



community
food and health
(scotland)

Far Reaching Fare

how community-based initiatives
build reach into food policy and practice



About CFHS



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 addresses 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 the shops

Skills – improving confidence and skills in cooking and shopping

Culture – overcoming ingrained habits

Through our work we aim to support 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 community food initiatives and their unique contribution to developing and delivering policy and practice at all levels.

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

Thanks

We would like to thank everyone who gave interviews, shared their work, wrote the case studies and allowed us to take the photographs that feature in this report. Also thanks to everyone who has been involved in the work with CFHS over the past number of years that is covered in different parts of the report.

Introduction

"No society has the money to buy, at market prices, what it takes to raise children, make a neighbourhood safe, care for the elderly, make democracy work or address systemic injustices... The only way the world is going to address social problems is by enlisting the very people who are now classified as 'clients', and 'consumers' and converting them into co-workers, partners and rebuilders of the core economy."

Edgar Khan www.timebanks.org

This publication looks at the role that community initiatives can play in building reach into policy and practice around food access. It will look at the role that they can play in geographical communities – communities of place, and ways in which work involving food can engage with communities of identity and interest. It draws on a range of evidence - interviews with practioners, practice examples from across Scotland, case studies developed by organisations, commissioned research and material from networking and learning events.

There is a clear focus on work in low-income communities. We know that there is a clear link between socio-economic circumstances and health. People who live in disadvantaged communities are likely to have worse health outcomes than their more affluent neighbours and, despite the fact that health overall in Scotland is improving, Scotland's health inequalities are the widest in Western Europe.¹ Improving health is a matter of fairness and social justice and equality. Community food initiatives can make an important contribution to this effort.

It is hoped that you will find this publication of interest if you are involved in community based work around food, as a community member, volunteer, policy maker or practioner.

Reach. 1 to arrive at or get as far as (a place, position etc). 3 to project or extend to a point.
Chambers Concise Dictionary.

Communities of place are people who are linked together because of a locality where they live, work or spend a large part of their time.

Communities of identity are groups of people who share an identity, eg. the Chinese community or the LGBT community.

Communities of interest are groups of people who share an experience or concern – people who experience homelessness, live with mental health problems. Most people belong to many communities – increasingly complex social networks are a feature of modern life, with people able to feel as connected to people on the other side of the globe as to those in their immediate family or neighbourhood.

Community food initiatives

Work involving food is taking place in communities the length and breadth of Scotland. Communities come together to sell food; grow food; cook food; provide meals; learn about healthy eating and nutrition; build local food networks; and run tuck shops, lunch clubs, supper clubs and a myriad of other activities.

Community food initiatives are often small-scale and local, and some build from that base into larger regional and national organisations.

As mainly small-scale initiatives, many fit the characteristics described by the Third Sector Resource Centre of 'below the radar organisations', which it defines as 'small voluntary organisations, community groups and more informal or semi-formal activities in the third sector'.² Respondents to its survey saw the sector as, 'being an important response to needs that were currently unmet either due to lack of resources or the failure of the state and other agencies to identify or address need'. One of the people interviewed from a migrant and refugee community organisation, suggested that small groups 'reach the places the system can't get'. Below the radar organisations are more fluid, flexible and informal than the mainstream and can be instinctive and adapt to needs as they emerge. Not all organisations will achieve reach. The research suggest that some organisations can be inward looking, insular and exclusive, focusing on the needs of a narrow section of the community.

From a different point of view, the Scottish Government Third Sector Research Forum, looking at why third sector organisations work well in health and social care delivery, suggest this is because they have expert knowledge of local needs and preferences built from close ties with geographical

and service user communities. They also have a volunteer base that provides flexible and economically efficient organisational structures and many already focus on service improvement.³ Again, not all organisations will be able to deliver this.

