

Unheard Voices: experiences of support of neurodivergent young Black people in South Gloucestershire

Neighbourhood health and wellbeing insights – March 2026



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Executive summary

This report details the findings of a Healthwatch Bristol, North Somerset and South Gloucestershire project in which we engaged with stakeholders and held focus group conversations in November 2025 with neurodivergent young people aged 18 – 25 years living in South Gloucestershire. All young people with neurodivergent support needs were invited to join the Healthwatch focus groups. All the young people that came forward to participate in the focus groups were from Black communities living in South Gloucestershire.

Aims

This was a qualitative project that aimed to engage neurodivergent young people's voices around the meaning of independence, experience of local services and support issues. This project did not look at the needs of neurodivergent young people with learning disabilities.

Focus group participants were asked what things contribute to their sense of independence and how this could be improved, goals over the next five years and what might help to work towards these, what support is important to them and how this could be improved, service awareness and experience, and what makes a service helpful or unhelpful.

Key findings

Flexible and accessible services: Young people participating in our focus groups emphasised the need for both increased physical accessibility of services and improved digital accessibility, and flexible service provision to meet individual needs.

Awareness and trust: Young people revealed that there is a lack of awareness amongst neurodivergent young people of available local support, and some low trust in service providers. Building trust and ensuring confidentiality were seen as essential for improving engagement and outcomes.

Support networks: Young people told us that their families, friends, and peer groups provide them with vital emotional, social, and practical support.

Peer mentoring: Young people felt that peer mentoring, particularly in educational settings, was viewed as particularly beneficial where people had received this.

Education and employment: Young people called for more support in finding suitable educational and training opportunities, mentorship within education, job-seeking help, and tailored career advice.

Staff training: Young people felt that there is a need for GPs, other health professionals and educational service providers to receive [more] training on autism and ADHD and its impact on health and daily life, to support neurodivergent young people and signpost them to appropriate services.

Mental health and therapeutic support: Access to counselling, therapy, and 1:1 mental health support was identified as crucial for maintaining independence. Where participants had received 1:1 mental health support this was highly valued.

Cultural considerations: Cultural barriers were seen as significant. However, participants also commented on the general lack of awareness by service providers of neurodivergent support needs and the lack of specialist support.

Recommendations on co-production

We recommend all health and social care organisations working with neurodivergent young people should invite young people to co-design and co-produce information and educational resources on neurodivergent awareness, for use in educational settings, workplaces and more widely in the community, and build on this work with partner organisations.

We recommend that South Gloucestershire Council and BNSSG ICB, as well as local voluntary and community partners, review these findings in relation to their existing strategies and plans for neurodiversity support. This report can support reflection on whether current pathways, programmes and workforce training sufficiently address the needs identified by neurodivergent young Black people, and where further refinement or co-produced improvement may be beneficial.

We further recommend that services working with neurodivergent young people – particularly young Black people – actively involve them in co-designing information, resources and support offers, ensuring these are culturally sensitive, accessible and relevant to their lived experience.

Key issues raised by participants

Healthwatch BNSSG suggest the following from what young people told us during the focus groups, the need:

- to **raise awareness about living with neurodivergence** to better inform community members and service provider staff, and to reduce stigma

- to increase the availability of **peer support groups**
- to increase the availability of mental health support
- for more support around job-seeking
- for accessible **career guidance**
- for **mentoring** once someone is in a job
- for accessible I.T training
- to increase the availability of **peer mentoring programmes** within and outside of education and training providers
- to increase **staff awareness training** on the intersectionality of living with neurodivergence

About Healthwatch

Healthwatch BNSSG's statutory duty and remit is to provide an independent voice for people who use health and social care services. We give people an opportunity to have a say about their local health and social care services and we report these experiences to influence service providers and improve outcomes. We have a representative on the Health and Wellbeing Boards, Health Overview and Scrutiny Committees, and at the Integrated Care Partnership and Board. We feed issues back to local care providers and nationally via Healthwatch England and the Care Quality Commission.

