

South West Well-being Programme

Evaluation Case Studies
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South West Well-being Evaluation: Case Studies

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1. Introduction

There is increasing evidence that positive well-being leads to a more flourishing and fulfilling life at home, school, work and in the community. It is central to our ability to function well, to be productive and healthy, and to cope with adversity and change.

Holistic interventions aimed at improving well-being have begun to attract considerable interest in recent years. In addition to offering long-term benefits to individuals, action to improve positive wellbeing can also provide very high economic and social returns. Research to inform our understanding of effective action plays a vital role in supporting a shift to invest in prevention and health improvement.

This report focuses on South West Well-being (SWWB), a Big Lottery funded programme aiming to promote local action on the promotion of health and well-being across the region, as delivered by a consortium of community-based voluntary sector organisations. It presents examples of good practice drawn from all fifteen projects in the SWWB portfolio. It complements the main evaluation report which looks more extensively at beneficiary well-being outcomes, the process of working as part of a consortium, knowledge exchange and profiles for all the projects.

Full details on the evaluation reports for the South West Well-being programme can be found at:

<http://www.southwestwellbeing.co.uk/>

2. The South West Well-being Programme

The Big Lottery Well-being Fund is a £165 million initiative that supports programmes across England, working on the three themes of:

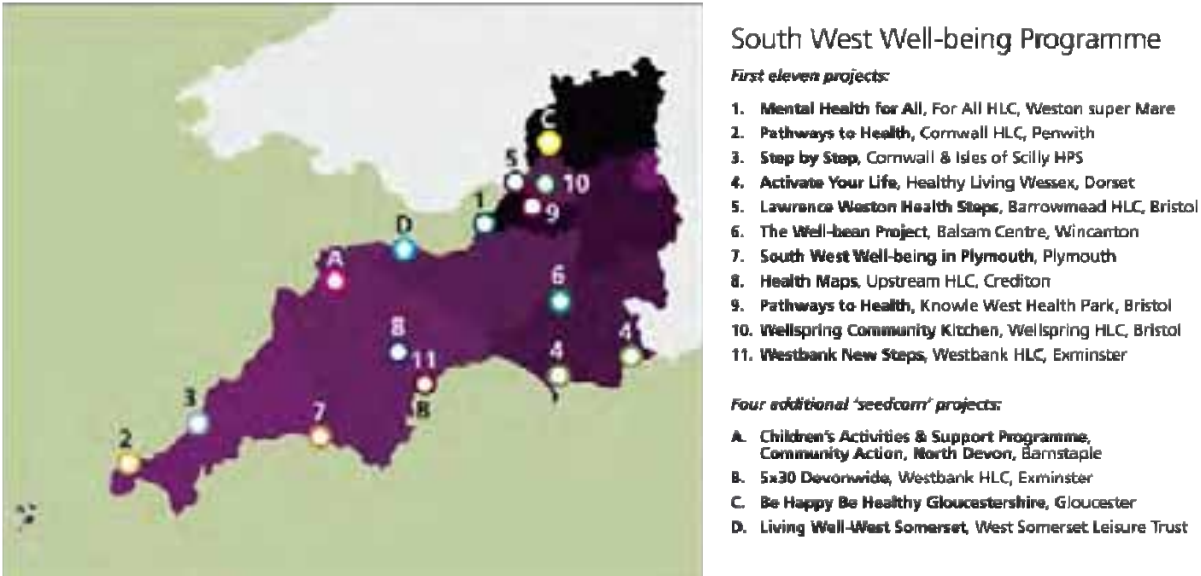
- healthy eating
- physical activity
- mental health

Between 2006 and 2008 the Fund issued grants to 17 Portfolios, seven of which are thematic portfolios managed mostly by charities or coalitions of charities, and ten which are regional portfolios mostly managed by statutory organisations. South West Well-being differs in this respect as a regional portfolio managed by a voluntary sector organisation. The regional 'portfolio' funding model reflects an approach developed by the Big Lottery Fund to issue larger scale grants to a single managing body, which in turn devolves funding to a number of local project providing organisations.

"South West Well-being: a healthier way to live" runs from February 2008 to January 2011, with an extension through to April 2011 for some projects. The Big Lottery Fund grant is £3.96 million for this period and local partners contribute varying amounts of match-funding or in-kind support for the programme.

Westbank Healthy Living Centre, based in Exminster, is the lead management organisation for the portfolio. In the first year of delivery eleven projects across the region were funded under the scheme. Ten of these eleven projects are hosted by voluntary sector organisations. Subsequently a further four 'seedcorn' projects were developed in new areas of the South West.

Figure 1: South West region and SWWB projects



The initial proposal for the programme developed from work conducted by the South West Healthy Living Alliance (SWHLA). This is a group of organisations that have emerged from the healthy living centre movement. Healthy living centres are local community-based organisations that focus on promoting well-being and promoting health, rather than providing healthcare or medical solutions to illness. Some operate from physical multi-purpose community centres whereas others are virtual centres that deliver outreach services across a network of venues.

The programme complements and develops the SWHLA vision for community-based service development in the south west:

“The Vision is to improve the health and well-being of the most deprived communities within the South West over three years with projects that will provide an holistic service, aiming to reduce health poverty by targeting those with low level mental ill health, those approaching older age and families by improving mental well-being, increasing physical activity and encouraging a healthy diet”.

3. The South West Well-being Evaluation

Overview

A research team at the University of the West of England, Bristol have been commissioned to carry out an evaluation of the SWWB Programme. This evaluation has adopted a mixed methods approach that has sought to include an account of both processes and outcomes through qualitative and quantitative research. The programme outcomes are at both the level of the individual beneficiaries or the programme and at a wider organisational level.

There are 6 key elements to the evaluation:

- The South West Well-being Questionnaire (SWWBQ), a set of measures that cover general health, healthy eating, physical activity, mental health, and personal and social well-being. The core elements of SWWBQ have been adopted from a national well-being questionnaire developed by the new economics foundation.
- Good practice case studies, chosen to reflect an innovative or exemplary aspect of project development and delivery;
- Project profiles, drawing upon a case study format from Centre for Local Economic Strategies evaluation work with the BIG Lottery;
- A survey of the perspectives of practitioners working in outside agencies on the performance of the programme;
- A economic evaluation of the unit costs of different types of SWWB services;
- An exploration of the consortium working process, based on written and group activities involving representatives from each of the projects.

Key Findings

These findings are based on analysis of monitoring reports from all project delivery organisations, partner agencies and of a detailed set of data collected through registration forms and the completion of the SWWB Well-being questionnaires.

- So far 25,048 people have participated in SWWB project activities, which puts the programme firmly on course to exceed its target of 25,604 by January 2011.
- The SWWB programme works as a close ally to GP services, social care services and a range of partner organisations. 24% of beneficiaries take up SWWB services through referrals and recommendations from partner agency professionals;
- The SWWB projects target groups of people with high levels of ill health (mental ill health, low physical activity, overweight and poor diet) and challenging social circumstances (economic deprivation, isolation, disability and care responsibilities);
- The self-reported health of respondents being good to excellent rose from 65% at baseline to 82% at follow up;