These themes are echoed by the people interviewed for this publication. Some of the key characteristics that they think help community food initiatives to build reach are that they are:

- close to the ground
- well-connected at a local level
- in contact with some of the most vulnerable
- able to highlight specialist and distinctive needs
- able to provide information in language that is understood
- able to respond quickly – be nifty on their feet
- a good test bed for innovation
- able to mobilise volunteers and other resources that mainstream services cannot

Material from a range of sources also suggests that it is possible to use food to reach some of the most excluded individuals in communities because:

- we all eat, so food is a good way of engaging people
- it can incorporate a wide range of different activities
- food is social and can be fun
- food activities foster new skills, confidence and relationships

General policy directions – a focus on community



Communities are at the heart of current Scottish public policy. The National Performance Framework has as an outcome, 'Our public services are high quality, continually improving efficient and responsive to local people's needs'.⁴ The recent Christie Commission on the future delivery of public services states that the first key objective is to, 'ensure that our public services are built around people and communities, their needs, aspirations, capacities and skills and work to build up their autonomy and resilience'.⁵ It also talks of positive approaches that are grounded in people's lives, take a long-term view, and acknowledge 'the essential authority of people and their communities'.

In the area of health policy, the Healthcare Quality Strategy⁶ commits to 'putting people at the heart of our NHS' developing 'mutually beneficial partnerships between patients, their families and those delivering healthcare services' and involving everyone in Scotland by communicating our shared vision of healthcare quality so that everyone can play their part in making it happen'. NHS Scotland's strategy highlights a role for communities, groups and individuals in developing and sharing an understanding of the issues and the solutions to complex

problems of health and wellbeing.⁷ This strategy echoes the findings of Fair Society, Healthy Lives,⁸ the strategic review of health inequalities in England, which concluded that reducing health inequalities is a matter of fairness and social justice and that effective local delivery of the six policy objectives outlined 'requires effective participatory decision-making at a local level. This can only happen by empowering individuals and local communities'.

This policy focus is reflected in the development of a range of different approaches to practice that are developing under a framework of 'asset based approaches' – approaches that essentially start from the strengths, abilities and resources of individuals and communities rather than what is wrong with them. The importance of community empowerment, community capacity building and co-production are all gaining currency for addressing the long term and deep seated issues of health inequality.

"The defining themes of asset-based ways of working are that they are place-based, relationship based, citizen led and they promote social justice and equality."⁹

² Understanding the distinctiveness of small scale third sector activity: the role of local knowledge and networks in shaping below the radar actions. TSRC May 2010

³ 'Why involve the third sector in health and social care delivery?' Scottish Third Sector Research Forum evidence paper. 2011

⁴ National Performance Framework. Scottish Government 2011

⁵ Commission on the Future Delivery of Public Services. Scottish Government 2011

⁶ The Healthcare Quality Strategy for NHS Scotland. Scottish Government 2010

⁷ A Fairer Healthier Scotland. Our Strategy 2012 – 2013. NHS Health Scotland.

⁸ Fair Society, Healthy Lives. The Marmot Review February 2010

⁹ What makes us healthy? The asset approach in practice: evidence, action, evaluation. J Foot 2012

Food policy directions



The focus on communities is echoed across a range of Scottish food policy.

Recipe for Success, the National food and Drink Policy, highlights that, 'Scotland has both a remarkable legacy as well as an admirable current resource in its social enterprises, community and voluntary sector. These sectors have the potential to become an intermediary between major multiples and vulnerable individuals. Their strengths will be recognised and supported as we take forward our food and drink agenda'.

As one of the next steps in the area of food access and affordability it commits to 'identify how community food groups and social enterprises can be supported to deliver a long-term strategic programme for a stronger community food and health sector'.¹⁰

The Maternal and Infant Nutrition Framework recognises an important role for community and voluntary sector activity.

'Community and Voluntary sector organisations are playing an important role in delivering projects and programmes to support maternal and infant nutrition - often working in partnership with Health Boards and Local Authorities. In particular, the organisations surveyed were focusing particularly on nutrition amongst the under-fives and in many cases projects were targeted at those considered most at risk'.¹¹

The Obesity Route Map Action Plan considers the role that community food initiatives can play in ensuring that, 'everyone has access to opportunities to learn to shop for and cook affordable healthy meals from raw materials'.¹²

¹⁰ Recipe for Success. The National Food and Drink Policy. Scottish Government 2009

¹¹ Improving Maternal and Infant Nutrition: A framework for action Scottish Government 2011

¹² Obesity Route Map Action Plan Scottish Government 2011

National food projects



The Scottish Government funds three national food development projects in addition to CFHS – the healthy living award, the Healthier Scotland Cooking Bus, and the Scottish Grocer's Federation Healthy Living Programme.¹³

The healthy living award rewards caterers that serve healthier food and help customers make better food choices. The Healthier Scotland Cooking Bus provides practical cooking skills sessions to children, schools and communities from a purpose built mobile classroom. The Scottish Grocers Federation Healthy Living programme works with convenience stores to develop their range of fresh and healthier food options at affordable prices. All three projects work with community food initiatives.

