



community
food and health

(scotland)

From the ground up

A snapshot of community and voluntary contributions to
improving maternal and infant nutrition in Scotland





Community Food and Health (Scotland) aims to ensure that everyone in Scotland has the opportunity, ability and confidence to access a healthy and acceptable diet for themselves, their families and their communities. We do this by supporting work with and within low-income communities that addresses health inequalities and barriers to healthy and affordable food.

Barriers being addressed by community 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 the shops

Skills – improving confidence and skills in cooking and shopping

Culture – overcoming engrained habits

Through our work we aim to support communities to:

- Identify barriers to a healthy balanced diet.
- Develop local responses to addressing these barriers.
- Highlight where actions at other levels or in other sectors are required.

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

From 1 April 2013 CFHS becomes part of NHS Health Scotland, a Special Health Board with a national remit to reduce health inequalities.



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Background

The Scottish Government wants to ensure that “all children have the best possible start in life, are ready to succeed and live longer, healthier lives”.¹ To help achieve this outcome the Scottish Government has developed ‘Improving Maternal and Infant Nutrition: A Framework for Action’², led by a multi-sectoral strategic group of which CFHS is a member.

The policy was launched in January 2011 and is aimed at a wide variety of organisations with a role in improving maternal and infant nutrition in Scotland.

“There are many partner organisations but, primarily, the NHS, local authorities, employers, the community and voluntary sector have the most opportunity to influence behaviour change. The Framework is aimed at policy makers within these organisations as well as frontline staff and volunteers.” Improving Maternal and Infant Nutrition - A Framework for Action introduction

“The outcomes cannot be achieved without effective and sustained partnership working between all statutory and voluntary organisations, so the actions that have been identified should be seen as relevant to all sectors.” Shona Robison MSP, Ministerial Foreword

The target groups, as set out in the Improving Maternal and Infant Nutrition Framework, are:

- parents, pregnant women, women of child-bearing age and children under three
- mothers, young mothers and mothers with additional needs, within low-income communities, that research suggests will have poorer health outcomes as a result of poor nutrition and unhealthy weight
- carers - partners and families.



1 www.scotland.gov.uk/About/Performance/scotPerforms/outcomes

2 <http://scotland.gov.uk/Publications/2011/01/13095228/0>

Aims of research

The research aimed to evidence a snapshot of the contribution of the community and voluntary sector to delivering priorities set out in the Framework. The overall aim of the study was:

- to gather an understanding of the actual and possible work underway in community settings by scoping the range of activity undertaken, and from this to develop a snapshot of the resources utilised (or required) by initiatives to deliver activities that support the implementation of the Improving Maternal and Infant Nutrition Framework; and
- to support the above research by providing a snapshot of the range of community initiatives delivering services that contribute to implementation of the Framework.

Who did it and how?

CFHS commissioned Rock Solid Research in partnership with Communicable Health to undertake this research. Potential contacts were provided and identified for selection to be interviewed for the research. Within the time of the research the response rate for completion of interviews was approximately 54%.

The research was carried out between February and March 2012. The specific tasks involved included:

- A scoping study using semi-structured telephone interviews to explore activities in relation to maternal and infant nutrition.
- Contacts were drawn from a selection of projects on the CFHS database that met the following criteria: their location; they worked with women, mothers and families under four; they delivered some activities that focused on reducing health inequalities by improving maternal nutrition, breastfeeding and infant nutrition.

- Selection of six areas for in-depth qualitative telephone interviews. These were selected to represent different types of local authority areas (urban, mixed urban/rural, rural mainland Scotland, and sparse rural islands), about which CFHS wanted to increase its knowledge of activities being delivered by the community and voluntary sector. These were:
 - Dundee (urban, East of Scotland)
 - West Dunbartonshire (mixed urban/rural, West of Scotland)
 - East Ayrshire (mixed urban/rural, South West Scotland)
 - Argyll and Bute (rural mainland, South West Scotland peninsula/islands)
 - Highlands (rural mainland, North Scotland)
 - Western Isles (sparse rural islands, North West Scotland).
- Developing six snapshots of local activity based on in-depth qualitative telephone interviews exploring the activities being developed and delivered.
- Developing snapshots examining resources available and support required to support the implementation of the main priorities of the Framework.

The snapshot

The research compiled by Rock Solid Research and Communicable Health is available in a separate document alongside this report. This report (as well as the research) represents a small example of activity that supported maternal and infant nutrition in a particular point in time - spring 2012. The resources for this research were limited, as was time. On that basis this report does not provide a comprehensive collection of groups and activities – there are many more doing similar work in the same and other areas. The majority of examples included in this report were activities CFHS were not aware of at the time. There are many other examples that have been reported on in other CFHS publications such as our newsletter, Fare Choice, and case studies, and at networking events. These can be accessed by visiting our website www.communityfoodandhealth.org.uk.

This report does not intend to provide detailed analysis of activity and its impact. There are also gaps in relation to specific communities that are involved in activities, eg. parents and families from minority ethnic communities. Further studies and development work are in progress to collate and develop activities with other groups as well as the impact of activity, which will be reported on separately in the future.



A flavour of the range of activity that supports the delivery of the framework

Who

Most of the organisations interviewed were from the community and voluntary sector and others were community-based projects supported by local health boards or local authorities. Some were delivering food and health activities as their main focus and others provided activities as part of a wider remit.

Most organisations are targeting more than one client group, eg. pregnant women, young parents, families with young children, families with older children, and families with other health needs. A significant number of those involved in the research deliver core activities that relate to targeting groups that are particularly relevant to the Improving Maternal and Infant Nutrition Framework: pregnant women, young parents, and parents with children under three years.

Groups being targeted

As shown in Figure 1 below, for 20% of organisations taking part in the study their main client group is families in general, and for a further 21% it is families in low-income communities.

