

# 'Creating Better Health & Wellbeing' Event Report

Summary of a one-day event for community organisations & researchers to network & learn about successful collaboration



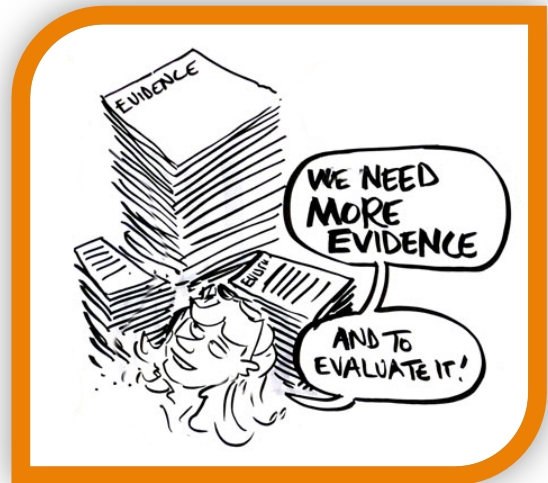
THERE IS TENSION BETWEEN THE  
ACADEMIC VIEW OF EVIDENCE  
AND THE COMMUNITIES VIEW  
REPORTS USEFUL TO PROFESSIONALS MIGHT  
BE **DISLIKED** BY EVERYONE ELSE

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## Summary

This one-day networking and learning event was organised by members of the Adult Life/Working Age Working Group at the Scottish Collaboration for Public Health Research & Policy (SCPHRP). It aimed to help bring academic researchers and community organisations together to discuss methods and experiences of improving health and wellbeing and reducing health inequalities in Scotland.



The main objectives for the day were:

- Showcasing some on-the-ground work
- Improving understanding between community organisations and researchers
- Increasing the likelihood of future connections between academia and community organisations

The event was advertised through various channels and networks and attracted 50 participants from across research, policy and practice (healthcare and the third sector). Sandra Carlisle from the University of Aberdeen was invited to give a keynote presentation on 'Community-Based Action Research'. Five community / Third Sector organisations and one academic group that have had experience of collaborations between researchers and community organisations (either past or present) were identified through their links to NHS Health Scotland, Community Health Exchange / Scottish Community Development Centre and SCPHRP and invited to lead case study discussion groups around experiences of their

organisations and relevant projects. Key themes about collaborating that emerged included: the importance of trust and equal engagement/partnership from the outset; the need to generate the right kinds of evidence; the limits placed on projects by time and funding constraints; and the added value that can be generated compared to within-sector only collaborations.

This was followed in the programme with some tai chi to re-energise the attendees after lunch (there's nothing like embarrassing yourself along with a room full of people to help break the ice!). The re-energised room then participated in another round-table discussion session, this time using the World Café method to produce an iterative account of people's experiences of the research process. Five topics were discussed: Starting; Keeping it Going; Evidence; Reporting; and Impact. These discussions were facilitated and recorded by the five members of the organising committee (Elsbeth, Michelle, Sandra, Sue and Tony). Key themes emerging included: the need for strong and transparent foundations (starting); the importance of key 'champions' within the collaboration (keeping it going); the need for strong theory and plausible mechanisms (evidence); awareness that reporting may be a stepping-stone rather than an end-point in the collaboration (reporting); and the hierarchy of evidence will be an important factor in impact, especially to funders (impact).

To finish the day Garth Reid, NHS Health Scotland, and Ian Shankland, Lanarkshire Community Food and Health Partnership, superbly summed up the day and suggested some next steps for the group. Some of these next steps included: the need for quality knowledge capture mechanisms across sectors; other opportunities for community groups and researchers to link up and maintain relationships through the various stages; and evidence of good-practice from the likes of our case studies.



Overall, the event was deemed a success in meeting the objectives of showcasing work, building knowledge around the collaborative research process and strengthening ties between community organisations and researchers. It will be important to capitalise on the energy, networks and shared learning that happened on the day. SCPHRP and the Adult Life / Working Age working group will aim to do this through continued engagement with all attendees who wish to continue in dialogue and action around improving health in Scotland. Through this report and other disseminated outputs we hope that people will be able to use some of the learning and themes that emerged during the discussions to inform their own work practices and collaborations.

The following report summarises the event in more detail, with the help of graphic records of the day provided by Chris Shipton.

## Background

**Organising Committee (representing the ‘Social Change and Health’ and ‘Ageing Well: Healthier Futures’ sub-groups from the SCPHRP Working Age / Adult Life Working Group)**

- Elspeth Gracey (Community Health Exchange / Scottish Community Development Centre)
- Michelle Estrade (SCPHRP)
- Sandra Carlisle (University of Aberdeen)
- Sue Rawcliffe (Community Food & Health Scotland / NHS Health Scotland)\*
- Tony Robertson (SCPHRP)



**\*Now at the University of Strathclyde**

This one-day networking and learning event was organised by members of the Adult Life/Working Age Working Group at SCPHRP. Within the Working Group, two sub-groups led on the event, with representatives from the ‘Social Change and Health’ (Elspeth Gracey and Sue Rawcliffe) and ‘Ageing Well: Healthier Futures’ (Sandra Carlisle and Michelle Estrade) sub-groups joining an organising committee with the Working Group Fellow, Tony Robertson. Over several months the group designed the programme for the day and helped organise the event with other members of the SCPHRP team. The event aimed to help bring academic researchers and community organisations together to discuss methods and experiences of improving health and wellbeing and reducing health inequalities in Scotland.

The main objectives for the day were:

- Showcasing some on-the-ground work
- Improving understanding between community organisations and researchers
- Increasing the likelihood of future connections between academia and community organisations

## Who was there?



In total there were 51 participants, made up of (broadly speaking) 18 from academic research, 19 from community/Third Sector organisations, 6 from the NHS, 2 from Scottish Government, 2 from local authorities/affiliated organisations and 4 non-academic researchers.

