Janet was kind enough to provide her reflections on her time at CHEX for our last edition of CHEX-Point, which chartered her journey and experience of community led health through over a decade and a half of changing policy and practice landscapes, all of which presented both challenges and opportunities for CHEX, and more importantly, for local community health organisations that CHEX has a role to support. Re-reading it, two things resonate with me as manager of CHEX in the past year – an absolute admiration of the excellent work being done by local organisations with and within their communities, and the seemingly ever changing policy and practice context that affects the work that we do.

Massive public sector reform in the integration of health and social care agenda, the upcoming implementation of community empowerment legislation and a future Public Health Strategy for Scotland present both opportunities and challenges to further strengthen CLH as an approach, and to support those in the CHEX Network to continue their positive impact on local communities. In this sense, and as a community development practitioner and manager of over 20 years (did I say how time flies?), it strikes me that the context may change but the ‘game’ remains the same! Our role at CHEX is to continue chipping away, promoting and championing the approach to partners old and new, and seizing on opportunities as they arise to help the sector achieve the value and recognition it most certainly deserves. That was Janet’s advice to me when she retired, and it’s a role the CHEX team and I are determined to succeed in, in the hope of lasting another 16 years!
This case study shows how GAIN, a community organisation working with young people in the Isle of Lewis, evaluates its work to demonstrate impact and improve future provision.

Background

Guth Airson Iarrtasan Nis (GAIN) is a community-led health organisation based in Ness on the Northern tip of the Isle of Lewis. The organisation was formed in 1998 by a group of mothers who recognised that no local play facilities were available, with a 60 mile round trip to the nearest park. They set up, and now manage, an outdoor adventure park, Eoropie Dunes Park, which opened in 2002. GAIN’s overall aim is to enhance people’s health and well-being through providing opportunities for physical, social and psychological development. Regular activities provided by GAIN include a monthly Green Gym for people of all ages and free Community Fun Days designed for family fun. For a number of years GAIN ran a youth development programme where all activities were designed, planned and run by the young people themselves.

GAIN regularly works in partnership with other voluntary and community organisations and has close links to the school and nursery and they hold an annual Duck Race in partnership with the local Music and Arts Centre. Joint projects have been set up with the social club and the football club, including helping at the gala day, where GAIN runs stalls.

At the centre of the group’s activities is a commitment to involve the wider community in everything it does, especially mums, children and young people. GAIN’s Committee consists mainly of committed young mothers who meet fortnightly, to organise and facilitate activities in addition to ensuring the park remains safe and attractive. The committee has recently been strengthened by the addition of two local teenage girls, who wanted to join when they came to the AGM to deliver a presentation on the youth work element of GAIN. A continued presence on the group has been local GP, Gail Cunningham, who now works as Project Manager. She has been involved since the inception of GAIN and she is able to support newer members with her experience and ensure continuity.

Community consultation is a key priority for GAIN. The entire play park has been developed and managed through ongoing consultation. The original mums had no previous experience of community projects and this encouraged the group to start with the basics; the obvious thing being to ask the local children what they wanted. Every facility and piece of equipment in the park was requested by the children. Some ideas have been generated through informal conversation and others have been from responses to formal surveys. In many ways the group’s lack of experience was an advantage. Later, when the group came across community development approaches, they thought: “that’s what we do”.

GAINing

Ground
Over the years, GAIN has refined the way it gathers and uses evidence. GAIN has conducted a number of community surveys as well as collecting feedback following every activity held by GAIN at the park. The results influence GAIN’s future decisions.

In 2012, GAIN produced a baseline consultation to evidence need for a funding application to the Big Lottery for a refurbishment of the park. Questionnaires were completed by local school children and community members. A few questionnaires were completed by other local groups and some were sent out to Facebook contacts. People were also asked to fill in surveys while attending activities at the park. From these baseline results the consultation has been followed up, providing two years of comparative data. The survey has been conducted every October, in 2012, 2013 and 2014.

The questionnaire asked nine standard ‘closed’ questions that are repeated yearly to measure change over time. Some questions focus on people’s use of the park and experience of GAIN activities. These include: “how often do you use the park in summer?” and “have you attended or helped at any GAIN organised community activities or Green Gym days?” Other questions focus on health and wellbeing indicators, such as feeling part of the community and social contact with different age groups. The questionnaire also asks open-ended questions, giving respondents plenty of opportunity to submit comments and suggestions.

Through these annual surveys GAIN is able to show how participation in GAIN’s activities relates to positive health outcomes.