Figure 1. Client groups core to services delivered by organisations

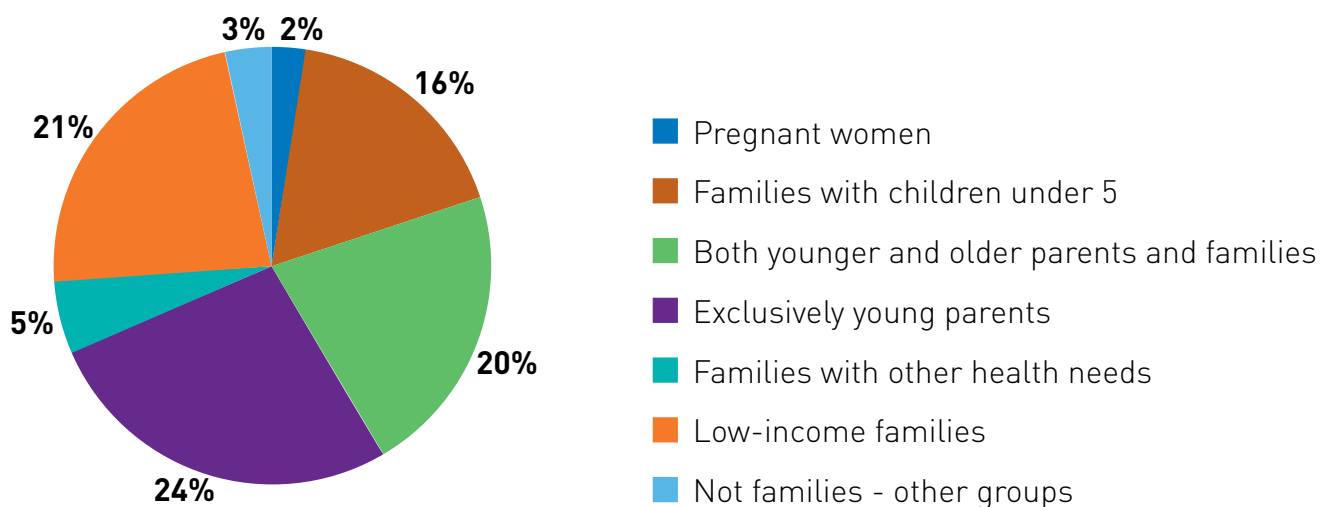
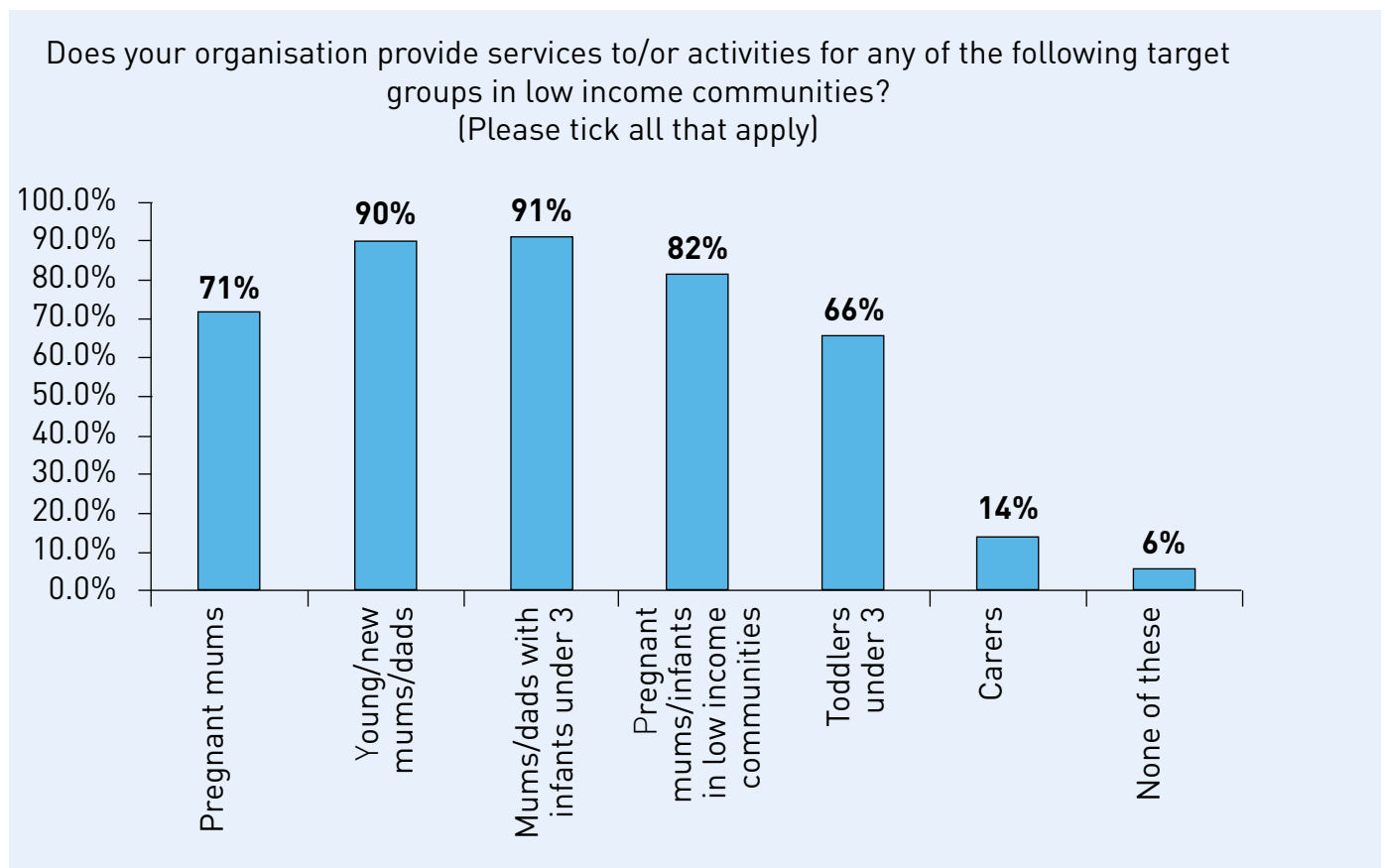


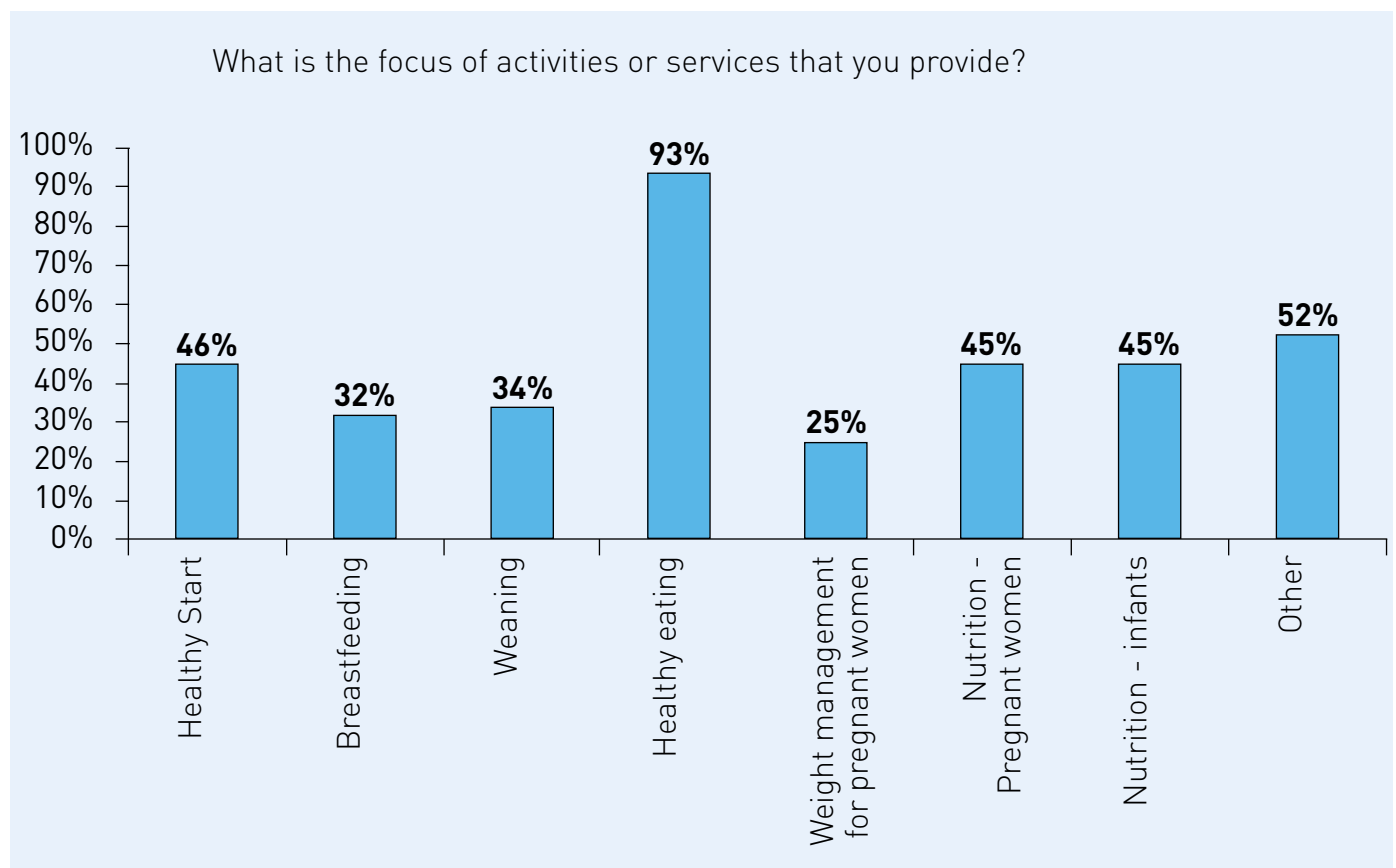
Figure 2 shows that 91% of organisations involved in the study work with parents with infants under three years including young parents. Others are providing training, information and advice to organisations delivering work on maternal and infant nutrition. 82% work with pregnant mums and infants in low-income communities. 14% of organisations also work with carers. These tend to be voluntary sector nurseries, playgroups and family centres. The scoping study also included 20 respondents that were not strictly from community and voluntary sector organisations but were from community-based projects of public sector agencies, eg. breastfeeding peer-support groups.

Figure 2. Groups being targeted



Focus of activities

Figure 3 shows that the main focus of activities delivered by community food and health initiatives is support with healthy eating (93%).



The healthy eating activities relevant to this research are specifically in relation to:

- nutritional needs of pregnant women, babies, infants, children and families
- infant feeding and weaning

Practical support includes:

- cooking sessions and food activities
- learning about nutrition, especially in relation to maternal and infant nutrition
- family cook-and-eat-together sessions
- information and support services
- support groups, eg. mother and toddler groups, parents groups, drop-ins
- growing food

- peer support
- one-to-one support
- breastfeeding support
- promoting Healthy Start

Many of the organisations provide budgeting support as part of their activities, to enable communities to manage limited financial resources, and shopping visits to look at and purchase ingredients. Others include sessions with welfare rights projects to enable benefit checks and maximise income, especially with vulnerable families.

