

MID POINT EVALUATION OF TRIUMPH HEALTH PROJECT SUMMARY REPORT AUGUST 1995

Prepared For:

GREATER GLASGOW HEALTH BOARD

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1. <u>INTRODUCTION AND BACKGROUND</u>

- In April 1995 Market Research Scotland Ltd was commissioned by the Health Promotion Department of Greater Glasgow Health Board to carry out a research project evaluating the Triumph Health Project.
- The Triumph Health Project, which operates throughout Greater Govan, is half way through its funding period of 4 years. The research was conducted to help assess achievements to date and identify priorities for the future.
- Research was conducted in 3 phases:
- 1. A face to face quantitative survey of local residents
- 2. A postal quantitative survey of local professionals
- 3. Qualitative in depth interviews with professionals from key sectors as well as project staff and members of the management committee.

2. **RESEARCH OBJECTIVES**

- The broad aims of the research were to assess awareness of the Triumph Health Project, identify its achievements to date, assess project initiatives and identify issues which need to be considered (and perhaps addressed), in the remainder of the project timescale.
- Specific objectives of the research were identified as follows:
 - To assess knowledge of the Triumph Health Project within its defined catchment area
 - To assess the acceptability and appropriateness of initiatives amongst the local population
 - To establish the extent to which the Triumph Health Project is acting as a catalyst for health promotion in the area
 - To describe and quantify the role the project has had in inter-agency collaboration
 - To assess skill development and changes in professional practice among potential health educators in the area
 - To identify and explore structural constraints and opportunities which exist across the different settings within which the Triumph Health Project operates
 - To establish attitudes towards health promotion among potential health educators in the area

3. **RESEARCH METHODOLOGY**

3.1. Phase 1: Quantitative Research with the local people of Greater Govan

- The questionnaire was developed by Market Research Scotland and GGHB, Health Promotion Department.
- A selection question was included to ensure only residents of Greater Govan participated in the survey.
- A pilot survey was included among 20 people during April, following which minor revisions were made.
- A target of 2500 street interviews was set with quotas established in terms of age and gender to ensure a representative balance of the local population.
- Sample points were located throughout the Greater Govan area, including several near to the Triumph Health Project bases.
- 2517 interviews were conducted between 1st and 18th May 1995.

- 3.2 Phase 2: Quantitative Research with Professionals Operating in the Greater Govan Area.
- The questionnaire was developed by Market Research Scotland and GGHB, Health Promotion Department.
- GGHB provided a sample list of local professionals
- The sectors within the sample included the main agencies/settings which Triumph Health Project has aimed to work in collaboration with (ie. schools, primary care, community projects and businesses).
- 370 Self-completion questionnaires were issued.
- 220 completed questionnaires were received with the following response teachers 82%, community workers 73%, primary care workers 71%, and employers 41%.
- 3.3 Phase 3: Qualitative Research with professionals operating in the Greater Govan

 Area and Triumph Health Project Management/Staff
- A discussion guide was developed by Market Research Scotland and GGHB, Health Promotion Department.
- GGHB provided a sample list of representatives from key agencies/settings including
 the schools, primary care, community projects, businesses, representatives of the
 local community plus the Triumph Health Project Staff and members of the
 Management Committee.
- A total of 30 in depth interviews were conducted between 27th June and 15th August.

4. **KEY FINDINGS**

4.1 Quantitative Research with Local People in Greater Govan

Awareness of Community Health Projects

In general there were:

- Low levels of awareness of health projects.
- Among those who had heard of any health projects, the Triumph Health Project was the most well known, with around 15% of this sample knowing of this project
- Around 5% of the total sample were able to identify the Triumph Health Project, either spontaneously or after prompting.
- The most common sources of awareness of the Triumph Health Project were 'posters' and through 'word of mouth'.
- Triumph Health Project services identified most often (both spontaneously and after prompting) were 'fitness testing/exercise classes', 'weight control/healthy eating advice', 'advice on women's health', 'drugs/alcohol counselling', 'relaxation methods' and 'stop smoking classes'.

Use of Triumph Health Project

- Levels of use of Triumph Health Project services was low, with two thirds of those who knew about the project not having made use of any of the services.
- Services used most frequently were 'relaxation methods' and 'fitness testing/exercise classes'.