- Taking part in the programme is associated with considerable improvements in mental health. Levels of self-reported depressive symptoms fell from 35.6% to 18.5% during the course of project activities, compared to 20.8% of the population in England. At the same time, the proportion of participants producing ratings of 'moderate' or 'high' on the Short Warwick Edinburgh Mental Well-being scale rose from 58.4% at baseline to 73.1% at follow up.
- The proportion of individuals taking part in activities with a focus on healthy eating who were meeting public health 5 a day guidelines on fruit and vegetables rose from 25.5% to 39.5%. This compares to 28% for a comparable age profile in the England population;
- Adherence to public health guidelines on '5 X 30' exercise levels rose from 23.8% to 33.9%, compared with a national figure of 31% of all adults.
- Overall satisfaction with life as a whole, a recognised measure of mental well-being, showed significant positive change from an average of 6.1 at baseline to 7.0 at follow up. The UK average score is 7.2;
- The evaluation also found statistically significant positive changes in terms of wider aspects of social well-being, including perceptions of belonging to a community, regularly meeting socially with friends and relatives, and perceptions that people in the local area help one another.
- In addition, early analysis shows that mental and social well-being is strongly linked to the programme goals of improving healthy eating, physical activity and mental health. Taken together, these findings support the SWWB holistic service model and suggest that work in one area can deliver wider health benefits for participants.
- Most SWWB projects, have established clear and active links with NHS GP services. 31% of practitioners in local agencies share information with SWWB staff about service users and share venues for delivery.
- 71% of practitioners outside the programme recommend SWWB services with 59% confirming they formally referred people to a SWWB project. Practitioners indicated effective links between SWWB and their own organization: 75% said communication was good, 69% said they felt informed about project activities and 64% said they provided a good fit with local services.
- Practitioners generally agreed that the SWWB project not only complemented existing services but they avoided duplicating existing provision i.e. they offered value added to existing provision.
- Alongside national costings for community health services, the unit costs analysis shows that SWWB services represent good value for money,
- The evaluation has also identified some central themes based upon the experiences of SWWB programme's consortium members. These highlight some valuable aspects of how an alliance of healthy living organisations has worked with the Big Lottery's portfolio model, while also reflecting the learning derived from wider research on partnership working.
- SWWB programme is a consortium model that holds a number of attractions for commissioners of civil society and health promotion initiatives. The format streamlines the supply chain, has kept overheads low, promoted prompt front-line delivery, directed efforts and managed quality assurance.

4. The Case Studies

SWWB organisations are highly experienced providers of community services. All have worked closely with their communities and tailor their activities to meet local needs. In the process of developing services, staff have learnt how to respond to opportunities to address the challenges that arise. The following a series of case studies highlight how each project has developed their practice in specific areas.

While the SWWB programme encompasses a considerable range of activities, service users and community settings, one aim of the case studies is to illustrate a number of underlying issues that are common to many projects.

The case studies presented here were developed in dialogue between each project team and the evaluators. Project leads were invited to identify an area of 'good practice' that reflected an innovative or exemplary aspect of project development and delivery. Project teams researched and produced an initial draft themselves, or we produced a draft based upon interviews.

Some of the examples of working practice include participant perspectives. Where necessary, quotations have been put into context. Personal names have been changed unless individuals have given consent to use their real name.



For All Healthy Living Centre: Positive Well-being Project

South Ward, Weston-super-Mare • For All Healthy Living Company

The Positive Wellbeing Project (PWP) seeks to provide a service to people with low level mental ill health, concentrating on protective factors such as social networks, participation and self esteem. It intends to support people living within South Ward to improve their physical and mental well-being by providing a local, accessible and flexible service that responds to the needs of individuals and the community. Specifically, the project aims are to:

- Ensure a rapid response and range of options for people experiencing mild anxiety and depression, reducing the number of people on medication
 - Develop community alternatives to medical treatments: self help groups; CBT; talking, listening and complementary therapies; varied opportunities for physical activity
 - Support and mentor people who find it harder to access these opportunities, improving inclusion
 - Improve understanding of families and communities of mental health through campaigns, events and similar health communications
-

Race for Life 2009: Enabling access to charity sport fund raising events

Many people would like to take part in charity sport fund raisers but are deterred by costs, lack of social support and the demands of physical training. This case study illustrates how the PWP enabled 81 women to take positive steps to promote both a good cause and their personal well-being.

In May 2009, 81 women from the PWP completed Cancer Research 5K Race for Life on Weston Beach. The women who took part covered the full range of women who use the project including women with their daughters, older women, several with disabilities and also female members of staff. The health trainer at PWP had recognised the Race for Life as an opportunity for the project to promote several of its values simultaneously, these included encouraging people to do more exercise, inclusion of those with special needs and disabilities, developing peer support, providing social and recreational



opportunities and recognising the value of exercise for lifting mood and reducing tension and anxiety.

Whilst the staff team knew that there was a lot of interest from local women, they were also aware of barriers to taking part in Race for Life: cost of entry; risk of injury through inappropriate footwear and clothing; lack of confidence in distance running; lack of training and walking/running experience; and transport to the event. In response staff team designed an eight week training programme. They also offered alternative training opportunities for those who were not available for training during the day which included a personal training plan. Staff drew upon their in-house expertise in the form of two trained walk leaders and a level 1 running coach. The team aimed to focus their work on people with low level mental health difficulties, but also publicised the initiative more generally through the Healthy Living Centre (HLC) and its partner services. This helped attract a very wide range of people to get involved.



Working to overcome barriers to participation, the project provided everyone who registered with the opportunity to be fitted with running shoes, walking shoes or sports bras. PWP also covered the Race for Life registration costs. This investment was not only intended to reduce the risk of injury but also encourage the women to commit to the programme. Participants reported that this approach did help their confidence and helped provide motivation for both the training and the event. Training was held weekly, chiefly on Weston Beach, with an average attendance of ten people. The project provided minibus transport from the centre to the beach. Those regularly attending the training included several people with disabilities. All the training sessions were risk assessed before taking part and a variety of techniques were used to keep the training interesting. By the end of the training programme everyone who attended had completed the full distance and appeared to be confident of taking part. As the training progressed the group became very supportive of one another and were keen to develop a team identity so PWP provided personalised group T-shirts. PWP also encouraged participants to raise sponsorship.

On the day of the event all 81 women who registered participated despite poor weather. Nine staff members of HLC took part to assist participants and help record the event through photos. Everyone completed the course to the best of their ability and it was apparent that they felt a huge sense of achievement. The last walkers from the group completed the 5K course in 1.5 hours in heavy rain. Chief outcomes from this event were those attending gained a sense of achievement, increased self-esteem and recognition of their own abilities; the group were able to work together, build friendships and support one another increasing their sense of being part of a community and able to help one another; an increased level of exercise and by paying for the registration they overcame the biggest barrier to taking part and enabled many more people to become involved especially those who would not traditionally have been able to do so.





Cornwall Healthy Living Centre: Pathways to Health and Well-being

Former West Cornwall local authority districts of: Penwith and Kerrier.

The charitable and not for profit organization Penwith Community Development Trust (PCDT) is the lead organisation for the Cornwall Healthy Living Centre (CHLC).

The project seeks to encourage and enable patients to move away from the culture of self-dependence and reliance on GPs by aiming to support patients to adopt pathways that encourage them to take responsibilities for their own health and well-being. The project empowers and supports individuals and families in deprived communities, people who have low level mental ill health and people aged 50+ to assist them in overcoming barriers to access new pathways of health and well-being. It has reached local and remote communities through the construction and development of the CHLC website and more specifically through the recruitment of volunteers and well-being activities. The CHLC has identified that there are people living in local towns and remote communities that have difficulty accessing health and well-being activities and by mobilising volunteers it harnesses their potential to support people to access well-being pathways.

Penwith Pals: Bernie and Rosalind

Volunteering opportunities have been at the heart of the project's success and this has attracted the attention of the national evaluation team from the New Economics Foundation and the Centre for Local Economic Strategy to this project's work.

Responses of beneficiaries show that at the start of the project the number of people reporting that their health was either very good or excellent over the last week increased from 31.8% at baseline to 67.8% at the end ($p < 0.00$, $t = 6.47$, 2 tailed test). And importantly for a project that has utilised volunteers to reach out to isolated people in the community the number of people reporting that they felt lonely everyday declined significantly by 48% ($p < 0.00$, $t = 3.19$, 2 tailed test) as a result of being engaged with the project. Also beneficiary scores on the Short Warwick-Edinburgh Mental Well-being Scale show significant improvement ($p < 0.00$, $t = -3.17$, 2 tailed test).

The Penwith Volunteer Bureau (PVB), which is one of the delivery partners of CHLC, provides over 400 different



volunteer opportunities. Potential volunteers often drop into the bureau - but they can make contact through the PVB website or check out volunteering opportunities by exploring on line search engines like: <http://www.do-it.org.uk>. Current postings include calls for: beach watch volunteers, bereavement volunteers, leukaemia care charitable collectors and needle exchange receptionists. Potential volunteers may wish to be part of the Penwith PALs project, which started in 2006 and receives referrals from across the Penwith area of Cornwall. Referrals have been received from adult social care services and other professionals like community matrons.