Table 1. Examples of activities

Services	Examples
Nutrition for pregnant women	Healthy eating for parent and baby Healthy eating with young women
Healthy Start	Promoting Healthy Start Cooking classes to show what can be made from produce purchased with Healthy Start vouchers
Breastfeeding	Home visits and support to young mums Advice/information on healthy eating to breastfeeding mums.
Weaning	Introducing infants to solid foods at the right time Preparing foods suitable for weaning Family support with weaning including family meals Providing cooking equipment for parents who are weaning babies
Healthy eating	Nutrition information and needs of target groups Practical cooking classes focusing on maternal and infant nutrition Parents and children cooking together Delivery of 'confidence to cook' courses Community café/breakfast clubs Cooking from community growing projects Shopping and cooking sessions on low budgets Cooking family meals
Nutrition - Toddlers	Preparing healthy snacks with parents for home and nursery Families cooking together

Other

Growing projects – learning about where food comes from and preparing it
Food co-ops
Carbon footprint and food waste

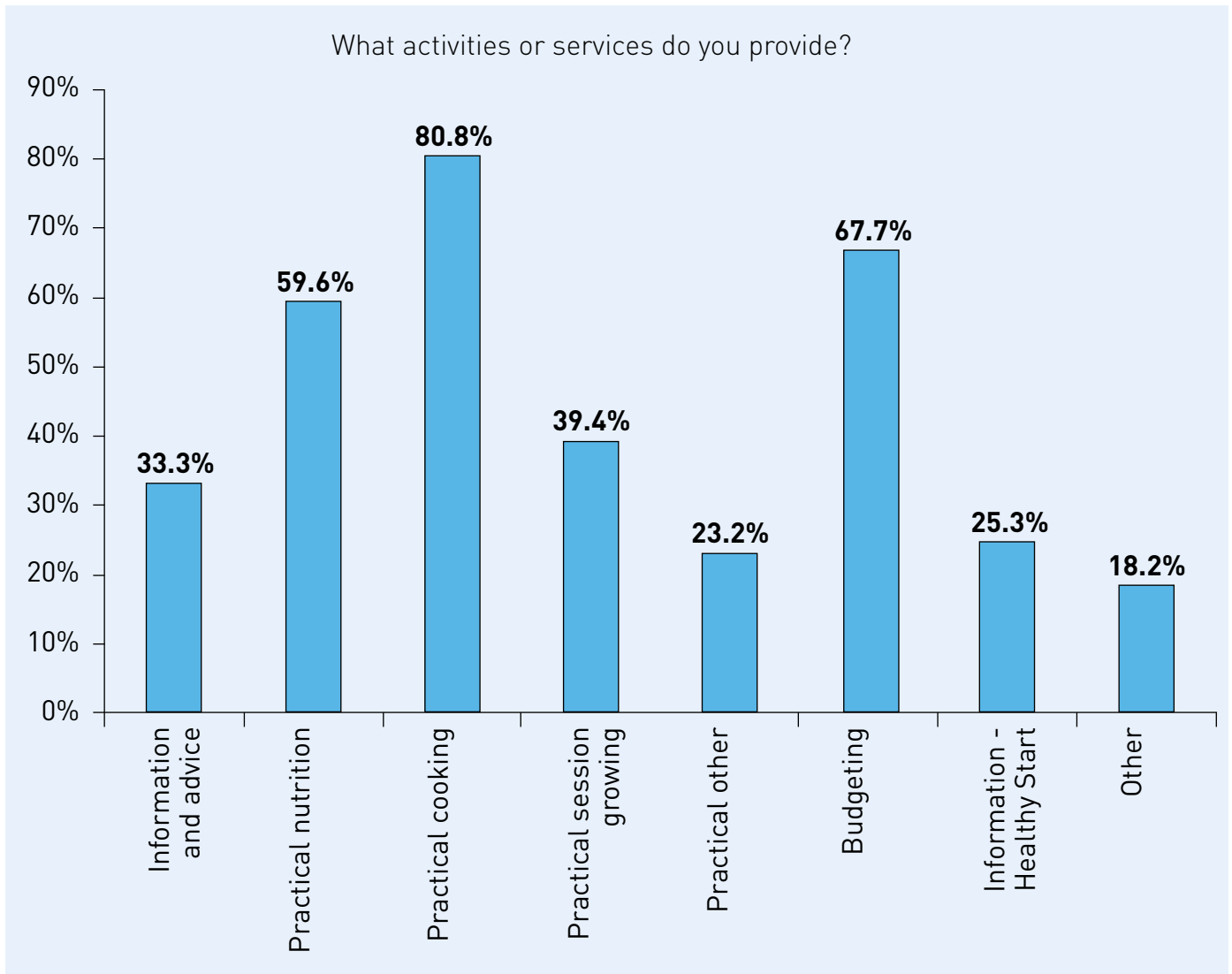
Addictions support

Support for homeless families

Parenting and budgeting skills.

Figure 4 shows that the main services offered revolved around practical cooking sessions and activities. 81% provide cooking opportunities, and 60% practical sessions in nutrition. Other examples of practical help provided include support for shopping trips to look at, budget and purchase ingredients, and encouraging families to cook and eat together. Not surprisingly, in low-income communities support with budgeting is provided by two thirds of organisations (68%).

Figure 4. Activities and services provided



Snapshots of activities

Urban and mixed Rural areas

Dundee and Tayside

Angus Healthy Happy Communities Project (HHCP)

A collaboration between NHS Tayside, Angus Council, the voluntary sector and the community, that focuses on the importance of nutritional health, particularly for women of child-bearing age, pregnant women and the under-fives. HHCP is using a model of practice that relies on the development of shared values and approaches between professionals and communities. This collaborative approach is being used to build community capacity and equip communities with additional skills and knowledge in relation to health and nutrition in the early years. Activities include:

- **Cooking Together** - a peer support programme for young parents and children to learn how to cook together. Cooking sessions take place once a week in the lifestyle unit in Angus College with a small core group of trained peer supporters working with vulnerable mothers. Referrals are taken from Health Visitors and Family Support Centres.
- **Healthy Start Cafés** - support groups in Forfar and Brechin where mums can meet other mums and receive support and advice on nutrition, health and lifestyle, including breastfeeding and weaning. An early years worker, other workers, and volunteers have supported the women in the café. The programme of activities at the café is chosen by the participants and relates to their needs and interests. Approximately 17-20 mums attend the cafés with their babies. HCCP staff and volunteers have experience of many relevant maternal and infant nutrition issues so concerns and queries can be discussed anytime. The 'Healthy Start' scheme is promoted at both cafés and parents are supported to access the vouchers.
- **Community Allotment** - this project aims to develop skills and knowledge around

growing, cooking and nutrition for young families and to train workers, volunteers and community members who are involved in the care of under-fives. The main engagement with children comes from a number of young families of volunteers who make use of the allotment with the largest (in number) of users being children from three local nurseries who have 100 children growing plants in the allotment for use in the nurseries' educational work.

HELM and NHS Tayside

Helm is a charity based in Dundee that provides a supportive learning service for people, especially young people, who face barriers to developing sustainable careers. Its training kitchen and café provide a training hub for young people.

Working with NHS Tayside, Helm runs a range of cooking classes for young women, two for young parents, and one for young women who attend the Dundee Centre under the banner of the Improving Maternal and Infant Nutrition Framework. This programme aims to improve the nutritional knowledge and skills of women of child-bearing age and those with young families.

Nutritional training has been provided to over 150 women and young parents. Support has also been provided to pregnant women with a BMI over 40 and outreach information sessions on nutrition to women and their families in Tayside.

Helm also has links with other local charities and organisations and provides further advice to a wider audience of young women in the city on how to improve their nutrition and, where relevant, that of their families, by encouraging breastfeeding, weaning, uptake of Healthy Start vitamins and vouchers, and providing cooking lessons and resources that will help them in the future. The project has also delivered some interesting sessions to parents of the future, eg. male and female learners at Helm to raise awareness of breastfeeding.

The Growwell Roadshow in 2011 (outreach work) worked with 76 young parents through its cooking sessions and a further 60 parents accessed nutrition information.

In 2012 funding from Awards for All supported Helm Health Roadshow to provide information and support to families on nutrition and the distribution of free Healthy Start Vitamins to children whose parents receive benefits. The Roadshow visited toddler groups, family centres, schools and nurseries. Through funding received from CFHS, the Growwell Project has been able to develop a recipe meal planner, which is now available and being distributed.

West Dunbartonshire

Y Sort-It

Y Sort-It is an information and support service for young people based in Clydebank, also covering Dumbarton and the Vale of Leven. Its weekly Young Mums 2 Be group provides support, information and advice to pregnant women and new young parents at its base in Clydebank.