The healthy living award

Working with community food initiatives has always been part of the healthy living award business plan and is increasing in line with its current focus on disadvantaged areas. Given a specific focus on catering

establishments, much of this work is currently with community cafés and also some lunch clubs.

"Community food initiatives have a role in reaching the people we would otherwise have difficulty reaching. These are often people who are not eating in the workplace or in restaurants, and community food initiatives are the one place where they are eating outside the home. This is the only way we can reach them and have an influence on the food they eat."

The criteria for achieving the award are equally applicable to community food initiatives as to any catering business and many community cafés have been successful in achieving the healthy living award and the healthy living award *plus*. For others there is sometimes a barrier in relation to customer resistance, or perceived customer resistance, to a change in the food that is on offer. Once they have the award, initiatives also sometimes find it difficult to sustain the commitment involved.

¹³ Help along the weigh. NHS Health Scotland (forthcoming)

The healthy living award team are looking at how best to build engagement with community food initiatives. As a small team they rely on national and local networking events to build interest in the award. They are aware that community food initiatives can often find it difficult to release staff for such events and that, while time-consuming, the process of building one-to-one contact is the most effective way of making connections. Equally they know that the award can be a useful tool for community food initiatives to look at healthier food, but that sometimes the full award can be daunting for small groups and organisations. They are looking at how they might in the future support organisations to make step changes towards offering healthier food and be rewarded for this.

Factors that help the award work well for community food initiatives are:

- A champion within the initiative with support from their managers/management committee.
- A receptive customer base – some initiatives are more attuned to the wider health improvement agenda than others.
- Someone locally on the ground who can support the organisations – this may be someone working in health promotion or health improvement.
- Access to resources to allow for some flexibility – people being able to take time out to attend information/training sessions and take the work forward in preparation for assessment. Also to have time to maintain the commitment once they obtain the award.

The Scottish Grocer's Federation Healthy Living Programme

The Scottish Grocer's Federation Healthy Living Programme is working with community food initiatives to build its work in areas of multiple deprivation. Work with local food co-ops enables this programme to target communities that may not have convenience stores that are members of the programme. The programme works with them to develop their range of fresh and healthier produce. For the local food co-ops, access to SGF training, advice and resources helps them improve their business. Training covers caring for fruit and vegetables, what is in season, promoting sales and reducing waste. Once they have completed the training, food co-ops have access to stands to display produce, point-of-sale materials to support their work and resources to support seasonal promotions to tie in with those in convenience stores. The Healthy Living programme is also expanding its work to include retailers in hospitals to increase the range of produce available to staff, patients and visitors.

"The Scottish Grocers' Federation (SGF) Healthy Living programme has been working closely with Community Food and Health (Scotland) now for some time. The SGF team have been involved in helping with training of volunteers that operate the community shops and this has helped them with thoughts on how better they can grow sales through the use of special stands, improved quality of fruit and vegetables and making sure that the product is shown to its best advantage with freshness and appearance. The value that the volunteers and their 'shops' bring is that they are active in areas where there is not necessarily a convenience food retail shop in the community and therefore make a range of fruit and vegetables at affordable prices available in those communities - many of which are in disadvantaged areas. A great example of two projects working together to help drive healthier eating within the community."

The partnership with CFHS is seen as a real strength in supporting this process. The links and contacts that CFHS can bring to the programme are seen to be key to building its work in communities that it might find difficult to reach.

The Healthier Scotland Cooking Bus

The Healthier Scotland Cooking Bus visits communities for up to five days at a time, providing a focus for work on practical cookery skills and development opportunities for teachers and community workers. Up to 12 practical cookery sessions can be provided per visit, for a range of different groups, including school pupils, teachers and community groups. Visits are designed to build practical cooking skills and leave a legacy within particular communities.

