

Living Well in Sale and Partington

**What helps and hinders wellbeing in
local communities**

July 2026

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Executive Summary

Background

Live Well is Trafford's approach to supporting residents to improve their health and wellbeing through stronger communities, earlier support and better access to local opportunities. As part of the initial Live Well pilot in Sale and Partington, Trafford Council commissioned Healthwatch Trafford to gather the views and experiences of local residents.

Healthwatch Trafford conducted a survey between March and April 2026, receiving 765 responses. A further 11 residents took part in three focus groups held in Partington and Sale. The research explored what helps residents maintain their wellbeing, what barriers they face, and what improvements they would like to see within their local communities. The project was informed by the Five Ways to Wellbeing framework: Connect, Be Active, Take Notice, Keep Learning and Give.

Key Findings

- Most respondents reported good wellbeing. However, 16.7% of respondents rated their wellbeing as poor or very poor.
- Physical activity and connecting with others were the two wellbeing factors that residents considered most important. These themes appeared consistently throughout the survey and focus groups.
- The most commonly reported barriers to wellbeing activities were time pressures related to work, caring and family responsibilities, followed by cost and a lack of awareness of available activities and support.
- Respondents with a disability or long-term health condition were less confident finding information about local services and support, and were more likely to experience physical and mental health barriers to participation.
- Many residents said they would find additional wellbeing activities useful. Physical activities, social activities and wellbeing-focused activities were the most popular types of support identified by respondents.
- Survey respondents frequently requested more opportunities for exercise, social connection, learning and creative activities. Many also highlighted the importance of accessible community spaces and better promotion of existing activities.
- Focus group participants in both Sale and Partington emphasised the importance of community centres and community spaces in supporting wellbeing. Participants described these spaces as important places for social connection, volunteering, information sharing and community-led activity.
- Awareness of local opportunities emerged as a significant issue across both the survey and focus groups. Many residents said they did not know what activities were available locally or where to find information about them.

- In Partington, participants expressed concerns about the loss of community facilities and the impact this may have on opportunities for social connection and community activity. In Sale, participants highlighted the need for better coordination and promotion of existing wellbeing opportunities.

Recommendations

Awareness and Communication

- Improve promotion of local wellbeing activities through a coordinated approach that uses both digital and non-digital communication channels.
- Maintain an accurate and up-to-date source of information about local wellbeing opportunities, community activities and support services.

Accessibility and Inclusion

- Ensure Live Well activities are accessible to residents facing different barriers, including disabled residents, carers and people with poor health.
- Consider transport, timing and accessibility when developing and promoting wellbeing activities.

Community-Based Delivery

- Continue supporting community venues as important assets for wellbeing, social connection and local activity.
- Support community-led groups and initiatives that reflect local interests and needs.
- Prioritise activities that promote both physical activity and social connection.

Ongoing Engagement and Co-Production

- Continue involving residents, volunteers and community organisations in the development of Live Well.
- Ensure future engagement reaches people who may be less connected to existing community networks or wellbeing activities.
- Monitor local needs and experiences to ensure Live Well remains responsive to different neighbourhoods and communities.

Introduction

Live Well is Trafford's approach to supporting residents to improve their health and wellbeing through stronger communities, earlier support and better access to local opportunities. As part of the initial Live Well pilot in Sale and Partington, Trafford Council commissioned Healthwatch Trafford to gather the views and experiences of local residents. The pilot is centred around a network of community-based Live Well Hubs. In Sale, these included Coppice Library and Wellbeing Centre, Sale West Community Centre, Sale Moor Community Centre and Sale Library (Waterside). In Partington, the Health and Wellbeing Centre was identified as the flagship Live Well location.¹

The purpose of this research was to understand what helps people in Sale and Partington maintain their wellbeing, what barriers they face, and what improvements residents would like to see within their local communities. The findings will help inform the continued development of Live Well services and activities within these neighbourhoods.

The project was based around the Five Ways to Wellbeing, a widely recognised framework for supporting wellbeing.² The Five Ways are:

- Connect
- Be Active
- Take Notice
- Keep Learning
- Give

Through a survey and follow-up focus groups, residents were asked about the opportunities available in their communities, the activities that matter most to them, and the factors that help or hinder their ability to take part. In total, 765 residents completed the survey and a further 11 residents participated in three focus groups. The research focused on understanding residents' lived experiences and identifying practical ways that local services, community organisations and the Live Well programme can better support wellbeing in Sale and Partington.

This report presents the findings from the survey and focus groups, alongside recommendations for the future development of Live Well in Sale and Partington.

¹

<https://democratic.trafford.gov.uk/documents/s53764/Trafford%20Live%20Well%20Implementation%20Update.pdf>

² <https://www.nhs.uk/mental-health/self-help/guides-tools-and-activities/five-steps-to-mental-wellbeing/>

Methodology

Survey

The survey was designed by Healthwatch Trafford and shared with various stakeholders for comment. The survey ran from 4th March 2026 to 30th April, and was open to residents of Partington, Sale Moor, and Sale West. The survey was anonymous, though respondents could give their details to be involved in future focus groups on this topic.

Healthwatch Trafford and Trafford Council used various methods to distribute the survey, mostly by using local voluntary sector organisations such as Age UK, Trafford Carers Centre, and Bluesci. These organisations shared the survey through mailing lists, social media, and in-person meetings and groups. Most responses were gathered through the online survey (available via link and QR code), but there were many responses to the paper version, particularly in Sale. The survey gathered 765 responses.

Limitations of the survey are shown in the demographic makeup of the responses: almost 80% of respondents were from Partington, and younger people were underrepresented with only 21% of respondents being under 45. The survey was self-selecting and as distribution relied heavily on community organisations, the people already connected to them were possibly overrepresented.

Focus Groups

206 people expressed an interest, however, in total 11 people attended the focus groups. For each group, a number of people who had signed up did not attend on the day. While attendance was lower than anticipated, participants provided valuable qualitative insight that could not have been gained from a survey alone.

The discussions were not recorded but led and facilitated by Healthwatch staff, and notes were taken to record information. A discussion guide was produced for the focus groups (see Appendix 2), but the style was conversational and free flowing. The notes were reviewed and grouped into themes, presented in the findings section of this report.

Three focus groups were held as part of this project: two at a venue in Partington, chosen for its relative distance from the rest of Trafford, and a third at the LifeCentre in Sale. A representative from Trafford Council's Live Well Programme attended the Sale group.

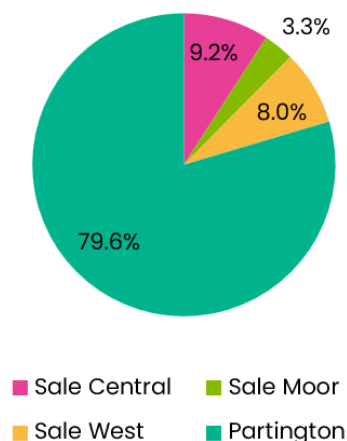
The main challenge was finding a suitable venue, date, and time to suit as many participants as possible. The people who came tended to be those able to attend on a weekday during the day, such as older residents. Those attending were also often very active within their communities and already had in-depth knowledge of what was on offer in their areas. Due to the small number of participants, the focus group findings should be

seen as illustrative of participants' experiences rather than representative of all residents in Sale and Partington.

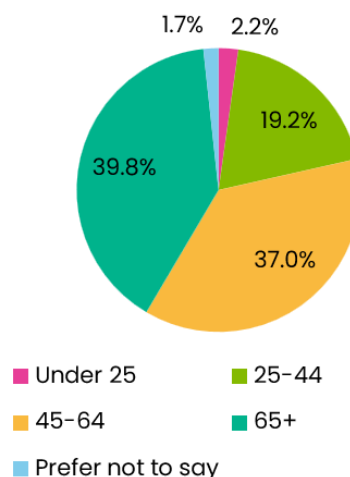
Survey Respondent Demographics

Respondents were asked optional demographic questions to help us understand who had taken part and whether certain groups were over- or under-represented in the findings.

Which area do you live in?

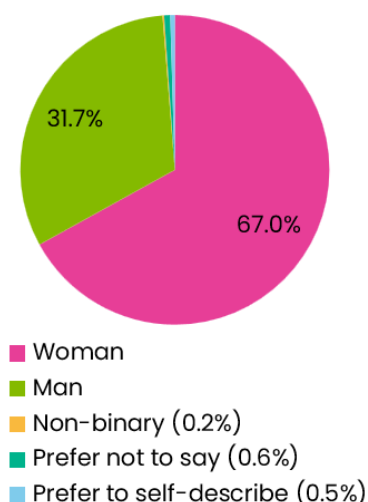


What age group are you in?

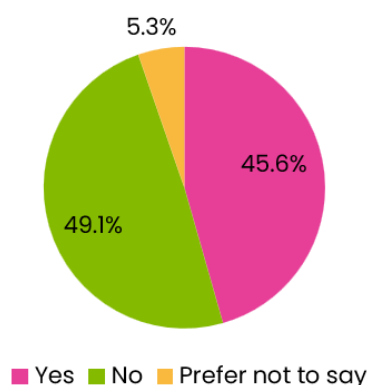


Almost 80% of respondents were from Partington, with the rest from Sale. Almost 77% were aged 45 or over, and only 2.2% of respondents were under 25.

What is your gender?



Do you have a disability or long-term health condition?



