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INTRODUCTION

The Nepalese community in Folkestone is growing, yet little is known about their health needs and access to healthcare services. This research explores the health status of Nepalese residents in the area, with a particular focus on individuals living with multimorbidity—the presence of two or more long-term health conditions. The study examines how cultural, linguistic, and systemic factors affect access to care and aims to identify gaps in service provision for this population.

METHODOLOGY

Surveys

100 surveys were completed by Nepalese residents in Folkestone.

Focus Group

A focus group was held with seven participants (four men and three women).

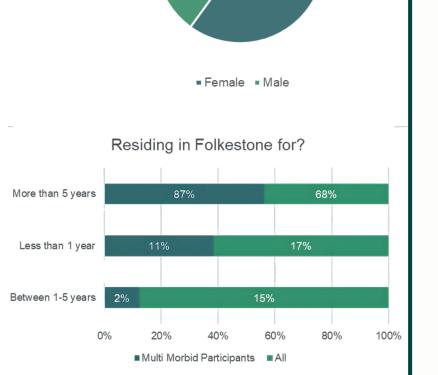
1 to 1 Interviews

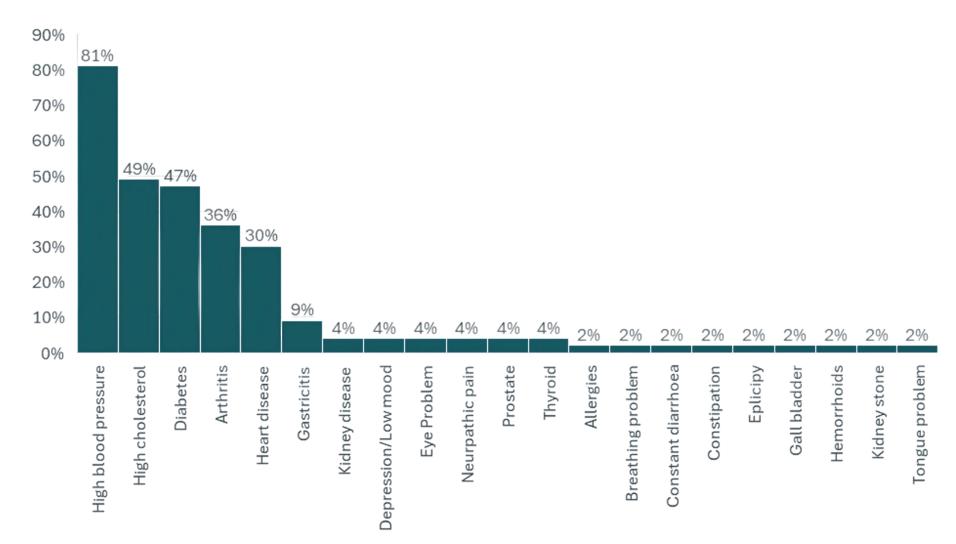
Three individual interviews were also conducted.

PARTICIPANTS

Participants were:

- 60 males (60%), 40 females (40%)
- 67% were above 55 years old, and multimorbidity 96%
- Concentrated in postcodes starting
 CT19 and CT20 (98%)
- 87% were living in Folkestone for more than 5 years



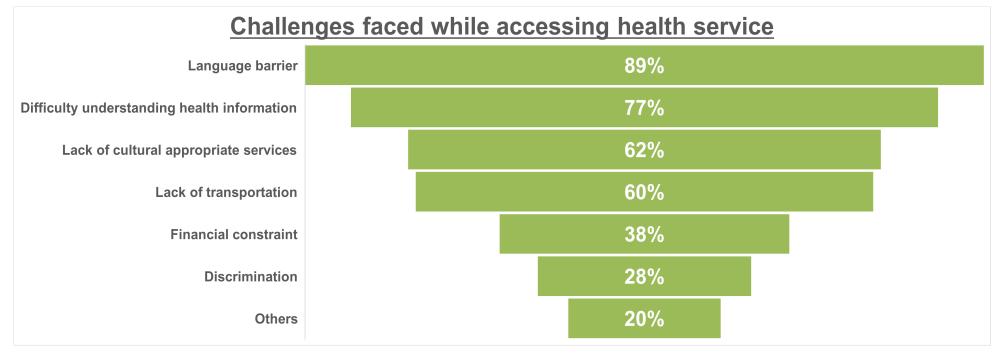


- High blood pressure was the most common condition (81%), followed by high cholesterol (49%), diabetes (47%), arthritis (36%), heart disease (30%), and gastric problems (9%).
- Almost 50% of the participants had multiboridity conditions.
- 12% of the participants managed 3 to 4 long term health conditions.

CONCLUSION

Language difficulties, long delays, and lack of cultural understanding are widening health inequalities. But the solutions are clear: better language support, culturally sensitive care, timely access to doctors, and clear communication. The result is a growing health inequality, one that is avoidable if they are heard and act accordingly.

RESULTS



Language

- 9 in 10 persons cited language as the main barrier.
- 72% stated lack of translation service whilst accessing health service.
- Multi-ethnic languages make up such as beyond Nepalese as the main language.
- 77% did not understand their health information.

Digital Skills

• 73% mentioned frustrated with online bookings for GP appointments, blood tests and X-rays.

Culturally appropriate service

- Lack of face to face appointment as they had more faith in seeing doctors in person..
- 77% indicated inadequate understanding of culture by health professional, with 43% "sometimes" and 34% "rarely.

Long waiting times

• 79% stated long waiting times as one of the main issue, 72% reported limited clinic availability.

IMPACTS

- Almost half (49%) believed their health had worsened due to the barriers to access.
- Expensive travel to Nepal on personal cost to get treatment due to delay here in the UK.
- Anxiety and depression led to sleepless nights.
- More reliance on painkillers as it was given as generic first medicine.

RECOMMENDATIONS

- Recruit Nepali-speaking staff or interpreters.
- Provide written letters for appointments and results, ideally in Nepali or simple English.
- Offer alternatives to online booking for those without digital skills.
- Provide cultural awareness training for staff this was supported by 98% of survey participants.
- And reduce waiting times, with faster and more consistent follow-up.