The project is primarily a befriending service that supports elderly people who live alone and who feel isolated. Cornwall has a high retired population. 22.9% of the population is of pensionable age (UK 20.3%), which is primarily due to its rural and coastal geography increasing the county's popularity as a retirement location, and the emigration of younger residents to areas with greater education and employment opportunities. Thus the befriending service is becoming vital to those who particularly live in smaller, remote locations. Volunteers visit regularly and offer befriending support which can extend to offering transport to visit GPs or hospitals, DIY, gardening or shopping. This project has supported 150 older people annually including Bernie, whose wife died two years ago. A retired teacher, he has enjoyed the support that volunteer Rosalind has brought to his life. Rosalind is also a retired teacher who responded to an advert for the project in the local newspaper, The Cornishman. They usually have coffee, but sometimes do crosswords together and engage in philosophical conversations. Bernie particularly enjoys discussing current affairs, but the benefits gained from the befriending service are mutual:

Bernie: I don't know how I would have got by without it because I have lived a lonely existence and this has sheltered me from the worst agony of that existence

Rosalind: It has brought a great friendship, a lovely new friendship which I wouldn't have had if I hadn't been introduced to the voluntary service...and I know that this is a mutual thing because we enjoy each other's company.

Bernie: Loneliness is a very common disease in this world. And so all those people who suffer from it could be benefitting from some similar parallel experiences. It is something that works magnificently well.



Cornwall and Isles of Scilly Health Promotion Service: Step by Step project

North Cornwall • Cornwall and Isles of Scilly Health Promotion Service.

The Step by Step project promotes the engagement of local people in health and well-being activities through a combination of community group development and one-to-one support. It empowers individuals who are at risk of poor health through promoting self confidence to take their health and well-being as a personal responsibility therefore engendering a desire to change. At the onset of the project it worked with several community groups utilising a strategic network of statutory and voluntary and community sector providers. The Step by Step project targets areas with higher social deprivation in the four former Cornwall district authorities of: Carrick, Restormel, Caradon & North Cornwall. In addition to employing a Community Health Development Worker and a Well-being Worker the project also supported a Community Health Development Small Grant Scheme.

Community Health Development Small Grant Scheme: Stimulating local action through small grants

The scheme provides the Community Health Development Team with a unique opportunity to give local communities and organizations in Cornwall and the Isles of Scilly a chance to address their own identified needs.

The scheme particularly seeks to promote social inclusion to projects which can offer:

- Support for community health development through community involvement and participation
- Support for community involvement in active recreation and environmental projects
- Support for arts for health activities

Grants of the value of up to £300 per application have been awarded to a diverse range of health events and organizations. A typical example from last year was an award to the Rural Community Link Project an eight week arts and craft group directed to helping people with mental health issues. This scheme is unusual because funders rarely have the capacity to



empower such a broad range of community groups with support to achieve a lot with just a little funding. Any voluntary or community group from across Cornwall and the Isles of Scilly can apply for a grant of up to £300 by completing a simple application form. They need to demonstrate that it promotes social inclusion and underpins the scheme's broad concept of health and well-being. Post-award applicants are encouraged to feed back to the project on the grants impact. The quotations given here are from their reports.

The projects and activities supported have been diverse. In many cases it gives the groups involved a tremendous boost toward sustainability. One such group applied for funding to build and stock a pre-school garden to grow healthy foods and help educate the children. Buying their seeds through a fund raising catalogue in which they can receive £1 in £5 back for their group, they encouraged parents, grandparents and others in the village to do the same. An award of a small grant enabled this pre-school garden to involve the wider community and to become self sustainable.



The Liskeard and Looe Mini Junior Rugby Football Club provide sporting opportunities to 140 children from all backgrounds. Their small grant award helped purchase balls, bottles, bibs and paint which according to the lead *has been a great help*. Through the Small Grant Scheme this club has been able to provide equipment for children who otherwise may not have been able to afford to attend.

A group for those with or affected by dementia received an award to enable them to plan a number of trips. Carers of people with dementia are often isolated and many are elderly themselves. The award resulted in a group of people having some time out of their normal routine to enjoy the company and importantly to laugh together. Such good times were had that money is now collected to enable the trips to continue.

Often when a family has a disabled child especially in a wheelchair, the child and their siblings have little they can do together. The Small Grant Scheme funded an activity day at a centre to enable disabled children, some in wheelchairs, to try climbing, abseiling, archery and more alongside their friends and siblings. This activity reduced the barriers faced by those with a disability and brought less able and able bodied together.

Seeing the smiles on their faces when they successfully completed an activity was wonderful especially for those who were nervous about having a go.

Reaching out to small groups has been crucial because it is often here that people receive vital support. The project has a high level of beneficiaries self reporting that they are disabled with 41.8% saying they claim a disability benefit. It is perhaps therefore unsurprising that 44% of their direct beneficiaries report that their health was only *fair* or *poor* at baseline. Only two other projects in the portfolio had lower rates of self defined health at inception. Where Short Warwick-Edinburgh Mental Well-being Scale scores are available for direct beneficiaries on this project they report some of the lowest ratings on the scale. Over a third of direct beneficiaries' report that they rarely feel they belong to a community, 20% said that they rarely feel good about themselves and that they did not feel they belonged to their community at all. The small grant scheme goes some way to addressing these beneficiaries' needs in feeling isolated from the community in which they live.



Activate Your Life with a Lighter Weigh to Live

Weymouth & Portland, Bournemouth • Healthy Living Wessex

Activate Your Life offers a holistic diet, exercise and lifestyle change course for individuals and families who have weight management difficulties- or related health issues. The project brings together two recognised project centres of excellence operating in the most deprived communities of Dorset. They have a record of attracting hard to reach groups through making activities accessible and fun and encouraging sustainable social networks.

Evaluation evidence from 235 adults shows significant positive changes on completion of the course. For focused work, individuals increase their fruit and vegetable intake by an average of one portion per day; lose 3.17Kg in weight; show improved mental well-being and reduced mental ill health. The project has developed as a referral hub for GPs and hospital dietician services.

Lifestyle Clinics for Men

Many SWWB projects have developed one-to-one and group based activity programmes that successfully attract women. However males tend to be under-represented, particularly in weight management programmes, despite evidence that obesity and high weight are issues that affect many men. Recognising the issue, Healthy Living Wessex has increasingly refined its services to reach an under-represented group of clients.

HLW's lifestyle mentor are qualified, and experienced in a variety of behaviour change techniques such as life coaching, behaviour change counselling and motivational interviewing. They work with clients on an individual basis to help them to make realistic, sustainable lifestyle changes. Initially clients are assessed for their readiness to change. Once it is confirmed that the service is appropriate, they are offered three one-to-one sessions initially on a weekly basis. At the end of the first three sessions, it is generally anticipated that clients will have achieved one of the following outcomes:

- a weight loss of 2Lb,
- an increase in physical activity by one session per week,



- an increase in the number of steps by at least 1000 steps per day,
- an increased intake of fruit and vegetable portions by at least one portion per day.

During a further set of follow-up sessions the mentor helps the client set realistic health goals and break these down into manageable action steps. Each week the actions are reviewed and the next set of actions will be set. People often find it very powerful to be held accountable for carrying out their agreed actions. This isn't about telling people what to do or 'telling them off.' It is about setting goals and agreeing action steps that will help them move towards their goal.

Lifestyle mentoring is particularly appropriate for people who need to lose weight prior to an operation, or for those who would benefit from improving their general lifestyle for people with diabetes, coronary heart disease, high blood pressure & high cholesterol.