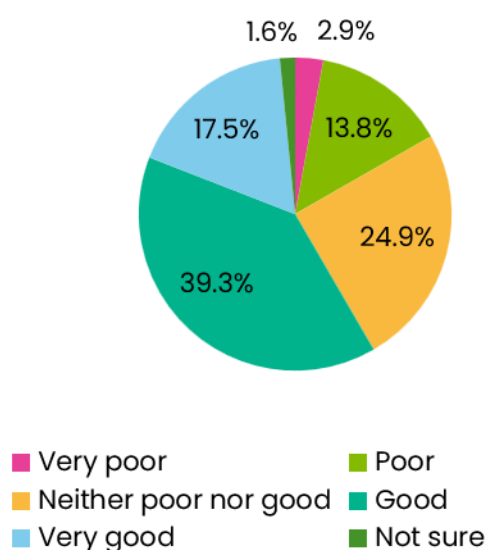
Women formed 67% of the responses, while men accounted for 31.7%. 45.6% of respondents identified themselves as having a disability or long-term health condition. Approximately 80% of respondents identified as White English, Welsh, Scottish, Northern Irish or British. Full ethnicity and living arrangements data is available in Appendix 3.

Survey Findings

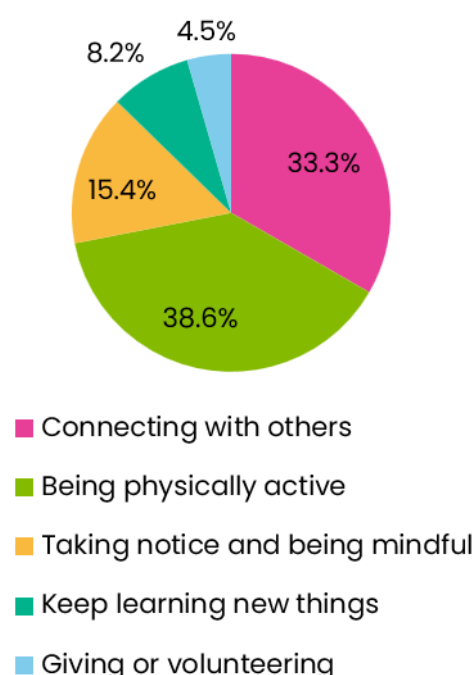
As most responses came from Partington and older residents, findings should be interpreted with this in mind and may not fully reflect the views of younger residents or those living elsewhere in Trafford. The findings are presented thematically.

Wellbeing and the Five Ways to Wellbeing

Overall, how would you rate your wellbeing at the moment?



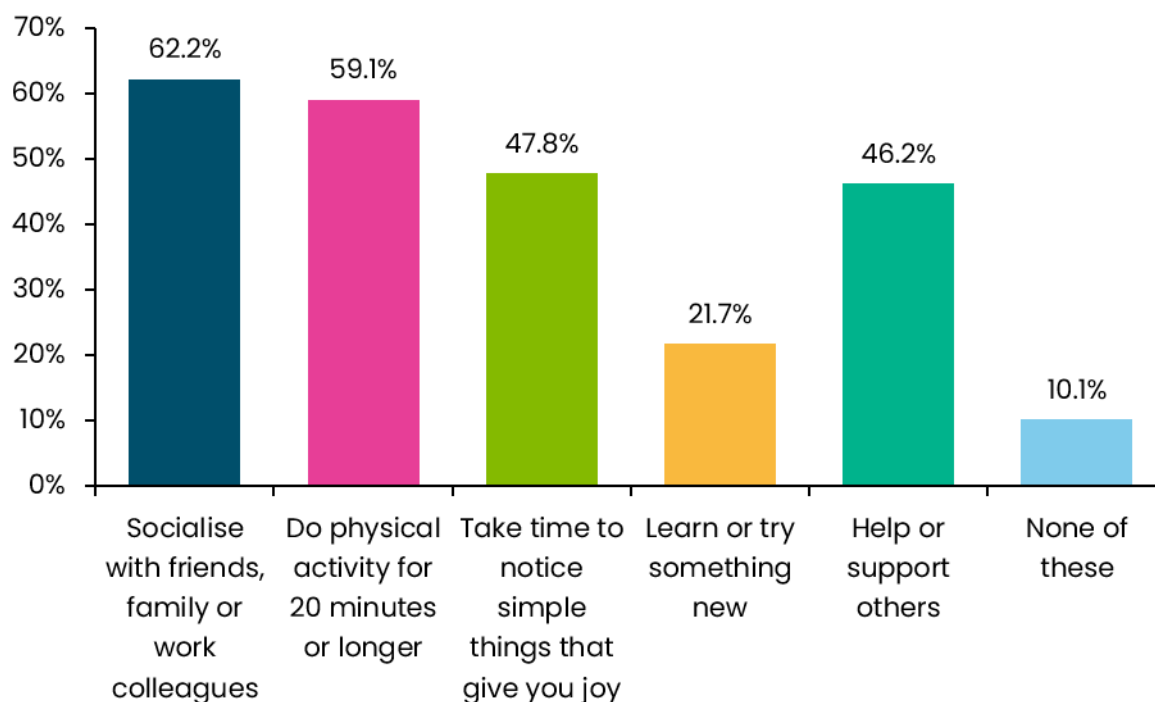
Which of the following is most important for your wellbeing? (Select one)



Overall, the majority of respondents said that their wellbeing was either good or very good. Almost a quarter said it was neither poor nor good, and 16.7% said it was poor or very poor. When asked which of the five ways of wellbeing was most important to them, the most popular response was 'being physically active', at 38.6%. This was followed by 'connecting with others', at 33.3%. Next was 'taking notice and being mindful' at 15.4%, then 'keep learning new things' at 8.2%. The least popular choice was 'giving or volunteering', at 4.5%.

People with a disability or long-term health condition were far more likely to report lower wellbeing, with 30.5% saying they had very poor or poor wellbeing, in comparison with 6.9% for those without a disability or long-term health condition. 34.4% of people with a disability or long-term health condition reported very good or good wellbeing, compared to 76.9% of people without a disability or long-term health condition.

In a typical week, which of the following do you usually do? (Select all that apply)



When asked which activities they usually do, the most popular response was 'socialise with friends, family or work colleagues' (62.2%), followed by 'do physical activity for 20 minutes or longer' (59.1%). This was followed by 'take time to notice simple things that give you joy' and 'help or support others', at approximately 47%. 21.7% said that they 'learn or try something new', and 10.1% said that they do 'none of these'.

The activities that people take part in broadly align with their priorities. However, there is a noticeable gap between the percentage of people who say they consider 'giving or volunteering' to be important to their wellbeing (4.5%), and the percentage of people who help or support others in a typical week (46.2%). This suggests that people may gain wellbeing benefits from volunteering or helping others without necessarily recognising it as a contributor to their own wellbeing. Alternatively, it may be that they have caring responsibilities for others which are unavoidable and do not contribute to their wellbeing.

While respondents of all ages placed the greatest emphasis on physical activity and social connection, younger respondents were more likely to identify connecting with others as the most important factor for their wellbeing. Older respondents showed a slightly greater emphasis on volunteering and giving, although this remained a relatively uncommon response across all age groups.

There were notable geographical differences in the responses. In all three Sale areas, 'connecting with others' was the most frequently selected wellbeing factor, chosen by 44% to 49.3% of respondents. In contrast, respondents from Partington were more likely to

identify 'being physically active' as most important (41.9%), with fewer selecting 'connecting with others' (29.7%)³, showing priorities may vary between communities.

People rated their overall wellbeing differently depending on which area they lived in. Sale residents reported a slightly higher wellbeing than Partington residents, as shown below:

	[Q1] Which area do you live in?					
[Q4] Overall, how would you rate your wellbeing at the moment?		Sale Central	Sale Moor	Sale West	Partington	Row Totals
	Very poor	2.9%	0.0%	3.3%	3.0%	22
	Poor	11.6%	4.0%	13.1%	14.6%	105
	Neither poor nor good	26.1%	28.0%	14.8%	25.7%	189
	Good	39.1%	48.0%	42.6%	38.6%	298
	Very good	20.3%	16.0%	26.2%	16.4%	133
	Not sure	0.0%	4.0%	0.0%	1.8%	12
	Column Totals	69	25	61	604	759

Wellbeing Rating	Sale	Partington
Very poor	4 (2.6%)	18 (3%)
Poor	17 (11%)	88 (14.6%)
Neither poor nor good	34 (21.9%)	155 (25.7%)
Good	65 (41.9%)	233 (38.6%)
Very good	34 (21.9%)	99 (16.4%)
Not sure	1 (0.6%)	11 (1.8%)
Total	155 (100%)	604 (100%)

In Sale, 13.6% of respondents rated their wellbeing as poor or very poor, compared to 17.6% for Partington. Furthermore, 63.8% of Sale respondents rated their wellbeing as good or very good, and 55% of Partington respondents rated their wellbeing as good or very good.