**Evaluation Support Scotland**

GAIN has also benefitted from Evaluation Support Scotland (ESS) support. This lasted four or five months and consisted of a 45 minute telephone call with ESS once a month. The benefits of such training can be quite simple, as Gail explains:

“It was helpful to go through some of the basics – even being clear about what GAIN’s outcomes are was really useful. In a sense, the support allowed us to clarify our thinking and fine tune what we were already doing, and it was reassuring to know we were going down the right road in terms of evaluation.”

**Results**

In less than three years the survey has already picked up on some positive changes. The results demonstrate that the improvements to the park and the events arranged by GAIN help people
to use the park more and to have more social contact with different age groups. In addition, there have been increases in the proportion of respondents who feel part of the community and who are participating in activities and events, including those organised by GAIN. The consultation has also highlighted the health benefits gained through volunteering. The results have been used to report to funders and apply for future funding.

The survey is also used to consult on the priorities of young people and their families, particularly around improvements and new installations to the play park. In 2013, for instance, questions were included that asked how the local school might best make use of the park.

**Lessons and learning**

Continual engagement with the wider community is crucial for a number of reasons. Firstly, funders are always asking for evidence and regular consultation shows both demand for GAIN’s work and evaluation demonstrates its impact.

Secondly, GAIN exists to provide a service, and understanding the community’s priorities is vital in order to do this effectively. Occasionally, this commitment to working to the priorities of the community can be tested, such as when the survey generates results that are unexpected or contrary to the group’s plans e.g. provision of toilets (a recurring request).

Thirdly, the involvement of the community means that people feel they have a stake in the project.

“If people say what they want in terms of activities and new equipment,” says Gail, “and then we do it, the community feel that they are owners and will continue to use and enjoy the park and many offer to volunteer or get involved.

GAIN especially appreciates the involvement of local young people in the planning, design and delivery of our work. Over the years teenagers in particular have had a significant role to play and it is encouraging to now have two teenagers on our management committee.”

Read more about GAIN at [www.eoropiedunespark.co.uk](http://www.eoropiedunespark.co.uk)
Late last year we saw LGBT Health and Wellbeing celebrating its 13th AGM which it combined with a useful information evening in Edinburgh.

In the course of the evening they highlighted their LGBT Age work with people over 50 in Edinburgh and Glasgow, as well as their new social and support programme in Fife. It was also great to hear from a couple of their volunteers about the positive impact on their health and wellbeing from being involved with LGBT Health.

Their annual report shows that they have delivered a wide range of programmes to promote the health, wellbeing and equality of LGBT people in Edinburgh, Glasgow and beyond. Over the year they have worked with 3,350 individuals and their service evaluation shows the positive impact of their services on people’s lives across a range of health and wellbeing outcomes:

- 3 in 5 reported feeling more connected to their community
- 1 in 2 feel better about themselves as a result of using their services
- 2 in 5 reported their mental or emotional health is better.

Over 2015-16 the organisation engaged with a large number of LGBT community members across its range of programmes:

- 3,350 individuals accessed their group activities and programmes
- 460 people accessed one-to-one support
- 1,500 enquiries from LGBT people responded
- 120 people volunteered their time.

A copy of LGBT Health’s 2015/16 Annual Report, provides a more comprehensive overview of the impressive breadth of their activities. In it, their Chief Executive Maruska Greenwood speaks about some of the work that’s been taking place:

“Through our extensive community consultation, and by providing a platform for the diverse voices of our community to be heard, we continue to be strong advocates for the needs of LGBT people. In our work with a myriad of statutory and third sector partners we are always seeking opportunities to raise awareness and understanding, and ensure that the health inequalities experienced by LGBT people become better understood.”

We are delighted to share this great progress and encourage you to spread the word about the myriad of services they provide and to ensure they continue to reach those who are in need of those services.

Find out more at www.lgbthealth.org.uk
Three fantastic things: GoWell Panel members & public speaking training

Cat Tabner from Glasgow Centre for Population Health tells us about her work with the GoWell Panel – and how some training delivered with CHEX has empowered panel members to tell their stories in engaging ways.
The GoWell Panel has been a new innovation for 2015. It is made up of residents in GoWell’s study areas. The panel provides an exchange of knowledge in which panel members and the GoWell team can learn from each other about how the research is undertaken and interpreted. Panel members are supported individually, and as a group, to build on their skills and knowledge in using research and working alongside researchers and community groups. The format, and strength, of the panel has been to enable panel members to learn direct from ‘the experts’. This has enabled panel members to increase their awareness and access to a wide range of expertise that contributes to regeneration efforts. As Community Engagement Manager, I facilitate the panel sessions so that it is a positive and supportive learning environment in which all contributors are equally valued.