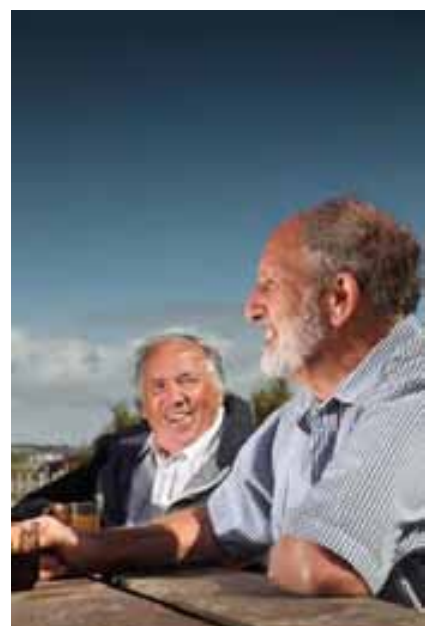
Although the HLW's service has had good outcomes, it was clear that men were less likely to take up the offer. Over an 18 month period 58% of the men referred into the service were not taking it up. The project team talked to men who were accessing the service about how they could make changes to meet the needs of men who weren't currently engaged with the lifestyle mentoring service. Working with social marketing techniques, the team used the insight of clients to help promote the service through local newspapers. The format of the sessions themselves stayed largely the same, but the team made the following changes:

- The title of the service changed to Lifestyle Clinic for Men and was marketed through GP surgeries but also the local weekly newspaper magazine.
- The length of the sessions was reduced to 30 minutes rather than 45-50 minutes. This was based on feedback that men reported not really wanting the 'touchy, feely stuff'.
- Pedometers proved helpful as a physical gadget which men liked and could take total control of the results - and who they shared them with.

The initial results have been very positive. The adverts in the local press resulted in the gender split moving to 60% females to 40% males (from 80/20). The team find that once men have decided to commit to the lifestyle change they do it whole heartedly and can achieve really results very quickly.

Overall with the marketing, the team has found the hard way that it is important to be really clear at the outset about the target audience. Men are an important group to target as there was a genuine gap local services. The team now intend to develop the service further to make it more attractive to men - but the first steps have been very positive.

Howard and David, photographed, both successfully lost 1 stone with HLW's Lifestyle Clinics for Men.





Lawrence Weston Health Steps

Lawrence Weston, Bristol • Barrowmead Project Ltd

Lawrence Weston Health Steps aims to develop a range of group-based and community-led health promotion activities through network of local venues. Beneficiaries from low-income families, older residents and people with long term health conditions and disability support needs have taken part in activities that include: befriending, a community allotment, lunch groups, gentle exercise, dance and cooking groups. A project health and well-being information newsletter is circulated to all households on the estate. Community transport helped an average of 84 people a week to access these activities.

Working with Core Volunteers

Many SWWB funded activities work with volunteers to deliver services that connect with their local communities. This case study examines how the Rock Community Centre, one of Barrowmead's service delivery partners, has built up a core team of regular and long term volunteers.

I have nothing but good to say about it. For £3 you couldn't get such good value anywhere else. Edna, a lunch club regular

The Rock Community Centre's lunch club aims to provide hot, healthy and nutritious meals for older people in Lawrence Weston. It also gives people the opportunity to leave the house, to meet old friends and make new ones in a warm and friendly setting. The club is particularly important for those who might struggle to get out on their own.

The Rock's lunch club has been running for over ten years. Three years ago under the SWWB programme, the Rock lunch club extended its provision from one to two days a week. The club has grown in its attendance and now averages at 30 members. Many members have mobility difficulties and are picked up and dropped off at the centre by Lawrence Weston Community Transport.

Whilst the SWWB programme provides a grant to cover the very basics such as hire of the centre and community transport, Sue Hale – the centre manager – has learnt to run



the lunch club on a tight budget. Members contribute £3 for their meal and help raise funds for kitchen equipment through a weekly raffle. Meanwhile local suppliers, such as the butcher and grocer, supply food at a discount and on special occasions.

Much of the success of the lunch club has been down to a core team of volunteers. Take a typical day where the menu is roast beef, roast potatoes, Yorkshire pudding, carrots, cabbage and gravy, followed by fruit sponge pudding and custard. The day starts early when at 8.45am Dick collects the order from Tubbs the butcher. He often calls in at Bobbetts for the vegetables, but today he brings freshly picked cabbage from his allotment. At the centre Christie, Sheila (both volunteers) and Sue make a start with the potatoes before moving on to the other items. Meanwhile, Dick sets out the tables. As the morning goes on others arrive to help organise the final touches. By 12am the members arrive, register and are served the freshly cooked

meal. Dick will run meals out to people unable to leave their home. By the end Tom, aged 85, helps with washing the cutlery and the team have the place spotless sometime after one o'clock. It's a well rehearsed routine and the morning works like clockwork. In total the core team volunteers contribute at least 18 hours of unpaid work per lunch club session. Sheila says:

We concentrate on cooking the meals they [the members] love. Most people are in their 70s and 80s and like pretty traditional food. They tend to go for the meat and two veg' meal – the sort of things that aren't the easiest to cook at home when you're on your own. I find it very rewarding to cook good food - and we also have a lot of fun.

Talking about volunteering Sue says:

It's important to have regular people who know what they are doing. You need the mainstays of a core group – we call them the 'A team'! They then help other volunteers to get on with other jobs that need doing.

The Rock's core volunteers have been vital for the community centre. The volunteers take a pride in their work. They have helped make sure that the centre's catering hygiene standards were awarded five stars and have recently kept the club running by themselves when Sue had to take time off work after an accident.





The Well-Bean Project

Wincanton, Somerset • Wincanton Community Venture (WCV),
otherwise known as The Balsam Centre

The Well-Bean project is a rural outreach project, focusing on improving well-being in five settlements in South East Somerset. The project is based at the Balsam Centre in Wincanton, which serves a rural population of around 25,000 people. Some wards in and around Wincanton are in the second least deprived quintile for England however there are pockets of deprivation and it is in these communities that the project seeks to specifically address health inequalities. The project has delivered a broad variety of different activities that has helped to sustain local rural traditions as well as provide beneficiaries with a broad range of healthy and well-being options. This has included food growing, country dancing, setting up and supporting village social and specialist peer support groups, foraging, apple juicing, working with school children, textile group, art therapy group, carers support group, walking and talking, flexercise and one to one support for older people with limited mobility, weight management, creative workshops, seasonal cooking and preserving, gym sessions, community choir & more.

Being based at a centre the Well-Bean project has learned and discovered the very complex needs that many beneficiaries have when they approach the project for support. Since acquiring Healthy Living Centre status in 2002 it has successfully developed a network of local partners and agencies to achieve and deliver positive outcomes for families. They have found that families facing complex problems appreciate respectful and integrated support services. This case study illustrates the strength of working through a network of local partners and agencies to achieve positive outcomes for families.

Adopting a coordinated approach to complex family problems

Dave is a 23 year old man living in a small market town. He had grown up in a difficult family environment with an absence of any positive male role model. He lives with his partner Carole who works shifts and their two young children, three dogs, two cats and a garden full of ferret cages, chickens, rabbits, toys and a pond. He is the main carer for the children. Two doors away on their estate live another couple Rob and Jodie, also with young children and dogs.



In May 2009 Dave, Rob and Jodie had been referred to the Well Bean project by the Health Visitor team due to concerns in each case about their social isolation and lack of confidence to cope with everyday life. It was felt that this situation was having a negative impact on their children. Dave had experience of working on a farm and was interested in growing some food. Well-Bean Horticulture Worker Tim secured a new allotment nearby and worked successfully alongside them and their children each week through the growing season. The allotment was productive and the families started eating a lot more vegetables. Soon both families started joining in and enjoying the weekly family swimming sessions that were run jointly by the Well Bean project and Children's Centre.



At this point existing tensions with the neighbour living between the two families boiled over with issues concerning general noise, barking dogs, dog mess and concerns over crying children. As a result the two families were referred to the local Community Justice Panel.

At the hearing the families made agreements regarding their animals and Dave was required to attend a parenting course. Tim visited both families the following day and helped them think through the management of the issues that had arisen as a result of making agreements that they had not been fully prepared for. This involved enrolling both Dave and Jodie onto a Webster Stratton (intensive parenting) course that was just about to start at the Balsam Children's Centre. To enable them to attend, childcare was arranged at the Balsam Nursery along with transport from the local accessible community transport scheme. Tim also brought in the local authority dog warden who provided training for both families with their dogs.