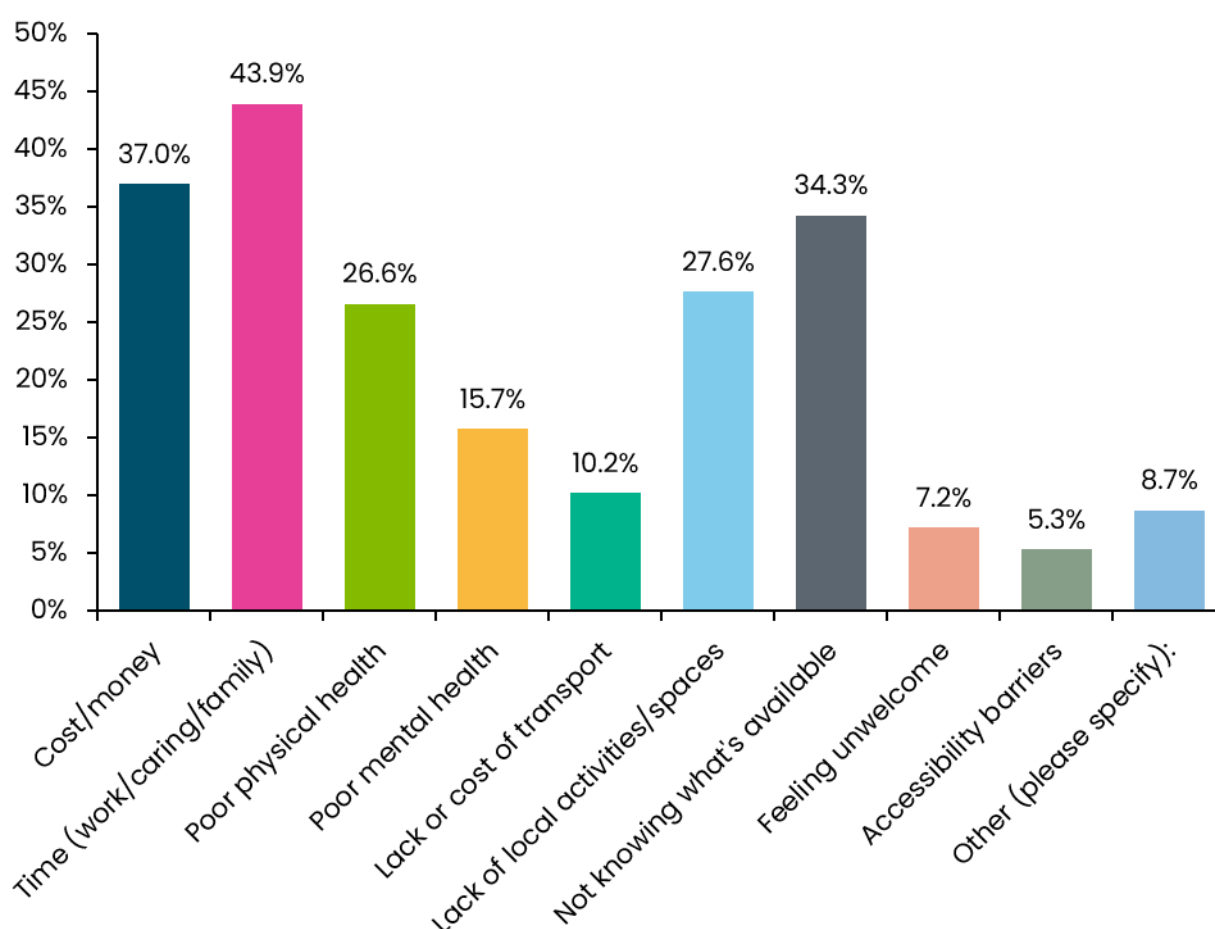
Respondents reporting poorer wellbeing were substantially less likely to engage in the activities associated with the Five Ways to Wellbeing. Over half (53.8%) of respondents who rated their wellbeing as very poor reported undertaking none of the listed activities in a typical week, compared with just 0.2% of those reporting very good wellbeing. Socialising and physical activity were consistently the most common activities across all wellbeing groups. Respondents reporting good or very good wellbeing were more likely to report

³ See Crosstab 1

participating in a range of wellbeing activities.⁴ The findings suggest an association between participation in wellbeing activities and positive wellbeing outcomes. However, as this survey provides only a snapshot in time, it cannot determine whether these activities improve wellbeing, or whether the data simply shows that people with better wellbeing are more likely to take part in these activities.⁵

Barriers to Wellbeing

What makes it harder for you to do activities that support your wellbeing? (Select three options at most)



At 43.9%, the most commonly selected barrier to taking part in wellbeing-improving activities was a lack of time, due to work, family, or caring responsibilities. 37% selected 'cost/money', and 34.3% did not know what was available. 27.6% felt there was a lack of local activities or spaces. Just over a quarter of respondents struggled with access due to

⁴ See Crosstab 2

⁵ To measure this, it would be required to conduct a study of those who reported poor wellbeing, and measure if their wellbeing improved over time as they started attending various activities linked to the ways of wellbeing.

poor physical health, and 15.7% told us that poor mental health was prohibitive. People struggled with transport issues, feeling unwelcome, and accessibility (e.g., buildings not accessible, uneven pavements, etc.). Also cited: lack of childcare, the temporary closure of Partington Sports Village, a lack of women's spaces, and inaccessibility for those who speak different languages.

Those aged 25–64 were more likely to identify time as a barrier, possibly due to this age group being more likely to be in employment. Poor physical health becomes more prohibitive with age, rising from 5.3% in those aged 25 to 44 to 17.6% in the over-65s. Lack of awareness around what is available also increases with age, from 12.4% among 25 to 44-year-olds to 20.7% among those aged 65+. This suggests that more work should be done to ensure older people are made aware of local wellbeing activities. Poor mental health is reported more frequently by younger respondents; 15% of under-25s compared to 5.4% of those aged 65+. ⁶ This suggests that a single approach will not reach all age groups or address all barriers.

Respondents in Partington were roughly twice as likely as those in Sale to identify a lack of local activities or spaces (14.1% compared with 6.3%–7.8% across Sale localities). People in Sale Moor were the most likely to report not knowing what activities or support was available (25.9%) compared with 19.5% in Sale Central, 21.1% in Sale West and 14.5% of respondents in Partington. ⁷ This suggests that signposting may be a particular issue there.

Respondents with a disability or long-term health condition were substantially more likely to identify poor physical health (21.6% compared with 2.7%) and poor mental health (11.1% compared with 3.7%) as barriers to participating in wellbeing activities, suggesting accessibility may be notable issue. In contrast, respondents without a disability were much more likely to cite work, caring or family commitments as a barrier (28.9% compared with 10.5%). ⁸

Respondents reporting poor wellbeing overall were substantially more likely to identify poor physical and mental health as barriers to participation. In contrast, respondents reporting good or very good wellbeing were more likely to cite time pressures related to work, caring responsibilities or family commitments. ⁹ This reveals the importance of making an extra effort to target wellbeing activities at people with poorer physical and mental health, as well as people who live alone or experience social isolation.

⁶ See Crosstab 3

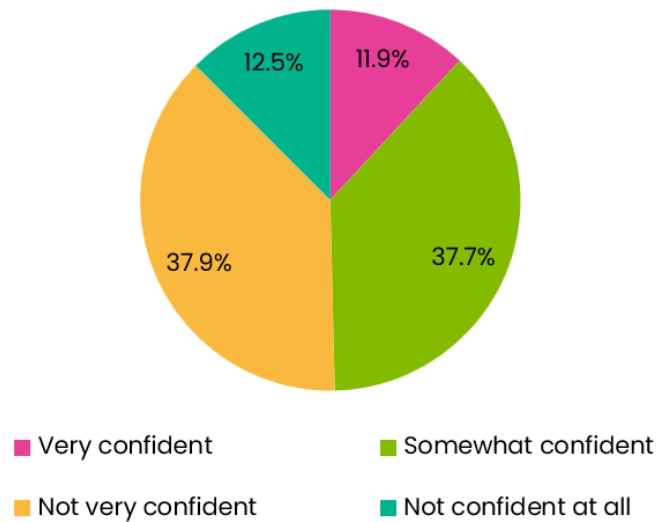
⁷ See Crosstab 4

⁸ See Crosstab 5

⁹ See Crosstab 6

Awareness and Access to Information

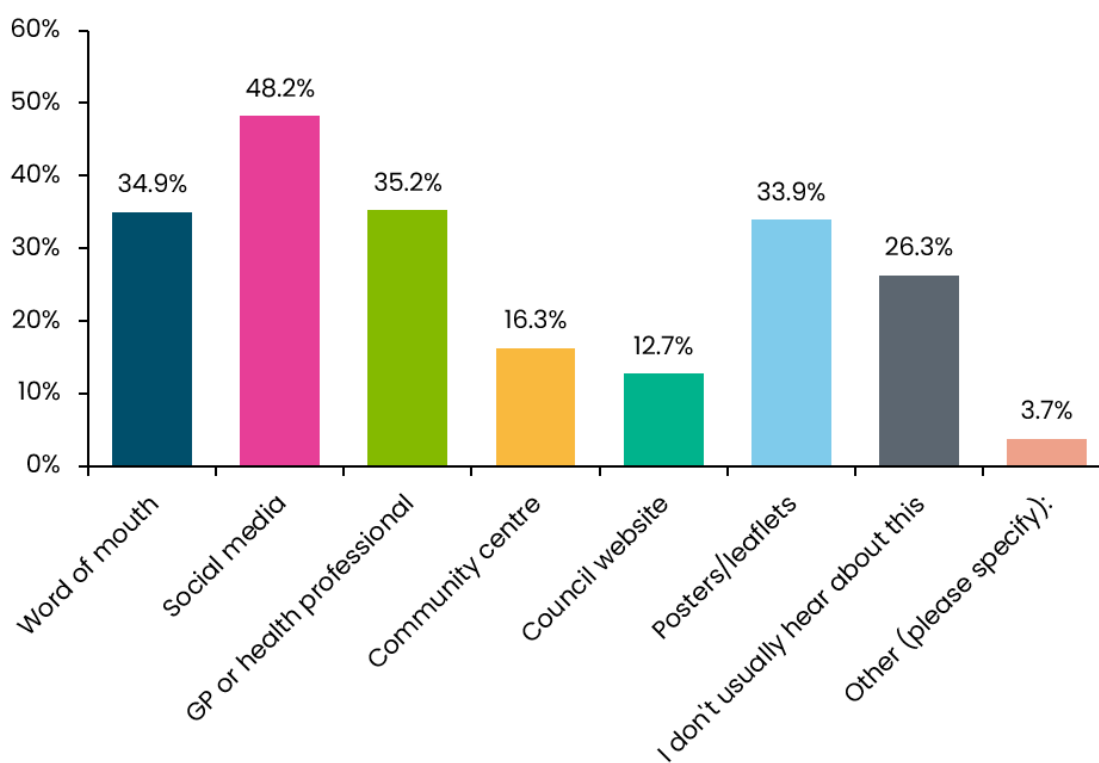
How confident do you feel that you can find information about services and support in your area that help you to feel good and function well?



