On Track

An opportunity for those tackling food access and health inequalities to ensure that policy, planning and practice are travelling in the same direction

3 November 2005 Quality Hotel, Glasgow





Supporting local communities tackling inequalities in diet and health

Scottish Community Diet Project

Our overriding aim is to improve Scotland's food and health. We do this by supporting work within and with low-income communities that improves access to and take-up of a healthy diet.

Major obstacles being addressed by community-based initiatives are:

AVAILABILITY - increasing access to fruit and vegetables of an acceptable quality and cost

AFFORDABILITY - tackling not only the cost of shopping, but also getting to shops

SKILLS - improving confidence and skills in cooking and shopping CULTURE - overcoming ingrained habits

We help support low-income communities to:

- identify barriers to a healthy balanced diet
- develop local responses to addressing these barriers, and
- highlight where actions at other levels, or in other sectors, are required

We value the experience, understanding, skills and knowledge within Scotland's communities and their unique contribution to developing and delivering policy and practice at all levels.

Contents

Introduction	page 2
Programme	page 3
Workshop notes	page 4
Workshops - first session	
 Angela Moohan, West Lothian Council Fiona Bayne, NHS Lothian Heather Sloan, Have a Heart Paisley Lynne Henderson, NHS Orkney Susan Mardon/Maureen d'Inverno Healthy Living for Deafblind People Matt Taylor, University of Edinburgh John Brennan, Edinburgh Community Food Initiative Linda Boodhna, NHS Fife 	page 5 page 6 page 7 page 9 page 10 page 11 page 12
Workshops - second session	
 Alex Wilde, North Glasgow Community Food Initiative Claire Milne, Sustain Antonia Ineson/Moyra Burns, NHS Lothian Caroline Comerford, NHS Grampian Anné Gebbie-Diben, NHS Greater Glasgow, Kenny MacDonald, Drumchapel Life Carol Anne Alcorn/Jeanie Collier, Edinburgh Cyrenians John Hancox, Hillhead Children's Garden 	page 13 page 14 page 15 page 17 page 19 page 21 page 23
Summing up	page 24
Afternoon workshops	page 25
Participants list	page 26
Appendices	page 32

Introduction/Acknowledgements

'All aboard!'

The Scottish Community Diet Project has always been committed to listening to and learning from communities and those who work with them who experience the barriers to a healthy diet on a daily basis. Structuring activities and events to ensure this learning is gathered, shared and applied is not without its problems and calls for a lot of commitment from already busy local volunteers and workers.

This latest national networking event organised by the Scottish Community Diet Project would have failed miserably had it not been for the incredible commitment and contribution of all those taking part.

Morning workshop presenters were all recruited from those who were already attending and provided us with an excellent range of issues on policy and practice from around the country, touching on engagement, capacity building and practice development.

Workshop scribes were also all 'volunteers' with most members of SCDP's steering group undertaking a variety of roles.

Thanks are also due to Lucy from the Community Voices Network and the members of the Community Retail Network for offering to run afternoon workshops, and also to those agencies who gave us permission to show their good practice videos.

I am particularly grateful to everyone who made use of the graffiti wall and took part in the afternoon workshop looking at the activities and strategic objectives of the SCDP. The information gathered will be extremely useful as the project and its funders look to the future.

The entire day was participatory, but it is clear that many of the workshops were particularly so. It is therefore appropriate to thank everyone who attended for their efforts and contribution. I hope the experience was a positive one and look forward to sharing experiences, learning and information with you in the future.

Finally we must thank SCDP's Administrator/Information Officer, Alice Baird, for keeping both the conference and her colleagues 'on track'.

Bill Gray National Project Officer

Programme

9.30	Registration, tea and coffee
10.15	Introduction Bill Gray, National Project Officer, Scottish Community Diet Project
10.30	Workshops round one
	Angela Moohan, West Lothian Council Fiona Bayne, NHS Lothian
	2. Heather Sloan, Have a Heart Paisley
	3. Lynne Henderson, NHS Orkney
	Susan Mardon/Maureen d'Inverno, Healthy Living for Deafblind People
	5. Matt Taylor, University of Edinburgh
	6. John Brennan, Edinburgh Community Food Initiative
	7. Linda Boodhna, NHS Fife
11.40	Workshops round two
	1. Alex Wilde, North Glasgow Community Food Initiative
	2. Claire Milne, Sustain
	3. Antonia Ineson/Moyra Burns, NHS Lothian
	4. Caroline Comerford, NHS Grampian
	5. Anné Gebbie-Diben, NHS Greater Glasgow Kenny MacDonald, Drumchapel Life
	6. Carol Anne Alcorn/Jeannie Collier, Edinburgh Cyrenians
	7. John Hancox, Hillhead Children's Garden
12.40	Summing up
13.10	Lunch and market place
14.00	Launch of Community Retailing Network
14.10	Afternoon workshops
15.30	Tea and coffee, marketplace

Workshop notes

On Track was organised to allow a wide range of participants from all over the country to look at what is being done regarding food and health in Scotland's low income communities and also what needs to be done. The aim of the workshop discussions was to cover not only practice, but also planning and policy. There was also a particular emphasis on attempting to draw out lessons from the future with regards to engagement, capacity building and practice development.

Each workshop started with a brief presentation from the workshop leader(s) on the theme of the workshop. The remainder of the workshop was a discussion around the theme, where the leader encouraged all participants to get involved.

First Session - Workshop One

Angela Moohan (West Lothian Council) and Fiona Bayne (NHS Lothian) leading a discussion on **engagement** based on their experience of participation and community planning in West Lothian.

Presentation

Using the analogy of a journey, Angela and Fiona talked the group through how the Fauldhouse food co-op was set up, its successes, challenges and the lessons learned.

The setting up of Fauldhouse food co-op has seen community participation and ownership at its heart, with an emphasis on a bottom-up approach. Right from the start it was acknowledged as essential to establish if the local community actually wanted and would support a food co-op.

A mapping exercise was carried out to establish what relevant groups and networks were already out there and a meeting brainstormed who was missing from the discussion and highlighted the high level of community cohesion and, most importantly, the potential for a food co-op.

The main challenges were identified as funding, premises, and ethos.

The local community offered various resources, according to their own specific capacity, e.g. some offered the use of a building, rather than time and attendance at meetings.

The community were offered a feedback session to assess the process of setting up the food co-op. Interestingly, the community rejected this, saying they just wanted to get on with it. Fiona and Angela flagged up how important it had been to listen to this response and acknowledge this as the community taking ownership of the co-op - a huge success and a signal that it was time to let go.

Key discussion points

How does local practice feed into national policy making, through the community planning process?

The group contributed that the process needs to be:

- a continual feedback loop
- what local people want community engagement is essential
- o team work one person can't do everything and talk to everyone
- o draw on existing community networks and groups
- more informative about funding opportunities and mechanisms to deal with the short funding cycles
- supportive of longer term funding
- tuned into and able to manage the differing needs and expectations within a community.

First Session - Workshop Two

Heather Sloan (Have a Heart Paisley) leading a discussion on **engagement** based on her experience from Phase One of Paisley's Health Demonstration Projects.

Heather started the workshop with some background information on the ethos of Have A Heart Paisley. Heather then went on to give a detailed account about her involvement in community food work and community capacity building within Paisley in relation to Heart Health.

Key discussion points

- o Family Cook and Eat Sessions in Renfrewshire.
- Breakfast Clubs
- o Eat Well to Play Well a pre-fives' parent's resource looking at social interaction and skills development
- Community Lunch Clubs utilising resources in surrounding area, e.g. a further education college. These lunch clubs reduce social isolation and provide training and employment opportunities.
- o Renfrewshire Food Federation, Health On Wheels project, mobile food shop interest was shown in the amount of legislation and training that was necessary to establish a small trading food business, the importance of working in partnership with suppliers and amount of funding needed to make such a project sustainable.