Both Dave and Rob came to the Centre for anger management and counselling with the Centre based mental health worker, while Jodie received counselling for depression with a volunteer counsellor.

Seven months after first being introduced to the project both families have undertaken meaningful change in their lives. The men have continued with the allotment and Dave has also created a new vegetable patch at home in the garden, which is now tidy. There are fewer dogs, which are now properly trained, and relationships with the aggrieved neighbour have improved significantly. Dave and Jodie attended all twelve sessions of the parenting programme and thoroughly embraced the changes that they needed to make as parents in respect of their children's development and behaviour. Both men have grown through the process and are noticeably more mature and considerate with other people. All four adults are still going through a period of change and will continue to need some support from the Centre.



South West Well-being Programme in Plymouth

Plymouth inner city wards • Local delivery organisations with management by Westbank

SWWB has supported a group of voluntary sector organisations in Plymouth to deliver personalised lifestyle activities and community led health promotion services. These deliverers include Elder Tree older people's service, Relate family service & Eclipse Counselling. Operating in neighbourhoods with high social deprivation, the projects work with families, older people, people with poor access to services, people with sedentary lifestyles and people with low level mental ill health.

"It's opened up the old doors that I thought were closed forever"

Elder Tree Ltd is a Voluntary Support and Befriending Service that reaches out to socially isolated and vulnerable older people to promote their continued independent living, social engagement and access to social and health related activities.

The Elder Tree currently is currently working with 62 volunteers and 350 beneficiaries. Roger, aged 65 describes here how a weekly Fitness Class has made a difference to his life.

Two years ago I was out with my wife when I suddenly collapsed. I was rushed into hospital where I ended up spending the next six and a half weeks. During that time I had a cardiac arrest and found that I needed a heart bypass. It was all a total surprise. In the end they fitted me with a defibrillator as a back up.

After doing a rehab programme I still felt very frail. When you have a bypass you feel very vulnerable. You feel like you're doomed. I was feeling low and very brittle. When I started going to the Elder Tree's weekly fitness class I think I gradually got my confidence back. Every week the instructor takes you through a set of steps where you warm up and warm down.

There's a real mix of people at the group: I've made some good friends and there are always new people coming in. As a group we talk a lot about things and compare notes. There's a lot of laughter that goes on. I wonder what people would be doing without it? Probably they'd just be sitting at home by their selves.



The instructor has a nice way with him and, I suppose, we want to please him really.

I'd never been to this sort of class before. It's now a regular engagement in the week and I really look forward to it. In between I go for a thirty minute walk every day. I thought I'd never do the decorating or mow the lawn again. You could say it's opened up the old doors that I thought were closed forever.



Sue & the Eklipse Contact Service

Eklipse Contact is a service evolved through Eklipse Counselling: a service that provided 'free at the point of need' therapeutic counselling for over six years. The team realised that towards a course of counselling clients often need further support to access other services to help them develop broader social networks and fully integrate back into the community. In this account an Eklipse counsellor explains the support offer to Sue, aged 49.

Sue had an eating disorder for the past 20 years and has attempted suicide on numerous occasions. Abandoned at birth by her biological mother, Sue was brought up by neglectful step-parents, who favoured their own biological daughter above her.

After several failed relationships and now aged 37, she settled and subsequently married her partner, who was later to turn out to be both controlling and violent. 12 years later, and after continual domestic violence from the partner, she split from the relationship. Shortly after, she lost her job which she had held for a period of 8 years. What followed was a referral to Eklipse Counselling via her GP after another failed suicide attempt.

Through therapeutic counselling Sue was able to identify her responsibilities, self-value and self-worth. Over the next ten months Sue moved from having high mental health needs, dependant on high daily dosages of medication to having low mental health needs with reduced medication for night use only.

Sue was then referred to Eklipse Contact where the focus was on lifestyle objectives through on-going supervision. Sue got healthy eating and dietary advice, and employment advice. Sue currently holds voluntary position with a charity whilst actively seeking employment. Since the sessions Sue reports that she remains 'strong, confident and self-reliant and focused.'

Upstream Health Maps

Upstream, a Registered Charity and Limited Company • Mid Devon, focusing on a largely rural farming community centred on three main market towns of Crediton, Cullompton and Tiverton

The Upstream 'Health Maps' project was designed specifically to motivate people to take responsibility for, and to improve, their own health-related activities. The project engages with people who are, on the whole, older and less able, with an emphasis on preventing them from falling into ill-health and requiring more serious and costly intervention at a later date. Upstream's target population is people aged 50 and over whose lives may have changed or be about to change in some way. These transitions include retirement, bereavement, moving home, loss of income, and the onset of illness. The project offers multiple routes for personal development. Working with the choices of the participant, a project mentor helps set goals and provides support to take part in group activities. These range from art and craft activities to gentle exercise and day outing activities.

Upstream's "Best Foot Forward"

Rural areas in the South West have a high population of older people who often lack the opportunities to engage in physical activities in a social setting. This case study shows how the Upstream project used its knowledge and expertise of local communities to develop a new group for isolated individuals who shared similar interests.

The aim of "*Best Foot Forward*" was to deliver light exercise to music through a fun programme delivered responsibly in a safe environment. The Upstream 'Health Maps' initiative helped identify those who were lacking in exercise and in danger of becoming socially isolated. The object was to improve independence and regain confidence both physically and mentally. The programme aimed to encourage individuals to meet their full potential and promote lifestyle changes, especially exercise, essential for a healthier future.

The "*Best Foot Forward*" exercise groups were led by Emma Higgins who was experienced in work with the elderly. The Crediton group was established in the autumn of 2009 and in Tiverton in February 2010.

People of all abilities were referred through Upstream: by GP's, health professionals, family, friends or carers. Word of mouth soon spread to the local communities leading to an increase in



social capital and a diverse mix of people. In Tiverton the project was endorsed by the physiotherapists who were now able to signpost 'onward referrals' back into the community through the group. As the exercises were achievable either seated or standing there were no barriers to people with sight and hearing problems, age, weight or mobility problems. As one member says

".. we have tried to join the Pilates class at the Leisure Centre and the Tai Chi at Heathcoat's Community Centre but have been told that we are too old"

Part of the mentor's role with new participants has been to draw up a health map to visualise behaviour and life style. Records of exercise, distances walked and general behaviour patterns were included with diet and other social or creative activities. Realistic health goals are agreed. Before starting, each participant completes a health check using a *Physical Assessment Readiness Questionnaire (PARQ)* to screen any serious health problems. If there were any medical queries, GP recommendation and authorisation is sought.



For those enrolled in the Upstream project, each person's progress was tracked and their outcomes recorded in terms of improved levels of fitness, confidence, new friends, and pride in achievement.

"I'm much more confident walking since I joined the class. I walk to the class now, but take the bus back, because of the hill"

"I move much more freely at home now"

Mental stimulation has been built into the programme by memorising dance and step sequences and synchronising with the music. The imaginative routines strongly encourage the participants to join in.

"It really gives you a chance to stretch out your body"

There is a high degree of socialisation as well, widely regarded as of key importance to mental health.

"Don't ever stop running the class, it's the only thing that gets me out and about"

The Crediton group is now extremely confident, reflecting a huge impact on their sense of well-being. They have been interviewed by the press and taken part in many demonstrations to wider audiences. This has developed strong social cohesion and there is evidence of new social friendships so important at this stage in life.



Since March 2010 the two dance groups have become independent and self-funded.

"We have gone independent, which we voted for, and even have our own T-shirts."

The groups are now on course for a long-term future.



Knowle West Pathways to Health

Knowle West, Bristol • Knowle West Health Park Community Interest Company

Knowle West Pathways to Health works with people with poor physical health or weight management issues, people with low level mental ill health, and people with diet-related health risks. The project offers four main services: an integrated package of motivational guidance and massage therapies; a weight management course; diet and exercise based activities for younger people; and subsidised massage and complementary therapies.