Roughly half of respondents were very confident or somewhat confident in finding information about support, but the rest were not. Disability status impacted people's confidence, with those identifying as disabled or having a long-term condition responding negatively (just under 60%).¹⁰

¹⁰ See Crosstab 7

How do you prefer to stay informed about what services and support are available? (Select all that apply)



48.2% of people said they would like to receive information via social media. Word of mouth, via a GP or health professional, and via posters/leaflets were the next most popular methods according to just over a third of respondents. People also suggested newspapers, email newsletters, libraries, and post from Trafford Council. 26.3% of respondents said they did not usually hear anything at all about what services and support were available.

Younger respondents were more likely to use social media (36.8% of under 25s compared with 17.8% of over 65s), where older respondents tended to rely on print and word of mouth.¹¹

Respondents with a disability or long-term health condition were around twice as likely to report not hearing about local services and support (17.2%) compared with those without (8.3%). Also of note is that almost three quarters of respondents who said they did not usually hear about wellbeing opportunities were also much less confident finding them.

Residents' Ideas for Improving Wellbeing

Respondents were asked to expand on what activities or support their local community centre could offer to help them connect with others, be more active, take notice or be

¹¹ See Crosstab 8.

mindful, keep learning, and give or volunteer. Despite a wide range of suggestions, several clear themes emerged.

The most common response was the need for more opportunities to be physically active. People frequently suggested exercise classes, walking groups, yoga, Pilates, dance, swimming, gyms and sports facilities. Comments focused on the need for activities to be local, affordable, and suitable for different ages and abilities. Some respondents specifically talked about the closure of local leisure facilities, particularly in Partington: *"Open up the leisure centre. Then I could access the swimming"; "We need a standard gym here in Partington. I have to travel to Broadheath to use the gym which isn't ideal."; "Having a local leisure centre with a swimming pool would help, I'm having to travel to Irlam to swim and our centre has been closed for a long time."*

Social connection was another strong theme. Many respondents wanted more opportunities to meet others, make friends, and reduce isolation. Suggestions included coffee mornings, social groups, community meals, hobby groups, quizzes, bingo, book clubs, choirs, and activities aimed at people living alone. One respondent suggested: *"Start clubs, anything that enables people to socialise, meet new people, make friends."* Another said, *"Some people just want to socialise."* Several comments suggested that social activities were particularly important for people who may be isolated or less able to leave the house.

"There is nothing for the people in Partington... we need more centres so people can connect more, especially people who live on their own and can't get out, it is a very lonely place."

A number of respondents wanted more learning, creative, and skills-based activities such as craft groups, art, cooking, and language classes; IT support; interest and hobby groups like sewing, history, or gardening; and adult education. They felt these would help build confidence, community, and help continue learning throughout life. One person also pointed out the benefit for employment: *"Keep learning, to update my skills for the workplace as I've been out of work for a long time."* Another suggested *"Computer lessons for older people."*

Another recurring theme was the need for better information about what is already available. Some respondents said they did not know what activities existed locally, or were unaware of their local community centre. This suggests that some barriers may relate less to the absence of activities and more to communication and promotion. One respondent said, *"Firstly, didn't really know we had a community centre..."* Another wrote, *"Community centre I thought had closed, nothing is advertised for there."* A further respondent suggested there should be *"Better advertisement (leaflets through doors for example) of what they currently offer. We just moved here and don't know what's available."*

Respondents suggested that information should be shared through a range of methods, including leaflets, posters, social media, websites and local noticeboards.

People focused on the need to protect, reopen or improve community facilities. Some respondents felt there were not enough local spaces where activities could happen, particularly where community venues or leisure facilities had closed: *"Nothing around here, I have to travel out of Partington."* The responses suggest that access to suitable local spaces is an important part of enabling access to wellbeing activities.

Practical barriers were also raised, such as transport, childcare and caring responsibilities, disability, and poor health. Several respondents said activities needed to be available outside working hours, including evenings and weekends. One respondent said, *"More activities that support people who are at work during the day, evening classes for example. There's a lot of things to do in the week but most people who work cannot access [them]."* Another commented, *"I'm a carer, a sole carer, so unless there are facilities for the person I care for I cannot attend."* On accessibility: *"Help any disabled person, elderly to drive them to [the] local community centre."*

Some respondents wanted more targeted support for health, including mental health and disabilities, including peer support; mental health support; pain management; support for carers, adult neurodiversity, and disabled people; and advice on issues such as health, benefits and employment.

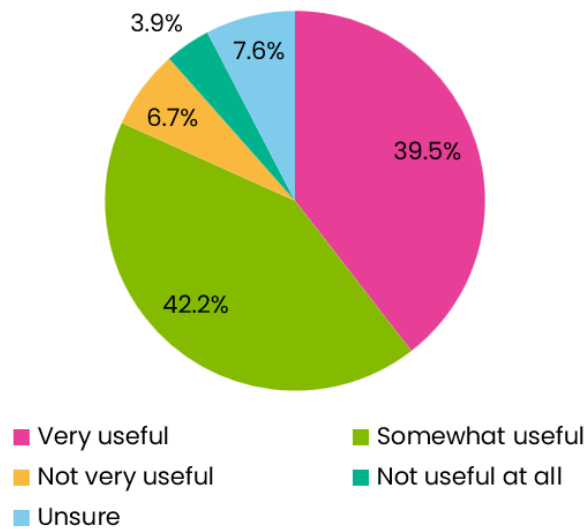
Volunteering was mentioned less often, but some respondents did want more opportunities to contribute to their community. Suggestions included charity events, litter picking, volunteering with mental health support, helping older people and clearer advertising of volunteer opportunities. These responses suggest that some residents see improving their area and supporting others as part of their own wellbeing.

A smaller number of respondents said they did not need additional support or felt that there were already enough opportunities available (*"I feel there are lots of options available to people"*, *"keep doing what they are doing"*), but these comments were less common than those calling for improvement.

Overall, residents seem to want community centres to provide a mix of physical activities, social opportunities, learning and creative activities, information and advice, and accessible spaces to come together. The responses also show that community wellbeing is affected not only by what activities are available, but also by whether residents know about them, can get to them, can afford them, and feel able to take part.

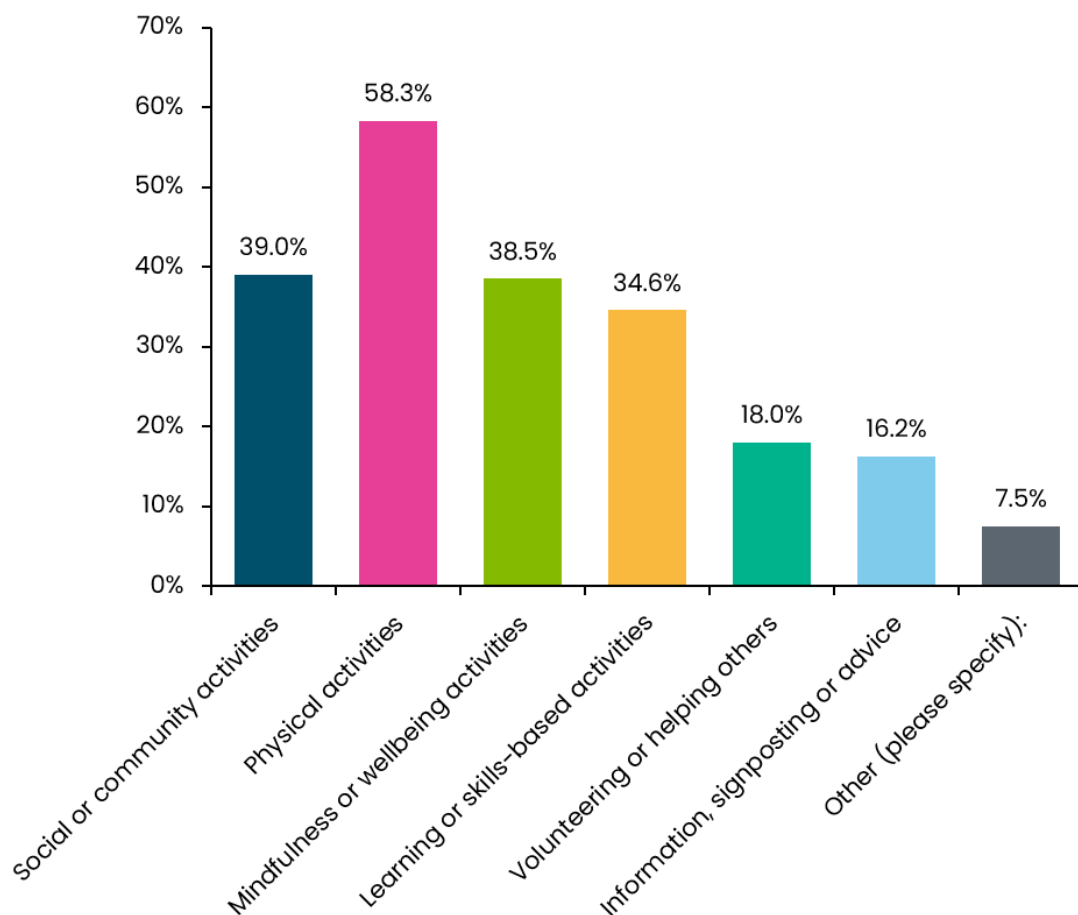
Demand for Activities and Support

If there were more local activities or support services focused on wellbeing, how useful would this be for you?



Over 80% of respondents said more local activities or support services would be useful.