## Keynote Presentation

### **‘Community-based action research – a mechanism for longer term change?’ – Sandra Carlisle, University of Aberdeen**

After some initial networking amongst the participants, Dr Sandra Carlisle from the Rowett Institute of Nutrition and Health, University of Aberdeen, presented a fascinating insight into her knowledge and experiences of community-based action research gained from the six year Sustainable Health Action Research Programme (SHARP) in Wales.

“Community participation in health improvement projects is generally seen as a worthwhile aim. However, some communities now suffer from research and initiative ‘fatigue’, whilst community health and wellbeing projects tend to be underfunded and insecure, or short term, yet still expected to make lasting differences to local lives. SHARP was designed to test action research as a way of learning from community-based partnerships about what works (or not) in improving health and wellbeing in disadvantaged places and groups, through action on the social determinants of health. The focus of the programme lay on compiling evidence in order to influence policy and practice.”

The key issue highlighted during the talk was the importance of researchers engaging with the community as equal partners and not just ‘subjects’ or ‘participants’. This engagement between researchers and communities is key if such health initiatives are to be successful, as many projects will not even get off the ground without such engagement. These projects must also be flexible and adaptive based on their impact and engagement with the community in both the short- and long-term.



CREATING BETTER  
HEALTH & WELL BEING  
30 SEPTEMBER 2014

# COMMUNITY-BASED ACTION RESEARCH a mechanism for longer term change?

RESEARCHER COLLABORATION  
IS BECOMING INCREASINGLY CONSTRAINED

ESTABLISHED JOURNAL  
← COMMUNITIES ARE NOT INTERESTED!  
HAVING THE BUDGET FIRST MAY BEEN LIKE A GOOD IDEA... BUT IT EXCLUDES COMMUNITIES

**THE SHARP PROJECT**  
SUSTAINABLE HEALTH ACTION RESEARCH PROJECT FOR WALES

AND THEN WRITE A BOOK!

IN THE EARLY 2000's ACTION RESEARCH WAS NEW  
WE NEED MORE EVIDENCE AND TO EVALUATE IT!  
- INTERSHIP  
- COMMUNITY  
- ACADEMIC  
- LEADERSHIP & EVIDENCE

## ACTION RESEARCH HAS A HUGE IMPACT!!

COMMUNITY & AGENCY CAPACITY BUILDING  
PLAN  
MEASURABLE ACTIVITIES ARE REQUIRED FOR THE QUALITATIVE AND QUANTITATIVE EVIDENCE  
REFLECT ACTION RESEARCH  
OBSERVE  
YOU MAY NOT NEED TO START WITH HEALTH  
HUMANISE THE PROCESS  
YOU MAY COMBAT RESEARCH FATIGUE BY STARTING WITH THE ACTION  
OR GO IN ON ALL EXISTING IDEAS

THE INITIAL APPROACH TO COMMUNITIES DID NOT ALWAYS WORK...

I THINK I HAVE FOUND A WAY TO CONNECT!  
COMMUNITY SURVEYS MAY SOUND SIMPLE BUT ARE A CHALLENGE!

FROM A YOUTH COUNCIL  
IT'S BETTER COMING FROM A SAY!  
A TOTAL REVERSAL

THE PROJECT HAD PERMISSION TO FAIL... IT WAS ABOUT LEARNING

EXAMPLE: TAKING OVER AN EMPTY HOUSE  
HANDING ACTIVITIES TO COMMUNITIES

HANGING ALUMINUM BASKETS  
DOG SHOWS? AUTUMN POLICE TO EXCHANGE WITH THE COMMUNITY!

ACTUALLY INTERESTING GIRLS...  
BRING A NUMBER 6 GLOVE OFF AN INDIAN GLOVE!

EMPOWERED PEOPLE

NO DON'T IMPRESS LOCAL AUTHORITIES  
EVIDENCE, RESEARCH & OUTCOMES DO HAVE AN IMPACT

THEY FOUND PEOPLE WERE WORRIED ABOUT BUREAUS  
TRICKS  
SELF CONFIDENCE SESSIONS

AND PRIVACY WHEN SWIMMING...  
MULTI-MULTI TRICKS SO THEY COULD EXERCISE

GRAPHIC RECORDING  
www.shirley.co.uk

SHARON  
CHRISTIE  
COMMUNITY ACTION RESEARCH

## Case Study Discussions

We enlisted the help of several organisations that have experience of researcher/non-researcher collaborations to lead discussions of people's experiences and expectations from such collaborative working. The six case studies involved were:

### **CHANGES Community Health Project, East Lothian**

The CHANGES Community Health Project was established in 1996 to promote positive wellbeing and provide opportunities for people in East Lothian to find ways towards healthier and less stressful living. CHANGES aims to do this through the provision of services including: free groups & courses; counselling; Cognitive Behavioural Therapy; wellbeing walks; volunteer support & opportunities; and an information library. The majority of people who come to CHANGES have depression, anxiety or stress, which is often related to social isolation and poverty. Heather Cameron from CHANGES and Michelle Estrade, a Researcher from SCPHRP, described their experiences of collaborating on the development, provision and evaluation of the Eat Well – Keep Active project (nutrition and physical activity short-course).



### **Healthy Valleys, South Lanarkshire**

Healthy Valleys is a community led health initiative in South Lanarkshire, established in 2003 by community members and voluntary and public sector agencies to reduce health inequalities, promote positive lifestyles and improve health and wellbeing. They work with communities to address their health needs in a holistic fashion and in the planning, development, delivery and evaluation of health services.