The group is facilitated by a youth worker from Y Sort-It and local midwives from the West Dunbartonshire Young Families Support Service deliver a whole range of activities including health checks, advice, baby care and more. Mums who attend are between 15 and 20, with young mums referred to the group by local midwives. The focus is on keeping healthy during pregnancy, including eating healthily, nutrition and oral health. Discussions can cover the whole range of pregnancy issues, as well as being a mum, and other health issues such as mental health. Youth workers facilitate other sessions, like budgeting and themes relevant to young people.

When there is enough interest and resources Y Sort-It can run a drop-in Young Persons Toddlers Group in Clydebank with support from a youth worker and health visitors. The local NHS oral health and nutrition team can also provide an input to the group especially around weaning – preparing fresh and healthy food for weaning babies. The health visitor can support other parenting issues such as baby massage and safety in the home.

Dumbarton District Women's Aid

This project provides support through its refuge and a follow-on service to women in their own homes. The women who are supported may have poor nutrition that can impact on their families. The project approached its landlord, a local housing association, to support it to develop a vegetable garden. With a grant from CFHS to cover set-up costs, the aim of the project is to help the women learn about cooking from the vegetables grown. A short-term project, the 'Roots to Confidence Course', was developed from this with local partners. This course has focused on bringing mums with young children together to learn new skills around cooking, healthy eating and growing food.

East Ayrshire

The snapshot of practice in this area identified a number of approaches to the promotion of maternal and infant nutrition. As in other areas community and voluntary sector work in communities was often part of, or an outcome from, a network of activity, training and support from NHS and Local Authority staff, much of it driven by the local strategic direction of the Ayrshire and Arran Maternal and Infant Action Plan. In East Ayrshire much of the work within the community has grown from the training and support offered by the public health dietitians. Many early years and community workers having taken one and two day community food work training courses run by public health dietitians. Royal Environmental Health Institute of Scotland (REHIS) Food Hygiene and Food and Health (nutrition) courses are run in local colleges and accessed by local community workers and community members. Examples of the work developing from this can be seen in the following groups.

The Mums, Bumps and Babies Group

This group meets in the NW Area Centre (NHS/ Local authority services hub) with a range of community facilities and services incorporated. Mums, Bumps and Babies developed from a group for young pregnant women that met in a local community centre as part of a social marketing pilot programme supported by Health Scotland and NHS Ayrshire and Arran.

This informal group (about 10 mothers and children) provides a support network for the mothers and an opportunity for them to interact with a range of local workers around food, feeding and health. East Ayrshire Council funds a community development worker, who works with the mothers to organise activities and provide input around health and nutrition topics. The accommodation is provided free by the Centre and a range of NHS staff such as community food workers, midwives, health visitors and oral health workers are involved. The group is in the process of being evaluated.

Community cafés and food provision activities

Groups like Mums, Babies and Bumps can be seen as part of a developmental progression in community based food work. Local and national support for, and local workers interest in nutrition, is resonant with community interest in food.

This can be seen in the development of local small scale community cafés. They support volunteering and provide a focus for interest in food. Cooking and cooking with kids is one of the key themes of community learning and development services, and they have developed a 'cooking with kids' pack.

Many local churches are becoming involved in provision of food through coffee mornings and lunch clubs and they are reaching out to wider audiences, including families with younger children. Kilmarnock churches have also taken on the provision of breakfast for some homeless clients, which again often includes families.

C'mon Catrine

Another example of broad based nutrition work which built on the network of support available in East Ayrshire, is C'mon Catrine. Its aims were to raise awareness of the benefits of eating a healthy diet, being more active and maintaining a healthy weight. C'mon Catrine was identified as a pathfinder community with support from the Healthy Weight Community funding stream. Within this project a theme was community based work with mothers and children. As well as work in the schools, nurseries and wider community (fun days

and social marketing activities) there was a number of targeted activities around cookery skills and infant feeding. This was as part of a series of structured general cookery classes, which aimed to raise cooking skills and health literacy levels across the community.

Rural areas

Argyll and Bute

Home-Start MAJIK (Mid – Argyll, Jura, Islay and Kintyre)

This project is part of the Home-Start UK network that recruits and trains volunteers to support families in the community, particularly those with a child under five, using a whole family approach. Volunteers, who have parenting experience themselves visit families in their own homes to offer support, friendship and practical assistance. Volunteers help families to cook healthy, affordable meals from fresh produce. Older children help with menu and shopping planning, using a visit to the shops as a fun activity they can do together.

MAJIK works across the communities of Mid-Argyll, Jura, Islay and Kintyre.

Playgroups and voluntary nurseries

Apple Tree Nursery, Meadows Under Fives, Cairndow Community Childcare, MidArgyll Early Learning Folk, and Little Learners Nursery

All are actively promoting healthy eating as part of the care of the infants and toddlers attending their centres, as well as attempting to influence the practices of parents. This is in line with 'Nutritional guidance for early years: food choices for children aged one to five years in early education and childcare settings'¹. They cater for babies from birth or infants from one year upward, and either provide healthy lunches or promote healthy snacks and lunch boxes.

Apple Tree Nursery in Rothesay is an eco-school and has been awarded Health Promoting School Level 3. The nursery has a greenhouse for producing food and also sources food within the local community.

1 www.scotland.gov.uk/Resource/Doc/89729/0021563.pdf

Healthy eating is promoted to parents from the start with guidance on what to include in a healthy lunch box provided and discussed at parent nights. Breastfeeding mums can feed babies at meal breaks.

MidArgyll Early Learning Folk in Lochgilphead

is guided by Curriculum for Excellence and therefore provides healthy activities for the children. It has a healthy eating policy including guidance to parents on what should be provided in lunch boxes. As well as its pre-school playgroup and after-school club, it runs a drop-in crèche for adult education classes, a baby and toddler group, and a drop-in lunch club for pre-school children.

Little Learners Nursery in Oban has a strong focus on healthy eating for infants and toddlers that attend. Facilities are also provided for breastfeeding mums.

Highlands

Breastfeeding Peer Support

This project has been developed by NHS Highland's Infant Feeding Advisor, beginning with a pilot project in Inverness. Twelve local women completed an externally accredited course from the National Childbirth Trust (NCT). This pilot group has supported new mums by telephone and feedback on the support provided has been very positive. Since the pilot 104 women have been trained as breastfeeding peer supporters using the NCT and also the Breastfeeding Network (BFN).

Areas for breastfeeding peer training were linked to Highland areas of poor breastfeeding rates and deprivation. Peers mainly use telephones to contact breastfeeding women, although support groups have been effective and well-attended in areas with larger populations such as Dingwall and Inverness.

Working in a remote and rural area there have been developments in social media to allow the peer supporters and the NHS staff to keep in contact and they now have both public and private facebook pages to keep everyone informed. The project has a high media profile and NHS Highland communications staff have fully supported frequent media releases to

raise the profile of the peers and also the Baby Friendly Initiative.

Pultneytown Peoples Project, Wick (PPP)

This project was started by the community to provide services and improve facilities in the area. PPP works with the whole community through all life stages and provides after-school care, youth services, tenancy support to young people, community education, training schemes and a range of community supported activities.

The Mum's Fun Group was funded by the Highland Adult Literacy's Partnership and meets once a week. Young mums get opportunities to try a wide range of activities. The mothers have looked at cooking and weaning, maths and budgeting. There are other opportunities to learn about food and nutrition through PPP's housing support work with young mothers in partnership with HomeLink Caithness and through its men's cookery group. The development of a training kitchen and a café in PPP's new premises will help develop food work.

Ormlie Young Mothers Group – Thurso

This group was developed by Ormlie Community Association Ltd. and supports 40 families in Caithness for mothers from 16-25. A crèche is provided for the children and crèche workers include activities around healthy eating as part of their work with the children. The project focuses on the needs of young mothers through a wide range of life skills including training, volunteering, healthy living initiatives, basic child development and other issues relevant to this group. Group members are actively involved in the development of the project. Cooking and eating has been a strong theme. It is hoped to get the mothers to sign up for Individual Learning Accounts to facilitate and organise a college course on cooking skills on a budget. The group is developing a childcare and family resource training pack through its work with parents and parenting skills as well as infant feeding.

Western Isles

Examples of community and voluntary sector activities were identified, which included input by NHS staff on a voluntary basis in support of food and health activities. Other initiatives in the Western Isles include a growing project in Uist, and childcare projects that promote healthy eating.