Community food initiatives are seen to be key to ensuring that the Cooking Bus reaches its targets for working with disadvantaged communities. Anyone can request a visit and successful visits to low-income communities have been co-ordinated by community food initiatives.¹⁴ Managers of the Cooking Bus recognise the challenges faced by local communities in trying to develop a whole five day visit and ensuring a legacy from it and have allocated dedicated resources to support this in the future.



Local food work

At local level, the work of community food initiatives seldom features directly in Single Outcome Agreements or Joint Health Improvement plans. They do however play an important role in delivery at a local level.

In NHS Forth Valley the development of fruit barras in Stirling, Falkirk and Clackmannan is improving access to fresh local produce for vulnerable and disadvantaged groups; community cookery classes and nutrition training are contributing to work around the obesity route map, and information sessions provided by community initiatives around Healthy Start, and vitamins contribute to work on maternal and infant nutrition. The impact of community food initiatives is often wider than the health agenda, contributing to outcomes in terms of employability and the impact that volunteering can have on confidence and wellbeing.

Initiatives are good at making contact with individuals that mainstream services often struggle to engage with.

“Mainstream services are quite far away from people. Community initiatives can respond quickly and there are fewer barriers to get to them – they can make it happen.”

Community food initiatives are seen to be more approachable, developed by local people, for local people. It is often important that whoever is running activities is already known to participants. Information can be spread by word of mouth and they can innovate, come up with new ideas and new ways of working. This in turn can influence the delivery of core services as approaches that have been successful in community food initiatives can be brought back into mainstream services.

There are, however, limits to what initiatives are able to do and sometimes they can be targeted at the needs of specific local residents. This can be an issue of skills and knowledge, especially when initiatives are solely dependent on volunteer input. This is less of an issue where there is some involvement from paid workers. Initiatives

also require resources and ongoing support to thrive. This includes management, development and volunteer support, together with budgets to carry out activities and opportunities to network and share ideas and resources.

In Lothian community food initiatives equally do not feature in strategic plans, but are important to local delivery. In Edinburgh the Health Inequalities Standing group is investing in work around food and health as part of its agreement to fund areas of work not covered elsewhere. In both West Lothian and East Lothian, community food work features as part of local planning structures.

Initiatives are seen to play a key role in innovation. They can pick up and run with an idea immediately in a way that the statutory sector often struggles to do. If approaches are successful they can then be brought back into mainstream services.

Reach is not however universal and some initiatives target small geographical communities. Communities of interest/identity, where targeted, if at all, are also more likely to work at a city wide level. Members of these communities may be doubly disadvantaged by being excluded from place based groups but also have difficulties making links to city wide groups.

The reach that community food initiatives can offer to local delivery requires investment. It is recognised that organisations require basic core resources – rent, rates, building and some paid workers, as it is difficult to be entirely volunteer led. They also need ongoing support and management development. This support needs to be long-term and can lead to the development of lasting relationships that can be the basis for of asset based approaches and co-production of future services.

“The need for community food initiatives can be seen as indicators of the failure of the system – the system look to them when something has gone wrong – to address the fact that there is limited food access and affordability or people don’t have food skills.”



Sauchie Active 8 Fruit and Vegetable Barra

Sauchie Active 8 provides a weekly fruit and vegetable ‘barra’ based in Sauchie Community Hall to sell low cost, good quality fruit and vegetables to the local community. The barra launched in May 2011 with support from NHS Forth Valley and Clackmannanshire Healthier Lives. It runs each Wednesday from 8.30am – 1pm.

From the start, the barra offered a choice of whole fruit and vegetables and soup and fruit packs. Over time the range of produce has expanded to include salad/coleslaw packs and the option of chopped vegetables in the soup packs. Older customers particularly welcome more chopped vegetables. Produce comes from a local supplier and volunteers buy produce that is in season to keep prices down. The produce is local wherever possible and all bananas are fair trade. Sales average around £800 per month.