Lesley McCranor from Healthy Valleys described their 'Grassroots Project' - a free support programme for pregnant women and families with children under 5 years old who are facing particular challenges - which was developed in collaboration with the University of Strathclyde and the University of West Scotland.

**Lanarkshire Community Food and Health Partnership, North Lanarkshire**

Lanarkshire Community Food and Health Partnership (LCFHP) is a charity which has been working throughout North Lanarkshire for the past 22 years supporting local communities to improve their health and reduce health inequalities through better access to quality food and through healthy eating. This work includes selling high quality, fresh produce at low cost to individuals, families and community groups; promoting access to a healthy diet through the establishment of community food interventions; and ensuring the



development and on-going support of healthy eating through the provision of training and education. Ian Shankland from LCFHP and Ada Garcia, a Lecturer in Public Health Nutrition from the University of Glasgow, described their experiences of collaborating on the development, provision and evaluation of some of these projects. In particular, they discussed the High Five for Fruit project which operates in all of North Lanarkshire's 130 partnership nurseries. Over the last seven years, the collaboration between the University of Glasgow and LCFHP has measured the increases in consumption, and the acceptance of different varieties, of fruit and vegetables of the children, as well as their families' overall attitudes to healthier eating and better nutrition.

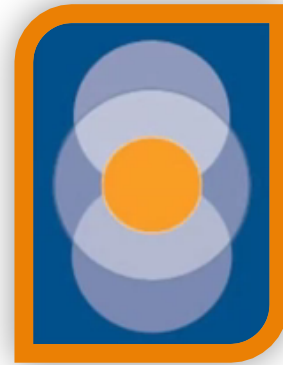
**Nari Kallyan Shangho, Edinburgh**

Nari Kallyan Shangho (NKS) is a health and welfare organisation working for South Asian women and their families living in Edinburgh. Their vision is to improve the quality of life for South Asians and provide a common platform for South Asian women to act collectively to raise health and welfare issues of relevance to them. Naina Minhas from NKS discussed their experience of researching the views of over a hundred South Asian women to gain an understanding of their particular experiences of inequality ('Changing Cultures: Health and Inequality in Edinburgh').



**Scottish Collaboration for Public Health Research & Policy, Edinburgh**

The Scottish Collaboration for Public Health Research & Policy (SCPHRP) is an academic group based at the University of Edinburgh that focuses on public health intervention research for equitable health improvement through catalysing strong researcher/research-user collaborations that ensure timely, robust, policy-relevant research that is created with – and used by – key decision-makers. John McAteer from SCPHRP described the ‘Evaluating Alcohol Brief Interventions (ABIs) in Youth and Social Work Settings’ project that is being led by SCPHRP, NHS Health Scotland and the Scottish Government in collaboration with front-line workers involved in the planning, management and/or delivery of ABIs that aim to help reduce the alcohol intake of young people in Scotland.

**Sustrans Scotland, nationwide**

Sustrans Scotland is a charity that promotes everyday physical activity and active, sustainable travel, especially walking and cycling. Sustrans Scotland has collaborated with researchers from the University of Stirling to explore interventions that promote local physical activity in community, workplace and school settings. The ‘Community, School and Workplace Initiatives to encourage individuals to use the Outdoor Environment for Physical Activity’ report published by NHS Health Scotland has been disseminated to transport professionals at national conferences and is also being used by Sustrans to guide their work programme and interventions. Cecilia Oram from Sustrans Scotland discussed Sustrans’ experiences of working with academics at Stirling University’s Institute of Social Marketing on the project to collate grey literature and examples of interventions in Scotland in three settings: community, workplace and school.