Action for Children provides a wide range of services for children, young people with special needs and their families across the Western Isles. Its community-based services include support for up to 20 young parents. This involves activities that promote independence and healthy living, eg. cooking on a budget both on a one-to-one basis and through group work. The Pathway Nutrition Group for young people offers cooking sessions led by Action for Children and Health Promotion staff from NHS Western Isles. It gives out guides on how to cook from scratch with fresh food and how to source cheaper food. Health Promotion staff also work with young women in a residential unit, many of whom may have families of their own in the future. Action for Children is also developing a vegetable garden involving young people from the residential unit, the community and disabled young people. The garden will provide learning and practical activities, from planting seeds to cooking and eating fresh produce grown.

Pointers Young Mums Group

This group meets in a local youth centre café on a weekly basis. Young mums, mainly under 25, are supported to gain confidence and learn new skills in order to give their children the best start in life. This group has received funding from CFHS to deliver food and health activities and is supported by NHS Western Isles Health Promotion staff. A crèche is available for the children, as many of the young mums do not have wider family support networks. Transport is also provided to support the mums and their children attend the group regularly.

Young mums learn about nutrition and budgeting and put their learning into practice through practical cooking sessions. Food cooked is taken home and shared with their families. A key outcome of this activity is increasing the nutritional health of young mothers and their children and home-prepared meals helps to achieve this. The group members receive cooking equipment such as blenders and slow cookers. Staff and NHS Western Isles have promoted entitlement to Healthy Start vitamin vouchers to the group.

A key element of the group is that the mums get to meet other young mums and get advice and support from other services.

Summary

Support for young parents is a theme running through many of the activities highlighted in the research working with young males as well as females.

There are many agencies making a contribution to improving maternal and infant nutrition. These initiatives are promoting a cultural change in attitudes to nutrition among future parents.

An analysis of resources utilised (and required)

CFHS were keen to find out from community and voluntary sector organisations what information and guidance materials, training and skills development, equipment, peer support, and funding were being used to support their work around maternal and infant nutrition. We were also keen to hear about what resources would help the work they are doing and planning.

Resources and support accessed

The main type of resource and support needs that organisations referred to specifically was funding.

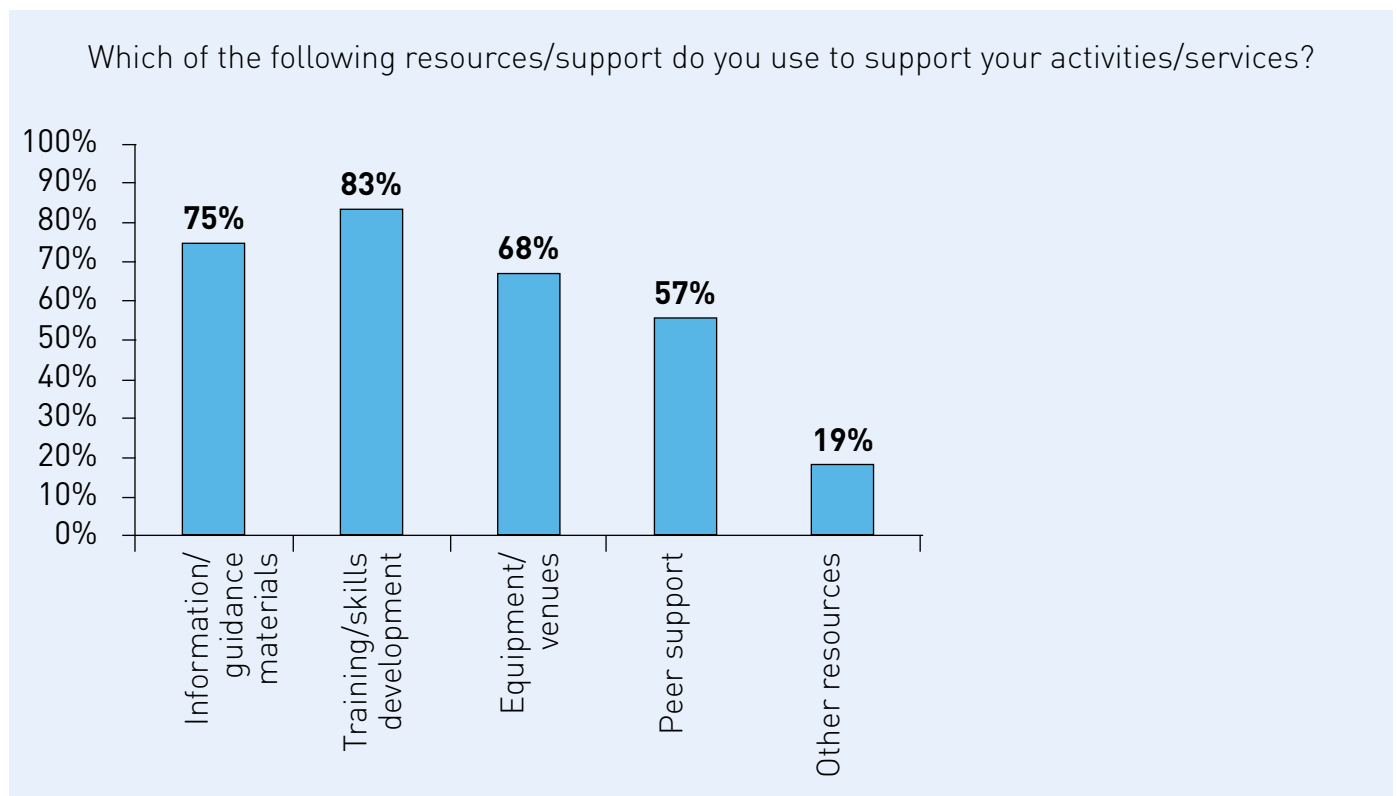
However the following examples highlight non-financial support that services are accessing:

- training and skills development
- information and guidance materials
- access to equipment and venues
- peer support.

Non-financial support was provided through:

- advice and input from local public sector agencies, eg. Health Promotion and Dietetic departments within health boards
- guidance information and materials from national agencies, eg. NHS Health Scotland
- access to resources such as equipment and venues through local authorities
- voluntary support from practitioners (common in the Western Isles).

Figure 5 shows that the main types of non-financial support accessed: are training and skills development (83%) followed by information and guidance materials (75%), access to equipment and venues (68%), and peer support (57%).



Training and skills development

Information provided reported that the main sources of training and skills development are local authorities and the NHS. Other sources of training support are:

- Other voluntary organisations, eg. housing associations and local organisations
- Local food and nutrition forums, eg. Edinburgh Food and Health Training Hub
- Higher education courses, conferences and seminars.

Information and guidance materials

Information provided reported that NHS Health Scotland, local health boards and local authorities are the main providers of information and guidance materials to the majority of organisations.

Organisations also access information and guidance from a number of other sources including:

- Network websites, eg. CFHS, Food and Health Alliance¹, Eco-Schools Scotland²
- Healthy Start³
- Wikipedia
- Other public sector bodies
- Local Community Health and Care Partnerships
- National organisations, eg. The British Heart Foundation⁴
- Specialist websites, eg. The Food Standards Agency (FSA) (Eatwell plate)⁵, The British Dietetic Association⁶, The Nutrition Society⁷, British Nutrition Foundation⁸
- Retail sector websites
- Newspapers and magazines.

Specific websites mentioned included:

- BBC Food www.bbc.co.uk/food/
- Change for Life www.nhs.uk/Change4Life/Pages/change-for-life.aspx
- Ready Steady Toddler
www.readysteadytoddler.org.uk/helpful-organisations/index.aspx
- Netmums www.netmums.com

Specific resource materials used mentioned:

- NHS Health Scotland⁹ - Ready Steady Baby; Adventures in Foodland; Fun First Foods
- Happy Jack – Edinburgh Community Food
- Good Food Good Health – Edinburgh Cyrenians
- Confidence to Cook – NHS Grampian
- The Eatwell Plate - Food Standards Agency

Local authorities are the main providers of venues and equipment to organisations interviewed for this research. This includes use of community centres and churches for group activities. The NHS is a source of specialist equipment, eg. equipment provided by health visitors for weighing mums and babies.