- For the majority of Triumph Health Project services, high proportions of users felt that it had improved their level of health and well-being.
- Motivating reasons for making use of Triumph Health Project services included the
 fact that 'friends go' (mainly female respondents) and experience of a 'health
 problem' or the 'advice of a doctor' (mainly male respondents).
- Among the total sample, awareness of Triumph Health Project bases/events (outwith the context of Triumph Health Project) was high. Most well-known were 'exercise classes at the Ibrox Centre' (45%) and the 'Copland Centre' (33%). There was highest overall awareness among residents of Cessnock.

Promotional Activity

- A small minority (5%) of respondents had seen/heard any promotional activity for Triumph Health Project.
- Promotional activities identified most often were 'posters' and 'community events'.

Anticipated Services

• 'Drugs/alcohol counselling' was named by 80% of respondents as being an important service for the area. Services related to improving different aspects of lifestyle (eg smoking/ diet/exercise) were also thought to be important by a majority of respondents (around two thirds).

Anticipated Use of Services

A high proportion of respondents anticipated using Triumph Health Project services
within the next 12 months. This was especially true for services relating to lifestyle,
eg 'fitness testing/exercise classes', 'weight control/healthy eating advice' and 'stop
smoking classes'.



 Reasons stated for not using Triumph Health Project services were mainly related to lack of time and interest, mostly amongst older respondents and those employed.

4.2 Quantitative Research with Professionals in the Greater Govan Area

- Spontaneous awareness of Triumph Health Project was notably higher than for other community health projects. After prompting, almost half had heard of Triumph Health Project prior to receiving the questionnaire. Awareness was greatest among community workers.
- 35% of respondents who had had contact with The Triumph Health Project stated that they had not heard of the project, suggesting that a considerable proportion of project are not aware that they are dealing with Triumph Health Project.
- Awareness of services was highest among community workers also.
- Spontaneous awareness tended to reflect type of services that respondent would be involved with on a professional basis.
- Around nine out of ten considered the health of the local community to be important in work.
- Respondents' understanding of health promotion activity focused principally on 'provision of information and literature' (91%), 'advice/speaker and/or counselling' (87%) and 'health checks/screening' (79%) with community workers producing the highest response levels.
- Community workers were, considerable more likely than other groups to feel that collaboration is important in health promotion activity.

- Two fifths (41%) of professionals were unable to identify services offered by Triumph Health Project. Community workers had the greatest awareness of services.
- Services with which the highest numbers of respondents had had contact included 'relaxation methods' (19%), 'advice/speaker at local group' (18%) and 'written material/leaflets'(17%).
- Community workers had the highest levels of contact while primary care workers had contact with least services.
- The 'Ibrox Community Centre' was identified as a Triumph Health Project base by half of those who had heard of the project. A third identified the 'Copland Centre' and a quarter identified 'Elderpark Clinic'.
- The majority (57%) found access to Triumph Health Project information by local professionals to be easy. Higher proportions of community workers found access to be easy. Higher proportions of community workers found access to be easy (93%), whereas notable proportions from the primary care sector (23%) and the business sector (22%) found access to be difficult.
- Lack of information and time constraints were perceived as greatest obstacles to participation.
- Access for local people were though to be less easy. Community workers rated ease
 of access more positively than other groups.. Barriers to access included 'lack of
 awareness', 'apathy' and poverty'.
- A considerably higher proportion of community workers had experience of working with Triumph Health Project (seven out of ten) than other groups.
- Collaboration with Triumph Health Project had been particularly through the Govan Drugs Forum (15%).

- Most respondents who had been involved in joint activity with Triumph Health Project felt it had resulted in the anticipated benefit to local people (78%) and local professionals (74%).
- Community workers were most likely to feel that results were beneficial, with none out of ten satisfied with the resulting effect.
- Those in primary care (33%) were the most dissatisfied.
- Reasons for satisfaction were related mainly to 'approachable and friendly staff',
 'positive response' and 'increased knowledge', while the main reason for
 dissatisfaction was the fact that Triumph Health Project 'did not keep in touch'
 following the initial contact.
- In general, respondents rated various aspects of Triumph Health Project positively with the most worthwhile aspect considered to be 'range of services'.
- The majority did not identify any aspects as least worthwhile. Aspects which were mentioned included 'selective approach to community groups' and 'poor communication' (both 45%).
- Just under two thirds felt that a local health forum would be appropriate for Greater Govan. Community workers were most likely to agree with this.
- Triumph Health Project's most important achievements noted by the highest proportions of respondents were 'training for community workers' and 'survival' and 'any kind of profile in a bad area'.
- Primary care workers were most likely to say that they had no time to practise health promotion, even though higher proportions of them stated they were comfortable doing so, and that they were well placed to provide health education information.