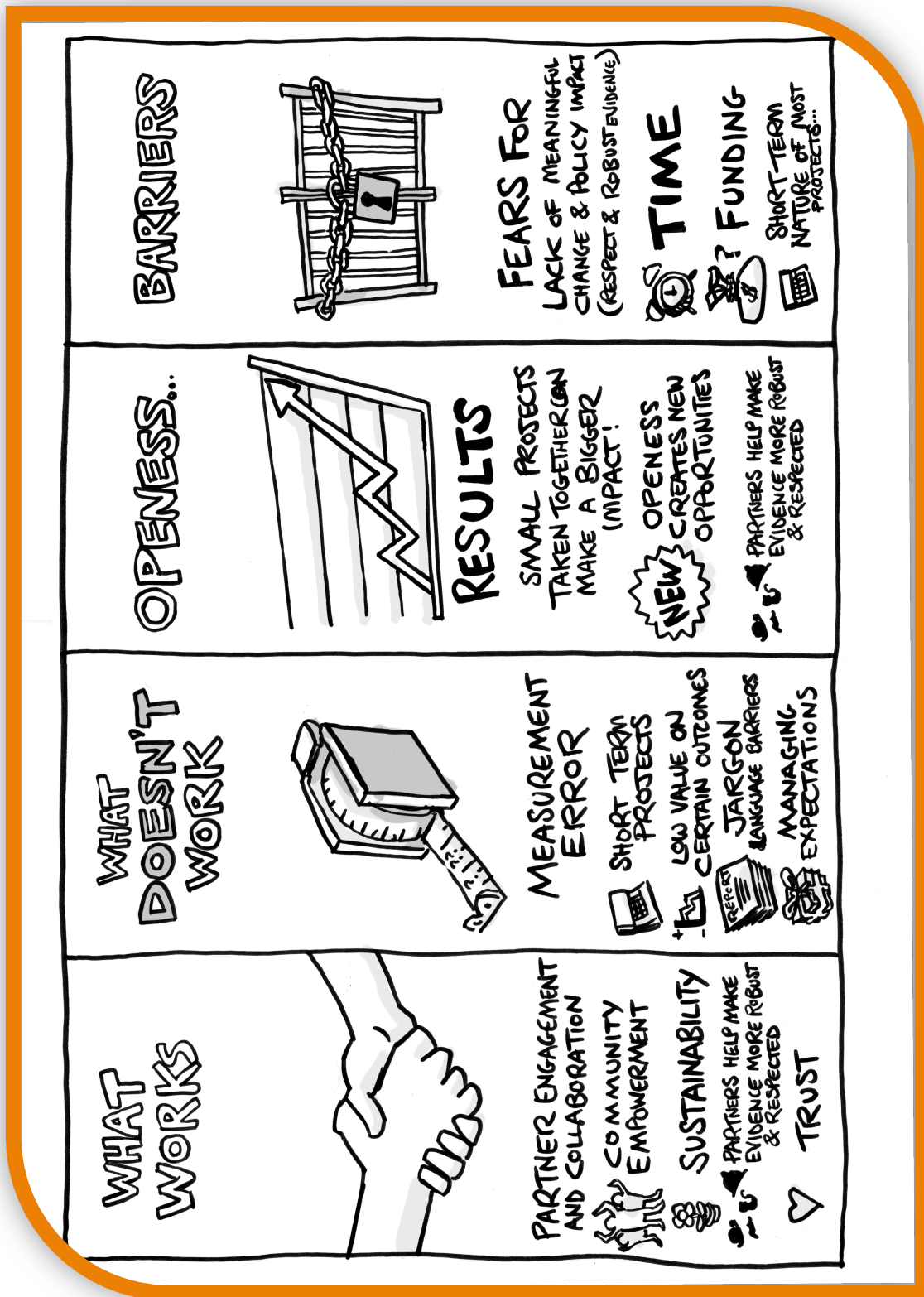




During the discussions we asked participants to consider a four key topics when thinking and discussing both these case studies and other similar collaborations:

- What works in collaborations?
- What doesn't work in collaborations?
- Openness to / opportunities for collaborations
- Barriers to collaborations

Each group then added post-it-notes to a large board to reflect some of the main points that came out of their discussions. Since the event we have tried to summarise the key themes that ran through several, if not all, of the case studies and discussions. There is some overlap between categories (e.g. doing the opposite of what works will obviously not work), but there are some clear lessons that people have learnt from their own experiences. Many of the factors can be incorporated into ongoing and future collaborations, while some (e.g. limits on time and funding) are barriers that researchers and community organisations alone may not be able to remove without social, cultural and financial changes across multiple sectors.



## Tai Chi

As a way to energise the room after the usual post-lunch dip, we chose to perform a short group tai chi session. This is something the SCPHRP group practice in their office on a regular basis. We won't name names, but safe to say the majority of the participants took part and probably feel like they know each other just a little bit more intimately than before! To protect everyone's modesty and self-image, we will not be including any pictures of this.



## World Café on 'The Research Process'

The World Café methodology is a simple, effective, and flexible format for hosting large group dialogue. For this event, we created five groups based around some core components of the research process:

1. Starting (Tony Robertson)
2. Keeping it going (Sue Rawcliffe)
3. Generating evidence (Sandra Carlisle)
4. Reporting (Michelle Estrade)
5. Impact (Elspeth Gracey)

Each table was hosted by one of the organising committee members who helped facilitate the discussions and record the views of the table on a large piece of poster paper. The process began with the first of three twenty-minute rounds of conversation for the small group seated around each table. At the end of the twenty minutes, the table host moved to a new group and briefly summarised what happened in the previous round before the group started a similar discussion. In total, the groups were able to discuss three of the five topics. After the session, each table host reported back to the room some of the key themes that emerged from the discussions.



## Key Themes

### 1. Starting

- Acknowledgement of barriers – different voices, mixed messages, gulfs between research and policy, time, money and different expectations
- Collaborations need strong and transparent foundations – equal engagement, a common language and agreeing roles at the start
- Need to ask the right questions
- Needs to be sustainable
- Not all community-research collaborations will work – need the right fit of people and projects

### 2. Keeping it going

- Reward for big early investment and good plans from the start
- Need to be open to new ideas and flexible to revising plans as barriers appear
- Need a common language
- Continued engagement is needed
- Process can be helped by key ‘champions’



### 3. Evidence

- Need for strong theory and plausible mechanisms e.g. logic models
- Need clarity of how/what outcomes to measure – different types of evidence and evidence hierarchies
- Need to understand why projects worked or not
- Plan for who wants to know about the outcomes and how these will be disseminated
- Avoid unrealistic expectations
- Need to be aware that some findings will be unwelcome (e.g. project does not work)
- Awareness of scaling-up findings – context and representativeness especially from pilot projects
- Awareness of counter evidence and vested interests
- Public scepticism due to (overwhelming quantity of) mixed evidence

### 4. Reporting

- Agreeing on strategies to disseminate differently depending on the audience - new media can be a useful tool, but accessibility may be a problem
- Reporting means different things to different audiences
- Reporting does not necessarily equal dissemination
- Accessibility of reporting may not be equal
- Is reporting an end-point or a stepping-stone?
- Evidence may not always be positive/welcome
- Power of story-telling
- Not all people can disseminate evidence equally well – it is a speciality and may need help from professionals/experienced people
- Who is responsible for the reporting?

## 5. Impact

- Different levels of impact – individuals, communities, services and national infrastructure
- Awareness of how sustainable the impact will be (e.g. months versus years)
- The hierarchy of evidence will be important factor in impact, especially to funders – what is credible data?
- What measures/outcomes will be accepted as success? – Numbers have a high regard but may not be relevant/measurable in the circumstances
- Understanding of cause & effect - having controls and baseline measures is important and need robust study designs
- How do we measure/demonstrate impact?



## Plenary and Next Steps

Garth Reid (NHS Health Scotland) and Ian Shankland (Lanarkshire Community Food & Health) had the unenviable task of summarising the discussions that had taken place throughout the day and making some suggestions for how the group can progress going forward.