Finally, the value of volunteers was discussed, and issues regarding how to combat apathy, what training was necessary, as well as food hygiene, food safety and funding requirements.

First Session - Workshop Three

Lynne Henderson (NHS Orkney) leading a discussion on **capacity building** based on her experience of 'A lemon is just a confused melon' - a project that promoted healthy eating among young people attending youth clubs in Orkney.

Presentation

'A Lemon is just a Confused Melon' was a joint project between Orkney Association of Youth Clubs and Orkney Health Promotions Service. A grant of £2,400 from SCDP in 2004 was used to develop youth programmes using healthy eating themes.

Every Youth Club affiliated to Orkney Association of Youth Clubs was invited to apply for funding for one or all of following topics:

- o theme night (£100 per club available)
- o exotic Foods (£50 per club available)
- Ask the Expert/Cookery Demonstration (£75 per club and £200 to clubs on a smaller island for travel).

All 10 clubs applied and received funding. Clubs covered an age range of 8 to 18 year olds - often in Junior, Middle and Senior sections. Issues addressed were:

- o health
- o social
- o skills
- o democracy
- o environment
- sustainability.

What worked?

- partnership working between Health Promotion Department and Youth Clubs.
- o ability to have a range of different projects with different times scales.
- o open to planning by Youth Club members themselves as ideas only given.
- o contact with local chefs, fishermen, local businesses and parents
- fund events around healthy eating.

What happened?

- o food around the world from Greece to Hawaii
- o different tasting sessions e.g. full fat/low fat products, tinned/fresh fruits
- o mocktails (smoothies)
- o fruit beauty salon e.g. making face creams, etc. (these sessions were very popular with the boys)
- o games and guizzes
- seafood feast
- o dancing

Sustainability

- o youth clubs now have experience of the healthy plate food mat
- o links with chefs and fishermen
- o one Youth Club now has fruit and water rather than crisps and fizzy juice
- Environmental Health Department now funding more work on this theme.

Evaluation

Involving youth leaders, professionals and children.

Key discussion points

- o different ways of working may be required for children younger than eight and adults
- o peer pressure meant that most tried new foods
- o Physically Handicapped/Able Bodied club involved
- o money given 'up front' by SCDP very useful
- o culture barriers
- o availability of fruit and vegetables on islands is an issue.

First Session - Workshop Four

Susan Mardon and Maureen d'Inverno (both from Healthy Living for Deafblind People) leading a discussion on **capacity building** based on their experience of work involving sensory impairment in Fife.

Key discussion points

Need to improve health and wellbeing and in particular the diet of deafblind people

Techniques used:

- food tasting for getting over fears of new foods
- o smoothies to increase fruit and vegetable uptake
- o sensory involvement with food e.g. herb garden, vegetable plots for growing.

Problems

o lack of materials (health promotion resources) that can be used by this group. some material for people with learning disability can be adapted, but this is not always suitable.

Need to adapt material for sensory impaired people

- smoothie recipes in braille and large print
- more large print material
- o picture-based cook books a project in Wales (supported by the Food Standards Agency) has done this and may be able to be replicated elsewhere
- o generally labelling of foods needs to be more clear for everyone, but particularly for this client group.

Training for care staff

This was seen as vital, but the question of how to monitor how effective training has been was raised. Training for volunteers needs to be recognised with the SVQ (Scottish Vocational Qualifications) system.

Funding issues

Access to small non-recurring grants was seen as positive. However, this tended to be all that was available and people had to patch together lots of small funding grants, leading to complication with reporting and accountability. There is a need for a longer-term, more sustainable approach to food-related community health projects.

First Session - Workshop Five

Matt Taylor from the University of Edinburgh leading a discussion on **practice development** based on a study of food access in Scotland.

Presentation

Matt explained the aims, objectives and methodology of the Food Standards Agency (Scotland) commissioned study, entitled **Accessing Healthy Food: A National Assessment and Sentinel Mapping Study of Food Retailing in Scotland**, commissioned and led by the University of Edinburgh. The purpose of the study was to provide a robust evidence base that will inform policy decision-making and identify the types of areas that have particular food access problems. The study will provide a national map of food retailing and describe how availability, access and price vary using local case study sites. The project is designed so that, if the need exists, it can be used as the basis for an ongoing surveillance system of food access in Scotland. This in turn will allow future diet and food initiatives to be better targeted. Interim outcomes from the project will be used to produce a methodological toolkit for future use. The final report is due to be published in December 2006. For more information on this study please visit: www.csrs.ac.uk/fsa.htm.

In addition, it was noted that a PhD studentship has been awarded which will complement the main project. The student will study food access in particularly remote Scottish areas, concentrating on household access, buying strategies, food stockholding and particular issues for low-income families. If you would like further information on this project please contact: heather.peace@foodstandards.gsi.gov.uk.

Key discussion points

There was agreement on the need for good quality research to underpin national policy development. The possible application of the study over time and at different levels was raised and there was agreement on how important it was for the maximum benefit to be derived from the study.

The study itself recognised that it was deliberately looking at only two of the four barriers highlighted in the Scottish Diet Action Plan. Availability and affordability were being looked at in the study but not issues around culture and skills/confidence. It was agreed that better understanding of all factors would be required in the long run and that the barriers, as highlighted in the Scottish Diet Action Plan, are often interlinked. It was also felt that in this area, quantitative or qualitative data standing alone was weakened by the other's absence.

There was a lot of interest in the study's work on defining a healthy shopping basket. It was noted that this had been a common methodology applied by local projects in the past but with little consistency.

Numerous factors were raised that would effect how individuals in different life circumstances and at different life stages would relate to any map. The factor of location and operating schedule of Benefit Offices was one that was recognised as potentially fitting in with the study.

First Session - Workshop Six

John Brennan (Edinburgh Community Food Initiative) leading a discussion on **practice development** based on his experience of working with food co-operatives in Edinburgh.

Key discussion points

- Working in schools only tackles half the problem home influence and environment is just as crucial. Work in schools needs to involve parents supporting parents is key. Often the agenda is not joined up or consistent, e.g. health promotion in nurseries, vending machines in schools! There is a development job to be done here.
- Planners and policy makers seem to be divorced from problems in the field they need to be more positive and encouraging. Too much empty rhetoric about community development. Where is the passion? Short-term funding means no stability. Too much emphasis on ticking boxes and working to targets rather than with the community. There is lots of talk about 'partnership working' but in reality communication is often poor.
- o Problems with community food initiatives too reliant on volunteers. Usually need someone to drive them and attract volunteers. Range and location often poor, can be terrible places to shop! Some doubt about whether they are effective as a means of food access.
- o Issue of whose values we are working to who sets the agenda? Are community food initiatives tools of change or of control? Can they be effective tools for shifting control and challenging cultural norms? Is their importance primarily as a means for people to engage with food, promoting education and dialogue?

First Session - Workshop Seven

Linda Boodhna (NHS Fife) leading a discussion on **practice development** based on her experience working on applying Participatory Appraisal (PA) techniques in Dysart.

Linda discussed the Dysart project which has used PA techniques to engage with local people about where they buy food and what they think about this. PA methods of research/consultation/evaluation are non-threatening and are an enjoyable way of engaging people with local planning and can be used with all sections of the community.

The workshop was split into three small groups and each group used PA methods to capture their thoughts about two ideas and to give people some experience of PA methods.