Equalities statement

Healthwatch BNSSG is committed to promoting equality and diversity and tackling social exclusion. We aim to ensure equitable access to our projects for all. We include peoples lived experiences in our work and identify and mitigate against barriers to enable people to become involved in our research. We address the participation needs of those who share one or more protected characteristic, or those that experience hidden discrimination, or are part of an 'invisible minority.' We provide access to communication support to adjust for people's needs and proactively assist people in attending events and meetings we hold. Healthwatch BNSSG will connect with existing patient, service user and voluntary sector organisations to develop relationships with diverse communities, and especially with people whose voices can be harder to hear.

Background

This project arose from feedback received by Healthwatch BNSSG in South Gloucestershire and was defined as a priority by the Healthwatch South Gloucestershire Local Area Group. Its aim was to look at support for neurodivergent young people, their families and carers. Desk based research was conducted on neurodivergence support provision across South Gloucestershire.

Data on the number of young people aged 18–25 years with neurodivergent support needs living in South Gloucestershire was not available at the time of publishing this report (including those with autism, ADHD, dyslexia, dyscalculia and dyspraxia). National statistics imply that we have moved from a society where only 6.7% of the population were identified as neurodivergent in 2000, to one where now up to 20% of the population consider themselves to have some form of neurodiversity. (<https://www.optionsautism.co.uk/blog/2025/06/27/are-we-becoming-a-more-neurodiverse-nation/> - accessed 2.12.25)

Work carried out by other local Healthwatch on support needs of autistic adults identifies similar needs as this project ('Improving support for people with autism', September 2024, Healthwatch Wolverhampton). It states:

"Areas where people discussed the need for support included peer support groups and making friends, skills such planning a journey and using public transport, and finding and applying for jobs. Difficulty accessing mental health support is another key issue to address, as mental health conditions such as depression and anxiety often co-exist with autism".

Other work by local Healthwatch identifies that neurodivergent people struggle to get the proper support or information in a suitable format to enable them to engage with health and care services.

Phone appointments, waiting areas that overload the senses, changing appointments at short notice, a lack of continuity of care and professionals who don't take the time to reassure can cause neurodivergent people anxiety when trying to get support from services.

(<https://www.healthwatch.co.uk/blog/2023-08-22/challenges-neurodivergent-people-face-receiving-care> - August 2023)

What is neurodivergence?

"The term neurodivergence describes people whose neurological development and function are different (to a greater or lesser extent) from what is thought to be 'typical'. Understanding of what neurodivergence is and what it includes is still evolving. Some known neurodevelopmental conditions include autism (commonly known as ASD or autism spectrum disorder) attention deficit hyperactivity disorder (ADHD), dyspraxia, dyslexia and dyscalculia. Some people

have neurodivergent conditions but do not yet have a confirmed diagnosis. Some neurodivergent conditions become evident, or are acquired, later in life". (UK Parliament POST, 2024)

Existing services

South Gloucestershire Council offer a BASS Autism Service for Adults aged 18 years and over which provides a multidisciplinary team service to adults with autism spectrum conditions (ASCs) and professionals and carers who support them. BASS provides autism assessments for people registered with a GP within BNSSG and post diagnostic support to autistic individuals. This service does not provide crisis or mental health support, or therapy.

Barnardo's HYPE service supports four young people's health councils including Mental Health Voice, Neurodivergent Voice, Black and Brown Minds Matter and the Education Campaign Group. Barnardo's HYPE work with young people up to the age of 25 living in Bristol, North Somerset and South Gloucestershire with relevant life experience including experience of mental health services, being neurodivergent (autism and ADHD), care experience and accessing community health services.

Young people can design their own projects based on their shared lived experience of what is important to them. Voluntary and community services that support parents of neurodivergent young people include South Gloucestershire Parent Carers, and Jigsaw.

Mentoring support is provided by several organisations working across South Gloucestershire for young people post-16 years if they have an EHCP and have funding from South Gloucestershire council; most of these young people have autism. Some further education colleges provide supported internships for young people with autistic spectrum disorder. However, mentoring staff told us that support seems to fall away further for young people with autistic spectrum disorder from 18 years.

Stakeholder engagement

The engagement officer met with stakeholders including South Gloucestershire Council SEND support staff, Barnardo's HYPE project, South Gloucestershire Parent Carers, several mentoring organisations supporting young people both in and out of formal education, and youth clubs supporting young people with additional needs. The engagement officer also attended a workshop run by Autism Independence in Bristol in May 2025.

