don't work. The only way that people will do something that helps others is if it affects themselves negatively.

She believes there is a change in mask efficacy advice but she is still not sure what it is - this message needs to be pushed out as it is not clear.

# COMMUNICATIONS RECOMMENDATIONS

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- 1 Videos about the rules - simple ones, maybe with animations. Talking through something, someone doing the action. The NHS are a trusted source to make these videos. These videos should be publicised on news outlets.
- 2 Dry white marker videos with stick figures would be easy to follow.
- 3 Send updates by post in big writing, braille, bullet points.
- 4 Include young disabled people in the narrative when designing communications.

# Making Covid test tests more accessible



The PCR tests are not accessible. They could have put instructions in bullet points with small diagrams, but they put it in a 7 page booklet. Should have it as a separate booklet, and have a card with all the key points that you can lean against the wall.

Should simplify the instructions as they need to do it twice a week. They could run a workshop in how to do it with more actions (a video).

Instructions are not in braille or large font, so that should be included.

# What else do you want to tell us?

**1** She doesn't believe they can do anything to alleviate anxieties moving out of lockdown without a competent health minister.

**2** They need to normalise social distancing. E.g Lenny Henry normalised the vaccine which was really helpful in the community. Normalise continuing to wear mask, social distancing, through personal choice.

**3** She has a dog, and when they take the dog out, other dog walkers come up really close and she wants them to stay away. Normalising wearing masks in every community. 'The nose annoys me the most' - 'A mask is not a chin strap'. The worst is when people bring down their face mask to speak to you. She is still expected to go to work but you can't shield from other people not wearing masks in your work place.

**4** She wasn't asked to shield, but was one of the first young people asked to take a vaccine. She was told she could shield 'if she wanted to' because she hasn't had her official diagnosis. They need to have clear guidance about who was expected to shield, and if you were asked to make your own choice information with the 'clear pros/cons' about shielding vs. not shielding would have been really helpful.