One of the methods was for individuals to write on post-it notes and place them on a heart shape – the first theme was ideas that people had (or had used for their own projects) for engaging with local people about local food issues on local practice, community planning and national policy levels.

The second task that groups had was to draw an outline of a body on flip chart paper and attach post-it notes with their ideas on how to get people involved with community planning or food issues on a local or national level. National ideas were placed outside the body and ideas for local work were placed inside the body.

The full results of this workshop are in Appendix One.

Second Session - Workshop One

Alex Wilde (North Glasgow Community Food Initiative) leading a discussion on **engagement** based on her experience of working in an area of Glasgow with a large asylum seeker population.

Key discussion points

- North Glasgow Community Food Initiative (NGCFI) was originally started by volunteers from the University of Glasgow and aimed both at asylum seekers and local population. Food was seen as opportunity for cultural exchange different recipes and ways of eating healthily. Immigrants can often suffer from poor diet if they are unable to source the ingredients they are used to, or do not know how to cook with the ingredients they can obtain.
- o Major effort to link unemployed or under-employed with volunteering opportunities, also recognise therapeutic value for those with mental health issues.
- Many activities depend on having staff working alongside volunteers to ensure continuity and communication – especially important when working with asylum seekers.
- Outcomes have included small incremental changes in people's health; increased awareness of healthy options; opportunities to contribute to community and for personal development (e.g. volunteering); and opportunities for social engagement and cultural understanding.
- Key barriers experienced by NGCFI include language; difficulties getting men involved; easier to involve asylum seekers than local people (as more used to using fruit and vegetables in diet); difficult to get people to serve on management committee; difficult to get people to do training; and funding.
- Other barriers identified by workshop participants included poverty; location; transport; lack of knowledge; engaging with people for whom food is not seen as a priority; lack of equipment (e.g. pots and pans, graters); workers' attitudes (may impose own values); and people in authority not listening (e.g. GPs).
- o It was emphasised that you have to work with people over a long period of time to develop their confidence and motivation and build on the skills they already have, as social norms are changing, with less family interaction. It takes a long time to pull things together (three years is not long enough!).

Second Session - Workshop Two

Claire Milne (Sustain) leading a discussion on **engagement** from her experience of engagement from within a UK agency.

Claire highlighted campaigning as an integral part of achieving change, based on her past experience in international development and her current remit within the Food Poverty Project at Sustain (www.sustainweb.org).

Key discussion points

It was recognised that there were, or should be, links between local campaigning, national policy change and global lessons. Engagement was therefore as important at a local as at a national level.

It was agreed that both retail planning and income levels were topics that would benefit from a high profile approach but that any UK campaign had to take cognisance of the post-devolution political and legal landscape.

It was also felt that while reaching consensus with others was important there would also be diversity and local priorities. While some may prefer to see the back of the supermarkets, others may welcome one into an otherwise poorly retailer-served community or stand to benefit from planning gain. However, both would likely agree on tighter planning regulations that brought physical planning into a more strategic context.

The group then split to look at different aspects of campaigning such as working with the media, lobbying politicians and generating local support. The group were also encouraged to look at what type of support they felt would be most useful should they choose to be part of a campaign, such as templates for press releases/flyers or guidelines on holding events.

Second Session - Workshop Three

Antonia Ineson and Moyra Burns (both from NHS Lothian) leading a discussion on **capacity building** based on their experience developing a food and health strategy for Lothian.

Moyra and Antonia briefly described the background to the ongoing development of NHS Lothian's Food and Health Strategy. As part of the process they needed a way to bring all food and health work in the Lothian area together. The Lothian Food Chain Seminar was held to look at what was happening, what was working and what was needed. A report on Lothian's Food Chain Seminar is available (see Moyra and Antonia's contact details at the back of this report).

The need for networking on the ground, and for building on the experience of community projects in developing strategies, were strong messages from the event. It also confirmed concerns that a more sensible approach to evaluation was required, based on a partnership between funders and those responsible for the work.

Capacity needed to be developed for:

- linking food producers and food initiatives
- networking and evaluation
- considering environmental sustainability there is a duty on all public bodies to consider biodiversity and sustainability (Nature Conservation (Scotland) Act 2004).

Consumer involvement in development of the strategy was raised. It was agreed that this dialogue was essential, the more people can be involved in the planning stage, the better the end result.

Growing food in schools and then using it through the school kitchen and how this fits with local authority procurement policy was raised. Several participants noted a conflict in policies on this issue. Moyra indicated that her experience was that children can try the food they grow as long as this is outwith the school kitchen, as supplying school kitchens is not allowed under some current Council policies.

This led to discussion about other apparently contradictory situations related to policy, such as:

- burger vans near schools Councils get a revenue from the trading licence but they do not influence what is sold
- o vending machines in schools selling foods high in fat, salt and sugar
- o fast food premises near schools
- o school procurement policy local producers may find it difficult to compete, contracts need to be more flexible to take advantage of local and seasonal produce such as strawberries
- eco schools this is an award system which could be linked up to a whole school approach.

Participants recognised that there was opportunity to try and influence policies to develop more linkage and flexibility. However, tackling these issues is a long-term

commitment. It was also acknowledged that it takes a lot of energy and drive from individuals to get projects and initiatives up and running.

Days like today are excellent as it is important to know you are not on your own, that everyone is 'chipping away' at the issues together. However, there is a need for openness and willingness at top levels for this to have an effect. It takes a long time to prove what works, and improving evaluation through better use of results and wider dissemination would help. In the meantime we should be building on little successes, as these small changes have a cumulative effect.

A discussion about the knock-on effects of planning permission ensued. A well-known discount food store is seeking permission to open a store in Orkney. All produce will be shipped in. This will completely change food shopping in Orkney and have a serious impact on local food producers and shops. Local producers generally do not produce enough to supply such stores, which purchase centrally and in bulk. Similar issues were raised in relation to Port Glasgow and other areas.

Castle Douglas is an example where planning has worked with the local community. A new supermarket was only approved with the conditions that there is no café, petrol station or gardening products. This will limit the effect of the supermarket on local businesses, showing that people are listening and working together.

Second Session - Workshop Four

Caroline Comerford (NHS Grampian) leading a discussion on **capacity building** based on the needs of volunteers within the Grampian food and health strategy.

Key discussion points

What is volunteering?

Caroline put forward several ideas:

'Helping the world to become a better place.' It was recognised that in this context it was not just about food, but also about communities, helping those with mental health problems etc.

'Not what you get or give but what you become.' Volunteering can 'lift' people and be used as a step to other things.

'Everyone has a talent or skill to offer.' In terms of capacity building everyone should be regarded as a resource.

The group agreed that without volunteers many activities would not happen. Volunteers should not be taken for granted.

Perspective of the volunteer

Dave Simmers discussed his views on this given his work in three areas in Aberdeen – community food outlets, providing fruit to schools and developing social enterprises.

It was noted that volunteers were the backbone of the community food outlets. Questions sometimes arose as to why volunteers were not paid. His response was in terms of sustainability and also that volunteering is not altruistic. Volunteers get status, feel that they are doing good and contributing to the community. They get a sense of identity and purpose. Many build up their confidence, self-esteem and skills. It must be acknowledged that people get a lot back from being a volunteer.

In return for volunteering they had the right to expect clarity and purpose in their tasks and training. They should get recognition for their work and regular contact with those running the initiative. Another spin-off was that they learnt about healthy eating!

He found those with learning disabilities particularly enjoyed working in food outlets. He had seen incredible rewards for them and their carers.

He also described his social enterprise work where through SHAW (Scotland's Health at Work) he had £3,000 to supply fruit to the oil industry. He planned to build this up commercially using a Future Builders grant. He then hoped to generate income so he was free of NHS/Local Authority control.