### Key Themes From The Day

- Lot of energy in the room
- Research vs. Evaluation vs. Reporting - 3 different things that are important to distinguish throughout the research process
- Need to be careful about power imbalances that prevent real partnerships
  - Partnerships would be built on existing trust
- Different benefits for different partners
  - Gives Third Sector greater influence on policy & funding through independently gathered evidence
  - Allows Third Sector access to academic skills & research supervision
  - Allows academics easier access to data & research participants
  - Possibly improve funding opportunities for both parties
- Permission to fail is important if we are going to learn

## Next Steps

- Make good knowledge capture systems which academia have accessible to Third Sector
- Could SCPHRP help facilitate a 'dating agency' for researchers and non-researchers to link up that replicates this event?
- For these initial connections to flourish it needs:
  - Someone to facilitate long-term relationships
  - Need to allow and help people build confidence
  - Cross-theme working
  - Trust
- Publicising what is working well now – could SCPHRP publicise case studies?

SCPHRP is currently discussing plans with its collaborators on how we can best achieve these aims, with the SCPHRP working groups an essential component in keeping these networks going.

## WHAT WE HAVE LEARNED...



THESE ARE DIFFERENT THINGS

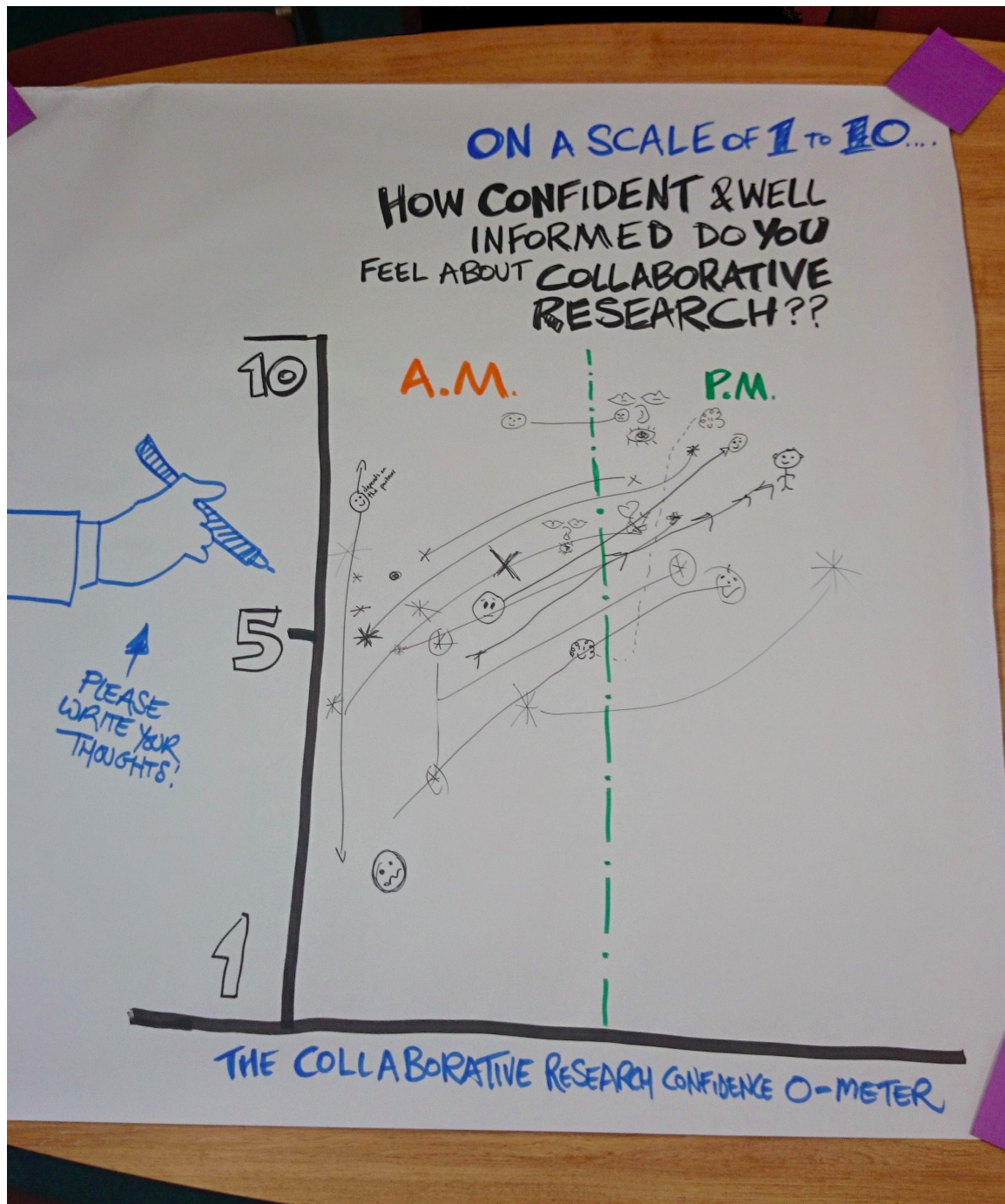


