Title - The impact on the cost-of-living crisis on the Nepalese community in Folkestone

Introduction – This research investigates the impact of the cost-of-living crisis on the beneficiaries of the Folkestone Nepalese Community (FNC) Centre. It was carried out as part of the Community Participatory Action Research (CPAR) programme, which was initiated and funded by NHS England SouthEast and developed in collaboration with the Scottish Community Development Centre and the University of Reading. This research was conducted by a group of researchers that was supported from the beginning to the end with training and mentoring sessions. The beneficiaries of the FNC Centre were very helpful when responding to every stage of the research.

Research focus – We chose to focus to research the following questions based on many of the concerns raised by the beneficiaries.

- 1. What the impact of the cost-of-living has been and whether the COVID-19 pandemic exacerbated any of the factors.
- 2. How their access to the health services has been since the cost-of living crisis has started and any suggestions on how to improve this.
- 3. Why some of the beneficiaries of the FNC Centre choose to support their dependants back home in Nepal despite the crisis and their age.

Research methods – Our research was conducted by two stages. The first stage was a survey that had a mixture of both closed and open questions. Survey was chosen as our main method of data collection because we thought it would be the most efficient way into the gaining insights of the beneficiaries. A total of 103 beneficiaries participated in the survey and were conducted face-to-face because most of those who attend FNC Centre cannot read and/or write English. Furthermore, it allowed us to explain what the cost-of-living crisis was since there was no direct translation in Nepali.

The age range of those who participated in the survey was largely representative of the people who visit the FNC Centre. The largest group was 70 to 79 (60) with just over half of the participants being women (53). 65 of the participants were married and 81 answered that they suffered from at least one health condition.

84% of the beneficiaries receive their income from Pension Credit. This is a means-tested benefit that helps those on lower incomes by giving them extra money throughout retirement. Pension Credit tops up your weekly income to £201.05 if you're single or your joint weekly income to £306.85 if you have a partner. Thus, many of the beneficiaries of the FNC Centre were in relative poverty as defined by the government.

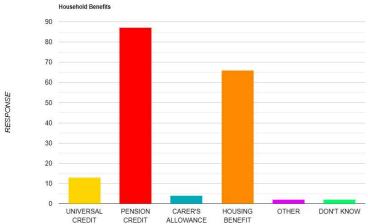


Figure 1 Do you, or someone in your household, receive the following benefits?

80% of the beneficiaries were living as private tenants on rent. The responses stated that this was because of its relative low cost and the queue on social housing. 64% of the respondents answered that they were receiving Housing Benefit. This is a means-tested social security benefit that is intended to help meet housing costs for rented accommodation.

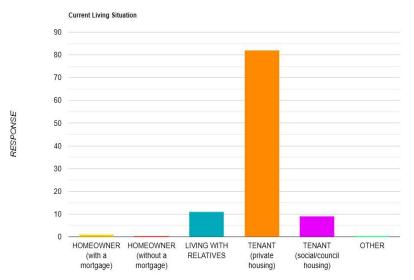


Figure 2 Which of the following best describes your current living situation in the UK?

Research findings – After analysing the data from the questionnaires, the following findings were established:

Most people were negatively affected by the cost-of-living crisis with 62% of beneficiaries thought their spending habits of changed with a lot of the comments describing how everything had become more expensive. 69% of beneficiaries struggled to pay at least one of their bills, with 18% of the beneficiaries stating they struggled to pay all of their bills. Although there was no direct translation of cost-of-living to Nepalese, once we explained to them in simplified terms many of the beneficiaries realised the crisis had a direct impact on them.

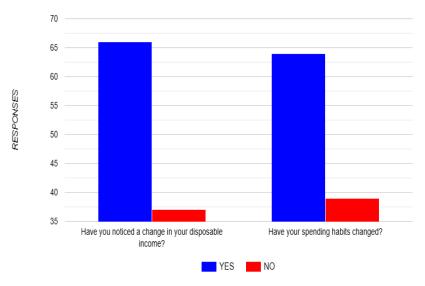


Figure 3 The effects of the cost-of-living crisis

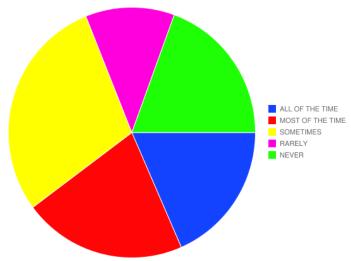


Figure 4 Thinking about your finances over the last year, how often, if at all, have you struggled to pay at least one of your household bills?