What kinds of things would you be most interested in to improve your wellbeing? (Select three options at most)



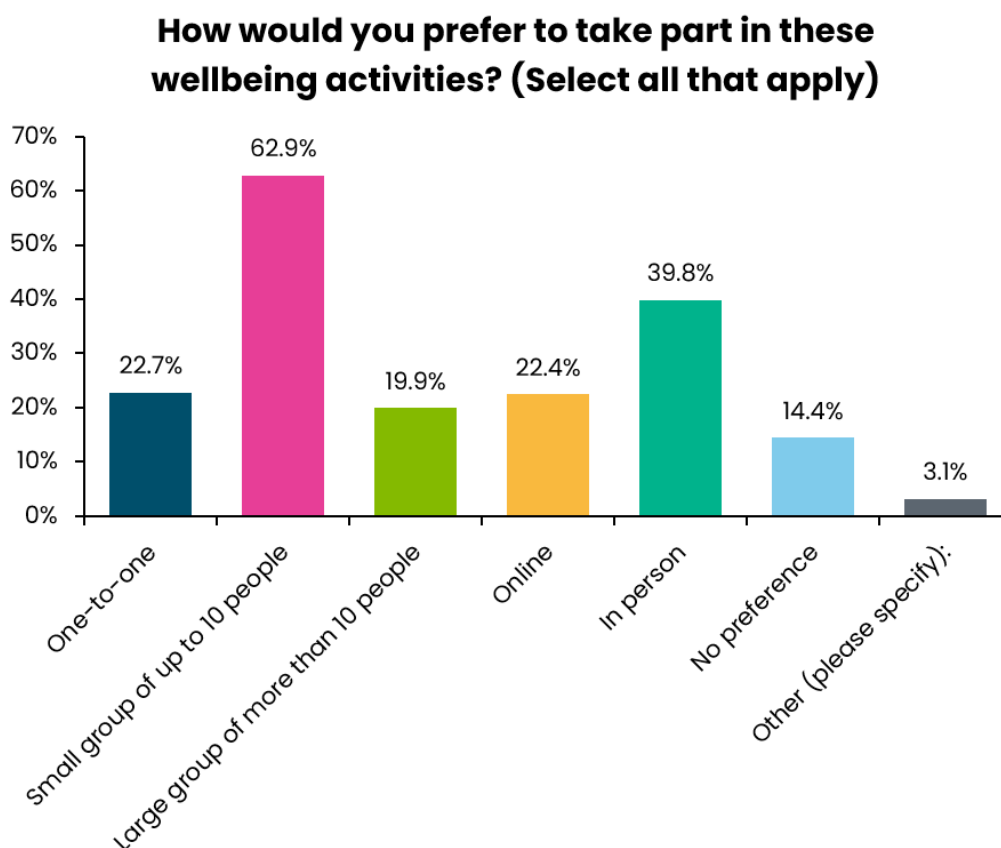
When asked what they would be most interested in to improve their wellbeing, the most popular option was physical activities, at just under 60%. Social or community activities, mindfulness or wellbeing activities, and learning or skills-based activities were next. Volunteering or helping others and information, signposting or advice were the least popular options, chosen by less than 20%. Some respondents suggested activities such as counselling, activities in languages other than English, depression support groups, swimming, and sessions for parents and children.

Preferences were broadly similar across area and age group, with some differences: Respondents aged 65+ were more likely to express interest in social or community activities and information or signposting, while respondents aged 25-64 showed the greatest interest in physical activities. Younger respondents were somewhat more likely to select mindfulness and wellbeing activities.

Preferences varied by wellbeing level. Respondents reporting poorer wellbeing were more likely to express interest in information, signposting, or advice than those reporting good or very good wellbeing. Respondents reporting good or very good wellbeing were more likely to express interest in physical activities than those reporting poorer wellbeing.¹² This may reflect existing participation in physical activities, greater confidence in taking part, or differences in health and mobility.

¹² See Crosstab 9

Preferences for Engagement



The most popular preference for the method of engagement was small groups of up to 10 people, at 62.9%. Only 19.9% preferred large groups of more than 10 people, and 22.7% would be interested in one-to-one wellbeing activities. There was a preference for in-person activities (39.8%) compared to online activities (22.4%). 14.4% of respondents had no preference, and a small percentage made their own comments. These included suggestions for childcare provision, comments that they did not like large groups, requests for interpreters to assist with non-English speakers, and several responses saying that they would not want to attend any activities.

Preferences were generally similar across age groups, although younger respondents were somewhat more likely to prefer one-to-one support and smaller groups, while older respondents were slightly less interested in online participation (9.1% for 65+ compared to 13.2%–14.8% for the younger age groups).

Focus Group Findings

Partington Focus Groups

Wednesday 13th May

These two focus groups had 7 participants in total. Both focus groups revealed a strong sense of community identity in Partington, but also a feeling that their town had been ‘forgotten’ by Trafford Council, with one participant joking that ‘Partington: The town that people forget’ should be written on its welcome sign. Despite this perception, attendees were keen to emphasise the strong community spirit and welcoming nature of the town.

*“Partington:
The town that
people forget”*

One of the major concerns raised was the temporary closure of Partington Sports Village for renovation, resulting in the loss of swimming and sports facilities. Although the leisure centre will reopen, participants were discouraged by the time it was taking to do so. People were aware of many local wellbeing activities on offer, such as group nature walks, church groups, music and dance classes, cooking groups, arts and crafts groups, a dementia cafe, self-defence courses, and night school. However, one participant who worked as a social prescriber mentioned that she was forced to prescribe people to services or activities which were outside of the local area; in particular there was not enough support for people with Alzheimer’s in Partington.

People also spoke about a lack of community spaces. Partington had a community venue, the Hideaway, which closed at the start of 2026 leading to some local-led community groups having to cease operations. Partington used to have 6 pubs, but 5 have now closed, as have 3 local schools. The high street is not as good as it used to be, and participants regretted the loss of a local market. One social club had been closed down, and the social club that remained was described as ‘a dump’. Generally, residents felt that they were losing community spaces even as new housing was being built, and this reduced their opportunities to connect with others. The recently elected Partington Parish Council leader participated in the focus group and told us he was leading an attempt to transfer ownership of the Parish Council building to the community, as there is community space there which is under-utilised and potentially under threat. If successful, the Parish Council could offer this community space at a subsidised rate for community use.

While there are still venues that can accommodate local community wellbeing groups, such as Moss Lane Youth Club, participants felt this should be made easier for people to organise. They cited difficulties finding available rooms and times, and one person told us that the funding process was difficult as they struggled to be financially sustainable without the guarantee of a regular free or inexpensive community space to operate. We also heard

that the advantage of dedicated spaces such as the Hideaway was that they came with pre-established risk assessments, evacuation plans, and safeguarding plans, rather than community-run groups having to take this additional task on.

Communication and awareness were key concerns. Despite several local wellbeing activities being on offer, many people were unaware of them due to a lack of centralised information sharing. The area used to have a monthly newspaper, the Partington Transmitter, which has closed for indeterminate reasons. Local residents now must rely on noticeboards in places like GP practices and libraries, which are not always very prominent or accessible. Additionally, it was noted that some spaces required payment for displaying information which not all groups are allowed to provide. Social media, while useful, was not available to many older residents; people suggested digital training would be beneficial for keeping people included. One participant praised the George Carnell Community Hub in Urmston for publicising its wellbeing offerings effectively, for example on their website.

“I don’t hear about what’s going on”

Transportation was a barrier, with some criticising irregular bus services and the difficulties faced by those without a car. Many participants had to travel to Urmston, Altrincham, or Sale to attend activities, and even those with a car sometimes had to pay bridge tolls. The local community was working to alleviate the issue by implementing shared transport schemes and campaigning to keep Local Link buses in operation. However, Transport for Greater Manchester had reduced the operating hours of the latter to due financial pressures¹³. One parent mentioned that due to the irregularity of bus services, she could not risk leaving Partington for activities further afield in order to make sure she was available to collect her young child on time. The Ring & Ride service is still available.

Another barrier to access was the anxiety caused by entering a community space and not knowing anybody. In response, another participant suggested that bringing a friend could help with this issue. This suggests that a lack of confidence among potential participants is an issue, and schemes such as buddy systems could help.

Overall, participants felt that Partington had a strong community spirit but lacked sufficient community spaces and effective ways of promoting local wellbeing opportunities. In particular, participants noted the difficulties in involving more isolated people in community activities. While residents valued the activities and organisations that remained, they were concerned about the continued loss of community assets and the impact this could have on wellbeing and social connection.

¹³ <https://news4trafford.co.uk/2022/04/19/tfgm-responds-to-our-efforts-to-keep-partington-local-link-a-full-time-service>

Sale Focus Group

Thursday 28th May

Held at the LifeCentre in Sale, this group had 4 attendees. The strongest theme of this focus group was the importance participants placed on community centres in supporting their wellbeing. The Sale Moor, Sale West and Broomwood Community Centres were all spoken of positively, with participants commenting that Sale Moor in particular had seen increased use in recent years, offering a food bank and a 'bread and butter' scheme to reduce food waste. In contrast, people were more critical of Coppice Wellbeing Centre due to its dual role as a library and community space: they felt the library seemed to dominate the space and described staff as 'unwelcoming'. They suggested the space was too noisy to be an effective community space, and that there was 'not much going on there' compared to other community centres locally. One participant had attended Coppice Wellbeing Centre once and was sufficiently unimpressed that they decided in future to go to Partington instead, despite being much further away.

Participants discussed the activities that they valued or would like to see added to, including exercise groups, music groups, dementia support, men's groups, cooking courses, community cafes, and digital inclusion support. One participant commented on the need to balance activities that people actively want to attend with activities that may provide wider benefits for health and wellbeing. Participants noted the benefit of these activities was often the opportunity to meet people, build relationships and feel connected to their community. Participants also highlighted the value of community-led initiatives, suggesting that some of the most successful local activities had been developed by community organisations and local residents rather than statutory services, as they are more responsive to local interests – they are built up by communities themselves rather than imposed from above. Many of these activities require community spaces, and finding an available room for these was difficult either due to cost or lack of availability.