The Fit 'n' Fab Group

Knowle West Health Park has found that short term interventions for people with mental health or social difficulties can be highly effective. However, as with many organisations, KWHP cannot offer intensive services on an indefinite basis to clients. This case study illustrates how KWHP established a simple low cost support group to help people over the longer term.

For people who have a major encounter with ill health, the road to well-being can be long and challenging. As part of the SWWB, KWHP has been running 'Pathways 2 Health' [P2H]: a programme that aims to support clients to make step-by-step lifestyle changes, starting from the place they identify. Most clients have either recently had medical treatment for an acute or chronic health problem, or have mild to moderate mental health issues. Their difficulties are compounded with housing, employment or relationship problems. Over the course of six sessions clients have an opportunity to assess how healthy they are, start to develop goals and agree actions they are going to take to achieve them. Whilst the programme has very successful self reported outcomes, the KWHP team found that clients often lacked the opportunity to follow through on these gains. As Sally, activity coordinator, explains:

Six weeks just isn't long enough for everyone: at the end you're left on your own and you're not necessarily ready to go into the outside world. Without support people can easily slip back into needing expensive [NHS] care.

KWHP's solution was Fit 'n' Fab: a group for clients to who are ready to move on from one-to-one sessions but who still feel they need regular personal support. From the outset Sally felt that everyone in the group should feel empowered to take an active role. Michelle, one of the group members, says:



When we first met we talked about what name we wanted for the group, what we wanted to achieve, how we we'd run the group and how much we would be charged. We wanted it to be that no one was excluded if they were on benefits, but we should help [KWHP] by paying for refreshments.

Groups can often feel threatening, but Fit 'n'Fab members have found that P2H has been a good bridge into more a social environment. Jill says:

For the majority of people, we hadn't met each other before. Being in a group is quite scary if you're new. But because we'd already been to P2H you already know Sally. The ethos of the group is that you are not under any pressure at all – not under any pressure to come.

Each week, the group takes part or explores a different topics relating to 'well-being'. For Helen, Fit 'n' Fab has played an important part in her recovery from ill health:

I'd been increasingly feeling 'slow' and - until I'd been diagnosed with a tumour in my thyroid - no one knew quite what was wrong. Then I had a big operation on my throat. After my operation there wasn't much support: I was really just left to go to my GP for blood tests and a check up. I felt like I was just left in a void really and I was incredibly depressed. I'd not long moved to the area and didn't really know anyone.

Sally helped me set goals – my goal was to try to carry on eating healthily - because I'd been unwell my eating habits had got a bit out of control.

Fit 'n' Fab has been a way for me to get to know lots of people. It's a very eclectic group and we all very open about our experiences. For me, it's a place where you can come and just let go. You don't have to be fantastically sociable, there are no expectations, you can just come in, unwind, and let go. At the start I felt I had to come every week...I feel a lot more confident now: like I don't have to come every week.

The team have now broadened their links to other agencies who have started to refer people who can benefit from the group's social support. KWHP staff's vision is that, Fit 'n' Fab becomes a sustainable group for people with longer term needs. In contrast their one-to-one therapeutic services, KWHP's Fit n Fab is run on a very low budget. For KWHP, this mix of high and low cost interventions helps the organisation provide a holistic range of services that fit well with the diverse needs of the local community.





Wellspring Community Kitchen

Easton and Lawrence Hill, Bristol • Wellspring Healthy Living Centre

The ethos of this project is guided and developed by a steering group of local residents and workers who agreed the detailed design and specifications for the kitchen which took account of their specific needs. They worked alongside local food practitioners for technical advice and support. The project aimed to improve diets and promote enthusiasm and skills around food and cooking. But it also ensured that the users of the service were involved from the beginning and active in decision-making about kitchen development. The project has built and promoted access to high quality cooking facilities in a community centre setting, undertaking community cooking demonstrations, skill development and educational support. The community kitchen is situated in the Wellspring Healthy Living Centre (WeHLC) which opened to the community in 2004. It is supported by many local organisations e.g. the Barton Hill Settlement, Somali Family Project and the Older Peoples Forum. The kitchen has encouraged the development of new social networks to promote mental well-being and it shares food and cooking skills with people from a broad range of cultures and traditions. The project includes different beneficiary groups: older people, parents and those with low mental ill-health; while ensuring that the project is fully accessible to people from Black and Minority Ethnic backgrounds. It has undertaken innovative outreach work e.g. working with young people, which is challenging! In the local area many are not attached to youth centres and they may also be not attending school (Bristol City Council, 2009). But the project has been flexible to develop fresh approaches like outreach impromptu barbecues and linking with youth services to explore collaborative diversionary opportunities.

Reaching out to different communities through cooking

The full-time project worker has actively promoted, organised and run a varied range of activities for different groups. The kitchen area is large enough so that it can be shuttered off and the 'café' area can be used by other activities, trainers and groups. There is also space within the kitchen for a dining room table which can be used by any group using the kitchen. The 'Chat café' is a weekly café open to all residents, users and professionals at lunch time. Reasonably priced drinks and sandwiches are available as well as soup and a main meal. An outside crèche facility is located nearby. And payment for cookery sessions are organised on an individual and flexible basis.



Responses from users of the project suggest that the project has had a big impact on beneficiary food behaviour. Thus, the number of beneficiaries who say they are likely to cook meals from basic ingredients has significantly increased ($p < 0.004$, $t = 3.13$, $df = 29$) and the number of people who say they enjoy eating healthy food has also significantly increased ($p < 0.000$, $t = 8.86$, $df = 29$). There is also evidence of decreased alcohol intake with six beneficiaries reported that they no longer drink alcohol. Beneficiaries also report significant improvements in gardening, housework activity and cycling.



Jerry's Experience of the Community Kitchen

Jerry is a father with a *Missus* and four young children, some of whom are school age. He wanted to find a local activity that would have involved all the family. Cooking and the Community Kitchen offered a perfect activity for all family members to share. He has now been coming to the Centre for several years and has enjoyed other cooking courses including Festive cooking on a budget:

It was good it meant you could turn out really good things with very little money like; if you are the dole.



Jerry and his friends report that the courses are excellent for their children. It broadens their range of food choices and brings them together as a family. Jerry learnt about the cooking courses available when he attended a Men's Health Group. Unemployed for over two years and suffering from low level mental health he was recommended the course by another attendee. He decided to join because he wanted to learn more about cooking and discover a new healthy activity to share as a family.

Life has been difficult for me recently with my depression and that... so when I found this I thought it would be something really good for us to do because it is about healthy food and that and it is something we can all do when we get home as well. The kids really love it and that is why we have come here over and over again. You also meet other people like you and chat about things and that means you have some new friends to share things with which is important for them as well. They have learnt how to make things and it is something we can also do together when we go home as well, so that cooking isn't all microwaves and packets. No... we buy things to eat as well that are not in packets and they have learnt a bit about real food.



Westbank New Steps

Exminster, Rural Teignbridge and Urban Exeter. Devon • Westbank Healthy Living Centre

Westbank New Steps aims to holistically support and help improve the well-being of people with low level mental ill health, mature (45+) people with sedentary lifestyles and families from deprived communities. It works in partnership with local GP practices, engaging volunteers who provide practical and emotional support to patients and carers

The project has developed a broad range of activities including cookery and healthy eating sessions; personalised fitness programmes; walking groups; seated exercise; carers support and training; craft groups; social groups; targeted sessions aimed at improving mental health. Over 33 months the project has worked with 1414 beneficiaries.

“I felt like I had all the support I needed” Anonymous, Aged 37

For years I had been trying for a baby, and over several years have suffered a number of miscarriages and medical problems leading me to believe that I may never be lucky. However when I fell pregnant this time around things felt better. Day by day I was worried about the same problems occurring but as weeks passed and scans were booked I began to realise my time may have come to bring a new life into the world. I wasn't working at the time, and due to my age, I wanted to meet other expectant mothers to ensure I had enough support through the pregnancy and after the birth. I found some groups were unwelcoming and others excluded me because I wasn't far enough long with my pregnancy, or my 'bump wasn't big enough'.