## NEXT STEPS..



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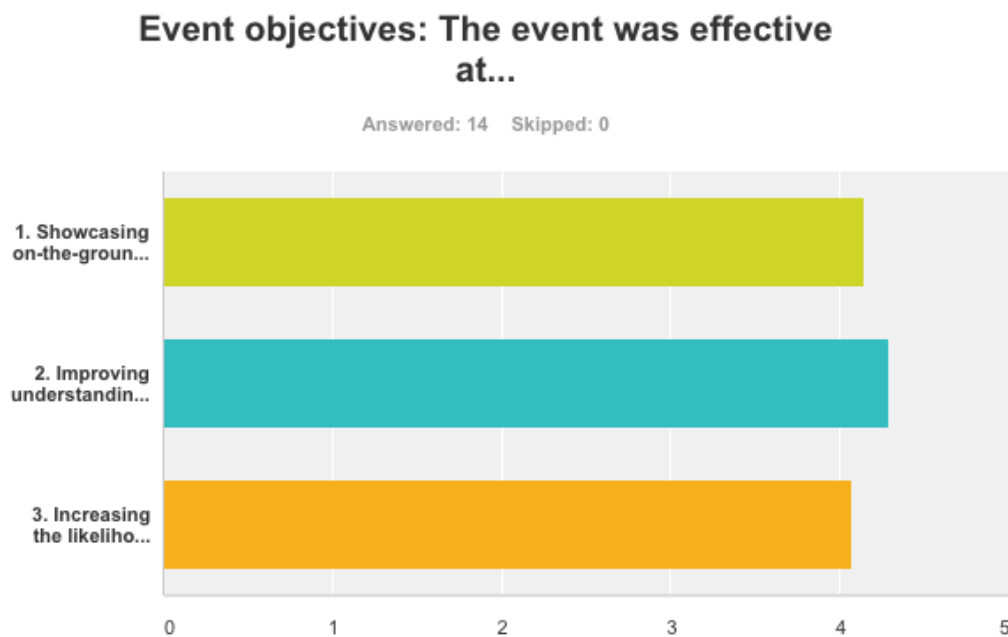
## Evaluation



At the beginning and end of the day we asked people to rate how confident and well informed they felt about collaborative research. Although not very scientific, this visual evaluation did reflect a positive impact on people's knowledge and confidence in moving forward into collaborative research.

After the event we also conducted an online survey to evaluate some particular features of the day and some of the results can be seen in the following pages. At the time of publication, 14 participants had responded to the survey. Results are presented as mean scores. Respondents were initially asked how they rated the event's effectiveness at meeting the event objectives:

1. Showcasing on-the-ground work
2. Improving understanding between community organisations and researchers
3. Increasing the likelihood of future connections between academia and community organisations



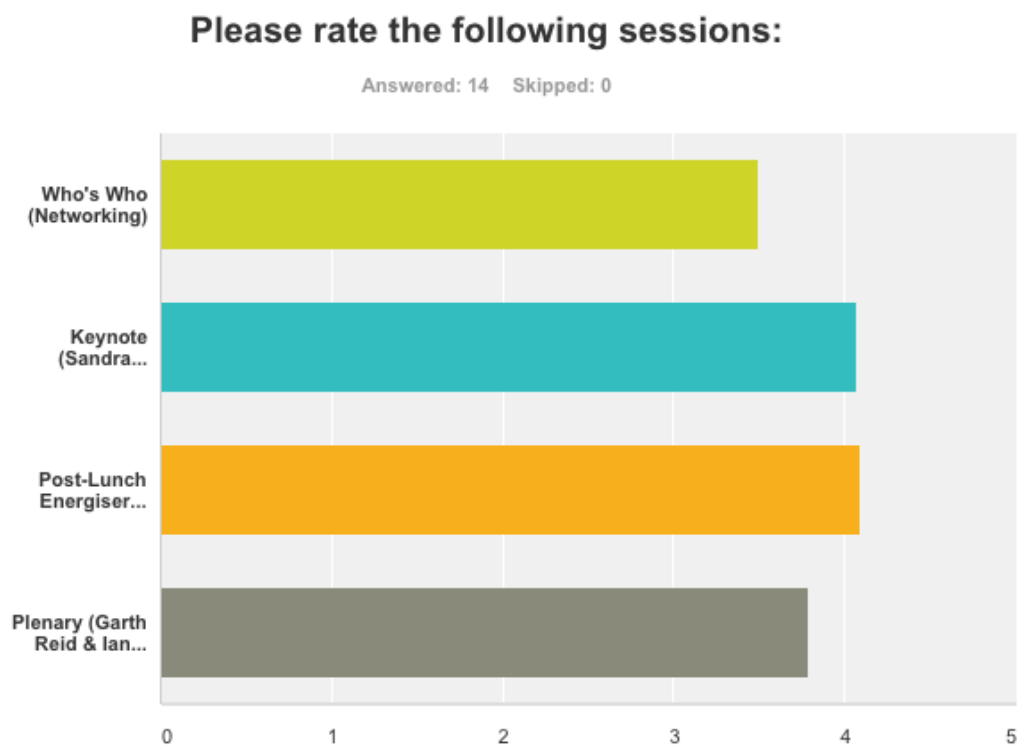
Where:

- 1 = strongly disagree
- 2 = agree
- 3 = neither agree nor disagree
- 4 = agree
- 5 = strongly agree

Mean results reflected that people agreed that these three objectives were met.

Next, respondents were asked how they rated the following sessions:

- Who's Who (Networking)
- Keynote (Sandra Carlisle)
- Post-Lunch Energiser (Tai Chi)
- Plenary (Garth Reid & Ian Shankland)



Where:

1 = poor

2 = fair

3 = good

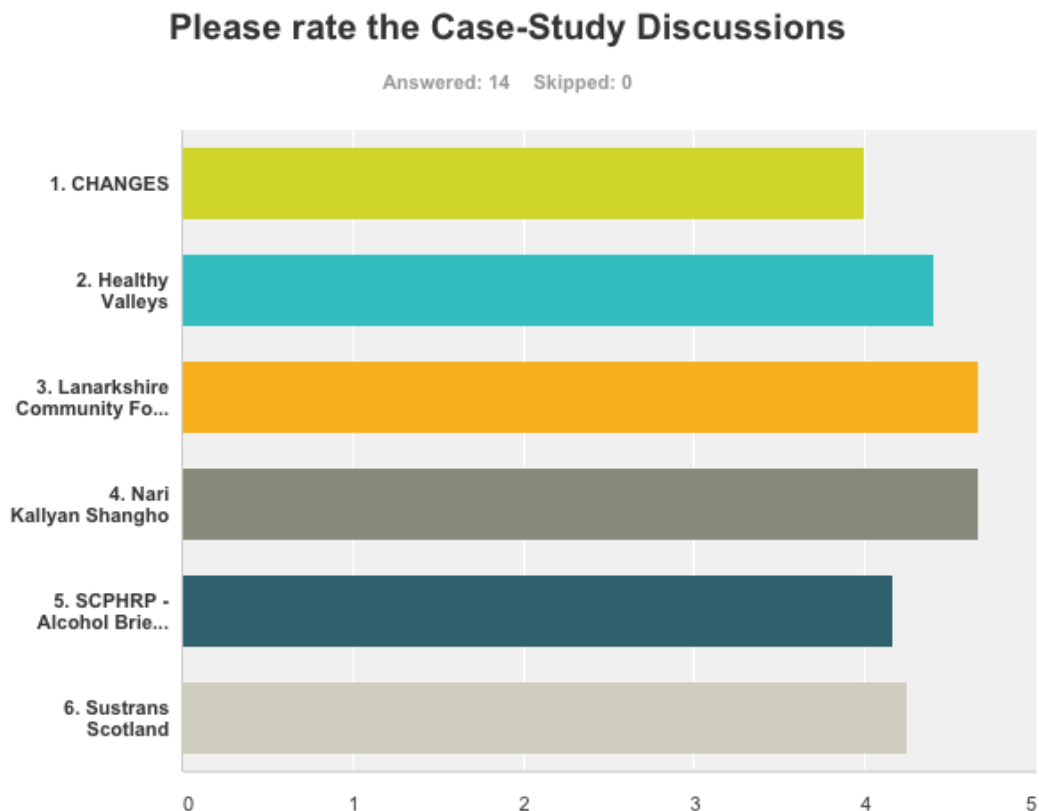
4 = very good

5 = excellent

Mean results for all four sessions ranged from 'good' to 'very good'.

Next, respondents were asked how they rated the case study discussions:

1. CHANGES
2. Healthy Valleys
3. Lanarkshire Community Food and Health Partnership
4. Nari Kallyan Shangho
5. SCPHRP – Alcohol Brief Interventions
6. Sustrans Scotland



Where:

1 = poor

2 = fair

3 = good

4 = very good

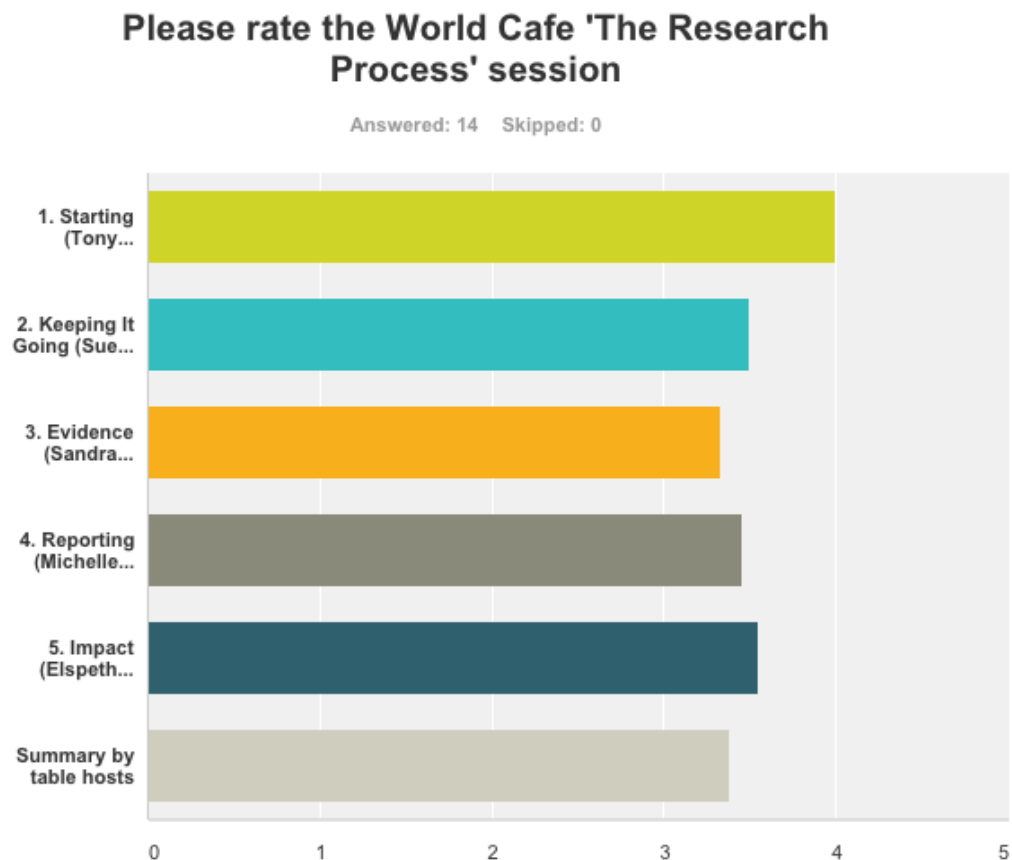
5 = excellent

Mean results for the case studies ranged from 'very good' to 'excellent'.