A recurring theme was that while many wellbeing activities already exist across Sale, residents are often unaware of them; one resident was surprised to hear about the list of activities taking place at their local community centres. Several suggestions were made including better use of community newsletters, leaflets, noticeboards, and GP surgeries. The quarterly Sale Moor community newsletter from Sale Moor Community Partnership received positive mention. While participants valued printed information, some felt that noticeboards in public buildings had become cluttered and difficult to navigate. One participant described noticeboards in GP surgeries as being 'like wallpaper', as they covered so much wall space. Participants also suggested that local organisations should coordinate information more effectively with each other

"I don't hear about these community things at all"

and develop a more comprehensive and up-to-date central source of information about local opportunities. One participant found the 'What's on Where' section of the Home Instead *Live well, your way* magazine useful¹⁴, and another regretted the loss of a local community radio station. Others raised the issue of reaching people who do not leave their homes very often and suggested that noticeboards in shared residential spaces, leaflets, or home visits by health professionals could be used to contact these people.

Participants identified several barriers preventing people from taking part in wellbeing activities. Transport was a particular concern in some areas, especially Sale West, where participants felt that bus services were not always reliable and that bus stops provided an additional challenge depending on the weather, for example in Summer with no shelter from the sun. It was noted that Broomwood Community Centre was particularly accessible on public transport as it had a bus stop directly outside.

People also raised concerns around physical health issues, the quality of social housing, poor street lighting during Winter, as well as the cost of activities and lack of confidence attending unfamiliar groups. They emphasised that it took some 'courage' to make the first step into a community centre or activity, and suggested that informal introductions, buddy systems, and welcoming environments could help people feel more comfortable participating. Something as simple as a 'smiling face' as you enter a community centre can make a large difference. One respondent was unaware that you did not have to live in particular local area to go to its community centre.

Participants spoke of the importance of volunteering within local communities as not only a way of supporting others, but as a means of improving confidence, building connections, and developing new skills. Participants shared examples of those who had initially attended support groups and later become volunteers themselves. However, participants also recognised that volunteers may need support, such as when encountering distressing situations. Some participants felt there was a need for appropriate training, therapy or support, and matching of volunteers to suitable roles.

Overall, participants felt that community centres play a key role in supporting wellbeing in Sale by providing activities, opportunities for social connection, and access to information and support. They were clear that Sale already benefits from a range of community assets and wellbeing opportunities. However, they believed that greater awareness, improved coordination between organisations, better transport links, and welcoming community environments could help more residents access and benefit from these opportunities.

¹⁴ <https://www.homeinstead.co.uk/altrincham/live-well-your-way-magazine/>

Discussion

Shared Priorities Across Respondents

Across the survey and focus groups, there was a clear, consistent interest in support that helps people to connect with others, be physically active, and take part in community life.

Physical activity was generally ranked the most important of the Five Ways to Wellbeing, and the one people were most interested in. Residents asked for more exercise classes, walking groups, swimming, gyms, and other affordable activities. Access to physical activity was a prominent issue in Partington due to the closure of Partington Sports Village.

Another major theme was social connection, and this was central to much of what people said they wanted from community centres. Among the activities suggested were coffee mornings, social and hobby groups, community cafes, and opportunities for those isolated or living alone to meet others. Respondents highlighted the importance of these spaces for building relationships and feel part of the community.

Residents valued community venues as spaces for connection, information, and community-led events. This was particularly clear in the focus groups, where people repeatedly discussed the role of these hubs in enabling people to organise, share information, and support each other. Focus group participants emphasised giving back and volunteering, which reflected their own high levels of community involvement.

Across the project, it was clear there was a need for better communication around what is already available. Survey respondents frequently told us they did not know what activities and support were available locally, and focus groups participants described information as fragmented and hard to find. Improving awareness of existing provision may be as important as introducing new activities.

Differences in Experiences and Needs

Although there were clear shared priorities, the findings show that residents do not experience the same barriers or have the same needs across area, age, disability, and current wellbeing, which requires consideration when delivering Live Well activities.

Respondents in Partington were more likely to identify being physically active as the most important factor for their wellbeing, while respondents across Sale were more likely to choose connecting with others. It is possible that, Partington's strong community identity means social connection is more embedded into everyday life, while lack of access to physical activity feels more urgent due to the temporary closure of the Sports Village. However, this should be treated as an interpretation rather than a firm conclusion. The focus groups highlighted other differences in local contexts, for example, the loss of existing

community assets and spaces in Partington as opposed to the complete absence of them in Sale, as well as the need for more promotion and coordination in the latter.

Respondents with a disability or long-term health condition often identified these as barriers to accessing wellbeing activities. They were also less confident finding information and told us they did not usually hear about wellbeing opportunities. While the information may exist, it is not necessarily reaching those who need it most.

Respondents of working age were more likely to identify time pressures related to work, caring, and family responsibilities as barriers, while older respondents tended to identify poor physical health and being unaware of what was available.

Respondents who rated their overall wellbeing as very poor were much more likely to say they did none of the listed Five Ways activities in a typical week. However, this may not be proof that these directly improve wellbeing: these people may face greater barriers to taking part, or feel less able to engage with activities even when they are available.

Implications for Live Well Delivery

The findings suggest that Live Well has an important opportunity to support wellbeing in Sale and Partington by strengthening local access to activities, improving communication and working closely with existing community organisations.

Firstly, communication should be treated as a core part of delivery, not as an add-on. Many residents were unaware of existing activities or unconfident finding information. While social media works for some, older residents and those less digitally connected may rely more on word of mouth, printed materials, and community centres. Live Well will need a mixed approach that is consistent, accessible and locally trusted.

Secondly, the findings suggest that community spaces are central to the success of Live Well. Residents valued spaces that are welcoming, affordable, visible, and accessible, with support for community-led groups.

Thirdly, Live Well should recognise that different residents may need different types of support to take part. For some people, the main barrier is time. For others, it is poor health. A universal offer may not be suitable: people may require a variety of times, formats (such as one-to-one or group activities), and options for different levels of mobility.

Finally, the findings point to the value of co-production and community-led delivery. Focus group participants often described successful activities as shaped by local people and community organisations with insight into what exists, what has been lost, and what barriers residents face, rather than imposed from above. Continuing to involve residents, volunteers and local organisations will help ensure that the programme reflects local needs and builds on existing strengths.

Conclusion

This project explored what helps and hinders wellbeing in Sale and Partington, and what residents would like to see from the Live Well programme and local community centres. Across both the survey and focus groups, residents consistently highlighted the importance of opportunities to connect with others, be physically active and participate in community life. While most respondents reported good levels of wellbeing, many identified barriers that make it harder to access activities and support, including time pressures, cost, poor health, transport difficulties, and a lack of awareness of what is available locally.

The findings show that local communities already possess many strengths. Residents described a wide range of existing activities, community groups, and organisations that contribute positively to wellbeing. Community centres were widely viewed as important assets that provide opportunities for social connection, learning, physical activity, volunteering, and access to support. Focus group participants in both Sale and Partington spoke positively about community spirit and the value of local organisations in bringing people together.

However, the research also identified several challenges. Many residents felt that information about activities and support was fragmented or difficult to find, and some groups, including disabled residents and older people, reported lower confidence when it came to finding information about local opportunities. In Partington, concerns were raised about the loss of community facilities and the impact this has had on social connection and participation. Across both areas, residents emphasised the need for accessible, affordable, and welcoming activities that reflect the needs of different groups within the community.

Overall, the findings suggest that improving wellbeing is not simply about creating new services. It is also about helping people access existing opportunities, strengthening community spaces, supporting local organisations, and ensuring that residents feel informed, included and able to participate. By building on the strengths that already exist within local communities, Live Well has the opportunity to support wellbeing in a way that is responsive to local needs and rooted in the experiences of residents themselves.

Recommendations

Awareness and Communication

1. Improve awareness of local wellbeing opportunities using a coordinated approach

Residents frequently reported that they did not know what opportunities were available. Trafford Council and Live Well partners should ensure that information is promoted consistently across a range of channels, recognising that different groups access information in different ways. These could include:

- social media and online platforms
- printed leaflets and posters
- local hubs such as GP practices, community centres, libraries, and health settings
- community newsletters and local publications

2. Develop and maintain a clear, up-to-date source of local wellbeing information

Some residents had difficulty finding reliable information about local activities and support. Live Well should work with partners to ensure existing directories and information sources are accurate, easy to navigate, and regularly updated. Information should be presented in a simple format and include both statutory and community-led activities.

Accessibility and Inclusion

3. Ensure Live Well activities are accessible to different groups

The survey identified that different groups face different barriers. Live Well activities should therefore:

- be offered at different times, including evenings where possible
- include a range of activity formats and levels of support
- consider accessibility requirements, keeping disabled residents and carers in mind

4. Consider transport barriers when developing or promoting wellbeing activities

Transport was identified as a barrier through our survey and focus groups. When developing activities, Live Well should consider:

- delivering activities within local neighbourhoods where possible
- promoting available community transport schemes and
- ensuring information about transport options is included in activity promotion

Community-Based Delivery

5. Continue to invest in community venues as key wellbeing assets

Community venues were consistently described as important for wellbeing, connection, and community activity. Live Well should continue working with local organisations to maximise the use of existing community spaces and support their long-term sustainability.

6. Support community-led activities and local groups

Focus group participants highlighted the value of activities designed and delivered by local residents and community organisations. Live Well should seek opportunities to:

- support community-led initiatives and promote volunteering opportunities
- encourage residents to develop activities that reflect local interests and needs
- help groups access suitable community space where possible

7. Prioritise opportunities that support both physical activity and social connection

The strongest themes throughout the project were physical activity and social connection. Where possible, Live Well should prioritise activities that deliver both simultaneously, such as:

- walking groups and exercise classes
- community gardening projects
- community cafes and social activity groups

Ongoing Engagement and Co-Production

8. Continue to involve residents in the development of Live Well

This project demonstrated that residents have valuable insight into what helps and hinders wellbeing in their communities. Live Well should continue gathering feedback through engagement, community conversations and partnership working with local organisations.