Needs of the volunteer

The group divided into three to discuss the needs of the volunteers when planning at

- o local level
- o community planning level
- national level

The group then came together to summarise the main points:

Local level

- need resources to build up infrastructure
- sensitive to needs disabilities etc.
- training needs to be provided
- o need to be valued, sense of achievement
- not tokenist, need to be engaged
- o meaningful experience
- o opportunities for development including paid jobs
- support available practical (child care, transport), supervision and peer support
- o clarity of role
- social aspect recognised.

Community planning level

- value volunteers
- o lack of understanding of implications of evaluating/reporting
- o structures communities should be involved
- volunteer representation
- o whose agenda in partnerships
- o power balance?

National level

- o value volunteers can lead to employment
- o resources for training etc.
- o more sophisticated recognition of benefits, e.g. increase in confidence, 'soft outcomes'
- o understanding of how to engage with people to encourage volunteering.

At all stages it should be recognised that volunteering is a journey covering many issues such as social skills, confidence building, skill acquisition, stretching people and helping them grow. Volunteers need to have flexibility – it is not paid employment.

It is important to recognise that there are negative aspects to volunteering as well as positives. Efforts should be made to turn these negatives around.

Second Session - Workshop Five

Anne Gebbie-Diben (NHS Greater Glasgow) and Kenny MacDonald (Drumchapel LIFE) leading a discussion on **capacity building** based on their experiences of supporting community cafes in Glasgow.

Presentation

In 2003/2004 support was given to 13 Glasgow community cafés to increase the availability of affordable healthy meals. This support included:

- o a roving chef who worked with staff and volunteers, assisting with changes required to meet Scottish Healthy Choices Award Scheme Criteria
- o a small grants scheme.

When the intervention was evaluated findings and recommendations included:

- that management committees (of community cafés, or community centres where community cafés are based) often were not aware of their legal obligations especially around health and safety
- staff time is required to fulfil all of the environmental health/health and safety
 obligations this is often not realised
- o management committees have limited income and therefore have to generate income leading to more 'convenience', 'quick prep' (often less healthy) foods being served in the community cafés
- there is a need to change the way policy makers and funders put resources into community cafés - to ensure cafés are not forced to serve these (less healthy) foods
- before moving forward with development, community cafés' management committees should go through some sort of procedure working through joint vision, obligations, legalities and shared objectives
- o more frequent contact between staff, volunteers, clients and management can be beneficial.

Key discussion points

Actions for community cafés: improved nutritional knowledge, food skills training, business and staff training.

Activities for management committees: setting up partnerships, evaluating objectives of the café, clarifying roles of management committee.

Other activities: consulting the committee and communication – everyone working to the same goal.

An evaluation report 'Glasgow Community Café Development Intervention Evaluation Report' and a brief guide 'Promoting healthy choices in community cafés' are available on the Scottish Community Diet Project website. See also Appendix Two

Second Session - Workshop Six

Carol Anne Alcorn and Jeanie Collier (both from Edinburgh Cyrenians/FareShare) leading a discussion on **practice development** based on their experience of work with the homeless in Edinburgh.

Presentation

The Edinburgh Cyrenians deliver a programme called 'Good food in tackling homelessness' which has four main elements:

- The 'FareShare' part of the project involves accessing large quantities (about seven tonnes per week) of quality 'surplus' food supplies for distribution to around 43 homeless projects in the Edinburgh and Lothians area. This food would otherwise have gone to landfill. At least 37% of the food currently redistributed is fresh fruit and vegetables.
- Improving Practice and Provision: promoting the creative use of good food in the hostels and homeless projects that receive supplies from Cyrenians FareShare Project. Advice on food hygiene and use of 'good food' in building community and encouraging healthy eating.
- Supported Volunteering involves large numbers of homeless or formally homeless people as volunteers in the running of this scheme, thus potentially increasing the employability of homeless people and providing a supportive working environment where volunteers can build their confidence and skills.
- 4. 'Cooking at Home' workshops this is a specialist small group learning model, which delivers, or assists local homeless services to deliver cookery classes for those who have or are living in a hostel, or about to move on into their own accommodation. The social aspect of 'Cooking at Home' classes was important, with huge benefits to participants in the opportunity to sit down and share a meal with other people. Cooking at home promotes the safe, healthy and enjoyable use of food to promote quality of life. (The Cyrenians have produced a handbook for those who are interested in running cookery workshops with homeless people. 'Good food in tacking homelessness' is available to download from the Cyrenians website: www.cyrenians.org.uk)

Key discussion points

Several of those attending the workshop had experience of delivering cookery workshops with homeless people. One or two people discussed the feasibility of having a network for those who are running these types of workshops.

These was also some discussion concerning the use of weighing and measuring in classes – one or two people suggested that they preferred to use more informal ways of cooking such as using cups and spoons to measure ingredients rather than scales. However, others were delivering classes as part of a literacy project and their projects emphasised literacy such as reading a recipe. An issue that came up was ensuring that recipes were not in column form – those who may have literacy problems are more likely to read straight across the page rather than up and down columns.

There was much discussion about the large range of skills and experiences that homeless people may bring with them to cookery sessions. One or two people had experience of running cooking sessions with homeless people who were trained chefs and who may be in a class with others who had little or no ability to cook and prepare food. Several people ran cooking workshops where participants chose what they cooked as individuals; others encouraged all participants to cook the same meal (or variations of the same theme at least) that they might have chosen at the previous class.

On the subject of actually promoting healthy eating, the Cyrenians said that they usually introduce the idea of 'healthy eating' informally about half way through the course. Others agreed that caution is required when planning to introduce the term 'healthy' in workshops. Many people also agreed that it was best to get participants interested in and actively involved in cooking before being concerned about encouraging them to cook and learn about healthy meals. Others said that they would encourage participants to cook meals where it was possible to ensure that there was a high vegetable or fruit content, but ensuring that the meal was still acceptable to people who may not eat many fruit and vegetables e.g. 'Pile a pizza up with vegetables, so there's hardly any room for the cheese.'

Second Session - Workshop Seven

John Hancox (Hillhead Children's Garden) leading a discussion on **practice development** based on his experience of working with schools and the Botanic Gardens in Glasgow.

John started by asking the group to comment on what kids, parents, teachers and councils like and do not like in 'how to involve children in a food garden'. This was then brought together in a graffiti sheet. It was divided into 'what everyone likes, what nobody likes, and suggestions'. The group's comments are listed in the table in Appendix Three.

The Children's Garden is a unique food-growing project based at the Botanic Gardens in Glasgow, run by volunteers with no paid staff. It is a voluntary organisation, independent of council. It has 12 raised beds and the initial idea was to divide and allocate beds to school classes or small community groups. In reality it has not been easy to work this way. The reality is a bit more chaotic, but nonetheless successful.

The discussion mainly focused on how to surmount the problems of getting children involved and maintaining their focus. The main problems appear to be that school visits need to be very well organised and dealing with classes of children is a skill, which not all volunteers have. Schools are shut over the summer period when most of the food is ready to harvest, a real problem with school gardens, but a strength of this garden, which is open to the community over the summer.

It also appears that school children visit on day trips and given numbers involved they cannot practically have ownership of particular plants etc. from start to finish. However they do plant seeds, care for plants and harvest, as the season progresses. And then they eat the produce!

Visitors to the garden arriving at different times of the year will see the different stages of the garden's produce, so in part it is a demonstration garden.