It was then that I found the bumps, mums and pushchair walk. I was welcome straight away, and met lots of people who had been through all sorts of different pregnancies, and was able to chat about all of my questions and worries as they occurred with people who weren't expert but could share their own experiences with me. From buggy choices through to birthing positions and breast feeding!

As my pregnancy progressed my friendships grew stronger and although I had signed up for NCT antenatal classes, I decided not to sign up for post natal classes





because I felt like I had all the support I needed. My birth was a month early, and it was at this point that things got slightly worrying. My child had a few weight struggles, and I was feeling very helpless to make things better. The doctors were all conflicting with their advice, so from a suggestion from one of the mothers I contacted the health visitor. Her support has been invaluable to helping to get my child strong and well again. I also had a visit one day from the walk leader after the walk,

and her visit was timed just after my baby had been sick her whole feed, at a time when I was terrified she wasn't getting any nutrition at all. She came through the door and I was so pleased to see a friendly face. I was in tears, but having someone who cared enough to pop in just on the off chance helped me feel so much better that day.

I continued to attend the walks with my baby, and have enjoyed the socialising at a time that can be difficult to get organised to leave the house. Knowing we are just going for a walk, is so much easier than having to get sorted for a baby toddler group or alternative. I never worry about being left in a corner on my own without anyone talking with me, because when you walk you talk!

My most profound success from the walks however has been my recent introduction to a lady who is using the same childcare and rearing techniques that I have adopted. All of my peers on the NCT classes all used conventional methods, which made me feel like my methods were weird and wrong. However meeting another lady whose child was older than my own, who lived just around the corner from me, I instantly felt like I wasn't the only one rearing their child this way, and that I wasn't actually weird or alternative.

I have met some great friends and wouldn't be without my weekly walk.





5 x 30 Devonwide

North and West Devon • Westbank Health & Social Care

The project aims to initiate and encourage community-led sports activities and to increase active participation. The focus is on helping people attain 30 minutes of moderate exercise, 5 times a week. The range of supported activities include dance, aerobics and seated exercise group; sports, walking, cycling and running groups; mind and body groups such as tai chi classes; conservation and gardening groups. Project seeks to work with people on low incomes, families, children and young people, people overweight or living sedentary lifestyles and people with low level mental health symptoms.

Community Activators and the 5X30 Message

5X30 Devonwide established a network of four Community Activators across North and West Devon to deliver the project. The role of the Community Activator has been to help people and groups to identify new physical activity opportunities by using their extensive local knowledge of services.

This knowledge enables them to quickly develop networks between community leaders and to spot areas where there are gaps in provision. As Danny Hughes, one of the Community Activators, explains:

A Community Activator should be someone who has the ability to speak to any audience and to find out what excites them. You can think of an Activator is a 'fixer' who works with the needs of the group and finds allies in the local area to make things happen. We've been incredibly flexible in our approach. Sometimes we work as the lead agency and sometimes as a partner alongside existing health, leisure, sports or community safety initiatives. It's also a creative role. So, for example, if I find that I can help set up a youth cycle or sports coaching group in one place, I'll suggest that other community groups might like to try something similar in their area. We are very part-time and can offer only tiny amounts of start up grants so we're always looking for the best way to help others make a difference.

Tracy Seymour, a practitioner who works for a partner agency called Puzzle Tree, says:





We were contacted by the Community Activator for the Okehampton area, who offered support to us in developing physical activities for our day centre service for adults with Learning Disabilities. Often a problem for us is access. For instance, in the past we would have to travel over 70 miles to go to the nearest swimming pool that would take the group. The Activator met with the local leisure centre and pool and negotiated access to swimming, gym and studio sessions on that site. Because it

was so close to the day centre, people could walk to site - and do some exercise on the way - rather than travelling seated in a minibus.



Since then we have been involved in seated exercise courses and networking events that have helped us develop more and diverse activity for clients with a wide range of abilities. The Community Activator has got us involved in the Okehampton Sports & Fitness Festival which gave us a chance to try a wide range of activities. The Activator passes on any information on initiatives, funding and any opportunities we may be able to benefit from. It has also been a two way relationship: Puzzle Tree organised training for trampoline coaches working with

individuals with special needs and this in turn allowed a trampoline club to develop in Okehampton for young people with learning difficulties. Recently we have developed links with the Tavistock area to start up and put training in place for a Boccia League in Devon.

Overall the group of thirty adults with learning difficulties have had a chance to try a wide range of activities. These include use of the gym, seated exercise, football, cycling, tai chi, dance, gardening-bee keeping, fitness and movement classes, fishing, conservation, fencing, rebound therapy and trampolining, walking, table tennis, racquet skills and fun play. We have seen great weight loss and improved fitness levels which have allowed people to extend their experiences. For instance Michael, who suffers from epilepsy, started of using the gym and this has developed into a regular weekly activity. He now also does fencing and, at the age of 60, has started road running.

We have fully adopted the 5X30 message for our clients. It has meant we now offer a wide range of activities into each week and have a very successful ongoing relationship with the 5X30 project.

Living Well project.

Minehead, West Somerset • West Somerset Sports and Leisure Centre
Somerset Leisure Limited are a charitable trust working with volunteers in community supported agriculture

The project evolved at a time when Somerset County Council was looking to support community health activities external to sports centres. The project is targeted at deprived communities in the largely rural West Somerset district local authority area. The aims of the project evolved from consultation with local stakeholders and professionals who aspired to:

- Increase physical activity through walking groups and access to exercise classes
 - Promote healthier eating through provision of a community training allotment opportunities
 - Improve mental health through access to physical activities
-

All Living Well activities are supported by volunteers who are trained and supported by the project team. Key to the project's ethos is an active outreach programme to reach and listen to the well-being needs of people living in remote communities.

In fact the project team has worked extraordinarily hard to ensure that they have reached deep into the West Somerset hinterland to build a health activity infrastructure for a largely rural district. Several communities have received activities that they never had before and they have made new and unique connections to organisations they have never worked with before like Natural England. This has included gaining advice and support for volunteer projects to deliver activities like the Porlock Community Orchard.

Porlock Community Orchard: Working with volunteers in community supported agriculture

The Living Well project specifically covers the local authority district of West Somerset. An area of 280 square miles inhabited by a disperse population of 35,600 people. Two-thirds of West Somerset is recognised as the Exmoor National Park and a quarter of the population of the district live in the coastal town of Minehead. The Living Well team have developed and supported a range of activities for a variety of direct beneficiaries. In the project area almost 30% of the



population are older than 65 years of age (England and Wales 16%). Life expectancy is high: 78.9 years for men, 82.1 years for women; but 21% of households are pensioners living alone in the district compared to just 14% for Somerset as a whole. 22.3% of local people have a limiting long-term illness. Having projects like the Porlock Community Orchard the team can help support beneficiaries into healthy activities who may have an interest in helping to sustain rural life and have time on their hands to make new friends and overcome isolation.



The Porlock Community Orchard, on the edge of Exmoor seeks to address the three aims identified and developed by the Living Well stakeholders. It aims to integrate local people into healthy activities that are environmentally sustainable and local in focus. Thus the Porlock Community Orchard has local volunteers at its core who run and manage their local orchard as a community asset for local people and wildlife. The orchard is maintained by a dozen regular local volunteers. But this number is expanding. The orchard is based on a cluster of 22 original trees and it helps to preserve and sustain old English varieties of apple like: Annie Elizabeth, Warner's King, Lane's Prince Albert, Bismark, Bramley, Reverend Wilkes, Tom Putt, Robin's Endeavour, Blenheim Orange and Somerset Robin. In managing the orchard and developing the orchard walk, volunteers have been enjoying developing a healthy lifestyle through developing the landscape. It gives the community a natural attraction and it has attracted visitors to the area. The orchard is now a focus for 'cultural' activities like celebrating apples: including an annual apple pressing day and winter wassailing. They also offer apple services to the Porlock Vale community and the surrounding area of Exmoor. The project encourages people to learn about Exmoor - its landscape, its wildlife, its farming traditions, its history, crafts and pastimes. The Community Orchard also delivers training and provides opportunities for people to learn new skills in the management of apple trees, orchards and the environment. The community is involved in planning the orchard and members enjoy reviving old customs and rituals like cider making. In the near future they plan to develop an 'edible hedge' along the site's boundary and provide local school children with an opportunity to experience seasonal tree dressing.