Customers can pre order larger items such as bags of potatoes and the barra also offers a ‘Healthy Start’ box which contains potatoes, carrots, onions, turnip, tomatoes, lettuce and fruit together with a free bag of lentils. Regular taster sessions encourage customers to try new fruit and vegetables and promotions funded by the SGF Healthy Living programme help draw in new customers.

From its beginnings in the community hall, the barra has gradually expanded its reach. Local primary schools now place weekly orders for their tuck shops and a second fortnightly barra operates at Clackmannanshire Community Healthcare centre. This is timed to coincide with the baby clinic so volunteers can pass on information about using Healthy Start vouchers to buy fruit and vegetables. Volunteers also provide home deliveries to some older people who find it difficult to get to the hall. Older people welcome their deliveries for the chat as much as for the fruit and vegetables and volunteers often help with other issues. The latest

development, in conjunction with the local round table, is a food bank which now runs once a week on Friday.

When asked why the barra is good at reaching people in their community, volunteers say:

- The barra is local and accessible.
- It is run by people who know to the customers – ‘you don’t get banter like this in the supermarket’.
- The barra is flexible and mobile and can go to where people are, such as the healthcare centre.
- The produce is fresh on the day and is cheaper than any other local outlets. Price is important.
- It can respond to what people want, eg. introducing soup and salad packs and more chopped vegetables.

The barra has also made a difference to the volunteers. There are more fruit and vegetables on the menu in one volunteer’s house; another knows more people in the local community, which is important as she does not come from Sauchie; and another has more confidence and new skills. All agree that they enjoy their volunteering and the fact that they make a difference to the health of their local community.

“Community food initiatives bring much strength to the work –they are local, less intimidating and less mainstream. Food is an excellent vehicle for engaging people as we all like to eat – you can have fun with food, it is good for engaging kids and you can see fast results.”

Midlothian Community Food Initiative - Toot for Fruit is based at Loanhead Miners Charitable Society and funded by NHS Lothian. It has a van, and a driver part-time development officer who work to provide access to good quality, low cost fruit and vegetables across Midlothian. The van is on the road three days a week with a focus on areas of deprivation – this can be in terms of income, high unemployment or geography. Many areas will have no shop or just one shop.

At present, the van carries out 12 regular visits a week. This includes nurseries, care homes and community projects. Currently it has 127 regular customers and delivers to 34 housebound older people. The van is also available for one-off events across the area.

The project is funded until 2014 and is looking at ways to reduce its reliance on grant funding. There is the possibility of starting a food co-op in Loanhead and also expanding the customer base – particularly among older people.

Toot for Fruit has strong links to health via the health promotion team and the Joint Health Improvement plan. Links to Midlothian council are developing and neighbourhood plans are identifying areas that are looking for the van to visit. The initiative has also established key targets in terms of older people and early years.

What makes Toot for Fruit good at reaching people?

- It is accessible – people like the van. It is well-known in the area and instantly recognisable. Customers say there is a certain magic involved in going into the van and picking their fruit and veg.
- It is mobile – not restricted to one place and can flexibly respond to what is needed in the area.
- It is locally based, locally run and of the community – most customers are probably not aware that it is a health funded project.
- It has support from a local supplier that ensures that it has good quality fruit and vegetables.
- The driver. As the main point of contact, he/she is much more than a driver – he/she is a salesperson and the key point of contact or the project. The current driver's detailed local knowledge is a huge asset in being able to plan and carry out deliveries.
- The quality of the relationships - with customers, with funders, with local agencies, local authority and health board. These take time and effort to build.

Moving beyond place; interest and identity



While community food initiatives can play an important role in building links to communities of place, work by community-based organisations using the medium of food can equally build reach to communities of identity and interest that can often be missed by place-based work.

In its rapid review of the evidence of how well policies based on place address the needs of equalities groups, the Equalities and Human Rights Commission in Scotland¹⁵ suggests that place-based policies often find it difficult to incorporate equalities groups. While there are limits to the evidence, the review suggests that a focus solely on the socio-economic dimensions of equality may fail to take into account the complex ways in which deprivation and equality interact. While this work focuses primarily on regeneration initiatives, the findings may be equally relevant to work addressing health inequalities and links to the general equality duty established under the Equality Act 2010.