- 4.3 Qualitative Research with Local Professionals in Govan, Project Staff & Members of the Management Committee
- The key problems of health in Greater Govan are considered to be related to deprivation and poverty and are extremely wide coverage all sections of the community (in terms of age, gender and employment status).
- Most commonly mentioned were problems with Drugs, Diet/Healthy Eating, Stress,
 Smoking, alcohol, Exercise, Womens' Health, Single Parents & safety.
- Health promotion is thought of as a pro-active process increasing knowledge, awareness and opportunity to improve long term health.
- Govan Health Eating Project & Govan Drugs Forum were well known Health Promotion Projects.
- Collaborative working is seen as vitally important although there are difficulties and tensions with this approach.
- Primary care workers were more likely to see themselves as 'health promoters' than others, although most all consider they promote health to some degree.
- Few respondents had been aware of the full extent of the work and the activity of Triumph Health Project.
- Triumph Health Project was believed by all groups to be addressing the key issues of health in Greater Govan although no clear perception existed as to how well it was addressing them.
- Collaboration had varied between sections with the greatest involvement with Community Projects and least with Primary Care Workers.



- Management Committee also appeared to have little involvement.
- Lines of communication were thought to be adequate amongst local professionals however project staff consider it difficult for people to contact them because of the way in which they are spread throughout the area.
- Most activity by Triumph has been re-active as opposed to pro-active and a number of respondents in each sector were disappointed at the lack of follow up.
- There are tensions among the project team related to perceived loyalty to GGHB
 Health Promotion Department and differing pay scales (Urban Aid & Health
 Promotion).
- The failure of the Copland Centre to operate as a 'drop-in' centre was a disappointment to project staff.
- Relationships between local professionals and project staff are generally good (other than primary care).
- Project staff are considered to be professional, skilled and approachable.
- Strengths of the project are seen as:
 - Collaborative Work
 - 'Bottom Up' approach
 - Project staff skills
 - Variety of project initiatives

- Weaknesses of the project are seen as:
 - Failure to reach the mass of population
 - Concentration of resources/services in some areas
 - lack of widespread knowledge of the entire project
 - Lack of collaboration with primary care sector
- Project staff and community workers consider the need for a central base for the project.
- Greater awareness of the project amongst the public is considered important.
- Some respondents consider the original objective to have been broad and unspecific and believe there is a need to review and refocus.
- Some individuals see the changes in structure and nature of Health services and amongst Health Care providers as continuing to be a difficult backdrop for the development of effective strategies. Many agencies and individuals are uncertain of the way ahead for the provision of services like Health Promotion.
- Those in primary care, and some within the management consider that there should be much closer liaison and development of services between locally based Health Promotion projects such as Triumph, and GP's and front line health providers.
- The GP interviewed supported this, but noted that lack of time to develop joint work, was a particular difficulty.
- The project staff would like to see greater commitment, enthusiasm and encouragement from the management committee.

- In terms of the original aims and objectives of the project, staff felt that it was not possible to quantify the results of their work. They felt that they were successfully initiating a process of health improvement (by increasing health awareness and offering opportunities for people in Greater Govan to make changes in their lifestyle) which would lead to measurable health outcomes in the future.
- Management Committee agreed that in the short term it was unreasonable to expect significant results in terms of 'outcomes', but emphasised that the project had been successful in achieving 'outputs', in that work was being carried out with a range of groups in different settings.
- It was felt by some members of the Management Committee that their meetings tended to unproductive and that this was perhaps endemic of the public sector as a whole.