The group discussed how to get children more involved in the garden. They agreed this is a unique programme in Britain and would like to see it develop further. The garden has held seed planting days, insect days and volunteer cooking classes using portable cookers. Ideas from the group were to develop seasonal workshops (given in unseasonal times), workshops in schools, use of networking events, use of healthy eating initiatives to building interest and more storytelling events.

The group felt that improvement in gardening skills for school children and communities would benefit Glasgow, as the skills would be transferred to participants own gardens.

Summing up

Reflections on the morning session were given by Kenny MacDonald (Manager, Drumchapel Life), Gaynor Denny (Senior Project Officer, Welsh Assembly Health Promotion) and Anna Craven (Community Food Worker, NHS Ayrshire & Arran).

The breadth of participation in the conference was raised in more than one reflection, with a mixture of old and new faces noted among those taking part.

The enthusiasm of participants to learn from each other and build new partnerships was mentioned, as was a genuine desire to be part of joined-up working.

An optimism that change was possible was noted and an indicator of progress was presented through a local anecdote of fighting breaking out at a community initiative over who was to get the last of that day's supply of Chinese pears!

Afternoon workshops

The afternoon workshops were organised on a different basis from the morning workshops with the time given over to a number of organisations to use. Participants chose from the following options:

Moyra Burns (NHS Lothian) and Elaine Lamont (NHS Dumfries & Galloway), both members of the Scottish Community Diet Project Steering Group, led a session using participatory appraisal techniques to look at what people want from the project in the future. See Appendix Four for full details.

Members of Scotland's Community Retailing Network led a discussion based on their experiences.

The Community Voices Network is a new network, funded by Communities Scotland, which aims to help people from the most disadvantaged communities in Scotland to 'get their voices heard'. Lucy Gillie, manager of the Network led a session to explain how to get involved. Further details are available in Appendix Five.

A workshop giving participants the opportunity to discuss what they hoped would be discussed at the forthcoming Healthy Scotland Convention also took place. A summary of the group's findings is available in Appendix Six.

And for those workshopped-out, there was an opportunity to watch some good practice videos on a range of subjects:

- Engaging Communities in Have a Heart Paisley www.haveaheart.org.uk
- 2. Crisis FareShare Edinburgh www.cyrenians.org.uk/EZEdit/view.asp?MID=152
- Healthy Tuckshop Guide www.forthvalley.scot.nhs.uk/fvhealthpromotion/nutrition/food_schools.htm
- 4. A Celebration of Allotments, Glasgow Allotments Forum
- 5. Organic Farming Food for Life, Soil Association www.soilassociation.org.

Participants List (contact details given where permission received)

Barbara Adzajlic Glasgow City Council 0141 582 0240

badzajlic@st-andrews-sec.glasgow.sch.uk

Carol Anne Alcorn Edinburgh Cyrenians 0131 554 3900

fareshare@cyrenians.org.uk

Maria Allsop Food Standards Agency Scotland 01224 285163

maria.allsop@foodstandards.gsi.gov.uk

Rose Arthur Treetops Nursery 01475 700500

treetops@colloquium.co.uk

Anne Baxter Ruchill Family Project 0141 945 1653

Fiona Bayne Strathbrock Partnership Centre 01506 771848

fiona.bayne@wlt.scot.nhs.uk

Annette Beattie Renfrewshire Food Federation 01505 816600

Linda Boodhna Health Promotion Fife 01592 712812

linda.boodhna@fife-pct.scot.nhs.uk

Lara Boyd First Foods Fast 01899 309070

lara.boyd@phonecoop.coop

John Brennan Edinburgh Community Food 0131 467 7326

Initiative

john.brennan@lhb.scot.nhs.uk

Andrew Broadfoot Stirling Health and Wellbeing 01786 445760

Alliance

info@shwastirling.freeserve.co.uk

Vivienne Brown Fife Council Health Improvement 01592 413951

vivienne.brown@fife.gov.uk

Caroline Buick North Lanarkshire Council 0141 304 1861

cbuick@northlan.gov.uk

Catherine Burns J Sainsbury cathmburns@blueyonder.co.uk

Moyra Burns NHS Lothian 0131 536 3533

moyra.burns@lhb.scot.nhs.uk

Eric Calderwood Retail Consultant

Lynette Clutton Craigroyston Health Clinic 0131 315 2202

lynette.clutton@lpct.scot.nhs.uk

Liane Coia Maryhill Community 0141 946 8464

Health Project mchp@freeserve.co.uk

Jeanie Collier Edinburgh Cyrenians 0131 554 3900

fareshare@cyrenians.org.uk

Caroline Comerford NHS Grampian 01224 558601

caroline.comerford@ghb.grampian.scot.nhs.uk

Anna Cravan	NILIC Aurabina 9 Arran	01204 466001
Anna Craven	NHS Ayrshire & Arran	01294 466901
Mary Cursiter	Healthchoice	0131 226 3534 m.cursiter@btinternet.com
Christine Dallas	Dundee Healthy Living Initiative	01382 522515 christine.dallas@dundeecity.gov.uk
Gaynor Denny	Welsh Assembly Government	029 2082 6293 gaynor.denny@wales.gsi.gov.uk
Gillian Dick	NHS Ayrshire & Arran	01294 466901
Maureen D'inverno	Healthy Living for Deafblind People	01592 412947
Laura Divers	Social Work	0141 287 0714 laura.divers@sw.glasgow.gov.uk
Myra Dolan	Apex Scotland	01698 306500
Annie Dunlop	Milton Food Project	0141 772 7423 anniedunlop@hotmail.com
Derrick Emms	Kirknewton Community Co-op	01506 884585 d.emms@ukonline.co.uk
Maura Ewing	Inverclyde Royal Hospital Dietetics	01475 504313
Maureen Farquhar	Sainsbury's	01542 887635 maureen.farquhar@sainsburys.co.uk
Cath Findlay	Janny's Hoose Healthy Living Centre	01463 226348
Aileen Finlay	East Inverclyde Integrated Community School	01475 715529 aileen.finlay@inverclyde.gov.uk
Anné Gebbie-Diben	Greater Glasgow NHS Board	0141 201 4725 Anne.Gebbie-Diben@gghb.scot.nhs.uk
Sandra Gellatly	Flourish House	0141 333 0099 sandra.gellatly@flourishhouse.org.uk
Tina Gibson	NHS Dumfries & Galloway	tina.gibson@nhs.net
Lucy Gillie	Community Voices Network	0141 564 7600 lucy@zealey.com
Robin Gourlay	East Ayrshire Council	01563 555710 robin.gourlay@east-ayrshire.gov.uk
Tracy Grant	Ruchill Family Project	0141 945 1653
Steve Halkett	Rainbow Family Centre	01475 715724 STH384@inverclyde.sch.uk

Catherine Hamilton Midlothian Sure Start 01875 825826 cathyhamilton@tiscali.co.uk Hillhead Children's Garden 0141 946 7127 John Hancox john@weegarden.co.uk Catriona Harper Govan Health Centre 0141 531 8436 Catriona.Harper@glacomen.scot.nhs.uk 01856 879801 Lynne Henderson **NHS Orkney** lynne.henderson@orkney-hb.scot.nhs.uk Lucy Horton NHS Argyll & Clyde 0141 3140361 lucy.horton@achb.scot.nhs.uk Laura Howell Greater Glasgow NHS Board 0141 201 4988 Laura.Howell@gghb.scot.nhs.uk Jo Hunt Highlands & Islands Local 01381 600205 Food Network jo@blaeberry.org Antonia Ineson Lothian NHS Board antonia.ineson@lhb.scot.nhs.uk Annette Johnston **NHS Grampian** 01224 588601 01556 509877 Irene Scott Johnston NHS Dumfries & Galloway Hema Joshi Gorebridge Health Project 01875 823922 ghealthp@aol.com Tor Justad Scottish Co-op 01463 861412 tor.justad@co-op.co.uk 01475 715669 David Kennedy Inverclyde Council davidkennedy750@hotmail.com Elaine Lamont NHS Dumfries & Galloway 01461 204639 elamont@nhs.net Scottish Consumer Council 0141 226 5261 Mary Lawton mlawton@scotconsumer.org.uk Paul Lawton **Eday Community Enterprises** paullawton@msn.com Lynn Leitch Fife Council 01592 784639 lynn.leitch@fife.gov.uk Bob Litster 01381 622406 Community Retailing Network bob@litster.fslife.co.uk Ellen McCance WECAN! Food for Fife 01592 860555