Comment from the local Visitor Centre:

"I am proud of the way in which the project has brought together the community and visitors. It has been a steep learning curve. We have been able to call on the help of organisations such as Orchard's Live!, Exmoor National Park and the 'Living Well Programme' to create a very special asset. Making our own apple juice was fantastic!"

Be Happy, Be Healthy Gloucestershire

Gloucestershire • Gloucestershire City Council

This project is led by Gloucester City Council who support six district, city and borough councils to deliver Health and Physical Activity programmes across Gloucestershire. The project focuses on areas of high deprivation and hard to reach groups in each of the six districts (Gloucester City, Tewkesbury, Cheltenham, Stroud, Forest of Dean and Cotswolds) to deliver additional services beyond their present capacity.

The overall aim of the project is to regenerate people's lives and enable them to make healthier choices, as well as helping to address health inequalities, reduce social exclusion, increase health and well-being, and assist in the reduction of both pollutants and congestion.

It builds on the existing Healthy Lifestyles exercise referral programme to encourage involvement in activities such as community based exercise sessions, i.e. dance, health workshops for healthy eating, stress, depression, smoking cessation and drug/alcohol related illnesses and Health MOT's, walking, cycling, green gyms and community gardens.

Supporting GP services through community-based dance

Dance activities can form one part of a range of community-based services on offer to people who need to improve their levels of physical activity. South West Well-being (SWWB)-funded work has set out to offer fun and informal services that directly complement provision offered in the statutory sector. As with a number of SWWB initiatives, this project has received funding from both SWWB and a local practice-based commissioning group of GPs.

A local authority appointed lead person acts as a Physical Activity Referral Coordinator (PARC). This has included several schemes where professionals could refer individuals to one of several activities, such as health walks or dance sessions. Participants are referred by their GPs, Practice Nurse or Physiotherapist within the GP Practice at their usual GP appointment or check and given a consultation by the PARC at the start. It takes the form of a 12-week course of salsa dancing classes and at the end of this period they undergo a review. This is carried out by the PARC and uses a similar format to that of the initial consultation. The PARC re-measures physical aspects, such as weight, and reviews the





participant's goals and ambitions that had been set at the start of the sessions.

There have been two courses run with 39 direct beneficiaries, the majority of whom reported that they benefited in some capacity, whether that was socially, medically and/or physically. There were some who did not attend the end appointment and therefore any benefits they experienced were not recorded. However, no one reported any adverse effects from the sessions.

Participants were referred for a variety of physical, psychological and emotional reasons, including hypertension, obesity, depression, anxiety, arthritis, asthma, diabetes, back pain, injury rehabilitation and cardiac rehabilitation. Written feedback from clients has been very positive in terms of improvement in mood and weight loss. Comments include:

"Feeling much more mobile and it was great to meet people"

"Mental well-being has improved and increased my confidence"

"Weight loss, asthma improved; less reliant on inhaler"

More general feedback from the beneficiaries included the enjoyment of meeting people and doing something social that was also exercise:

'I feel more positive in myself and will be continuing with dancing as a social, enjoyable form of exercise' (Anonymous participant)

Participants are mainly female but the coordinator is seeking to encourage more men to be referred. Attendance at sessions has been very good, and many have gone on to intermediate dance sessions so that they can maintain their physical activity in the form of dancing. The coordinator noticed a marked increase in those joining the second course, some of whom had heard about it through word-of-mouth and approached their GP or Practice Nurse to ensure that the activity was suitable for them.



The potential savings and additional value of such a social form of exercise has, for one beneficiary, included substantial weight loss (just over one stone over the 12 weeks) which resulted in the beneficiary being able to stay off her medication. Another found that with the strengthening of her muscles her balance has improved. This may lead to less falls and accidents and therefore less visits to her GP and/or hospital.

Referring agencies appreciate receiving reports on the outcomes for participants. This information gives partner agencies confidence to continue recommending the well-being service.



The Healthy Living Project, Barnstaple

North Devon and Torridge • Community Action North Devon and Community Activity Support Programme

The Healthy Living Project is a collaborative project hosted by two voluntary sector organizations: Children's Activities and Support Programme and Community Action North Devon. It aimed to deliver gardening and cookery activities to young people in community settings following referrals from both lead organisations and other professionals working with vulnerable young people in need. The project has concentrated on providing cookery sessions using community facilities in targeted areas in the two districts of North Devon and Torridge. Skills taught could include finance and meal planning and practical cooking skills with the objectives to improve young people's confidence and deliver positive healthy eating messages. Their structured sessions are planned to be targeted at some of the most challenging beneficiaries in the portfolio:

- Young people at risk of entry into the criminal justice system
 - Families from deprived communities
 - Children and young people with low levels of confidence and self esteem and high levels of low mental ill health
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The project hosts have an extensive track record of linking with other local partner agencies working with young people and include Local Children' Centres, the Youth Offending Team, Child and Adolescent Mental Health Service, social care, local voluntary organisations, Youth Service and Youth Inclusion and Support Panel.

Families cooking in the kitchen: Practical steps to help young people at risk take up a healthy diet.

This project has worked with young people who are low achievers and lacking in self confidence. Quite a few are offenders or at risk of offending. Nevertheless the project has aimed to not only encourage healthier eating and develop basic life skills but it has also aimed to provide a sense of achievement. For many this will come at a challenging time in their lives. It is clear from the baseline questionnaire that these young people have poorer diets than all the other direct beneficiaries in the SWWB portfolio. The project has learnt that some young people do not even have a cooker at home or their parents might not use the cooker because it is too costly to use. In our baseline survey these young people report significantly ($p < 0.00$) lower rates of fruit and vegetable consumption and they were less likely to report that they enjoy eating healthy food. The project is aware that there is also sometimes peer pressure to resist healthy food and many families think that healthy food is

expensive food. So the project found they had many issues to address but they understood that they had to respond flexibly to what young people said about food and cooking. Some of the young people on the project are excluded from school or simply not going. If they are in school they may not have had an opportunity to learn how to cook because some of the schools visited did not have cooking facilities. With few cooking opportunities available in their school or at home; cooking and eating healthy food is a life skill that was likely to be absent in their transition to adulthood. To be successful it has proved vital for the project to be flexible and they have subsequently developed an informal approach to getting young people enthused about cooking and eating healthy food. This has meant starting from where the young people are at:

- What do they like to eat?
- What ingredients can be bought from their local shop?
- What cooking facilities do they have access too?

Assessing these aspects of a young person's life is essential to develop bespoke sessions that can address their needs and respect their circumstances. It is often meant using simple cooking tools as the majority would not have access to expensive electrical white goods like mixers and food processors. But by going back to basics this project believes they are more effectively able to embed key skills in their life and help them develop healthier behaviours for the future. Other skills learnt can include getting families to work and eat together, team building skills, budgeting and decision making or simply being with new people. After their initial session young people are invited to suggest food and meals that they would like to cook themselves.

Project co-ordinator:

A lot of our kids are referred to us because they are not getting access to good quality food or because they don't know and haven't learnt to cook. They haven't learnt it in school. Or they have opted out of school and some of our kids haven't even got a cooker in their house. So from a family point of view they are not eating properly. They don't know how to eat properly or even how to access any food.

It is often hard to quantify the impact of the project on young people but professionals who work with youth workers know that young people can often give feedback on their experiences and express their gratitude in various ways. The project co-ordinator has witnessed several examples of young people outlining the benefits they have gained from the sessions and the gratitude they hold for the commitment of the staff. These cannot be fully captured here but the evaluation sheets suggest the young participants enjoy their time on the project and they clearly acknowledge the benefits they have gained:

When other people are away I can make my own food

Make my life better

I loved it

When I am older I will know how to cook for my child

If I am chef in older life, I will remember this

It will help with my family.