A focus on geographic communities, even targeted in relation to indices of multiple deprivation, may fail to reach some of the most excluded individuals within those communities, particularly those covered by the protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity, race, religion or belief and sexual orientation. Members of these communities may face multiple barriers to engaging with local initiatives and their networks can often be outside the area in which they live or work. Organisations that represent and work with communities of identity and interest can play an important role in building reach to people who may be excluded from place-based food initiatives.

Case studies developed by minority ethnic community organisations document the role that work involving food can play in developing community presence, integration and building links between different communities.

¹⁵ Hard – to Reach or 'Easy to Ignore'? A rapid review of place- based policies and equality. 2012 Equalities and Human Right Commission Scotland



Extract from World Cafe Case Study, Core 2012

Food is an integral part of life and sharing a meal can be seen as a welcoming into the customs and traditions of the culture of those who have prepared it and as a bonding experience to create friendships and a sense of community.

In August 2007, Community Organisation for Race Equality recognised this after a successful 'Multicultural Open Day' event demonstrated the enjoyment the community had while trying and exotic range of international dishes. This idea prompted a 'World Café Group' made up of volunteers to be established which aimed to improve the local community's diet and cooking skills while also building social capital.

In November 2007 the first event was held, run by volunteers on the last Friday of the Month: a buffet evening that included foods from all over the world cooked by local people and created a friendly, family atmosphere in the North Edinburgh Community. This initiated the monthly event we all know as the World Café.¹⁶



Extract from NGCFI case study on its work with asylum seekers and refugees, 2013

North Glasgow Community Food Initiative (NGCFI) was established in June 2001 by Student Action for Refugees at Glasgow University. It was set up in response to research carried out by the Glasgow Asylum Rights Campaign, which had identified a need for the local provision of cheap fresh fruit and vegetables in order to encourage their consumption and a need for projects that were intended for use by the whole community.

Asylum seekers and refugees are amongst the most vulnerable groups in our society. NGCFI engages with asylum seekers and refugees through agencies that support them. These agencies can be GPs, counsellors and psychologists, housing officers, and orientation and support services. We cultivate relationships with all these agencies that refer potential volunteers to our project.

Asylum seekers and refugees come to the UK with a wealth of experience and knowledge. Many will have worked in agriculture, retail or have run their own business. The language barrier and mental health issues can affect confidence and ability to socialise and find jobs. Volunteering allows asylum seekers to use their skills, regain confidence, improve their English and socialise in their new community.¹⁷

¹⁶ World Café Case Study. CORE 2012 www.communityfoodandhealth.org.uk

¹⁷ NGCFI case study on its work with asylum seekers and refugees. 2013 www.communityfoodandhealth.org.uk



Blanchard's story: from Congo to Glasgow - volunteering with the North Glasgow Community Food Initiative.

I am an asylum seeker from the Democratic Republic of Congo. I had to flee my homeland because of political persecutions. I came to the UK looking for safety and applied to be recognised as a refugee. I landed in London in September 2008 and claimed asylum. I was transferred to Glasgow four days after my arrival.

I had never left my hometown of Kinshasa before, so living abroad was something very difficult and the most difficult matter was to leave my family and my friends. I had to leave behind all the most important things in my life to live in a new country. Before that, it had never even crossed my mind to put even a toe in the UK. Moreover, I had to learn a language I had never spoken before and get used to a new culture and new people.

I was feeling isolated in this new city and I could not wipe away what I had been through in Congo. I was supported by the Compass Team and because of my health issues and my isolation the team decided to refer me to the North Glasgow Community Food Initiative in order to help my health and my integration in society.

Starting to come to the garden was for me the first step to realise that I could start trusting myself and trusting other people. So, since my first connection with the NGCFI, I started to improve, learn some new skills and gained some qualification such as the Food and Health Certificate REHIS, First Aid Certificate, Leadership Skills Training, and video filming training. Besides, I have helped in selling fruit and vegetable, participated at outreach event (cooking preparation) and given my contribution to the community.