9. Pay particular attention to those less connected to existing community networks

Many participants were concerned that some residents remain unaware of local opportunities or lack confidence to participate. Future engagement should seek to reach:

- residents experiencing poor wellbeing, disabled residents, and carers
- people who are socially isolated
- residents who are not currently engaged with community activities

10. Monitor how needs differ across neighbourhoods

While many priorities were shared, the findings also identified differences between communities, particularly between Partington and the Sale localities. Live Well should continue to gather local intelligence to ensure that they remain responsive to the needs of individual neighbourhoods rather than assuming a single approach will work everywhere.

Appendices

Appendix 1: Survey Questions

Five Ways to Wellbeing Survey

Research shows there are five simple things we can all do to help us feel good and function well. You'll see them listed below:



We'd love to hear your ideas about what helps you to feel good and function well. Your feedback will be used to shape future activities and support in local community centres. The survey should only take about 5-10 minutes, and everything you share is anonymous. The findings will be used by Healthwatch Trafford and partner organisations such as Trafford Council and Age UK to help shape services in your area.

1. Which area do you live in? Please provide your postcode if possible (this helps us see which local centre you're closest to and will not be used to identify you)

- ☐ Sale Central
- ☐ Sale Moor
- ☐ Sale West
- ☐ Partington

Postcode:

2. What age group are you in?

- ☐ Under 25
- ☐ 25-44
- ☐ 45-64
- ☐ 65+
- ☐ Prefer not to say

3. Who do you currently live with? (Select all that apply)

- ☐ I live alone
- ☐ Partner or spouse

- Children
- Parents
- Other family members
- Friends or housemates
- Shared accommodation
- Supported accommodation
- No fixed abode
- Prefer not to say

4. Overall, how would you rate your wellbeing at the moment?

- Very poor
- Poor
- Neither poor nor good
- Good
- Very good
- Not sure

5. In a typical week, which of the following things do you usually do that help you to feel well? (Select all that apply)

- Socialise with friends, family or work colleagues
- Do physical activity for 20 minutes or longer
- Take time to notice simple things that give you joy
- Learn or try something new
- Help or support others
- None of these

6. Please tell us what activities or support your local community centre could offer to help you do any of the following:

- Connect with others
- Be more active
- Take notice or be mindful
- Keep learning
- Give or volunteer
- [Open text]

7. Thinking about the 5 things we can do to help us feel good and function well, which of the following is most important for your wellbeing? (Select one)

- Connecting with others
- Being physically active
- Taking notice and being mindful
- Keep learning new things

- Giving or volunteering

8. What makes it harder for you to do activities that support your wellbeing? (Select three options at most)

- Cost/money
- Time (work/caring/family)
- Poor physical health
- Poor mental health
- Lack or cost of transport
- Lack of local activities/spaces
- Not knowing what's available
- Feeling unwelcome
- Accessibility barriers (e.g., buildings not accessible, uneven pavements, etc.)
- Other (please specify):

9. How confident do you feel that you can find information about services and support in your area that help you to feel good and function well?

- Very confident
- Somewhat confident
- Not very confident
- Not confident at all

10. How do you prefer to stay informed about what services and support are available? (Select all that apply)

- Word of mouth
- Social media
- GP or health professional
- Community centre
- Council website
- Posters/leaflets
- I don't usually hear about this
- Other (please specify):

11. If there were more local activities or support services focused on wellbeing, how useful would this be for you?

- Very useful
- Somewhat useful
- Not very useful
- Not useful at all
- Unsure

12. What kinds of things would you be most interested in to improve your wellbeing? (Select three options at most)

- ☐ Social or community activities (e.g., coffee mornings, community meals, hobby groups, social clubs)
- ☐ Physical activities (e.g., walking groups, exercise groups, yoga, gym sessions)
- ☐ Mindfulness or wellbeing activities (e.g., meditation, relaxation sessions, stress management, time in nature, creative wellbeing sessions)
- ☐ Learning or skills-based activities (e.g., cooking classes, arts and crafts, IT skills, budgeting workshops)
- ☐ Volunteering or helping others (e.g., community projects, peer support groups)
- ☐ Information, signposting or advice (e.g., benefits advice, mental health support, employment support)
- ☐ Other (please specify):

13. How would you prefer to take part in these wellbeing activities? (Select all that apply)

- ☐ One-to-one (e.g., meeting an advisor or support worker)
- ☐ Small group of up to 10 people (e.g., small workshops)
- ☐ Large group of more than 10 people (e.g., community events, talks, larger exercise classes)
- ☐ Online
- ☐ In person
- ☐ No preference
- ☐ Other (please specify):

14. Would you be interested in sharing more about this topic in a group discussion? You may be contacted by Trafford Council's partners, Healthwatch Trafford and Age UK.

- ☐ Yes
- ☐ No

If yes, please add your...

- ☐ Email/phone number:
- ☐ Accessibility requirements:

The following optional questions help us to understand whether different groups of people are experiencing things differently. You can skip any question if you prefer not to answer.

15. What is your gender?

- ☐ Woman
- ☐ Man
- ☐ Non-binary

- Prefer not to say
- Prefer to self-describe:

16. What is your ethnic group?

- Asian or Asian British: Indian
- Asian or Asian British: Pakistani
- Asian or Asian British: Bangladeshi
- Asian or Asian British: Chinese
- Asian or Asian British: Any other Asian background
- Black, Black British, Caribbean or African: Caribbean
- Black, Black British, Caribbean or African: African
- Black, Black British, Caribbean or African: Any other Black, Black British or Caribbean background
- Mixed or multiple ethnic groups: White and Black Caribbean
- Mixed or multiple ethnic groups: White and Black African
- Mixed or multiple ethnic groups: White and Asian
- Mixed or multiple ethnic groups: Any other Mixed or multiple ethnic background
- White: English, Welsh, Scottish, Northern Irish or British
- White: Irish
- White: Gypsy or Irish Traveller
- White: Roma
- White: Any other White background
- Other ethnic group: Arab
- Other ethnic group: Any other ethnic group
- Prefer not to say

17. Do you have a disability or long-term health condition?

- Yes
- No
- Prefer not to say

Thank you for taking part in this survey. If you would like support or ideas to improve your wellbeing, you may find the NHS 5 Steps to Mental Wellbeing useful:

<https://www.nhs.uk/mental-health/self-help/guides-tools-and-activities/five-steps-to-mental-wellbeing/>

Appendix 2: Focus Group Guide

Wellbeing Focus Group (30–45 mins)

1. Welcome & Introduction (5 mins)

- We're gathering people's views on what helps local residents feel well and how local community centres could better support this.

2. Warm-up (5 mins)

- Can you briefly introduce yourself and share one thing you enjoy doing that helps you feel good or relax?

3. Everyday Wellbeing (5–10 mins)

- What does "feeling well" mean to you in your day-to-day life?
- What kinds of things do you currently do that help your wellbeing?

(Socialising, exercise, mindfulness, learning new things, volunteering)

4. Barriers (5–10 mins)

- What makes it harder for you to do these things? (Time, cost, transport, work/caring responsibilities, confidence/anxiety, not knowing what's available)

5. Local Area & Community Centres (10–15 mins)

- What would you like to see more of in your local area to support wellbeing?
- What role do you think community centres could play?

(Social/physical activities, learning or skills sessions, advice/support services, welcoming spaces)

6. The Five Ways to Wellbeing



- Which of these feel most important to you?
- Are any of these harder to do in your local area?

7. Improvements & Ideas (5–10 mins)

- If you could design the "perfect" local wellbeing offer, what would it look like?
- What would make it easier for you to take part?

(Timing – evenings/weekends, cost, group size, type of activities, location/accessibility)

8. Wrap-up (5 mins)

- Is there anything we haven't asked that you think is important?
- If one thing could change locally to improve wellbeing, what should it be?

Appendix 3: Additional Charts and Crosstabs

Ethnicity Data:

What is your ethnic group?			
Answer Choice		Response Percent	Response Total
1	Asian or Asian British: Indian	1.3%	8
2	Asian or Asian British: Pakistani	0.3%	2
3	Asian or Asian British: Bangladeshi	0.0%	0
4	Asian or Asian British: Chinese	2.2%	14
5	Asian or Asian British: Any other Asian background	0.6%	4
6	Black, Black British, Caribbean or African: Caribbean	1.3%	8
7	Black, Black British, Caribbean or African: African	1.6%	10
8	Black, Black British, Caribbean or African: Any other Black, Black British or Caribbean background	0.3%	2
9	Mixed or multiple ethnic groups: White and Black Caribbean	0.6%	4
10	Mixed or multiple ethnic groups: White and Black African	0.3%	2
11	Mixed or multiple ethnic groups: White and Asian	0.2%	1
12	Mixed or multiple ethnic groups: Any other Mixed or multiple ethnic background	0.5%	3
13	White: English, Welsh, Scottish, Northern Irish or British	80.4%	506
14	White: Irish	1.7%	11
15	White: Gypsy or Irish Traveller	0.0%	0
16	White: Roma	0.0%	0
17	White: Any other White background	5.4%	34
18	Other ethnic group: Arab	0.0%	0
19	Other ethnic group: Any other ethnic group	0.8%	5
20	Prefer not to say	2.4%	15
answered			629
skipped			136

Living Arrangements Data:

Who do you currently live with? (Select all that apply)			
Answer Choice		Response Percent	Response Total
1	I live alone	24.4%	185
2	Partner or spouse	56.4%	428
3	Children	27.3%	207
4	Parents	3.8%	29
5	Other family members	8.6%	65
6	Friends or housemates	0.8%	6
7	Shared accommodation	0.0%	0
8	Supported accommodation	0.4%	3
9	No fixed abode	0.0%	0
10	Prefer not to say	1.2%	9
answered			759
skipped			6

Crosstabs:

Crosstab 1	[Q1] Which area do you live in? Please provide your postcode if possible (this helps us see which local centre you're closest to and will not be used to identify you)					
[Q7] Thinking about the 5 things we can do to help us feel good and function well, which of the following is most important for your wellbeing? (Select one)		Sale Central	Sale Moor	Sale West	Partington	Row Totals
	Connecting with others	49.3%	44.0%	46.6%	29.7%	247
	Being physically active	23.2%	28.0%	27.6%	41.9%	286
	Taking notice and being mindful	8.7%	8.0%	12.1%	16.8%	114
	Keep learning new things	7.2%	12.0%	8.6%	8.1%	61
	Giving or volunteering	11.6%	8.0%	5.2%	3.4%	33
	Column Totals	69	25	58	589	741

Crosstab 2	[Q4] Overall, how would you rate your wellbeing at the moment?							
[Q5] In a typical week, which of the following do you usually do? (Select all that apply)		Very poor	Poor	Neither poor nor good	Good	Very good	Not sure	Row Totals
	Socialise with friends, family or work colleagues	11.5%	22.9%	24.1%	26.7%	25.3%	24.0%	473
	Do physical activity for 20 minutes or longer	11.5%	20.6%	22.0%	25.6%	24.6%	24.0%	448
	Take time to notice simple things that	15.4%	15.4%	19.3%	19.4%	21.0%	20.0%	363

	give you joy							
	Learn or try something new	3.8%	8.0%	10.0%	8.6%	9.0%	0.0%	165
	Help or support others	3.8%	17.7%	19.1%	18.6%	19.9%	20.0%	352
	None of these	53.8%	15.4%	5.5%	1.1%	0.2%	12.0%	77
	Column Totals	26	175	419	810	423	25	1878

Crosstab 3	[Q2] What age group are you in?						
[Q8] What makes it harder for you to do activities that support your wellbeing? (Select three options at most)		Under 25	25-44	45-64	65+	Prefer not to say	Row Totals
	Cost/money	12.5%	20.2%	19.2%	13.3%	13.0%	271
	Time (work/caring/family)	15.0%	25.6%	24.8%	12.6%	17.4%	322
	Poor physical health	12.5%	5.3%	11.3%	17.6%	8.7%	193
	Poor mental health	15.0%	9.6%	6.9%	5.4%	13.0%	115
	Lack or cost of transport	10.0%	4.5%	3.6%	5.8%	4.3%	75
	Lack of local activities/spaces	12.5%	13.8%	12.6%	12.6%	8.7%	203
	Not knowing what's available	7.5%	12.4%	14.0%	20.7%	13.0%	250
	Feeling unwelcome	12.5%	5.1%	2.1%	2.9%	4.3%	53
	Accessibility barriers (e.g., buildings not	0.0%	0.3%	1.6%	4.5%	8.7%	38

	accessible, uneven pavements, etc.)						
	Other (please specify):	2.5%	3.4%	3.8%	4.7%	8.7%	64
	Column Totals	40	356	609	556	23	1584

Crosstab 4	[Q1] Which area do you live in? Please provide your postcode if possible (this helps us see which local centre you're closest to and will not be used to identify you)					
[Q8] What makes it harder for you to do activities that support your wellbeing? (Select three options at most)		Sale Central	Sale Moor	Sale West	Partington	Row Totals
	Cost/money	15.6%	22.2%	15.6%	17.2%	273
	Time (work/caring/family)	21.9%	16.7%	21.1%	20.2%	324
	Poor physical health	11.7%	7.4%	12.5%	12.5%	196
	Poor mental health	11.7%	3.7%	7.8%	6.9%	116
	Lack or cost of transport	2.3%	5.6%	5.5%	4.8%	75
	Lack of local activities/spaces	6.3%	7.4%	7.8%	14.1%	204
	Not knowing what's available	19.5%	25.9%	21.1%	14.5%	253
	Feeling unwelcome	3.1%	7.4%	3.9%	3.1%	53
	Accessibility barriers (e.g., buildings not accessible, uneven pavements, etc.)	3.1%	0.0%	2.3%	2.5%	39
	Other (please specify):	4.7%	3.7%	2.3%	4.1%	64
	Column Totals	128	54	128	1287	1597

Crosstab 5		[Q17] Do you have a disability or long-term health condition?			
[Q8] What makes it harder for you to do activities that support your wellbeing? (Select three options at most)		Yes	No	Prefer not to say	Row Totals
	Cost/money	15.1%	19.3%	20.0%	228
	Time (work/caring/family)	10.5%	28.9%	24.6%	262
	Poor physical health	21.6%	2.7%	12.3%	161
	Poor mental health	11.1%	3.7%	4.6%	96
	Lack or cost of transport	4.9%	4.7%	3.1%	62
	Lack of local activities/spaces	11.0%	14.6%	12.3%	168
	Not knowing what's available	13.8%	18.3%	13.8%	210
	Feeling unwelcome	3.3%	3.5%	3.1%	45
	Accessibility barriers (e.g., buildings not accessible, uneven pavements, etc.)	3.7%	1.4%	1.5%	33
	Other (please specify):	5.1%	2.9%	4.6%	53
	Column Totals	630	623	65	1318

Crosstab 6		[Q4] Overall, how would you rate your wellbeing at the moment?						
[Q8] What makes it harder for you		Very poor	Poor	Neither poor	Good	Very good	Not sure	Row Totals

to do activities that support your wellbeing? (Select three options at most)				nor good				
	Cost/money	14.5 %	14.3%	15.2%	19.6 %	16.5 %	26.9 %	272
	Time (work/caring/family)	7.3%	7.5%	15.5%	26.3 %	31.7 %	11.5%	323
	Poor physical health	23.6 %	23.0 %	16.4%	7.2%	3.6%	15.4%	196
	Poor mental health	29.1%	17.1%	8.6%	2.9%	0.9%	0.0%	115
	Lack or cost of transport	3.6%	3.2%	6.9%	3.4%	5.8%	7.7%	75
	Lack of local activities/spaces	5.5%	9.5%	12.6%	14.4 %	12.9 %	19.2%	202
	Not knowing what's available	3.6%	12.7%	15.0%	17.8%	19.2 %	11.5%	252
	Feeling unwelcome	3.6%	4.4%	3.8%	2.6%	3.1%	3.8%	53
	Accessibility barriers (e.g., buildings not accessible, uneven pavements, etc.)	3.6%	3.2%	2.1%	2.9%	0.4%	3.8%	39
	Other (please specify):	5.5%	5.2%	3.8%	2.9%	5.8%	0.0%	63
	Column Totals	55	252	420	613	224	26	1590

Crosstab 7	[Q17] Do you have a disability or long-term health condition?				
[Q9] How confident do you feel that you can find information		Yes	No	Prefer not to say	Row Totals
	Very confident	7.9%	15.9%	6.1%	72

about services and support in your area that help you to feel good and function well?	Somewhat confident	33.6%	44.0%	30.3%	237
	Not very confident	39.6%	32.8%	60.6%	230
	Not confident at all	18.9%	7.3%	3.0%	76
	Column Totals	280	302	33	615

Crosstab 8	[Q2] What age group are you in?						
[Q10] How do you prefer to stay informed about what services and support are available? (Select all that apply)		Under 25	25-44	45-64	65+	Prefer not to say	Row Totals
	Word of mouth	21.1%	11.6%	13.8%	20.9%	20.0%	232
	Social media	36.8%	29.5%	25.2%	17.8%	13.3%	322
	GP or health professional	26.3%	12.7%	18.5%	16.4%	26.7%	236
	Community centre	0.0%	6.8%	7.5%	8.6%	13.3%	109
	Council website	5.3%	6.8%	6.9%	4.8%	6.7%	84
	Posters/leaflets	0.0%	15.5%	16.6%	16.4%	13.3%	226
	I don't usually hear about this	10.5%	15.1%	9.5%	13.5%	6.7%	171
	Other (please specify):	0.0%	2.0%	2.1%	1.5%	0.0%	25
	Column Totals	19	251	536	584	15	1405

Crosstab 9		[Q4] Overall, how would you rate your wellbeing at the moment?						
[Q12] What kinds of things would you be most interested in to improve your wellbeing? (Select three options at most)		Very poor	Poor	Neither poor nor good	Good	Very good	Not sure	Row Totals
	Social or community activities (e.g., coffee mornings, community meals, hobby groups, social clubs)	17.6%	21.6%	18.4%	17.7%	17.6%	22.2%	245
	Physical activities (e.g., walking groups, exercise groups, yoga, gym sessions)	20.6%	23.2%	23.9%	30.6%	29.5%	33.3%	364
	Mindfulness or wellbeing activities (e.g., meditation, relaxation sessions, stress management, time in nature, creative wellbeing sessions)	20.6%	20.0%	19.3%	16.7%	17.1%	22.2%	240
	Learning or skills-based activities (e.g., cooking classes, arts and crafts, IT skills, budgeting workshops)	11.8%	16.2%	17.3%	15.6%	18.1%	5.6%	216

	Volunteering or helping others (e.g., community projects, peer support groups)	0.0%	7.6%	8.1%	9.2%	10.0%	5.6%	113
	Information, signposting or advice (e.g., benefits advice, mental health support, employment support)	17.6%	7.0%	9.5%	7.1%	4.3%	11.1%	101
	Other (please specify):	11.8%	4.3%	3.5%	3.0%	3.3%	0.0%	47
	Column Totals	34	185	347	532	210	18	1326

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