5. SPECIFIC CONCLUSIONS

5.1 The Local Population

- The vast majority of local residents in Greater Govan (95%) are not aware that the Triumph Health Project exists. Clearly the project has very little profile or identity amongst the community.
- There appears to be a considerable desire by local residents to make use of many of the services/facilities offered and developed by The Triumph Health Project.
- Therefore, if the aim of the project was to have a positive impact on the community as a whole, (as opposed to a series of groups reaching a small proportion of local residents) then their must be mass communication with local people.
- This would require a co-ordinated plan of marketing activity which would
 - Make people aware the project exists (and what it consists of)
 - Advise them why they should make use of the service/facility
 - Advise them of where and when the service/facility is available
- If this action were to be implemented, the project team would have to be confident that they had the structure and resources to cope with the demands that might be placed on them.

5.2 Local Professionals

- Around half of the local professionals had not heard of the project, and even a
 proportion of those who had worked closely with the project team members were not
 aware of the Triumph Health Project.
- If professionals are not aware of the project then clearly they cannot be expected to either make use of project resources or develop collaborative links.
- A programme of communication or outreach should be considered to
 - increase awareness
 - increase understanding of the scope, nature and aims of the project
 - and encourage participation in collaborative work.
- There are a number of areas where good collaborative work, perceived as being of value, has been established with a number of community based projects. It is obvious that Community Workers are more enthusiastic (than other groups of professionals) about working collaboratively.
- There has been good collaborative work established with certain schools and a number of employers in the area and this should be developed to reach more individuals in both of these sectors.
- It does not appear that there has been particular emphasis in developing links with the Primary Care sector. This appears to be a difficult sector to develop collaborative links with, due to time constraints and other pressures of Primary Care work. However the Primary Care professionals we spoke with were interested in developing better links with other agencies and it would be appropriate for this sector to be addressed in a much more direct manner.

5.3 The Project Team

- The members of the team are highly regarded by all those who work in collaboration with them, and are seen to have varied and complimentary strengths.
- In many respects the project team are not acting as a "team". The activities of the individuals are not co-ordinated or fully briefed to each other, they only come together on an ad-hoc basis, and they feel isolated from one another.
- Although they appear to have mutual respect for one another with positive, personal relationships, a number of issues outwith their control have lead to tensions.
- There are differences in renumeration between project team members (due to two different sources of findings) which appear unjustifiable, and this issue should be tackled and resolved in a way which ensures natural justice.
- There is perceived conflict of interest/loyalty amongst some of the project team between the aims of the project itself, and the management and aims of Greater Glasgow Health Board, Health Promotion Department. This is particularly evident with regard to the 'Health at Work' project at Brand Street.
- Although the project team are located at various venues throughout Greater Govan, this has not served to make them more accessible to or integrated in these local communities and only isolates project team members from one another. This should be reviewed with the aim of bringing the team together and providing a focus for contact for professionals/the community.
- The project team feel relatively abandoned due to the lack of support, commitment, enthusiasm and interest from the management committee as a whole (and particular key individuals specifically). This has undermined the morale of the project team.

5.4 The Project Management Committee

- The Management Committee appeared to hold the view that the project was 'on course' for many of its aims (other than its public profile).
- The impression gained from the Management Committee members about the Triumph Health Project varied enormously from "original enthusiasm which has changed to frustration", to an "unwanted burden, which had to be suffered".
- There was no evidence of personal leadership or personal commitment to contribute directly to the success of the project, but rather the Committee appear to be performing a "watch dog" role to ensure that budgets were not overspent and that activity of the project team was appropriate and working towards the overall objectives.
- We consider that it is important that leadership and commitment should be given by the Management Committee.
- Then was a strong sense that the individuals on the committee had not 'gelled' in to a meaningful Multi-Agency alliance, and this was regretted by a number of individuals.
- Ideally the Management Committee of projects of this nature should be made up of individuals who are personally committed to the success of the project, and who want to be part of the project.

5.5 The Future of the Project

- Looking back, it appears that the aims and objectives of the project, and operational activity of the project team have been revised on a number of occasions during the last two years. Therefore, although the project has been operating for two years (with some months of development prior to that), it is perhaps only now reaching the end of the initial learning curve of what is practical and what can be achieved.
- There is some sense that in the last few months the project team have been attempting to pull closer together, and develop a more clearly focused agenda.
- The opportunity now exists for the Management Committee and Project Team to:
 - review the original aims and objectives
 - redefine what is practical and achievable
 - develop a planned strategy to achieve the maximum possible within the limits of the available resources
 - and positively influence the health of as many people as possible in Greater Govan.