Some panel members were asked by a self-supporting group attached to their housing association to give a presentation on their experiences on the GoWell Panel. Local community members wanted to know what they did with the panel, what they learned and what they gained. Some nervous panel members had a chat about presenting and decided that if they were going to do it, they first needed some training.

Researching the current provision of presentation training identified a gap in appropriate training. Presentation training courses seemed to be geared towards media, academic or professional work environments. GoWell Panel members instead were looking for presentation training that could be carried out in their community setting by a provider with the expertise to build their skills and confidence in delivering a presentation as community members, to community members. This meant finding a training provider who understood community-led health initiatives and appreciated the role and expertise of community members while also empowering them to build on their skills and confidence. In order to be able to empower panel members, we wanted somebody who understood and valued the journeys that panel members had already been on: some panel members had rarely gone outside their own neighbourhood, rarely had the confidence to speak to new people or thought that learning was not for them. Panel members had developed confidence and courage to meet as a group, visit new neighbourhoods, speak with new people, undertake qualifications and try new things, such as writing a blog or using a computer.

Now they required a training provider who could support them to further their journeys in terms of public speaking to community groups. GoWell approached CHEX to find out if they knew of such training providers.

CHEX offered to deliver presentation training to the panel members. Understanding the value of peer support, CHEX opened the training opportunity to the whole Panel. CHEX met with the Panel to discuss the training opportunity, which resonated with its way of working – panel members had the option to undertake the training, if they wished. This approach supported the two panel members who were initially asked to deliver a presentation – suddenly they weren’t alone, but were going to be able to learn alongside fellow panel members. I also took part in the first part of the training to demonstrate that learning and training is useful for everyone.

The presentation training provided by CHEX is cleverly simple, focusing on how to deliver a presentation and what to say. Cleverly, the training gets participants to do this before they have realised it. At the start of the session, we all had to see three fantastic things about ourselves. This was at the heart of the training: focusing on three
messages and delivering these with confidence. This approach to training was exactly what the panel was looking for: learning by doing and making the most of existing skills. It meant that the training was accessible to our range of confidence levels, literacy and technological competencies. It also meant that the training went straight to getting participants to focus on the quality and content of their messages, which is at the heart of every successful presentation. Importantly, the training empowered panel members to recognise and value what they needed to best prepare and deliver a presentation, for instance requesting to deliver a presentation seated if this suits their needs.

When I met with panel members a week after the first day’s training, they had all absorbed the learning and were already writing their own mini presentation. Each of their presentations were different because each panel member felt empowered to create their own messages and to tell them in their own way.

Now that panel members have had the training, they will be using it to deliver presentations to their community groups and share their learning at GoWell learning events. The panel has been invited to a housing conference and panel members are now discussing the possibility of attending and leading their own workshop and/or presentation. Attendees at these events will therefore benefit from this CHEX training because they will see presentations developed as a result. From a community engagement perspective this approach is vitally important: it means that GoWell is actively contributing to awareness raising among, and connections made by, community-based groups about our partners such as CHEX who support community-led health in the long term.

GoWell relationship with communities in its study areas aims to facilitate capacity-building and empowered learning. Its newsletters, annual events and seminars enable GoWell to share its research with, and learn from, individual residents, community-based groups and the wider GoWell network comprising interested individuals and organisations.
CHEX supports and promotes community development approaches to health improvement. We provide support to a network of community-led health initiatives and their public sector partners who are tackling health inequalities in communities across Scotland.
The National Breastfeeding Helpline is a helpline run in collaboration with The Breastfeeding Network (BfN), a CHEX Network members, and Association of Breastfeeding Mothers (ABM) which offers independent, confidential, mother-centred, non-judgemental breastfeeding support and information 365 days a year from 9:30am to 9:30pm.

We also offer a webchat service through the BfN and ABM websites where mothers or family members who may not feel comfortable calling can get in touch and access the same information and support as would be available during a call.
All calls and webchats are answered by volunteer mothers in their own homes and who are breastfeeding, or have breastfed their own children, who have received extensive training in breastfeeding support and active listening and who have a real passion for helping other mothers and families achieve their own breastfeeding goals. Many of these supporters also volunteer their time to offer crucial breastfeeding support and information in maternity wards and breastfeeding support groups local to them. The help and support offered on The National Breastfeeding Helpline can be anything from helping achieve better position and attachment for more comfortable and efficient feeding, identifying problems such as thrush, mastitis or tongue tie, signposting to local support groups within the community or to the relevant health care professional or often simply being ‘a shoulder to cry on’ when it just feels difficult.