Over half of the respondents stated that their mental health was worse than the previous year with many of the answers ranging from normal age-related concerns to some worrying about their families back in Nepal. There were always responses discussing how the isolation from the COVID-19 pandemic already impacted their mental health and how the cost-of-living crisis exacerbated this.

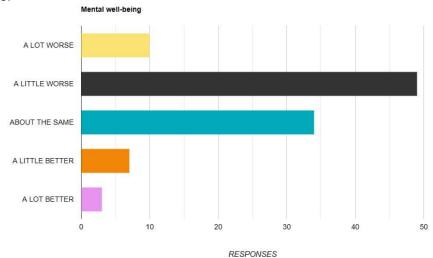


Figure 5 Thinking about how last year compares to previous years, do you think your mental wellbeing has been:

80% of those who took the survey sent money back to their relatives in Nepal, with 32% of those going to 3 or more relatives. This is perhaps the biggest surprise of our quantitative data especially when you consider their age. Some interviewees stated that they support their dependants out of necessity, which makes sense if one considers the economic situation in Nepal. According to the World Bank, 45.3% of Nepal live on less than £2.53 a day, thus any amount of money being sent over to Nepal will likely to help their lives significantly.

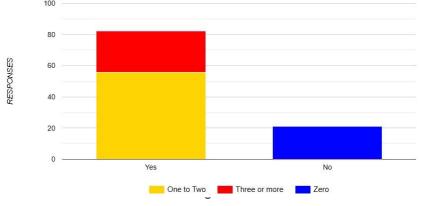


Figure 6 Do you have any dependants in Nepal that you are supporting financially?

More than 60% found the access to the NHS hard or very hard. A lot of the concerns were about how difficult it was to communicate due to the language barrier and how there should be more interactions at the GP. A lot of the responses described how the access to the services was easier before the COVID-19 pandemic as meeting the health professionals face-to-face meant they could somewhat explain their problems even if there was a verbal barrier.

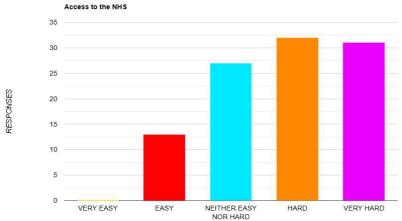


Figure 7 Thinking about how the last year compares to previous years, how have you found your access to the NHS?

Recommendations and actions – The survey results shows that the cost-of-living crisis has had a sizeable effect on many of the beneficiaries even if they had not realised this until we explained it to them. Based on the findings of this research, the following actions and recommendations can be made:

- Most funding from the UK government, the NHS, and Kent County Council to support those suffering from the cost-of-living crisis.
- The NHS should make it easier and simpler to access the health services. There at least has to be one person who can translate face-to-face and is easy to access.
- Community centres should be better supported and communicated to due to their importance to that require the most help. Many beneficiaries highlighted the good relationship they had with the FNC Centre and the positive impact it had on lowering the barriers to society.

Conclusion – The findings of this research highlight the importance of continuing support either through official services or through community work, especially to those that are in the lowest income bracket like so many of the beneficiaries of the FNC Centre. This is because the cost-of-living crisis has not ceased to impact those we researched, despite the efforts of those in power to tell the contrary. Furthermore, there needs to be a concerted effort to understand the culture if we are genuinely trying help a community such as the Nepalese community in Folkestone. This would thus make it easier for any support to be more effective and for there to be an understanding as to the reasons why those who may be affected by the cost-of-living crisis will choose to support relatives back home or why some gave up trying to access the health services. Our role as a community organiser must be encourage all to talk about how the cost-of-living impacted them at home. This is because it will not only help increase understanding but also increases confidence in discussing their issues.

Acknowledgments - I would like to thank all the participants who took part in the surveys and face-to-face interviews because without their cooperation, the research project would not have been as insightful. In addition, I am extremely grateful to Kate McHendry from Scottish

Community Development Centre (SCDC) for mentoring us and supporting the development of our research. Similarly, I want to thank Dr Esther Oenga for providing the necessary training. Finally, I am thankful to all my fellow community researchers as our work as a team is the only reason as to why the research has a chance to become impactful for our community.