0141 944 6004

kenny@drumchapellife.co.uk

Kenny MacDonald

Drumchapel LIFE

Heather McGregor	Dundee CHP	01382 513104 heather.mcgregor@tpct.scot.nhs.uk
Micah McGuire	Food Standards Agency	0207 276 8170 micah.mcguire@foodstandards.gsi.gov.uk
Mary MacInnes	Co Chomunn Eirsgeidh Ltd	01878 720236
Sandra Macinnes	Motherwell LHCC	01698 245000 sandra.macinnes@lanarkshire.scot.nhs.uk
Kelly McIntyre	One Plus Thistle Childcare Centre	0141 773 1232
Charlie McKay	Rainbow Family Centre	01475 715724 chm284@inverclyde.sch.uk
Jean Mackay	Jannys Hoose Healthy Living Centre	01463 226348
Samantha McKeown	Food Standards Agency Scotland	01224 285153 samantha.mckeown@foodstandards.gsi.gov.uk
Pamela McKinlay	Roots and Fruits	01875 616337 roots.fruits@btinternet.com
Christina Macleod	Harris Community Co-op	01859 520 370
Caroline McMenemy	Renfrewshire Food Federation	01505 816600
Heather Macneil	Barra Community Co-op	01871 810354
Jessie Macneil	Barra Community Co-op	01871 810354
Susan Mardon	Healthy Living for Deafblind People	01592 412947 hlc@sensescotland.org.uk
Susan Marsh	Deafblind Scotland	0141 777 6111 healthyliving@deafblindscotland.org.uk
Kate Marshall	West Lothian Health Improvement Team	01506 771790 kate.marshall@westlothian.gov.uk
Anne Marsham	Bellshill & Mossend YMCA	01698 747483 annemarsham@rapidplay.com
Mick Marston	Federation of City Farms	01207 562317 mick@farmgarden.org.uk
Aksha Marwaha	Flourish House	0141 333 0099 info@flourishhouse.org.uk
Fiona Matthew	NHS Grampian	01224 558414 fiona.matthew@ghb.grampian.scot.nhs.uk
Elizabeth Maxwell	BITE project	01294 602239 bethstrathdee@btinternet.com

Martin Meteyard	Community Retailing Network	0131 660 0446 martin@pop3.poptel.org.uk
Eleanor Mitchell	Knowetop Community Farm	01389 782734 eleanor@knowetopcommunityfarm.co.uk
Pauline Mole	Gorbals Healthy Living Network	0141 429 0360
Angela Moohan	West Lothian Council	01506 771724 angela.moohan@westlothian.gov.uk
Dorothy Morrison	Greater Glasgow NHS Board	0141 201 4983 dorothy.morrison@gghb.scot.nhs.uk
Joyce Morrison	Harris Community Co-op	01859 520370
Helen Muir	Renfrewshire Food Federation	01505 816600
Debbie Nelson	4WardThinking	0141 881 1296 4wardthinkin@creativemail.co.uk
Elaine Newton	Uig Community Cooperative	01851 672444
Laura Nisbet	University of Edinburgh	laura.nisbet@hotmail.com
Judy Ormond	East Dunbartonshire Council	0141 578 8691 judy.ormond@eastdunbarton.gov.uk
Helen Pank	Federation of City Farms and Community Gardens	0131 623 7058 helen@farmgarden.org.uk
Evelyn Pearson	Parkinson's Self Help Group	01236 747488 evelyn@parkinsonsgroup.co.uk
Angie Pender	Dundee Healthy Living Initiative	01382 522515 angie.pender@dundeecity.gov.uk
Julie Phillips	NHS Grampian	Julie.Phillips@health-promotions.com
Margaret Ann Prentice	Stirling Health and Wellbeing Alliance	01786 445760 info@shwastirling.freeserve.co.uk
Allison Reed	Stepwell In Healthy Living Initiative	01475 726476 allison.reed@renver-pct.scot.nhs.uk
Christine Reilly	Renfrewshire Food Federation	01505 816600
Jennifer Richards	Gorebridge Health Project	01875 823822
Alison Sampson	Sainsbury's	0141 943 1040 Alison.Sampson@sainsburys.co.uk
Lynn Shields	Parkinsons Group	01698 747488 lynn@parkinsonsgroup.co.uk

Heather Sloan	Have a Heart Paisley	0141 587 2479 heather.sloan@haveaheart.org.uk	
Claire Smith	Health Matters for Men	01698 711823 healthmattersformen@hotmail.co.uk	
Lorraine Smith	NHS Lanarkshire	01555 772271 Lorraine.Smith@lanarkshire.scot.nhs.uk	
Sam Souter	Deafblind Scotland	0141 777 6111 healthyliving@deafblindscotland.org.uk	
Andrew Spraggan	Newcastle Nutrition	0191 282 5930 nutrition@trvi.nuth.northy.nhs.uk	
Elaine Sword	Dundee Healthy Living Initiative	01382 832863	
Jan Taylor	Cambuslang and Rutherglen Community Health Initiative	0141 646 0123 jan@healthynhappy.org.uk	
Pauline Vallance	Renfrewshire Council	01505 382546 pauline.vallance@renfrewshire.gov.uk	
Hazel Wallace	One Plus	0141 773 1232	
Alex Wilde	North Glasgow Community Food Initiative	0141 552 8817 ngcfi@yahoo.co.uk	
Diane Wilsdon	RBS Centre for the Older Person's Agenda	0131 317 3395 dwilsdon@qmuc.ac.uk	
Anne Woodcock	Nutrition Standards Project	01382 423000 anne.woodcock@tpct.scot.nhs.uk	
Steven Wray	East Lothian Council	01620 827509 swray@eastlothian.gov.uk	
Muriel Young	Grounds for Learning	01786 445922	

Appendix One

Full notes from the workshop led by Linda Boodhna (NHS Fife) on practice development based on her experience working on applying participatory appraisal (PA) techniques in Dysart.

Linda discussed the Dysart project, which has used PA techniques to engage local people about where they buy food and what they think about this. PA methods of research/consultation/evaluation are non-threatening and are an enjoyable way of engaging people with local planning and can be used with all sections of the community.

The workshop was split into three small groups and each group used PA methods to capture their thoughts about two ideas.

One of the methods was for individuals to write on post-it notes and place them on a pheart shape. The first theme was ideas that people had (or had used for their own projects) for engaging with local people about local food issues on local practice, community planning and national policy levels.

Group One

- community appraisal
- customer feedback
- parents' evening
- school assembly
- kids/parents outside school
- public meetings
- open meetings in community venues
- websites
- community councils/groups
- ♥ linking to existing networks/community groups
- concierge area of flats (PA work)
- local free newspaper

Group Two

- fund raising
- incentives
- research target groups
- planning
- incentives (carrots) and publicity
- marketing
- net-based newsletter to parents
- school events
- strategic events in-line with national campaigns
- open days
- community engagement events
- ♥ local information points/drop-in sessions
- fun days
- parents' groups
- ♥ local health MOTs/health fairs
- men's health/women's health events (in pubs, etc.)