We also receive calls from mothers who feel they are ready to stop breastfeeding for whatever personal reasons and we will also provide help and support to enable mothers to do so safely. Depending on area, it can also be possible to arrange for a home visit from a local breastfeeding supporter, meaning that the family has face to face support from a local breastfeeding supporter.

As well as supporting families, we also answer calls from health professionals such as GPs and health visitors who are looking for extra breastfeeding information to enable them to better support their patients. Where appropriate, we will signpost to the BfN Drugs in Breastmilk Information Service which is run by a volunteer BfN registered breastfeeding supporter and qualified pharmacist, offering evidence-based information on the effect on a child (if any) of medications in breastmilk.

Being able to access support and information in this way can be crucial to new mothers and families who may feel isolated within their communities, particularly in the early days when they may not yet feel able to get out to their local breastfeeding support groups and need to hear a friendly voice who understands how they are feeling and can offer the support and information they need. This is particularly true in some of the more remote areas of Scotland where communities can be very spread out and local support groups and even friends and family can be much harder to reach.

We recently started our #ThanksNBH campaign which consisted of a short, optional survey that callers could complete after a call. Since we started the campaign our feedback has been incredibly positive with 100% of respondents being either very satisfied or satisfied and 100% of respondents saying that they would recommend us to a friend.

Some of the feedback that we’ve had has been incredibly heart-warming to read and gives our volunteers a real sense of what they are achieving each time they log on to take a call or chat:

“I was very nervous about calling, but the lady on the phone was so friendly and knowledgeable she made me feel like I was chatting to my best friend.” and “I was very nervous and very stressed out before ringing- the volunteer calmed me down straight away- I felt relief and that I could carry on feeding- yes I was always happy I called... if I hadn’t I don’t think I would have had enough confidence to carry on.”

Our volunteers are assigned supervisors who live locally to them and meet regularly to attend at least six supervision sessions per year which is important to ensure that our volunteers are well supported and have access to the latest information and training but also, and very importantly, allows our volunteers to come together, all with a common interest and passion for helping others succeed in achieving their own breastfeeding goals, and ensures that our volunteers are able to support each other in their own journeys as well as their callers.
CHEX News
Here we feature news from the CHEX Network and its members.

Funding success for Broomhouse Health Strategy Group

CHEX Network member Broomhouse Health Strategy Group have been awarded £116,202 by the Big Lottery Fund to deliver their free health and wellbeing services to people living in SW Edinburgh over the next four years. From their small beginnings of a volunteer run Fruit and Vegetable Shop in Broomhouse Market over 20 years ago, they have developed a wide range of valuable services.

Broomhouse Health Strategy Group was set up by local residents over 20 years ago and aims to improve the physical and mental health and wellbeing of people living in South West Edinburgh.

Individuals and families from Broomhouse, Sighthill and Parkhead will have access to exercise classes that are suited to a wide range of different ages and abilities, including Buggygym for mums with their babies in a pushchair, Chair exercise for those with limited mobility, a Walking Group for all ages and women-only Aerobics for the more active. Adult Cooking sessions will run every term, to help with basic cooking skills, Cooking with Kids sessions will bring together parents and their children to enjoy cooking simple, healthy dishes and Baby’s First Foods help parents understand how to wean their babies.

Lucy Aitchison, Co-ordinator of BHSG said “This is brilliant news, as we know our food and fitness sessions can help make such a difference to people. We are so grateful to the Big Lottery Fund.

If you would like to find out more about any of their sessions, please contact them on 4677678 or find them on www.facebook.com/broomhousehsg

News from the Network: Healthy n Happy Annual Report 2016

CHEX network member Healthy n Happy have published their Annual Report for 2015/2016 is now available for download. It’s filled with loads of great information on the organisation including a double page spread for each of their work streams.

It includes some headline stats about the impact of their work:

- 239 people enhanced their bonds and relationships with family members
- 1265 people chose activities that generate positive health, wellbeing and quality of life, with 310 people developing a proactive outlook, able to manage stress and long term health conditions
- 1047 people increased their knowledge and understanding of health issues and healthy living options
- 132 people engaged in a leadership role in their neighbourhood, working together to identify local priorities and take collective action
- 6876 people know more about opportunities within the community and how they can participate
- 2785 people celebrated together in over 250 events


Views expressed in CHEX-POINT are not necessarily those of CHEX, unless specifically stated.

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