Partnership work

All focus group participants were informed about the work of the Barnardo's HYPE co-production work with young people with neurodivergence support needs and following the focus groups, were invited to join a co-production group going forward. This includes Barnardo's HYPE Health Champions work and the Black and Brown Minds Matter project. Health Champions are young people with lived

experience of health services who use their lived experience to improve health services and campaign for greater inclusion and understanding.

Engagement methodology

Young people aged 16–25 years were invited to take part in one of three online focus groups held in November 2025. All stakeholders contacted were sent information about the project; this included post-16 providers within South Gloucestershire. Following this, Healthwatch BNSSG posted project information on Healthwatch South Gloucestershire’s Facebook page and via The Care Forum’s WellAware service, which was shared via 4PCN, a primary care network that covers GP surgeries in Hanham, Kingswood and Cadbury Heath.

People contacted the engagement officer directly. Focus group participants were selected in relation to age and gender, forming three groups of between eight to eleven participants. All participants lived in South Gloucestershire. Focus groups were held on Zoom during November 2025 due to project time constraints and preference of participants. The groups were facilitated by the engagement officer, supported by a volunteer and a student placement. Groups were held in the early evening to ensure maximum participation. All participants were sent an information sheet, a consent form and demographic form to complete.

All focus group discussions were recorded on Zoom to aid transcription. The data was analysed using thematic analysis. Key themes were drawn up to form the basis of findings written up in this report. Following participation within a focus group, all participants were sent a high street shopping e-voucher to acknowledge their contribution.

Following a social media posting on the project, over fifty young people responded. Once the focus group participants were selected, the remaining people were offered an opportunity to give written feedback to questions asked of focus group participants. Focus group selection was based on age, gender and included people living in a South Gloucestershire postcode. A wide group of young people were invited to participate in the focus groups. All participants that were available and came forward were from Black communities.

Demographics of participants

All 31 young people that participated in the focus groups were aged between 18–25 years and identified as Black Caribbean, Black African or Black British, and lived in South Gloucestershire; four were carers.

Table 1. Focus group participants South Gloucestershire neurodivergence support project

Age	18-20 4 people	21-25 27 people		
Sex	Female 11 people	Male 20 people		
Ethnicity	Black Caribbean 6 people	Black African 7 people	Black British 15 people	Black mixed heritage 3 people
Carer	4 people			
Neurodivergent (2 not available)	Autistic 13 people	ADHD 11 people	Dyslexic 4 people	Dyscalculia 1 person

Findings

Young people emphasised the need to raise awareness about living with neurodivergence to better inform community members and service provider staff. It was felt that this would in turn increase knowledge and help to normalize the experience of neurodivergent individuals.

Perceptions of independence

- We asked young people what was important to help them feel independent. They said that factors fostering a feeling of independence included:
- Connectedness and support from family, friends and peers
- Being part of a community with others who are neurodivergent
- Access to I.T.
- Feeling that you are in a safe environment
- Being able to meet your own needs for example, making your own decisions, managing life, and having financial support from a job

This is what young people told us:

"My family's appreciation and encouragement contribute to my sense of independence. They recognize my efforts and recommend that I take ownership of things, which makes me feel more confident." (Woman with dyslexia, aged 25, Black British)

“My sense of independence comes from being able to make decisions for myself and manage different parts of my life. Having my voice heard gives me a sense of independence”. (Autistic woman, aged 20, Black British)

“First of all, I accepted the fact that I'm neurodivergent, so I had to learn my strengths and the challenges I faced, besides being a person of colour yeah, I had other challenges”. (Man with ADHD, aged 22, Black British)

“[My] sense of independence is solely based on my needs being meet”. (Autistic man, aged 23, Black British)

“Well sure, it could be improved. The most important thing is acceptance. Firstly, self-acceptance [of] people around us. Some [persons] thinks we are deficit. But I mean, I did not make myself this way. I don't know if you get me. I feel there should be some sort of neurodiversity education....” (Man with ADHD, aged 22, Black British)

“My sense of independence came when my family started communicating my strengths with me. They didn't just communicate but they also encouraged me to always put my everything into making the best out of what I do”. (Autistic man, aged 22, Black British)

“My sense of independence comes with financial stability/freedom, and developing my personal goals, being able to make choices and right decisions”. (Autistic man, aged 20, Black British)

Achieving goals

We asked young people what their goals were for the next five years and what would help support them with these. Goals were defined by young people in our focus groups as developing independence and being accepted as neurodiverse, continuing education, developing skills and securing work.