Group Three

- going into local shops and asking shopkeepers about barriers
- speak to people in the street about the issues
- feed back the information to the community quickly
- youth groups
- ♥ food co-ops
- identify people who may want to take part
- cooking courses
- quizzes on healthy eating/caffeine/mental health
- food and mood good foods/bad foods
- ruit and vegetable tasters eat the rainbow
- whole school
- weight management courses 'winning weight'
- community nutritionist
- going into local groups and asking if they have any issues

The second task that groups had was to draw an outline of a body on flip chart paper and attach post-it notes with their ideas on how to get people involved with community planning or food issues on a local or national level. National ideas were placed outside the body and ideas for local work were placed inside the body

Group One

- community appraisal
- don't use the term 'community planning'
- influence through the voice of community groups/networks
- websites evaluation/feedback



campaign media

through community planning

Group Two

- voluntary sector representation
- local councillors
- partnerships
- networking
- local issues
- community involvement in community planning
- community empowerment



MSPs and MPs

Group Three

- whole school
- consultation using PA methods
- cooking courses



free school meals and breakfast clubs national food policy health promoting schools 'Hungry for Success'/free fruit in schools

Appendix Two

A summary of notes from the workshop led by Anne Gebbe-Diben (NHS Greater Glasgow) and Kenny MacDonald (Drumchapel LIFE) on **capacity building** based on their experiences of supporting community cafés in Glasgow.

Summary

A firm interest in developing further work with management committees responsible for community cafés was expressed by the 18 participants. It was clear that the community could benefit, in more than one way, from a community café developed by and including the whole of the community. Including a large variety of individuals and groups would create a sustainable community spirit and sustainable health changes.

Areas of barriers/problems were further identified such as management committees 'being out of tune' with the need for change and what changes are needed. It was also identified that a wider range of groups needed to be involved. (The involvement of a wide range of the community and groups with disabilities was identified as lacking.)

However, solutions that provided clear directions of how to progress further were identified.

Management committees need to consult with and within the whole community on how to move forward, investigate local and consumer trends, and produce a business plan.

- Develop clear objectives, aimed at assisting the committee to focus on their work.
- 2. Great care must be taken to ensure that a wide range of people are involved in the development of objectives and a business plan that is community led (and extra effort must be taken to involve groups with disabilities).
- Targeting management committees with tailor-made training with the purpose of enabling them to successfully act as an 'Agent of Change' for the benefit of the whole community.
- 4. Working with a wider range of partners can help to achieve sustainable objectives more in line with strategic changes.

Appendix Three

Full notes from the workshop led by John Hancox (Hillhead Children's Garden) on **practice development** based on his experience of working with schools and the Botanic Gardens in Glasgow.

John started by asking the group to comment on what kids, parents, teachers and councils like and do not like in 'how to involve children in a food garden'. This was then brought together in a graffiti sheet. It was divided into 'what everyone likes ©, what nobody likes ③, and suggestions ⑥'. The group's comments are listed below:

- good publicity
- happy, well-behaved children
- © safe environment
- organisation and planning
- fresh fruit and vegetables
- educational
- © free
- hands-on activities
- participation
- ⊕ fun
- health and safety concerns
- children not following instructions
- ⊗ chaos
- unhappy children
- accidents
- waste of time and effort
- no partnership working
- children to visit an exisiting project
- bring children all together

Appendix Four

Full notes from the workshop led by Moyra Burns (NHS Lothian) and Elaine Lamont (NHS Dumfries & Galloway), looking at what people want from the project in the future.

SECTION 1: WHO ARE YOU?

• WHERE ARE YOU FROM?

AREA	LIVE (No of responses)	WORK (No of responses)
Borders		
Dumfries& Galloway		
Greater Glasgow	5	5
Argyll & Clyde	1	1
Ayrshire & Arran		
Lothian	2	2
Lanarkshire		
Fife	3	2
Highland		
Western Isles		
Orkney		
Forth Valley	1	1
Tayside	1	1
Shetland		
Grampian	1	1
Scotland Wide		1
UK Wide		1
Other		
TOTAL	14	15

• AGE & GENDER

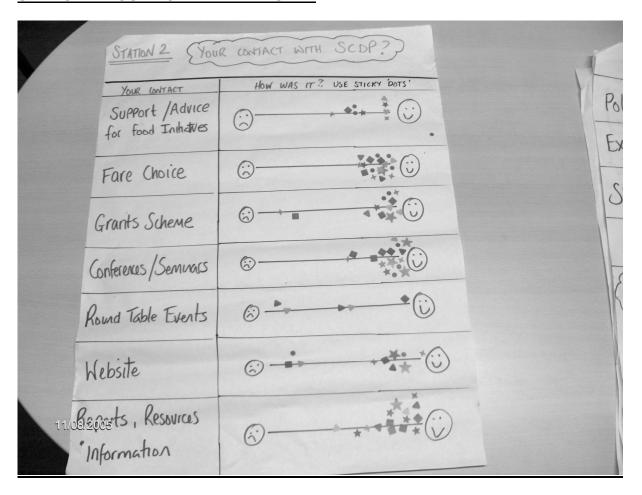
AGE	MALE	FEMALE
16 – 25 yrs		
26 – 35 yrs	1	5
36 – 50 yrs	1	5
51 – 65 yrs	2	3
66+ yrs	1	

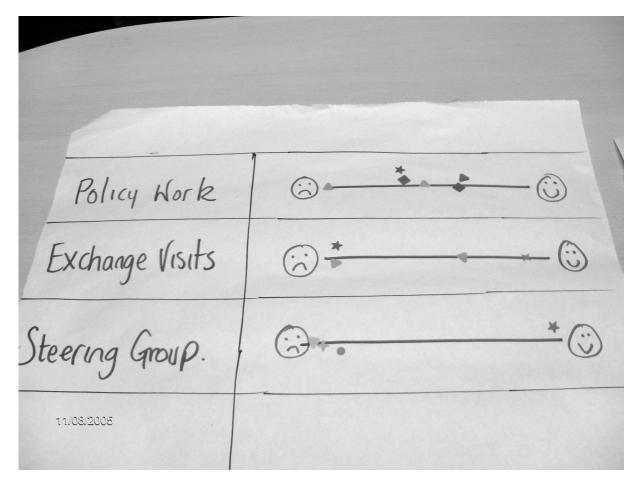
• WHO ARE YOU REPRESENTING?

ORGANISATION/AUTHORITY	NO. OF RESPONSES
Community Representative	
Community Food Initiative	5
Community Initiative e.g. HLC, SIPs	
etc.	

Voluntary Sector Organisation	5
Local Authority	1
Health	7
National Agency	
Other	

SECTION 2: YOUR CONTACT WITH SCDP





OTHER COMMENTS:

- supported us to get established, fought our corner
- o grant scheme simple and straightforward, not time consuming
- website needs updated
- o don't know who are in the steering group and how to contact them and how, apart from today has the steering group linked with other users/groups
- o can SCDP help with food and behaviour research work?
- o website is a great facility for accessing resources (e.g. reports, Fare Choice etc.) but could be updated and be more interactive
- o no idea who the steering group are!
- o round the table events can be better capitalised by feeding into policy work
- o there would be very little CFIs in Fife were it not for the small grants
- o great staff, great support, well done!
- o always a friendly voice on the phone
- o participatory appraisal residential at New Lanark fantastic experience, both in terms of learning and personal development.
- o policy work has been the weakest area of development
- o useful to contact with queries by email or telephone nothing else like it.
- o helpful when I phone up to ask questions
- o staff are very, very helpful
- o funding for the evaluation of our PA work
- was involved in the residential PA course
- support inter-agency work
- help raise awareness of work to local authorities by support

o no reflection on the people I have met on the steering group, but I never knew it existed!!