1 www.fhascot.org.uk/Home

2 www.ecoschoolsscotland.org/

3 www.healthystart.nhs.uk

4 www.bhf.org.uk/

5 www.food.gov.uk/scotland/scotnut/eatwellplate/

6 www.bda.uk.com/

7 www.nutritionssociety.org/

8 www.nutritionssociety.org/

9 www.maternal-and-early-years.org.uk/

Peer Support

Peer support is provided both informally and formally by organisation staff, volunteers and group members. Breastfeeding support groups are a particular example of formal support supported by health services in partnership with voluntary and community organisations such as the National Childbirth Trust. Other examples of peer support networks include:

- Home-Start UK and the SPPA
- Early years networks

Funding

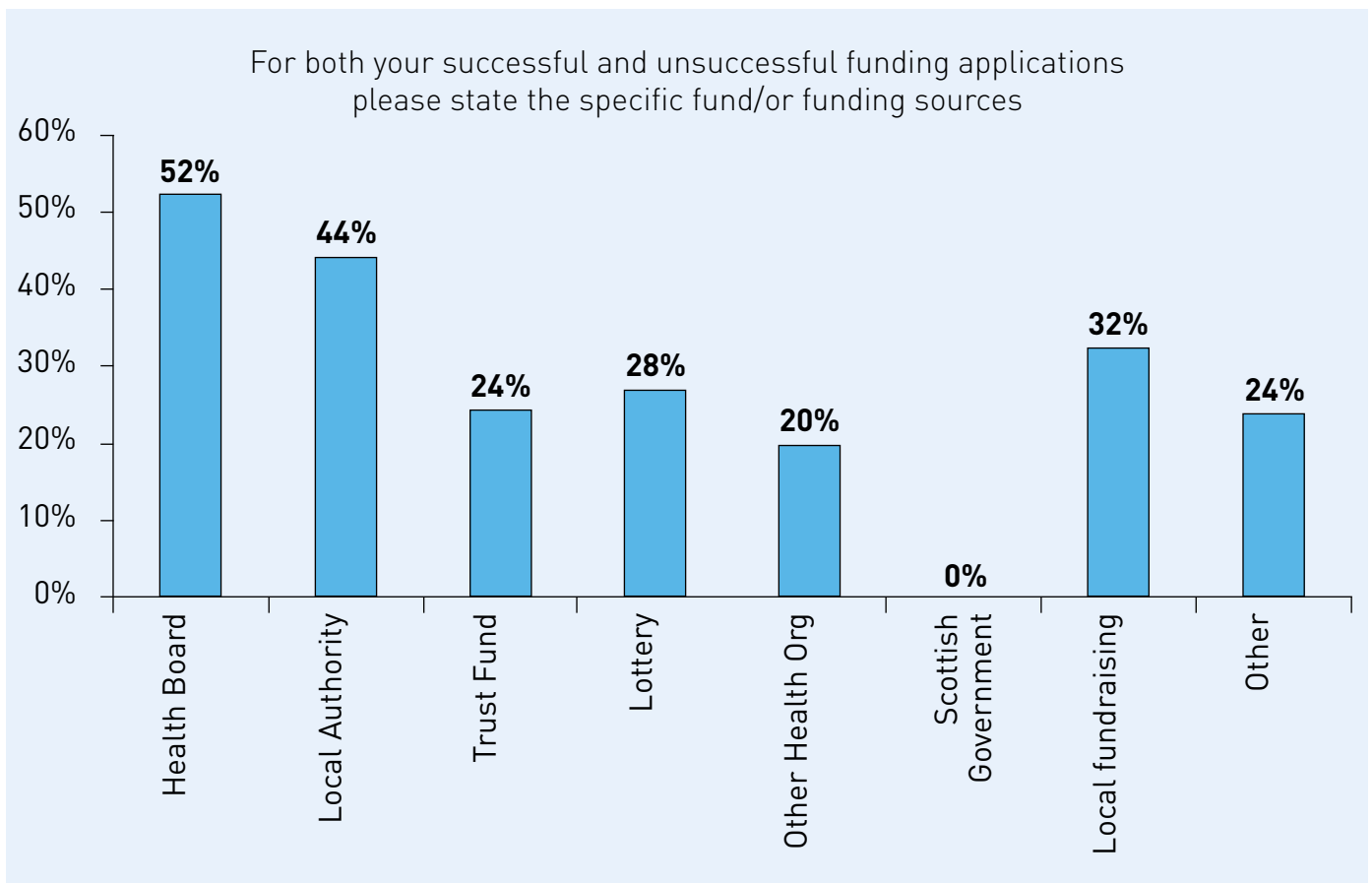
Information provided reported that for many groups their main source of funding to provide activities comes from the NHS and local authorities. Other funding is sourced through fundraising applications to trusts, community funds and others. Some sourced funding from CFHS and other local area small grant funds.

Other sources of funding reported included:

- local retailers and companies
- other voluntary organisations
- local colleges

Scottish Government funding, routed through local authorities, such as Fairer Scotland and the Climate Challenge Fund, and through the NHS such as NHS CEL 36, has also been accessed in support of such work.

Figure 6. Funding sources



Accessibility of resources

The snapshot reported that the main challenges when accessing resources appear to focus around equipment, skills and knowledge and information and guidance.

Access to additional one-off funding to purchase equipment is a barrier for some groups. Others had difficulty providing crèche facilities in order to make activities accessible to parents.

Several organisations mentioned the value of support provided by food co-ops in relation to providing low-cost produce for activities, signposting parents and families to community initiatives that accept Healthy Start vouchers and access to good quality fresh produce, which is important in supporting maternal and infant nutrition.

Improving the skills of the workforce

The Improving Maternal and Infant Nutrition Framework outlines the importance of improving and developing the skills of the early years workforce to deliver activities that support the implementation of the framework. This includes community and voluntary sector staff and other roles in the community such as family support and early years

“Other staff.....are expected to have a basic understanding and awareness of maternal and infant nutrition, and be able to signpost parents and carers to appropriate sources of information. It is important that all staff and volunteers, across all organisations, have the appropriate level of education and training required for their scope of practice.” (5.5 Page 54)

It has been difficult for those in the community and voluntary sector working with early years groups to access the same sources of learning and development that others have routine access for building their knowledge and skills. Stating that the community and voluntary sector is seen as key in implementing the framework with others is very welcome. Meeting the gap in training and skills development is key to achieving more effective contributions from the sector to what is already being delivered and reported to here.

The NHS and local authorities are perceived as key to meeting gaps in learning and access to the availability of information and guidance materials. Some health boards are already providing access to resources by promoting and making them available to all on their websites and through pieces of work in communities. Two positive examples are NHS Forth Valley - www.nhsforthvalley.com/health-services/health-promotion/topics-and-settings/nutrition and NHS Western Isles – Parenting WI www.wihb.scot.nhs.uk/parentingwi/index.htm

A consistent approach to providing access to appropriate information across all health boards would help to ensure awareness of key messages and accessible information.



Snapshot of access to resources

Urban and mixed rural areas

West Dunbartonshire

Y Sort – It

The Young Mums 2 Be Group and the Young Persons Toddler Group (when it is running) have been able to access support and resources through local midwives, health visitors and the health improvement team. They have developed information materials that are targeted at young people and available on their website.

The main challenge for their groups has been the lack of suitable premises that can also provide storage facilities for crèche equipment. The group has no cooking facilities, which makes trying to teach practical skills around healthy eating a challenge. Equally, premises with cooking facilities have been difficult to find.

Dumbarton District Women's Aid

Some support with cooking skills is provided on an outreach basis as required. External funding to support the 'Roots to Confidence Course' has been very effective to provide women and mums with training in cooking and gardening skills.

East Ayrshire

In East Ayrshire much of the work within the community has grown from the training and support offered by the public health dietitians. Many early years and community workers having taken one and two day community food work training courses run by public health dietitians. Royal Environmental Health Institute of Scotland (REHIS) Food Hygiene and Food and Health (nutrition) courses are run in local colleges and accessed by local community workers and community members

Healthy Weight Communities resources also provided staff, funding and access to equipment, eg. Cooking Bus visits and Cookits¹ and the provision of basic cooking equipment for cooking skills courses.

Support with nutrition, practical cooking and information was available. Staff and community members developed their own cookery books to meet the needs of the local community and literacy levels of some participants.



1 www.focusonfood.org/resources.html

Rural areas

Argyll and Bute

Local public health networks (PHNs) in Argyll and Bute have been developing partnership working between the NHS and local authorities and initiating activities in conjunction with voluntary sector partners around nutrition. The Argyll and Bute Health Improvement Fund is a very valuable source of funding for local groups. This year grants were made to 76 organisations to the total value of £76,000. Of these 25 were targeting early years and investing £28,000 in such work, 14 of which were also addressing obesity issues.

The area is covered by NHS Highland, and due to its proximity to Glasgow and Clyde there are still links with some of the service outlets of NHS Greater Glasgow and Clyde. The Health Promotion Resource Library is delivered by NHS Greater Glasgow and Clyde, however some organisations interviewed seemed unaware of this resource.

Home-Start MAJIK's gardening project has been supported by a grant from CFHS. Children from a local Home-Start lunch club regularly visit Campbeltown Community Garden to see what is growing there, which has also helped with the planting of fruit trees beside their building. Peer-support provided by volunteers enables Home-Start to address maternal and infant nutrition issues.