“Personally, I am looking to get into volunteering in my community as a youth...So far, I have been developing my skills and knowledge and learning to network and build connections that can help me achieve this”. (Autistic woman, aged 24, Black Caribbean)

“My aspiration for the next five years is about having to do a lot of things independently. I really want to do things myself, I really want to stand out”. (Autistic woman, age 25, Black Caribbean)

“I'm looking forward to creating more awareness about neurodiversity and supporting others who are going through similar experiences.”

Sources of support

Young people emphasised the importance of their family and friends in providing them with support. They also talked about the importance of being able to access emotional support via counselling and therapy services, and mental health services.

What did people tell us?

Feedback received indicated that young people felt that they would like more specialist help in relation to their neurodivergence support needs. This is what young people told us:

“The most important support to me is emotional and mental health related. Having access to someone who listens and provides practical coping strategies makes a big difference. I also appreciate information about stress management, family relationships, and ways to maintain balance between personal responsibilities and self-care”. (Man with dyslexia, aged 21, Black British)

Others emphasised that support services were available whilst they were in full time education and then support tailed off following this:

“And these services most times stop in school. And we are all fast growing...soon we will go out to the real world. We need employment and adult life support too”. (Man with ADHD, aged 22, Black British)

Support received

Difficulties experienced in accessing support related to communication issues and young people felt that service providers did not understand their neurodivergence needs. This related to feedback about employment support, mental health support and adult social care services. Young people told us:

“I’ve tried using employment support services before, through the Jobcentre. To be honest, most of the help I got really felt very general and didn’t really take neurodivergence into account. So, in my case, I wouldn’t say it was particularly helpful”. (Man with ADHD, aged 24, Black British)

“Well for me I’ve used mental health services and some counselling sessions. While it wasn’t specifically aimed at neurodivergent people, the therapist was patient and helped me understand my stress patterns better. That has helped me cope daily”. (Autistic woman, aged 22 years, Black British)

How could support be improved?

Young people suggested ways in which support provision could be improved. This included increasing the availability of neurodivergence specific support, making support more consistent and making more support available around navigating daily life. Participants highlighted need for information, including online information and social support for neurodivergent people. One young person commented:

“Support that is clear, practical, and easy to understand feels most important to me. This includes guidance for daily tasks, schoolwork, or managing appointments. Emotional support is also essential, like having someone to talk to when I feel stressed or overwhelmed. Additionally, having access to information about clubs, groups, online tools, or other resources specifically for neurodivergent people helps me feel more confident and included”. (Man with dyscalculia, aged 24, Black Caribbean)

Others said:

“It could be improved by providing more guidance and follow-up and offering emotional as well as practical support. It would also help if the support system was more flexible and personalized to individual needs”. (Woman dyscalculia, aged 24, Black Caribbean)

“I would suggest that these support professionals should be more willing to understand the perspective of neurodivergent individuals”. (Woman, aged 25 with ADHD, Black Caribbean)

“I tried adult social care services, but the process was difficult, and I struggled with the paperwork and communication. Because of that, I didn’t end up receiving the support I was hoping for, so it wasn’t very helpful for me”. (Autistic woman, aged 25, Black British)

“I think the support could have been more consistent and better tailored to my personal situation, as sometimes I felt the services were quite general rather than specific”. (Autistic woman, aged 25, Black African)

Participants said that the type of support that they found helpful was mentoring support, mental health, and emotional and therapeutic support.

“I once received support from a mentor who took time to understand how I process information. They gave me clear steps and regular check-ins, which made me feel confident and supported. What made it work well was empathy and consistency”. (Woman with ADHD, aged 22, Black British)

“I would say what really made it work for me that time was because my therapist was very patient with me. She gave me time to relax around her and get comfortable, and that really helped me”. (Woman with autism, aged 22, Black British)

Peer support

Feedback from all three focus groups revealed that young people valued peer support where they had received it and were keen to access this if they had not. Peer support was felt to decrease social isolation and increase understanding of neurodivergence. Young people told us:

“I appreciate it when people talk about neurodiversity and how it affects individuals. It makes me feel I’m not alone”.