My mental health got better but my physical health too. In Congo, I did not eat a lot of fruit and vegetable. I knew it was good for you but never bothered. I would eat chicken, rice and beans but rarely had fruit like mango which grows everywhere, you don't even have to buy it. I started understanding that it really is important to eat fruit and veg when I joined NGCFI. Combining different kind of food is important. I noticed the difference because my weight reduced (I always had a slight overweight) thanks to my new diet and the physical activity in the garden. I don't need to go to the gym!

I did not cook in Congo. There, women are expected to cook but not men. Of course, I had observed my mother cook. When I arrived in the UK, I had no choice but to do it myself because I was alone.

The first time I went shopping in Glasgow was in the big Tesco at St Rollox Centre. I stuck to the food I knew: chicken, rice, oil, tinned tomatoes, tinned sardines, eggs and milk. I was surprised not to find powdered milk and to see "sell by" dates on eggs and milk.

I have since tried new food that we grow in the garden. Recently I took some beetroot home from the garden. I was not sure that it was a good idea in the first place, but I gave it a try and I liked it. My next try will be rhubarb which I have avoided despite it being cooked regularly at the garden. I need to be more opened to new fruit and veg.

As an asylum seeker, I am not allowed to work until the UKBA gives me permission to stay permanently in the UK. In the meantime, I have to rely on asylum support money. Unfortunately this is not enough to afford eating healthily all the time. But thankfully, I have the garden to enjoy fresh fruit and vegetables.



Aberdeen Foyer Lifeshaper programme

Aberdeen Foyer Lifeshaper programme is a 12 week programme for adults with a history of substance misuse in Fraserburgh. It is a work, rest and play programme. The focus is on working alongside each person at the start of their recovery journey.

Food is a central thread that permeates the programme. Food has often become low priority in people's lives and a key aim is to rekindle a sense of excitement, engagement and fun around food and healthy eating, alongside the knowledge and practical skills that enable programme participants to maintain this.

Factors that are key to achieving success are

- A focus on co-creation and partnership approaches. Participants on the programme design what happens. This creates a sense of shared responsibility, builds efficacy and tailors activities to their particular needs. Participants plan meals for each week and shop and cook together. Lunch is always something that can be made in a large pan, is healthy and smells good. A smell drifting into the workrooms from 11.30am helps to stimulate an appetite for lunch. The fact that lunch is always available also encourages visitors from other community based services – partnership building over a bowl of soup!
- The programme uses creative approaches to encourage participants to think about food. They arrive each morning to a building that has had toast wafted all over. The smell stimulates an appetite for breakfast. It is then a small step to sit at the table, eat cereal and toast. Established at the start of the programme – a breakfast routine is then reinforced for the following 12 weeks. Throughout the programme there are food quizzes, tasting sessions, opportunities to see and try new foods and easy to eat fruit is available all the time.

- There is a strong focus on social eating and the role that food can play in building connections. At the end of the programme the team work together to cook a graduation meal. Tables are set and support workers, family members and other contacts are invited. Everyone eats a meal together before certificates are given out. Participants also prepare food for other local initiatives providing opportunities for re-engagement in the community for people who may not always have a positive reputation in their local area.
- Food is used to transmit a sense of nurture, caring and being cared for. Lunch always includes a pudding as a treat and celebratory meals are prepared throughout the programme. These are seen to be important in building a sense of belonging and relationship, which is fundamental to wellbeing.
- The programme is informed by a clear set of values. These build on the community development ethos of Aberdeen Foyer. Programme participants and staff meet as equals. Staff work alongside programme participants, neither ahead of them nor behind them, but with them as they set about a process of transforming their lives.

Between 2006 and 2009 CFHS developed work focused on food, health and homelessness in recognition that people experiencing homelessness in Scotland are some of the most excluded from accessing a healthy nutritious diet. The Missing Ingredients¹⁸ highlights the ways in which work using the medium of food can help to build resilience and protective factors that are important for people affected by homelessness.

- Food is often the way of making first contact.
- Having access to healthy food is key to good physical and mental health and particularly important when you are under stress.
- Growing food builds skills and provides meaningful occupation that can sometimes lead to paid work.
- Cooking classes develop new skills and knowledge of healthy eating. They also widen horizons, build confidence and self-esteem.
- Working and eating together builds social networks and a sense of belonging key to taking your place in wider society. It also builds links to other services and information that may be crucial to the journey out of homelessness.

