FNC Student Placement Summary

Folkestone Nepalese Community (FNC) hosted two final-year Adult Nursing students from University of Portsmouth on an extended spoke placement.

Students:

- Suruchhya Ghale (Student Nurse)
- Prashanna Roka (Student Nurse)

Placement Period: 02 February 2026 – 2 weeks

Placement Supervisor:
Maha Rai PhD, Charity, Programme & Centre Manager

Placement Overview:
During their placement, the students engaged with FNC's community health and wellbeing activities, gaining practical insight into grassroots service delivery and community-based support.

Outputs:

- Completed two literature review reports
- Reports were compiled using evidence and data from FNC project reports and activities

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Report Summary – Prashanna Roka

Written by: Prashanna Roka (Student Nurse, University of Portsmouth)

Date: 13 February 2026

This literature review, written during the placement, explores how children and young people from the Nepalese community in Folkestone access and engage with community health services.

Drawing on FNC's *Children's Community Health Services Engagement Report 2024* and Community Participatory Action Research (CPAR) programmes, the report highlights the role of health literacy, communication, and culturally responsive approaches in shaping service access and experiences.

It also demonstrates the value of community-led research in identifying health inequalities and supporting more inclusive and accessible service delivery.

Access, Experience and Literacy in Community Health Engagement Among Children and Young People: Evidence from Folkestone Nepalese Community

Written By Prashanna Roka – 13 February 2026

This literacy report synthesises findings from the ‘’Children’s Community Health Services Engagement Report 2024’’ produced by the Folketone Nepalese Community (FNC) and situates these findings within the context of community-led research practice as illustrated through the Community Participatory Action Research (CPAR) programmes (Cohort 2 and Cohort 3). The aim is to draw out implications for health literacy, information access and communication in the Nepalese community and to link these wider participatory research and engagement frameworks.

The FNC has hosted research that empowers community members to explore health service experiences and barriers to access especially for children and young people in Folkestone and Kent and Medway (Folkestone NEpalese Community [FNC], 2024). The report also draws on community researcher develop-ment through CPAR, which builds capacity for collecting, interpreting and acting on data within community contexts (FNC UK CPAR Cohort 2; FNC UK CPAR Cohort 3).

FNC is a community organisation focusing on improving wellbeing, including and access to services for Nepalese and Gurkha families in Folkestone, including through education and research. Its work includes participatory research partnerships and service user experience gathering (FNC UK).

FNC’s involvement in CPAR illustrates the organisation’s commitment to training community members to conduct research that speaks directly to lived experiences and informs service design and delivery. CPAR Cohort 2 explored the impact of the cost-of-living crisis on local families, while CPAR Cohort 3 focused on health inequalities and participation in health systems (FNC UK CPAR Cohort 2; FNC UK CPAR Cohort 3).

CPAR is a research approach that engages community members as co-researches, recognising community insight as both valid and essential for shaping meaningful improvements in health and other social services.

Literacy in this context is defined not only as a reading and comprehension skill, but also broadly encompasses health literacy - the ability to access, understand, evaluate and use information to make informed decisions about health and services. A strong literature base suggests that low literacy and poor access to information often exacerbates health inequalities, particularly among marginalised groups. (National Literacy Trust, 2024).

The Children's Community Health Services Engagement Report 2024 explored how children and young people and their families accessed health services within community health settings. The research involved surveys and facilitated engagement sessions conducted at the FNC Centre. Interpretation support was provided where necessary to ensure participants could fully engage in the process, reflecting an awareness of linguistic diversity within the community.

The findings indicate that awareness and utilisation of specific community health services varied among participants. While some families reported accessing services such as speech and language therapy, community paediatrics and audiology, others had limited awareness of what services were available or how to access them. This variation suggests that differences in health literacy, communication pathways and familiarity with the health system may influence service engagement.

The report further identified communication as a central theme. Participants expressed a desire for clearer communication channels, including appointment reminders via text message or email and improved clarity in service processes. These responses suggest that while services may be available, the accessibility of information about those services could be strengthened. In particular, consistent and culturally responsive communication strategies may enhance understanding and confidence in navigating the system.

Although overall satisfaction among service users was generally positive, the discrepancy between satisfaction levels and overall service uptake points to a potential literacy gap. Families who successfully accessed services reported positive experiences; however, others may not have

reached the point of engagement due to barriers in understanding referral pathways, eligibility criteria or service roles. This highlights the distinction between service quality and service accessibility, with the latter closed tied to literacy and communication.

The engagement findings illustrate how language proficiency and health literacy influence healthcare access. The need for interpretation support during data collection underscores the reality that written and spoken English materials may not always be sufficient for all members of the community. Where information is not available in a familiar language or format, families may rely heavily on informal networks or community organisations to interpret and contextualise service information.

Moreover, the recommendation for digital reminders and improved communication suggests that literacy is not limited to reading ability but includes digital literacy. The ability to navigate online booking systems, understand automated messages, and respond to appointment notifications forms part of contemporary health engagement. For families who may face digital exclusion or limited familiarity with online systems, these processes can become additional barriers.

Participatory research models such as CPAR play a critical role in strengthening literacy at the community level. Through involvement in research design, data analysis, and report writing, community members develop analytical and communication skills that extend beyond the project itself. These enhanced literacy skills can empower individuals to advocate for clearer health information, improved service responsiveness, and culturally appropriate engagement strategies. In this sense, literacy development becomes both an outcome and a mechanism of participatory research.

The *Children's Community Health Services Engagement Report 2024* demonstrates the importance of understanding health service engagement through a literacy framework. While satisfaction among service users is high, variations in service awareness and utilisation suggest that communication and health literacy barriers persist within the Nepalese community in Folkestone.

By linking the engagement findings to the CPAR framework, this report highlights the value of community-led research in identifying and addressing literacy-related challenges. Strengthening multilingual communication, enhancing digital accessibility, and embedding participatory

approaches in service planning are key strategies for improving equitable access to children's community health services.

Ultimately, literacy should be recognised not only as an individual skill but as a structural consideration in health system design. When services are communicated clearly, culturally, and collaboratively, communities are better positioned to engage confidently and effectively.

References

- Folkestone Nepalese Community. (2024). *Children's Community Health Services Engagement Report 2024*. Folkestone Nepalese Community. https://fncuk.org/wp-content/uploads/2024/12/FNC-Report-Children-and-Young-people-community-health-service-2024.pdf
- Folkestone Nepalese Community. (n.d.). *Community Participatory Action Research (CPAR) – Cohort 2*. https://fncuk.org/cpar-cohort-2/
- Folkestone Nepalese Community. (n.d.). *Community Participatory Action Research (CPAR) – Cohort 3*. https://fncuk.org/cpar3/
- National Literacy Trust. (2024). *Children and young people's reading in 2024*. National Literacy Trust.