"I mean having a long-term condition or disability can be so draining. I have emotional support from my family and friends, and these make me feel I have a sense of belonging, staying around friends. I'm not seen (by them) as someone with a disability, by them I'm given fair treatment". (Autistic woman, age 25, Black Caribbean)

"I'm also in a community of neurodivergent people, though it's not a registered community, or should I call it a group. It's a WhatsApp group where we all belong. Sometimes we talk about these things as a group". (Man with ADHD, aged 22, Black British)

"I'm looking forward to creating more awareness about neurodiversity and supporting others who are going through similar experiences". (Woman with autism, aged 22, Black British)

Experience of services

Young people felt that it can be difficult to know where to look for services. There was concern that service providers do not always have a good understanding of neurodivergent young people's needs.

Some young people were aware of services for neurodivergent young people. This included services such as mentoring programmes, counselling services and occupational support. However, young people felt that services were often hard to access. They told us:

"I know there are services meant to support neurodivergent young people, like counselling, tutoring, or mentoring programs, but they're not always easy to access". (Man with dyslexia, aged 21 years, Black British)

"I'm aware of a few services like educational support and counselling. Overall, they seem helpful but not always easy to access. Some people don't even know they exist or how to apply for them". (Woman, aged 22 years, Black British, with ADHD)

"For me, they are hard to find, and when you do find them, the waiting lists are always very long, making it feel like you have to fight to get help". (Man with ADHD, aged 24 years, Black British).

"I'm aware of the educational and occupational support but they're hard to get into. The process for assessment is tiring and difficult to get through". (Woman with ADHD, aged 25 years, Black Caribbean)

The services young people in the focus groups had experience of, included health services, and employment services – mental health support workers, psychologists and GP services. However, others felt that although they had received support, they felt it had not been specialised and been too general. Young people told us:

"Well for me I've used mental health services and some counselling sessions. While it wasn't specifically aimed at neurodivergent people, the therapist was

patient and helped me understand my stress patterns better. That has helped me cope daily". (Autistic man, aged 22, Black British)

"I've tried using employment support services before through the Jobcentre. To be honest, most of the help I got really felt very general and didn't really take neurodivergence into account. So, in my case, I wouldn't say it was particularly helpful". (Man with ADHD, aged 24, Black British)

"It was really hard to find a support provider that was specialised in understanding people with autism, and it was a challenge for me. There's little or no awareness about the resources and services available". (Autistic woman, aged 24, Black Caribbean)

"I had difficulty with finding a (support) provider who was patient enough to deal with (me) during visits. It made me feel really bad about going to that hospital again and I had to get a GP to visit me at home". (Woman, aged 25, with dyslexia, Black British)

Other young people highlighted the need for guidance to navigate support services available. One person commented:

"You know, proper guidance can help. People (need to) navigate young people with neurodivergence, and... navigate the services they want to access very fast". (Autistic man, aged 22, Black British)

Developing trust

Others emphasised the need to develop trust with service providers to engage with them and improve outcomes. Young people told us:

"(It) can be difficult to trust someone who doesn't understand your condition and know how to support you. A feeling that trust is important for a good "relationship with a provider or service". (Autistic woman, age 25, Black Caribbean)

"Sometimes people don't seek out services because they feel like service providers...there's no level of trust to keeping people's information confidential, so I think if this trust is built up, it's going to enable and increase outcomes". (Autistic woman, aged 24, Black Caribbean)

Staff training

Some young people in the focus groups felt that there was a need for more staff training around neurodiversity in order to offer more effective support. Young people told us:

"Staff who are properly trained in neurodiversity should be available, and also, it would help if the first session with any service was about getting to know me and my needs, rather than just filling out forms". (Man with ADHD, aged 24, Black British)

“I think more training and genuine listening to people's lived experiences would make a real difference”. ((Man, aged 21, dyslexic, Black African)

Cultural issues

Young people were asked whether services they receive or have received take their cultural needs into account. This is what they told Healthwatch:

“In my experience, most services only partly consider cultural needs. Sometimes, staff don't fully understand how my background or beliefs affect my preferences and choices. It can feel like a one-size-fits-all approach rather than tailored support. Services would be better if they actively listened to cultural differences and adapted their advice, guidance, and interactions to respect and reflect the variety of backgrounds among neurodivergent young people”. (Man with dyscalculia, aged 24, Black Caribbean)

“In my experience, some services try to take cultural needs into account, but it doesn't always go far enough. There's an effort to be inclusive, but it can sometimes feel surface-level - like diversity is acknowledged but not deeply understood. I think more training and genuine listening to people's lived experiences would make a real difference”. ((Man, aged 21, dyslexic, Black African)

“In my experience, not always. Some services don't consider cultural background, language barriers, or personal differences. It would be better if they included more diverse voices and experiences”. (Woman with ADHD, aged 22, Black British)

“I really need services that are culturally sensitive to my background. Having professionals that understand my cultural background [is important]”. (Autistic woman, aged 24, Black British)

In discussing how services could be improved some young people felt that neurodivergent young people should be involved in co-designing services. Several people commented on this, one of whom said:

“Well, based on my experience with some of the services and what I've heard from friends, I would say while designing these services, they should seek neurodivergent persons. They should be co producers”. (Man with ADHD, aged 22, Black British)

Suggested improvements raised by participants

In terms of how to improve support for neurodivergent young people, Healthwatch suggest the following [based on the feedback](#) young people shared with us across the focus groups, the need:

- to increase the availability of **peer support groups**

- to increase the availability of mental health support
- for more support around job-seeking
- for accessible **career guidance**
- for **mentoring** once someone is in a job
- for accessible I.T training
- to increase the availability of **peer mentoring programmes** within and outside of education and training providers
- to increase **staff training** on the intersectionality of living with neurodivergence

Provider responses

The stakeholders who received this report ahead of publication have not yet provided a response to our findings.

References

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2. 'The challenges neurodiverse people face receiving care', Healthwatch England, Blog, 22nd August 2023. <https://www.healthwatch.co.uk/blog/2023-08-22/challenges-neurodivergent-people-face-receiving-care>
3. UK Parliament POST, Postnote 733 October 2024, Sam Vo and Laura Webb, *Support for neurodivergent children and young people*. <https://researchbriefings.files.parliament.uk/documents/POST-PN-0733/POST-PN-0733.pdf>

Resources

Qualitative data was coded by common and recurring themes. All participants who took part in a focus group were remunerated with a high street shopping voucher.

Collaboration

All participants were provided with participant information sheets, a demographic form and consent forms prior to participating in a focus group.

Quality assurance

This project was designed and completed by Anna King, Engagement Officer, Healthwatch BNSSG using Healthwatch BNSSG methods for research and engagement. Graphics and pictures: Healthwatch England.

Conflicts of interest

No conflicts of interest were identified.

Audience

This report is aimed at service commissioners in health and social care.

Acknowledgements

We would like to acknowledge all the young people who took part in the focus groups and shared their lived experience, Barnardo's HYPE project staff, South Gloucestershire Parent Carers, South Gloucestershire Council SEND staff, and all the community and voluntary sector organisations who promoted this project.

Appendix 1: focus group questions

South Gloucestershire neurodivergent support for young people (aged 16–25 years)

Focus group questions

Independence

1. What kinds of things contribute to your sense of independence, if any?
2. Could these things that contribute to your sense of independence be improved?
3. Are there any goals or aspirations you have for the next 5 years? What might help you work toward them?

Support

4. Is anyone supporting you with your goals? If so, how?
5. If you do have support, how could it be improved? What else might help?
6. Are there types of support or information that feel important to you? If so, what are they?
7. Have you ever received support that felt helpful? If so, what made it work well?

Services

8. If you're aware of them, how would you describe the services available for neurodivergent young people?
9. In your experience, do services take your cultural needs into account?
10. Have you accessed any support or information services in relation to neurodivergent support for example, services linked with education or training, employment training, job support, in-house employment services, health services, mental health services, housing or adult social care services?
11. Have any of these services been helpful to you and if so, how?
12. If you've used services, what changes or improvements would make them more useful?



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