In 2007 links were built to the Scottish Learning Disability Clinical Dietetic Network. CFHS worked with some of its members to provide REHIS Elementary Food and Health courses to people supporting individuals with a learning disability. The network and other partners went on to develop an accredited nine-hour basic nutrition course in conjunction with REHIS aimed at carers of adults with a learning disability. This course has been available since 2011 and is being rolled out nationally. CFHS has produced a summary of the experience of 11 organisations that delivered the course. The publication also includes a detailed case study.¹⁹

In 2011, as part of a national study into the range of food services available to support older people living at home in the community, three local community organisations in very different parts of Scotland were commissioned to develop case studies looking at the range of voluntary and community activity. They identified a wide range of activity across urban, rural and remote rural areas including breakfast clubs, lunch clubs, cooking classes, allotments, food co-ops, and healthy eating information sessions.²⁰ Many of these were provided by organisations focusing on the generic needs of older people.

The recent experience of offering small-scale funding to organisations using food to work around health and wellbeing with older people, provided indications of the appetite in communities to develop work in this area, much of this by organisations that would not traditionally see themselves as food projects. Initiatives identified a range of outcomes from their work, including improved food access and affordability, development of food skills and access to targeted information on healthy eating/diet, new opportunities for social eating and building social capital, alongside opportunities for volunteering and building community assets.²¹

18 The Missing Ingredients CFHS 2009

19 Cooking up Connections CFHS 2013

20 Meals and Messages CFHS 2010

21 Micro funding for work around older people, health and wellbeing. What are we learning? CFHS 2013

Community-based and voluntary organisations supporting individuals in relation to their mental health and wellbeing also have a long history of work using the medium of food. Research carried out by the Scottish Development Centre for Mental Health in 2010, which included gathering case studies from five different organisations, concluded that food can be linked to mental health and wellbeing in a number of ways;

- Diet and nutrition can affect mood and be both protective and preventative for positive mental health and recovery.
- The development of food skills can provide the tools to improve diet and nutrition and also impact on people's self-esteem, confidence and overall wellbeing.

- Food preparation and meals can be social events that promote a sense of belonging, family and community ties and overall inclusion.
- Involvement in growing food can have a positive effect on mental health by promoting relaxation and physical activity, as well as developing new skills.
- Skills developed through food work can often be a jumping-off point for moving into volunteering or paid employment, both of which play an important role in mental health and wellbeing.²²



22 Food mental health and wellbeing. CFHS and SDCMH 2010 www.communityfoodandhealth.org.uk

Maximising potential



Community food initiatives working in geographical communities and community-based organisations working with communities of interest or identity that include an element of work on food, can all play an important role in building reach into efforts to address health inequalities at both a national and local level. Neither may be sufficient alone and to obtain maximum impact both may be required, with a clear focus on social justice and those communities most likely to be impacted by health inequalities.

In order to do this, organisations require access to skills. This can often be the skills that volunteers bring or develop as a result of being involved with a particular organisation. It can also be the skills that paid workers provide in terms of day to day running and management of initiatives. It can also be the skill of intermediaries that appear to be important in building the links between national food projects and more disadvantaged communities.

Organisations also need access to resources. In some areas it is recognised that core resources are important to provide a baseline from which initiatives can build their work. Core resources are ideally provided for the longer term although in the current financial climate this is increasingly difficult to guarantee.

What appears, however, to distinguish those organisations that are successful in building reach from those that are not so successful, are the values and principles on which they build their work. These include a commitment to promote social justice and participation, to actively challenge discrimination and to work in ways that promote inclusion. In many ways this echoes the conclusion of the Independent Expert Panel on community development that states, 'The role of community development is to support individuals and community organisations to reflect upon and articulate their needs and to take practical collective action on both the immediate and underlying issues they face. It works with communities of place, interest and identity, enabling diverse and competing community voices to be heard. By addressing issues of power, inequality and social justice, it aims to bring about change that is empowering, fair and inclusive.'²³

23 Independent Expert Panel on Community Development. Final report and Findings. CDF 2010

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

ISBN 978-1-907237-36-2