Playgroups and voluntary nurseries. Their work is guided by the Scottish Government's Nutritional guidance for early years: food choices for children aged one to five years in early education and childcare settings.²

Apple Tree Nursery in Rothesay accesses the resources on the website of Eco-Schools Scotland. The nursery is assessed for both eco-school and health promoting nursery awards, however staff report having received no direct support for meeting the criteria for these awards. Staff report that support with delivery of budgeting and basic cooking classes for young mums would be useful.

Meadows Under Fives in Campbeltown is supported by an NHS oral health worker who works with children and nursery staff around healthy snacks. Staff invited themselves to a demonstration by health visitors to a council run nursery based in the same building and found this helpful for their own work. They reported that they also do not routinely receive health improvement resource materials and are not aware of what is available.

Cairndow Community Childcare, near Inverary, is also supported by NHS oral health and has requested input from other health professionals.

MidArgyll Early Learning Folk in Lochgilphead receives support from NHS oral health. They see a gap in guidance on snack preparation for parents reporting that, "It's a contentious issue with staff about what constitutes a healthy packed lunch. Oral health team are very strict about snacks. We need a middle ground for parents." They accessed food hygiene training from their local authority, but would like to access basic nutrition training.

Little Learners Nursery in Oban is supported by NHS oral health. Staff would like to access support to signpost them to appropriate information and activities.

² www.scotland.gov.uk/Resource/20Doc/89729/0021563.pdf

Western Isles

The Health Information and Resources Service, based in Stornoway, is a valuable resource for both NHS staff and voluntary and community organisations. It has developed a website devoted to food and health in conjunction with the Department of Nutrition and Dietetics.³

Parenting WI mentioned on page 20 contains information for parents and carers on the early stages of pregnancy, the birthing process, babyhood, toddlerhood, and childhood as well as information on contact details, opening hours and age groups catered for by childcare services across the Western Isles.

These websites are accessible to all and are especially useful for community and voluntary sector agencies involved in maternal and infant nutrition as a resource for accurate information.

In the Western Isles partnership working at an individual level between the statutory and voluntary sector is strong. Staff from health promotion volunteer to help local groups and organisations undertake activities around maternal and infant nutrition:

- Pointers Young Mums Group benefits from its support, eg. delivering practical cooking sessions.
- Health visitors provide healthy eating input to Action for Children's Pathways to Nutrition group which supports young people around nutritional issues.
- Dietitians and health visitors have been active in supporting food and fun events within local communities on the remoter islands.

The local college, part of the University of the Highlands and Islands, also provides training in food and nutrition for workers in voluntary sector child care settings.

National Childbirth Trust

The National Childbirth Trust provides access to training for antenatal, postnatal and breastfeeding counsellors endorsed by the University of Worcester and delivered through distance learning. The breastfeeding counsellors provide support and run classes on a voluntary basis, depending on donations to cover room hire, tea/coffee and equipment costs. There is also a central NCT equipment budget that covers costs of leaflets etc.

Highlands

Since the pilot began in the Highlands, 104 women have been trained as breastfeeding peer supporters. The training supplied by the NCT and BFN has given the peers the opportunity to learn about the importance of ensuring women have the knowledge and skills to be able to breastfeed for as long as they wish. The peers are also given mandatory training from NHS Highland. Indeed, NHS Highland now uses its own training to train peers and link this to both national and local policy drivers also.

3 www.wihb.scot.nhs.uk/beinspired/Home1.htm

Conclusions

Early years food and health activity, including maternal and infant nutrition, has always been a priority for the community and voluntary sector. Community food and health initiatives share a commitment with other sectors such as the NHS and local authorities to addressing health inequalities. This synergy, together with the statutory sector, drives work in communities to achieve national and local priorities.

Many of the food and health activities being delivered and contributing to achieving actions within the Improving Maternal and Infant Nutrition Framework are carried out in partnership with a range of organisations, including the NHS and local authorities. There are many examples, some of which are outlined in this report and the accompanying research findings.

It is clear how well-placed the community and voluntary sector is to promote maternal and infant nutrition using a wide range of approaches, activities, skills and expertise. Some focus on pregnancy and parental support, others focus on toddlers and families. Some of the organisations interviewed for this research work across all age groups and not always exclusively with women, parents and families. Others are focussing on specific inequalities such as young people/parents, vulnerable groups and those with special needs. These organisations and others felt a strong connection with the Maternal and Infant Nutrition Framework whether they were working with parents of the future or others not readily perceived as target groups. The mix of approaches and opportunities to raise the issue of maternal and infant nutrition are key strengths within the community and voluntary sector.

The fit between nationally driven policies and locally identified support and needs is key to activities being offered and delivered especially within low-income communities. However, some of the organisations interviewed in the research felt that they did not always have

the same opportunities or equal access to resources and opportunities to emphasise key messages on maternal and infant nutrition. Those who felt they were missing out were concerned that they would be able to improve on their contribution to delivering the Improving Maternal and Infant Nutrition Framework.

Resources and opportunities mentioned included relevant information sources such as national/health board developed publications and guidance and learning opportunities to develop and increase their skills and knowledge. In response some community and voluntary organisations have developed their own tailored resources and leaflets for circulation to staff and volunteers and the communities they work with. A snapshot of availability and access to resources has been described in this report and accompanying research. Oral health teams were mentioned as valuable sources of support in relation to nutritional messages. At the same time, oral health teams were not perceived as the main sources of nutritional advice, despite the fact that any messages communicated would be the same as early years nutrition specialists albeit with an oral health focus.

Some organisations interviewed reported on the challenges of networking with others and attending meetings where they could mix with other sectors due to pressures of delivering their own services. They felt that this reduced opportunities to promote their work to others and increase understanding of the valuable work they do. As a result some felt that they were overlooked by other sectors and missed out on valuable support through not being properly linked to other networks, eg. early years. This was felt to be key in raising awareness of the community and voluntary sector and future opportunities to develop partnerships and collaborative ways of working. Some interviewed were aware of their local health promotion health team or resource library or where to find it, others were unsure about how to engage with

sources of similar support. Based on some basic and snapshot mapping of resources the researchers identified some areas for action.

Information and guidance materials

- Some organisations that engaged with NHS partners or others received or accessed maternal and infant nutrition resources. However, others not engaged were using other sources and the internet for information that they felt was not ideal. More could be done to market and promote national resources at community and voluntary level as well as those produced or made available by health boards. As mentioned on page 22 there are some good examples of health boards promoting sources of information and nutritional guidance that could be replicated elsewhere. (More recently NHS Health Scotland has updated a number of its maternal and infant nutrition resources. A briefing paper has been produced to provide information about the changes that have been made from the Early Years Team at NHS Health Scotland: nhs.healthscotland-earlyyears@nhs.net)
- Each health board has its own Health Information Resources Library, which is intended to be used by the community and voluntary sector. However take up is low in some areas which might be due to lack of awareness of the library as well as access to its resources. Again, examples on page 22 help to promote health board information libraries and what resources are available.
- Tailored and/or local resource materials may be useful to target specific groups.

Training and skills development

The researchers in the snapshot did not find much evidence of a strategic approach to the delivery of training around maternal and infant nutrition that the community and voluntary sector could access other than accredited courses delivered by local colleges and private companies/individuals. It is important that any strategic approaches developed in the

future in particular related to the Improving Maternal and Infant Nutrition Framework will be formally available to the community and voluntary sector as key partners in the delivery of the framework (NHS Health Scotland Learning and Workforce Development team is developing a set of educational resources that will support the implementation of the framework that will be available for all staff who work with relevant maternal and infant nutrition target groups).

Involving the community and voluntary sector in in-service training of NHS and local authority staff could help engagement between sectors on the roles and responsibilities and approaches developed by all sectors. Some NHS boards have developed valuable links with community and voluntary sector organisations and are delivering training to some staff or delivering activities in partnership with communities.

Access to other resources

Access to childcare is important to enable parents and families to access and engage in support with nutritional and practical activities. Not all community and voluntary sector organisations can afford to pay these costs but some benefit from childcare or crèche facilities from in-kind support with other statutory organisations.

Access to funding

Funding will be an issue that always impacts on the sustainability of services for all sectors. Some organisations are exploring other models of sustainability but moving in any direction requires support and investment.

Some organisations interviewed mentioned that they had received funding from the CFHS small grant scheme to deliver activities around maternal and infant nutrition. The CFHS grant scheme or other local area grant schemes, were seen as important avenues to funding for the community and voluntary sector to deliver activities.