SECTION 3: WHAT DO YOU THINK THE SCDP SHOULD BE DOING?

- keep us informed of policy changes
- o emphasise the value of food projects in community work
- o training in various food issues for volunteers etc.
- nutrition training
- o value local action research as well as the academics
- website needs updated and modernised
- o SCDP needs to be more widely publicised especially to voluntary sector
- keep up the good work, staff are very helpful anytime I have contacted SCDP
- building on good work already doing
- o continue good work
- continue to be accessible and community focused
- up-to-date directory
- o raise profile within communities
- o more PA work
- large network meeting Scotland wide
- o raise SCDP awareness at local level
- smaller focused network events
- o provide a network for CFIs
- o networking beyond food initiatives e.g. with mental health policy/workplace etc.
- share your good work with Northern England
- o drive policy for food at community level
- o visit communities, meet people
- bring similar interest groups together
- o acting as a link between individuals/initiatives and Scottish Executive
- continue with Fare Choice newsletter
- provide links to regional community dietitians and others who can support local projects.

SECTION 4:

CAPACITY BUILDING - WHAT DOES THIS MEAN TO YOU?

- o do all organisations require this?
- o working in partnership to all agencies' advantage
- foundations for growth
- o having faith in community opinions
- o professionals need this more
- o this is one I struggle with jargon, different people use it in different ways
- strengthening structures
- o usually applies to local community should it?
- o a lot of nonsense if it is not captured/embraced and used. eg training people and then not putting their skills into practice
- coping mechanism of sorts
- o developing groups and their taste/confidence
- o valuing the work done by communities at whatever level
- o finding the right people
- o giving people hope and the courage to change their lives

- expansion of work that is sustainable
- o practical skills which make them work
- o jargon!
- o enhance knowledge and skills
- making it bigger

ENGAGEMENT - WHAT DOES THIS MEAN TO YOU?

- o dialogue should be commitment
- o don't engage if it is not followed up, but action could be part of consultation
- o make sure it is what people want not just the community activist view
- o shared experience
- o linking people/project together
- o why?
- meaningful involvement
- working with people at their level
- o actually going to people who are hard to reach
- o connecting with people on their level
- beyond the usual suspects
- o should be worthwhile
- raising profile
- o mutually beneficial
- o working with people (communities), not for them or to them
- o sharing, networking, linking together
- o a period before marriage (more jargon!!)
- o meeting people
- o finding out what people want
- sustainable
- o hopefully inspire new projects to get started in various communities
- o top down, bottom up
- o ought to be PA and sharing
- building relationships.

PRACTICE DEVELOPMENT - WHAT DOES THIS MEAN TO YOU?

- learning from each other
- o ? (Don't know!!)
- alternative to strategy
- o utilising opportunities through our networks
- o expanding the work you're currently doing or starting a new piece of work
- o not much
- o training on the job
- o sharing good practice
- o skills and learning to help progress the work we do
- o learning and growing as a worker through our experience
- support and information
- o improving the way we/you work and furthering our skills

- expanding on work that has gone well
- spreading the word
- working and learning
- means different things to different people
- o moving forward add on value
- sharing good practice and acknowledging that of others, not pinching an idea and pretending it was yours!
- o means nothing more than guidelines, practices change, when applied to new area.

SECTION 5:

ANY BURNING ISSUES/QUESTIONS?

- localised networks
- o can you change your name?
- o could it not be mainstreamed?
- o SCDP how do they work with you?
- o find mechanisms to make contact between events
- o would that take away independence?
- o small grants scheme is an excellent resource for new initiatives
- o need more facilitated contact with other projects
- o promote SCDP at local level, raise awareness
- o despite networks, there are still more contact and partnership working needed
- o the shopping bags are a brainwave! Very environmentally friendly, well done
- o how do you get on the steering group?
- o still not quite sure what SCDP do
- Glasgow projects need to work together better
- o we need the conference report quickly within one month of conference!!
- o need more facilitated contact with other projects
- o what happened to the REHIS?

Appendix Five

The Community Voices Network

The Scottish Executive is committed to people in Scotland having a greater say in how services that affect their lives are planned and delivered.

Community Voices Network is a new network, funded by Communities Scotland, which aims to help people from the most disadvantaged communities in Scotland to 'get their voices heard' and play a bigger role in the decisions which will affect the regeneration of their communities.

The network will help communities to learn from each other about different approaches to community regeneration and give them the opportunity to influence national and local policy by providing a collective 'voice' for community concerns and issues.

What is the purpose of the network?

The purpose of this network is to:

- o support individuals to get involved in the regeneration of their communities by building their knowledge, sharing information and learning from each other about 'what works' in community regeneration; and
- o provide a mechanism to enable communities to influence national community regeneration policy and practice.

Who is the Community Voices Network for?

The network is for people who play an active role in improving their communities on a voluntary basis - community representatives on local partnerships, people on management committees and others involved in community projects.

The network is aimed at people who live in the most disadvantaged communities in Scotland (these are defined as communities that are the focus of Regeneration Outcome Agreements).

However, the network will actively encourage people from other under-represented groups to get involved, such as people from black and ethnic-minority backgrounds, young, elderly and disabled people, and people from isolated rural communities.

For more information about the current programme of networking and learning events visit www.community-voices.org.uk or call 0141 564 7600. There is a fund to assist with participation costs.

Appendix Six

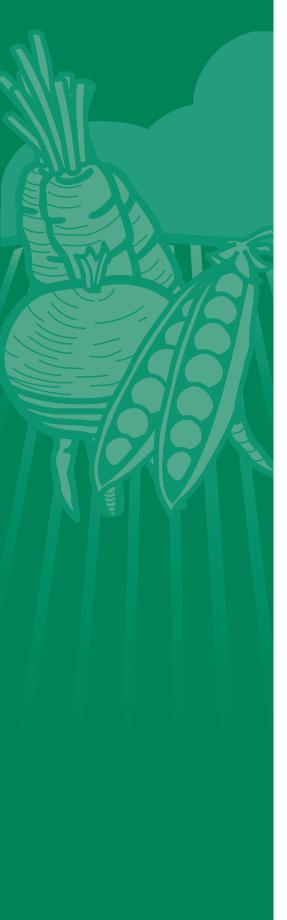
Comments from the afternoon workshop on the forthcoming Healthy Scotland Convention.

Participants were given the chance to discuss what they most hoped would be addressed by the Healthy Scotland Convention which was meeting a few weeks later.

Two key common themes were raised by this small workshop.

Ensuring the evolving community planning systems and structures enhance joinedup thinking, co-ordination and networking. It was felt that circumstances seemed to differ from area to area but that it was how community planning behaved that made the difference, not simply its existence. Encouraging a productive relationship between national targets, regional strategies and community planning was seen as essential.

Investing in a better understanding of community activity, motivations and outcomes was raised as crucial to underpinning effective planning and support, not only for community initiatives but also the volunteers within them. Outcomes such as increased confidence and critical awareness were felt to be undervalued and the social side of food initiatives often ignored.



Scottish Community Diet Project c/o Scottish Consumer Council Royal Exchange House, 100 Queen Street Glasgow, GI 3DN

tel: 0141 226 5261

fax: 0141 221 0731
e-mail: scdp@scotconsumer.org.uk

www.dietproject.org.uk