Respondents were then asked to rate the World Café session on 'The Research Process'. These sessions included:

1. Starting (Tony Robertson)
2. Keeping it going (Sue Rawcliffe)
3. Generating Evidence (Sandra Carlisle)
4. Reporting (Michelle Estrade)
5. Impact (Elspeth Gracey)



Where:

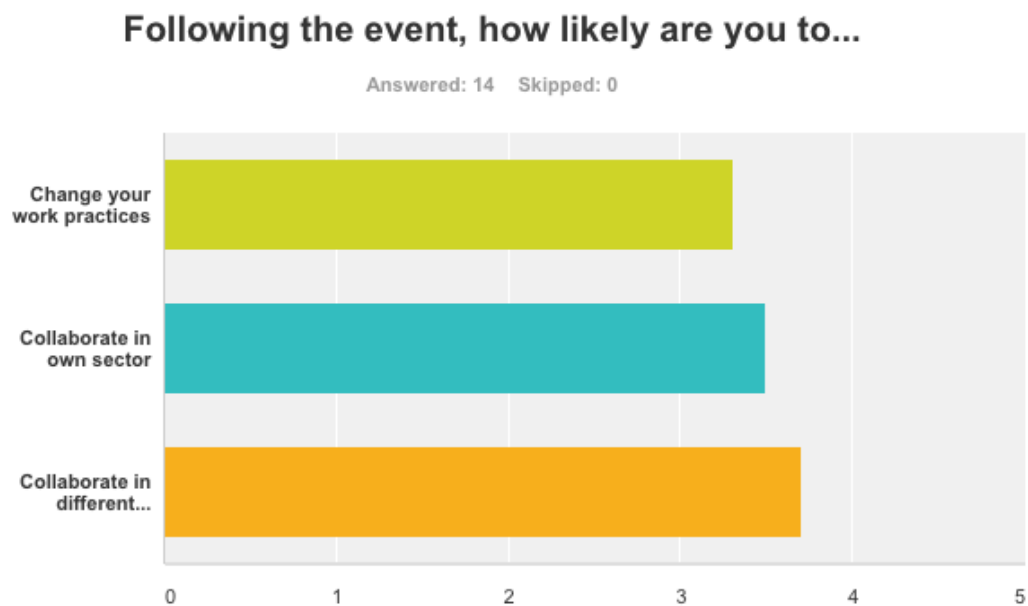
- 1 = poor
- 2 = fair
- 3 = good
- 4 = very good
- 5 = excellent

Means results ranged from 'good' to 'very good'.



Next up, respondents were asked to rate , following the event, ‘how likely are you to...’

- Change your work practices?
- Collaborate with colleagues in your own sector?
- Collaborate with colleagues in a different sector?

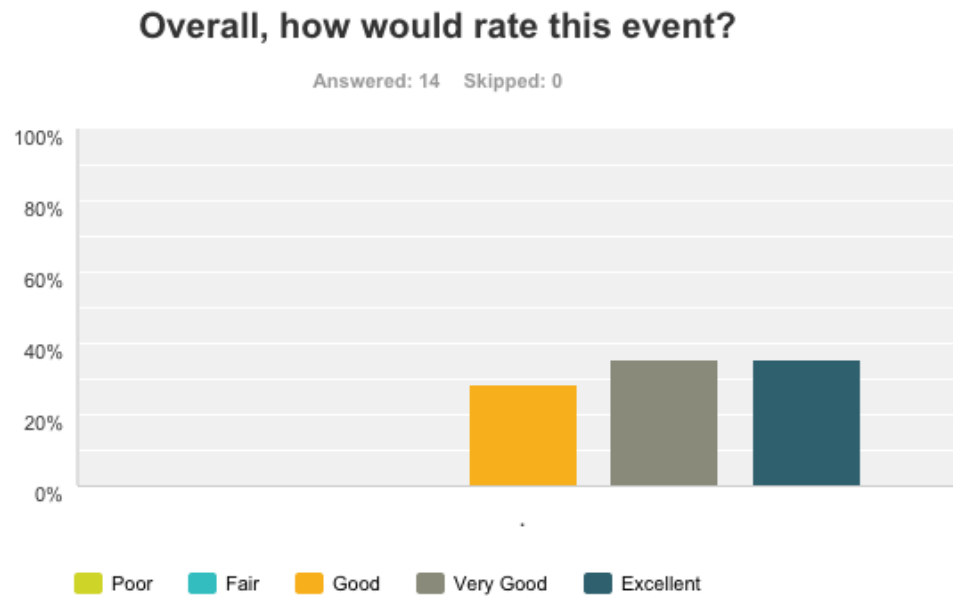


Where:

- 1 = not at all likely
- 2 = a little bit likely
- 3 = somewhat likely
- 4 = quite likely
- 5 = very likely

Mean results ranged from ‘somewhat likely’ to ‘quite likely’.

Finally, we asked respondents to rate the event overall as 'poor, fair, good, very good or excellent'. All responses ranged from 'good' to 'excellent', with 28% rating the event as 'good', 36% 'very good' and 36% 'excellent'.



## Conclusions

Overall, the event was deemed a success in meeting the objectives of showcasing work, building knowledge around the collaborative research process and strengthening ties between community organisations and researchers. It will be important to capitalise on the energy, networks and shared learning that happened on the day. SCPHRP and the Adult Life / Working Age working group will aim to do this through continued engagement with all attendees who wish to continue in dialogue and action around improving health in Scotland. Through this report and other disseminated outputs we hope that people will be able to use some of the learning and themes that emerged during the discussions to inform their own work practices and collaborations.

## Acknowledgements & Credits

- SCPHRP – funding & facilitation
- Organising Committee – Elspeth, Michelle, Sandra, Sue and Tony
- Social Change & Health sub-group
- Ageing Well: Healthier Futures sub-group
- Renee Ingram & Sam Bain, SCPHRP – advertising, registration, filming, photographs and dissemination
- Solveig Burfeind – additional filming
- Attendees
- Case Studies
- Speakers – Sandra, Garth and Ian
- Chris Shipton – graphic recording