Profile of community/voluntary organisations surveyed by scoping study

CFHS provided contact details for 400 individuals or organisations. Sifting the data removed duplicate and public sector contacts; voluntary and community organisations targeting primary/secondary school age group, young and older adults; and voluntary and community organisations in the six local authorities that took part in the in-depth interviews. After this exercise 198 contacts were identified for telephone interviews and 107 interviews were completed with organisations that met the selection criteria for the study - a response rate of 54%.

- Of the 107 respondents, 87 were either community or voluntary organisations (81%), and 20 were projects managed by either the NHS or local authorities.
- 18% of the respondent organisations were based in Edinburgh, 17% in Glasgow, and 12% in Fife. All other local authority areas were covered either by the telephone survey or by the scoping study.
- The geographical area served by initiatives was: local urban communities such as a number of towns in part of a local authority or part of a city (52%); local rural communities (16%); across a local authority area (14%); to more than one local authority area (7%); and to the main cities in Scotland (except Inverness) (10%).



Profile of community and voluntary sector organisations

(Interviewed by Lowland Market Research)

Figure 7. Profile of respondents by local authority areas

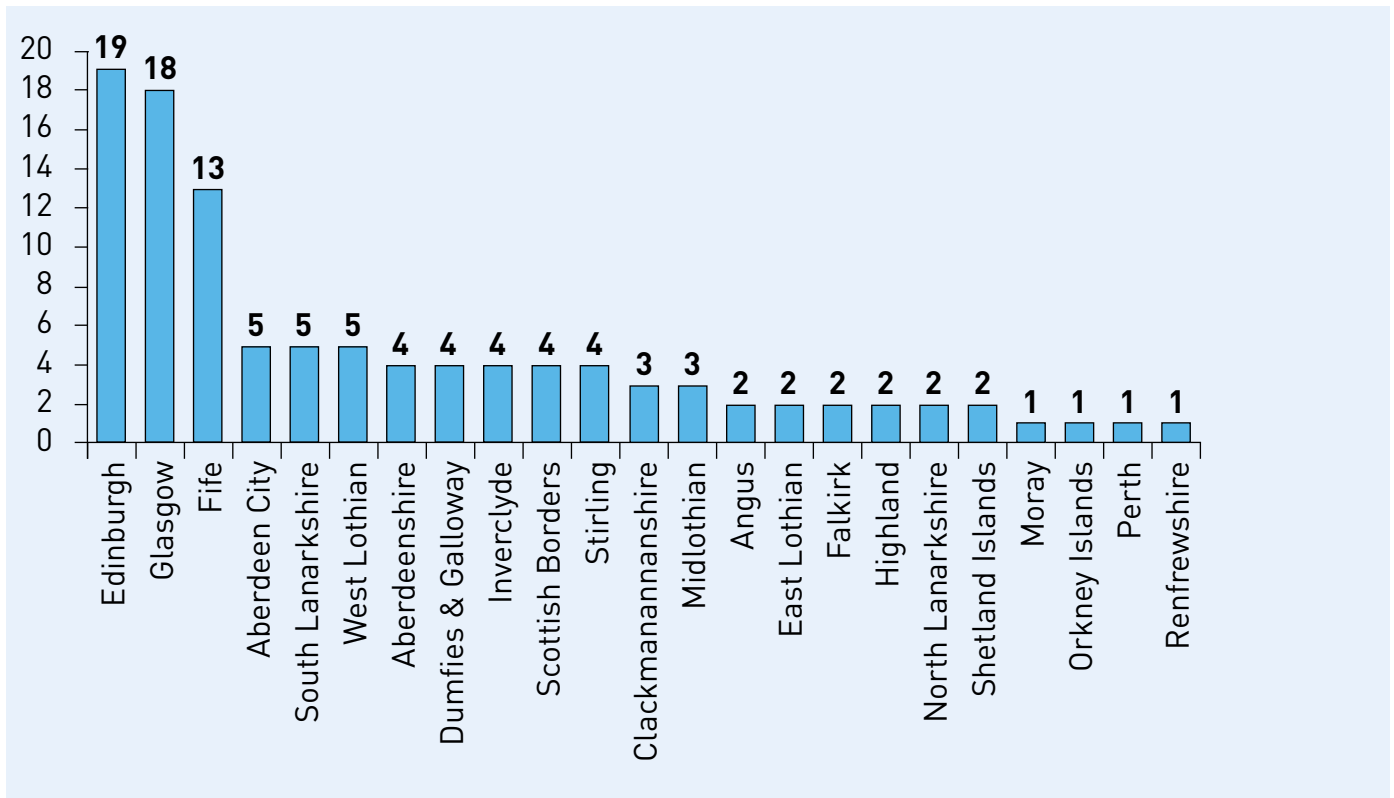


Figure 8. Geographical areas served

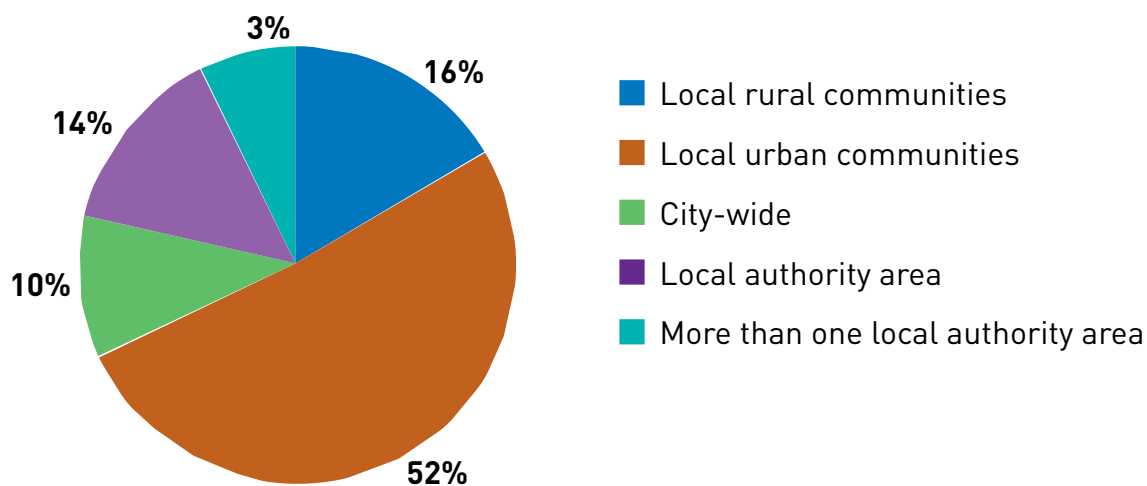


Figure 9. Profile of public health stakeholders interviewed

Public Sector Agency / Job Titles	Voluntary Sector Agencies / Job Titles
Argyll and Bute	
NHS, Health Visitor	CVS local development officer (Islay)
NHS, Health Promotion Lead, CHP	Volunteer Centre Manager
NHS, Public Health Network Coordinators (3)	Nursery/play group/family centre managers (6)
NHS, Senior Health Promotion Specialist	Community Gardens Manager/Secretary (2)
NHS, Oral Health Educator	Addiction Support Worker (Oban)
Ayrshire	
Public Health Practitioner	Community café Tutor
Public Health Nutritionist	Co-ordinator, Mums, babies and bumps group
Community Learning and Development Workers (3)	
Head Teacher (1)	
Community Health Development Worker	
Dundee	
Equally Well Lead	Senior Health Improvement Lead (retired)
NHS, Public Health Dietitian (2)	Women's Centre Manager
NHS, Small Grants Co-ordinator	Women's Aid Worker
LA/ NHS NHS Healthy Living Initiative Manager	Community Centre Manager
Local Authority Family Support Centre Manager (2)	
Health Improvement Workers (2)	
Sutherland	
NHS, Infant Feeding Co-ordinator	Support Worker
NHS, District Nurse	Centre Manager
NHS, Health Improvement senior	
Western Isles	
NHS, Health Information and Resources Manager	CVS manager
NHS, Senior Health Promotion Officers	Coordinator/Volunteer Project Manager
	young mum's groups (2)
NHS, Health Visitor	Volunteer, breastfeeding support agency
	Project Manager, children's charity
	Nursery Managers (2)
West Dunbartonshire	
NHS, Young Families Support Service	Housing Association Regeneration Agency
	Youth Worker
NHS, Breastfeeding Support Team	Youth Services Agency
Local Authority, Head of Centre	Women's Aid Manager
Scotland	
Scottish Childminding Association	



**community
food and health**

(scotland)

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From 1 April 2013 CFHS becomes part of NHS Health Scotland, a Special Health Board with a national remit to reduce health inequalities.